

Welcome!

We will get started promptly at 12 noon.





Early Identification of Sepsis

Name: Gloria Thorington & Melanie Ronda

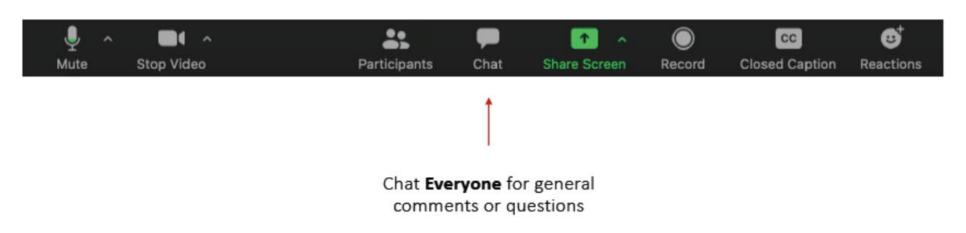
Date: February 24th & March 2nd



Use Chat to introduce yourself & ask questions

How to use Zoom

At the bottom of your screen, you will see a black bar with icons:





Welcome!

- Today's session is being recorded
- Although we want active participation, we ask that you please keep yourself on 'mute' during the presentation
- Please introduce yourself (name, organization & role, location) using the Chat feature



The IPRO QIN-QIO

The IPRO QIN-QIO

- A federally-funded Medicare Quality Innovation Network – Quality Improvement Organization (QIN-QIO) in contract with the Centers for Medicare & Medicaid Services (CMS)
- 12 regional CMS QIN-QIOs nationally

IPRO:

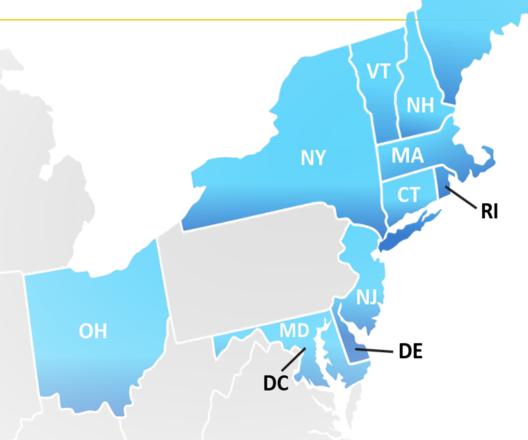
New York, New Jersey, and Ohio

Healthcentric Advisors:

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Qlarant:

Maryland, Delaware, and the District of Columbia



Working to ensure high-quality, safe healthcare for **20% of the nation's Medicare FFS beneficiaries**



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ME

IPRO QIN-QIO small Talk series January-June 2022

Our *small Talks* are short, impactful presentations designed to meet your needs during this uniquely challenging time.

Two different topics will be presented on a monthly basis and each **small Talk** will:



Consider a **challenge**Identify **interventions**Guide you to a specific **result** or outcome





Early Identification of Sepsis

Name: Gloria Thorington & Melanie Ronda

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Quick Overview



- Challenge: Sepsis is the #1 reason for 30-day readmissions, and diagnosis is often missed by healthcare providers and members of the community.
- 2 Intervention: Instituting processes that provide early identification of sepsis.

Result: Early identification and appropriate treatment is critical to preventing sepsis mortality and morbidity and reducing healthcare costs.



Challenge

Sepsis is the top diagnoses for 30-day readmissions, and is often missed by healthcare providers and members of the community.







Why Sepsis Matters?

Sepsis is a life-threatening condition that arises when the body's response to an infection injures its own tissues and organs

- > 87% of sepsis cases originate in the community¹
- Sepsis kills 270,000 Americans annually²
- At least 1.7 million adults in American will develop sepsis each year³
- Sepsis mortality is largely preventable_ with early detection and appropriate treatment
- Only 58% of U.S. adults have heard of sepsis



Every Minute Counts!

- Sepsis is treatable and can be prevented from progressing to septic shock...BUT it must first be suspected!
- Early, prompt recognition and treatment improves survival rates
 - Decreases morbidity and mortality related to sepsis
 - Avoid long term health-related complications
 - Potentially avoiding sepsis-related hospitalizations
- For every hour that appropriate treatment is delayed the risk of death increases by 7.6%

TREAT SEPSIS AS A MEDICAL EMERGENCY



** NOTIFY PHYSICIAN immediately if a patient EXHIBITS THE SIGNS OF SEPSIS**



Sepsis and Infection

- Sepsis is always triggered by an infection
- Sometimes people don't know they have an infection
- Sometimes the causative agent of the infection is not identified
- Sepsis diagnosis is sometimes missed due to various manifestations of sepsis
- Conversely: If symptoms of sepsis exist, a source of infection should be sought



Who is at Risk?

Anyone with an infection!

- Those at *higher risk* for developing sepsis include:
 - People 65 or older
 - Infants less than 1 year old
 - People with chronic illnesses: diabetes, cancer, AIDS
 - People with weakened immune systems
 - People recently hospitalized
 - People recovering from surgery
 - People who have had sepsis in the past



Common Infectious Diseases That May Progress to Sepsis

- Pneumonia
- Skin Infections (cellulitis)
- Urinary Tract Infections
- Post-partum Endometritis
- Influenza
- Clostridium difficile (C.diff) Enteritis
- Tick-borne Infections especially in the immunocompromised
- COVID-19





Special Considerations for the Elderly

- Urinary tract infections (UTIs) are a common source of sepsis
 - Elderly are more at risk for UTIs
 - Especially those with indwelling urinary catheters
 - UTI symptoms can differ from those of younger people
 - Confusion
 - Agitation
 - Poor motor skills or dizziness
 - Falling
 - Other behavioral changes
- UTIs in elderly are often mistaken for early dementia or Alzheimer's Disease (NIH)



Early Signs of Sepsis

Sepsis always develops from a confirmed or suspected infection with more than one of the following:

- Fever, shivering, feeling very cold
- Cool extremities or mottling of skin
- Rapid heart rate
- Rapid breathing
- Shortness of breath
- Confusion or difficult to arouse
- Complaints of extreme pain
- Pale/discolored skin
- Clammy sweaty skin

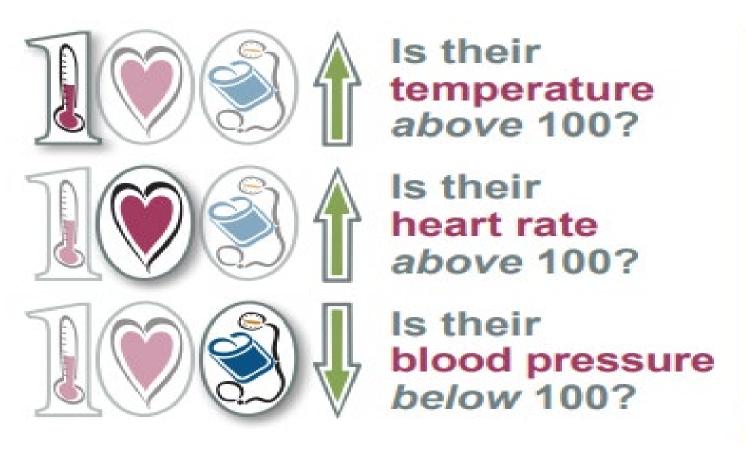


Other Early Signs May Include...

- Decreased blood pressure
 - (SBP <90mmHg or SBP decrease>40mmHg)
- Signs of altered mental status
- Decreased urine output / dark, concentrated urine
- Abnormal lab tests
 - Increased lactate level
 - Increased creatinine
 - Decreased platelet count
 - Coagulation abnormalities
 - Hyperglycemia in absence of diabetes



Interventions: 100-100-100 Early Detection Tool

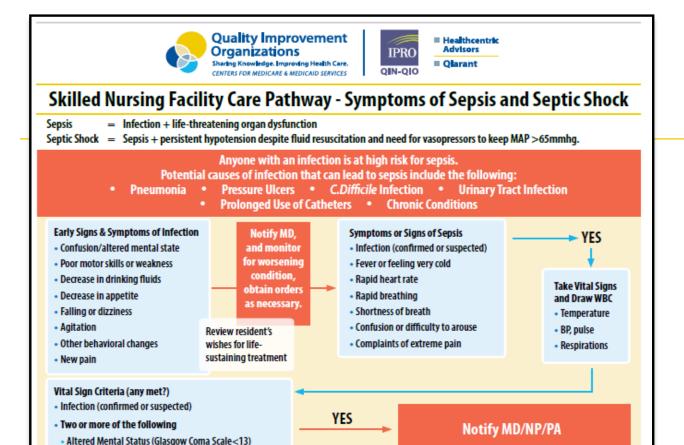


And does the resident just not look right? Tell the nurse, screen for sepsis and notify the physician immediately.

Minnesota Hospital Association

Resources and details: <a href="https://www.mnhospitals.org/quality-patient-safety/quality-safety/quality-s





Evaluate Results

>10% bands

Order

Tests

Lactate > 2mm/L

Platelets < 100.000

Bilirubin >2mg/dL

NO -

WBC > 12.000 or < 4.000 or

Serum Creatinine > 2.0mg/dL

Hyperglycemia (not diabetic)

Monitor Response

Sepsis criteria met

Worsening condition

aPTT >60secs or INR > 1.5

Hypotension (systolic<100mmHq)

Blood cultures X2 (prior to antibiotics)

Monitor vital signs, fluid intake/urine output

Oral, IV or subcutaneous fluids if needed for hydration

Update advance care plan and directives if appropriate

Coagulation tests (aPTT/INR)

Serum Creatinine

Manage in Facility

Decreased urine output or darkened/concentrated urine

Consider Contacting MD/NP/PA for Orders (for further evaluation and management

Platelet count

Bilirubin

Urinalysis

Urine culture

Blood glucose

NO.

Tachypnea (RR>22)

Lactate

Sepsis Care Pathway

Symptoms of Sepsis and Septic Shock

https://qi.ipro.org/wp-content/uploads/12SOW-Sepsis-Care-Pathway-Final.pdf



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Talking with Patients, Residents & Families

- Start the discussion by asking if they have heard of sepsis (If they have, let them tell you what they know)
- Share key points about sepsis:
 - The body's overactive/often life-threatening response to an infection anywhere (skin, urine, respiratory etc.)
 - Anyone with an infection may be at risk for developing sepsis
 - Early signs and symptoms; fever/feeling cold, sleepy/confused, short of breath, rapid heart rate, decreased /dark urine
 - It's important that you let your caregiver know if you experience any of the above
 - Sepsis is a MEDICAL EMERGENCY!



Sepsis Zone Tool

- Patient information sheet to self-monitor for the early signs and symptoms of sepsis
- Provide to patients/residents that have either been diagnosed with an infection or are at high risk for developing an infection

Available in English & Spanish

https://qi.ipro.org/wp-content/uploads/12SOW-EarlySignsSymptoms-Sepsis v1.pdf English https://qi.ipro.org/wp-content/uploads/12SOW-Sepsis-Zone-Tool SPA v1.pdf Spanish

EARLY SIGNS AND SYMPTOMS OF SEPSIS



Has your healthcare provider diagnosed you with an INFECTION?
You could be at risk for SEPSIS. Know the signs!

What is Sepsis? Sepsis is your body's life-threatening response to an infection anywhere in your body. Anyone can get sepsis!

Signs and Symptoms of Sepsis

Watch for a combination of INFECTION and fever or feeling chilled, confusion/sleepiness, fast heart rate, fast breathing or shortness of breath, extreme pain and pale/discolored skin.

SEPSIS IS A MEDICAL EMERGENCY

GREEN Zone: ALL CLEAR - Feeling well

- No fever or feeling chilled
 - No fast heart rate
 - Easy breathing
- No increase in pain

RED Zone: Call your doctor or nurse immediately if you have INFECTION and...

Fever or feeling chilled

No confusion or sleepiness

- Confusion/sleepiness
 (recognized by others)
- Fast heart rate

- Fast breathing or shortness of breath
- Extreme pain
- Pale or discolored skin

If you are unable to reach your doctor or nurse,
CALL 911 OR HAVE SOMEONE TAKE YOU TO THE EMERGENCY DEPARTMENT.

Key Contacts:









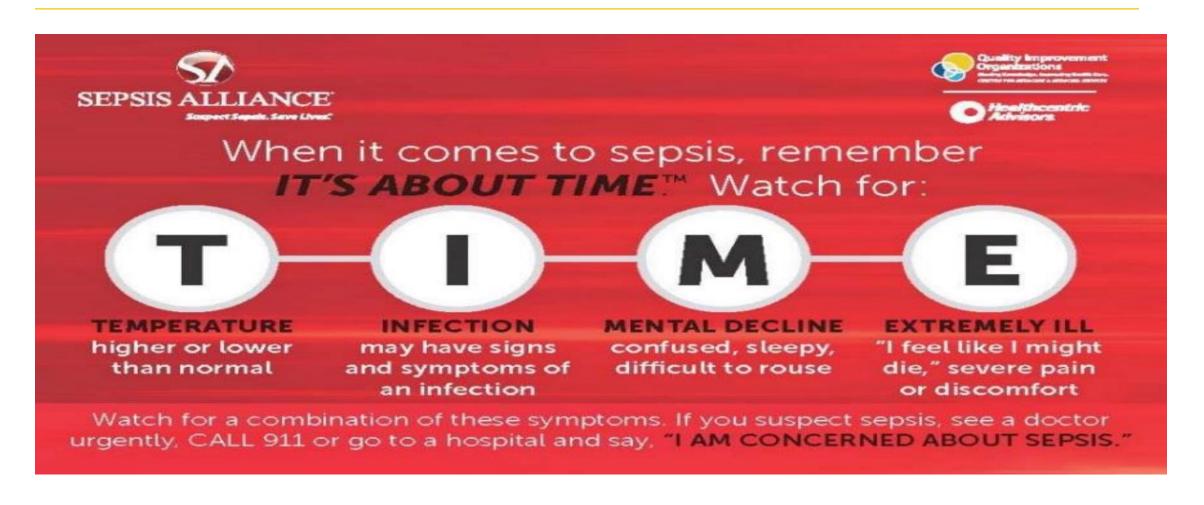
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This material was prepared by the IPRO QIN-QIO a collaboration of the Discentific Advisors, Qhankt and IPRO, serving as the Decisive Quality Innovation Network-Quality improvement Organization for the Kew England states, VERIA, CHIDE, MD, and the District of Columbia Linder Contract with the Centers for Indexise a Medicard Services (CNIC), an agency of the U.S. Decisive and Advision for the Contract of Columbia and the Contract of Columbia Contract and Con



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Interventions



What Can You Do



- Educate colleagues, patients, family and friends:
 - About the signs of sepsis and who is at risk
 - About need to seek immediate care and use the words "I suspect sepsis"
 - About how to prevent infections
 - With use of patient education materials (Sepsis Zone Tool) and Teach Back Method

- Take precautions to prevent infections and sepsis
- If you suspect sepsis- Act immediately and initiate care



Additional Resources

CDC "Get Ahead of Sepsis Campaign":
Hospital Toolkit for Adult Sepsis Surveillance

Sepsis Alliance

Rory Staunton Foundation

Best Practices in the Diagnosis and Treatment of Sepsis

IPRO Sepsis Initiative-Stop Sepsis Now -Zone Tool, Sepsis Care Pathway

Surviving Sepsis Campaign

Sepsis and Health Equity Fact Sheet



Our Challenge to You!

Select and implement one of today's recommended intervention tools within the next 30 days to support improved awareness of sepsis signs and symptoms for patients at risk for or who have sepsis.



Benefits of Boosters

Recent evidence shows that among healthcare and other frontline workers, COVID 19 vaccine effectiveness has decreased over time, especially in those 65 and older, at preventing infection or milder illness with symptoms.

- Boosters shots increase immune response
- Boosters shots provide improved protection against becoming infected with COVID-19
- Booster shots help prevent COVID-19 with symptoms

https://www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html





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Please unmute yourself or use the chat feature to share questions, ideas, success strategies, and/or lessons learned



Improvement is a Team Support



Leaving in Action

Tips for success:

Access these tools from the IPRO QIN-QIO Resource : https://qi.ipro.org/sepsis/

 Small steps of change: for example, start implementing the new process on one unit for two weeks, then evaluate and adjust as needed

Reach out to our IPRO QIN-QIO team with questions or needs



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Let Us Know More...



Your feedback is critically important and will help guide us as we prepare future Small Talks and other educational events.

Please take just a few minutes to complete our session evaluation (link is in chat).







Sepsis: Early Identification is a Cross Continuum

Opportunity: 3/2

Making Sense & Staying on Track: CMS Vaccine

Mandates - Nursing Homes: 3/10 & 3/16

Chronic Kidney Disease Awareness & Prevention Programs: 3/24 & 3/30

Health Equity at End-of-Life: Enhancing Access to Advance

Directives & Palliative Care: 4/7 & 4/13

Check in with the QIO - Office Hours

- Share how it's going with your new intervention(s)
- Ask questions
- Learn from your peers

Monthly Opportunity, next session: March 10 @ 12pm

Access our calendar of events to view upcoming

sessions:https://qi.ipro.org/upcoming-events/



Thank You

Thank you for your continued partnership and commitment to quality improvement.

