The Development of A Report Card for the Infectious Prevention Service Line (IPSL)

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BACKGROUND
- HEALTH SYSTEMS COMMONLY USE SERVICE LINES TO DESCRIBE ACTIVITY THAT DRIVES REVENUE AND PROFIT
- INFECTIOUS DISEASES ARE IMPORTANT HEALTH CONCERNS THAT HAVE MAJOR IMPACT ON HOSPITAL MARGINS AND HAVE GAINED INCREASED SCRUTINRY
- THE IDSL IS AN IMPORTANT VALUE BASED ACTIVITY THAT BRINGS BOTTOM LINE IMPROVEMENT THROUGH COST AND RISK REDUCTION RATHER THAN INCREASED PATIENT VOLUME.
- IT IS A HOSPITAL SYSTEM ACTIVITY THAT CROSSES SEVERAL DISCIPLINES AND FOR WHICH A SPECIFIC METHOD OF MEASUREMENT TO COMPARE PERFORMANCE TYPICAL OF A SERVICE HAS NOT BEEN DEVELOPED.
- WE HAVE DEVELOPED A REPORT CARD FOR THIS ACTIVITY AND PRESENT OUR 3 YEAR PERFORMANCE IN HOPE OF HELPING TO DEVELOP A STANDARD OF MEASURE.

OBJECTIVES
TO DEVELOP A EASY TO REVIEW MEASUREMENT TOOL FOR THE IDSL WHICH
1. PROVIDES A FRAMEWORK FOR COMPARISON ACROSS SYSTEMS
2. PROVIDES THE OPPORTUNITY TO BENCHMARK AND FOCUS IMPROVEMENT
3. PROVIDES LEADERS OF THIS TYPE OF ACTIVITY THE OPPORTUNITY TO ILLUSTRATE VALUE

METRIC DEVELOPMENT
SYSTEM BASED ACTIVITIES FOCUSED ON INFECTIOUS DISEASES WERE GROUPED INTO 4 CATEGORIES
A. RESOURCES MANAGEMENT (RM)
• Expense areas heavily influenced by team activities
• Included in report card – Antimicrobial agents, regulated medical waste
• Not included in report card - Microbiology laboratory utilities, device management
B. INFECTION PREVENTION & PATIENT SAFETY (IP/PS)
• Standard NHSN metrics
• Microbiology metrics for MDRO prevalence
• Hand hygiene performance
• Institutional Mortality
C. EMPLOYEE HEALTH (EH)
• Influenza vaccine rates
• Sharps injuries both as an absolute number and rate per 10,000 patient days
D. ANTIMICROBIAL STEWARDSHIP (AS)
• Days of Therapy (DOT) per Day of Risk (DAR) was chosen metric.
• Cost was followed as a resource metric not a stewardship metric

VALIDATIONS
BENCHMARKS WERE IDENTIFIED FOR THE KEY METRICS IN THE REPORT CARD
• IF A BENCHMARK COULD NOT BE IDENTIFIED IN THE LITERATURE INTERNAL BENCHMARKING FROM EARLIER YEARS WERE USED AS COMPARISONS
• HARM ASSESSMENT FOR INTERVENTIONS WERE EVALUATED BY MONITORING INSTITUTIONAL MORTALITY AS A GLOBAL MEASURE OF ADVERSE EFFECT FROM THE ACTIVITY

THE REPORT CARD

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RESULTS – SELECTED HIGHLIGHTS
• TRENDS AND RANDOM VARIATION ARE EASILY SEEN.
• DOT FOR THE 3-YEAR TIME PERIOD DECREASED FROM 492 TO 406/1000 DAR
• RM DEMONSTRATED AN INCREASE IN ANTIMICROBIAL COST AND DECREASED COST OF RMW.
• DESPITE DECLINES IN ANTIMICROBIAL UTILIZATION AND INCREASES IN CMI, MORTALITY RATES WERE UNCHANGED.

APPLICATION
- LABORATORY STEWARDSHIP MEASURES
- OUTBREAK MANAGEMENT ACTIVITIES
- BRAND AND IMAGE MEASURES FOR PATIENT SAFETY

CONCLUSIONS
- THE IDSL IS AN IMPORTANT SERVICE LINE IN A HEALTH SYSTEM. IT PROTECTS PATIENT SAFETY AND REDUCES COSTS
- ACTIVITIES OF THE TEAM FOCUSED ON INFECTIOUS DISEASES WITHIN A HEALTH SYSTEM CAN BE EASILY MEASURED AND BENCHMARKED IN REAL TIME RATHER THAN ABSTRACTED FROM AN ADMINISTRATIVE DATABASE
- MEASUREMENT IS ASSUMING A GREATER ROLE IN VALUING CONTRIBUTIONS OF PROVIDERS IN HEALTHCARE DELIVERY
- CREATING A NATIONAL STANDARD FOR THIS ACTIVITY TO PROVIDE A METHOD FOR INTER-FACILITY COMPARISON IS CRITICAL TO PERFORMANCE IMPROVEMENT
- FURTHER REFINEMENT, DEVELOPMENT, AND ADOPTION OF THIS REPORT CARD WILL BE NEEDED TO CREATE A STANDARD APPROACH TO VALUE MEASUREMENT

ACKNOWLEDGEMENTS
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