



# Taking Quality To Heart...

a community report on patient care quality

## Licking Memorial Health Systems

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At Licking Memorial Hospital, we take pride in the care we provide. And we want you to know why. Each month we're producing a community report card. In this report, we'll give you a more in depth look at our services, share care experiences and health advice, and show you how our quality indicators compare to industry standards.

You'll soon discover why Licking Memorial Hospital has made the nation's 100 Top Hospitals list for three consecutive years.

# Patient Safety...

## How do we compare?

1. A recent study indicated that patients are more concerned with the potential for medication mix-ups than any other hospitalization issue. Concern over receiving the wrong medication surpasses worries about developing a medical complication, getting an infection, suffering from pain or medical care costs.<sup>1</sup> It is estimated that as many as 98,000 people die in a year from medication errors that occur in hospitals. That's more than die from auto accidents, breast cancer or AIDS.<sup>2</sup>

% of Medication Errors	LMH <sup>3</sup>	National <sup>2</sup>
	.02%	.31%

Licking Memorial Hospital has dispensed more than 2,275,000 doses of medication so far this year.

**Quality Note:** The same study showed 3 out of 4 patients feel that speaking with a pharmacist in the hospital would help alleviate their medication concerns, yet most patients surveyed didn't realize hospital pharmacists are an integral part of the patient-care team.<sup>1</sup> The Licking Memorial Pharmacy has 15 pharmacists and 16 pharmacy technicians on staff. Licking Memorial's Community Case Management Department also employs a pharmacist who provides consultation and education services for patients with chronic illnesses.

2. Providing adequate nurse staffing is one way to ensure patients receive timely, appropriate care. Insufficient staffing has been known to lead to mistakes and oversights in patient care. One way the healthcare industry monitors its staffing is by looking at the number of positions that are vacant at any given point in time.

Vacancy Rate for Nurses	LMH Avg. <sup>4</sup>	Central Ohio Avg. <sup>5</sup>
	8%	10%

**Quality Note:** To help ensure LMH maintains adequate staffing, it implemented a highly competitive pay program for R.N.s in May that rivals the Columbus market. The program has greatly contributed to the hospital's ability to keep its R.N. vacancy rate below average.

3. A patient safety indicator commonly measured by hospitals is the number of patient falls occurring within the hospital setting. Falls can be due to the patient's health status, a response to medication or treatment, or an environmental hazard.

% of patient falls per 100 patient days	LMH <sup>3</sup>	National <sup>6</sup>
	.43%	.36%

**Quality Note:** Licking Memorial Hospital's Patient Safety Committee has chosen three initiatives for 2001: reducing patient falls, improving the accuracy of registration information and eliminating medication errors.

4. Due to the severity of illness and injury treated in a hospital setting, it is expected that there will be a certain number of patient deaths. Healthcare organizations compare their mortality rates to those of other hospitals to make sure their rates are in alignment.

Mortality rates	LMH <sup>3</sup>	National <sup>6</sup>
	1.47%	2.42%

5. An important part of keeping patients safe is to make sure they are sent home at the appropriate time with the appropriate resources. While it is sometimes unavoidable, patients return to the hospital for the same condition within a relatively short timeframe. Hospitals carefully watch their returns to the emergency department and readmission rates to the hospital to make sure patients are receiving sufficient hospital care and that hospital-to-home transitions are as seamless as possible.

	LMH <sup>3</sup>	National <sup>6</sup>
% of patients with unexpected returns to E.D. within 24 hours of E.D. discharge	1.17%	.81%
% of patients with unscheduled readmissions to hospital within 31 days of discharge	6.7%	4.08%

The three most common reasons patients have returned to the E.D. this year are headaches, gastroenteritis and nosebleeds. The three most common reasons patients have been readmitted to the hospital are congestive heart failure and shock, chronic obstructive pulmonary disease (COPD) and pneumonia.

6. Protecting patients from hospital-acquired or "nosocomial" infections is a primary patient safety goal. Licking Memorial Hospital uses methods established by the Centers for Disease Control (CDC) to measure its infection rates. The CDC recommends that infection rates be tracked for patient groups who tend to be at-risk for infection. Per CDC recommendations, LMH tracks high-risk patients, in particular those with an increased exposure to infection due to the presence of an invasive device, such as a ventilator, catheter or central venous line.

	LMH <sup>7</sup>	National <sup>8</sup>
Infection rates for ventilator patients	8.9	10.3
Infection rates for patients with urinary catheters	4.0	4.5
Infection rates for patients with a central venous catheter	5.8	4.1

7. The Joint Commission on Accreditation of Healthcare Organizations will be looking at the safety of self-infusion medication pumps during its 2001 visits to hospitals throughout the country. The JCAHO's concern is that mishaps involving the use of infusion pumps have led to deaths and near-fatal drug overdoses. To prevent accidents from infusion pumps, the JCAHO recommends all hospitals use pumps that have a built-in protection against the free-flow of a drug and to have high-risk medications, like chemotherapy, doubled checked by a nurse before the pump is started.

	LMH	JCAHO Recommendation
% of pumps with built-in free flow protection	100%	100%
% of chemotherapy pump medication double checked	100%	100%

8. In February of 2000, LMH began formally tracking adverse effects patients may experience as a result of conscious sedation. Conscious sedation is when a patient has a reduced sense of consciousness, but can still respond to certain stimuli. An adverse event is defined as a breathing complication, a heart complication, an over sedation, death or some other unintended or unplanned event.

# of adverse patient events due to conscious sedation	LMH Total	LMH Goal
	0	0

9. On December 11, Licking Memorial Hospital was named a 100 Top Hospital in the nation for the third consecutive year. The 100 Top Hospitals were determined by evaluating the performance of acute care hospitals on seven objective measures. Data is taken from reports that more than 6000 hospitals submit annually to the federal government. There were 1,130 hospitals in LMH's peer group of medium-size hospitals (100-249 beds). There were 20 benchmark hospitals chosen in their size category. Two of the measures examined are patient mortality<sup>9</sup> and patient complications<sup>10</sup>.

	LMH	Benchmark Hospitals	Peer Group
Risk-adjusted mortality index	.9	.79	1.0
Risk-adjusted complication index	.5	.54	.67

**Quality Note:** Benchmark hospitals - winners in the medium-size hospital category - had a lower mortality index (21% less) than those hospitals in their peer group - other hospitals in their size category. Benchmark hospitals had a lower complication index (19% less) than those hospitals in their peer group.

1. Study conducted by the American Society of Health-System Pharmacists (ASHP), 1999.  
 2. To Err is Human - Building a Safer Health System, National Academy Press, Washington D.C., 2000.  
 3. Year-to-date LMH patient data for LMH patients, January - October, 2000.  
 4. LMH nurse vacancy rate for most recent quarter, October-December, 2000.  
 5. Business First, October 13, 2000, Franklin: Decline may be attributed to strong economy. Ohio Nurses Association.  
 6. National data is based on a study of healthcare facilities for 2nd quarter of 2000 (April-June) by the MHA: The Association of Maryland Hospitals and Health Systems. Depending on the indicator, the number of participants ranges from 306-648.  
 7. Year-to-date LMH Intensive Care patient data, January - October, 2000 for ventilator and urinary catheter data. Central venous line data is based on studies from January, 1999 - February, 2000 and July, 2000 - October, 2000.  
 8. National Nosocomial Infections Surveillance System (NNIS), a program of the Centers for Disease Control (CDC). Data is a pooled mean based on infections per 1000 patient days for Intensive Care patients from January, 1992 - May, 1999.  
 9. 100 Top Hospitals study, 2000, HCIA-Sachs. Data is based on the number of actual deaths in 1998 and 1999 divided by the number expected, given the risk of death for each patient.  
 10. 100 Top Hospitals study, 2000, HCIA-Sachs. Data is based on the number of cases with complications in 1998 and 1999 divided by the number expected, given the risk of complication for each patient.

## SUCCESS STORY

### Putting patient safety first...

For Kimberly Friend, just being in a healthcare setting can pose a serious health risk.

Kimberly suffers from latex allergies. When she encounters the commonly used plastic product, her throat can swell to the point it closes off her air supply. Aside from some minor inconveniences, her daily life goes uninterrupted - except when she needs medical service.

Because latex is so prominent in healthcare settings, Kimberly has to take special precautions in order to be safe. This is why special planning was required for her maternity delivery November 7.

The LMH maternity team was alerted in advance and took measures to ensure her patient safety. Special gloves, tubing, needles, surgical supplies and even patient identification band had to be latex-free.

"They did an excellent job," Kimberly reflected. "They knew I was coming and they were ready for me. I didn't have one problem the entire time I was in the hospital."

Because of the potential health hazards a healthcare organization can present, it is surprising Kimberly has worked in one for the past 14 years. A nursing assistant, she works in a nursing home and is going to nursing school part-time.

"I have to be more conscientious, but I can't give it up," she says of her work. "If I'm able to get a smile out of an older person who is depressed, that's enough for me."



Kimberly Friend with son Christian

*"If someone is not paying attention, I could die."*  
 - Kimberly Friend

### LMH Dedicated to Improve Patient Safety

LMH has taken several major steps in recent months to improve patient safety at our local healthcare facility.

In October of this year, the Voluntary Hospitals of America (VHA), a national network of not-for-profit healthcare organizations, launched a patient safety initiative called Building Systems that Do No Harm: Advancing Patient Safety through Partnerships and Shared Knowledge. Licking Memorial Hospital is a participant in this one-year program that will involve formal training and information sharing among healthcare organizations on ways to increase patient safety.

LMH also established a Patient Safety Committee in October to address ongoing patient safety issues. The team has chosen three initiatives to focus on in 2001: reducing patient falls, improving the accuracy of registration information and eliminating medication errors.

A comprehensive patient safety plan was developed and approved by both the Licking Memorial Hospital Board and the Licking Memorial Health Systems Board on November 15.

All 1300 LMHS employees will attend a formal education program on patient safety in January. In addition, patient safety responsibilities have been added to every job description.

### Special Focus on Medication Errors ...

While LMH has a low medication error rate compared to most hospitals, it has set its sights on an even lower rate.

This year LMH installed an automated medication dispensing system called Pyxis that uses thumbprint technology to identify care providers. LMH was one of five hospitals in the nation to first purchase the thumbprint technology. Pyxis units are located on each patient unit and speed up the response time to patients. The next phase of Pyxis will involve automated physician medication ordering that will eliminate errors often resulting from the misinterpretation of handwritten orders.

In addition, LMH is participating in a VHA program on medication error reduction with 12 different hospitals in the Midwest. The focus is on heparin and insulin administration.

Visit [www.lmhealth.org](http://www.lmhealth.org) to review other LMHS quality report cards. Also, if you have a suggestion on how we can improve our care, please call our Performance Improvement Line, 348-4641.