

# Healthcare Quality Watch

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NEWS BRIEFS FOR  
MANAGERS AND  
OPINION LEADERS



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## IPRO Pharmacy Team Creates Drug Audit Tool

Pharmacy quality improvement experts at IPRO have created and field tested a unique audit tool aimed at reducing anti-coagulant-related adverse drug events (ADEs) during care transitions. National estimates suggest that ADEs account for 700,000 emergency department visits and 120,000 hospitalizations annually, and The Department of Health and Human Services' recently released National Action Plan for Adverse Drug Event Prevention identifies anticoagulant medications as a major contributor to preventable ADEs. IPRO's Anticoagulation Discharge Communication tool (or "AC-DC" tool) evaluates the communication of 17 essential anticoagulation-related information elements to "downstream" healthcare providers upon patient discharge and transfer, highlighting potential system flaws and guiding improvements in communications. According to IPRO pharmacist and tool developer Anne Myrka: "the failure to effectively communicate critical elements such as when the next dose of an anticoagulant is due or when it should be discontinued can result in significant patient harm, and even death." Because the tool is not specific to any single drug product or care setting, it can evaluate clinical communications relating to all currently available anticoagulants as well as newly marketed agents as they arrive, states Myrka. Preliminary field testing has been remarkably productive. The tool's simplicity lends itself to rapid-cycle evaluations, speeding quality improvement efforts. The availability of the audit tool is welcomed by national leaders in anticoagulation safety. According to Dr. Jack Ansell, Professor of Medicine at Hofstra North Shore-LIJ School of Medicine: "the IPRO team's effort constitutes an excellent example of a care transition management tool that shows substantial promise in reducing anti-coagulant-related adverse drug events." The AC-DC tool is presently available at [www.ipro.org](http://www.ipro.org) and preliminary results of field testing will be presented at a number of scientific conferences in coming months.

## NYS Launches Improved Website

The New York State Department of Health has announced the launch of the redesigned New York State Health Profiles website. The New York State Health Profiles (<http://profiles.health.ny.gov>), which is maintained within the State Health Department's public website, is a consumer-oriented portal providing centralized access to health care information in four areas: hospitals; nursing homes; home health agencies and hospice programs; and physicians. Users can view details about the quality of care and inspections at health facilities and compare them to national and statewide averages. This information can help inform consumers' health care decisions. "The redesigned Health Profiles help consumers make informed health care decisions by giving them valuable health care provider data across a range of key areas," said Howard Zucker, MD, Acting Commissioner of Health. "This information serves to empower consumers and contributes to our efforts to continuously improve quality of care across the state." New York State Health Profiles are among the most-visited areas of the Department's public website (<http://www.health.ny.gov/>). Changes to the Health Profiles represent a significant enhancement of the existing website. Key improvements in the redesign include: centralized access to all profiles in a single, easily accessible location; modernized access using updated technology; and improved usability for consumers, including an ability to search for and compare quality measures across facilities in a given region. The initial launch includes the fully redesigned hospital profile, enabling consumers to search for hospitals and clinics by county or region, service, designation (i.e., perinatal, trauma, stroke centers), and more. The nursing homes, home health agencies and hospice programs sections of the Health Profiles portal will be similarly modernized in the near future. The Profiles home page will continue to link to these existing profiles until development in those areas has been completed. All

programming for the redesigned Profiles website was undertaken by IPRO's eServices group, which has been supporting NYSDOH's public reporting initiatives since 2006.

### **New York Announces Open-Data Challenge Winners**

The New York State Department of Health has announced the winners of its inaugural New York State Health Innovation Challenge, a four-month contest among tech companies vying to create the most useful technological tool to help consumers make sense of health data. The contest is a public-private partnership that builds upon New York's open data initiative-- multidisciplinary teams of coders and developers were invited to create tech-based solutions to help consumers access useful information about the quality, cost, and efficiency of health care services. Earning first place honors and \$30,000 is DocSpot, a website which seeks to simplify consumers' decision making by weaving numerous publicly available data sets into one unified interface. Lauded by the judges for its clarity and simplicity, DocSpot utilizes data from Health Data NY, Data.Medicare.gov, state medical boards, hospital and clinic physician directories, and reviews from the web, giving users the ability to compare providers using a variety of metrics. Taking home the \$10,000 second place prize was HealthRank. This application enables patients to manage their own care by providing them with the ability to prioritize among cost, quality, and access on a five-point scale from 'Not Important' to 'Very Important.' The \$3,000 third place prize was awarded to NaviNet which utilizes Google Maps to pinpoint hospitals that treat a particular condition or provide a specific service. The New York State Health Innovation Challenge was a collaboration of the New York State Health Foundation, Health Research Incorporated, New York State Department of Health and New York State Office of Information Technology Services, with funding provided by the Robert Wood Johnson Foundation. All of the winning presentations have been posted to [www.health2con.com](http://www.health2con.com).

### **Hospital Readmissions Report Targets Communications**

Discrepancies between what providers believe they're communicating and what patients actually understand can contribute to avoidable readmissions to acute care hospitals, according to a new report from the Manhattan-based United Hospital Fund (UHF). Seven New York City-area hospitals participated in a process improvement project, which included chart reviews, interviews with readmitted patients and family caregivers, and structured discussions with physicians. A summary of lessons learned identified specific interventions as valuable, including educating hospital staff on how to improve communications and then developing a communication measurement program; including family caregivers in interdisciplinary rounds; individualizing discharged education, via medication management teach-back techniques and assuring that clinicians make use of electronic health record enhancements, such as clinical alerts. *Reducing Hospital Readmissions: Lessons from a Multi-Hospital Initiative*, is available free-of-charge by download at [www.uhfnyc.org](http://www.uhfnyc.org).

### **Feds Cite Reductions in Antipsychotic Medications**

The use of antipsychotic medication among long-stay nursing home residents in the U.S. fell by 17.1 percent over a recent 21-month period, beating a national goal of a 15.1 percent reduction, according to the Centers for Medicare & Medicaid Services (CMS). The target was set by the National Partnership to Improve Dementia Care, which CMS created along with advocacy organizations and trade associations like the American Health Care Association and LeadingAge. States with the highest levels of reduction included Hawaii (31.4 percent), North Carolina (29.9 percent)

and Vermont (28.2 percent). New York's reduction was 15.4 percent. The Partnership has set goals of a 25 percent reduction by the end of 2015 and a 30 percent reduction by the end of 2016. CMS and partners are reviewing a number of interventions to help meet goals including focused dementia health and safety surveys, close review of surveyor findings to isolate trends, additional public reporting of dementia care findings, national education sessions and support for state-based coalitions. CMS also notes that Quality Improvement Organizations (QIOs) like IPRO have been tasked with providing technical assistance aimed at reducing the use of these medications in their five-year Medicare contracts that began August 1. For more information on the Partnership, visit [www.cms.gov](http://www.cms.gov). For more information on IPRO's work in this area, visit [www.atlanticquality.org](http://www.atlanticquality.org).

### **Feds to Publish Dialysis Center Ratings**

Starting in January, the federal government will publish star ratings of dialysis facilities, in a similar fashion to the rankings now available on nursing homes and physicians. The ratings to be included on the Dialysis Facility Compare site, which is operated by the Centers for Medicare & Medicaid Services (CMS), are based on 9 of eleven dialysis facility quality measures that are already publicly reported. These address such issues as mortality, hospitalization, and transfusion ratios, the adequacy of adult and pediatric hemodialysis, the percentage of patients with hypercalcemia and the percentage of adult dialysis patients receiving treatments via arteriovenous fistulas. The star ratings roll-out was delayed due to stakeholder concerns; the release scheduled for January will take place after a 15 day period that providers will have to review findings prior to public release. CMS says the star rating initiative will help consumers make better decisions, follows trend toward a more transparent health system, responds to calls for more quality performance information and provides more "consumer-centric content" in keeping with the Administration's digital information strategy. To access the strategy, visit [www.whitehouse.gov/sites/default/files/omb/egov/digital-government/digital-government.html](http://www.whitehouse.gov/sites/default/files/omb/egov/digital-government/digital-government.html).

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We welcome your comments and suggestions. Please forward them to the Editor, Spencer Vibbert, at [svibbert@ipro.org](mailto:svibbert@ipro.org).

IPRO, 1979 Marcus Avenue, Lake Success, NY 11042

[www.ipro.org](http://www.ipro.org)

IPRO is a national organization providing a full spectrum of healthcare assessment and improvement services that foster more efficient use of resources and enhance healthcare quality to achieve better patient outcomes. For 30 years, IPRO has been highly regarded for the independence of its approach, the depth of its knowledge and experience, and the integrity of its programs. IPRO holds contracts with federal, state and local government agencies and corporate clients, in more than 33 states and the District of Columbia. A not-for-profit organization, IPRO is headquartered in Lake Success, NY.