

Sepsis Spotlight

Saving Lives through Increased Awareness

2018 Issue 3

IMPORTANT NEWS HIGHLIGHTS FOR HEALTHCARE STAKEHOLDERS

IPRO Launches New Sepsis Campaign



IPRO's current Community-Based Sepsis Special Innovation Project (SIP) has focused on spreading awareness of sepsis to community-based healthcare providers and the public. A major component of this community-based

initiative has been to provide sepsis education for both clinical and non-clinical staff in healthcare settings that include skilled nursing facilities, home health agencies, primary care physicians' offices and dialysis centers. Educational efforts for the initiative use a train-the-trainer model. A key message that is emphasized at every training session and every community-based educational event is that sepsis is a medical emergency requiring rapid administration of fluids and an antimicrobial agent (usually antibiotics).

Over the past several years, there has been a growing concern about the overuse and inappropriate use of antibiotics, both inside and outside of hospitals, and the impact this has had on creating drug-resistant bacteria. Therefore, it was not surprising that at nearly every training session and community-based event someone questioned the recommendation for rapid administration of antibiotics when sepsis is suspected.

The response to this question always required reinforcement of the concept that prompt administration of antibiotics in the presence of, or suspicion of, sepsis and the prudent use of antibiotics (antibiotic stewardship) are not conflicting strategies. There should be no confusion or misconception that antibiotic therapy is needed for bacterial infections to prevent progression to sepsis and septic shock.

This frequent discussion prompted development of a new campaign: **"Sepsis and Antibiotics...What You Need to Know."** This campaign provides a great opportunity to educate people, not only about sepsis, but also about the important role antibiotics play in preventing infections from progressing to sepsis and improving survival rates and patient outcomes.



IPRO Community Advisory Panel (CAP) Formed

In June 2017, IPRO began participating in a six-month program facilitated by Patient and Family Centered Care (PFCC) Partners Gateways Collaborative to engage community members in guiding healthcare initiatives. The goal of the collaborative is to design and grow a sustainable patient and family advisory council.

Through the collaborative, IPRO has worked to create a Community Advisory Panel (CAP) that informs our efforts
continues...

Albany IPRO Community Advisory Panel

*Top left to right: Benjamin Baskin, Joe Caruso and Sara Butterfield
Bottom left to right: Mary Forman, Eve Bankert, and Beth van Bladel*

IPRO Community Advisory Panel, continued

to create meaningful and engaging patient-focused educational materials. Providing the voice of the patient/family/community, the CAP will represent the multi-cultural and diverse population of New York State.

Directing the development of the CAP, the Steering Committee includes IPRO staff from the Lake Success corporate office on Long Island (downstate) and the Albany Regional office (upstate). CAP activities are led by Janice Hidalgo (downstate) and Eve Bankert (upstate).

During the fall of 2017 IPRO convened an initial group of CAP members. This team of energetic and creative volunteers represent diverse professional and personal backgrounds and have expressed interest in supporting and improving IPRO's healthcare initiatives. Current activities focus on creation of community based materials for a new IPRO sepsis campaign "Sepsis and Antibiotics... What You Need to Know." The new campaign will be designed to run in tandem with the existing IPRO campaign "Sepsis: Every Minute Counts."

IPRO is still recruiting CAP members, so if you are interested in learning more about the IPRO CAP, or becoming a member of the team, please contact Eve Bankert at eve.bankert@area-i.hcqis.org for Application and Referral forms.



How Much Do You Know About Sepsis?
Take the quiz!

<https://redcap.ipro.org/surveys/index.php?s=CCRXNYF3KH>

1. Sepsis is...
2. What percentage of sepsis cases originate in the community?
3. Sepsis is always the result of?
4. High risk populations for developing sepsis include all except:
5. Death from sepsis increases by ___% for every hour that treatment is delayed
6. The initial treatment for sepsis includes?
7. Preventive measure(s) for sepsis?

The quiz is for educational purposes only; quiz results are not tracked after submission

See last page for answers.

National View on Sepsis

Regional Sepsis Training and Cross-Continuum Sessions Launched Across NYS!

Home Care, Hospitals, Physicians, EMS, Health Plans, et al, should register and participate!

The Home Care Association of New York State (HCA), IPRO, and national sepsis leaders Sepsis Alliance and the Rory Staunton Foundation for Sepsis Prevention have together launched a series of regional sepsis training and cross-continuum coordination sessions across New York State. The sessions supported by the New York State Health Foundation and a NYHealth grant awarded to HCA to promote statewide provider training, adoption and use of HCA's innovative sepsis screening tool and protocol through the home health system. **Home care agencies and All Continuum Partners (hospitals, physician practices, EMS, health plans, et al) are urged to participate in these sessions!**

The project team (comprising of HCA, IPRO, Sepsis Alliance, Rory Staunton Foundation and HCA sepsis clinical leader Amy

Bowerman of Senior Network Health, and joined by Sepsis Survivor Joseph Caruso) conducted the first, two of the eight-planned regional sepsis sessions on December 15 and 18 in Central New York and Western New York, respectively. The sessions were extremely positive and generated excellent insights and recommendations throughout, including areas and opportunities for advancing sepsis work across the continuum.

The next sessions are planned this month for the broader Capital/Northern NY and Northern Metropolitan/Lower Hudson Valley regions, and for each successive month and region through March, covering all of the state's regions.

The sessions include both clinical training on the new tool and cross-continuum coordination and planning. The curriculum covers:

- Intensive background on sepsis, and its implications for people, the system, and state/federal/patient health goals.
- Detailed presentation, education and training on the HCA

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National View on Sepsis

screening tool, algorithm, protocol and patient education tool – including both large and small group case application and exercises using the tool, with follow-up discussion – FAQs, and other.

- Guidance on provider adoption of the tool and integration into policies, procedures and electronic health records.
- Coordination across continuum partners – home care, hospital, EMS, physician, health plan etc. – with discussion led by panelists from each sector.
- Sepsis tool data collection, reporting and analysis.
- Patient/public outreach and education.
- Follow-up steps both internally and across continuum partners.
- And other.

Home care, hospital, EMS and physician partners all reinforced the tool's importance, and offered comments like:

- "This (tool) is exactly what is needed."
- "We are ecstatic over this initiative."
- "Although I'm the sepsis coordinator for my hospital, I never before fully realized before this session the community prevalence of sepsis or its overall impact on the health care system."
- "This is one the best training programs I've ever attended."
- "I will discuss with our state regulatory agency permission to also implement this tool (in our community residential facilities for persons with developmental and intellectual disabilities).



Buffalo, NY: Amy Bowerman, RN teaches home care providers about the HCA Adult Sepsis Screening tool.

Further background, details and registration information can be viewed at:

<http://stopsepsisathomeny.org/wp-content/uploads/2017/12/Regional-Sepsis-Training-and-Cross-Sector-Session-Brochure.pdf>

HCA acknowledges with great appreciation the support of the NYS Health Foundation, the core project partners, and the tremendous steering committee supporting this project:

<http://stopsepsisathomeny.org/partners/meet-our-project-committee/>

Visit HCA's "Stop Sepsis At Home New York" website



(<http://stopsepsisathomeny.org/>) created by HCA in coordination with a website developer to serve as a host site for the sepsis initiative. While the site is currently continuing its buildup of our content and resources, the site is providing a host location for basic information on the new sepsis tool, the regional sessions and links to the initiative partners and key sepsis leaders (Sepsis Alliance, Rory Staunton Foundation for Sepsis Prevention, IPRO, CDC, and others).



Al Cardillo, Executive VP of The Home Care Association of New York State, talks to Buffalo home care providers and partners at a Regional Training Session promoting cross-continuum coordination of sepsis education.

National View on Sepsis

THE RORY STAUNTON FOUNDATION

The Rory Staunton Foundation was founded following the death of my 12-year-old son, Rory Staunton, from sepsis. Rory fell playing basketball in school and grazed his elbow. Unbeknownst to us, Rory's gym teacher applied a Band-Aid without cleaning the cut, thereby allowing bacteria to enter Rory's bloodstream. Rory fell sick with all the classic signs of sepsis just hours after his fall. We brought him to his pediatrician and to our local hospital multiple times in the days that followed but no medical professional diagnosed his septic condition and no one made the connection between his cut and his illness. *Four days after grazing his arm, Rory died in the intensive care unit of a New York City hospital.*

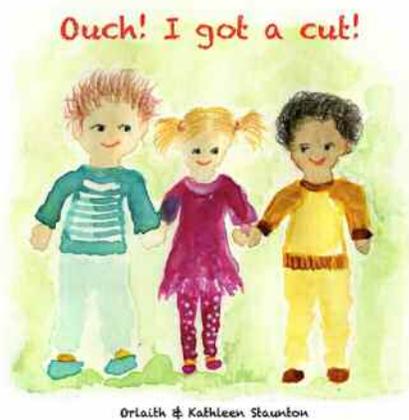
Since its inception, the Foundation has worked diligently to cast a national and international spotlight on sepsis awareness. Like many, I had never heard the word sepsis before my son's death.

The anger and frustration of knowing that a loved one can die from something completely preventable and curable is a lifelong sentence and one that my family and I have vowed to prevent happening to any other family.

Throughout 2017, the Foundation worked with the New York State Senate and Assembly and with the New York Department of Education to develop a law providing sepsis education to all New York State School Children in grades K-12. *Rory Staunton's Law, signed by Governor Andrew Cuomo in November 2017*, guarantees access to sepsis curriculum for over 3 million New York school children. The curriculum is available through the [New York State Department of Health website](#), the [Rory Staunton Foundation site](#), and nationally through the [American Federation of Teachers' online lesson platform](#).

Included in the curriculum for grades K-2, and available to the public through Amazon, is a fun read-along picture book, *Ouch! I Got a Cut!* that I wrote with my young daughter, Kathleen Staunton. The book promotes a 'back to basics' approach to wound care and is part of a 2018 campaign by the

Rory Staunton Foundation to "Remember the Three C's!"—when you get a CUT (or a scrape or blister or any other small wound), don't forget to CLEAN it well and then COVER it with a bandage.



The book tells the story of three little friends, Sebastian, Jilly, and Nelson, who are spending a fun day at the park when the inevitable happens: one of the children gets a cut, but doesn't know exactly what to do. The book is brilliantly illustrated by the artist Cecilia Mandrile, and is a whimsical, welcoming, and entertaining story that will forever cement the importance of wound care for young children.

As we look forward to 2018, one of the many campaigns the Rory Staunton Foundation will focus on is "Remember the Three C's!" We want to

encourage everyone to think about the simple steps that can protect you from dirt and germs that cause infections.

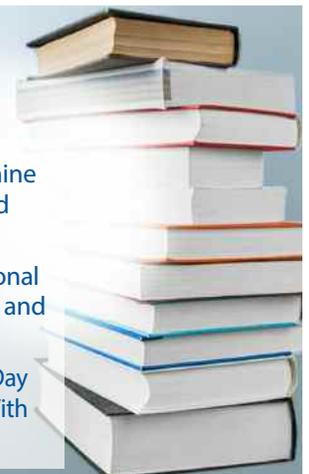
Kathleen and I decided to write *Ouch! I Got a Cut!* to encourage young children, caregivers, and educators to learn and use basic wound care. Sometime after Rory's death, we watched a friend's basketball game together and saw a player take a tumble and bleed from his arm. The coach immediately applied a

Band-Aid to the wound without taking the time to clean it so the young player could return to the game immediately. That evening we talked about what we had seen and how those same circumstances had contributed to Rory's death. We decided to write a book that would tell a simple story in a fun way—but with a life-saving lesson. Through *Ouch! I Got a Cut!*, we hope to teach children at the earliest opportunity that basic first aid is easy and essential.



Spotlight on Scholarly Sepsis Articles

- [Hydrocortisone, Vitamin C, and Thiamine for the Treatment of Severe Sepsis and Septic Shock](#)
- [Surviving Sepsis Campaign: International Guidelines for Management of Sepsis and Septic Shock: 2016](#)
- [Proportion and Cost of Unplanned 30-Day Readmissions After Sepsis Compared With Other Medical Conditions](#)



National View on Sepsis

Sepsis 911: Helping Community Members Spread Sepsis Awareness



Last year, Sepsis Alliance (SA) launched a new program, Sepsis 911, to support members of the public who wish to speak to groups and educate them about sepsis and its potentially devastating impact. This free community education presentation includes a video, PowerPoint file, surveys, and a script to provide the presenter with an easy-to-understand and consistent message of what sepsis is, how it affects the body, and how time is of the essence when identifying and treating sepsis.

The 90-minute presentation was developed in response to a need to spread information about sepsis at the grassroots level. Many people, including sepsis survivors and family members, wanted to do something to ensure that others didn't suffer the same fate. But they weren't sure how to go about doing this. Sepsis 911 provides the information in a structured format, allowing speakers to concentrate on helping others without worrying about how to do it.

The kit includes a presentation checklist, customizable poster and presentation promotion materials, a leader's guide, the presentation, pre- and post-event quizzes, and more. In order to download the kit, speakers provide SA with information such as the type of group they will address, how many people they expect to attend, and their own background (healthcare provider, family member, or survivor, for example). Presenters are also encouraged to provide SA with post-presentation feedback to allow future versions to reflect the needs of the community.

Sepsis 911 is appropriate for any group interested in learning about sepsis, including teachers, Girl and Boy Scout leaders, social groups (faith-based, interest-based), coaches, and even business colleagues. Some healthcare facilities have also offered the presentation. Initial feedback to the program has been overwhelmingly positive, with comments such as:

- "Excellent presentation, great audience participation post lecture."



Gavin Sokolinski provides community education on sepsis using the Sepsis 911 program

- "The medical director was saying this is exactly what the hospital and community needs."
- "I had to blink back tears at one point as I thought about how tragic it is for someone to die from sepsis simply because lack of awareness. I got on my soapbox as soon as I got home and lectured my 21-year-old son about being aware and being an advocate for his own health."

In October 2017, Sepsis 911 was awarded a gold medal in the Medical Video category by MarCom, which honors excellence in marketing and communication. The

Sepsis Alliance mission is to save lives and reduce suffering by raising awareness of sepsis as a medical emergency. The team at Sepsis Alliance is proud of the Sepsis 911 initiative and believes that by offering a community education presentation like Sepsis 911, reflects the mission to save lives and reduce suffering by raising awareness of sepsis as a medical emergency.

Sepsis Quiz Solution

1. Sepsis is the body's overwhelming response to an infection. This response can be life threatening, but if caught early enough it is treatable.
2. 80-90% of sepsis cases originate in the community. There is a common misconception that sepsis is a hospital associated condition.
3. Sepsis is always the result of an infection.
4. College students. Although anyone can develop sepsis from an infection, those at highest risk include: people over the age of 65, people with immunocompromising conditions and people recovering from surgery.
5. Death from sepsis increases by 8% for every hour that treatment is delayed.
6. The initial treatment for sepsis is prompt administration of IV fluids and antibiotics.
7. All of the above are preventative measures for developing sepsis

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