Cleveland Clinic Today

- 49,000 caregivers
- 6.6 million total visits
- 164,000 hospital admissions
- 3,400 physicians & scientists
- 1,888 residents & fellows
10 NEO Regional Hospitals
Cleveland Clinic Locations

- Las Vegas, Nevada
- Cleveland & Northeast Ohio
- Weston, Florida
- Toronto, Canada
- West Palm Beach, Florida
- Abu Dhabi
Cleveland Clinic Way

**Behaviors**
- Lead through change
- Demonstrate character & integrity
- Develop myself & others
- Foster teamwork

**Mission**
To provide better care of the sick, investigation into their problems, and further education of those who serve.

**Strategy**
With Patients First, transform to value and use as basis for System growth

**Goals**
- Patients First
- Caregivers
- Affordability
- Growth
- Impact

**Clinical Enterprise Priorities**
- Engagement
- High Reliability
- Access
- Care Paths
- Virtual Health/Telemedicine
- Top of License/Caregiver Roles
- Documentation
- Population Health
- System Development
ENTERPRISE SEPSIS STEERING COMMITTEE
ESSC

• Formed in 2015
• Primary goal: Decrease sepsis-related mortality
  – 2017: Non-POA mortality
  – 2018: All mortality
• Secondary goal: Increase SEP-1 measure compliance
ESSC Infrastructure

Core Team Weekly Meetings

Enterprise Quarterly Meetings

Measure Development

Data Sharing

Issues Log

Local Failed Case Reviews
FAILED CASE REVIEWS
Quality Data Registries

- >500 SEP-1 cases reviewed each quarter
- 100% IRR
- Third review of all OFIs
- Team of 5 reviewers
- Library of hundreds of questions
- Frequent communication with QNET
Failed Case Reviews,

- Occur at each of our 10 hospitals
- Once a month to review all failed cases
- Interdisciplinary committee
  - Physicians
  - Pharmacy
  - Lab
  - Nursing
  - Quality
  - Quality Data Registries
Failed Case Review Process

- Review of case prior to meeting
- Meeting leader familiar with case and able to give background story of patient
- Collaboration between ED and Inpatient, Nursing & LIP
- ED, Hospitalist and ICU MD presence
- Nurse Manager for department with Nursing OFI present
- Pharmacy present for clinical expertise and to review process issues with obtaining antibiotics
- Lab representation as needed

**Interdisciplinary teams allow you to build and diversify your hospital’s SEP experts**
Failed Case Review Results

• Record area/department involved
  - Keep track of order set usage
• Identify areas for improvement in processes
• Give feedback to those involved via failed case notification letters
  - Ideally are present during the review or provide feedback on decision making prior to meeting
Failed Case Review Results,

- Helps drive process improvement
  - Antibiotic cards
  - Changes in order set
  - Sepsis posters
  - Sepsis pocket cards for LIPs
  - Sepsis pocket cards for Nursing
  - Sepsis education module for Nursing and LIPs
Failed Case Review Challenges

- Frequent updates to measure
- Varying levels of confidence in the measure
- Inability to clearly identify true time zero while caring for patient
- Cultural differences within Enterprise hospitals
- Education across a health system
- Documentation
COLLABORATION WITH MEASURE STEWARDS
Collaboration with Measure Stewards, 2

- Phone conferences regarding SEP-1 measure and opportunities for improvement
- Discussion at national meetings
- Email communication regarding clinical scenarios and abstraction
Documentation of ESRD with hemodialysis or peritoneal dialysis excludes elevated creatinine levels.

Documentation of CKD or chronic renal insufficiency with a baseline creatinine will exclude creatinine values up to 0.5 above baseline.
SEP1-Updates

- Documentation that patient was given an anticoagulant from approved table of medications excludes elevated INR and aPTT
- Fluids given by EMS or in OR can be used without an order. The documentation must include the type of fluid, volume, initiation date/time and rate, duration or end time
ANALYSIS AND PRODUCTIVITY
National Meeting Presence

- IRR process
  - Difficult measure to abstract
  - Abstraction can vary between individuals
- Patients with bundle compliance had a lower mortality
- Patients with bundle compliance had a lower risk of readmission