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Abigail Hay PharmD

Marshall University, Huntington, WV, hay15@marshall.edu

Cathy Shely PharmD

Flint Russett PharmD

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Impact of pharmacist intervention on institutional adherence to national hospital inpatient quality measures

Abigail Hay, PharmD Cathy Shely, PharmD Flint Russett, PharmD



Introduction

- The Centers for Medicare and Medicaid Services (CMS), in conjunction with The Joint Commission, have created a set of standards collectively known as the National Hospital Inpatient Quality Measures.
- Institutional performance on these measures has been publically reported with the goal of reducing the overall cost of a hospital admission through the implementation of national standards of care.
- In October 2012, hospitals with high performance scores will receive higher reimbursement from CMS through a process known as value-based purchasing.
- Studies have shown that hospitals engaged in value-based purchasing showed greater improvement in performance on quality measures than hospitals that simply publically reported data, establishing the benefit of value-based purchasing.
- The challenge has become finding methods to ensure high levels of performance on quality measures.
- At St. Claire Regional, clinical pharmacists are uniquely placed to provide optimal pharmaceutical care. Pharmacists work as members of the healthcare team by:
 - Interacting with various healthcare professionals using the decentralized pharmacist practice model.
 - Attending surgery and ICU rounds
 - Assisting in the emergency room

Objective

- The purpose of this study is to determine institutional adherence to specific quality measures following pharmacist intervention.

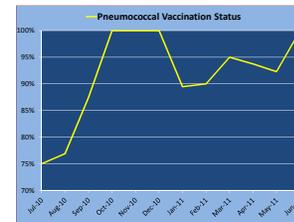
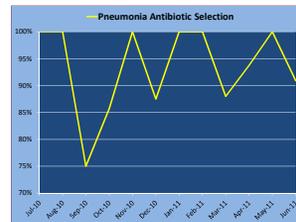
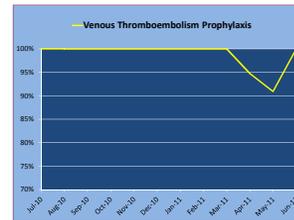
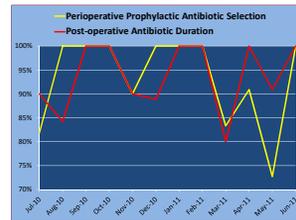
Methods

- Based on the current practice model, quality measures were analyzed to determine which measures a pharmacist would best be able to impact.
- A retrospective review of the indicated quality measures for fiscal year 2011 was conducted to determine baseline performance.

Results

- The measures chosen were:
 - Selection of perioperative prophylactic antibiotics
 - Duration of post-operative antibiotics
 - Venous thromboembolism prophylaxis
 - Antibiotic selection in patients with pneumonia
 - Pneumococcal vaccination status.

Baseline Performance-FY 2011



Conclusions

- Current average performance on some of the quality measures is not at the desired goal.
- Pharmacists are uniquely placed to impact adherence to quality measures related to medications.
- Educating all pharmacists on the national inpatient quality measures will ensure that all pharmacists are able to suggest changes in therapy for patients whose treatment is not meeting the quality measures.

Prospective Implementation

- An educational presentation regarding the various components of the selected quality measures.
- The presentation will be made available to pharmacists at St. Claire Regional Medical Center through the software program, careLearning®.
- There will be a post-test to ensure that pharmacists have an acceptable understanding of the information presented.
- Pocket guides will be distributed to pharmacists with information about appropriate antibiotic selection for surgery and pneumonia patients.
- A reminder checklist will be placed at each workstation to prompt pharmacists to evaluate post-operative antibiotic duration, venous thromboembolism prophylaxis, and pneumococcal vaccination status.
- The percentage scores for performance on these quality measures following the intervention will be analyzed to determine if there has been change in performance.

Pocket Guide

Perioperative Antibiotic Prophylaxis

	CABG, Other Cardiac or Vascular	Colon	Hip/Knee Arthroplasty	Hysterectomy
cefazolin	X		A	A
Cefazolin + Metronidazole		X		A
Clindamycin		X		A
Cefuroxime	X		X	X
Cefuroxime + Metronidazole		X		
Clindamycin	A		A	
Clindamycin + Amoxicillin		A		A
Clindamycin + Aztreonam		A		A
Clindamycin + Clindamycin		A		A
Ertapenem		X		
Metronidazole + Amoxicillin		X		A
Metronidazole + Quinolone		A		A
Vancomycin	A		A	

X = preferred agent A = allergy alternative

References
 Lindenaue PK, Remus D, Roman S, Rothberg MB, Benjamin EM, Ma A, et al. Public Reporting and Pay for Performance in Hospital Quality Improvement. New England Journal of Medicine. 2007; 356:484-496.
 The Joint Commission. Specifications Manual for Surgical Care Improvement Project National Hospital Inpatient Quality Measures. Version 3.3b, 2011

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