- Opened September 2020
- 58 beds
 - 40 MS
 - 10 CCU
 - 8 LDRP
- 27 bed ER about 2,000 discharges/month
- Average monthly sepsis sample size is 12 = 20% of sepsis cases

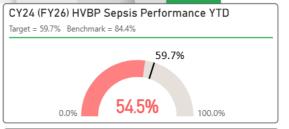


ProMedica Charles and Virginia Hickman Hospital

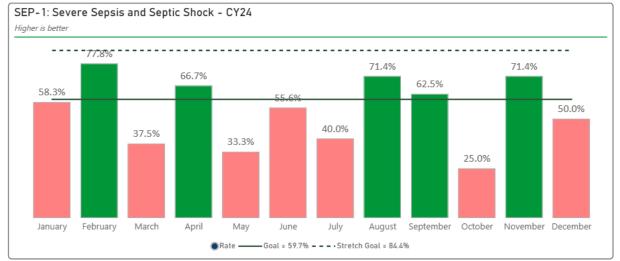
Adrian, MI

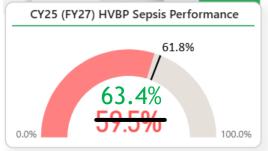


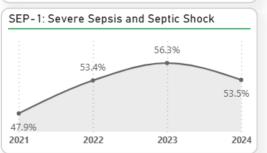
SEP-1 Compliance Trends

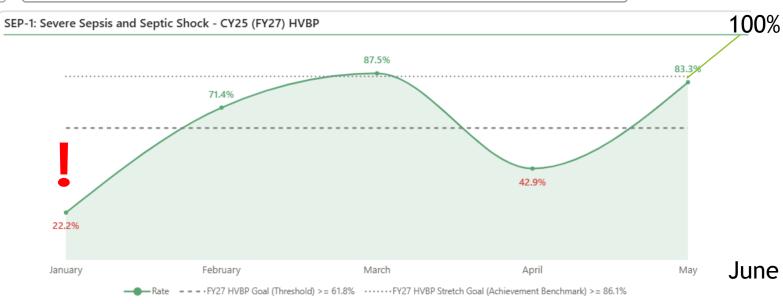












Action Plan

- Staff education
 - Badge buddies
 - Traveling poster board
 - Sepsis Jeopardy board
- Provider education
 - Sepsis bundle elements and documentation criteria
 - Reference binder
 - Promoted sepsis order set use meaningful use
- Physician champion
 - ED Medical director



Action Plan

- Sepsis huddle between ED provider and ED nurse when sepsis protocol initiated
- Nursing sepsis checklist
- Bedside shift report
- Inpatient sepsis huddle with IP hospitalist and primary RN
- Fallout letters
 - Timeline
 - Review of Sep-1 elements
 - Requires feedback response
- Recognition letters
- High reliability rounding for outcomes



Sepsis Committee

- Meets monthly increased frequency
- Multidisciplinary
 - VPMA, CNO, ED and hospitalist medical directors, ED and IP unit leaders, RT, Lab, Pharmacy, Care Nav, Quality, Abstractor
- Fallout review
 - o Timeline
 - Fishbone diagram to identify root cause
- Sepsis Readmission reviews



Sepsis Case Review

MRN XXXXXXX X/XX/XX

0900 Arrived unresponsive

0923 HR 100, RR 25 (SIRS #1, #2)

0948 lactate 3.6 (organ dysfunction)

0951 BC ordered – presumed sepsis (suspected infection; **criteria met**)

1006 NS fluid bolus ordered

1023 BC drawn

1058 Rocephin started

1107 fluid bolus started

1304 fluids continued to floor

1305 transferred to MS floor

1551 repeat lactate window closed

1843 lab cancelled repeat lactate unit collect and reordered as lab collect

