Find Your Perfect “10” Challenge

To meet our community goal, each hospital has to avoid 10 readmissions per month. That’s doable if the community works together!

Identify 10 patients who are most at risk for an adverse outcome that could result in a hospital readmission.

Most at risk are those with:
• multiple chronic conditions
• multiple medications
• high-risk medication such as anticoagulants, diabetic agents, and/or opioids
• a low health literacy
• a lack of social supports and resources

For more information about the Find Your Perfect “10” Challenge, contact:
Ettie Lande, MS, BSN, ACM-RN
Associate Director, Care Coordination
Health Services Advisory Group
elande@hsag.com | 602.801.6912

*Goal: 12% relative improvement rate in avoidable readmissions by September 30, 2018.

This material was prepared by Health Services Advisory Group, the Medicare Quality Improvement Organization for Arizona under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication No. AZ-11SOW-C.3-04102017-01
The Roadmap to Success: Implementing Outpatient Antibiotic Stewardship
<table>
<thead>
<tr>
<th>Task</th>
<th>Rationale</th>
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<tbody>
<tr>
<td><strong>Step 1</strong></td>
<td>Sign the participation agreement</td>
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| **Step 2** | **You Choose** | - Establishes a point person for HSAG to contact  
- Provides structure to antibiotic stewardship (AS) activities  
- **Satisfies Core Element #1: Commitment**  
Identify a single leader to direct activities in your facility |
| **Step 3** | Complete the Centers for Disease Control and Prevention (CDC) Core Elements checklist | - Assesses current AS activities  
- Identifies gaps  
- Directs focus for activities and priorities  
[Complete Assessment Here](#) |
| **Step 4** | Display a public commitment letter/poster supporting AS | - Demonstrates dedication and accountability for AS  
- **Satisfies Core Element #1: Commitment** |
| **Step 5** | **Celebrate!** | You have met **25%** of the CDC Core Elements for Outpatient Antibiotic Stewardship |

= HSAG-provided resource  
= You choose!  
= Complete Assessments  
= Celebrate with your team!
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| 1    | Review the CDC Core Elements for Outpatient Antibiotic Stewardship   | Familiarizes your facility with CDC expectations from the CDC Core Elements source document:  
1. Commitment  
2. Action  
3. Tracking and Reporting  
4. Education and Expertise |
| 2    | **You Choose**                                                       | **Strengthens Core Element #1: Commitment**  
- Identifies opportunities for improvement and narrows the focus to a manageable population  
- Informs the choice of intervention  
- Sets expectation with clinical staff members |
| 3    | **You Choose**                                                       | Directs AS activities, for example barriers might include:  
- Patient pressure to prescribe antibiotics  
- Physicians feel rushed to see patients quickly  
- Need to review clinical guidelines for antibiotic use |
| 4    | **You Choose**                                                       | **Satisfies Core Element #2: Action (once implemented)**  
- Provides structure and focus for activities to reduce or eliminate barriers |

- HSAG-provided resource  
- You choose!  
- Complete Assessments  
- Celebrate with your team!
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| **Step 1** | Check in with your HSAG Quality Improvement Specialist:  
**Keith Chartier, MPH**  
✉️ kchartier@hsag.com  
📞 602.801.6906  

*Allows you to:*  
• Report progress to date  
• Discuss barriers; identify how HSAG can help (visit Tools and Resources on HSAG’s Outpatient Antibiotic Stewardship web page: www.hsag.com/as)  
• Verify completion of Core Element #2: Action  

*A 15–30 minute call is helpful so HSAG can assist with problem-solving or provide resources.* |
| **Step 2** | Celebrate!  
You have met **50%** of the CDC Core Elements for Outpatient Antibiotic Stewardship |

= HSAG-provided resource  
= You choose!  
= Complete Assessments  
= Celebrate with your team!
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<tr>
<td><strong>Complete AS tracking and education readiness assessment</strong>&lt;br&gt;Step 1</td>
<td>• Helps determine “level of readiness” and resource availability (electronic medical record [EMR], staff members, etc.) to support Core Element #3: Tracking and Reporting&lt;br&gt;• Helps customize education to clinicians, staff, and patients</td>
</tr>
<tr>
<td><strong>HSAG’s Quality Improvement Specialist will review results and schedule a quick check-in to provide feedback and/or resources</strong>&lt;br&gt;Step 2</td>
<td>• Provides HSAG with assessment feedback to assess provider needs and customize resources to help complete Core Elements #3 and #4&lt;br&gt;• Determines time frame to complete Core Elements #3 and #4</td>
</tr>
<tr>
<td><strong>HSAG’s Quality Improvement Specialist will follow up to verify progress in tracking and education</strong>&lt;br&gt;Step 3</td>
<td>• <strong>Satisfies Core Element #3: Tracking and Reporting</strong>&lt;br&gt;• <strong>Satisfies Core Element #4: Education and Expertise</strong></td>
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= HSAG-provided resource  = You choose!  = Complete Assessments  = Celebrate with your team!
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<tr>
<td>Step 1</td>
<td>Complete the second assessment of the CDC Core Element checklist. Check all boxes that have been completed.</td>
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<tr>
<td></td>
<td>• Verifies all the hard work that has been completed</td>
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<td></td>
<td>• Assures sustainability of AS activities</td>
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**Complete Assessment Here**

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<tr>
<th>Step 2</th>
<th>You have met <strong>100%</strong> of the CDC Core Elements for Outpatient Antibiotic Stewardship!</th>
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<tr>
<td></td>
<td>HSAG will provide a certificate of completion for you to post in your location.</td>
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**You have reached your final destination!**
**Clostridium difficile Infection (CDI) Screening Questions**

Before obtaining a stool sample for CDI testing, ask yourself these questions:

Has the patient experienced 3 or more loose stools in a 24-hour period of time?

- **Yes**
  - Stop

- **No**
  - Stop

Is this an abnormal bowel pattern for this patient? (Diarrhea should not be induced; e.g., laxatives)

- **Yes**
  - Stop

- **No**
  - Stop

AND can answer “yes” to 1 or more of the following questions
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>Has patient received antibiotic therapy in the last 45 days?</td>
<td></td>
<td></td>
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<tr>
<td>Has patient been hospitalized in the last 30 days?</td>
<td></td>
<td></td>
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<tr>
<td>Is patient a nursing home resident?</td>
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<td></td>
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<tr>
<td>Does patient have a history of CDI?</td>
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<td></td>
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<tr>
<td>Does patient take medications to reduce stomach acid?</td>
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If total “Yes” count = 1 or more, recommend testing stool to rule out CDI. Place patient in isolation and contact provider for an order to test stool.

Based on material by the Centers for Disease Control and Prevention *Clostridium difficile* Infection Prevention Primer. Publication No. QN-11SOW-C.3.10-10132016-01
Why Do I Need Vaccines?
Each year thousands of adults get sick from diseases. Some of these people end up in the hospital, and some even die. Many diseases can be avoided by using vaccines.

Flu Vaccine
• More than 200,000 people end up in the hospital each year due to the flu.
• People six months and older should get a flu vaccine.
• You should get a flu vaccine each year during flu season, especially if you are age 65 or older or have an ongoing illness.

Pneumonia Vaccines
• Pneumonia is the leading cause of why people die or have to stay in the hospital.
• There are two types of vaccines.
• Nearly everyone age 65 and older should get one dose of each vaccine.

Shingles Vaccine
• Shingles is a painful rash and the pain can last long after the rash goes away.
• Half of the people who live until age 85 will get shingles.
• Everyone age 60 and older should get one dose.

Talk to your doctor or pharmacist about the right vaccines for you.

To find a vaccine provider near you: vaccine.healthmap.org.

This material was adapted by Health Services Advisory Group, the Medicare Quality Improvement Organization for Arizona, California, Florida, Ohio, and the U.S. Virgin Islands, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services, from material originally developed by HealthInsight, the QIO for New Mexico, Nevada, Oregon, and Utah. The contents presented do not necessarily reflect CMS policy. Publication No. QN-11504-W-1-04052017
Older Adults Need Vaccines Too!

Tdap Vaccine
- A single dose of the Tdap vaccine protects you from getting tetanus, diphtheria, and whooping cough.
- Adults age 19 and older should have one dose of Tdap, and then tetanus (Td) boosters every 10 years.

For More Information
- Centers for Disease Control and Prevention (CDC): www.cdc.gov/vaccines/adults
- National Vaccine Program: www.vaccines.gov
- Immunization Action Coalition: www.vaccineinformation.org

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