Hospital-related infections drop under California initiative

*The goal: Cut costs and save lives by preventing hospital-related infections from taking root. 'We're definitely making progress,' says a doctor in Newport Beach.*

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Scores of California hospitals, under pressure to reduce infections that kill an estimated 12,000 patients every year, say they have managed to cut costs and save lives through an initiative that has nurses and doctors redoubling efforts to prevent deadly germs from taking root.

The three-year campaign is bringing together 160 hospitals across the state with the aim of reducing an estimated 200,000 hospital-related infections in California that add $600 million to healthcare costs every year.

Since its launch 19 months ago, the initiative is credited with cutting ventilator-associated pneumonia 41%. Urinary tract infections related to catheters fell 24 last year, and cases of blood poisoning dropped 11%. The lower rates have saved an estimated $11 million in healthcare costs.

"We're definitely making progress," said Dr. Philip Robinson, who oversees infection prevention at Hoag Memorial Hospital Presbyterian in Newport Beach. "Each one of these infections is a burden to patients, hospitals and the whole healthcare system."

Hospital infections have long been a problem, but the health threat has become more urgent with medical care increasingly delivered in outpatient clinics, leaving hospitals to treat the sickest patients, who are most susceptible to infection-related illnesses.

The situation contributes to an estimated 99,000 deaths nationally every year and adds as much as $33 billion annually to healthcare spending, according to university and government researchers.

Separately, the California Department of Public Health estimates that 12,000 people in the state die each year of healthcare-related infections in hospitals.

Alarmed by these statistics, both the federal government and insurers are stepping up pressure on hospitals to act.

Washington no longer pays the extra fees when Medicare patients get infections from catheters and intravenous lines, and the new federal healthcare law will soon withhold money from hospitals that fail to reduce infection rates.

Major national and state insurers also are targeting what they see as unacceptably high infection rates. California insurance giant Anthem Blue Cross is putting up $6 million to pay for the statewide Patient Safety First program but already has recouped nearly double that amount through lower healthcare spending in
the program’s first year.

Anthem’s corporate parent, WellPoint Inc., announced this year that it is cutting payment increases to hospitals in 14 states that fail to meet its definition of quality care related to infections, readmission rates and other factors.

"If we can improve the quality of care, that will translate into lower cost," Anthem President Pam Kehaly said. "These are real dollars."

The California initiative is credited with saving an estimated 800 lives, based on lower mortality rates than had been projected, but leaders say the hospitals still do better.

"Patient safety is something you never finish," said Jim Barber, president of the Hospital Assn. of Southern California, one of three regional hospital groups that recruited hospitals for the state program. "You just continually work at it."

Nationally, 1 in 20 patients admitted to a U.S. hospital develops an infection. An estimated 1.7 million are infected each year, according to the most recent federal estimates, making hospital-borne infections one of the nation’s top 10 causes of death.

Leaders of the statewide initiative say they have brought hospitals together to exchange ideas and strategies for fighting the infections. The solutions, they say are relatively easy, if often overlooked: washing hands, brushing patients’ teeth more frequently, sterilizing equipment, eliminating unnecessary procedures, closely following safety checklists and documenting every step along the way.

"We know we can prevent many of these infections by doing some very simple things," said Dr. Arjun Srinivasan, who oversees efforts to combat the problem for the federal Centers for Disease Control and Prevention.

Doctors and nurses at Hoag Memorial in Newport Beach, for example, say they had been closely following procedures to curb infections among patients on ventilators, doing such things as setting hospital beds at 30-degree angles to help keep patients’ airways clear.

Then doctors picked up a valuable tip from other hospitals to improve oral care: Enlist respiratory therapists to help keep deadly bacteria from building up in patients’ mouths, potentially leading to pneumonia.

The therapists began swabbing patients’ mouths with hydrogen peroxide four times a day, supplementing the work of nurses who already were brushing patients’ teeth with an antibacterial solution twice a day.

The hospital said the extra effort has paid off: It has not recorded a single case of ventilator-associated pneumonia since December, down from 18 in the one-year period before that.

"It’s become second nature," respiratory therapist Rico Thomas said of the cleanings. "You know you have to do oral care. It’s of the utmost importance. You keep down the bacteria."

Fifty miles north, at Hollywood Presbyterian Medical Center, doctors have likewise focused on better oral care but also on reducing the number of infections
from central intravenous lines, keeping close watch over patients to remove the tubes as quickly as possible to avoid bacteria buildup.

In response, the hospital has seen its rate of central-line bloodstream infections decline 38% since the end of 2008, when it was part of a similar, smaller hospital initiative.

"We need to be vigilant with this," said Marie Falcis, the hospital's director of performance improvement and quality. "Our goal, of course, is to get to zero. It a high priority."

Federal officials are watching California's experiment to see whether it produces the sort of long-term results seen in other states that have invested in anti-infection efforts. They say the cost of inaction is too high to ignore.

"Nobody should go into a hospital and wind up sicker than when they went in," said Dr. James Cleeman, a federal expert on healthcare quality. "It is a challenge that the entire healthcare system needs to address to make care safer."

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