Building a Hospital Culture to Improve Sepsis Treatment

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Walnut Creek, California
Culture of Improving Sepsis Treatment

• Pick the Players
• Set the Hospital Goals
• Regular Meetings
• Get the Word Out
• Celebrate Success
Pick the Players

Roy Kaplan  
Medical Director, Quality

Mary Draper  
Quality Manager Supervisor

Marirose Apolinarski  
Director, Patient Care Services

Teri DeLaMontanya  
Director, Emergency Services

Jennifer Rangel  
Charge Nurse, ICU

Dean Charkow  
Nursing Manager, ICU

Girlynda Gonzales  
Nursing Manager, ICU
Set Hospital Goals

• Look at best practices
• Consider your historic performance
• Step wise and achievable
• Devise workflow to make goals obtainable
Regular Meetings

Sepsis QI Meeting – cross-campus
## Regular Meetings

### Sepsis Huddle

#### SEPSIS HUDDLE ANALYSIS: Walnut Creek Campus

**Goals:** Arrival to first 2 hr: Sepsis screen done; Lactate resulted; 2 L fluid ordered and given; abx ordered and started within 30 min of order

<table>
<thead>
<tr>
<th>Sepsis Patients</th>
<th>Timeline</th>
<th>Comments/Action</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Chief complaint:</strong> fever, SOB</td>
<td>Pt arrival at: 08:39 in room 0843</td>
<td>Private car</td>
</tr>
<tr>
<td><strong>Infection source:</strong> urinary</td>
<td>Sepsis screen: 1211 +</td>
<td>Shock liver; ARF on admit</td>
</tr>
<tr>
<td>ED MD:</td>
<td>SP sepsis used by RN: Yes</td>
<td>IV #1 VAP #2 08:29</td>
</tr>
<tr>
<td>Admit:</td>
<td>Lactate resulted: 1010 (91 min)</td>
<td>BC: #1 and #2 09:30</td>
</tr>
<tr>
<td>Intensivist:</td>
<td>2 L Fluids ordered: Yes (005)</td>
<td>Intensivist in ED: 10:04; inserted CL</td>
</tr>
<tr>
<td>ED RN:</td>
<td>Fluids completed: 1039 (120 min)</td>
<td>Admit MD notified: 11:30; scanned 12:49</td>
</tr>
<tr>
<td>Lactate: 4.7</td>
<td>Abx ordered: 1005 (88 min)</td>
<td>Bed ordered/ready: 11:59</td>
</tr>
<tr>
<td>BP on arrival: 72/40</td>
<td>Abx started: 1050 (45 min)</td>
<td><strong>Excellent Job!!</strong></td>
</tr>
<tr>
<td>DC status: Alive</td>
<td>Total fluids in the ED: 6 liters</td>
<td></td>
</tr>
<tr>
<td><strong>Chief complaint:</strong> SOB</td>
<td>Pt arrival at: 18:15 in room 1850</td>
<td>Private car</td>
</tr>
<tr>
<td><strong>Infection source:</strong> Abd.</td>
<td>Sepsis screen: 2014 +</td>
<td>Urostomy bag in place</td>
</tr>
<tr>
<td>ED MD:</td>
<td>SP sepsis used by RN: Yes</td>
<td>Colon CA ongoing Rx; hx bladder CA</td>
</tr>
<tr>
<td>Admit:</td>
<td>Lactate resulted: 1933 (78 min)</td>
<td>ED MD with patient: 1849</td>
</tr>
<tr>
<td>Intensivist:</td>
<td>2 L Fluids ordered: Yes (1859)</td>
<td>Intubated: 1900</td>
</tr>
<tr>
<td>ED RN:</td>
<td>Fluids completed: 2010 (115 min)</td>
<td>BC drawn: #1 and #2 13:49</td>
</tr>
<tr>
<td>Lactate: 6.8</td>
<td>Abx ordered: 2001 (102 min)</td>
<td>Intensivist notified: 18:20</td>
</tr>
<tr>
<td>BP on arrival: 108/78 ↓ 78/66 1850</td>
<td>Abx started: Given in CR</td>
<td>Intensivist in ED: 19:47; inserted CL</td>
</tr>
<tr>
<td>DC status: Still intubated</td>
<td>Total fluids in the ED: 4 liters</td>
<td>Bed: 2010</td>
</tr>
<tr>
<td><strong>Chief complaint:</strong> nausea, diarrhea, vomiting</td>
<td>Pt arrival at: 18:19 in room 1830</td>
<td>Private car</td>
</tr>
<tr>
<td><strong>Infection source:</strong> PNA-neutropenic</td>
<td>Sepsis screen: 1829 (10 min) +</td>
<td>ED MD with patient: 1901</td>
</tr>
<tr>
<td>ED MD:</td>
<td>SP sepsis used by RN: Yes</td>
<td>IV #1 1849; #2 21:19</td>
</tr>
<tr>
<td>Admit:</td>
<td>Lactate resulted: 1855 (26 min)</td>
<td>BC: #1 1849 and #2 1921</td>
</tr>
<tr>
<td>Intensivist:</td>
<td>2 L Fluids ordered: Yes (1914)</td>
<td>Admit MD called: 19:26</td>
</tr>
<tr>
<td>ED RN:</td>
<td>Fluids completed: 2005 (106 min)</td>
<td>Admit orders written: 22:00</td>
</tr>
<tr>
<td>Lactate: 6.4</td>
<td>Abx ordered: 1913 (54 min)</td>
<td>Bed requested/resulted: 21:59</td>
</tr>
<tr>
<td>BP on arrival: 108/78 ↓ 76/66 1850</td>
<td>Abx started: 19:51 (38 min)</td>
<td>BC: E. coli</td>
</tr>
<tr>
<td>DC status: Still intubated</td>
<td>Total fluids in the ED: 5 liter</td>
<td>CL inserted by intensivist-CVP 21 but no</td>
</tr>
</tbody>
</table>

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**Report Date**

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**Quality Review Record**

Protected by Evidence Code 1157
Get the Word Out

- Engage the frontline staff
  - Weekly Sepsis Education

Lactate  Pressors  Teamwork  Antibiotics  SPEED  IV FLUIDS
Get the Word Out

- Engage the frontline staff
  - Sepsis Simulation
  - Sepsis Education from our ID docs
  - Sepsis Webcasts
Get the Word Out

• Engage the frontline staff
  – Bi-weekly feedback after Sepsis Huddle
  – Frontline feedback
Celebrate Success

• Sepsis Superstars
• Feedback on Patient Outcomes
You know you have reached the staff when…

World Sepsis Day
Potluck 9/13/12

Salmonella Spinach Salad
Ecoli Eggplant Parm
C diff eggs
Pastanella Piza
Staph. Aureus Mac+Clusi

Shigella, saudit
Salmon