

# Sepsis Prevention at Pella Regional Health Center

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## Metrics

The overall project goal was to improve our sepsis compliance rate from 59% to 75%.

## Objective

Develop a consistent process for achieving compliance with the sepsis three hour and six hour bundles. Decrease overall mortality rate for sepsis patients.

## Background

Sepsis is the body's extreme response to infection. Sepsis can occur in both bacterial and viral infections. History of comorbidities can increase the risk of sepsis and is the leading cause of death in critically ill patients. Pella Regional had a compliance rate of 59%.

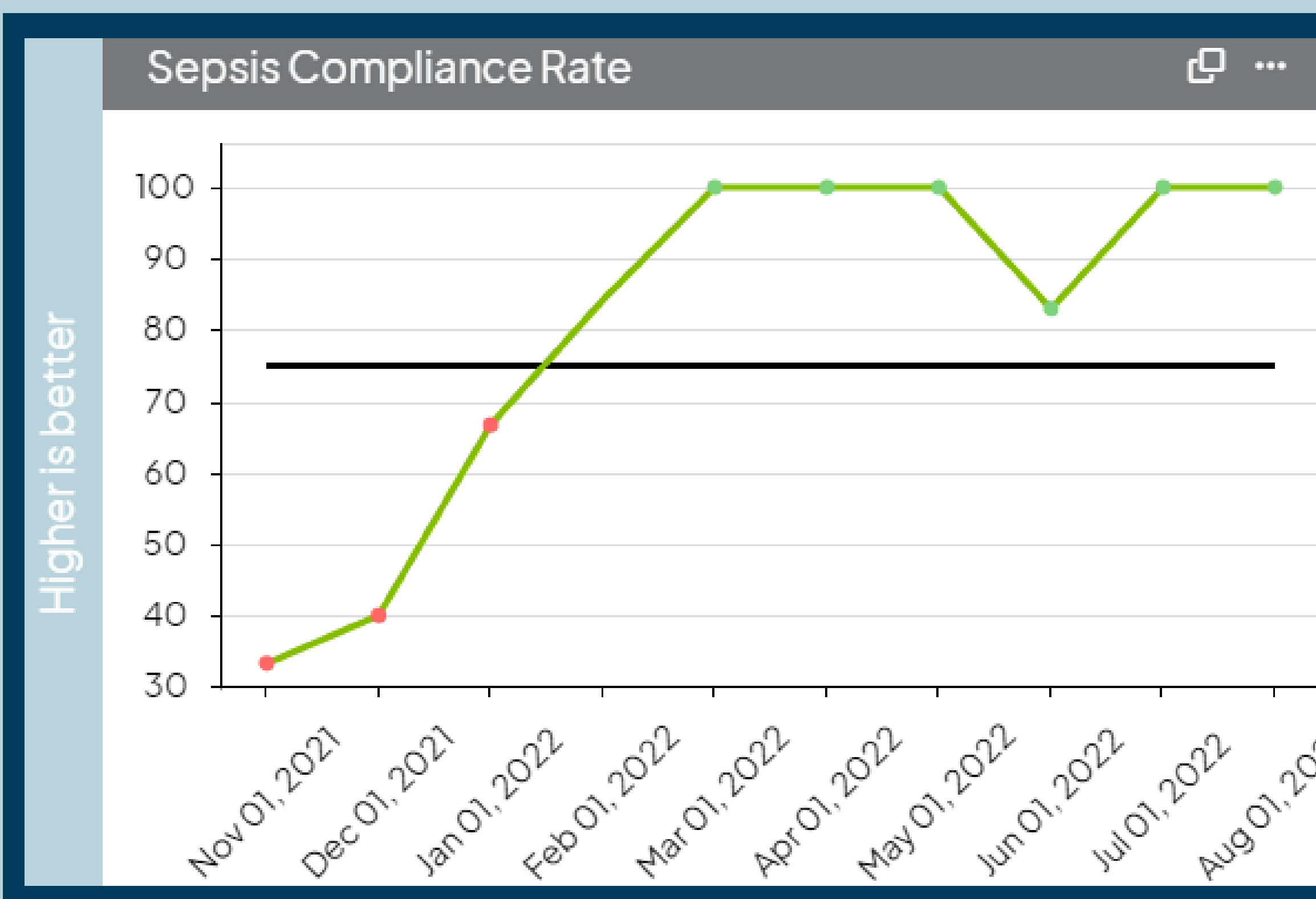
## Actions Taken

We convened a team of Med/Surg, ED, Physicians, and IT to review current sepsis fallouts and opportunities to improve our process. Additionally, we evaluated an available toolkit in our EMR to assist in alerting staff when a patient has qualified as possibly septic. We also adjusted the triage process in our Emergency Department to ensure data elements needed for the toolkit were included and the conformed to emergency standards. The final step in the electronic medical record adjustment was to alter our patient tracker board to flag when patients have qualified as potentially septic.



## Analysis

We determined the largest area of fallout was during the handoff of a patient from the Emergency Department triage nurse to primary nurse or during transfers to the Medical/Surgical Department. We were able to catch septic patients if they started off septic, but often failed to identify sepsis timely if lab values were returned later. The addition of new information to the next caregiver, was not immediately flagging them to begin the sepsis protocol.



## Next Steps

Using the sepsis bundle included in our electronic medical record, a sepsis alert shows up on the physician and nurse's patient tracker to get immediate attention to the patient. Improved education will be given to all involved staff on recognition of sepsis indicators.

**YTD COMPLIANCE RATE THROUGH  
AUGUST IS 88%.**

