

Dear Physician:

The orthopedic surgeons who collaborate with Kaweah Delta on surgical cases want you to know that Kaweah Delta has dramatically lowered infection rates and hope you will share this information with your patients. In fact, a recent Fresno Bee article noted that every hospital in the entire Central San Joaquin Valley was penalized by Medicare for "excessive infection rates and patient injuries" except Kaweah Delta Medical Center and one other hospital. Kaweah Delta also remains a designated Blue Distinction Center

"It is crucial to the patient's well-being that both referring physicians and patients are aware of a hospital's infection rate when choosing where to have surgery," said Dr. Bruce Le, Orthopedic Service Line Chair. "Kaweah Delta and the entire staff are committed to quality, providing an environment for excellence in patient care and safety. The numbers speak for themselves."

Safety has long been a priority of ours. We now stand together with Kaweah Delta focused on being safe. All staff members are committed and trained to reduce the risk of infection. Below are a few examples of what we are doing to reduce infections at Kaweah Delta:

- We use bandages that seal wounds for 5-7 days which have been proven to reduce infections by 50 percent.
- We promote hand hygiene compliance with staff, patients, and family members/guests.
- We screen patients for MRSA and VRE. We identify patients with these infections and take appropriate action.
- We use CDC-recommended guidelines to prevent the spread of infections.
- We conduct ongoing staff education and training.
- We continually monitor our hospitals and staff performance of infection prevention tactics in search of improvement opportunities.

We hope you will consider sharing this information with your patients as they consider orthopedic surgery. If you have any questions about what we are doing to keep patients safe and reduce infections at Kaweah Delta, please do not hesitate to call us at 559-624-3800. We will respond to your questions promptly.

Sincerely,

Bruce N. Le, M.S., D.O.

Orthopedic Service Line Chair

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Fresno hospitals hit by

Medicare cuts payments over patient injuries.

By Barbara Anderson The Fresno Bee

The two largest hospitals in Fres- ville. no are losing 1% of their Medicare payments as part of a federal program that penalizes hospitals for excessive infection rates and patient

Community Regional Medical Center in downtown Fresno and Health News. Saint Agnes Medical Center in Hospitals a northeast Fresno are among six hospitals in the central San Joaquin Valley with lowered Medicare payments.

The other Valley hospitals facing penalties are: Clovis Community Medical Center, Fresno Surgical Hospital,

Developmental Center and Sierra is significant, Valley hospital offi-View District Hospital in Porter-cials said.

721 nationwide and 79 in California with reduced Medicare payments over the fiscal year that began Oct. 1 and runs through September 2015. according to an analysis by Kaiser

Hospitals are being penalized for having high rates of "hospital-ac-quired conditions" or HACs. Medicare evaluated hospitals in three areas: central line-associated bloodstream infections, catheter-associated urinary tract infections and serious complications, which Porterville include eight types of injuries such was not penalized.

as blood clots, bed sores and falls.

Saint Agnes estimates the 1% pen-The Valley hospitals are among alty will total \$465,000, said hospital spokeswoman Kelley Sanchez. The penalty equates to a reduction of about \$65 per Medicare claim, she said.

Community Regional Medical Center estimates a loss of \$1.2 million and Clovis Community will see about a \$200,000 payment reduction, said Dr. Thomas Utecht, chief medical officer for Community Medical Centers, which operates both hospitals as well as Fresno Heart & Surgical Hospital in northeast Fresno. Fresno Heart & Surgical

Utecht said Community Regional The penalty imposed by Medicare is among teaching hospitals in the nation that are being penalized disproportionately. About 50% of teaching hospitals were hit with a Medicare payment penalty, he said. The downtown Fresno hospital is the main teaching facility for medical residents in the University of California at San Francisco-Fresno Medical Education Program.

Patient cases at teaching hospitals can be more complex and complicated, Utecht said. "There's a different kind of patient these hospi-tals are taking care of," he said. However, Utecht said Communi-

ty Medical Centers supports the kind of analysis that Medicare requires hospitals to undertake to im-See HOSPITALS, Page A12

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prove quality. Community Regional and Clovis Community have concentrated on reducing infection rates, he said. "We've seen decreases in those rates over the last year." The Medicare data are more than a year old, he said.

At Saint Agnes, a team of nurses and clinical staff from throughout the hospital is focused on procedures that can be put in place to reduce infections, Sanchez said.

The hospital is a member of Health Service Advisory Group, a quality improvement organization contracted with the Centers for Medicare & Medicaid Services, she said. Members of the organization will visit Saint Agnes in January. The collaboration will allow Saint Agnes to share ideas for quality improvement with other hospitals. "It also gives us access to expert speakers so we can continue to educate staff and stay abreast of the latest research and findings to prevent (hospital-acquired conditions)," Sanchez said.

Officials at hospitals in the Valley that are not being penalized by Medicare said they have concentrated on reducing infections, particularly those associated with catheters, and have done reviews of patient records for incorrect labeling of injuries.

At Adventist Medical Center-Hanford, the number of catheters inserted in patients has been reduced, said Diane Hoyt, vice president in charge of patient safety. The hospital encourages doctors to be "judicious in your decision that a patient warrants" having a catheter, she said. The hospital also made changes in the type of catheters it buys.

Dr. Leland Beggs, medical director at Kaweah Delta Medical Center in Visalia who is in charge of performance improvement, said the hospital has two approaches to reducing patient injuries: "One is to prevent those events when they're actually occurring, and second, to make sure the medical record accurately reflects those events."

Improved record keeping can prevent a hospital from being penalized, Beggs said. "About 20% of the time, it really is documentation flaws" that result in incorrect reports of patient injuries, he said.

One of the unintended consequences of the Medicare penalty will be that "medical record keeping is going to get a lot better in the future," Beggs said. "And that will translate into better care."

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