



May 27, 2008

Honorable Henry A. Waxman
Chairman, Committee on Oversight and Government Reform
2157 Rayburn House Office Building
Washington, DC 20515-6143

Dear Chairman Waxman:

On behalf of the 90 hospital and health system members of the Colorado Hospital Association (CHA), we appreciate the opportunity to provide you and the Committee on Oversight and Government Reform with a summary of our efforts to reduce healthcare associated infections and improve overall quality and patient safety in Colorado. Hospitals in Colorado are committed to and have assumed a strong leadership position on quality measurement and improvement. Both quality improvement and patient safety continue to be a top priority for hospitals in our state and are key components of our mission to help our members provide the best possible quality healthcare to the communities they serve.

Several examples that demonstrate the commitment of Colorado hospitals to quality improvement and patient safety include:

- Public reporting of healthcare acquired infections
- The web-based Colorado Hospital Report Card
- Creation of the Colorado Center for the Advancement of Patient Safety
- Standardized color-coded patient wristbands
- Standardized hospital emergency intercom codes
- Participation in collaborative efforts such as the IHI 5 Million Lives Campaign and the Center for Improving Value in Healthcare

These efforts are discussed in more detail below:

Healthcare Acquired Infections

In 2006, Colorado hospitals supported state legislation that directed the Colorado Department of Health and Environment (CDPHE) to collect information on healthcare associated infections. House Bill 1045, passed by the 2006 legislature, requires hospitals, ambulatory surgery centers, hospital units and dialysis treatment centers to collect data on infections for specific clinical

procedures and regularly report the data to the National Healthcare Safety Network (NHSN) beginning July 31, 2007. The Colorado Department of Public Health and Environment is the agency responsible for summarizing and analyzing the data and in January 2008 began providing semi-annual and annual reports.

Colorado hospitals are required to submit facility acquired infection rates for the following procedures:

- Total/partial hip replacements
- Total/partial knee replacements
- Coronary artery bypass graph (CABG)
- Central line-associated blood stream infections (CLABSIs)

Central line-associated blood stream infection rates are now being collected and compiled, and will be made available to the public in 2008. In the meantime, the Colorado Hospital Association is developing a tool kit for hospitals to use as a resource for preventing healthcare acquired infections, including some of the most common facility acquired infections such as Methicillin-resistant Staphylococcus aureus (MRSA) and ventilator associated pneumonia (VAP).

The Colorado Hospital Report Card

In 2004, Colorado became the first state in the country to voluntarily publish a hospital report card. This web-based publication was designed to provide consumers with comparative hospital quality information to help them with their decisions on where to seek healthcare. It was also designed to provide hospitals with information to assist with their performance improvement and patient safety efforts.

Building on this voluntary effort, Colorado hospitals supported 2006 legislation to formalize the Colorado Hospital Report Card and place it under the direct supervision of the CDPHE. The primary goal of the Colorado Hospital Report Card is to ensure that statewide hospital performance data and clinical outcomes are made available to the public in a clear and usable manner. This data is available to the public on an internet website (www.cohospitalquality.org) in a manner that not only allows consumers to conduct an interactive search to compare information from specific hospitals, but also provides appropriate guidance on how to use and understand the data. The Colorado Hospital Report Card uses standardized quality and clinical outcome measures that are endorsed by nationally recognized organizations, with established standards to measure the performance of healthcare providers and hospitals.

Hospitals currently report on the following quality measures:

- 11 outcomes of care measures –risk adjusted mortality rates for:
 - Heart Attack
 - Heart Failure
 - Stomach Ulcer
 - Hip Fracture
 - Pneumonia
 - Stroke
 - Hip Replacement
 - Neck Artery Surgery
 - Coronary Bypass Surgery
 - Skull Surgery
 - Balloon Angioplasty

- 4 surgical volume measures including:
 - Abdominal Artery Repair
 - Neck Artery Surgery
 - Coronary Bypass Surgery
 - Balloon Angioplasty

- 14 ambulatory care sensitive measures – including hospitalizations rates for conditions related to:
 - 4 Diabetes related conditions,
 - Asthma,
 - Perforated Appendix
 - High Blood Pressure,
 - Dehydration
 - Chest Pain
 - Heart Failure
 - Emphysema and Chronic Bronchitis
 - Pneumonia
 - Low Birth Weight
 - Urinary Tract Infections

- 4 patient safety measures including:
 - Pressure Ulcers
 - Postoperative Blood Clots
 - Postoperative Artery Blockage in Lungs

- Postoperative Blood Stream Infections
- 6 pediatric inpatient volume measures including:
 - Appendectomy
 - Asthma
 - Diabetes
 - Stomach Illnesses
 - Live Births
 - Respiratory Illnesses

Two of the measures address healthcare acquired conditions – blood stream infections and pressure sores. Colorado hospitals will also begin reporting eight nursing sensitive measures and pediatric quality measures by 2010.

Colorado Center for the Advancement of Patient Safety

The Colorado Hospital Association created the Colorado Center for the Advancement of Patient Safety to provide leadership and technical assistance to Colorado hospitals with their efforts to improve quality and patient safety. It emphasizes specific areas of care identified through collaborative exchanges of information. Initial efforts have focused on standardizing color-coded wristbands and overhead emergency codes, and providing hospitals with tools designed to help prevent healthcare acquired infections.

Wristbands and Codes Standardization

The CHA Board of Trustees has adopted and Colorado's hospitals are implementing guidelines for standardizing color-coded alert wristbands and overhead emergency codes. Standardization in these two areas will dramatically increase patient safety. Consistency in hospitals across the state will minimize potential staff confusion, especially for healthcare providers who work in multiple facilities across the state. The standards include:

Color-coded Alert Wristbands*

- Allergy = red band
- DNR = purple band
- Fall risk = yellow band
- Latex allergy = green band
- Restricted extremity = pink band

Emergency Codes:

- Code Red = fire
- Code Blue = cardiac arrest
- Code Orange = hazardous material spill
- Code Black = bomb threat
- Code Pink = infant abduction
- Tornado watch/warning = no code

*These standardized colors have been endorsed by the American Hospital Association (AHA)

5 Million Lives Campaign

Forty- six Colorado hospitals participate in the IHI 5 Million Lives campaign through grant funding provided by The Colorado Trust. All participating hospitals are required to focus on the following initiatives:

- Preventing pressure ulcers
- Reducing Methicillin-resistant Staphylococcus aureus (MRSA) infection
- “Boards on Board” – getting hospital trustees involved

Colorado Hospital Association is providing technical assistance to its members for the IHI Boards on Board initiative. CHA is extending Boards on Board resources to all Colorado hospitals regardless of whether they are a grantee through The Colorado Trust. The purpose of the initiative is to actively engage senior hospital leaders and trustees in an active and collaborative process of quality improvement and patient safety efforts. This initiative is unique because it requires collaboration among many senior leaders and education on a variety of topics that relate to quality improvement and patient safety efforts.

CHA has outstanding representation and engagement from hospital trustees, CEOs and other senior leadership. Colorado hospitals are committed to board engagement in quality improvement and patient safety, and are actively working to make improvements and sustain efforts in these important areas.

Center for Improving Value in Health Care

The Commonwealth Fund Commission on a High Performance Health System's State Scorecard recently selected Colorado to participate in the State Quality Improvement Institute initiative. This initiative will help states plan and implement action plans to improve performance across targeted quality indicators. Three measures Colorado will focus on are:

Honorable Henry A. Waxman
Chairman, Committee on Oversight and Government Reform
Page 6

- Percent of adults who have a usual source of care
- Percent of children with a medical home
- Percent of adult diabetics who receive recommended preventative care

Efforts for this initiative will be coordinated by the Colorado Department of Health Care Policy and Finance (HCPF). Through CHA, Colorado hospitals have been invited to participate on the steering committee that will advise HCPF about the scope and structure of the proposed Center for Improving Value in Health Care.

Again, thank you for the opportunity to assist you and the committee by providing information about the efforts of CHA and Colorado hospitals regarding healthcare associated infections and other patient safety and quality improvement initiatives. This is by no means an exhaustive list but highlights some of the key focus areas. If you would like additional information or have questions about our efforts, please contact Scott Anderson, CHA Vice President of Professional Activities, at 720-330-6028 or Scott.Anderson@cha.com.

Sincerely,



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