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Prescriptions for Excellence in
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A Message from Lilly

Aiming for Improvements

By Dawn Blank, RPh

The 3 areas of focus for the Centers for Medicare and Medicaid Services (CMS) are Better Care, Healthy People/Healthy Communities, and Affordable Care. To achieve these aims, we, as a nation, must address the inefficiencies and medical errors in our health care system.

One area of focus is patient and medication safety. If we (the health care system) can improve patient and medication safety, we may reduce harm to patients (better care), and may avoid potential harm to patients (better health) as well as the costs associated with patient and medication safety errors (decrease costs).

There is a new campaign under way titled Partnership for Patients (Partnership). This patient safety initiative is a public-private partnership between Health and Human Services (HHS) and other ongoing initiatives. The Partnership would like to leverage the good work being done by many national, regional, and local organizations to achieve 2 goals: keeping patients from getting injured or sicker in the health care system, and helping patients heal without complication by improving transitions from acute care hospitals to other care settings, such as home or a skilled nursing facility.[1]

The Partnership expects success to occur at the local and regional level with support from the federal government. The 3 elements of local success are: (1) the normalization of patient safety efforts in the daily tasks of all health care delivery staff, from frontline providers to senior management, (2) a system of inquiry and learning that permeates through the entire health care delivery system, and (3) a steady focus on patients as the center of care.

One of the exciting parts to this initiative is the shift toward creating change and generating action. As HHS Secretary Kathleen Sebelius has stated, there is no "silver bullet"[2] solution. It is clear that leadership, collaboration, and authentic engagement with patients and their families are the keys to success. To accelerate change, HHS is making a commitment to work with frontline providers to redesign systems of care. Specifically, HHS is committing up to $1 billion to this initiative, $500 million of which is focused on community care transitions. Additional support from the Innovation Center at CMS is forthcoming. It should be noted that HHS's commitment is a result of section 3026 of the Affordable Care Act.

One of the Partnership's ambitious goals is to reduce hospital readmissions by 20% by 2013. Achievement of this goal will center on reducing complications during transitions from one care setting to another, particularly for patients with multiple chronic conditions. Seamless care transitions require thoughtful collaboration among hospitals, community-based organizations, patient caregivers, and patients themselves.[3] To assist with this effort, the Partnership has created the Community-Based Care Transition Program (CCTP).

The 4 goals for the CCTP are to: (1) improve transitions of beneficiaries from the inpatient hospital setting to home or other care settings; (2) improve quality of care; (3) reduce readmissions for high-risk beneficiaries; and (4) document measurable

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savings to the Medicare program. More information is available at: http://www.cms.gov/DemoProjectsEvalRpts/MD/.

In addition to the CCTP, the Partnership has identified 9 other areas of focus. Specifically, the Partnership would like to reduce all-cause harm and recognizes that there may be opportunities in other areas that will focus on the following: adverse drug events; catheter-associated urinary tract infections; central line-associated bloodstream infections; injuries from falls and immobility; obstetrical adverse events; pressure ulcers; surgical site infections; venous thromboembolism; ventilator-associated pneumonia; and other hospital-acquired conditions.[2]

The interest in and support for the Partnership has been demonstrated by over 4500 organizations, including about 2000 hospitals, by their signing a pledge - a great beginning. In a conference call hosted by Don Berwick and Kathleen Sebelius on June 20, 2011, they discussed moving from demonstrating support (signing the pledge) to the next step, which is implementation and activation. CMS and HHS are looking for specific examples of how to address patient and medication safety, especially within care transitions and the areas of focus mentioned above. How concepts were translated into tactical plans, including the specifics of how the tactic was implemented, is what is needed to be shared.

Lilly has developed several programs over the years to try to address the how-tos and best practices in the areas of medication safety and care transitions for our hospital customers. We will continue our efforts in medication safety and care transitions as we are committed to improving patient outcomes in the health care community and as a large employer.

***Dawn Blank, RPh**, is a Consultant with Managed Healthcare Services, Lilly USA, LLC.*

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