Background:

There are 14 Hospital Acquired Conditions (HACs) and they are as follows:
- Air Embolism
- Blood Incompatibility
- Catheter-Associated UTI
- DVT and PE Following: Total Knee Replacement, Hip Replacement
- Falls and Trauma: Fractures, Dislocations, Intracranial Injuries, Crushing Injuries, Burns, Other Injuries
- Foreign Object Retained After Surgery
- Iatrogenic Pneumothorax with Venous Catheterization
- Manifestations of Poor Glycemic Control
- SSI Following Bariatric Surgery for Obesity
- SSI Following Certain Orthopedic Procedures: Spine, Neck, Shoulder, Elbow
- SSI-Mediastinitis after CABG
- Stage III & IV Pressure Ulcers
- Surgical Site Infection Following Cardiac Implantable Electronic Device
- Vascular Catheter-Associated Infection (includes site)

There are 24 different Patient Safety Indicators (PSIs) and they are as follows:
- PSI 03: Pressure ulcer
- PSI 04: Death among surgical inpatients with serious treatable complications
- PSI 05: Retained Surgical Item or Unretrieved Device Fragment Count
- PSI 06: Iatrogenic pneumothorax
- PSI 07: Central venous catheter-related blood stream infections rate
- PSI 08: Postoperative hip fracture
- PSI 09: Postoperative hemorrhage or hematoma
- PSI 10: Postoperative physiological and metabolic derangement
- PSI 11: Postoperative respiratory failure
- PSI 12: Postoperative pulmonary embolism or deep vein thrombosis
- PSI 13: Postoperative sepsis
- PSI 14: Postoperative wound dehiscence
- PSI 15: Accidental puncture or laceration
- PSI 16: Transfusion Reaction Count
- PSI 17: Birth Trauma Rate—Injury to Neonate
- PSI 18: Obstetric Trauma Rate—Vaginal Delivery with Instrument
- PSI 19: Obstetric Trauma Rate-Vaginal Delivery without Instrument
- PSI 21: Retained Surgical Item or Unretrieved Device Fragment Rate
- PSI 23: Central Venous Catheter-Related Blood Stream Infection Rate
- PSI 24: Postoperative Wound Dehiscence Rate
- PSI 25: Accidental Puncture or Laceration Rate
- PSI 26: Transfusion Reaction Rate
- PSI 27: Postoperative Hemorrhage or Hematoma Rate
- PSI 90: Patient Safety for Selected Indicators
<table>
<thead>
<tr>
<th>Patient Safety Indicators</th>
<th>Included in the AHRQ PSI Composite Index (PSI 90)</th>
<th>Included in Value Based Purchasing and CMS HAC Reduction Program (2015)</th>
<th>Included in the USNWR Best Hospitals Patient Safety Score</th>
<th>Included in Leapfrog Hospital Safety Score</th>
<th>Included in UHC Quality &amp; Accountability Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSI 03: Pressure ulcer</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSI 04: Death among surgical inpatients with serious treatable complications</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSI 06: Iatrogenic pneumothorax</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSI 07: Central venous catheter-related blood stream infections rate</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSI 08: Postoperative hip fracture</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>PSI 09: Postoperative hemorrhage or hematoma</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSI 10: Postoperative physiological and metabolic derangement</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>PSI 11: Postoperative respiratory failure</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSI 12: Postoperative pulmonary embolism or deep vein thrombosis</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSI 13: Postoperative sepsis</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>PSI 14: Postoperative wound dehiscence</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>PSI 15: Accidental puncture or laceration</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSI 90: PSI Composite</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
Why should I care about HAC/PSI?

There are many reasons you should be concerned with HAC/PSI, three core elements are Reporting, Reputation and Financial.

<table>
<thead>
<tr>
<th>REPORTING</th>
<th>REPUTATION</th>
<th>FINANCIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>• CMS</td>
<td>• US News and World Report</td>
<td>• Reduced Reimbursement</td>
</tr>
<tr>
<td>• Medi-Cal</td>
<td>• Leapfrog</td>
<td>• Fines: $50,000 to $100,000</td>
</tr>
<tr>
<td>• CDPH</td>
<td>• HealthGrades</td>
<td>• Value Based Purchasing</td>
</tr>
</tbody>
</table>

How are HAC/PSI validated?

HAC and PSIs are identified by the Quality Management Portal (QMP), an interactive on-line database, within 1 week post coding, by specified ICD-9 codes. When this occurs, a Quality Management Specialist will review the case and if there is opportunity for reversal, will work with the physician on documentation and coordinate with coding. Occasionally, the physician champion or chief medical officer will be engaged to ensure adequate documentation by 9 days post coding.

What items are being worked on related to documentation?

- The validation process, as outlined above
- Accurate capture of present on admission
- Ensure all ‘ruled out’ diagnoses are documented
- Department specific communication and education
- Smart text in outpatient notes for accidental puncture laceration. CareConnect Documentation: A smartphrase has been created within CareConnect, which is accessed via the text .NSOPNOTE.

What items are being worked on related to care delivery improvements?

There are many quality initiatives to improve care delivery throughout the health system. These include but are not limited to:

- CLABSI- Task Force addressing insertion, maintenance, discontinuation practices
- CAUTI- Nurse driven protocol
- DVT- Screening and concurrent review
- Falls-Debrief
- HAPU- Debrief
- Iatrogenic Pneumothorax-Insertion of central line with ultrasound guidance and simulation training
- Retained Foreign Object- RFID tags on sponges; Pre close pause and end of case debrief
- SSI- CHQI collaborative
- Sepsis bundle- Nurse driven protocol, nurse champions, simulation training, screening
Where do I go if I want more information?
If you need more information please check the following resources:

**HAC/PSI Resources**
HAC: [http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/index.html](http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/index.html)

**UCLA Health Resources**
Coding Questions/Information:
Joel Lipin – jlipin@mednet.ucla.edu

**Quality Management Services Questions/Information**
RRUMC
Brenda Clemens – bclemens@mednet.ucla.edu
Patricia Walker – pwalker@mednet.ucla.edu
SMH
Sherry Watson-Lawler – swatson@mednet.ucla.edu