



Congratulations to client **Freeman Health System** for their remarkable results in their Intensive Care Unit resulting in improved quality and clinical efficiency, and at least 8 lives saved.

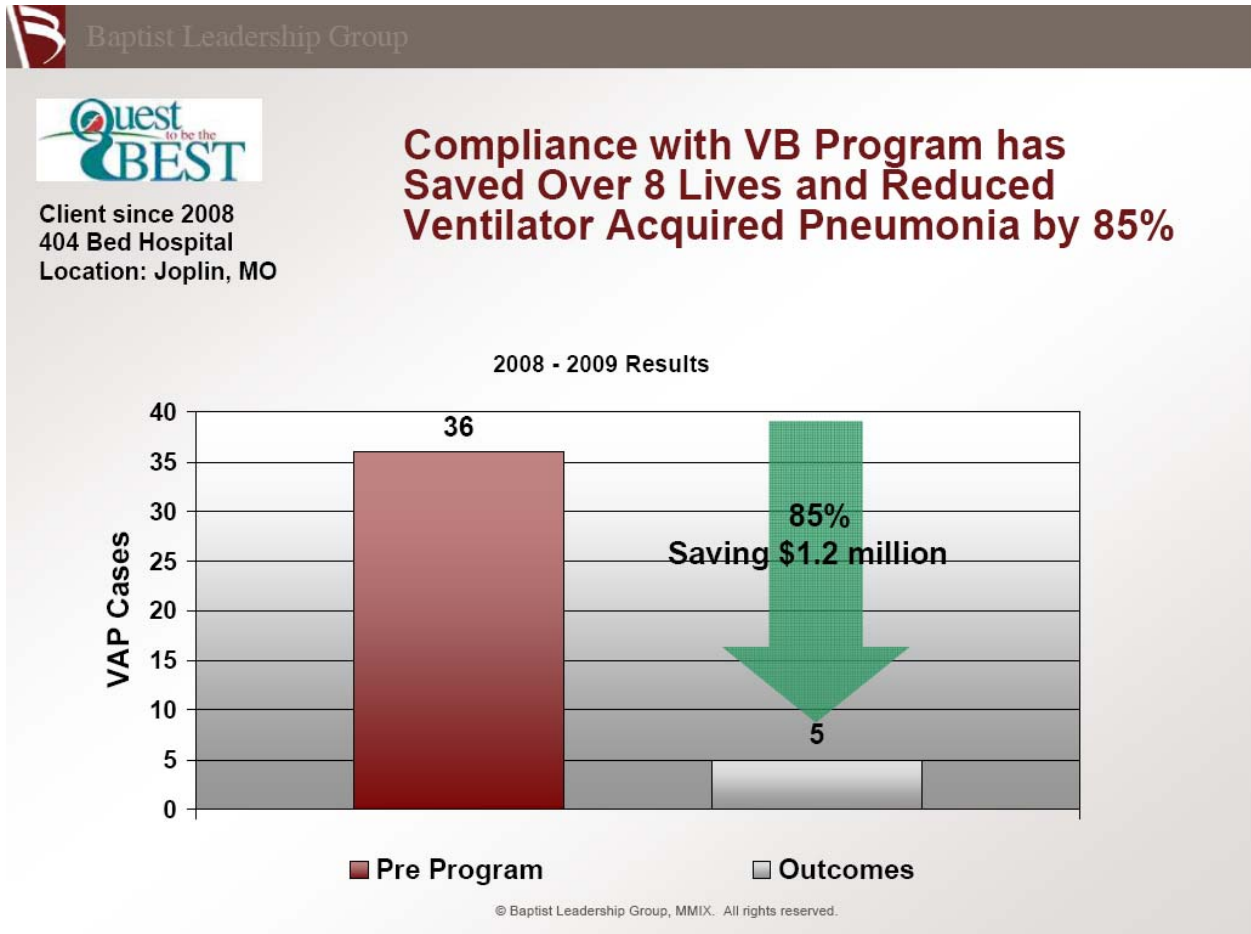
In one short year, Allen Overturf, Director of Critical Care, Jeff Keener, Director of Respiratory Care, Kathy Hutchinson, Director of System Quality Improvement, and the highly skilled Critical Care staff have successfully deployed a program to decrease the incidence of Ventilator Acquired Pneumonia (VAP).

Initiatives implemented:

- Unit Council initiated in order to identify, prioritize, and address areas for improvement in the unit
- Staff created and presented educational efforts to address VAP and other areas for improvement
- Aggressively re-created sedation protocol in order to minimize use of sedation
- Education was presented regarding detrimental effects of over-sedation
- Created sedation level documentation with clarified documentation expectations
- Developed, educated and instituted a Progressive Mobility Protocol
- Implemented consistent focused leadership rounding
- Daily compliance reporting for SQI vent bundle including specific patient/nurse information
- Sedation Vacation procedure definitions developed in policy
- Consistently occurring individual staff accountability regarding Vent Bundle compliance implemented with consequences for non-compliance
- Implemented respiratory and nursing communication expectations regarding breathing trail and sedation vacation.
- Vent Bundle as applied to Tracheostomy patients defined in policy
- Celebrated success!
- Intensivist and Nursing Peer review of any VAP occurs monthly with focus on improving care and processes

As a result, Overturf reported that while in 2008 there were 36 VAP's, current incidence of VAP is at 5, and continues to trend in a downward manner. This is equivalent to 8 lives saved.

According to the MMWR Recomm Rep. 2004, the additional costs per episode of VAP is \$40,000. Based on this, Freeman's decrease from 36 cases last year (total additional costs are approximately \$1.4 million) to five this year (total additional costs are approximately \$200,000) has resulted in an estimated savings of \$1.2 million in VAP associated costs and increased length of stay.



The key to Freeman's success was listening carefully to the staff, being open to creative solutions, collaborating with all resources available, being extremely proactive, and increasing individual staff accountability. This has proven to be a profound, lasting and sustainable outcome for Freeman with the true win, of course, being eight lives saved.