
Rockdale Medical Center Improves Core Measure Performance

In 2005, Rockdale Medical Center, a 138 bed hospital in Conyers, Georgia, was struggling to comply with many of the core measures. They needed to streamline their processes and make their patient data abstraction consistent. The hospital decided to form a multi-disciplinary team and set a specific goal: to increase compliance to Appropriate Care Measures (ACM) and reduce their failure rate by more than 25%, thereby improving patient care quality by adherence to these evidence-based medicine measures.

In June 2006, representatives from the Georgia Quality Improvement Organization (QIO), Georgia Medical Care Foundation (GMCF), visited the hospital with a Power-Point presentation showing how much they had improved their Appropriate Care Measure performance, as well as highlighting the opportunity for improvement that still existed. Rockdale chose to focus on pneumococcal vaccination, the measure most affecting their ACM rate. GMCF provided Rockdale with information they could give to patients that stressed the importance of immunizations.

Rockdale decided to focus on pneumonia so closely because it had the lowest compliance level out of all the indicators they were monitoring. “It’s also a patient safety issue,” explains Quality Management Director Theresa Noel, “especially for patients over 65.” According to the Institute for Healthcare Improvement, streptococcus pneumoniae is among the leading infectious causes of illness and death worldwide for persons who have underlying chronic systemic conditions and the elderly. Pneumococcal screening and vaccination is indicated for persons 65 years and older because it is up to 75% effective in preventing pneumococcal bacteremia and meningitis.

A Rockdale task force made up of the Chief Nursing Officer, Medical Director, Pharmacy Director, an internal medicine physician, and Noel was assembled to develop a standardized approach for assessing vaccination status,

designing physician prompts to order vaccinations for appropriately indicated patients and authoring a protocol for treating community-acquired pneumonia patients. The form (approved by the Medical Executive Committee) was printed on blue paper and placed in front of pneumonia patients’ charts to gain the attention of physicians and nurses. They also addressed the immunization issue through their pre-existing emergency room software system by electronically tweaking the immunization screen so that this section must be addressed before the user exits the computer screen.

Noel explains that although they already had dedicated personnel onsite working on core measures, “it wasn’t a coherent function.” The team they assembled worked hard to change their procedures, using resources - both their existing software and adapted templates from their QIO and www.MedQIC.org – to create order sets reinforcing the new processes.

After 12 months of hard work and diligent tracking, trending and education, compliance levels rose from the baseline of 10% to 85% in screening and vaccinating their eligible patient population. This, in turn, positively impacted their overall ACM rate. When Rockdale started the initiative, their baseline compliance rate was 54.19% (failure rate of 45.81%). This increased to 91.8% compliance (failure rate of 8.2%) for 12 months, ending June 30, 2007. This calculates to an 82.1% reduction in failure rate, which can also be stated as a 69% increase in compliance rate.

Dr George Ishaak, Rockdale Chief of Staff, praised the team’s work, noting, “Our success with the pneumonia vaccine protocols has come as a result of a multi-disciplinary team effort that provided education about evidenced-based recommendations, incorporated valid clinical practices and improved our outcomes in order to render safe patient care.”

Stuart Downs, Chief Nursing Officer, also acknowledged the hospital's success: "By using education-based interventions to enlist the front line employees and having administrative support, we continue to provide sound practices linked with quality patient care to the population who depend on us to keep them safe."

Noel applauds the phenomenal success Rockdale has achieved, the result of "cooperation across the board." Their success has led to positive press, in addition to allowing Rockdale's CFO to negotiate better rates with commercial insurance companies. They recently were named one of the top four hospitals for compliance in the state of Georgia in 2008 and received a plaque for this honor from their QIO.



This material was prepared by the Hospital Interventions QIOSC, the Quality Improvement Organization Support Center for Hospital Interventions at the Oklahoma Foundation for Medical Quality, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. 4-706-OK-0708