



# Kentucky **SEPSIS** Consortium

## Virtual Meeting

**August 28, 2025**

*The Kentucky Hospital Association Sepsis Consortium is working with hospitals statewide to reduce the morbidity and mortality caused by sepsis.*

# Consortium Steering Committee Regional – Bluegrass District



Amanda Miller, BSN, RN,  
CPHQ  
Program Manager, Quality  
and Patient Safety  
St. Joseph London  
CHI St Joseph Health System



Tracy Louis MSN, RN-TN,  
CIC, CPPS  
AVP Infection Prevention  
Lifepoint Health



Louis Claybon, MD  
Physician Advisor  
St. Elizabeth  
Healthcare

# Consortium Steering Committee Regional – Cumberland District



Anthony Stumbo, MD  
Appalachian Regional  
Health



Christina Witt, RN  
Sepsis Nurse Navigator  
Ephraim McDowell  
Health



James J. Hensley  
System Director  
Infection Prevention  
Appalachian Regional  
Healthcare



Kim Elliott, RN  
Director of Quality/  
Sepsis Coordinator  
Paintsville ARH  
Hospital

# Consortium Steering Committee Regional – Ohio Valley District



Karan Shah, MD  
MMHC, FACEP  
Managing Partner, Physician  
Care Coordination  
Consultants (PC3)



Stacey Monarch  
Sepsis Coordinator  
Baptist Health Louisville

# Consortium Steering Committee Regional – Twin Lakes District



JoAshley Ross  
Sepsis Coordinator  
Baptist Health  
Paducah



Allison Rains, MD  
Emergency Department  
Baptist Health  
Paducah



Skyler Hughes, BSN, RN  
Sepsis Clinical Program  
Specialist  
Owensboro Health



Laura E White, BA, MHA  
Performance Improvement  
Engineer  
Med Center Health  
Bowling Green

# LTAC/Post Acute/Rehab Facilities



Nicki Shorr-Maxson, RN, BSN, CIC, CPHQ  
Manager of Quality and Safety  
Continuing Care Hospital  
CHI St Joseph Health



# Consortium Steering Committee Patient/Family Advocate



Darrell Raikes

# Today's Agenda



- Data Review
- Sepsis Awareness Month- what are our members doing to bring awareness?
- Progress in onboarding LTACHs into the Consortium including customized metrics.
- A stubborn metric and how to approach for the coming year
- New QI efforts around blood culture specimens-thoughts on operationalizing
- Continued work on bundle compliance!



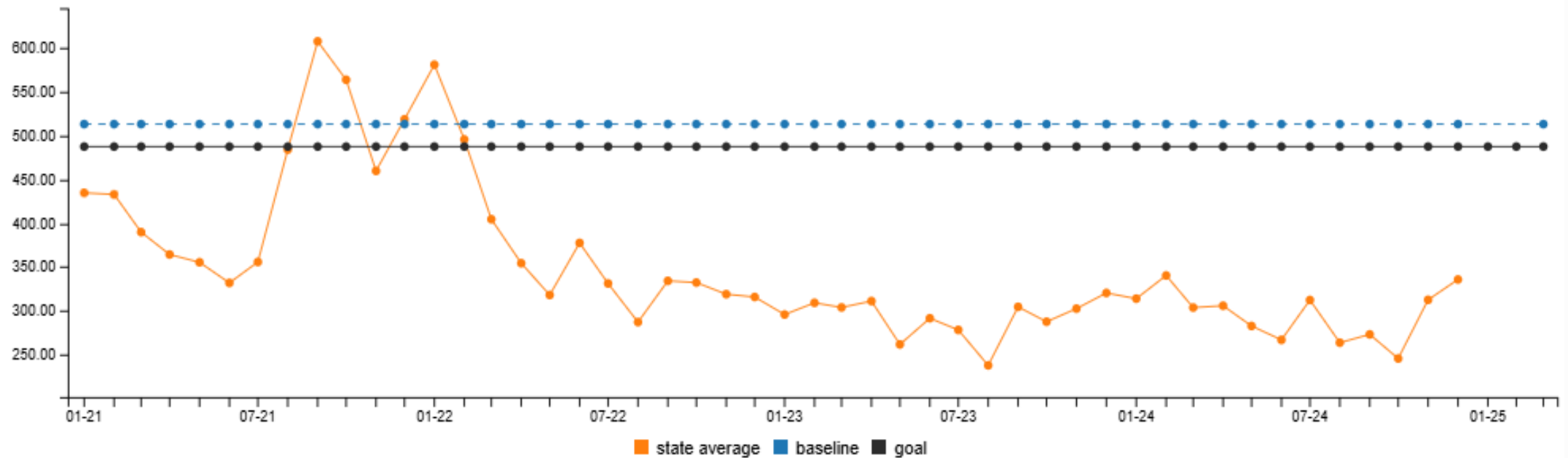
# Sepsis-1c Hospital-Onset Sepsis Mortality Rate



Kentucky Sepsis Consortium

## SEPSIS-1c Hospital-Onset Sepsis Mortality Rate

Goal Type: Decrease



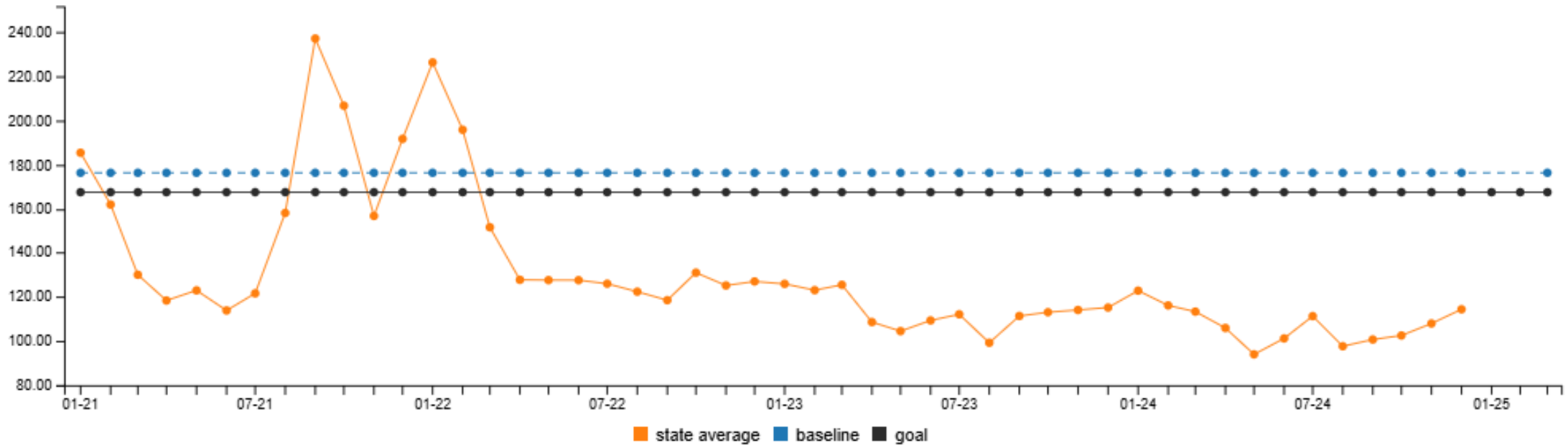
# Sepsis-1d Overall Sepsis Mortality Rate



Kentucky Sepsis Consortium

## SEPSIS-1d Overall Sepsis Mortality Rate

Goal Type: Decrease



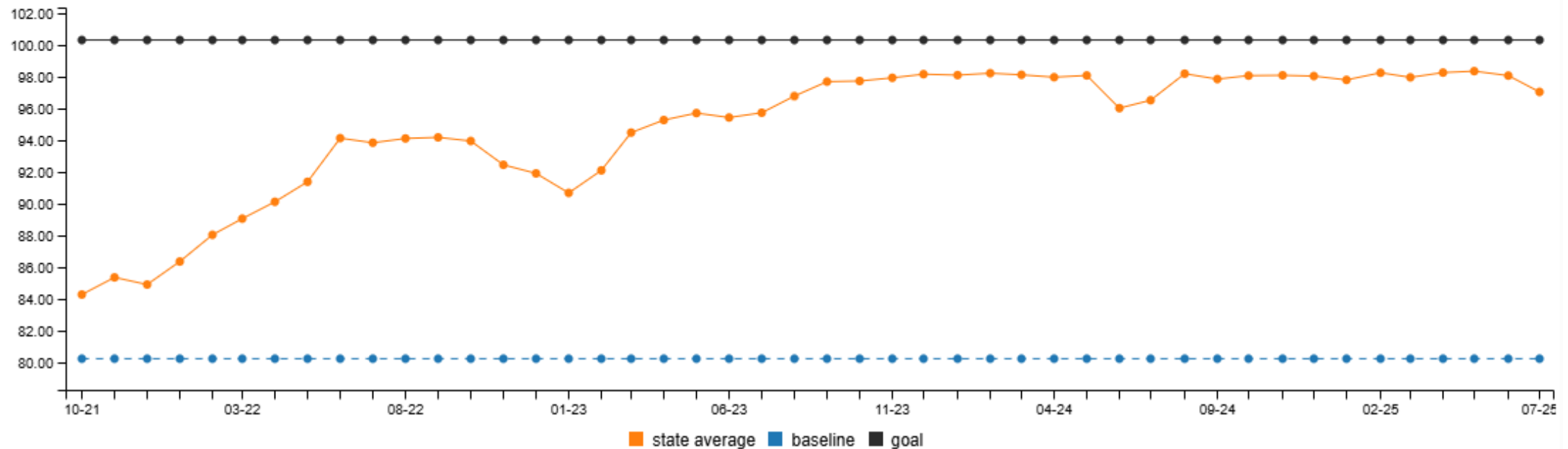
# SEPSIS-2c SEPSIS Screening Performed at Triage



Kentucky Sepsis Consortium

SEPSIS-2c SEPSIS Screening Performed at Triage

Goal Type: Increase



KQC Pull from 08/27/2025

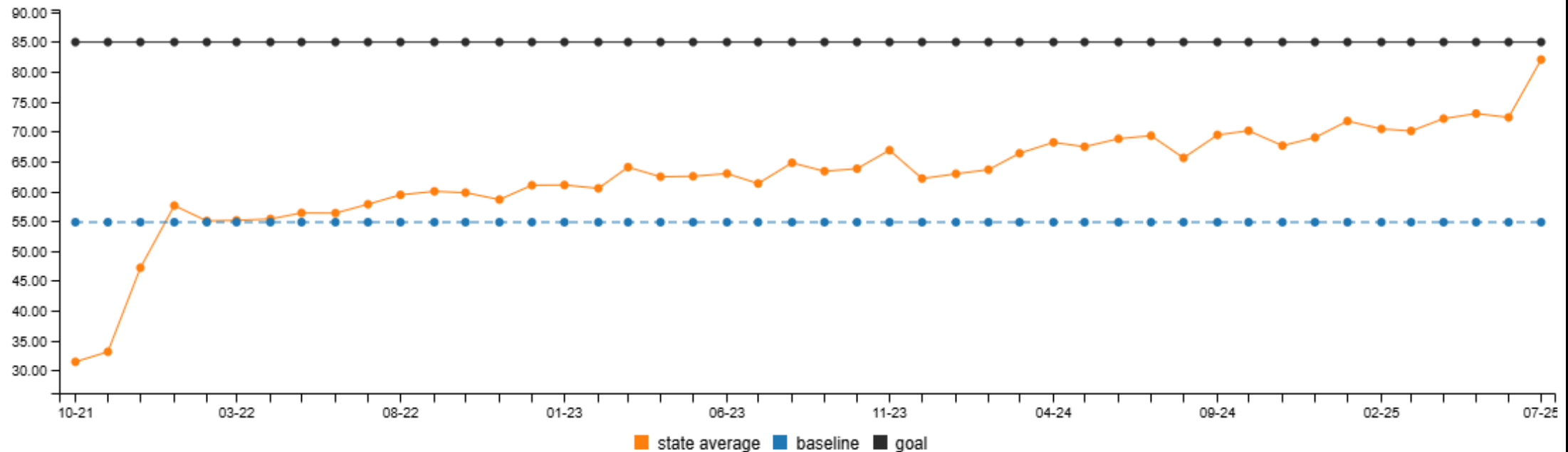
# SEPSIS-2d 3 & 6 Hour Sepsis Bundle Compliance



Kentucky Sepsis Consortium

## SEPSIS-2d 3 and 6-Hour Sepsis Bundle Compliance

Goal Type: Increase



\*Data in review

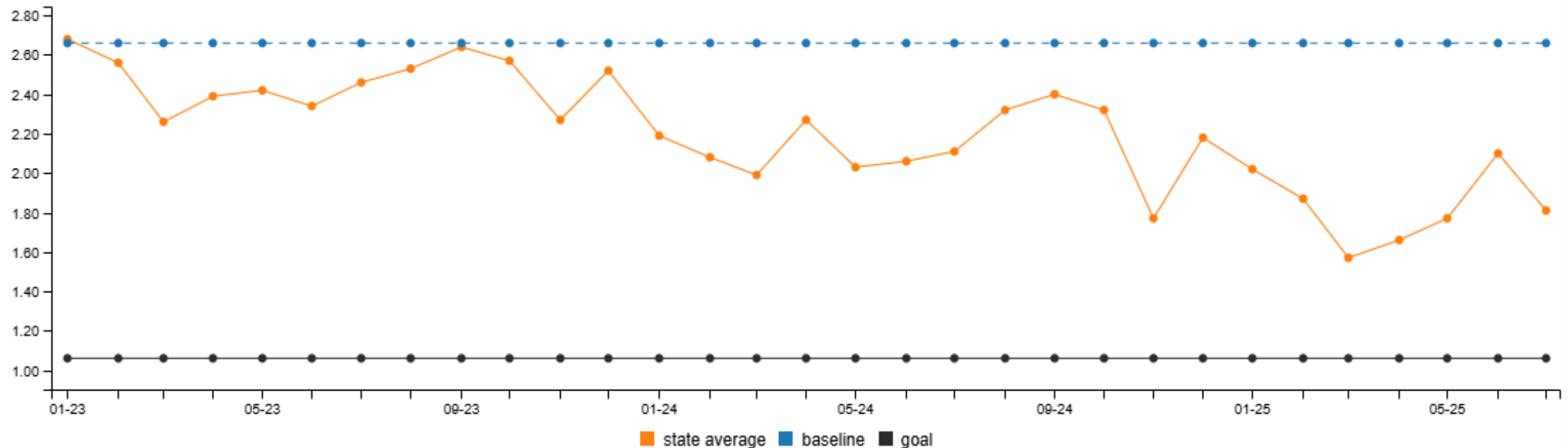
# SEPSIS-2e Blood Culture Contamination



Kentucky Sepsis Consortium

## SEPSIS-2e Blood Culture Contamination

**Goal Type:** Decrease



\*Data is in review

# Sepsis Awareness Month



- We have received our proclamation again this year!







# S.A.M.- Time for a pat on the back!!

- SEPSIS Act Reintroduced into Senate
  - Sen. Schumer Sen. Collins Senator Kim
- This act is great as a national platform, but we are actually surpassing the requirements outlined in it from a data perspective
- Additional Items in the Act
  - Funding for IPs, epidemiology support etc
  - Pediatric focus

<https://sepsis.childrenshospitals.org/change-package/tool-library/>

- CDC Core Elements education (AHA series was shared with this group)
- Exploring more outcome measures for CMS to use (BC Contam, HOBSI)

# Sepsis Awareness Month



- We have posters, badge buddies and ribbons that we can send upon request!
  - Please email Pamela Smith to let us know what (and how many) you would like. [psmith@kyha.com](mailto:psmith@kyha.com)
- What are you planning? PLEASE share!
  - Past ideas
    - Puzzles, games
    - Escape Rooms
    - Walks/runs
    - Simulations
    - Drawings, food, gifts

# Sepsis Alliance Resources



Are you ready to make a difference this [Sepsis Awareness Month](#)? Join advocates around the globe for the 9th annual Sepsis Superhero Challenge! 🦸 Run, walk, swim, dance, or participate in any other activity for a mile in September to raise awareness and honor those affected by sepsis.

However you choose to complete your mile(s), you will be one of the Sepsis Superheroes the world needs. Assemble your Superhero Squad now and get started planning your mile. Click the button below to register for free!

Don't know where to begin? No problem! We're here for you. Just email [hostrosky@sepsis.org](mailto:hostrosky@sepsis.org), and we'll provide all the support you need to kick off your challenge!

This year, we have new superhero swag that you can earn. Plus you could win a Garmin fitness watch just for registering! Learn more today by visiting: [SepsisSuperheroes.org](https://SepsisSuperheroes.org)

# CDC Resources



Anyone can get an infection, and almost any infection can lead to [sepsis](#). Sepsis is the body's extreme response to an infection and is a life-threatening medical emergency. If you or your loved one has an infection that's not getting better or is getting worse, act fast. Get medical care immediately.

September is Sepsis Awareness Month and CDC encourages patients and healthcare professionals to help raise awareness by sharing [Get Ahead of Sepsis](#) resources and learning how to protect themselves, their loved ones, and their patients from sepsis.

## Prepare for Sepsis Awareness Month:

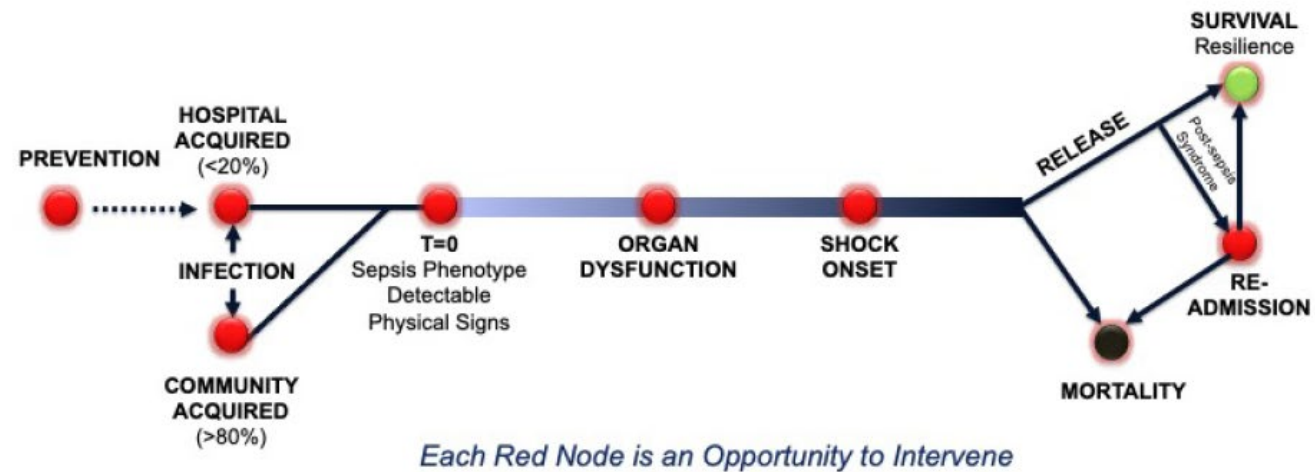
- Read about CDC's efforts and commitment to addressing sepsis in our latest [Safe Healthcare Blog post](#).
- Download CDC's [Get Ahead of Sepsis toolkit](#) to access communication tools and resources to make it easy for you and your organization to educate others about the early signs and symptoms and the need for prompt treatment of sepsis.
- Explore and share materials for [healthcare providers](#) and [patients](#) to educate and protect themselves and their loved ones from sepsis.
- Encourage implementation of the [Hospital Sepsis Program Core Elements](#), which CDC developed to help clinicians, hospitals, and healthcare systems improve programs that support the care of patients with sepsis.
- Help promote awareness by following CDC's social media channels— [Facebook](#), [X](#), and [Instagram](#) —and posting information and graphics about Sepsis Awareness Month using the hashtags #SAM2025 or #GetAheadOfSepsis. You can also support CDC's sepsis awareness work on social media by following Project Firstline on [Facebook CDC Firstline](#), [X CDC Firstline](#), and [Instagram CDC Firstline](#) and Antimicrobial Resistance on [X CDC AR](#).

This Sepsis Awareness Month, help save lives. Spread the word about how to get ahead of sepsis.

# Reminder of Opportunity Points



## Sepsis Intervention Points



[DRIVE \(hhs.gov\)](https://drive.hhs.gov/)

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# LTAC Integration



- **LTAC onboarding** ongoing- metric adjustments for this facility type are complete.
- Baseline will be Q4 of 2025 and data begin being collected Q1 of 2026.
- Next call - Sept 23 at 10-11am ET



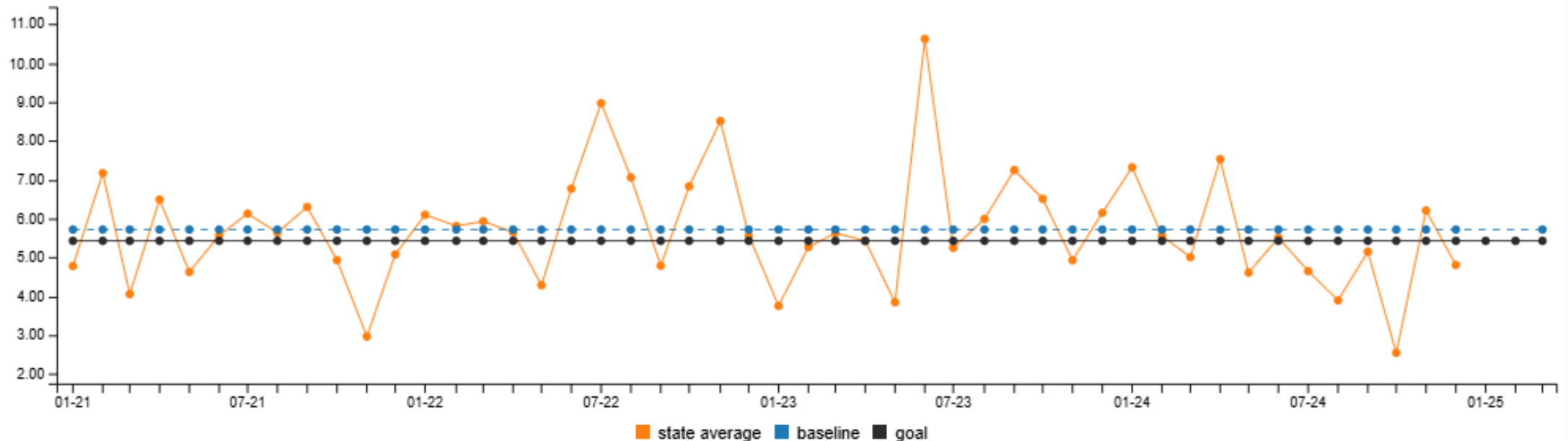
# Sepsis-1a Postoperative Sepsis (AHRQ-PSI 13)



Kentucky Sepsis Consortium

SEPSIS-1a Postoperative Sepsis (AHRQ - PSI 13)

**Goal Type:** Decrease



# National Data: Acuity up, LOS up 1 day



- Despite treating sicker and more clinically complex patients, hospitals have made significant gains over the past five years in improving survival rates for surgical patients and reducing post-surgical complications, according to a [recent report](#) from the AHA and Vizient.
- The detailed analysis found a 22% reduction in mortality risk for hospitalized surgical patients in the first quarter of 2024 compared with Q4 results in 2019.
- The significant improvement aligned not only with better performance on patient safety metrics such as reductions in infections and falls, but also with marked declines in three high-risk complications strongly linked to mortality:
  - **Post-operative hemorrhage.**
  - **Post-operative sepsis. (down 9.2%)\***
  - **Post-operative respiratory failure.**

\*Mentioned were CLABSI and CAUTI

# AHRQ Safety Program- CAUTI



The AHRQ Safety Program for Healthcare Associated Infection (HAI) Prevention, led by NORC at the University of Chicago and Johns Hopkins University, is now recruiting for a new cohort, the Catheter-Associated Urinary Tract Infection (CAUTI) cohort. This program is a multi-year effort where AHRQ will work with hospitals across the country to reduce HAI rates.

AHRQ is recruiting hospital intensive care units (ICUs) and non-ICUs for the CAUTI prevention cohort, slated to start in February 2026. This free 9-month program includes presentations about evidence-based CAUTI prevention strategies and enhancing teamwork and communication around HAI prevention. Participation in this AHRQ program will provide hospital units with technical assistance, coaching, webinars, and tools to support their infection prevention programs.

AHRQ will host a series of informational webinars that are a great way for hospitals to obtain more information and ask questions about the program. Here are the upcoming dates, times, and registration links, which are also on the program website, <https://safetyprogram4hai-prevention.ahrq.gov>:

- [Thursday, August 28, 1:30-2pm](#) EDT
- [Friday, September 5, 11:30-noon](#) EDT
- [Friday, September 12, 11:30-noon](#) EDT

[Click here to view the flyer for more information!](#)

# Protecting HRIP- outcomes we are sharing



- 98% of ED patients are being screened for sepsis
- Those screening positive are receiving timely treatment. Early recognition and treatment under HRIP has saved an estimated \$417M - \$1.1 Billion in costs from 2020-2024.
- In hospital deaths decreased by an average of 37 deaths/1000 discharges per month from 2021-2024.
- **\$50B Rural Health Fund**



# Post-Op Sepsis- Strategies

- Data review for rates of post-op sepsis via KQC
- Data review for rates of HAIs that we have in KQC
- Collecting rates INFORMALLY of HAIs we don't currently have in KQC
- Questions:
  - When your Sepsis Committee meets, do you review and gather what infection led to the sepsis?
  - Do you track/trend this data?
  - Have your HAIs improved over time?
  - How do those rates compare to other hospitals?
  - Has there been any drift in previous improvements?



# Post-Op Sepsis- Strategies

- Pre-op bundles in place
  - What do they consist of?
- Decolonization
  - Universal
  - Only MRSA colonized patients
  - All surgeries
  - Certain surgeries
- Topic specific webinars
- Individual coaching upon request and as appropriate



# New Opportunity Reminder



- **CMS Sepsis Case Abstraction Office Hours**
  - 30 minutes monthly
  - Deb Campbell and Billie Delauder will take questions and walk through complex cases
  - Billie has years of experience and will lead the case reviews and answer your questions
- **TARGET: Whoever at your facility abstracts the cases for CMS data or participates in that process**
- Next date- September 18 10:00am ET



# Blood Culture Specimen Collection

- Survey on ISDDs coming soon!
- Expansion of Blood Culture Specimen Collection Metrics- appropriate volumes
  - The “why”
  - Expert Guidance- Levi Petrey and Dr. Alan Junkins
  - Can we include your lab leader partners?
  - Considerations in data collection
    - Hospital specific
    - Attestation rather than rates

# Future topics



- Rapid Molecular Diagnostics
- Rapid Response Mechanisms
- We Are Screening, but Are We Doing It Accurately? (In Urgent Care?) (EMS?)
- Moving Upstream
  - Preventing sepsis through promoting vaccines
  - Educating our families and the community
- Staffing as a component of compliance barriers?
- I'm Going Home- Help Me Not Come Back (Functional and Cognitive Impairment Assessment at DC)



# Colleague Question

- Now that we are Sepsis Certified with The Joint Commission we want to make sure we are keeping up with the current Surviving Sepsis Guidelines and transition to 1 hour antibiotic times. We started tracking this data in April to get a baseline, but I am interested to see what others are doing. Does anyone have a goal for their number of patients that receive antibiotics within one hour? How much does it differ from their baseline? Any help you can offer would be great.
- *Christina Witt, RN*
- Lead Performance Improvement Reviewer, Sepsis Nurse Navigator  
Ephraim McDowell Health

# Next Steps



- Regular schedule  
4<sup>th</sup> Thursday of each month 1-2ET
- **Next: September 17:**
- [Risk of Sepsis? Bacterial or Viral? Decoding Host Response Biomarkers to Advance Infection and Sepsis Care](#) (Beckman Coulter Sponsored Webinar)
- [Sepsis Alliance Institute Open Forum](#) (Monthly Recurring Event)
- **September 24-25:**
- [Sepsis Alliance Summit](#) (RN CE Contact Hours)
  - For questions, contact **Deb Campbell** at **dcampbell@kyha.com**  
Vice President of Clinical Strategy and Transformation

