# Healthcare Organization Commitment

## Contact Details

**Name**  
Judith A. Shovel

**Phone**  
412-802-8072

**Email**  
shovelja@upmc.edu

**Position**  
Improvement Specialist

**Organization Name**  
University of Pittsburgh Medical Center (UPMC)

**Organization Address**  
Wolff Center at UPMC  
4601 Baum Blvd, 2nd floor, Suite 212  
Pittsburgh, Pennsylvania 15213  
US

## Commitment Details

**Commitment Name**  
Early Detection and Treatment of Sepsis to Reduce Hospital Mortality

**Participants**  
Amy Lukanski

What Patient Safety Challenge does your Commitment address?  
Challenge 9A - Early detection and treatment of sepsis for high-income countries

**Commitment Start Date**
How Many Hospitals Will This Commitment Represent
16

Commitment Summary
Sepsis affects over 800 patients in the UPMC System each month. The mortality rate in 2016 across the UPMC system for patients with sepsis was ranging between 18 and 20%. Sepsis was also the #1 readmission code at UPMC. Our hospital sites were at various stages of developing a programmatic approach to sepsis recognition and management, some had not yet started a sepsis initiative.

Commitment Description & Detail
At UPMC, we intend to decrease the sepsis mortality rate by focusing on Sepsis Prevention, Identification, and Clinical Management. These topic areas will be supported by system infrastructure to develop, share, and spread successful sepsis initiative strategies.

Action Plan
Prevention--support handwashing, aseptic technique and HAC prevention protocols; frailty assessment, and public facing awareness campaigns Identification--provider and staff education, patient/family/public education, and exploring electronic health record alerts Clinical Management--development of electronic health record tools that support the 3 and 6 hour sepsis bundles, creation of sepsis response plans at all hospital sites, transition of care handoff tools, discharge planning tools Infrastructure--creation of system sepsis leadership team and workgroups, reports to monitor mortality, SEP-1 compliance, use of electronic tools, communication of Quality Improvement projects across the system

Commitment Timeline
This is an ongoing initiative. Focus in the first year (2016) was on developing electronic and educational tools, in the second year (2017) was use of electronic and handoff tools and a systemwide sepsis campaign. Now in its 3rd year (2018), our focus is on each hospital finalizing their sepsis response plan, and creation of patient and public educational tools. We have been tracking mortality rate for the system and at each individual hospital, as well as sepsis powerplan usage and SEP-1 compliance.