

South Carolina Program Puts HAIs in the Crosshairs

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Most media attention in South Carolina today is focused on the incriminating photographs of Olympic hero Michael Phelps allegedly huffing [marijuana bong hits](#) and whether the cops in Columbia will press drug possession charges against the world's greatest swimmer.

Away from the center ring of that media circus, however, there is real news breaking in the Palmetto State, and it's coming from the healthcare sector. Midday today marks the launch of the South Carolina Healthcare Quality Trust, a statewide, voluntary hospital quality collaborative to reduce hospital-acquired infections and their associated costs.

SCHQT is an awkward acronym for a promising program that creates an information-sharing portal linking the state's 65 hospitals with one another and with the major academic and research medical facilities in the state, with an emphasis on using evidence-based practices that eliminate preventable HAIs.

Rick Foster, MD, a family physician and senior vice president of quality and patient safety for the South Carolina Hospital Association, says the free information-sharing portal will be an important new tool available to every hospital in the state, no matter how small or remote. "We're making this available to small and rural and critical-access hospitals, where they may have more limited resources from an infection control standpoint or may not have direct access to infectious disease physicians," he says.

SCHQT will allow hospitals to determine what's causing the HAIs and to find and promote preventive procedures. "We are one of the states that does have required reporting for HAIs, so there is more visibility in our state as far as where we are and where we have opportunities for improvement," Foster says. "We felt like we needed to find better ways to use the data that was being reported for quality research purposes and not just for public reporting."

In addition to SCHQA and its member hospitals and major health systems, the first-of-its-kind SCHQT ties in medical researchers from Clemson University, Medical University of South Carolina, and the University of South Carolina. SCHQT is coordinated through Health Sciences South Carolina, a private-public collaborative of the state's major universities and health systems, with the help of Premier Inc., the healthcare-purchasing network that has compiled a massive repository of clinical information.

According to Premier, about 1.7 million hospital patients in the United States acquired an HAI every year, costing the healthcare system more than \$6.25 billion. Premier says South Carolina hospitals spent nearly \$40 million last year in additional care costs because of HAIs, which increased the patient length of stay by more than eight days, or a total of 24,000 extra hospital days.

Jeanne Ward, president and CEO of Oconee Medical Center, in Seneca, SC, a 165-bed community hospital in the northwestern corner of the state, says SCHQT puts South Carolina among the vanguard in HAI control and gives rural hospitals a valuable new tool. "When you're in a smaller community, you don't have access to the epidemiologists at a larger research university or the information that some of the larger research universities have on line. It's a bit of a struggle for us," Ward says. "With this system we will be able to access all the research and best practices for preventing infections and for providing care for patients who do have an HAI, and we will be able to benchmark our performance against national and state standards."

While the focus today is on HAIs, Foster says SCHQT has the potential to provide evidence-based healthcare for other prevalent infirmities, like acute and chronic diseases such as diabetes, cancer, and heart and vascular diseases. "What we'd like to have is a broad scope of resources and tools that can help on the clinical quality and safety sides," he says.

Foster and Ward are right to be excited about SCHQT. Programs that link hospitals, share resources, and pool data will play an increasingly important role in healthcare delivery in this country as our population ages and our physician base shrinks. It's not a splashy story for the top of the news hour, but we should nevertheless stay tuned for further developments.

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