

Trust

When every person matters and every dollar counts,

Illinois Compensation Trust is working for you.

**Illinois
Compensation
Trust**

Welcome New Members!



IRMS Welcomes Rehabilitation Institute of Chicago (RIC) and UnityPoint Health

RIC, a rehabilitation hospital located in Chicago, Illinois, works with a network of alliance hospitals and clinics throughout Illinois and Indiana.

UnityPoint Health is a network of hospitals, clinics and home care services in Iowa, Illinois and Wisconsin. We are very excited to work with these new healthcare clients and look forward to helping them manage their workers' compensation programs. ■

Pharmacy Benefit Manager (PBM) Update

Beverly LaMont

Nine months into our PBM program we have some positive results to share with you. Clients in our ICT and IRMS programs have realized a savings of 31% (\$131,905.74) in prescription costs. Another benefit we receive with the PBM program are updates on the latest news from myMatrixx's clinical pharmacist. The following is a recent notice of significant changes the FDA has made regarding Opioids and benzodiazepines.

The FDA has made a significant change to the labeling of opioids and benzodiazepines.

After an extensive review of the latest scientific evidence, the U.S. Food and Drug Administration announced on August 31, 2016, that class-wide changes to drug labeling, including patient information, was being required for the opioid and benzodiazepine therapeutic classes because of serious risks associated with using

medications from these two classes at the same time. The FDA now requires "black box warnings" and patient-focused Medication Guides for prescription opioid analgesics, opioid-containing cough products and benzodiazepines— affecting close to 400 different products.



Medical literature suggests that benzodiazepine users are more likely to receive prescription opioids than non-benzodiazepine users, despite the well-known additive side effects that make the combination dangerous.¹²

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Pharmacy Benefit Manager (PBM) Update - Continued



Substance abuse treatment admissions resulting from co-abuse of benzodiazepines and narcotic pain relievers increased by 569.7% between 2000 and 2010, while admissions related to all other substance abuse decreased by almost 10% during this same period.³ Several studies⁴⁻¹¹ suggest that benzodiazepines may play a role in as many as 80% of unintentional overdose deaths involving opioids, primarily caused by respiratory depression.¹²

The FDA black box warning added to drugs in both of these classes indicates the seriousness of taking opioids and benzodiazepines at the same time. The intent of the warning is to inform health care providers and patients of the serious risks associated with combining these drugs—risks that include extreme sleepiness, respiratory depression, coma and death. This FDA action was one of a number of steps the agency is taking as part of their Opioids Action Plan, a program focused on reversing the prescription opioid epidemic that is currently occurring in the U.S.

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As your PBM, myMatrixx is actively identifying any claimants who are taking an opioid and benzodiazepine concurrently. An alert has already been added to our Alert, Review and Manage (ARM)® clinical intervention program. This will result in a letter being faxed to the prescriber on the same day a drug in one of the two classes is prescribed when a drug from

the second class is already being taken by the claimant. If both drugs are prescribed on the same day, this would also result in an alert to the prescriber. In the event of multiple prescribers for one claimant, all prescribers of drugs in the two classes will receive letters.

Our goal is to identify these claimants and reach the prescriber(s) immediately in order to prevent serious side effects.

- **Opioids** are powerful prescription medicines that can help manage pain when other treatments and medicines cannot be taken or are not able to provide enough pain relief. They are also approved in combination with other medicines to reduce coughing. Common side effects include drowsiness, dizziness, nausea, vomiting, constipation, and slowed or difficult breathing. Opioids also carry serious risks, including misuse and abuse, addiction, overdose, and death. Examples of opioids include oxycodone, hydrocodone, codeine, and morphine.
- Benzodiazepines are drugs prescribed to treat conditions like anxiety, insomnia, and seizures. Examples of these drugs include alprazolam, clonazepam, and lorazepam. Common side effects include drowsiness, dizziness, weakness, and physical dependence.

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Kelly Noonan, Director of Sales, myMatrixx*

As always, please feel free to reach out to Beverly LaMont or your contact at IRMS/ICT with any questions or concerns. ■

Living the Performance Improvement Standard

Joint Commission Officials Tell You How to Instantly Look Better (and Safer) in Their Eyes

If you work in a Joint Commission accredited facility, there's no doubt you try to impress Joint Commission surveyors every time they walk through your doors to inspect your hospital. It's a part of life as a hospital safety professional that every 18 to 39 months a team of surveyors will descend upon your facility and scrutinize the work of everyone who works there for three days or more.

Like any assessment, the survey is designed to catch mistakes, to help you fix errors, and to make things safer for your workers and ultimately, the care of your patients. What can you do to help improve your performance in the eyes of The Joint Commission? After all, the reason your hospital pays them thousands of dollars a year is to have them come in to your hospital and tell you what you're doing wrong. Wouldn't it be nice, if instead, they praised you for all the things you are doing right?

Officials for The Joint Commission gave rare insight into how hospitals can meet the requirements of the Performance Improvement (PI) standards during a session of the American Society of Hospital Engineers (ASHE) annual convention in Boston, Massachusetts in July.

"We encourage you to do the best you can with your compliance activities, not only for the sake of compliance, but because it's the right thing to do," says **Susan McLaughlin, MBA, FASHE, CHFM, CHSP**, managing director of MSL Healthcare Consulting Inc., Barrington, Illinois, and a former associate director of standards interpretation at The Joint Commission.

McLaughlin, along with **George Mills, MBA, FASHE, CEM, CHFM**, director of the Department of Engineering for The Joint Commission, were panelists for the session, "The Joint Commission Standards as a Framework for Performance Improvement," which covered performance improvement strategies.

Here are some suggestions for improvement straight from McLaughlin and Mills.

Get Out and About

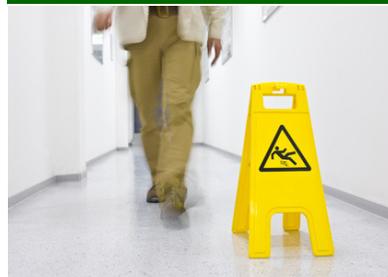
It cannot be stressed enough how important it is for you to get out and know the staff in the different departments in your hospital. If you expect your staff to help you run a safer ship, they need to know who you are. Too many times, employees complain that they



know who the CEO of their facility is, but the safety professional is known as the person who hangs out in the basement and holds safety meetings once in a while. The successful safety professional is proactive, and makes it a job requirement to make rounds every day, taking note of the different safety issues that inevitably pop up by just getting out and observing the environment.

"What do you see walking around your facility?" says McLaughlin. "You want to know so you can analyze and correct them. You would be surprised how many leave these tours to chance and don't schedule them. You're almost guaranteed to miss something."

Be Proactive About What You Find



You will inevitably find things wrong during your daily rounds. A fire door will be propped open, a contractor will have left a can of spray paint on a cabinet or a printer will be left in

front of an oxygen shutoff valve. Whatever you find should be dealt with immediately. If you wait until later to deal with it, you may forget about it and that will be the day the surveyors come and find it, and write you up for it.

"The key is to identify risks proactively," says Mills. "You look for deficiencies and take steps to fix them." Remember that The Joint Commission wants you to be aware of the safety hazards that exist in your facility. Not every hazard can be dealt with right away, but if you take note of the things that need to be fixed, and at least make a plan to deal with it, it shows initiative. If a surveyor spots a problem (e.g., your fire doors don't close properly), and you show the surveyor an existing plan to fix it within a certain time frame, you're likely to escape with a waiver instead of a violation.

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Living the Performance Improvement Standard – Continued

Use the Standards to Set a Goal

The Joint Commission, by establishing standards that its surveyors look for when they survey hospitals, practically gives you a script to follow to help you make your hospital safer. Life safety is a major area that surveyors



spend time with, so if your fire doors don't close, you need to focus efforts on that. If you know surveyors will look for improvement in the area of infection control, why not make that your focus? Establish a task force consisting of some of your epidemiologists, infection preventionists, physicians, and nurses, and identify your biggest problems. Then, make goals and take baby steps to reach them. These are the things that will impress a surveyor and establish you as a facility that is focused on improvement.

"If you say your goal is to create a safe environment, that's pretty lofty, isn't it?" McLaughlin says. "To say you will reduce infections by a percentage is better."

Be the Cheerleader



Improving performance has to be something you believe in, or it won't happen down the line. If your goal is to make things safer, post signs in the break room, develop staff liaisons and reward staff for little things that help you reach your goals.

"It seems so obvious and yet, we struggle with the concept," Mills says. "Performance improvement should result in improved performance. If you focus on performance improvement in your buildings, you'll be hitting home runs."

Keep Impeccable Records

Of course, it's one thing to say you want to get better, but if you don't have a plan in place, and documents that show the process as it happens, no one is going to believe you. That's



why experts say that as a safety professional, you need to document everything, make copies, and keep them within easy reach should a surveyor ask for them.

Did you hold a meeting with your task force to identify areas that need improvement? Make sure you have an agenda and attendance records available, as well as a signed record of people who were there. Did you fix the fire doors that don't close properly? Where are the receipts for the new equipment that was installed, and the contracts for the workers that performed the work? Always have a paper trail.

"Document those milestones, and when you achieve it, take credit for it," says Mills. "That way, you can say that you [were] a train wreck six months ago, but took steps to protect your patients."

There's nothing better than taking tips from your successful

Take Tips from Your Colleagues



counterparts to find out what you can do to make your facility better. If another hospital had success with a program designed to reduce worker injuries, or reduce infections, or to eliminate unnecessary alarms in the

patient wards, you should make note of what it did.

In this age of electronic networking, social media makes it easy to connect with your colleagues. The Joint Commission in July announced a collaboration with ASHE to create an online portal that provides online resources and tools for hospitals to be compliant with the eight most challenging Joint Commission Life Safety (LS) and Environment of Care (EC) standards.

The portal, which provides real-time information including comments from actual surveyors, is designed to focus on eight of the most common LS/EC standards cited by Joint Commission surveyors for noncompliance. Each standard will be highlighted in modules that are two months in length—sort of like an online learning course. ■

Check out the portal at www.jointcommission.org/topics/the_physical_environment.aspx for more information.

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► Trust newsletter

Trust newsletter is published by the Illinois Risk Management Services. Readers are encouraged to submit suggestions or questions to:

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