Regional Office
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Quality Improvement Organizations
Sharing Knowledge. Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

Atlantic Quality Innovation Network
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Preventing and Reducing Adverse Drug Events (PARADE)

Request for Technical Assistance

Adverse drug events (ADEs) have been identified as a major contributor to preventable hospitalizations and emergency department visits, particularly among the elderly. IPRO has developed an array of analytic processes and interventions for health systems and healthcare providers targeting the high risk medications (HRM) most frequently associated with preventable ADEs: anticoagulants, antihyperglycemics, and opioid analgesics.

IPRO's processes support improvement by:

- Identifying patients at highest risk of preventable adverse drug events
- Providing interventions and clinical tools to address priority concerns
- Evaluating system performance at baseline and serially

Healthcare providers are invited to request complimentary technical assistance from IPRO's Drug Safety team as an intervention option to improve patient care. IPRO's Drug Safety team will collaborate with committed providers and health systems under the following assumptions:

Expectations of Organizations Requesting ADE Technical Assistance

Participants will:

- Establish an internal team to share project responsibility for your organization.
- Commit to collaborate with IPRO for duration of the project.
- Commit to sharing data with IPRO to identify HRM management gaps and utilize this data to support HRM ADE prevention and reduction strategies.
- Commit to developing and implementing a sustainable quality improvement plan to address HRM ADE prevention and reduction.
- Implement and evaluate the impact of one or more intervention strategies.
- Participate in meetings, learning sessions, and IPRO coaching calls as needed.

Expectations for IPRO

IPRO will:

- Provide technical assistance to support serial data collection, analysis, and reporting.
- Facilitate interpretation and root cause analysis to identify priorities for intervention.
- Provide evidence-based clinical tools and educational resources for quality improvement interventions.
- Assist in determining effectiveness of interventions and support innovative strategies that sustain safety goals.

Notes

- *Participation by the organization is voluntary. The organization may withdraw from the project at any time by notifying IPRO in writing. It is expected that the organization will enroll in the project only if committed to work with IPRO for the duration of the project*
- *IPRO will provide the services described in this participation agreement free of charge to the organization*
- *With regards to patient confidentiality, QIOs such as IPRO, as CMS contractors, are considered health oversight agencies. The Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), under 45 CFR §164.501, allows such agencies access to protected health information without patient permission. Furthermore, the Social Security Act provides protections to providers who disclose information to the QIOs, as described in §1157 of the Act*

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Preventing and Reducing Adverse Drug Events

Request for Technical Assistance

By providing the following information you are requesting technical assistance on preventing and reducing ADEs from IPRO. Upon receipt the IPRO Drug Safety team will contact you within 5 business days.

Organization Name	Address

Contacts	Name and Title	Email	Phone	Fax
Primary				
Secondary				

Organization Representative Signature **Date**

IPRO Representative Signature **Date**

Email or Fax completed Request to: Anne Myrka, Anne.Myrka@area-i.hcqis.org; Fax: (518) 426-3418

For more information please contact:

Anne Myrka, RPh, MAT
Director, Drug Safety, IPRO
Phone: (518) 426-3300 ext 191
Fax: (518) 426-3418
Anne.Myrka@area-i.hcqis.org

This material was prepared by the Atlantic Quality Innovation Network/IPRO, the Medicare Quality Innovation Network Quality Improvement Organization for New York State, South Carolina, and the District of Columbia, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents do not necessarily reflect CMS policy. 11SOW-AQINNY-TskC.3-14-10.