

UC Patient Care WATCH

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www.UCPatientCareWatch.org

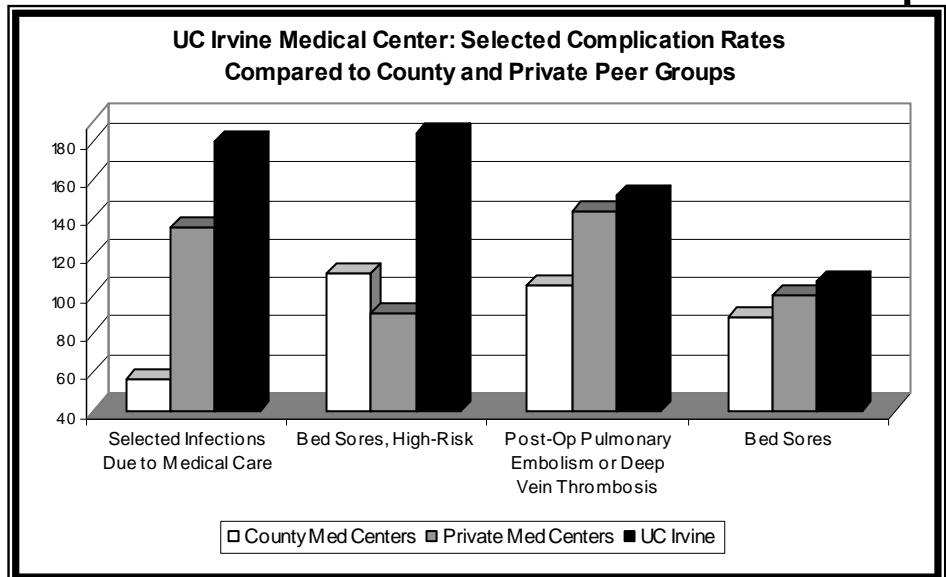
Why have UC Irvine Patients Experienced Higher Than Expected Infections Due to Medical Care?

UC Irvine Medical Center is generally viewed at a top-notch academic medical center, the only of its kind in Orange County. However, an analysis of 2005 data¹ that UC submitted to the State indicates that while patients at UC Irvine had lower rates of mortality than patients at other comparable hospitals², they had **higher overall rates of selected infections due to medical care, bed sores (including for high-risk patients), and post-op pulmonary embolisms (or deep vein thromboses).**³

Not only are these kinds of complications scary to experience for patients and their families, but they are of special concern because many of them are considered **“iatrogenic”**, meaning that they arise as a result of the actions of a healthcare provider.

Many factors may contribute to elevated iatrogenic complication rates. However, UC Irvine workers believe that below-market wages, a high stress environment and increasing benefit costs cause UC Irvine to lose experienced workers and create the need to rely on temporary staff in certain departments. We believe that all this can adversely affect the quality of patient care. We want to provide high-quality patient care. We need UC to do its part, by providing wages and working conditions that will allow us to focus on our patients.

NEXT WEEK: ... A closer look at UC's *US News & World Report* rankings ...



Brought to you by the 11,000 UC Patient Care Technical Employees at UC's Medical Centers represented by AFSCME Local 3299. AFSCME is currently in contract negotiations with UC. We are fighting for wages, benefits and working conditions which would close the gap with other medical centers. Please support us!

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No request to cease services or stop deliveries.

Footnotes: 1 - Based on an analysis of 2005 Office of Statewide Health Planning & Development (OSHPD) Inpatient Discharge Data Set commissioned by the union. UC attests under penalty of perjury that the data they submit to OSHPD is accurate and complete. Data has been risk-adjusted. 2 - To account for variations of patient mix, a peer group was defined that included 16 private medical centers and 10 county medical centers that also operate academic programs on their campuses. A list of the peer group can be found at www.ucpatientcarewatch.org/peergroup. 3 - In addition to those listed above, UC Irvine was out-performed by one or more of its peer groups in: major complications, accidental punctures or lacerations, intestinal infection due to clostridium difficile, re-opening of a surgical site, post-op pneumonia and post-op iatrogenic complications for cardiac, urinary and digestive surgery. UC Irvine's complication rate was better than its peers for laceration of a suture site, and post-op iatrogenic complications for respiratory and vascular surgery. Rate calculated as actual /expected.