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This man could save your life

A lauded health care reformer moves into the private arena

By FRANK GREVE
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WASHINGTON — Dr. Kenneth Kizer has been saving lives wholesale for most of his professional life, and if his latest ideas work out he might save yours.

Chances are you've already encountered his approach. Kizer, one of America's leading health care reformers, is a big fan of, among other things:

- Bar codes to unfailingly match hospital and nursing home patients to their medicines.
- Public release of hospitals' "care quality" report cards.
- Computer-aided medical records research to determine which treatments and drugs — and which doctors and hospitals — perform best.

Now, Kizer is taking his knowledge from the public arena to the private, where many health care innovations are taking place.

Kizer, 54, a burly and brilliant workaholic — driven, some colleagues say, by being orphaned at age 12 and surviving in a succession of foster homes — isn't alone in pushing these initiatives.

But in the vanguard of medical reformers, the hyper-driven Kizer has a unique credential: He's already delivered in a big arena.

Moreover, Kizer did it, in the 1990s, in what was then the most widely disparaged hospital chain in the country: the 173-hospital system run by the Department of Veterans Affairs.

The department now provides veterans with "significantly better" health care than Medicare's fee-for-service program, according to a comparison published in the New England Journal of Medicine in 2003.

More recently, Kizer has created and run a Washington group of more than 300 physician, hospital, insurer and consumer representatives whose purpose is to agree on specific standards for measuring medical care quality.

This month, Kizer is leaving the National Quality Forum to put his work at the VA to use in the business world. He is taking over a small health information-technology company in California whose goal is to cut the price of electronic patient record-keeping by using the free — and publicly available — electronic system the VA devised.

The company's work could quicken the pace of change.

About 10 percent of U.S. hospitals keep patient records electronically in a dynamic form that enables doctors to diagnose, monitor and manage their patients.

The difference that sophisticated health IT can make is clear in VA hospitals. When laptop-bearing personnel enter a patient's room, they can review not just the patient's latest data but the medical record of every VA medical encounter the patient has had since the mid-80s.

If the patient has been stricken while traveling, records can be transmitted instantly to or from the VA hospital the patient normally uses. Records also can be shipped to consulting VA physicians or downloaded by care-monitoring loved ones if the patient agrees.

VA doctors also enter drug orders on their computers. If they've missed a potential allergic reaction or a dangerous drug combination, the computer flags a warning. When the hospital pharmacist fills the prescription, the system spits out a strip of bar code that goes on the medicine, saying what it is, who it's for, when it's to be given, at what dose, and by whom.

G. Sue Kinnick, a VA hospital nurse from Topeka, Kan., who died last year, came up with the VA's bar code system while returning a rental car in Seattle.

Drug-related mistakes contribute heavily to the medical errors that kill an estimated 44,000 and 98,000 Americans annually. So why not use the same hand-held reader with which attendants matched cars and renters to help nurses match bar-coded drugs with a bar-coded ID on the patient's wrist?

Kizer, while the VA's undersecretary for health in 1994-99, loved the idea.

"It wouldn't have gone anywhere without upper management's leadership," said Russell Carlson, the nurse-consultant for the bar code system now in place in every VA hospital.

THE WORKAHOLIC

Kizer's first daylong job was at age 5 or 6, when he earned three cents a quart for picking strawberries. He also ironed for his mother, who took in laundry.

His father, a factory worker in Boring, Ore., outside Portland, died of a heart attack when Kizer was 6 and the two were shopping. His mother committed suicide when he was 12, leaving five children as wards of the state.

The early loss of his parents and some nasty aspects of foster care, Kizer said, "made me more serious ... made me want to be successful."

Kizer won honors as a pre-med student at Stanford, where he supplemented his scholarship with jobs as an emergency room orderly, library clerk and fireman. He graduated from UCLA medical school, married his high school sweetheart and served as Naval medical officer in Hawaii.

Kizer became head of California's emergency medical care authority in 1983 and, later, the state's Department of Health Services. There, at the age of 33, he led the most successful anti-smoking campaign in any state's history and cracked down on nursing home abuses.

Kizer has kept his family's home in Sacramento, commuting there from Washington on weekends, often writing medical journal articles on the plane.

For recreation, he likes to dive in the South Pacific. Friends who have gone along say he relishes swimming with sharks.

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