Delivering Quality with Distinction

2012 Quality Excellence Achievement Awards Compendium

Recognizing Illinois Hospitals and Health Systems Leading in Quality and Transformative Health Care

IHA Illinois Hospital Association

The Institute for Innovations in Care and Quality

Delivering Quality with Distinction

2012 Quality Excellence Achievement Awards

OVERVIEW

The Illinois Hospital Association's (IHA) Institute for Innovations in Care and Quality (The Institute) second annual Quality Excellence Achievement Awards recognizes and celebrates the achievements of Illinois hospitals that are committed to transforming Illinois health care through innovative approaches and best practices.

From 67 submissions representing 40 hospitals, awards were presented to a total of eight hospitals in two categories: urban and rural/critical access. The two award recipients and six finalists, who were honored at IHA's annual Leadership Summit, were selected by a panel of 30 nationally-recognized quality improvement leaders based on their achievement and progress in advancing one or more elements of the Institute of Medicine's six aims for improvement:

- Safety
- Effectiveness
- Timeliness
- Efficiency
- Equity
- Patient-centered care

To share these initiatives among members, The Institute has published this compendium that provides a synopsis of all award entries along with contact information for additional details. The compendium receives national exposure by being featured annually on the Hospitals in Pursuit of Excellence (HPOE), an AHA affiliate, website.

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Call for Entries

May 2013

Be sure to watch for this opportunity to be recognized and celebrated for your hospital's achievements in advancing patient care.

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www.ihaqualitycare.org

Award Recipients

Award category—Rural/Critical Access

Katherine Shaw Bethea Hospital, Dixon

Streamlining the Intake Process of Cardiac Patients in the Emergency Department

Award category—Urban

OSF Healthcare System, Peoria

Improving Obstetrical Care Through Organizational Collaboration

The following pages contain summaries of the award recipients' projects.

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Award Finalists

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AWARD FINALISTS

Rural/Critical Access category

Gibson Area Hospital & Health Services, Gibson City
Reduce Medication Errors Through the Implementation of Computerized Physician Order Entry (CPOE), Medication Bar Coding and Smart Pump Technology

Graham Health System, Canton
Intensive Care Management

St. Mary's Hospital, Centralia
Reducing Readmissions CQI+ Team–Implementing Change Through the IHA Project RED Collaborative

Urban category

Advocate Hope Children's Hospital, Oak Lawn
Utilization of an Interdisciplinary Team Approach for the Care of Infants with Hypoplastic Left Heart Syndrome (HLHS)—The Ideal Quality Improvement Collaboration

Alexian Brothers Health System, Arlington Heights
Improvement in Patient Safety and Quality of Inpatient Care Through Appropriate Blood Product Management

Holy Family Medical Center, Des Plaines
Collaborative Approach to Reduce Health Care-Acquired Clostridium difficile Infection Rate in a Long-Term Acute Care Hospital (LTACH)

The following pages contain summaries of the award finalists' projects.

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Readmission Prevention

Hospital/System:	Proctor Hospital, Peoria
Contact:	Laurie Brown, RN, MS Adm. Director of Quality, Safety & Medical Staff Affairs 309-689-8641 laurie.brown@proctor.org
Project Title:	*"Reduce CHF Readmissions by 20%" and Therefore Decrease the Hospital's Financial Risk as Part of Healthcare Reform, Increase Compliance with CHF Core Measures and Provide a Structure to Reapply Similar Strategies Across All Diagnoses*
Summary:	Data suggests that the hospital has a three-year (2006-2009) CHF readmission average of 24.2%. Using Six Sigma DMAIC methodology, the hospital implemented key intervention strategies and tools to reduce readmissions including: (1) developing a Discharge Bundle (checklist, new outpatient testing order form, patient home medication reconciliation sheet, prescriptions, etc.); (2) creating a patient education and discharge folder; (3) executing follow-up phone calls; (4) revising case management documentation; (5) revising CHF patient education materials; (6) utilizing a root-cause assessment tool for seven-day readmission cases; (7) creating MD CHF admission order set; and (8) partnering with the Agency on Aging for post-hospitalization community services. During the first three quarters of the control phase, the hospital averaged 13.11% CHF readmissions. This can be compared to 16.71% for the top decile of Crimson cohort hospitals for the same time period.
Website:	http://www.proctor.org