



## THE 2014 QUALIS HEALTH AWARDS OF EXCELLENCE IN HEALTHCARE QUALITY

Since 2002, Qualis Health has presented the annual Awards of Excellence in Healthcare Quality to outstanding organizations in Idaho and Washington. Winners have demonstrated leadership and innovation in improving healthcare practices, reflecting the very best in healthcare quality improvement. The awards recognize those who demonstrate outcomes to the three broad aims outlined in the National Quality Strategy:

- Better healthcare (for individuals)
- Better health (for populations)
- Reduced costs through improvement

Winners of the 2014 Idaho Awards of Excellence in Healthcare Quality in Idaho are selected by a panel of Idaho expert stakeholders. Awards are presented at the Idaho Annual Patient Safety and Quality Improvement Conference on April 3, 2014.



(l-r) Kelly McGrath, MD, Medical Director, Qualis Health; Sherry Parks, RN, MS, NEA-BC, Vice President and Chief Nursing Officer; Aline Lee, RN, Director of Patient Safety/Regulatory Compliance; J. Robert Polk, MD, MPH, VP and Chief Quality Officer; Clint Childs, RN, BSN, MBA, Vice President of Patient Care Services & Chief Nursing Officer; Leslie Ayhens, RN, Executive Director Health Resource Center, Quality and Regulatory Compliance; Ryan Lund, MPH, Patient Safety Coordinator; Ron Folwell, RN, BSN, Director of Quality; Linda Rowe, Director, ID Care Transitions & Patient Safety, Qualis Health; Jonathan Sugarman, MD, President & CEO, Qualis Health

### SAINT ALPHONSUS HEALTH SYSTEM, BOISE, IDAHO

#### **Safety: Every Patient, Every Time. Building a Culture of Safety**

*Submitted by: Ryan C. Lund, MPH, Patient Safety Coordinator*

The Saint Alphonsus Health System (SAHS), members of Trinity Health/Catholic Health East Health System, began their Culture of Safety journey in April of 2011 when leadership and key team members attended a kick-off collaborative meeting at Duke University. Since that date, the SAHS has implemented innovative and creative solutions to improve the culture and perception of safety, evaluated through use of the Agency for Healthcare Research and Quality (AHRQ) Hospital Survey on Patient Safety Culture. Interventions included a daily safety huddle and staff communication of safety issue outcomes, unit-specific action plans based on safety culture results, and engagement of staff at all levels. Following these interventions, the SAHS has seen their AHRQ scores go from the 25th-50th percentiles to the 75th-90th percentiles when compared to over 1,100 hospitals across the country. They have also seen decreases in mortality, patient falls with injury, pressure ulcers, medication errors, and infection rates. Current literature shows an association between an improved culture of safety and improvements such as these.



(l-r) Kelly McGrath, MD, Medical Director, Qualis Health; Mary Walters, RN, Clinical Supervisor Aimee Baerlocher, Infection Prevention Manager Gregory Janos, MD, Children's Hospital Executive Medical Director; Belinda Day, BSN, RN, CPN, Director, Pediatrics; Linda Rowe, Director, ID Care Transitions & Patient Safety, Qualis Health; Jonathan Sugarman, MD, President & CEO, Qualis Health

## ST. LUKE'S CHILDREN'S HOSPITAL, BOISE, IDAHO

### Protecting the Most Vulnerable: Reducing CLABSIs in a Pediatric Hematology/Oncology Population

*Submitted by: Aimee Baerlocher, MPH, CIC, Infection Prevention Manager*

In 2011, St. Luke's Children's Hospital's focus and priority was directed to the pediatric hematology/oncology population to decrease Central Line Associated Bloodstream Infections (CLABSIs). Healthcare associated infections (HAIs) are devastating and costly events for patients and healthcare systems. Pediatric hematology/oncology patients are a vulnerable population for infections and delicate care is needed when providing care to patients and their central lines. The hospital facility implemented a CLABSI bundle (a grouping of best practices that individually improve care, but combined can lead to great improvement and patient care) to improve overall standardized care of central lines and to ultimately improve patient safety and outcomes. In addition to the bundle implementation and audits, St. Luke's engaged patients and families by educating them on the bundle elements and on what they should expect for central line care both in the hospital and in outpatient settings via a wallet card. What started as a focus on a pediatric inpatient department has now spread to other nursing departments within the system and to the ambulatory clinic, affecting the outpatient population. Currently, St. Luke's has gone over one year (487 days) without a CLABSI in their pediatric hematology/oncology inpatient population.

## ST. LUKE'S MAGIC VALLEY MEDICAL CENTER, TWIN FALLS, IDAHO

### Antimicrobial Stewardship

*Submitted by: Courtney Willis, RN, BSN, Infection Prevention Practitioner*

Antimicrobial stewardship is a key component of patient safety and quality improvement. The Antimicrobial Stewardship program, aka the "Bug Squad," at St. Luke's Magic Valley meets formally twice a week and is frequently consulted outside of the meetings. The function of this multidisciplinary committee is to concurrently review antibiotic usage for appropriateness and for drug-bug mismatches, to initiate appropriate de-escalation, and to monitor for the misuse of antibiotics. The Bug Squad also reviews sepsis cases, HAIs and other infectious trends in the hospital. The goal of the Bug Squad is to optimize patient outcomes, reduce costs and complications, and monitor and manage antimicrobial resistant bacterial strains. On average over the past 6 months, there have been 54 antibiotic changes per month implemented following recommendations by the Bug Squad. Evaluation and interventions to ensure appropriate antibiotic use improves patient outcomes by ensuring appropriate antibiotic coverage, reducing costs and reducing both multidrug resistant organisms in the community and reducing potential side effects for patients. As a result of their interventions, the committee estimated patient cost savings of \$50,000 to \$55,000 per month over a twelve month period.



(l-r) Kelly McGrath, MD, Medical Director, Qualis Health; Amy Bearden, RN, MSN, NEA-BC, FACHE, Chief Nursing Officer; Janie Palmer, Pathology Technical Lead; Courtney Willis, RN, Infection Prevention; Linda Rowe, Director, ID Care Transitions & Patient Safety, Qualis Health; Jonathan Sugarman, MD, President & CEO, Qualis Health

## HONORABLE MENTION IS ALSO AWARDED TO:

- Kindred Nursing and Rehabilitation-Mountain Valley (Kellogg, Idaho): Reduction of Falls
- St. Luke's Hospital (Boise, Idaho): ICU Progressive Mobility



## ABOUT QUALIS HEALTH

Qualis Health is a national leader in improving care delivery and patient outcomes, working with clients throughout the public and private sector to advance the quality, efficiency and value of healthcare for millions of Americans every day. In Idaho, Qualis Health serves as the Quality Improvement Organization (QIO) for the Centers for Medicare & Medicaid Services (CMS) and the Health Information Technology Regional Extension Center (REC) for the Office of the National Coordinator for Health Information Technology (ONCHIT), and provides case management and utilization management services to the Idaho Department of Health and Welfare, Division of Medicaid. For more information, visit [www.QualisHealth.org](http://www.QualisHealth.org).