2012 Quality Excellence Achievement Awards Compendium

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

INA Illinois Hospital Association

The Institute

for Innovations in Care and Quality

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.

IHA IIInois Hospital Association



2012 Quality Excellence Achievement Awards

Call for Entries May 2013 Be sure to

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





Care and Quality

2012 Quality Excellence Achievement Awards



Award Recipients





DELIVERING QUALITY WITH DISTINCTION

2012 Quality Excellence Achievement Awards



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.





2012 Quality Excellence Achievement Awards



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.





2012 Quality Excellence Achievement Awards



Process Improvement–Clinical

Hospital/System:	Adventist Bolingbrook Hospital, Bolingbrook
Contact:	Jamie Rowden Director of Quality 630-312-6056 Jamie.rowden@ahss.org
Project Title:	<i>Peripherally Inserted Central Catheter (PICC)-Associated Deep Vein Thrombus (DVT) Reduction</i>
Summary:	The PICC team was created in March 2010 after the facility had documented an increase in PICC-associated DVTs. The team's goal was to review how PICC lines were inserted and maintained. After comparing the process to evidence-based medicine, a number of steps were changed including the manner of insertion and daily maintenance. Educators worked with nurses on how to properly maintain PICC lines. The quality department tracked each PICC line inserted to ensure the PICC was properly placed, the correct orders were entered, arm circumference was measured daily, and proper maintenance—such as flushing—was completed. As a result, the PICC line-associated DVT rate decreased from 14% at its highest month to 2-3% currently.
Website:	http://www.keepingyouwell.com/abh

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