Delivering Quality with Distinction

2012 Quality Excellence Achievement Awards Compendium

Recognizing Illinois Hospitals and Health Systems Leading in Quality and Transformative Health Care
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.
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.
Award Recipients
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.
Award Finalists
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.
Project Title: Enhancing Hospital Safety Culture Through Use of Defect Huddle Incident Management System

Summary: Data from the AHRQ Safety Culture Survey indicated the need to improve mechanisms for incident capture, analysis, prioritization, and action. Based on Lean/Six Sigma methodology, the Defect Huddle was designed. It is a weekly 30-minute multidisciplinary team meeting where safety events, including near misses, medication errors, harm events, complaints/grievances, sentinel and/or regulatory issues, are presented and rated on a harm scale.

The resulting summary score indicates the improvement response: (1) localized departmental Plan-Do-Study-Act; (2) Multidisciplinary Failure Mode Effects Analysis (FMEA); or (3) formal Root Cause Analysis. The Defect Huddle also serves as a tracking repository of safety improvement efforts through conclusion.

Data from the first six months of Defect Huddle indicate that 97 safety events were reviewed, with 62% triaged as appropriate for FMEA, 31% for department PDSA “just do it” corrections and 7% for formal root cause analysis.

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