

# DELIVERING QUALITY WITH DISTINCTION

## 2012 Quality Excellence Achievement Awards Compendium

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



**The Institute**  
for Innovations in  
Care and Quality



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## 2012 Quality Excellence Achievement Awards



### OVERVIEW

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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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# Award Recipients

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### AWARD RECIPIENTS

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#### **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

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#### 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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### Infection Prevention

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Hospital/System: Resurrection Medical Center, Chicago

Contact: Heather Murphy  
Director, Performance Distinction  
773-774-8000 ext. 6210  
[HMurphy@reshealthcare.org](mailto:HMurphy@reshealthcare.org)

Project Title: *UV-Light Disinfectant Study*

Summary: A hospital study was conducted to evaluate the practicality and effectiveness of UV-light as a germicidal disinfectant after the Environmental Service (EVS) terminally cleaned confirmed C. diff patient rooms at discharge.

Various swab collections of room surface areas took place during a control phase, baseline testing phase and testing phase, to prove or disprove the use of UV-light adjunct to EVS cleaning.

Results showed that tested rooms had experienced a meaningful colony count reduction when using UV-light in C. diff rooms. However, procedures must be clearly defined, as well as the workflow process, to avoid impeding bed availability and turn-around time. Additional EVS cleaning process improvements were made to complement the UV-light disinfectant.

Website: <http://www.reshealth.org>