

AWARDS

QUALITY LEADERS AWARDS

The CAPH/SNI Quality Leader Awards (formerly called the Management Excellence Awards) are designed to showcase and recognize the innovative and creative system improvements achieved by California's public hospitals and health systems. Since its inception in 1987, this awards program has acknowledged more than 300 such improvements among our members.

The goals of the program are to:

- Encourage the sharing of effective strategies and best practices that address pressing clinical and operational issues and/or advance community health;
- Recognize dedicated and talented professionals in public hospitals and health systems;
- Showcase the unique and creative approaches that California's public hospital systems have taken to carry out their missions and address the health care needs of the communities they serve.

This year's awarded programs address five critical focus areas: Coordinated Systems of Care, Improvements in Chronic Disease Management, Political Clout and Community Support, Efficiency and Operational Flow, and Reducing Health Care Disparities.

Kaiser Permanente Clinical Systems Development Award

This award, sponsored by Kaiser Permanente, was first awarded in 2006 to recognize a public hospital or public health system that has demonstrated improvement in integrating several parts of its delivery system in order to provide better quality service and more efficient care. The award recognizes a key principle of the Kaiser Permanente-CAPH/SNI partnership, now in its sixth year: the sharing of strategies and resources between the partner organizations to improve access to quality care.

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TOP HONORS

Coordinated Systems of Care

Santa Clara Valley Health and Hospital System
Primary Care Redesign

The Santa Clara Valley Health and Hospital System (SCVHHS) devised a new, robust primary care system to enhance the quality of outpatient care and improve chronic disease management for its patient population. In bringing about a true paradigm shift, SCVHHS sought to move from a system that was reactive and inaccessible to one that was proactive, easily accessible, patient-centric and outcome driven.

SCVHHS launched "Primary Care Redesign" as a pilot at its Silver Creek Clinic in South San Jose, with a program called "The TEAM Vision: **T**ouches with Patients, **E**lectronic Resource Utilization, **A**ctivation of Patients and Staff, and **M**etrics **E**valuation. Among the numerous successes: almost all patients are seen within two days for acute visits; screening for breast cancer, osteoporosis and other diseases has increased substantially; and there has been a notable decrease in blood sugar and LDL ("bad") cholesterol levels for diabetic patients.

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Improvements in Chronic Disease Management

LAC+USC Healthcare Network

Enhancing Asthma Care - The Breathmobile Program

This program sought to overcome key barriers to high quality care for children with asthma, and to measure the outcomes of the project. Asthma is the most important chronic illness of childhood, affecting one out of every 10 children. Half of these children are undiagnosed, yet they use Emergency Department resources just as frequently as those with known asthma.

The Breathmobile Program, a collaborative effort between the Asthma and Allergy Foundation of America (AAFA) - California Chapter, the Los Angeles Unified School District (LAUSD) and the Los Angeles County Department of Health Services, began in 1995 and has since grown to four Breathmobile units serving over 90 school and three Comprehensive Health Centers. This program fundamentally restructures asthma care from reactive rescue care to proactive preventive care, and has dramatically reduced asthma-related morbidity and costs. Children who have remained engaged in the program for one year have had a 76% reduction in hospitalization, a 62% reduction in ED visits and more than a 75% reduction in missed days of school from asthma.

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Political Clout and Community Support

Alameda County Medical Center
Save Our Safety Net Response Program

Alameda County Medical Center (ACMC) initiated a coordinated program that has increased its political effectiveness and helped it gain an independent voice in Washington and Sacramento. Under its new leadership team, ACMC entered a new era of active political engagement. The Center also has reached out to the community through a growing "Team ACMC" presence at community events and targeted outreach to community stakeholders.

The Save our Safety Net Response Program is based on systematically engaging all levels of the organization – including the Board of Trustees, workforce and community stakeholders – to participate and giving them the necessary tools to do so. As a result of this effort, ACMC was well positioned to assume a leadership role in the national battle to extend the moratorium to keep harmful Medicaid rules from taking effect. ACMC stepped forward to become the lead plaintiff in the ultimately successful lawsuit, *Alameda County Medical Center v. Michael O. Leavitt*, brought by a coalition of hospital groups to stop \$5 billion in Medicaid funding cuts to safety net hospitals.

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HONORABLE MENTION

Efficiency and Operational Flow

Arrowhead Regional Medical Center
Improving ED Access

Arrowhead Regional Medical Center (ARMC)'s retooling of its emergency department triage process has resulted in its ER's wait times being reduced by about half, and its diversion hours being decreased as well. The effort was prompted by an urgent need to improve patient flow at a time when ER visits were increasing at a rapid rate due to continued population growth in San Bernardino County. In the past six years, ER visits at ARMC nearly doubled, from 60,000 in 2002 to a projected total of 120,000 this year.

A revamped flow system has improved service to patients and heightened efficiency among the staff. The key to the system's success is the *reversal* of the triage process, so that the type of care a patient needs is determined first, before the full registration process begins. In the new patient flow system, an experienced intake registered nurse is seated in the emergency room lobby and greets and assesses the patient upon entry to the ED. Based upon the severity of the patient's condition, the patient is escorted for immediate medical attention and placement in a bed or to a triage cubicle if the situation is less acute.

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HONORABLE MENTION

Improvements in Chronic Disease Management

University of California Davis Health System
Chronic Disease Management

The University of California Davis Health System (UCDHS) has created a Chronic Care Model to provide a more effective system of delivering patient-centered care. A dedicated Chronic Disease Management (CDM) team has worked “across silos” to connect resources from within the health system to improve chronic disease management. Its efforts have included adapting electronic medical records to produce action reports that guide interventions and monitor outcomes, implementing new methods of delivery care such as planned visits, and developing an extensive education program that helps patients to better manage their own care. UCDHS has tracked the outcomes of these new activities and has seen marked improvements in measures of disease control, as well as in patients’ understanding of their condition and satisfaction with the care they’ve received. The CDM team is expanding the program to all 12 primary care network clinics.

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HONORABLE MENTION

Reducing Health Care Disparities

San Francisco General Hospital
Baby Friendly Hospital Initiative

This program aimed to increase the initiation and continuation of breastfeeding among new mothers who delivered their babies at San Francisco General Hospital (SFGH). Knowing that breastfeeding rates were lower among many of the populations cared for at SFGH, and that breastfeeding was healthier than bottle-feeding for both baby and mother, the hospital sought to implement the World Health Organization (WHO)'s Baby Friendly Hospital Initiative.

After undertaking a hospital-wide improvement project involving more than 300 nurses and physicians, SFGH became the first hospital in San Francisco to receive WHO's Baby Friendly certificate. Expectant and new mothers receive extensive support and assistance from before they give birth to after they take their baby home. Before the new program began in 2002, 81% of new mothers initiated breastfeeding and 70% were still doing so when they were discharged from the hospital; by the end of 2007, more than 95% of new moms initiated breastfeeding and 89% were breastfeeding exclusively when they left the hospital.

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Kaiser Permanente Clinical Systems Development Award

San Mateo Medical Center
Outpatient Medication Safety Program

San Mateo Medical Center (SMMC) created a new program to help ensure that the patients at its 11 outpatient clinic sites are taking the correct medications at the correct dosage. Frequently, there is a discrepancy between the medical provider's intended medication regimen and how the patient actually ends up taking the medications at home. Because many of SMMC's patients have one or more chronic diseases, the potential for multiple discrepancies is significant.

The program asks patients to bring their all of their medications to every clinic visit, so that medical providers can review these medications in their original bottles and identify and correct any inconsistencies. Several means are used to remind patients to bring their medications with them. High-risk patients are supplied with a preprinted medication transportation bag to make that task easier. Since the program began, the percentage of surveyed patients who brought their medications with them has increased significantly while the percentage of medication discrepancies has gone down. The distribution of medication bags to the highest risk patients has been particularly successful in reducing inconsistencies.

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