

2006 KHA QUALITY AWARD RECIPIENTS

Kentucky hospitals have made great strides in improving quality of care in our hospitals. **The KHA Quality Award, Honoring Leadership and Innovation in Patient Care Quality, Safety and Commitment**, was developed in 2006 to honor and spotlight those hospitals excelling in patient safety and quality efforts. Fourteen hospitals from around the state submitted outstanding applications for the inaugural award, but the efforts of these four hospitals stood out.

- **The 2006 recipient of the KHA Quality Award in the Critical Access Hospital Category is St. Elizabeth Medical Center in Grant County**

There is a significant body of evidence that mechanical reperfusion therapy is superior in reducing the rates of death, reinfarction, intracranial bleeding, reocclusion of the infarct-related artery and recurrent ischemia. Current national guidelines suggest that a less than 90 minute door-to-balloon time is associated with improved in-hospital clinical performance and better mortality and morbidity outcomes. St. Elizabeth Medical Center staff identified an opportunity to improve patient outcomes for the S T elevated myocardial infarct (STEMI) patients.

The purpose of this project was to decrease the door-to-balloon time for patients with STEMI who present to any St. Elizabeth Emergency Department (ED) by implementing clinical process improvements that met or exceeded the standard of less than 90 minutes.

- **The recipient in the under 100 beds category is Rockcastle Hospital**

The Heart Failure/Pneumonia Team (HF/PN) is an ongoing project. The project was charged with improving patient outcomes for patients admitted with Heart Failure (HF) and Pneumonia. The team reviewed standards of care related to management of Heart Failure and Pneumonia patients. The team continues to work with the HF/PN measures. Acute Myocardial Infarction was added to the team in November 2005. The team will monitor the indicators related to AMI and identify opportunities for improvement. In January 2006, a new Chest Pain pathway was approved by Medical staff based on team recommendation.

This project is significant to the organization because of the improvements realized in outcomes of care associated with HF and Pneumonia. Benefits have been realized in Discharge Education Rate, Pneumonia, Smoking Cessation Education Rates, LVF Assessment Rates, Pneumovac, and Influenza Screening and Vaccination Rates.

- **The recipient in the 100 to 250 beds category is St. Claire Regional Medical Center**

St. Claire Regional Medical Center planned to purchase, implement and operate a Picture Archive and Communication System (PACS) as an essential component to transform from film-based diagnostic imaging services to integrated digital imaging services. A well-planned digital upgrade of the imaging modalities and PACS implementation will enable several efficiencies and better resource utilization within the Diagnostic Imaging department and in the hospital's clinical areas. The full extension of a film-less environment will transform the entire lifecycle of diagnostic images, from acquisition to archival and interpretation.

As an innovative project by a regional health care provider in a rural area, the PACS project has allowed St. Claire to take an eleven county service base and provide the same benefits to all patients seen at the hospital, as well as in the Primary Care setting. This inter-disciplinary project has provided an advanced awareness and a better understanding of our patient care delivery system and its impact across an entire community. Multiple disciplines within the St. Claire family have bonded together as a team to enhance and promote diagnostic imaging capabilities.

- **The recipient in the greater than 250 beds category is Saint Joseph Healthcare**

A thirteen-month medication safety initiative was undertaken to reduce the potential for medication errors and harmful adverse events (ADE) with anticoagulants. The project began in 2004 with a prospective surveillance project followed by chart reviews and GAP analysis. Six Sigma tools were used to create process-based safety changes. Staff utilized team meetings and program reminders to support project efforts.

The critical processes for anticoagulation safety and clinical tool kit created by this program may help other health care institutions provide safe and effective care with anticoagulant medications. Additionally, this information is timely in light of the proposed 2007 National Patient Safety Goals by JCAHO. Specifically Goal 3E states that hospitals should "reduce the likelihood of patient harm associated with the use of anticoagulation therapy."