Meet Hospital Leaders
to learn about their quality improvement initiatives that impact your constituents

APRIL 3, 2019 | 11 AM – 2 PM | State Capitol, 1ST Floor
We re-engineered the behavioral health model in our medical clinics with:

- A staffing plan to reflect clinical need/patient population
- Clinicians working at the top of their license
- Short-term care model with rapid access
- Emphasis on motivational interviewing skills
- Expansion and standardization of clinical scale usage
- Primary care coverage

**Patient, Family & Community Impact**

- 67% increase in patient volume
- Increases access to care
- Provides family-focused care

**Saving Lives, Saving Dollars**

**INVESTMENT**

$3.5k

**STAFF TIME & TRAINING**

**SAVINGS**

$31k

**NEW STAFFING PLAN**

Launch date: January 2018
OSF HealthCare
Peoria

BASENATE DISTRICT 46  HOUSE DISTRICT 92

BEHAVIORAL HEALTH

Improving access to behavioral health services

We provide 24/7 access to online cognitive behavioral therapy to help patients manage depression, anxiety and stress. The service includes integrated support from OSF behavioral health staff. Any adult living within an OSF service area can access the service at no cost.

Patient, Family & Community Impact

Provides free access to care
Enhances support to patients
Improves patient outcomes

Saving Lives, Saving Dollars

INVESTMENT
$150k/yr
LICENSES, STAFF & ADS

SAVINGS
$250k/yr
THERAPY COSTS

Launch date: April 1, 2017
Improving mental health outcomes by providing affirmative treatment

We developed two affirming programs and increased awareness and support of mental health issues:

- **Polaris**: An acute care unit that provides a safe place for gender/sexual minority adolescents to receive affirming care
- **Worthy**: A track in our inpatient hospital that serves adolescents who are at risk of or have been forced into sex trafficking

**Patient, Family & Community Impact**

- Addresses mental health in an affirming way
- Increases awareness and acceptance
- Improves patient outcomes

**Saving Lives, Saving Dollars**

**INVESTMENT**

$92k

**STAFF TIME & TRAINING**

**SAVINGS**

$201k

**FEWER READMISSIONS**

Launch date: July 2018
We established a community mental health consortium to improve access and resources. The consortium:

- Hired a full-time Psychiatric ARNP and Licensed Clinical Social Worker
- Secured a $600k grant for a new comprehensive mental health nurse navigator program
- Partnered with a substance abuse treatment provider to establish care in the community

**Patient, Family & Community Impact**

- Increases access to care
- Improves quality of care
- Enhances community resources

**Saving Lives, Saving Dollars**

**INVESTMENT**

$170k

**CLINICAL STAFFING**

**SAVINGS**

$213k

**FEWER ED VISITS**

Launch date: April 2017

Genesis Medical Center Aledo

Aledo

SENATE DISTRICT 37    HOUSE DISTRICT 74
Improving patient transfer time to the Behavioral Health Unit

We implemented the following interventions:
- Adding a Behavioral Health Intake Department
- Introducing a stoplight system to determine when a patient requires discharge, further assessment or immediate action
- Involving intake clinicians in assessing patients and making a recommendation to physicians regarding patient disposition

Patient, Family & Community Impact

- Reduces patient wait time before transfer
- Provides a prompt plan of care
- Increases access to care

Saving Lives, Saving Dollars

INVESTMENT
$200k
STAFF & EQUIPMENT

SAVINGS
$693k
INCREASED ADMISSIONS

Launch date: September 2018
We took a multidisciplinary approach to improving mental health services in the ED, implementing:

- 2019 National Patient Safety Goal 15.01.01 to improve the accuracy of patient identification
- Columbia-Suicide Severity Rating Scale
- Crisis intervention training
- Community crisis intervention services
- Additional behavioral health staff

Patient, Family & Community Impact

- Comprehensive mental health screening in the ED
- Refers patients to needed services
- Promotes suicide prevention

Saving Lives, Saving Dollars

INVESTMENT

$2.7k

STAFF TIME & SOFTWARE

SAVINGS

$5.9k

ED BOARDING

Launch date: January 2019
Centralizing access to behavioral health beds for rapid acceptance

We centralized access to behavioral health beds to facilitate rapid acceptance of patients across greater Chicagoland to:

- Decrease wait times for acute behavioral health services
- Reduce emergency department (ED) hold times
- Decrease avoidable days on medical floors
- Serve more patients in need of behavioral health services

Patient, Family & Community Impact

- 500 more patients served from April – Dec. 2018
- Increases access to inpatient behavioral health services
- Improves patient experience

Saving Lives, Saving Dollars

INVESTMENT
$804k

STARTUP COSTS & STAFF

SAVINGS
$1.5m

REduced TIME IN ED

Launch date: April 2018
A team at Riveredge Hospital implemented:
- Enhanced discharge process
- Bridge appointments for all patients at discharge
- Collaborative Safety Plan review with patient and support person
- Community resources to address barriers to care
- “Caring calls” to patients within 72 hours of discharge
- “Caring cards” to patients after discharge

**Saving Lives, Saving Dollars**

**INVESTMENT**

$123k

**STAFF TIME & SUPPLIES**

**SAVINGS**

$1.7m

**FEWER READMISSIONS**

Launch date: September 2016

**Patient, Family & Community Impact**

- Improves care transitions for patients and families
- Reduces patient harm
- Improves quality of care
The trauma program at Hartgrove serves the health and well-being of children, adolescents and adults by addressing the impact of traumatic stress. To enhance patient care, we implemented a multidisciplinary team approach using Trauma-Focused Cognitive Behavioral Therapy, an evidence-based treatment that helps individuals recover after trauma.

Patient, Family & Community Impact

- **Improves quality of care**
- **Helps patients recover from trauma**
- **Enhances family and community well-being**

**Saving Lives, Saving Dollars**

**INVESTMENT**

$260k

**EDUCATION & TRAINING**

**SAVINGS**

$550k

**FEWER READMISSIONS**

Launch date: October 2018
Deploying a system-wide suicide screening and support process

A multidisciplinary team developed a system-wide screening, assessment and response structure for patients who present as suicidal. The team implemented:

- Columbia-Suicide Severity Rating Scale (C-SSRS) in the emergency department via mobile behavioral health units
- C-SSRS for inpatient and outpatient services
- Environmental assessments and safety procedures

Patient, Family & Community Impact

- Increases access to care
- Improves patient, family and community safety
- Improves quality of life

Investment

$12k Staff time and supplies

Saving Lives, Saving Dollars
Launch date: January 2018
Improving emergency department throughput for adult patients

To improve patient flow in the emergency department (ED), we implemented:

- Five-day Kaizen event with a multidisciplinary team
- Weekly huddles and executive sponsor meetings
- Communication and sustainment plans
- Posting of consistent process controls
- MobiLab integration and mobile communications
- Radiology tracker and point-of-care testing

Patient, Family & Community Impact

- Increases access to care
- Improves patient safety
- Improves patient satisfaction

Saving Lives, Saving Dollars

INVESTMENT

$5k
HARDWARE & EDUCATION

SAVINGS

$227k
INCREASED ED VOLUME

Launch date: April 9, 2018
Implementing hemoglobin A1c point-of-care testing in primary care

Multidisciplinary teams at Northwestern Medical Group collaborated to implement point-of-care testing for hemoglobin A1c within all primary care practices to ensure patients with diabetes are receiving:

- Consistent and appropriate disease management
- Timely and efficient treatment plans
- High quality of care

Patient, Family & Community Impact

- Improves quality of care
- Allows for timely treatment
- Improves patient experience

Saving Lives, Saving Dollars

INVESTMENT $373k

DEVICE & SUPPLY COSTS

SAVINGS $60k

STANDARDIZED DEVICES

Launch date: June 2018
Reducing readmissions among patients with COPD

Our Readmission team for COPD patients implemented:
- Daily interdisciplinary discharge rounds
- Patient education prior to discharge led by the Pulmonary Rehabilitation team
- Follow-up phone calls the 2nd, 15th and 25th days post-discharge using a scripted template
- Partnership with skilled care facilities for hands-on expertise and instruction

Patient, Family & Community Impact

- Provides personalized education and follow-up
- Improves quality of care
- Improves patient experience

Saving Lives, Saving Dollars

INVESTMENT
$14k/yr
STAFF SALARY

SAVINGS
$172k/yr
FEWER READMISSIONS

Launch date: May 2017
Reducing skilled nursing utilization to achieve Medicare benchmarks

Staff from Rehabilitation Services, Care Management and Nursing collaborated to:
- Educate team members on Medicare skilled nursing admission guidelines
- Align Nursing and Physical Therapy on mobility status
- Schedule therapy sessions for inpatients
- Implement standard language

As a result, we reduced skilled nursing facility utilization by 8.8%.

Patient, Family & Community Impact

- Improves patient safety
- Reduces patient costs
- Improves quality of care

Saving Lives, Saving Dollars

INVESTMENT
$15k
EDUCATION & TRAINING

SAVINGS
$605k
FEWER ADMISSIONS

Launch date: April 2017
Patient turning is the cornerstone of pressure ulcer prevention, but studies show turn protocols are rarely adhered to or sustained. We deployed a wearable sensor system in all nursing units to improve repositioning frequency and quality. The system helps staff communicate repositioning needs to reinforce teamwork and care coordination.

**Patient, Family & Community Impact**

- **Improves patient safety**
- **Improves quality of care**
- **Improves patient satisfaction**

**Saving Lives, Saving Dollars**

**INVESTMENT**

$20k

**WEARABLE SENSORS**

**SAVINGS**

$293k

95% FEWER ULCERS

Launch date: September 2018
Improving patient outcomes after surgical recovery

We implemented Enhanced Recovery After Surgery protocols that resulted in:

- Multidisciplinary approach to post-op care
- Medications to reduce likelihood of ileus, an intestinal obstruction
- Reduction in narcotics prescribed
- Reduced length of stay (2 days average per patient)
- Multidisciplinary patient education

Patient, Family & Community Impact

- Reduces length of stay
- Improves patient outcomes
- Reduces recovery time

Saving Lives, Saving Dollars

**Investment**

$1.9k

**Staff Time**

**Savings**

$143k

**Length of Stay**

Launch date: January 2016
Reducing avoidable utilization of hospital services

We reduced avoidable readmissions and emergency department visits by:
- Increasing access to providers for at-risk populations, e.g. long-term care
- Triaging acute conditions
- Increasing wellness and prevention
- Improving transitions of care
- Improving timeliness of communication
- Improving provider/caregiver collaboration

Patient, Family & Community Impact
- Increases access to care
- Improves health and well-being
- Enhances family involvement

Saving Lives, Saving Dollars

INVESTMENT
$125k
SAVINGS
$15.5k PER READMISSION

Launch date: March 2016

Illinois Health and Hospital Association
We screen all patients on admission to assess if the patient qualifies for end-of-life care or requires an acute care admission. As part of this process, we assess patients’ health goals and determine the appropriate care model for each individual patient.

**Patient, Family & Community Impact**

- **Reduces length of stay**
- **Provides hospice benefits sooner**
- **Improves patient experience**

**Saving Lives, Saving Dollars**

**INVESTMENT**

$5k

**STAFF TRAINING**

**SAVINGS**

$75k

**FEWER READMISSIONS**

Launch date: July 2017
Identifying postpartum patients with urgent medical needs

A multidisciplinary team developed the teal band project to help emergency medical services and emergency departments recognize and respond quickly and accurately to postpartum patients with urgent medical needs, including:
- Severe hypertension/preeclampsia
- Late postpartum hemorrhage
- Infection or sepsis
- Thrombosis
- Postpartum depression

Patient, Family & Community Impact

- Decreases morbidity and mortality
- Increases awareness of postpartum risks
- Decreases patient costs

Saving Lives, Saving Dollars

INVESTMENT
$50
BANDS & EDUCATION

SAVINGS
$25.5k
FEWER COMPLICATIONS

Launch date: January 2019
We standardized functional testing and treatment of rehabilitation patients in our transitional care unit (TCU) using Lean Six Sigma (LSS) methodologies. Changes include:

- Functional testing on admission
- Dedicated physician for each TCU patient
- Updated communication and education resources
- Functional testing repeated every 7 days

**Patient, Family & Community Impact**

- Optimizes length of stay (LOS)
- Improves patients’ functioning at discharge
- Improves quality of care

**Saving Lives, Saving Dollars**

<table>
<thead>
<tr>
<th>INVESTMENT</th>
<th>$12,000</th>
<th>LSS TEAM &amp; SUPPLIES</th>
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<tr>
<td>SAVINGS</td>
<td>$164,000</td>
<td>OPTIMIZED LOS</td>
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Launch date: June 2018
Reducing emergency department (ED) wait times to ensure treatment

We improved patient flow through bedside registration. This process includes:

- **Initial registration**: Creating the patient’s account with name and date of birth, then taking the patient directly to an ED exam room
- **Final registration and triage**: Finalizing registration at bedside to promote timely access to care and increase patient satisfaction

**Patient, Family & Community Impact**

- Increases access to care
- Reduces patient and family wait times
- Increases patient satisfaction

**Saving Lives, Saving Dollars**

**INVESTMENT**

$5.2k

**TRAINING & EQUIPMENT**

**SAVINGS**

$87.9k

**INCREASED ACCESS**

Launch date: September 2018
Coordinating care through a perioperative surgical home

Our Surgical Care Team collaborated to enhance care coordination of surgical patients by:
- Providing a unified message to the patient
- Developing and implementing Enhanced Recovery After Surgery (ERAS) Protocols
- Developing disease-specific protocols

Patient, Family & Community Impact

- Improves patient health before surgery
- Reduces length of stay (LOS)
- Manages chronic conditions in the community

Saving Lives, Saving Dollars

INVESTMENT
$20k
LEARNING COLLABORATIVE

SAVINGS
$250k
REDUCED LOS

Launch date: May 2018
Reducing readmissions among high-risk psychiatric patients

A pilot project between Riveredge Hospital and IlliniCare Health provides:

- On-site care coordinator from IlliniCare
- Collaborative discharge planning
- Advocacy for clinically appropriate levels of care
- Integrated aftercare plans to address barriers to treatment compliance
- Face-to-face health risk assessments with hospitalized patients

Patient, Family & Community Impact

- Improves access to care for patients and families
- Reduces readmissions and length of hospital stays
- Improves well-being of patients and family

Saving Lives, Saving Dollars

INVESTMENT
$57.4k
COORDINATOR SALARY

SAVINGS
$1.3m
REDUCED STAYS

Launch date: January 2017
Decreasing total wait time for hospice admission

Decreasing the time for patients to get into hospice allows for greater access to services, enhances patient satisfaction and improves quality of life. To reduce the wait time, we:

- Revised the admission documentation process
- Implemented admission documentation standards
- Adopted a model of social workers assisting with hospice admissions

Patient, Family & Community Impact

- Decreases patient costs
- Increases patient satisfaction
- Improves quality of life

Saving Lives, Saving Dollars

INVESTMENT
$12k
TEAM & MATERIALS

SAVINGS
$19k
PATIENT OUTCOMES

Launch date: October 2017
We improved care coordination between rehabilitation, nursing and system hospital resources to meet the needs of our community. We also implemented:

- Testing to measure efficacy of treatment
- Nursing notes identifying the level of physical assistance required
- Comprehensive, multidisciplinary team meetings

**Patient, Family & Community Impact**

- 88% local provision of care
- Improves quality of care
- Improves rehabilitation outcomes

**Saving Lives, Saving Dollars**

**INVESTMENT**

$12k

**TEAM & MATERIALS**

**SAVINGS**

$965k

**PATIENT OUTCOMES**

Launch date: May 2018
We partner with community nursing programs to deliver a coordinated program to reduce readmissions among patients with Chronic Obstructive Pulmonary Disease (COPD). The program includes:

- Patient education
- A COPD Wellness Board
- Scheduled outpatient follow-up
- A call-back program

**Patient, Family & Community Impact**

- Engages patients in goal setting
- Provides care to ensure well-being post-discharge
- Improves patient experience

**Saving Lives, Saving Dollars**

**INVESTMENT**

$283k

**STAFF & SUPPLIES**

**SAVINGS**

$18m

1.5k READMISSIONS

Launch date: December 2016
SSM Health Good Samaritan Hospital
Mt. Vernon

INFECTION PREVENTION

Reducing sepsis mortality

A multidisciplinary team implemented the following:
- Predictive analytics tool to recognize sepsis
- Revised sepsis order set to align with current guidelines
- Weekly review process with individual feedback, including praise for preventing severe sepsis/septic shock and education for bundle noncompliance
- Physician and nursing staff education

Saving Lives, Saving Dollars

Investment
$24k

Education/Build Time

Savings
$3.2m

Length of Stay

Launch date: January 8, 2018

Patient, Family & Community Impact

- 28% decrease in inpatient mortality
- Reduces inpatient length of stay
- Improves quality of care

Launch date: January 8, 2018
Reducing catheter-associated urinary tract infections (CAUTIs)

Our interventions include:
- Intensive training on catheter insertion and maintenance skills
- Twice-a-day review of catheter necessity and prompting for early removal and use of alternative devices
- Increased use of intermittent catheterization using a standardized protocol
- Unit CAUTI Prevention champions
- CAUTI FAQs for patient/families

Patient, Family & Community Impact

- Increases patient mobility
- Reduces patient pain and sepsis
- Improves quality of care

Saving Lives, Saving Dollars

INVESTMENT
$17k
STAFF TRAINING

SAVINGS
$69k
FEWER CAUTIs

Launch date: July 2017
Reducing hospital-onset *Clostridium difficile* infection rate

We implemented revised *Clostridium difficile* Epic best practice alerts and infection control case management for early identification and appropriate testing of *Clostridium difficile* cases. Extensive education on the new protocols occurred over a period of four weeks.

**Patient, Family & Community Impact**

- improves patient safety
- improves quality of care
- reduces length of stay

**Saving Lives, Saving Dollars**

INVESTMENT

$20k

TRAINING & MEDICATION

SAVINGS

$189k

FEWER C. DIFF CASES

Launch date: April 2018
Saint Anthony Hospital
Chicago
SENATE DISTRICT 11   HOUSE DISTRICT 21

INFECTION PREVENTION

Reducing CAUTIs associated with unnecessary urine cultures

We established a urine culture stewardship program. Clinical staff review individual patient cases to confirm a culture is indicated prior to taking the culture. As a result, we have reduced antibiotic use by 25% in catheterized patients and have had zero catheter-associated urinary tract infections (CAUTIs).

Patient, Family & Community Impact

- Reduces antibiotic use
- Improves patient safety
- Improves quality of care

Saving Lives, Saving Dollars

INVESTMENT

$4.5k

EDUCATION & STAFF TIME

SAVINGS

$48k

FEWER CAUTIs

Launch date: March 2017
Saving Lives, Saving Dollars

Northwestern Medicine Delnor Hospital Geneva
SENATE DISTRICT 25 HOUS DISTRICT 50

INFECTION PREVENTION

Preventing surgical site infections (SSIs) with a colon bundle

A multidisciplinary team implemented several interventions, including:
- 18-element bundle
- Upgraded electronic medical record
- Bundle checklist that travels with patient
- Provider-specific compliance data
- Phase-of-care data
- Education

Patient, Family & Community Impact

Promotes optimal recovery
Improves quality of care
Improves patient satisfaction

Saving Lives, Saving Dollars

INVESTMENT
$16.4k
STAFF MEETING TIME

SAVINGS
$126k
FEWER SSIs

Launch date: April 2016
Saving Lives, Saving Dollars

Reducing *Clostridium difficile* risk for all patients

Quick identification of *Clostridium difficile* and improved interdepartmental communication reduces the likelihood of spread. We educated staff on:

- Appropriate patients to test
- Our new communication tool
- Our new chart flagging system
- Factors that increase risk and behaviors that decrease risk

**Patient, Family & Community Impact**

- Improves patient safety
- Improves patient experience
- Improves community health

**Saving Lives, Saving Dollars**

**INVESTMENT**

$5k

**STAFF EDUCATION**

**SAVINGS**

$250k

**FEWER INFECTIONS**

Launch date: August 2017
Reducing C. *diff* infections through decreased antibiotic use

We reduced *Clostridium difficile* infections by decreasing the use of fluoroquinolone antibiotics. To achieve this, we:

- Developed empirical antibiotic guidelines with alternative recommendations
- Educated staff
- Implemented fluoroquinolone usage criteria
- Implemented warnings in the electronic medical record

**Patient, Family & Community Impact**

- Improves patient safety
- Improves quality of care
- Decreases adverse events

**Saving Lives, Saving Dollars**

**INVESTMENT**

$2k

**STAFF EDUCATION**

**SAVINGS**

$600k

**FEWER INFECTIONS**

Launch date: December 2016
Reducing the rate of non-ventilator healthcare-associated pneumonia

Oral bacterial growth is a risk factor for healthcare-associated pneumonia (HAP). We implemented evidence-based oral hygiene practices to decrease HAP by:

- Adopting recommendations of the American Association of Critical-Care Nurses
- Performing a learning needs assessment
- Educating nursing staff
- Standardizing oral care equipment

Patient, Family & Community Impact

- Reduces length of stay
- Improves patient safety
- Improves quality of care

INVESTMENT

$47k

NEW ORAL CARE KITS

SAVINGS

$2.1m

FEWER HAPs

Launch date: May 1, 2018
We implemented a comprehensive hand hygiene program driven by our Infection Prevention Department and with commitment from hospital administration. The program includes:
- Electronic badges for staff
- Multidisciplinary committee
- Competition/reward programs
- Traveling trophies
- Publicly posted compliance
- Internally published dashboard

Patient, Family & Community Impact

- Improves patient safety
- Improves quality of care
- Enhances community trust

Saving Lives, Saving Dollars

INVESTMENT
$310k
HARDWARE & MAINTENANCE

SAVINGS
$183k
12% FEWER INFECTIONS

Launch date: June 2017
Saving Lives, Saving Dollars

INFECTION PREVENTION

Reducing surgical site infections (SSIs)

We deploy an infection control risk assessment at every level of facility construction projects. An infection preventionist collaborates with facility management on these projects and we utilize a checklist to complete infection risk assessments.

Patient, Family & Community Impact

- Improves patient safety
- Improves quality of care
- Promotes collaboration in the community

Saving Lives, Saving Dollars

INVESTMENT

$2k

STAFF TRAINING

SAVINGS

$400k

REDUCTION IN SSIs

Launch date: April 2018
A multidisciplinary team utilized Lean Six Sigma (LSS) to develop pre- and interoperative interventions, including:

- Patient pre-op dental care
- Pre-procedure mouth wash
- Interoperative tool cleanse and glove change
- Fascial closure order
- Management of contaminated devices

**Patient, Family & Community Impact**

- Reduces patient pain
- Reduces length of stay (LOS)
- Reduces patient costs

**Saving Lives, Saving Dollars**

**INVESTMENT**

$12.2k

LSS TEAM & SUPPLIES

**SAVINGS**

$332k

REDUCED LOS

Launch date: January 2017
Reducing urinary catheter utilization

To prevent catheter-associated urinary tract infections (CAUTIs), we are empowering nursing to reduce urinary catheter utilization by:

- Monitoring urinary catheter need daily
- Identifying appropriate urinary catheter usage
- Using a nurse-driven protocol for urinary catheter removal
- Selecting a Nurse Champion for peer coaching and mentoring

Patient, Family & Community Impact

- Improves patient safety
- Improves quality of care
- Improves patient experience

Saving Lives, Saving Dollars

INVESTMENT

$2.1k

NURSE CHAMPION

SAVINGS

$27.6k

32% FEWER CAUTIs

Launch date: October 2017
Decreasing *C. difficile* by improving patient selection for testing

A multidisciplinary team implemented the following interventions:

- Development of a patient selection algorithm for *Clostridium difficile* testing
- Mandatory use of ticket-to-lab form
- Standardized education to nurses, nurse practitioners, physician assistants and physicians
- Expedited communication of fallouts among departments

**Patient, Family & Community Impact**

- Provides early diagnosis and treatment
- Prevents unnecessary exposure to antibiotics
- Reduces patient costs

**INVESTMENT**

$250

**EDUCATIONAL MATERIALS**

**SAVINGS**

$362k

**FEWER INFECTIONS**

Launch date: January 2018

Saving Lives, Saving Dollars
We implemented a NICU Antimicrobial Stewardship Program, which includes:

- Decreasing antimicrobial coverage for early-onset sepsis to 36 hours after birth
- Reviewing antibiotic orders during daily bedside rounds
- Developing neonatal sepsis guidelines
- Optimizing antibiotic dosing regimen

**Patient, Family & Community Impact**

- Decreases adverse events
- Improves patient safety
- Improves quality of care

**Saving Lives, Saving Dollars**

**INVESTMENT**

$2k

STAFF TRAINING

**SAVINGS**

$10k

DRUGS & SCREENING

Launch date: January 2018
Reducing the use of indwelling catheters

Multidisciplinary teams implemented interventions to reduce indwelling catheter utilization and risk of infection, including:

- Daily huddle on number of days of catheter usage and its medical necessity
- Weekly direct site audit by infection preventionist
- Drill down of validity of medical orders

Patient, Family & Community Impact

- Improves patient comfort
- Reduces antibiotic usage
- Reduces patient costs

Saving Lives, Saving Dollars

INVESTMENT

$15k

DAILY HUDDLES

SAVINGS

$21k

FEWER INFECTIONS

Launch date: January 2018
We implemented a pharmacist-driven culture review and follow-up process in the ED. Our interventions include:

- Discontinuing antibiotics in patients with negative culture results
- Changing therapy in 20% of all cultures reviewed
- Calling patients to notify them of results
- Coordinating with providers to write a new prescription if necessary

**Patient, Family & Community Impact**

- Decreases adverse events
- Improves patient safety
- Improves quality of care

**INVESTMENT**

$2k

**STAFF TRAINING**

**SAVINGS**

$50k

**FEWER READMISSIONS**

Launch date: September 2016
Reducing the risk of CAUTIs by reducing Foley catheter usage

Nursing staff implemented several interventions to reduce catheter-associated urinary tract infections (CAUTIs), including:

- Nurse-driven protocol and algorithm for catheter use and removal
- Foley catheter need and usage monitored each shift
- Unit work group to review data
- Nursing champion to lead the initiative

**Patient, Family & Community Impact**

- Improves patient safety
- Improves patient outcomes
- Improves quality of care

**Saving Lives, Saving Dollars**

**INVESTMENT**

$500

**STAFF TIME**

**SAVINGS**

$621k

fewer CAUTIs

Launch date: January 2016
A multidisciplinary team implemented interventions including:

- Situation, Background, Assessment, Recommendation (SBAR) tick sheet to guide bedside nursing
- Secondary review by Infection Prevention and Pharmacy on a daily basis
- Infectious Disease consults as needed
- Ultimate decision to test from the ordering physician or nurse practitioner

**Patient, Family & Community Impact**

- Reduces use of unnecessary antimicrobials
- Reduces patient costs
- Improves patient and family satisfaction

**Saving Lives, Saving Dollars**

**INVESTMENT**

$13k

**STAFF TIME**

**SAVINGS**

$121k

Fewer Infections

Launch date: January 2017
Reducing catheter-associated urinary tract infections (CAUTIs)

Multidisciplinary teams implemented several interventions, including:
- Female external catheters
- Dedicated Foley insertion team
- Daily visual performance tool to manage for daily improvement
- Nurse-driven protocol
- Patient and family engagement

As a result, we achieved a 33% reduction in CAUTIs year-over-year.

Patient, Family & Community Impact

- Increases patient and family satisfaction
- Increases mobility and reduces pressure ulcers
- Reduces avoidable length of stay

Saving Lives, Saving Dollars

**INVESTMENT**

$35.8k

**EDUCATION & SUPPLIES**

$82.8k

**SAVINGS**

FEWER CAUTIs

Launch date: January 2017
Reducing infections, readmissions and emergency department returns

We implemented a collaborative effort with local nursing homes to enhance patient care and improve antibiotic stewardship. Our interventions include:

- Quarterly educational meetings with nursing home and hospital staff
- Tracking tool for nursing homes to access lab results, infections, patient days and resident hospital admissions

Patient, Family & Community Impact

- Improves quality of care
- Improves care transitions
- Improves patient and family experience

Saving Lives, Saving Dollars

INVESTMENT
$3.4k
STAFF TIME & TRAINING

SAVINGS
$71.7k
FEWER READMISSIONS

Launch date: June 2018
Reducing healthcare-associated *Clostridium difficile*

We implemented a nurse-driven algorithm as a systematic guide for *C. difficile* testing and appropriate isolation precautions. We also:

- Use alerts in our electronic medical record to guide nurses and physicians on appropriate testing
- Adopted a senior leadership-led hand hygiene campaign to reinforce hand hygiene expectations

**Patient, Family & Community Impact**

- Reduces length of stay
- Reduces antibiotic use
- Improves quality of life

**Saving Lives, Saving Dollars**

**INVESTMENT**

$10k

**RESOURCES & EDUCATION**

**SAVINGS**

$1.2m/yr

**FEWER INFECTIONS**

Launch date: October 2017
Reducing infections by increasing hand hygiene compliance

We utilized computer-based hand hygiene simulation to increase awareness of proper hand-washing technique. This approach includes:

- Engaging staff through gaming technology
- Providing individualized unit-based training
- Involving both clinical and non-clinical staff
- Training upon hire and annually
- Utilizing a secret shopper audit

Patient, Family & Community Impact

- Educates patients during pre-operative classes
- Increases awareness through outreach programs
- Improves patient safety

Saving Lives, Saving Dollars

INVESTMENT

$34.8k
HARDWARE & STAFF TIME

SAVINGS

$238k
FEWER INFECTIONS

Launch date: June 2017
Reducing CAUTIs by appropriate catheter use and alternatives

We engage staff and provide tools to reduce catheter-associated urinary tract infections (CAUTIs). Our interventions include:

- Engaging frontline staff in process improvement initiatives
- Exchanging best practices through networking and collaboration
- Increasing family involvement in the patient’s care plan

Patient, Family & Community Impact

- Provides evidence-based and best-practice care
- Improves quality of life
- Empowers patients and families

Saving Lives, Saving Dollars

INVESTMENT
$1.8k
TRAINING & PRODUCT COST

SAVINGS
$39.6k
FEWER CAUTIs

Launch date: June 2018
Reducing immediate-use steam sterilization (IUSS)

Several departments collaborated to reduce IUSS, which is less reliable in ensuring surgical instruments sterility:
- **Executive**: Allocated funding for instruments
- **Infection Prevention**: Provides education
- **Central Sterile**: Uses algorithm to evaluate IUSS need
- **Surgery**: Modifies the surgery schedule to avoid using IUSS

**Patient, Family & Community Impact**
- Improves patient safety
- Enhances quality of care
- Reduces infection risk and length of stay

**Saving Lives, Saving Dollars**

**INVESTMENT**
$3.5k

**EDUCATION**

**SAVINGS**
$28k

**REDUCED INFECTIONS**

Launch date: September 2017
OSF HealthCare Ambulatory Clinical Practice Peoria

INFECTION PREVENTION

Standardizing high-level disinfection processes and supplies

Multidisciplinary teams came together to champion best practices, including:
- Standardizing supplies/equipment
- Maintaining annual competency
- Identifying office-specific trainers
- Performing biannual tracer activity to assess compliance and provide education
- Implementing infection prevention resources for infection control initiatives

Patient, Family & Community Impact

- Increases access to care
- Prevents HPV exposure and infection
- Improves patient safety

Saving Lives, Saving Dollars

INVESTMENT

$100k

EQUIPMENT

SAVINGS

$500k

FEWER INFECTIONS

Launch date: July 2017
Reducing healthcare-associated infections

A multidisciplinary team implemented an innovative cleaning system using Binary Ionization Technology to reduce the number of surgical site infections and prevent the spread of multidrug-resistant organisms. The technology kills bacteria and fungal spores and inactivates viral cells.

Patient, Family & Community Impact

- Improves patient safety
- Reduces length of stay
- Improves quality care

Saving Lives, Saving Dollars

**INVESTMENT**

$225k

**EQUIPMENT & TRAINING**

**SAVINGS**

$291k

**FEWER INFECTIONS**

Launch date: April 2018
Using academic detailing to promote safe opioid prescribing

Illinois Department of Human Services, Illinois Prescription Monitoring Program, University of Illinois at Chicago Department of Pharmacy and AMITA Health implemented academic detailing interventions including:

- Key messages from Centers for Disease Control and Prevention guidelines
- Primary care information on past opioid prescribing
- Additional resources

Patient, Family & Community Impact

- Reduces opioid overdoses
- Helps patients manage chronic pain
- Improves quality of care

Saving Lives, Saving Dollars

INVESTMENT
$43k
STAFF TIME

SAVINGS
$905k
ADVERSE DRUG EVENTS

Launch date: June 2018
We adopted a multimodal approach to decrease opioid use in hospital and community pain management by:

- Working with emergency department (ED) and primary care providers (PCPs) to decrease pill counts
- Adjusting post-operative orders to limit opioid use
- Providing alternative treatments to pain
- Enhancing provider availability for referrals

**Investment**

$36k Team & materials

**Patient, Family & Community Impact**

- Improves health outcomes
- Reduces visits to the ED or PCP for medications
- Reduces patient costs

**Saving Lives, Saving Dollars**

Launch date: January 2018
OPIOID STEWARDSHIP

Identifying and treating pregnant women on opioids

We created a process flow for identifying pregnant women who take opioids through inpatient and outpatient screening tools. With that information, we link these patients to community resources for medication-assisted therapy and counseling. We also implemented rooming-in to engage mothers in newborn treatment.

Patient, Family & Community Impact

- Reduces length of stay (LOS)
- Promotes bonding with newborns
- Improves newborn health with treatment for mothers

Saving Lives, Saving Dollars

INVESTMENT
$6.8k

EDUCATION

SAVINGS
$293k

REDUCED LOS

Launch date: June 2018
OPIOID STEWARDSHIP

Reducing opioid use in the emergency department (ED)

Our approach includes:

- Providing pharmacist-led education on appropriate opioid prescribing patterns to ED staff
- Offering alternatives to opioid therapy using patient-specific treatment plans
- Adapting existing infrastructure to optimize safe and effective pain treatment
- Mitigating opioid overuse through targeted interventions

Patient, Family & Community Impact

- Improves patient safety
- Improves awareness of opioid-related risks
- Reduces opioid overuse in the community

Saving Lives, Saving Dollars

INVESTMENT

$6k
EDUCATION & TRAINING

SAVINGS

$592k
DECREASED USAGE

Launch date: December 2018
OPIOID STEWARDSHIP

Decreasing opioid use while still providing adequate pain control

We track and report on opioid prescribing and educate providers and nursing staff on the benefits of timely follow-up with patients who indicate a high level of pain on the pain scale. We also use order sets for pain control that follow recommendations of subject matter experts.

Patient, Family & Community Impact

- Improves patient safety by decreasing adverse effects
- Decreases duplicate prescribing and confusion
- Prevents overprescribing at discharge

Saving Lives, Saving Dollars

INVESTMENT

$4k

STAFF TIME

SAVINGS

$115k

DECREASED USAGE

Launch date: September 2017

HSHS St. Francis Hospital Litchfield

SENATE DISTRICT 48    HOUSE DISTRICT 95

Illinois Health and Hospital Association
Reducing opioid usage

A multidisciplinary team implemented several initiatives to reduce opioid usage:

- Educating providers
- Performing retrospective audits
- Monitoring opioid usage
- Setting targets
- Implementing a drug take-back program
- Updating pharmaceutical and non-pharmaceutical order sets to include alternatives
- Participating in the Midwest ALTO Project

Patient, Family & Community Impact

- Reduces opioid addiction
- Reduces opioid overdoses/adverse drug events (ADEs)
- Improves patient safety

Saving Lives, Saving Dollars

INVESTMENT

$1.8k

SUPPLIES PURCHASED

SAVINGS

$465k

FEWER ADEs

Launch date: January 2018
Implementing standardized clinical guidelines for chronic opioid use

An interprofessional team implemented evidence-based clinical guidelines to help providers manage chronic opioid use. Changes include:

- Standardized addiction risk assessment
- Clear diagnosis of pain condition
- Specialty referrals as appropriate
- Risk stratified by morphine equivalent daily dose
- Documentation templates
- Direct access to IL Prescription Monitoring Program

**Patient, Family & Community Impact**

- Improves patient safety
- Improves patient education
- Promotes drug take-backs

**Investment**

$250k in-kind resources

**Saving Lives, Saving Dollars**
Launch date: December 2017
We implemented strategies to identify risk factors associated with opioid-induced respiratory depression and to support its prevention and early identification:

- Naloxone case reviews
- Improved patient monitoring
- Focused interventions to modify opioid prescribing based on the behavioral economics principle of the nudge

**Patient, Family & Community Impact**

- Improves quality of care
- Improves patient safety
- Improves monitoring of at-risk patients

**Saving Lives, Saving Dollars**

**INVESTMENT**

$241k

**HARDWARE**

**SAVINGS**

$385k

**INJURIES PREVENTED**

Launch date: January 2016
Pinckneyville Community Hospital
Pinckneyville

PATIENT SAFETY

Reducing patient injuries by adopting a just culture

We gave employees the tools to ensure consistency in how behaviors and systems are managed. We adopted a just culture that:

- Holds individuals accountable for their actions
- Considers system design related to occurrences/outcomes
- Provides tools for managers and leaders
- Creates a safe and reliable environment for patients and employees

Patient, Family & Community Impact

- Improves patient safety
- Improves employee morale
- Improves quality of care

Saving Lives, Saving Dollars

INVESTMENT
$11.6k
EDUCATION & TRAINING

SAVINGS
$106k
FEWER INJURIES

Launch date: January 2018
Advocate BroMenn Medical Center Normal

SENATE DISTRICT 53         HOUSE DISTRICT 105

PATIENT SAFETY

Reducing readmissions of sepsis patients

A multidisciplinary team implemented several interventions, including:

- Focused physician education
- Sepsis bundle education for emergency department and inpatient nursing staff
- Sepsis screening every 6 hours
- Concurrent sepsis case review with caregiver feedback
- Weekly sepsis “huddles”
- New documentation template and order set

Patient, Family & Community Impact

- Improves patient safety
- Improves quality of care
- Improves patient experience

Saving Lives, Saving Dollars

INVESTMENT

$9k EDUCATION

SAVINGS

$341k FEWER READMISSIONS

Launch date: January 2018
We take a proactive approach to decreasing patient harm events. Our Stop the Line/Good Catch Program is a monthly award to a staff member who prevented a potentially poor patient outcome.

**Patient, Family & Community Impact**

- Improves patient safety
- Improves quality of care
- Improves patient experience

**Saving Lives, Saving Dollars**

**INVESTMENT**

$1k

**STAFF REWARD**

**SAVINGS**

$350k

**FEWER ADVERSE EVENTS**

Launch date: April 2018
Decreasing adverse drug events (ADEs) related to hypoglycemia

A multidisciplinary team implemented several interventions, including:
- Changing insulin usage to twice daily by splitting the dose
- Putting call lights on tray passers
- Having dieticians call to request missed patient meals
- Adding stickers to diabetic trays
- Educating nurses and dieticians

Patient, Family & Community Impact

- 52.3% decrease in hypoglycemic patients
- Decreases length of stay
- Decreases mortality

Saving Lives, Saving Dollars

INVESTMENT

$4k

STAFF TIME & EDUCATION

SAVINGS

$339k

DECREASE IN ADEs

Launch date: September 2017
Collaborating to reduce the organizational fall rate

Our Fall Committee adopted a new fall protocol that includes implementing:

- More frequent patient assessments using our fall risk tool
- The Falling Star program and No Pass Zone
- Targeted toileting
- The Call, Don’t Fall teaching tool and teach-back method when providing education

Patient, Family & Community Impact

- Improves patient safety
- Increases patient/family knowledge of fall prevention
- Improves patient/family satisfaction

Saving Lives, Saving Dollars

**INVESTMENT**

$14.8k

SAFETY SKILLS EDUCATION

**SAVINGS**

$36.2k

INJURIES PREVENTED

Launch date: December 2017
CGH Medical Center
Sterling
SENATE DISTRICT 36  HOUSE DISTRICT 71

PATIENT SAFETY

Using safety huddles to improve quality and patient safety

We implemented a daily safety huddle that includes hospital leadership to report on:

- Safety events/concerns identified in the last 24 hours
- Potential safety concerns in the next 24 hours
- Findings, root cause analyses and next steps
- Final closure of safety events
- Organizational awareness for patient safety

Patient, Family & Community Impact

- Promotes prompt intervention of safety concerns
- Prevents recurring errors by identifying root cause(s)
- Improves patient safety

Saving Lives, Saving Dollars

INVESTMENT

$100k/yr

STAFF TIME

SAVINGS

$275k/yr

FEWER SAFETY EVENTS

Launch date: July 2017
Advocate South Suburban Hospital
Hazel Crest

SENATE DISTRICT 19  HOUSE DISTRICT 38

PATIENT SAFETY

Reducing the risk of healthcare-associated delirium in older adults

Our multimodal interventions and education include:
- Preventing sleep deprivation
- Preventing decline in patients with dementia
- Managing pain effectively
- Reducing the impact of prolonged bed rest with progressive mobility
- Avoiding prolonged use of urinary catheters

Patient, Family & Community Impact

- Improves health outcomes
- Decreases patient costs
- Reduces likelihood of discharge to a nursing home

Saving Lives, Saving Dollars

INVESTMENT

$15k
STAFF TRAINING

SAVINGS

$663k
FEWER DELIRIUM CASES

Launch date: January 2017
Reducing acute care fall rate with multidisciplinary collaboration

Our acute care fall rate decreased 32% from 2016 to 2018 and our falls with injuries rate dropped 54.5% with a multidisciplinary approach that includes:

- Fall risk assessment, interventions and post-fall huddle revision
- Mock code falls
- Bed/chair alarms with standardized tones
- Gait belts/walkers in every room
- Remote Safety Companion program

Patient, Family & Community Impact

- Improves patient safety
- Reduces avoidable injuries related to falls
- Decreases length of stay

Saving Lives, Saving Dollars

INVESTMENT
$69k
EQUIPMENT & TRAINING

SAVINGS
$546k
AVOIED 39 FALLS

Launch date: January 2016
Engaging Physicians, APRN/PA and Nursing to improve patient safety

We formed a multidisciplinary Quality & Safety Ambulatory Network to improve patient outcomes and support a culture of excellence. The committee focuses on:

- Reducing individual and organizational risk
- Creating a safe learning system
- Improving system thinking
- Improving professional engagement
- Targeting zero harm for ambulatory care

**Patient, Family & Community Impact**

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improves clinical excellence in ambulatory care</td>
<td>$131k</td>
</tr>
<tr>
<td>Improves patient experience</td>
<td>$428k</td>
</tr>
<tr>
<td>Develops trust with the healthcare team</td>
<td></td>
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</tbody>
</table>

Launch date: September 2018
We implemented rapid response teams (RRTs) to recognize critical changes in a patient’s condition and promote early rescue. A team of providers rushes to patients demonstrating signs of imminent clinical deterioration. The RRT:

- Assesses and treats the patient immediately
- Focuses on preventing intensive care unit transfer, cardiac arrest or death

**Patient, Family & Community Impact**

- Improves quality of care
- Reduces length of stay
- Reduces unnecessary patient transfers

**Saving Lives, Saving Dollars**

**INVESTMENT**

$27k

**STAFF & SUPPLIES**

**SAVINGS**

$171k

**IMPROVED OUTCOMES**

Launch date: January 2018
Engaging patients by tailoring healthcare to their needs

We assess each patient’s level of knowledge, skill and confidence through a patient activation measure (PAM) questionnaire in order to:

- Improve patient engagement
- Reduce readmissions
- Allow our patients to become partners in their healthcare
- Guide learning to their level of activation
- Set incremental, simplified goals to PAM level

Patient, Family & Community Impact

- Improves patient involvement
- Improves quality of care
- Improves patient experience

Saving Lives, Saving Dollars

INVESTMENT
$18k
STAFF TIME & ANNUAL FEE

SAVINGS
$15.5k
FEWER READMISSIONS

Launch date: April 2017
We’re enhancing patient outcomes by addressing social determinants of health. We:

- Provide over 1,000 free health screenings annually
- Support residents and the local agriculture economy through a producer-only farmers market
- Match SNAP dollars to increase consumption of fruit and vegetables
- Installed a free state-of-the-art fitness court

**Patient, Family & Community Impact**

- Increases access to fresh produce
- Provides free access to exercise and screenings
- Promotes better healthcare outcomes

**Saving Lives, Saving Dollars**

**INVESTMENT**

$320k

**EQUIPMENT & SUPPLIES**

**SAVINGS**

$1.8m

**IMPROVED OUTCOMES**

Launch date: May 2016
Improving diabetes care and outcomes through education

Our community needs assessment identified a need for healthy living with diabetes. In response, we:

- Trained a diabetes self-education management coordinator
- Implemented “Living Well and Feeling Well” individual and group education classes
- Offer dietician consultation for customized nutrition therapy
- Offer goal setting and lifestyle planning

Patient, Family & Community Impact

- Improves diabetes self-management
- Promotes preventive health and lifestyle change
- Increases access to local resources

Perry Memorial Hospital
Princeton

SOCIAL DETERMINANTS OF HEALTH

INVESTMENT

$6.2k
TRAINING & MARKETING

SAVINGS

$160k
REDUCED ADMISSIONS

Launch date: June 2017
Increasing access to colorectal cancer screenings

Our cancer registry showed 47% of patients diagnosed with colorectal cancer in 2017 were at stage 3 or 4. To increase screening, which can prevent colon cancer or detect it early, we:

- Provide free screening kits at community locations
- Promote screening through local employers, news media and social media
- Offer community screening events

Patient, Family & Community Impact

- Increases access to care
- Increases screening rates
- Improves community health

Saving Lives, Saving Dollars

**INVESTMENT**

$4.5k

SUPPLIES & STAFFING

**SAVINGS**

$292k

EARLY DETECTION

Launch date: March 2016
SIU School of Medicine’s Department of Population Science and Policy collaborated with Hillsboro Area Hospital using an evidence-based approach to:

- Design cost-effective child development bags
- Guide the integration of bags into parent/child interactions
- Enhance parent/teacher communication and engagement around child development

Patient, Family & Community Impact

- Improves consistency in parent/child interactions
- Educates teachers and parents on child’s development
- Improves communication between parents and teachers

Saving Lives, Saving Dollars

INVESTMENT

$10k

EDUCATIONAL SUPPLIES

SAVINGS

$40k

SOCIAL BENEFITS

Launch date: August 2017
SBL Dental Services is a dental home for uninsured rural children in our community. Regular oral healthcare can reduce family costs and emergency department (ED) visits. We provide:

- Education, exams and dental care to children—at no cost to families
- Assistance to adults whose oral health status is a barrier to addressing other health needs

**Patient, Family & Community Impact**

- Provides no-cost dental care to underserved children
- Treats tooth decay affecting 1 in 5 third-graders
- Provides $500 urgent care vouchers for adults

**Saving Lives, Saving Dollars**

**INVESTMENT**

$446k

**EQUIPMENT & STAFFING**

**SAVINGS**

$124k

**FEWER ED VISITS**

Launch date: January 2018
FHN Memorial Hospital Freeport

SOCIAL DETERMINANTS OF HEALTH

ADOPTING A COMMUNITY APPROACH TO CONTINUITY OF CARE

With the vision that everyone needs the help of a team to be as healthy as possible, we developed Connect the D.O.T.S. to partner with community organizations on:

- Chronic disease management
- Barriers to healthcare
- Poverty and the economic burden of disease

We also hired a Complex Care Manager and launched a mobile integrated health program.

PATIENT, FAMILY & COMMUNITY IMPACT

- Improves care for high-risk, complex patients
- Addresses patients’ basic needs
- Coordinates care team and partners to address barriers

INVESTMENT

$232k

NURSING STAFF & PROMO

SAVINGS

$402k

FEWER READMISSIONS

Launch date: January 2018
SwedishAmerican Health System Rockford

SOCIAL DETERMINANTS OF HEALTH

Addressing over-utilization of ambulance and ED services

Rockford Fire Department paramedics and emergency department (ED) case managers visited patients in their homes to:

- Evaluate the home environment for safety
- Determine social needs (food, housing)
- Perform medication reconciliation
- Identify barriers to taking medications correctly and to accessing primary care
- Connect patients to resources

Patient, Family & Community Impact

Connects patients with community resources

Trains patients on correct use of medication

Improves patients’ quality of life in their home

Saving Lives, Saving Dollars

INVESTMENT

$176k

DEDICATED PARAMEDIC

SAVINGS

$1.3m

REDUCED ED VISITS

Launch date: August 2016
Advocate Children’s Hospital
Oak Lawn

SENATE DISTRICT 18         HOUSE DISTRICT 36

SOCIAL DETERMINANTS OF HEALTH

Improving maternal and child health outcomes

Our OB and Family Medicine practices implemented the Centering Pregnancy model to address disparities in health outcomes. The model:

- Cares for 8-10 women at the same time
- Provides the women 10x more time with their provider
- Addresses topics through facilitated discussion and interactive activities
- Educates patients on pregnancy and infant care

Patient, Family & Community Impact

- Promotes positive patient/physician relationship
- Increases social support for families
- Empowers parents to control their own health

Investment

$70k Training & resources

Saving Lives, Saving Dollars
Launch date: June 2017
With 13% of Lee County residents experiencing food insecurity, a multidisciplinary team implemented a program to provide excess food from the hospital cafeteria to residents in need.

- Nursing and dietary staff box about 170 meals weekly.
- Meals are served at a church and delivered to homes.
- Nurses attend church meals to offer healthcare services.

**Patient, Family & Community Impact**

- Provides food for individuals and families in need
- Offers access to healthcare services
- Enhances individual and community well-being

**Saving Lives, Saving Dollars**

**INVESTMENT**

$6k/yr

**STAFF TIME**

**SAVINGS**

$33.6k

**IMPROVED OUTCOMES**

Launch date: January 2018
Individual health is determined by social factors including adequate housing and utilities. The Medical-Legal Partnership between Loretto Hospital and the Lawyers’ Committee for Better Housing extends the continuum of care for patients by providing legal assistance to address serious housing issues that negatively impact their health.

**Patient, Family & Community Impact**

- **Improves mental and physical health**
- **Increases access to legal resources**
- **Improves housing safety and stability**

**Saving Lives, Saving Dollars**

**INVESTMENT**

$30k

**PARTNERSHIP & STAFF**

**SAVINGS**

$15.5k

**FEWER READMISSIONS**

Launch date: January 16, 2016
We developed a year-long initiative of mass casualty preparedness education, including:

- Forming a disaster committee
- Updating and educating all departments on response plans
- Holding table-top exercises
- Executing a full-scale simulated train bombing with an active shooter and simulated victims, first responders and hospital personnel

**Patient, Family & Community Impact**

- Improves coordination with first responders
- Improves care in a mass casualty event
- Improves community preparedness

**Saving Lives, Saving Dollars**

**INVESTMENT**

$100k

**STAFF & EQUIPMENT**

**SAVINGS**

$700k

**RISK MITIGATION**

Launch date: October 2017
We implemented education, training and physical changes throughout the hospital to de-escalate aggressive/violent patients. Our interventions include:

- Mandatory de-escalation training for security and supervisory staff and staff in the emergency department and intensive care unit
- Designated safe rooms in all units
- Updated policy and procedures

**Patient, Family & Community Impact**

- Improves patient safety
- Improves quality of care
- Improves patient experience

**Saving Lives, Saving Dollars**

**INVESTMENT**

$98.6k

**TRAINING & SAFE ROOMS**

**SAVINGS**

$168k

**INJURIES & STAFFING**

Launch date: November 2017
Advocate Good Samaritan Hospital Downers Grove
SENATE DISTRICT 24 HOUSE DISTRICT 47

WORKPLACE SAFETY

Engaging leadership support in post-event response to violence

We provide education in various platforms to leadership and management on the importance of the leadership role when violence occurs at work. Topics include:

- Current literature review on post-event support
- Recovery process for healthcare providers affected
- Types of debriefing
- Current state of post-event support at our hospital

Patient, Family & Community Impact

- Promotes a safer hospital environment
- Addresses provider needs to ensure high-quality care
- Contributes to community safety

Saving Lives, Saving Dollars

INVESTMENT
$20k
EDUCATION & TRAINING

SAVINGS
$3.3m
NURSING TURNOVER

Launch date: Fall 2018
Improving patient outcomes after joint replacement

We enhanced patient tracking to improve outcomes by:

- Giving patients options for completing pre-op forms, including in surgeon offices, on our website and during pre-op classes
- Participating in the National Joint Registry to track and monitor outcomes
- Reviewing data at monthly performance improvement meetings to support informed decision-making

**Patient, Family & Community Impact**

- Improves quality of care
- Improves patient outcomes
- Improves patient satisfaction

**Saving Lives, Saving Dollars**

**INVESTMENT**

$5k

PRINTING & WEBSITE

**SAVINGS**

$10k

MEDICARE INCREASE

Launch date: April 2017
We developed a Joint Camp to prepare patients for surgery and recovery to improve patient outcomes. Every joint replacement patient is encouraged to attend a class before surgery. As a result, we:

- Increased our HCAHPS pain management domain ranking from the 68th percentile to the 99th
- Decreased inpatient length of stay (LOS) from 3.2 days to 2.4

**Patient, Family & Community Impact**

- Improves quality of care
- Improves patient experience
- Reduces length of stay

**Saving Lives, Saving Dollars**

**INVESTMENT**

$10k

**EMPLOYEE SALARY**

$287k

**SAVINGS**

**REDUCED LOS**

Launch date: October 2016
Enhancing physician scheduling to increase patient access to care

Structured and enhanced physician scheduling can free up physician time, which increases patient access. Using Lean Six Sigma (LSS), we:

- Work with physicians and staff to standardize patient appointment types and lengths
- Decreased documentation turnaround time
- Backfill openings with our enhanced model
- Rolled out changes to all physicians

Patient, Family & Community Impact

- Improves access to care
- Provides more efficient care
- Improves patient satisfaction

Saving Lives, Saving Dollars

INVESTMENT
$12k LSS TEAM & MATERIALS

SAVINGS
$625k PATIENT ACCESS

Launch date: January 2018
SSM Health Cardinal Glennon Children’s Hospital, St. Louis

OTHER INITIATIVE

Reducing inventory and supply costs in the PICU

Using Lean Principles, we decreased our supply costs by 5% in the pediatric intensive care unit (PICU) by:

- Organizing the supply, Periodic Automatic Replenishment (PAR) and medication rooms
- Obtaining appropriate supplies and PAR of supplies to ensure the correct supplies are in the unit for timely use
- Improving nursing efficiency for more time with patients and families

Patient, Family & Community Impact

- Improves patient environment
- Improves quality of care
- Reduces family costs

Saving Lives, Saving Dollars

INVESTMENT

$13.1k

STAFF TIME

SAVINGS

$63k

SUPPLY SAVINGS

Launch date: November 2017
Our Patient and Family Engagement team implemented an electronic advisor program to engage patients and families in improvement work. We developed 13 different interventions to increase participation, focusing on those having the highest impact and lowest investment. During a 35-week period, we grew e-advisor participation by 346% to 246 e-advisors.

**Patient, Family & Community Impact**

- Empowers the patient and family voice
- Offers a convenient way to provide input
- Engages a representative patient population

**Saving Lives, Saving Dollars**

- **INVESTMENT** $5k
- **STAFF TIME**
- **SAVINGS** $4k

Launch date: January 2018