



NEWS RELEASE

University of Wisconsin Health Receives \$50,000 Award for Excellence in Medication-Use Safety from ASHP Foundation

New Orleans, La. (Dec. 5, 2011) — The American Society of Health-System Pharmacists (ASHP) Research and Education Foundation announced last night that University of Wisconsin Health (UW Health) in Madison is the recipient of the 2011 Award for Excellence in Medication-Use Safety. The award, sponsored by the Cardinal Health Foundation, is the only national honor that recognizes a pharmacist-led multidisciplinary team for implementing significant institution-wide improvements in medication safety.

At a ceremony held during the 2011 ASHP Midyear Clinical Meeting in New Orleans, La., UW Health received \$50,000 to further promote medication-use safety. Two award finalists, Kaiser Permanente Colorado in Denver and the University of Michigan Health System in Ann Arbor, were also recognized and received awards of \$10,000 each.

“The University of Wisconsin and the two finalist organizations tackled tough challenges that confront every hospital and health system in the U.S. In administering this awards program, the ASHP Foundation seeks to share the success stories of the recipient and finalists so health professionals and health care executives across the country can benefit and learn from their experiences,” said Stephen J. Allen, ASHP Foundation executive vice president. “The primary goal of this program is to provide opportunities for others to improve the quality and safety of medication management.”

Awardees

The 2011 recipient and finalists of the Award for Excellence in Medication-Use Safety are:

2011 Award Recipient: University of Wisconsin Health (www.uwhealth.org)

UW Health created an Anticoagulation Stewardship Program (ASP) to improve organizational performance related to safety, quality and regulatory compliance measures for clot prevention and use of blood thinning medications. The pharmacist-led, interdisciplinary ASP team is responsible for quality and safety performance improvement efforts for clot prevention and blood thinning medication use in all care settings across the health system and in all phases of the medication-use process.

The ASP team does not provide direct patient care but rather provides leadership, coordination and implementation of strategies and tactics to achieve best practices by front-line staff who are responsible for the use of clot prevention regimens in inpatients and the use of blood thinning medications in outpatients. Given the broad scope of the program, new interdisciplinary committees were chartered to approve anticoagulation systems and clinical tools and to remove barriers to implementation, such as inconsistent clinician awareness of standardized approaches to the care of these patients.

Inpatient clinical tools developed include practice guidelines and order sets that have been configured into the UW Health electronic medical record. These order sets include standardized physician orders for medications and other therapies to prevent and treat clots in hospital patients. The team also implemented computerized tools and health professional education to enhance the use of the standardized regimens that prevent the development of clots in hospitalized patients. They also collected data before and after the tools and education program were put into place. A significant reduction was found in the percentage of all medical and surgical inpatients receiving no clot prevention therapy, from 24% to 8% and 20% to 3%, respectively. A significant reduction in post-operative clots was also observed: from 11.6 per 1,000 cases to 6.6 per 1,000 cases. Reductions in clots are estimated to have avoided excess hospital days and \$1 million in additional costs.

Recognizing that pharmacists could not be present in every UW Health outpatient clinic, the pharmacist-led team developed clinical guidelines, protocols and standardized education programs modeled after those used in the pharmacist-led UW Health anticoagulation specialty clinics. These resources are now used by nurses in 33 primary care clinics across UW Health, covering more than 3,000 patients who use warfarin. Results from the tests used to monitor warfarin effectiveness and safety were in the desired range 73 percent of the time following protocol implementation as compared to only 65 percent of the time before the protocol existed. Additionally, an assessment of the initial pilot clinics found that processes significantly improved.

2011 Finalist: Kaiser Permanente Colorado (www.kaiserpermanente.org)

Appropriate medication selection and dose adjustments are important for safe medication use in patients with kidney disease. Kaiser Permanente Colorado (KPCO) implemented a Drug Renal Alert Pharmacy (DRAP) program to decrease the rate of medication errors in drug selection and dosing for 15 medications used in patients with kidney disease. The DRAP program was used to alert pharmacists at the time that medications were dispensed of possible errors in medication selection and dosing for these patients. The DRAP program was successful in reducing medication errors for outpatients with kidney disease by 20 percent and demonstrated that it was possible to maintain such as program after the study's completion. Based on the results of this study, the DRAP program launched in all 24 KPCO outpatient pharmacies in April 2006 and continues to function as an important safety clinical decision support intervention for its patients. For details about this initiative, visit www.ashpfoundation.org/2011ExcellenceAwardees.

2011 Finalist: University of Michigan Health System (www.med.umich.edu)

Pain management in hospitals is a continuing challenge across the United States. Despite the creation of standards for pain management in 1999 by The Joint Commission, gaps remain in the assessment of pain, optimization of therapy, minimization of side effects, monitoring of therapy effectiveness and improvement of patient outcomes and satisfaction. The University of Michigan Hospitals and Health System (UMHS) undertook an institution-wide initiative to systematically review and improve strategies for pain management. The multidisciplinary team-driven “Elevating Pain Management Strategies to Improve Patient Outcomes” initiative focused on improvements in treating pain effectively and safely while increasing standardization across the institution. For details about this initiative, visit www.ashpfoundation.org/2011ExcellenceAwardees.

Significance of the Award

“We applaud the work that these award winners are doing to help individuals avoid medication-related health problems and get the best results from their medications,” said Dianne Radigan, director of community relations for Cardinal Health. “We’re pleased to recognize the important role pharmacists can play in leading multidisciplinary efforts to improve the overall quality, safety and cost-effectiveness of health care.”

The award recipient and finalists were chosen by an interdisciplinary panel of reviewers who evaluated all applicants. Finalists were selected based on the initiative’s scope; planning and implementation; measurable outcomes and impact; innovation and applicability to other health care organizations. Reviewers visited each finalist’s site before selecting the award recipient. Selection panel members were:

Hedy Cohen, R.N., M.S.
Medication Safety Consultant
Institute for Safe Medication Practices
Horsham, Pa.

Kathy Crea, Pharm.D., BCPS
Patient Safety Officer
Riverside Methodist Hospital - OhioHealth
Columbus, Ohio

Daniel Degnan, Pharm.D., M.S., CPHQ
Medication Safety Officer
Community Health Network
Indianapolis, Ind.

E. Robert Feroli, Jr., Pharm.D., FASHP
Medication Safety Officer
The Johns Hopkins Hospital
Baltimore, Md.

Aileen R. Killen, R.N., Ph.D.
Director, Patient Safety Program
Memorial Sloan Kettering Cancer Center
New York, N.Y.

Della Lin, M.D.
Senior Fellow in Patient Safety and Health Systems Engineering
Estes Park Institute
Englewood, Colo.

Related Resources

The Award for Excellence in Medication-Use Safety was established in 2004 to recognize on a national level pharmacy professionals who have assumed a leadership role in promoting safety in the medication-use process. For more information regarding this award, please visit our website at www.excellenceinmeduse.org.

About the ASHP Research and Education Foundation

The ASHP Research and Education Foundation (www.ashpfoundation.org) was established in 1968 by the American Society of Health-System Pharmacists (ASHP) (www.ashp.org) as a nonprofit, tax-exempt organization. As the philanthropic arm of ASHP, our vision is that patient outcomes improve because of the leadership and clinical skills of pharmacists, as vital members of the health care team, accountable for safe and effective medication use. Our mission is to improve the health and well-being of patients in health systems through appropriate, safe and effective medication use.

About the Cardinal Health Foundation

The Cardinal Health Foundation supports local, national and international programs that improve health care quality and build healthy communities. The Cardinal Health Foundation also offers grants to encourage employee service to the community and works through international agencies to donate much-needed medical supplies and funding to those who need them in times of disaster. To learn more, visit cardinalhealth.com/community or visit us on Facebook at www.Facebook.com/CardinalHealthFoundation.

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