Applicant Guide for the UNIVANTS of Healthcare Excellence Program

Thank you for your interest in the UNIVANTS of Healthcare Excellence Award Program. This Applicant Guide is designed to help you navigate and optimize your application. This includes but is not limited to; frequently asked questions, important definitions, best practice examples, and helpful hints.

To streamline the application process, we encourage you to use the templates provided on the Welcome Page and/or within this Applicant Guide to collect the necessary information for your online application.

To further ensure the strength and quality of your application, please use this recommended downloadable *Checklist* through the application process.

FREQUENTLY ASKED QUESTIONS

Who are the four stakeholders?

PATIENT	This category can encompass parts of or the entire population being served at your care facility. This can include hospitalized patients, outpatient care and/or the pre-patient consumer who may not be yet associated with your care system but can benefit from preventative care measures and/or overall population health initiatives.	
	EXAMPLES: Screening of normal healthy patients, patients presenting in the emergency department, oncology patients, diabetic patients, surgical patients, pediatric, geriatric, etc.	
CLINICIAN	This category can encompass specialized medical disciplines and/or all clinical staff involved with the direct care and treatment of the patients.	
	EXAMPLES: Emergency Department Clinician, Pathologist, Oncologist, Pharmacist, Primary Care Provider, Internists, Nurse, etc.	
HEALTH SYSTEMS/ ADMINISTRATION	This category can encompass any or all components of the healthcare administration including leadership, management, public health systems, healthcare systems, hospitals, and hospital networks.	
	EXAMPLES: Chief Executive Officer (CEO), Chief Operating Officer (COO), Chief Financial Officer (CFO), Vice President, Managers, Front Line Supervisors, etc.	
PAYOR	This category reflects beneficiaries and/or care providers outside of hospital systems such as trusts, insurance, reimbursement, and partner relations.	
	EXAMPLES: Financial beneficiaries, financial offices, funding sources, etc.	

What constitutes as a Key Performance Indicator (KPI)?

1. A KPI is a measure of impact.
2. KPIs can be measured quantitatively or qualitatively.

Key elements in defining your KPIs:

1. For qualitative metrics, direct quotes must be used and attributed to a source with first and last name provided. The same source cannot be used to support multiple quotes under the same KPI.

   EXAMPLE: *If a physician quote is used to support measurement of improved patient satisfaction, the same physician cannot be entered again under the same KPI using a new quote.*

2. KPIs can have more than one supporting metric. To achieve maximum points for each metric associated with the KPI, the KPI would need to be entered separately for each supporting metric.

   EXAMPLE: *Increased patient wellness could involve quantitative metrics for multiple parameters including reduced hospital-acquired infections and reduced use of antibiotics. It can also be supplemented with qualitative metrics such as quotes from nurses, physicians or patients.*

3. It is important to enter each KPI under the stakeholder receiving the benefit based on the supporting metric.

   EXAMPLE: *If the measured impact for the KPI of reduced length of stay is financial, it would be associated with health systems. However, if the same metric of reduced length of stay is measured in hours for a patient benefit, it would be classified under patient.*

Do you meet the minimum criteria for submission?

Please use the checklist below to help assess your application readiness.

1. ☐ Is your clinical care initiative a single project that has been implemented into clinical practice?
2. ☐ Does the care project include at least three disciplines (including Laboratory Medicine/Pathology)?
3. ☐ Do you have a KPI (quantitative or qualitative) associated with each of the following stakeholders?

   - ☐ Patient
   - ☐ Clinician
   - ☐ Health Systems/Administration
   - ☐ Payor

4. ☐ Do you have at least one quantitative measurement?

THINGS TO CONSIDER WHEN COMPLETING YOUR APPLICATION

Project Team section:

1. Highest rated projects involve at least six disciplines which includes Laboratory Medicine/Pathology.

2. You will be asked to identify three to five key partners (including yourself) who have had the most significant impact on your Clinical Care Initiative. *To collect the necessary information, please use the optional downloadable* **Key Partners** *template provided to you on the Welcome Page and/or within this Applicant Guide.*

Questions to ask yourself:
- Who are the core project champions?
- Who was instrumental in data collection or the statistical analysis?
- Who served as a leader to overcome barriers?

Initiative section:

You will be asked to provide a high-level overview of the clinical care initiative that achieved measurably better healthcare performance. This can include but is not limited to the unmet needs being addressed as well as the influence and contributions of the various partners involved. Please also include an executive summary of the impact associated with the project.

For maximum understanding of your care project across the judging panel from different disciplines and geographies, please avoid undefined acronyms and ensure the simplest language possible.

NOTE: This section is limited to 2,500 characters or less (including spaces) to ensure an executive abstract of your project. Additional content not already provided throughout other sections of the application can be attached as supplemental content upon application submission.

Questions to ask yourself when writing the high-level overview of your Clinical Care Initiative:
- Why did your Clinical Care Team come together?
- What challenges were you trying to solve?
- What inspired your team to unify?
- What were the biggest challenges to overcome and how did you overcome them?
- What measurably better healthcare performance was achieved?

Measurable Impact section:

- *To streamline the application process and collect the necessary information for your online application, we encourage you to use the optional downloadable **Measurable Impact** template provided to you on the Welcome Page and/or within this Applicant Guide.*
- Beginning with the stakeholder most impacted by your clinical care initiative, think through your KPIs and determine what qualifier best describes the effect it had on the KPI.

EXAMPLES:	
• Reduced Length of Stay	• Maintained Partner Relations
• Increased Clinician Confidence	• Lowered Healthcare Costs
• Improved Patient Satisfaction	• Earlier Patient Diagnosis
• Decreased Wait Time	

What is the KPI that benefited that stakeholder?

EXAMPLES:

PATIENT	CLINICIAN	HEALTH SYSTEMS/ ADMINISTRATION	PAYOR
• Length of Stay • Patient Diagnosis • Patient Safety • Patient Wellness • Mortality Rate • Patient Experience • Patient Satisfaction • Wait Time • Other*	• Clinician Confidence • Clinical Satisfaction • Litigation Risk • Other*	• Documentation Accuracy • Hospital Admissions • Penalty • Reputation (Index, Ranking, Award) • Employee Engagement • Readmission Rates • Quality • Other*	• Healthcare costs • Outcomes • Partner Relations • Revenue • Other*

NOTE: If the KPI is not listed in the drop-down menu, an option exists using the field labelled "Other". When entering KPIs through the field labelled "Other" ensure they are representative of the stakeholder benefit.

Quantitative or Qualitative?

With *quantitative KPIs,* you will be asked to describe the statistic or measurement associated with this KPI.

EXAMPLES:

PATIENT	CLINICIAN	HEALTH SYSTEMS/ ADMINISTRATION	PAYOR
100% of patients were educated about Acute Kidney Injury (AKI) and preventative measures as part of the program compared to <5% before the program started.	A 99% negative predictive value for Procalcitonin (PCT)-guided care vs. standard of care (Net Present Value [NPV] = 23% for lactate) allows for confident decision making with respect to antibiotic prescriptions.	Implementation of the Intelligent Liver Function Testing (iLFT) pathway reduced the number of avoidable visits to the general practitioner by 85%.	4.4% of newly screened blood donors are diagnosed with undetected disease burden, enabling treatment and reduced likelihood of transmission.

With *qualitative KPIs,* you will be asked to provide a direct quote while providing the attributed source (first and last name) and their position/title.

EXAMPLE: A direct quote from a clinical staff member that knowingly feels that they have reduced patient anxiety with faster and/or better patient care as a result of your clinical care initiative.

Significance of Impact?

> **Questions to ask yourself:**
> - How meaningful is this change to the population it serves?
> - How meaningful is this beyond the stakeholder being impacted?
> - Does it have wide-reaching value?

Process Attributes section:

*Please refer to the optional downloadable **Process Attributes** template available to you on the Welcome Page and/or within the Applicant Guide.*

How would you describe the UNIQUENESS of your Clinical Care Initiative?
Uniqueness – The degree of novelty employed in your approach.
- **NOT UNIQUE:** Project scope and/or process used to achieve project scope is a proven best practice and/or has been done before.
- **UNIQUE:** The project scope is unique or the process to achieve the scope is unique.
- **HIGHLY UNIQUE:** Project scope and the process used to achieve the project scope is a novel approach never before used.

> **Questions to ask yourself:**
> - Is this a proven best practice that has been done before?
> - Is this project unique? Or is this a novel approach that has never been done before?

How would you describe the EASE OF IMPLEMENTATION of your Clinical Care Initiative?

Ease of Implementation – Simplicity or complexity that exists when executing a plan, policy, or process improvement initiative.

- **SIMPLE:** Minimal to no new infrastructure (i.e., funding new equipment, resources, etc.) is required to implement the project.
- **MODERATE:** Some infrastructure changes (i.e., funding new equipment, resources, etc.) are needed to drive project implementation.
- **DIFFICULT:** Substantial infrastructure changes (i.e., funding new equipment, resources, etc.) are needed to drive project implementation.

> **Questions to ask yourself:**
> - Is this easy to implement?
> - Are there major changes required for implementation? Or are the changes minimal?

How would you describe the SCALABILITY of your Clinical Care Initiative?

Scalability – Ability and/or capacity to change or expand the best practice.

- **NOT SCALABLE:** Project cannot be adapted to similar or different processes.
- **SCALABLE:** Project can be adaptable to either similar or different processes.
- **HIGHLY SCALABLE:** Project is adaptable to similar and different processes.

> **Questions to ask yourself:**
> - Can this project be adaptable to either similar or different processes?
>   — For example, can the process be used beyond one disease state and applied to others?

How would you describe the LEVEL OF GOVERNANCE associated with your Clinical Care Initiative?

Level of Governance – Adherence to a standardized process. Governance can be manual, automated or a combination of both.

- **NOT GOVERNED:** Manual methods were utilized for project enablement or continuous process improvement(s).
- **GOVERNED:** Processes included some automated methods for project enablement or continuous process improvement(s).
- **HIGHLY GOVERNED:** Processes required automated methods for enablement and continuous process improvement(s).

> **Questions to ask yourself:**
> - Were manual or automated methods used?
> - Did your project have continuous process improvements?

How would you describe the significance of LABORATORY INTELLIGENCE in your Clinical Care Initiative?

Laboratory Intelligence – The use of laboratory data in an integrative manner to generate actionable insights and/or decisions.

- **NOT/SOMEWHAT SIGNIFICANT:** Laboratory intelligence had minor relevance to the overall outcome of the care project.
- **SIGNIFICANT:** Laboratory intelligence was one of the key enablers that drove the success of this care project.
- **VERY/EXTREMELY SIGNIFICANT:** Success of a care project could have not been achieved without the utilization of laboratory intelligence.

> **Questions to ask yourself:**
> - To what extent was the laboratory data used?
> - Were there insights associated with the laboratory data that were not previously known?

NOTE: Your self-ratings will not be counted in the final assessment. These ratings however, will be seen by the judges as justification and supporting evidence for how you will be ranked. Therefore, please be as descriptive as possible in your rationale.

Naming Your Initiative:

This will be the title used by the judges for your potentially award-winning project. So, the title should be compelling and inclusive of your strongest KPI, but also concise.

EXAMPLES:
- Improving Emergency Patient Flow Across the Health System Network.
- Improved Clinical Pathway for Recognizing Undiagnosed Diabetes in Hospitalized Patients.
- Personalized Antibiotic Therapy for Reduced Inappropriate Exposure to Antibiotics.

Confirmation section:

1. Review your application:
   — As you review, please remember that the more KPIs associated with your clinical care initiative the stronger the potential for an award-winning application.
   — For more tips and/or to ensure the best success for your application, please access the following **Checklist** prior to submission.

2. Supporting documentation:
   — Supporting documents can be used to reinforce the value and score of your clinical care initiative. Multiple documents can be provided but must be bundled as a single zip file. Maximum file size is 10 MB.
   NOTE:
   - Supporting documentation should not contain detailed patient information.
   - Attachments cannot be saved across working sessions. Ensure attachments are included prior to submitting the final application.
   - If supporting documents become available after your application has been submitted, please send a note to UNIVANTSofHealthcareExcellence@abbott.com with further instruction.

3. Before pressing submit:
   — Make sure that all information has been entered. Once final submission is complete, no further edits will be accepted.

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