

UNIFY

FOR SOMETHING
GREATER



UNIVANTS™
OF HEALTHCARE EXCELLENCE

CELEBRATING
THE **2021**
WINNERS



UNIFY FOR HEALTHCARE EXCELLENCE



Dear Reader,

Abbott has a long legacy of innovation and transformation. Our commitment and passion are focused on helping patients live longer and fuller lives. One way we achieve this is through the development and activation of life-changing technology. Our commitment to innovation is driven by thought leadership that enables healthcare professionals to achieve measurably better healthcare performance. It is through this vision that Abbott created and founded the UNIVANTS of Healthcare Excellence® Awards.

These prestigious global honors are awarded every year to elite healthcare teams who have collaborated across traditional healthcare silos to achieve exceptional outcomes for patients, payors, clinicians, and health systems. Fueled by insights facilitated and/or empowered by laboratory medicine, healthcare delivery can be transformative.

The initiatives that are presented in the pages of this supplement highlight what is possible through thought leadership, innovation, teamwork and action.

Programs earning recognition from the UNIVANTS of Healthcare Excellence Awards are exceptional models of innovation that harness the power of laboratory medicine to create new insights, processes, and pathways—collectively delivering better outcomes and measurably better clinical care.

These unifiers and avant-garde thinkers are recognized as winners of the 2021 UNIVANTS of Healthcare Excellence Awards.

Together, and in partnership with our prestigious program partners, Abbott celebrates the success of all recognized teams for problem-solving, inspiring, and enabling further innovation and accelerating the pace of change across the healthcare industry.

By sharing knowledge, skills, and experiences, we can collectively address vital healthcare needs, elevate population health, and improve the delivery of care worldwide.

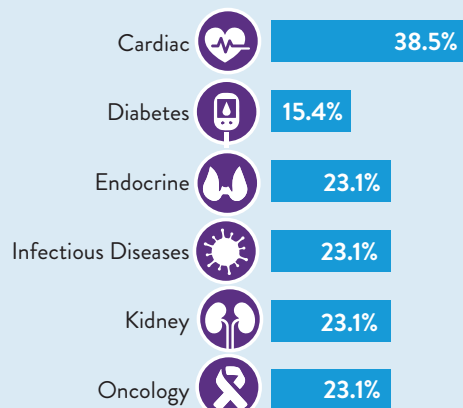
Thank you all for your passion and partnerships that drive measurable impact and solutions to help people live to the fullest each day.

Alexander Carterson MD, PhD

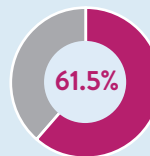
Divisional Vice President, Medical Clinical and Scientific Affairs & HEOR
Abbott Core Diagnostics

RECOGNIZING MEASURABLY GREATER PERFORMANCE

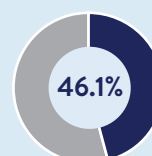
Areas of Focus



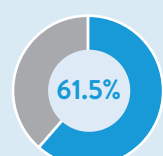
Prevention



Chronic Care



Acute Care



Lab Stewardship

23.1%

Screening
69.2%

Informatics

38.5%

Patient Engagement
46.2%



Left to right:
Dr. Sarah Horne,
Dr. Leslie Perry,
Dr. Ian Cormack,
Dr. Linda Cheyenne
Vaccari

CROYDON UNIVERSITY HOSPITAL

Sustained 97% opt-out HIV testing in the emergency department: Getting to zero AIDS

HIV attacks the body's immune system, and in late stages, causes potentially life-threatening infections and illnesses known as AIDS. Until the late '90s, having this virus was considered a death sentence – one with devastating effects.

Today, however, early diagnosis and treatment for HIV effectively reduce the likelihood of ill health, onward transmission and premature death. With proper, timely medical care, HIV can be well-managed, prolonging longevity and mitigating AIDS-related illnesses.

"You don't want to see people with a treatable disease getting sick unnecessarily," said Dr. Ian Cormack, Clinical Lead of HIV Medicine at Croydon University Hospital. "Catching them before they present with an AIDS-defining illness, will reduce clinical risk, save lives and reduce cost."

This was the rationale behind Croydon's rollout of opt-out HIV testing in May 2020. Previously, clinicians were responsible for asking patients if they'd like to be tested, an approach that Dr. Cormack's 15 years of research proved unsustainable. Patients often didn't see themselves as at risk, and those already aware of their HIV-positive status sometimes didn't feel comfortable disclosing it to clinicians, who were themselves uncomfortable broaching the topic.

Due to the limitations of opt-in testing, and the consequential delay in diagnoses, Croydon University Hospital observed AIDS-defining illnesses in 78% of newly diagnosed HIV-positive hospitalized inpatients. Mortality rates were as high as 23% in some years, depending on the nature of the AIDS-defining illnesses.

That all changed when opt-out HIV testing became the norm.

By standardizing the process by which HIV tests were ordered, multidisciplinary stakeholders at Croydon were able to ensure

that HIV tests are automatically requested, unless a patient explicitly opts out. Any person confirmed as HIV-positive on subsequent testing is quickly placed on the appropriate pathway to treatment and given immediate access to a team of mental health specialists for education, support and counseling.

"Normalizing opt-out HIV testing prevents people feeling 'targeted' to have an HIV test," said Croydon's Dr. Sarah Horne, consultant in emergency medicine. "This helps reduce stigma as everyone receives the same treatment, regardless of sexual orientation or physical presentation."

Croydon University Hospital's approach to HIV testing has enabled it to sustain a 97% testing rate for over 2 years. In that time, HIV diagnoses tripled, and patients presenting with AIDS-defining illnesses steadily declined from 78% (2005-2010) to 46% (2017-2019) to 4% (2020-2021).

Prevention of AIDS-defining illnesses in turn facilitated a sharp reduction in hospitalizations and deaths. Intensive treatment unit admissions dropped from 15% to 0% – freeing up beds for

COVID-19 patients at a critical time – and mortality decreased from 23% of cases to 0%.

These data highlight the remarkable impact that opt-out testing has had on patient health, clinician satisfaction and resource utilization at Croydon University Hospital. To build on the success, in April 2022, the Croydon team helped to launch the program across all of London and other extremely high prevalence areas.

"Patients that have been diagnosed show overwhelming gratitude," said Dr. Cormack. "A relatively inexpensive test can transform a patient's prognosis, future and life."

UNIVANTS IN ACTION

31% reduction in readmission rate for HIV patients

60% of complex, hard-to-reach patients successfully reengaged in HIV care

£2 million estimated savings for the National Health Service

“This is an initiative that could be a golden international standard for implementation at other healthcare systems. —COMMENTS FROM EHMA

Left to right:
Sandi Stoudenmire,
Beth Wehlitz,
Dr. Jason Guichard,
Stephanie Flippin,
Beverly Jameson, RN



PRISMA HEALTH GREENVILLE MEMORIAL HOSPITAL

Enhancing personalized care for heart failure patients: A risk-scoring EMR model

Every year, more than 1 million U.S. patients are hospitalized with a primary diagnosis of heart failure. The chronic disease and leading cause of hospitalization is also a significant cause of 30-day readmissions, disproportionately affecting Black and African American communities, women, and individuals over age 65.

By providing timely, well-coordinated and accessible care, health systems can dramatically improve the outcomes and longevity of patients with heart failure. Understanding this opportunity, a multidisciplinary care team at Prisma Health, Greenville Memorial Hospital, in South Carolina, U.S., developed a risk-scoring initiative to identify heart failure earlier and triage patients for appropriate care.

“Our heart failure population has one of the highest readmission rates,” said Sandi Stoudenmire, director cardiovascular operations at Prisma Health. “Decreasing readmissions, providing optimal care and removing barriers to access are all objectives we had for this initiative. Everything we developed was to serve our patients by providing concise, relevant clinical metrics to our physicians.”

Leveraging capabilities inherent in the EMR, the team at Greenville Memorial implemented a patient identification workflow program powered by clinical biomarkers from the laboratory, imaging information from echocardiography, input from advanced heart failure specialists, and workflow and patient care insights from bedside nurses. Their work involved embedding risk profiles in the EMR and regularly updating them based on metrics, giving clinicians point-of-care decision support and insight into the factors impacting heart failure risk. The accessible, reliable patient registry enables improvement in decision-making, care coordination and resource utilization.

As the model matches resources to risk score, specialists with limited appointment availability can be accessed by the most vulnerable patients, while those at lower but rising risk of heart failure

can be placed on the proper care pathways. The approach allows for optimized care and lower overall costs.

“Our hospitalists have information developed by the advanced heart failure team at their fingertips, so they see what the team considers to be critical elements in caring for a heart failure patient,” said Stoudenmire. “This helps the care team determine appropriate therapies.”

With stratification informing clinical decision-making, patients and clinicians at Greenville Memorial can better manage the chronic disease state, as shown by a 48% increase in the number of high-risk patients actively receiving care through advanced heart failure specialists, as well as a decrease from 17% to 15% in overall mortality for all registry patients. For high-risk patients, post-registry mortality rates are now roughly half that of heart failure patients not triaged and treated according to the registry. Also important is the fact that automated referrals mitigated potential implicit bias, leading to a 14% increase in clinic visits within vulnerable Black and African American populations.

Greenville Memorial’s initiative not only achieved the primary objective of improving patient health, it also delivered significant outcomes for clinicians and the health system overall. The heart failure registry improved one week follow up among high-severity patients, allowing clinicians to better protect and promote patients’ health. Prisma Health saw a significant reduction in emergency and urgent care visits and realized cost savings of about \$866 per visit. Higher patient volume in the heart failure clinic translated into a nearly 15% revenue increase.

Today, Greenville Memorial’s risk-scoring and workflow initiative continues to benefit clinical care for patients at risk of heart failure. It is furthering the organization’s mission to inspire health, serve with compassion, and be the difference.

UNIVANTS IN ACTION

67% increase in overall heart failure clinic volume

59% reduction in emergency and urgent care visits, representing cost savings of approximately \$866 per visit

200% increase in referrals for palliative care

““Congratulations on making such an impact on your patient’s care and quality of life from acute care to palliative/hospice care.” —COMMENTS FROM NAHQ



Left to right:
Top Row: Teri Dahn,
Kimm Wuestenberg,
Kevin Cruz
Bottom Row:
Connie Moreno, RN,
Timothy Hersom

BANNER HEALTH AND LABORATORY SCIENCES OF ARIZONA

Innovative process improvement for timely laboratory results in the era of a Global Pandemic, Great Resignation

Clinical decisions hinge on the timely provision of laboratory test results. The faster accurate test results are delivered, the faster patients can be diagnosed, treated and referred to appropriate care settings, or, in some instances, discharged.

Yet, during the pandemic, an increase in test volumes and simultaneous reduction in workforce challenged the readiness of laboratory results for timely physician review before multidisciplinary rounds. At Banner Health's Banner Del. E Webb Medical Center, teams were consequently faced with duplicate orders for phlebotomy services, compounding bottlenecks and delays – all during what would become the facility's most severe COVID-19 surge.

With an urgent need to resolve the situation, a working group was convened with representatives from clinical laboratory, medical-surgical, clinical care operations and quality improvement departments. One of Banner Health's core values – courageous innovation – set the tone for that first meeting.

"We welcomed all ideas throughout, and we gave all these ideas consideration. Everyone was interested in how changes would impact the other team members," said Kimm Wuestenberg, associate director of quality improvement at the Arizona, U.S.-based facility.

Almost immediately, this collaborative, solution-oriented mindset illuminated a path forward. With buy-in from the various departments involved, the group adopted a rapid cycle process improvement initiative utilizing the methodologies of Lean Six Sigma, Scrum, Kanban and Design Thinking.

By applying this unique methodology mix, the working group first and foremost enabled the development of a more efficient

phlebotomy collection schedule. To preserve the efficiency, members of the working group also committed to improving facility-wide communication on the status of laboratory specimen collections.

In daily huddles at 3 a.m., the clinical lab and clinical care operations teams shared barriers and strategies for overcoming them. When necessary, they engaged the nursing department to ensure completion of results by morning. Importantly, the structure and process re-engineering leveraged ongoing collaboration across disciplines to improve care delivery, a central theme of the UNIVANTS of Healthcare Excellence Award.

"From the lab's perspective, the change has allowed the phlebotomists to complete Med/Surg routine draws first, ensuring that these results are available by 6 a.m.," said Tim Hersom, clinical laboratory administrative director. "This ability has a positive domino effect on the turnaround times of lab draws on other units."

Facility-wide, the initiative generated a 1% improvement in morning routine laboratory test results completed by 7 a.m. each day. Discharge timeliness before 1 p.m. jumped from 21% to 28%, and overall patient length-of-stay declined by 1.6%. These outcomes translated to reduced risk of health-acquired infections and freeing up more beds for incoming patients – a critical win during the height of COVID-19 surges.

As healthcare continues to face staffing challenges and fluctuating demand, organizations can apply the novel process improvement methodology mix integrated by Banner Health's multi-disciplinary team in various circumstances to quickly alleviate constraints and deliver value. Banner will also continue to leverage this agile process in the future.

UNIVANTS IN ACTION

2% decrease in overall patient length of stay

36% improvement in timeliness of patient discharge before 1 p.m.

72% decrease in duplicate test ordering with STAT priority and 33% decrease in duplicates with Timed Study priority

“A very worthy integrated clinical care initiative that was focused on an innovative approach to process improvement driven by necessity.” —COMMENTS FROM IHE

CONGRATULATIONS TO ALL SITES WITH RECOGNITION

Abbott and its partners are pleased to recognize the 10 additional sites around the globe for their measurable and meaningful contributions to improving healthcare.

3 WINNERS OF DISTINCTION

8 hours



UHW NHS TRUST & WARWICK MEDICAL SCHOOL UK

Addressing COVID
Clinical and Translational
Challenges via
Multidiscipline
Integrated Diagnostics
Networks

967%

improvement in patient
wait times, reduced
from 8 hours to 45
minutes or less

45 minutes



KING ABDULAZIZ MEDICAL CITY JEDDAH | Saudi Arabia

Improving Morbidity and Mortality
in Patients with Sepsis

20% decrease
in patient mortality due
to sepsis in the ICU



MEDCAN | Canada

Preventing Cardiovascular Disease in a Large Client Population
Through Proactive, Cost-effective and Enhanced Identification
of Cardiovascular Risk Using a Novel Laboratory Test



“Brilliant work with life-saving outcomes
following the implementation and
activation of a novel biomarker involving
cardiovascular risk.”

—Modern Healthcare

BE A PART OF SOMETHING GREATER!

Learn more at UnivantsHCE.com

7 WINNERS OF ACHIEVEMENT



UNIVERSITY HOSPITAL CENTRE ZAGREB & POLYCLINIC

AVITUM | Croatia

Renal Osteodystrophy Monitoring
by Monthly PTH Determination in
Hemodialysis CKD-MBD Patients

61% reduction
in annual cost of care



HAMPSHIRE HOSPITALS NHS FOUNDATION TRUST | UK

Improved Patient Pathway
for Diagnosis, Follow up
and Monitoring of Multiple
Myeloma; a Multi-Disciplinary
Collaboration to Improve the
Pathway from the Initial Request
to Long-Term Monitoring

24-hour
turnaround time
for urgent hematologist
review, reduced
from 2 weeks



UOC MEDICINA TRASFUSIONALE VILLA SOFIA-CERVELLO | Italy

Early Detection of Unsuspected Cardiovascular Risk in Asymptomatic Blood Donors

“Offering the added incentive of a more thorough risk evaluation driven by a cardiac-specific biomarker has become a delight for our donors, and as such, has helped us more readily engage donors and complete more donations since implementation of the program.”

—Donatella Perricone, Blood Donor Recruiter



ZULEKHA HOSPITAL | Dubai

Optimizing the Care, Safety and Wellness of Patients
with Known Diabetes Through Laboratory Medicine and a
5-Stage Multi-Disciplinary Clinical Care Pathway

5-fold increase
in vitamin B12 deficiency detection



KING HUSSEIN CANCER FOUNDATION AND CENTER | Jordan

Improving Cancer Patients' Safety, Confidence
and Clinical Care Through Screening Healthcare
Workers for Neutralizing COVID-19 IgG
Antibodies and Establishing a COVID-19
Convalescent Plasma Bank at KHCC

1,200 JOD
(\$1,693 USD)

estimated daily cost savings for every
cancer patient who does not contract COVID-19

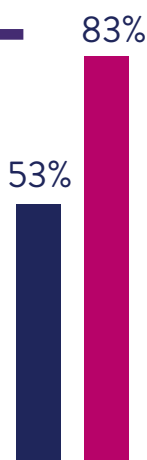


YANTAI YUHUANGDING HOSPITAL | China

Enhanced Discrimination of
Myocardial Injury in a Pediatric
Population Using Age-Specific
Biomarker Reference Intervals

30-point increase

(53% to 83%) in the safe exclusion
of myocardial injury in patients
from birth to 2 days old



KOKILABEN DHIRUBHAI AMBANI HOSPITAL & MEDICAL RESEARCH INSTITUTE | India

Early Diagnosis of Acute Kidney Injury in
Hospitalized Patients with Comorbidities

60% more patients with acute
kidney injury identified
through the AKI alert system



THANK YOU TO OUR PARTNERS



Banner Health and Laboratory Sciences of Arizona

Utilizing an Innovative Approach to
Process Improvement in the Era of a Global
Pandemic and the Great Resignation:
Rapidly Improving Timeliness of Laboratory
Test Results for Multidisciplinary Rounds
in an Acute Care Setting

Croydon University Hospital

Sustained 97% Opt-Out HIV testing
in the Emergency Department:
Getting to Zero AIDS

Prisma Health Greenville Memorial Hospital

Enhancing Personalized Care for
Heart Failure Patients: A Risk-Scoring
EMR Model



CONGRATULATIONS TO THE 2021 WINNERS

TOP TEAMS AROUND THE WORLD

ARE ACHIEVING
HEALTHCARE EXCELLENCE

Learn about these success stories at UnivantsHCE.com



RECOGNITION OF DISTINCTION

Medcan Health Management Inc.
UHCW NHS Trust and Warwick Medical School
King Abdulaziz Medical City – Jeddah

RECOGNITION OF ACHIEVEMENT

Hampshire Hospitals NHS Foundation Trust
Yantai Yuhuangding Hospital
UOC Medicina Trasfusionale AOOR Villa Sofia-Cervello
University Hospital Centre Zagreb & Polyclinic Avitum
King Hussein Cancer Foundation and Center
Kokilaben Dhirubhai Ambani Hospital & Medical Research Institute
Zulekha Hospital Dubai



IN PARTNERSHIP WITH

