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FOR SOMETHING
GREATER



UNIVANTS™
OF HEALTHCARE EXCELLENCE



CELEBRATING
THE 2024
WINNERS



UNIFY FOR HEALTHCARE EXCELLENCE



It can be remarkably easy to take health for granted, especially when we are young. Ailments or sicknesses are often thought of as anomalies, particularly for those fortunate enough to live healthy and full lives.

A subsequent reality is that healthcare is often associated with 'sick-care' — diagnosing disease, mitigating pain, and/or managing therapy for those who are not well. The irony, however, is that healthcare is truly about health and wellness, not illness.

Those who enter healthcare as a profession, for example, have a calling to help people. Those who do medical research have an interest in advancing knowledge or evidence that addresses gaps in traditional care, and those who implement innovative best practices have a passion for elevating traditional standards of care.

The UNIVANTS of Healthcare Excellence award program is one way in which these avant-garde teams can be recognized on a global stage. The award program has been inspiring, celebrating and amplifying best practices in healthcare for over five years. A minimum requirement for award eligibility are key performance indicators that support measurable better outcomes for patients, clinicians, payors, health systems and often, the population overall.

Every application gets rigorously and anonymously reviewed by judges across seven leading healthcare organizations that span

geographies and disciplines. The latter includes the International Federation of Clinical Chemistry and Laboratory Medicine (IFCC), Association for Diagnostics and Laboratory Medicine (ADLM), European Health Management Association (EHMA), Modern Healthcare, Healthcare Information and Management Systems Society (HIMSS), National Association for Healthcare Quality (NAHQ) and Institute of Health Economics (IHE). Abbott is the founder and host of the award program but has no role in the scoring process, which protects the authenticity, agnostic nature and prestigious credibility of these awards.

This year, 12 winning teams across nine countries and five geographic regions have received honors in association with the 2024 UNIVANTS of Healthcare Excellence program. This includes six teams with achievement, three teams with distinction, and three teams with top elite honors. Each team successfully UNIFIED across traditional silos with AVANT-GARDE strategies to implement solutions that maximized the value of laboratory medicine for measurably better outcomes. They are elevating traditional standards of care and have unified for something greater.

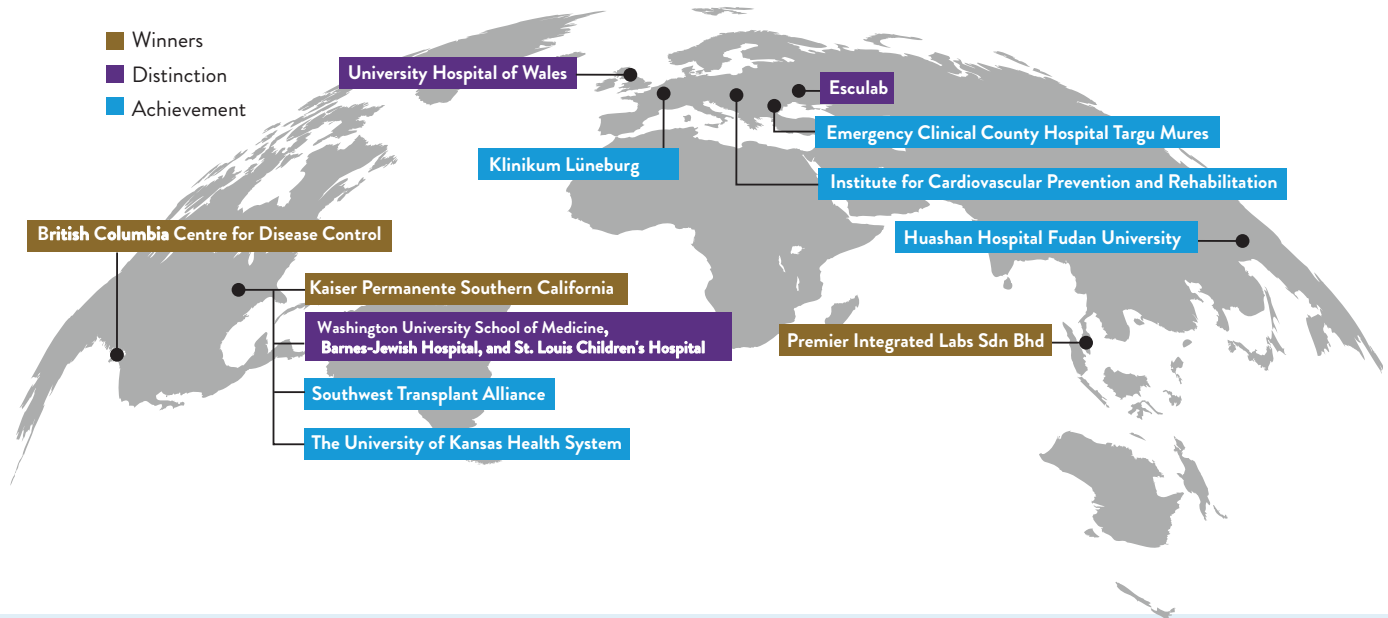
A warm congratulations to all winning teams and to everyone whose collective passion is to elevate healthcare, protect wellness and advance the future of medicine.

Tricia Ravalico

Executive Lead

UNIVANTS of Healthcare Excellence Award Program

MEASURABLY BETTER HEALTHCARE PERFORMANCE ACROSS THE GLOBE



WHAT IS UNIVANTS?

THE UNIVANTS OF HEALTHCARE EXCELLENCE PROGRAM is a prestigious global award program created by Abbott in partnership with leading healthcare organizations across the globe with a common vision to inspire and celebrate healthcare excellence. The three tiers of awards (global, distinction and achievement) recognize teams who collaborate across disciplines and transform healthcare delivery and ultimately lives.

Learn more at www.UnivantsHCE.com



Left to right:
Mark Gilbert;
Meghan McLennan;
Devon Haag;
Susie van der Valk;
Garth Graham

2024 GLOBAL WINNER: BRITISH COLUMBIA CENTRE FOR DISEASE CONTROL | CANADA

Expanding Access to Community-based Testing for Sexually Transmitted and Blood-borne Infections

THE BC CENTRE FOR DISEASE CONTROL IN BRITISH COLUMBIA, CANADA, is reducing barriers to testing for sexually transmitted and blood-borne infections (STBBI), particularly among populations at high risk, with its groundbreaking initiative GetCheckedOnline (GCO).

The publicly funded program provides individuals with anonymous screening for sexually transmitted and blood-borne infections. Survey data indicates the program is reaching clients who traditionally do not get tested and/or have challenges associated with clinic-based screening for sexually transmitted infections.

Clients access the service by visiting the website, GetCheckedOnline.com. After completing a brief online risk assessment that recommends specific STBBI tests, the client then takes their requisition to a participating lab for specimen collection. Available tests include HIV, syphilis, chlamydia, gonorrhea and hepatitis C. An important feature of GCO is that clients aren't required to use their real name or show identification at the lab, making the service virtually anonymous.

The initiative is increasing access to testing among populations who historically report barriers to preventive healthcare services. Of 1,658 people recently surveyed in communities where GCO is available, 324 people had used the service, of which 13% identified as Indigenous (First Nations, Inuit or Metis), and 14% identified as transgender. And in a separate survey of 789 users of the service, more than 50% indicated a sexual orientation other than heterosexual including gay, bisexual, queer and pansexual.

In addition to enhancing STBBI testing for communities who encounter obstacles to access, data from 2022 shows the program encourages greater access to testing overall, with 22% of users reporting they had never been tested for STBBI before using

GetCheckedOnline.

The initiative is successful because it is convenient to use, said Dr. Mark Gilbert, Public Health Physician with Clinical Prevention Services at the BC Centre for Disease Control. The fact that services are based online and people can screen anonymously removes hurdles to testing.

"We know some won't get tested if they are worried people would find out," Gilbert added.

A concerted effort to continuously gather client and community feedback on the program has also contributed to its longstanding success, said Devon Haag, Digital Public Health Program Manager at the BC Centre for Disease Control.

"We've always put the client at the center of the program and paid special attention to not further exacerbating inequities in access to sexual healthcare," Haag said.

Several healthcare organizations are involved with GCO, requiring collaboration across interdisciplinary teams. The BC Centre for Disease Control, which is a program of the Provincial Health Services Authority, operates the service in partnership with several lab agencies: the BC Public Health Laboratory, the private organization LifeLabs and the Provincial Laboratory Medicine Services.

"Laboratories were essential to this initiative from the very beginning," Gilbert said. "We have this important and strong relationship with them now, and that's a result of our deliberate collaboration with them."

Since its launch in 2014, GetCheckedOnline has expanded to seven more communities across British Columbia, with at least one community being added this year.

"Importantly, we are reaching people at high risk of STBBI and overcoming barriers to testing," Gilbert said.

UNIVANTS IN ACTION

87% of GCO users report that they test earlier and more often, compared to regular clinics

10-fold improvement in workflow efficiency for nurses

\$2.4 million CDN in avoided costs

“Activation of laboratory intelligence to new and more client-friendly models is the future. This best practice can have a big impact in other jurisdictions as well.” —IHE

Left to right:
Leslie Charles Lai Chin Loy;
Mun Yee, Evonne Kong;
Hareeff Muhammed;
Yoke Lee Low



2024 GLOBAL WINNER: PREMIER INTEGRATED LABS SDN BHD | MALAYSIA

Detecting Liver Disease Early by Strategically Implementing the Fibrosis-4 Scoring System

LIVER DISEASE, PARTICULARLY EARLY LIVER DISEASE, can be complex to screen for and diagnose. This is particularly true for metabolic dysfunction-associated steatotic liver disease (MASLD). MASLD is characterized by fat accumulation in liver cells that can lead to inflammation, damaged liver cells and ultimately progressive liver disease, such as fibrosis, cirrhosis, cancer and/or end-stage liver disease. The most significant and impactful interventions for mitigating MASLD progression are early identification of disease and elimination and/or control of risk factors, which include obesity, dyslipidemia, glucose intolerance and diabetes.

With the ever-rising rates of diabetes and obesity around the globe, MASLD rates are increasing, putting increased strain on healthcare resources and impacting patient health and wellness. Further, screening for MASLD is complex, can be expensive, and often difficult to identify due to the asymptomatic nature of the disease.

In Malaysia, Premier Integrated Labs Sdn Bhd recognized a unique opportunity to earlier identify and treat individuals at risk of MASLD by leveraging commonly accessible laboratory results from general health screenings. Using age, liver enzymes ALT and AST, and platelet count, a Fibrosis-4 score (FIB-4) is calculated, indicating whether an individual is at low, medium or high-risk of MASLD. Results are shared with treating physicians to enable the next steps in diagnosis, risk mitigation and treatment.

Since implementation in 2022, 39,020 individuals have become aware of their MASLD status, of which 5,662 were newly identified as moderate- or high-risk for MASLD. Patients at moderate- or high-risk receive lifestyle modification counseling, including recommendations for changes in diet and/or exercise.

For those requiring specialist care, they receive a referral to a gastroenterologist or hepatologist for appropriate enhanced management. This early identification and treatment have enabled appropriate follow-up across 64.7% of patients at moderate or high-risk, at either 6-month (14.7%) or 12-month (50%) intervals.

Beyond earlier identification and treatment outcomes, patients report enhanced overall experience, reduced hospital stays and decreased absenteeism at work following the implementation of FIB-4.

An essential element of the initiative was the involvement of liver specialists, who provided crucial physician education as FIB-4 was incorporated into general health screenings. “By implementing FIB-4 in routine practice, we are creating more awareness among primary care doctors and patients about their liver disease status,” said Hareeff Muhammed, Chief Executive Officer of Premier Integrated Labs.

Consequently, results from a clinical survey of 180 primary care physicians indicate high levels of confidence in using FIB-4 to guide care, with 64% of clinicians reporting they found FIB-4 to be accurate in ruling out advanced fibrosis. Notably, 71% of clinicians reported FIB-4 is their preferred

method to monitor liver disease status.

By integrating FIB-4 into health screenings and enabling early disease identification and treatment, Premier Integrated Labs has demonstrated the power of algorithmic scoring of liver disease risk and the important role general health screenings can play in identifying disease early, ultimately improving long-term health.

“This initiative shows the responsibility and possibilities of laboratory medicine as an integral component to earlier disease identification and treatment to prevent disease and improve outcomes,” Muhammed concludes.

UNIVANTS IN ACTION

14.5% of patients were newly identified as moderate to high-risk for liver disease and subsequently linked to care

Reduced workday absenteeism for patients with moderate to high-risk, based on follow-up every 6 months (14.7%) and/or annually (50.0%)

RM9.3 million (\$1.9 million) in annual mitigated costs

“This very innovative use of laboratory testing enables the avoidance of invasive procedures, while also offering great benefits to patients.” – NAHQ



Left to right:
Kristi Reynolds;
Matthew Mefford;
Michael Kanter;
Tracy Imley;
Ronald Scott

2024 GLOBAL WINNER: KAISER PERMANENTE SOUTHERN CALIFORNIA | USA

Closing Care Gaps: How Kaiser Permanente Southern California Ensures Timely Intervention

THE HIGH LDL-C STATIN START SURENET PROGRAM at Kaiser Permanente Southern California is maximizing the benefits of technology and teamwork to identify gaps in care, mitigate the progression of heart disease among high-risk populations, and trigger appropriate clinical interventions for healthier lives.

National cholesterol guidelines recommend that individuals with low-density lipoprotein-cholesterol (LDL-C) at or above 190 mg/dL be prescribed high-intensity statins to reduce their risk of heart disease. High-intensity statins are known to be effective in lowering LDL-C.

The SureNet program leverages an algorithm in the electronic health record (EHR) that identifies individuals who meet two criteria: recent lab results of low-density lipoprotein-cholesterol (LDL-C) over 190 mg/dL and no evidence of an order for a statin medication within the last two to six months. For any patient who matches the criteria, an order for high-intensity statin and lipid panel testing is automatically placed, which primary care providers are then prompted to approve through the EHR.

Since the program's launch in 2019, the number of patients receiving guideline-adherent care for their high cholesterol has improved by 23%. Furthermore, the SureNet program has achieved a 22.2% relative increase in the proportion of patients who have lowered their LDL-C to below 190 mg/dL.

"Statin reduce heart attacks and strokes downstream and are associated with longer, healthier lives, and that's the goal –

to have healthier patients," said Dr. Ronald D. Scott, a Family Medicine Physician and Cardiovascular Co-Lead for the Southern California Permanente Medical Group.

Not only is this SureNet initiative effective at improving health, but it also relieves administrative burden for clinicians, which is critical as staffing shortages persist in the U.S. Care

managers alert primary care providers via the EHR to approve pending orders of high-intensity statins and lipid panel screenings. As a result, clinical teams can more effectively and efficiently identify patients needing statins and can spend more time taking care of patients' other needs.

"This program works in tandem with the primary care provider – a single notification is sent to them," said Matthew Mefford, a Cardiovascular Disease Epidemiologist and Research Scientist in the Department of Research & Evaluation at Kaiser Permanente Southern California. "It doesn't overburden physicians with many prompts or messages."

By identifying patients' lab results that show LDL-C over 190 mg/dL, physicians and patients are empowered to make the necessary follow-up

intervention.

"In my view as a pathologist, this program is extending the scope of lab practice to go beyond mere notification of test results," said Dr. Michael Kanter, Associate Investigator in the Department of Research & Evaluation at Kaiser Permanente Southern California. "It really pushes the boundary of the lab, and that's a good thing for the field of laboratory medicine, and more importantly, for the communities and clients we serve."

UNIVANTS IN ACTION

6% improvement in high-intensity statin prescription orders for patients with LDL-C at or above 190 mg/dL

32% relative increase in prescription pick-up

22.2% relative increase in the proportion of patients who improved their LDL-C below 190mg/dL

“The High LDL-C Statin Start SureNet program stands out for its innovative approach to addressing the underutilization of high-intensity statins among adults with elevated LDL-C levels.” – ADLM

CONGRATULATIONS TO THE ADDITIONAL 2023 WINNERS

3 WINNERS OF **DISTINCTION**

Improving equity in maternal and fetal outcomes by eliminating disparities in maternal drug screening

WASHINGTON UNIVERSITY SCHOOL OF MEDICINE,
BARNES-JEWISH HOSPITAL,
AND ST. LOUIS CHILDRENS HOSPITAL | USA

REDUCED RACIAL DISPARITY through reduction of unnecessary CPS activation, leading to **66%** fewer CPS reports for Black mothers (now 4%) and **50%** fewer CPS reports for White mothers (now 3%).

“**THIS IS A FASCINATING EXAMPLE** whereby insights derived from laboratory medicine successfully led to a process change with a direct impact on health equity. -Modern Healthcare

Improving access to health services in vulnerable communities affected by war
ESCULAB | UKRAINE

60% RELATIVE REDUCTION IN COSTS associated with comprehensive testing for early diagnosis of cardiovascular disease.

“**WITH BENEFITS TO NEARLY 90,000 PEOPLE**, this valued program has led to decreased healthcare costs, while improving health outcomes. -IFCC

Improved patient outcomes facilitated by C-peptide testing, enabling reclassification and therapeutic changes for patients with diabetes
UNIVERSITY HOSPITAL OF WALES | UK

SIGNIFICANT IMPROVEMENT in glycemic control, with a median HbA1c improvement of **10mmol/mol** and reduction in median body mass index of **6kg/m²**

“**THE INTEGRATION OF C-PEPTIDE TESTING** into routine clinical practice enhanced diagnostic precision and enabled a patient-centric approach to treatment, positively impacting glycemic control and quality of life. -ADLM

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Learn more at UnivantsHCE.com

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6 WINNERS OF ACHIEVEMENT



Reducing unnecessary CT scans in the emergency department with new mild head injury assessment pathway

KLINIKUM LÜNEBERG | GERMANY

41% of mild TBI patients in the emergency department avoided unnecessary CT scans, thus reducing exposure to unnecessary radiation.



The Kansas Two-Step: Simplifying the diagnosis of clostridioides difficile at an academic medical center

THE UNIVERSITY OF KANSAS HEALTH SYSTEM | USA

\$73,866 USD in mitigated costs directly attributable to mitigated antibiotic use.



Distinguishing macroprolactinemia from hyperprolactinemia using a validated monomer prolactin detection method

HUASHAN HOSPITAL FUDAN UNIVERSITY | CHINA

72.2% of surveyed physicians indicate that the prolactin monomer detection method helps expedite diagnoses.



The Women and Heart Program - Empowering women's health through early identification and prevention of coronary risk

INSTITUTE FOR CARDIOVASCULAR PREVENTION AND REHABILITATION | CROATIA

113 newly identified women at moderate to high CVD-risk now receiving further investigations and/or treatment for long-term prevention.



Reducing unnecessary admissions associated with pediatric mononucleosis via implementation of EBV IgM testing in the emergency department

EMERGENCY CLINICAL COUNTY HOSPITAL TARGU MURES | ROMANIA

2% reduction in Pediatrics Ward admissions and Infectious Disease Clinic transfers, translating to €6136 (\$5,634) in mitigated healthcare costs.



No time to lose with lives on the line - Maximizing efficiency in the lab to save more lives through organ donation

SOUTHWEST TRANSPLANT ALLIANCE | USA

JUDGE COMMENTARY: "Southwest Transplant's initiative highlights the crucial role of continuous innovation and solutions to address the rising demand for organ transplants, providing hope for individuals in desperate need." –ADLM

APPLY NOW TO BE RECOGNIZED FOR GLOBAL EXCELLENCE AMONG ELITE PAST WINNERS

Learn more: UnivantsHCE.com



UNIVANTS™
OF HEALTHCARE EXCELLENCE



2022 Ipswich Hospital, East Suffolk and North Essex NHS Foundation Trust | England



The National Basketball Association | USA



ROSE Foundation | Malaysia



2021 Croydon University Hospital | England



Prisma Health Greenville Memorial Hospital | USA



Banner Health and Laboratory Sciences of Arizona | USA



2020 Canterbury District Health Board | New Zealand



Hospital Universitari Sant Joan d'Alacant | Spain



University Manitoba Chronic Disease Innovation Center at Seven Oaks General Hospital | Canada



2019 University of Dundee | Scotland



Diaverum Kidney Care Centre Potsdam affiliated with Otto-von-Guericke University Magdeburg; Dialysis Centre Potsdam & Ernst-von-Bergmann Hospital Potsdam | Germany



Oxford University Hospitals NHS Foundation Trust | England



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