Given by the National Committee for Quality Health Care's Annual Award, Trinity Health was named the winner of the 10th annual National Quality Health Care Award. The reasons why Trinity Health has been chosen as the winner include their commitment to clinical quality improvement, which prompted them to prepare posters and papers to present at Trinity Health's annual Fall Conference. They also design and execute pilot projects to improve specific areas, and share the results when the pilot is complete. It also helps them to merge their respective organizations in the Joint Commission on Accreditation of Healthcare Organizations. Trinity Health also holds a Spring Conference on Governance and Leadership, where its top executives listen to national experts in quality and safety and bring home cutting-edge innovations.

Patient-centered practices
Each Trinity member organization undergoes an annual assessment to measure how well they respect their patients' decisions about their treatment. Trinity also provides patients and their families with tools to help them understand their options, such as consultation services at the local level and access to the Internet-based Healthwise Knowledgebase. Feedback on use of Healthwise helps Trinity design patient education materials.

Short and long-term strategic planning
At its inception, Trinity Health engaged an outside facilitator to help it design a strategic plan. After a two-day meeting among more than 100 of its top administrative and clinical leaders and board members, Trinity produced a plan to improve performance, develop its workforce, strengthen its mission, manage its resources, and support innovation. Individual goals are assigned to accountable executives on the senior management team. Those accountable executives, along with the member organizations’ CEOs and the entire senior manage-
Building a committed workforce

One of Trinity’s corporate objectives is to reduce nursing turnover, and it has funded several pilot projects among its members based on ideas submitted. Mercy General Health Partners, Muskegon, Mich., came up with a comprehensive program to improve the ergonomics of the nurses’ work environment, from changing the flooring on inpatient units to giving them allowances for more supportive shoes, to teaching them how to lift properly, to providing special equipment to transfer patients between gurneys and beds. “Our average nurse is in her forties, and may be more susceptible to being injured,” Conlon says. “We need to take good care of them.”

As a result of this kind of attention, Trinity Health’s nurse vacancy rate has declined to 7.6 percent, down from 11.5 percent in 2001.

Science-based performance evaluation system

Trinity Health has made a systemwide commitment to achieve outcomes in the top 25 percent nationally for ten core clinical indicators: seven from the JCAHO, two medication safety indicators, and the primary caesarean section rate. For comparison, it uses blinded data from several clinical indicator vendors, including MedStat and the Michigan Health and Hospital Assn.

In the past year, Trinity has achieved top quartile status for six of the indicators, up from two in January 2003, and eight showed improved performance. Trinity Health member organizations routinely use I2S2 to see which of their peers are doing better than they are on selected indicators, and information exchange is common. “People are flattered to be asked what they’re doing,” Conlon says.

In the area of patient safety, Trinity has made a concerted effort to gather data about errors and near-misses: information that’s classically been difficult to elicit. Seventeen of its hospitals are now using an intranet-based system that allows anonymous, standardized, non-punitive reporting. The system receives about 3,000 reports a month. As a result, there have been many actions in the past year, including 72 facility improvements, 29 new policies or procedures, 36 revisions of existing procedures, and 179 revisions of existing processes.

Financial management

Trinity Health has exceeded its system operating margin targets for three years and expects to at least reach this year’s target of 2.5 percent. Strong performance on clinical quality indicators means that the system can maximize reimbursement from both CMS and private insurers such as Blue Cross and Blue Shield of Michigan, both of which base reimbursement at least partly on quality of care.

Trinity Health has worked to standardize many system-wide functions, such as supply-chain management, financial management, compliance oversight, legal services, employee benefits administration and risk management. The process has saved millions of dollars. For example, three years of standardized supply-chain management has saved more than $65 million, and the system expects the total to hit $110 million by the end of fiscal year 2005.

Community health needs

Each Trinity member organization completes an annual assessment of its community’s needs. The assessment includes outcome measures that are tied to the health of the community. In fiscal year 2003, Trinity provided $438 million to 1,656 community
benefit programs, an increase of 16 percent over the previous year. Of those programs, 468 ministered to the poor and underserved.

Trinity takes care to assess community needs when deciding the strategic direction of its facilities, Ms. Pelham says. For example, Trinity operated a nursing home for developmentally disabled adults in Indiana, and it was financially shaky. "We don't close facilities or change services unless there are other good resources available to the people we serve," she says. "We don't walk away from people who need care." As it turned out, the state actually preferred that the residents live in group homes, so Trinity worked with the state's social services to ensure that all the residents were appropriately relocated.

### About the National Quality Health Care Award

The National Quality Health Care Award program, begun in 1994 and co-sponsored with *Modern Healthcare* since 1995, requires applicants to demonstrate a multifaceted commitment to quality, as well as a system for measuring and continuously improving quality. The application is modeled on that of the renowned Malcolm Baldrige Award, and is presented annually by NCQHC to a provider with a demonstrated outstanding program to improve the quality of healthcare delivery to its community.

Applicants are required to describe their organizations’ commitment to quality in eight areas: Leadership, patient-centered practice, science-based performance evaluation, financial management and methods of meeting health needs in their communities.

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#### Past winners of the award include:

**1996**
- Intermountain Health Care, Salt Lake City, Ut.
  - **Special Recognition:** Independence Blue Cross, Philadelphia, Pa.
  - **Honorable Mention for Progress Targeted to Special Populations:** Touchette Regional Medical Center, Centerville, Ill.

**1995**
- Evanston Hospital Corp., Evanston, Ill.
  - **Honorable Mention:** Our Lady of the Lake Regional Medical Center, Baton Rouge, La.

**1994**
- Henry Ford Health System, Detroit, Mi.

### Trinity Health at a glance

Formed in 2000 from the merger of organizations run by the Sisters of the Cross and the Sisters of Mercy, Regional Community of Detroit. It is the third largest Catholic health system in the United States.

#### Facilities:
- 45 hospitals (29 owned, 16 managed)
- 402 outpatient clinics
- 27 long-term care services facilities
- 9 independent housing facilities
- 1 low-income housing facility
- 3 hospice facilities
- 5 assisted living facilities

#### Headquarters:
- Novi, Mich.
- Web site: trinity-health.org
- 26 member organizations

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<th>Financials (in thousands):</th>
<th>2003</th>
<th>2002</th>
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<tr>
<td>Total unrestricted revenue</td>
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<td>Excess of revenue over expenses</td>
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<tr>
<td>Total assets</td>
<td>$6,210,146</td>
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</tr>
</tbody>
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Source: Trinity Health

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About the NCQHC
The National Committee for Quality Health Care is a 501(c)3 independent educational membership organization founded in 1978 and made up of senior leaders from all sectors of the healthcare industry who share a common interest in quality as the foundation of healthcare delivery.

The committee's mission is:
• To create an assembly of national thought-leaders from the diverse constituencies of the healthcare system concerned with quality healthcare.
• To provide leadership in promoting principles of quality as indispensable elements of the American healthcare system.
• To anticipate challenges to the system and to identify and assess alternatives for improving the health of the American people.
• To communicate cost-effective means for improving the healthcare system that are based on sound research and evaluation.

NCQHC Principles of Quality Health Care
A Commitment to Excellence
Quality Healthcare...
• strives for continuous improvement in provider skills and the delivery of healthcare.
• is accessible to all.
• encourages active consumer participation.
• delivery is value-based.
• is committed to consumer and provider safety.
• protects confidentiality and privacy.
• delivery is a coordinated effort among providers.
• improves the health status of the local community.
• includes end-of-life consumer concerns.
• measures are accessible to the public.

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