**RISK MANAGEMENT FOCUSED AWARD APPLICATION**

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**DEFINITION:**

The Lighthouse Award category focuses on Risk Management or Patient Safety Projects that have already been *completed*. There is no requirement for accompanying data to demonstrate the project's impact. However, applications will be scored on the projects’ potential ability to impact risk mitigation and patient safety.

**ELIGIBILITY:**

Members of AEIX. “Member” includes any organization (hospital, clinic, long term care, urgent care, behavioral health, outpatient services, etc.) within the member system. For this award, the eligible departments include the organizations Patient Safety, Risk Management, or the equivalent department.

**Please share this application with all patient safety and/or risk management staff within your organization** that may be interested in applying for an AEIX Risk Management Award.

**INSTRUCTIONS:**

1. Complete the application in its entirety.
* In the event of missing or incomplete information, *if* the timeline allows, AEIX will send applications back to the member and request completion and/or clarification of the application.
* Blanks and/or incomplete information may result in disqualification if the deadline for application submission has passed.
1. Applications must be submitted to AEIX in **WORD** format.
* Applications must be completed electronically (typed) and be sent in an editable format (do not scan and send the document or send in a non-editable format such as a pdf).
1. Completed applications should be sent via email, as a WORD document attachment,  with a copy to the organization’s risk management leader, to the following email: aeixawards@premierinc.com.
2. Please note, award monies are not intended to be used for reimbursing hospital staff or the project participants to compensate them financially for their efforts.

**DEADLINE FOR AWARD APPLICATIONS IS FRIDAY JULY 18th, 2025**

**AEIX Lighthouse Risk Management AWARD Application**

**ALL fields/questions within the application must be completed prior to the submission.**

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| 1 | Applicant Name(s):  | Penny Cooper and Rhiannon Lewis |
| 2 | Title/Role at organization: | Penny Cooper, Director of Risk Management and Patient Safety; Rhiannon Lewis, Patient Safety Officer |
| 3 | Hospital or Entity Name:  | Baptist Health Lexington |
| 4 | Healthcare System:  | Baptist Health |
| 5 | Clinical or Operational Area: (Risk, Patient Safety, Quality, Perinatal, OR, Med-Surg, etc.) | Risk Management and Patient Safety |
| 6 | Project Title:  | The Waste is Worth It: Partnering with Pharmacy to ensure compliance with controlled substance administration, documentation and wasting while decreasing your facilities risk of diversion. |
| 7 | Mailing Address:  | 1740 Nicholasville Rd. 1800 Building, Suite 302 Lexington, Ky. 40503 |
| 8 | Telephone:  | 859-260-6696 |
| 9 | E-mail Address:  | penny.cooper@bhsi.com |

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| --- | --- | --- |
| 10 | Name and address of Hospital/Entity (local) Risk Manager: | Penny Cooper 1740 Nicholasville Rd. Lexington Ky. 40503 |
| 11 | Name of and address of SYSTEM Risk Manager if different from above: | Click or tap here to enter text. |
| 12 | Name and address of Hospital/Entity/System CEO | Chris Roty, 1740 Nicholasville Rd. Lexington, Ky. 40503, Hospital President |
| 13 | Name and address of Hospital/Entity/System CFO | Stephanie Doom, 1740 Nicholasville, Rd. Lexington, Ky. 40503 |

1. **The best practice/improvement project submitted for consideration is a:** *(Check all that apply)*

[x]  **Clinical Policy**

[x]  **Performance Improvement Strategy** *(Six Sigma, etc.)*

[ ]  **Communication Strategy** *(Briefing before surgical procedure, senior management rounds, etc.)*

[x]  **Other** *(Please specify)*

Click or tap here to enter text.

1. **Briefly describe the practice or project:** *(what prompted the project – the why, the process to complete the project – the how)* ***Please limit the response to two paragraphs maximum.***

**This project was prompted after a root cause analysis identified a gap in which a controlled substance was removed from the Omnicell for a patient and administered to a different patient that did not have this medication ordered. A proper waste in the Omnicell was not performed at the time of medication administration. As well as an increased number of safe reports for inappropriate reconciliations with controlled substances.**

1. **Were any metric(s) used to measure and to sustain success?** [x] **Yes** [ ] **No**

***If yes*** (*metrics are not required for this award category*)**, please explain:** *(one paragraph maximum plus*

*before and after data)*

**Metrics were pulled from the steps listed in the hospital medication administration policy which has clear definitions for administration, returns, and wasting of scheduled drugs. There is a 30-minute window for staff to return or waste medications that are not given due to clinical changes with the patient or medications that are partial doses.**

1. **Briefly describe how this practice or project demonstrates novel approaches or innovative solutions to healthcare risk management challenges by introducing unique methodologies, tools, or practices not widely implemented (*please limit your response to one paragraph*):**

We utilized a novel approach for the education and teaching. By laying the foundation with the “carrot” that we are doing this for you. To help you the nurse protect your licensure. Instead of utilizing the “stick” approach.

1. **Briefly describe how this project adheres to established clinical risk management guidelines and standards or creates new ideas to improve previously established guidelines (*please limit your response to one paragraph*):**

New approach to ensure staff adherence with controlled substances policy and decrease medication errors and diversion of scheduled medications. Collaborative approach with pharmacy, risk management, and nursing leadership.

1. **Briefly describe how the project is/was cost effective, i.e., how it demonstrates an efficient use of resources (please limit your response to one paragraph):**

The project was cost effective because we utilized Pharmacy Interns with a portion of the project. We repurposed a report that was already being ran by the Pharmacy team. Safe reports were already being placed by the pharmacist with any discrepancies noted in Omnicell/EPIC related to medication administration of scheduled medications. Safe reports reviewed by patient safety officer. Patient safety officer developed monthly data collection tool that was shared with nursing leadership. The Risk Management Director created a monthly report for each individual unit, requiring the director to investigate and follow-up in each safe report.

1. **Explain how the project aligns with AEIX’s mission of “*To partner with forward-thinking healthcare leaders to safeguard assets, enhance patient safety, and inspire innovation” and vision of “Through our collective experience and unique expertise, we will provide the leading pathway for managing risk and improving safety in healthcare*.”? In partnering with pharmacy we executed a**

Identified a need for the project based on our event with a poor patient outcome. Needed to improve patient safety by decreasing medication errors and preventing diversion from nursing staff. While ensuring adherence to established process and policy. Making this project a priority for nursing leadership and frontline staff. We produced positive results by demonstrating a significant reduction in events between 2022 and year to date 2025.

***You may attach any supporting documentation such as graphs, tables, posters, PowerPoint to the application.***

1. **Are you willing to allow other AEIX members to have access to your application upon request?**

[x]  **Yes**

[ ]  **No**

1. **Was this project an *original concept* created by the project team?** [x]  **Yes** [ ]  **No**

**Additional notes/explanation *if needed*:** An original concept created and developed after our event with a poor patient outcome.

1. **Additional comments:**

We are proud of the project and the results it produced. We feel confident with our process and have been told by regulatory agencies that this is a best practice**.**

***You may attach any supporting documentation such as graphs, tables, posters, PowerPoint to the application.***

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*Please complete the application thoroughly as blanks and/or incomplete information may result in disqualification.*

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**RISK MANAGEMENT FOCUSED**

**AWARD APPLICATION EVALUATION**

**The following questions (I. A through D, and II) must be completed by the applicant *or* by a Risk Management or Patient Safety Leader:**

1. **Using the following criteria, applications will be evaluated and scored on a scale of 1-3, with three (3) being highest:**
	1. **Innovation and Creativity:**

[ ]  Practice appears to minimally impact approaches or innovative solutions to healthcare risk management challenges by introducing unique methodologies, tools, or practices not widely implemented. (1)

[ ]  Practice appears to have *some* impact on approaches or innovative solutions to healthcare risk management challenges by introducing unique methodologies, tools, or practices not widely implemented. (2)

[x]  Practice appears to have a *strong* impact on approaches or innovative solutions to healthcare risk management challenges by introducing unique methodologies, tools, or practices not widely implemented. (3)

* 1. **Alignment with Best Practices:**

[ ]  *The project demonstrates minimal adherence to established clinical risk management guidelines and standards or the creation of new ideas to improve previously established guidelines.* (1)

[ ]  *The project demonstrates moderate adherence to established clinical risk management guidelines and standards or the creation of new ideas to improve previously established guidelines.*

[x]  The project demonstrates strong adherence to established clinical risk management guidelines and standards or the creation of new ideas to improve previously established guidelines.

* 1. **Cose Effectiveness**

[ ]  The project does not demonstrate an efficient use of resources (i.e., it is – or has the potential to be expensive). (1)

[ ]  The project demonstrates a moderately efficient use of resources. (2)

[x]  The project demonstrates an efficient use of resources (it is not costly to implement). (3)

* 1. **Alignment with AEIX’s mission “*To partner with forward-thinking healthcare leaders to safeguard assets, enhance patient safety, and inspire innovation” and vision of “Through our collective experience and unique expertise, we will provide the leading pathway for managing risk and improving safety in healthcare.*”:**

[ ] Project appears to have minimal or no alignment with the AEIX mission. (1)

[ ] Project appears to have some alignment with the AEIX mission. (2)

[x] Project clearly aligns with the AEIX mission. (3)

1. **Applicant or Risk/Patient Safety Comments:**

Click or tap here to enter text.

**III. ATTESTATION:**

[x]  **Yes, I (the applicant), attest to the notification of my organization’s Risk Management Leadership of this application and its content.**

1. **Completed applications should be sent via email, as a WORD document attachment,  with a copy to the organization’s risk management leader, to the following email:** **aeixawards@premierinc.com****.**

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**TIMELINE**

* **5/12/2025** - Application period opens
* **7/18/2025** - Application period closes
* **8/19/2025** - Awards & Grants Subcommittee meeting (review applications and vote on winners)
* **9/16/2025** - Subcommittee recommendations to IAC the slate of winners for approval
* **11/11/2025 – SAC/Board Meeting – final approval of winners**

*Notification of winners/non-winners via U.S. Mail occurs following the SAC meeting.*