CareFusion Foundation Names 11 Clinical Excellence Grant Recipients

SAN DIEGO, CA, June 25, 2014 /PRNewswire/ – The CareFusion Foundation today awarded $500,000 in grant funding to 11 U.S. nonprofit health care institutions as part of the Foundation's second annual Clinical Excellence Grant Program. The institutions will receive grants of up to $50,000 based on programs that develop and share best practices in improving medication safety and efficiency.

"The proper management of medications – from the physician order to the pharmacy to the nursing station to the patient bedside – is a critical issue for health care institutions nationwide," said Dr. Carlos Nunez, chief medical officer for CareFusion. "Working with these nonprofit partners to develop and share best practices for medication management will advance the field at large and help providers deliver safer, more cost-effective care."

After focusing on infection prevention in its first year, the Clinical Excellence Grant Program this year sought proposals for improving medication safety and efficiency, including reducing medication errors, improving clinician workflow, increasing pharmacy efficiency and driving medication use compliance. Together, through both grant cycles, the CareFusion Foundation has awarded $1 million to advancing health care best practices.

This year's recipients will address inter-departmental and inter-facility communication practices, patient intervention and reminder systems, medication reconciliation processes, and educational programs to improve medication adherence, and include:

- **Boston Medical Center**
  Optimize pain control and safety in patients prescribed opioids after surgery
- **Children's Hospital of Philadelphia**
  Evaluate diagnosis and management of neonatal sepsis
- **Hartford Hospital, Hartford, Conn.**
  Reduce medication waste through improved communication between departments
- **Hektoen Institute, Chicago, Ill.**
  Improve antibiotic stewardship through an automated notification system to facilitate region-wide control of extensively resistant microorganisms
- **Lifespan Rhode Island Hospital, Providence, R.I.**
  Improve safety of arterial catheters through the evaluation of an evidence-based intervention bundle
- **MedStar Health, Baltimore, Md.**
  Increase outpatient medication adherence through a technological reminder system tightly coupled with in-person and phone-based reminders
- **Mountain States Health Alliance, Johnson City, Tenn.**
  Reduce medication errors by increasing home medication reconciliation for patients admitted through the emergency department
- **Palomar Health, Escondido, Calif.**
  Reduce harm associated with infusion device alarms through development of best practices for medication storage and administration
- **Robert Wood Johnson University Hospital, New Brunswick, N.J.**
  Improve outpatient medication compliance through personalized counseling by pharmacists
- **Southwestern Vermont Health, Bennington, Vt.**
  Reduce hospital readmissions by providing tools to high-risk patients to improve their medication adherence and ability to self-manage their care
- **University of North Carolina, Chapel Hill, N.C.**
  Implement a standardized drug infusion concentration and dosing unit guideline for the state of North Carolina

To be eligible for a one-time grant of up to $50,000 per organization, U.S.-based nonprofit health care institutions were invited to submit a written proposal detailing their program plan and expected results. Preference was given to evidence-based programs with potential to serve as best practice models.

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