Letter of Intent Instructions
& Full Application Instructions
2017 Award for Excellence Program

This award program is a collaboration between the ASHP Foundation and the Cardinal Health Foundation.

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## CONTENTS

ASHP Foundation Background .................................................................................................... 3

Award Program Background ...................................................................................................... 3

Program Description ................................................................................................................... 4

Eligibility ..................................................................................................................................... 4

Letter of Intent ........................................................................................................................... 5

Initiative Description for Full Application ................................................................................... 5

Selection Criteria ........................................................................................................................ 7

Finalist Webinar .......................................................................................................................... 9

Awardee and Finalists Monetary Award .................................................................................... 9

Site Visits .................................................................................................................................... 9

Post-Award Activities .................................................................................................................. 9

Application Submission Information ........................................................................................ 10
The ASHP Foundation is a charitable, non-profit, 501(c) 3 corporation organized as a public foundation in 1968.

As the philanthropic arm of the ASHP, our vision is that: Patient outcomes improve because of the leadership and clinical skills of pharmacists, as vital members of the health care team, accountable for safe and effective medication use.

The mission of the ASHP Foundation is to improve the health and well-being of patients in health systems through appropriate, safe and effective medication use.

1. Facilitate and strongly support the pharmacy profession in advancing pharmacy practice models that foster pharmacists’ leadership and accountability for patient outcomes.
2. Drive the advancement of the technical, human and leadership competencies of pharmacists and pharmacy staff in complex and rapidly changing organizations.
3. Ensure the long-term financial sustainability of the ASHP Foundation.

The Award for Excellence in Medication Safety is a nationally acclaimed awards program that recognizes outstanding pharmacist leadership, teamwork, innovation and patient outcomes that demonstrate improvements in patient safety within a medication-use system in a hospital or health system.

In 2003, a team of leaders from Cardinal Health, ASHP and their respective Foundations conceptualized an awards program to showcase and demonstrate the critical value and importance of pharmacist leadership in impacting medication-use safety. They recognized that the pharmacy team assumes primary responsibility to lead the effective and safe use of all medications in acute and ambulatory settings. The award program was modeled after the American Hospital Association (AHA) Quest for Quality with the unique focus on medication-use and safety. Over more than a decade, this program has recognized major initiatives, including:

- Expanding access and safety through incorporating technology into processes and systems;
- Implementing services during transitions to optimize medication-use for complex and vulnerable patients; and
- Optimizing medication management of high-alert drugs, such as antithrombotic agents and insulin, through stewardship and system-wide initiatives.
**Program Description**

The Award for Excellence in Medication Safety recognizes an interdisciplinary team in a hospital or health system that has: 1) taken systematic steps to produce improved outcomes related to key aspects of prescribing, dispensing, administering and/or monitoring of medication use; 2) demonstrated ongoing teamwork, coordination and communication to affect the quality and safety of the medication-use system; and 3) demonstrated an ability and commitment to sustain a record of improved quality, safety and reliability of performance within the medication-use system.

The goals of this program are to:

- Show case continuous quality improvements within a medication-use system that are large in scope, effective in improving patient safety and are applicable to other healthcare organizations;
- Disseminate the results of these initiatives to expand the knowledge of medication-use best practices; and
- Recognize outstanding pharmacy leadership that fosters interprofessional team efforts leading to improved quality and safety of a medication-use system.

**Eligibility**

Not-for-profit organizations, for-profit entities, and government agencies are eligible to apply to this program. If a for-profit entity or government agency is a recipient or finalist, the monetary award provided by the ASHP Foundation must be received and managed by a 501(c)(3) not-for-profit organization. The institution must be in the United States of America to be eligible for the award.

The hospital or health system must be licensed by the state in which it is located and/or be accredited by an appropriate regulatory body such as The Joint Commission.

**Previous recipients and finalists of this award program are not eligible for the ensuing five years after they were recognized as a recipient or finalist** (e.g., the 2011 recipient and finalists would be eligible to apply for the 2017 award).

Members of the ASHP Foundation Board of Directors and the ASHP Board of Directors are not eligible to apply for this program as a Team Leader or as part of the interprofessional team.

Organizations should only submit one application per site.

*Please note: If you become one of the three finalists in the 2017 program, we ask that you not submit to the 2017 ASHP Best Practices Awards program. You are welcome to submit to the ASHP Best Practices program in a subsequent year.*
Letter of Intent

**** (There is a review of the LOIs by the external review panel, and then selected applicants are invited to submit a full application which is due at a later date. This date will be communicated to them directly.)

Applicants must provide a concise description of his/her institution’s medication safety initiative in the letter of intent. This description must not exceed 1000 words (approx. 3-4 pages). Graphs and tables are not calculated in the word count, but are included in the total number of pages submitted. Adequate information should be provided to enable reviewers to assess the following, which should be included as section headings (see description on pages 5-7):

- Medication-Use System Initiative Scope
- Pharmacist Leadership
- Planning and Implementation
- Measurable Outcomes and Impact
- Innovation and Generalizability
- Plans for Sustaining & Advancing the Initiative

Initiative Description for Full Application
(Only Invited Applicants)

This initiative description may not exceed ten (10) pages, including the abstract, (using 11-point font or larger, 8.5 x 11 inch paper, 1-inch margins, single spacing and single-sided pages). All graphs, charts, and references should not exceed five pages in the appendices.

1. Abstract

Provide a concise overview of the rationale, methods, results, and conclusion for your institutions’ medication safety initiative. In the abstract, do not include demographic information about your organization. The abstract may not exceed one page.

1. Medication-Use System Initiative Scope

Describe the initiative, issue or challenge that prompted action by your hospital or health system to improve the medication-use system. Include the scope (e.g., unit, hospital, or health system), evidence/data and role of pharmacists in identification of the issue or challenge.

The following should be addressed in your narrative:

- Was the underlying medication safety problem or challenge quantifiable with reliable baseline data?
- Do the baseline data provide significant and compelling evidence of a medication safety problem or challenge that required performance improvement?
- Is the scope of the medication safety improvement initiative hospital/system-wide and broad in nature?
- Does the medication safety improvement initiative encompass multiple components of the medication-use system?
- Was the approach for ensuring interprofessional teamwork and cooperation and effective?
2. **Pharmacist Leadership**

The award is designed to recognize a pharmacist-led, interprofessional team effort to improve patient safety within a medication-use system in a hospital or health system.

The following should be addressed in your narrative:

- Is there evidence of the pharmacist’s role in identification of the underlying medication safety problem?
- Is there evidence that a pharmacist-led implementation of the medication safety improvement initiative?
- Is there evidence of the pharmacist’s role in analyzing outcome data, communicating results and assessing institutional impact?

3. **Planning & Implementation**

How does your organization involve pharmacists and other health professionals in broad issues of medication safety? Please describe each professional’s level of involvement and leadership in institutional medication safety efforts and the specific initiative described in this application: pharmacists, physicians, nurses, health care executives, and other health professionals.

How did your institution engage a team of practitioners to address medication-use safety issues and challenges? Provide descriptions of the institution’s planning approach, the pharmacist’s role in constructing plans for changes in the medication-use system and data collected during the planning stages.

The following should be described in this section of your narrative:

- Was the medication safety improvement initiative implemented by an interprofessional team?
- Was the medication safety improvement initiative well-designed and based on comprehensive plans and timetables?
- Were the goals and objectives of the medication safety improvement initiative defined in advance of planning and implementation? Were reliable measures to determine success with the objectives developed in advance of planning and implementation?
- Is there evidence that during the planning phase a process was developed to identify continuously barriers to implementation and respond to these barriers?
- Did the implementation plan include processes for communicating with and educating staff about the implementation of the medication safety improvement initiative?

4. **Measurable Outcomes and Impact**

Successful Award for Excellence in Medication-Use Safety applications must include data that support an impact on patient-level outcomes. While process measures have value, it is imperative that applicants provide data that demonstrate impact of the initiative on safety, therapeutic, economic, and humanistic outcomes. These data should be displayed visually (e.g., tables, charts, graphs) and should demonstrate trends from baseline through the current period.

The following should be addressed in this section of your narrative:

- Are data available that demonstrate a positive impact on the medication safety problem or challenge that required performance improvement?
  - Do these data address patient-centered safety, therapeutic, humanistic and economic outcomes?
Do these data show evidence of reduction in

(1) Morbidity,
(2) Mortality,
(3) Preventable adverse drug events,
(4) Inpatients’ lengths of stay,
(5) Hospital readmissions or
(6) Emergency department visits
(7) Overall costs of care?

- Is there evidence that interim outcome data and other feedback were analyzed to determine a need for adjustments in the implementation plan, if applicable?
- Have the results of the project been communicated and utilized within the institution to enhance medication safety in other areas?

5. Innovation and Generalizability
Describe how the initiative and activities at your institution regarding medication-use safety and pharmacists’ leadership are innovative. Include information on the use of resources (e.g., dollars, manpower and techniques) and compare to published reports.

The following should be addressed in your narrative:

- Is the medication safety improvement initiative innovative?
- Is there evidence that the medication safety improvement initiative can be sustained in the institution over the long term?
- Can the components of the medication safety improvement initiative be adopted in other hospitals or health-systems?
- Have the results of the initiative been communicated to other health professionals and healthcare organizations via professional networks, professional meeting presentations and publication in the biomedical literature? If no, are there plans to do so?
- Did the initiative demonstrate an innovative approach to use of resources (i.e., dollars, staff time, techniques, and tools)?

6. Plans for Sustaining and Advancing the Initiative
Describe how you would use the $50,000 award money to sustain and further enhance your medication-use safety initiative and activities at your hospital or health system.

Selection Criteria
Applications for the awards program will be evaluated using the selection criteria listed below. These same selection criteria will be used during the site visit evaluations for determination of the recipient and finalist organizations. Below each criterion, examples of questions that will be considered by reviewers during the application review are provided.

Medication-Use System Initiative Scope (10 points)

- Was the underlying medication safety problem or challenge quantifiable with reliable baseline data?
- Do the baseline data provide significant and compelling evidence of a medication safety problem or challenge that required performance improvement?
- Is the scope of the medication safety improvement initiative hospital/system-wide and broad in nature?
- Does the medication safety improvement initiative encompass multiple components of the medication-use system?
Was the approach for ensuring interdisciplinary teamwork and cooperation effective?

**Pharmacist Leadership (15 points)**
- Is there evidence of the pharmacist’s role in identification of the underlying medication safety problem?
- Is there evidence that a pharmacist led the implementation of the medication safety improvement initiative?
- Is there evidence of the pharmacist’s role in analyzing outcome data, communicating results and assessing institutional impact?

**Planning and Implementation (10 points)**
- Was the medication safety improvement initiative implemented by an interdisciplinary team?
- Was the medication safety improvement initiative well-designed and based on comprehensive plans and timetables?
- Were the goals and objectives of the medication safety improvement initiative defined in advance of planning and implementation? Were reliable measures to determine success with the objectives developed in advance of planning and implementation?
- Is there evidence that during planning a process was developed to identify continuously barriers to implementation and respond to those barriers?
- Did the implementation plan include processes for communicating with and educating staff about the implementation of the medication safety improvement initiative?

**Measurable Outcomes and Impact (35 points)**
- Are data available that demonstrate a positive impact on the medication safety problem or challenge that required performance improvement? Do these data address patient-centered safety, therapeutic, humanistic and/or economic outcomes? Do the data show evidence of reductions in morbidity, mortality, preventable adverse drug events, inpatients’ lengths of stay, hospital readmissions, emergency department visits and/or overall costs of care?
- Is there evidence that interim outcome data and other feedback were analyzed to determine a need for adjustments in the implementation plan, if applicable?
- Have the results of the project been communicated and utilized within the institution to enhance medication safety in other areas?

**Innovation and Generalizability (20 points)**
- Is the medication safety improvement initiative innovative?
- Is there evidence that the medication safety improvement initiative can be sustained in the institution over the long term?
- Can the components of the medication safety improvement initiative be adopted in other hospitals or health-systems?
- Have the results of the initiative been communicated to other health professionals and healthcare organizations via professional networks, professional meeting presentations and publication in the biomedical literature? If no, are there plans to do so?
- Did the initiative demonstrate an innovative approach to use of resources (i.e., dollars, staff time, techniques, and tools)?

**Sustainability and Advancement (10 points)**
- Is there evidence the current medication safety improvement initiative will be sustained in the institution over the long term? Is there evidence from past medication safety initiatives to support this?
Is there a detailed plan to advance this initiative and activities?

Finalist Webinar

As part of the application process, the three finalist organizations will be asked to present a webinar presentation for the selection panel in advance of site visits.

Awardee and Finalist Monetary Award

The use of the funds will be restricted for sustaining and further developing the program initiative.

Site Visits

Site visits will be scheduled for the hospitals/health systems that are selected as finalists. Each finalist will be required to coordinate a one-day visit for an award selection panel that will allow for interaction with key members of the team who were instrumental to the development, implementation and maintenance of the medication safety improvement program. Additional documentation may be requested during the site visit.

Post-Award Activities

There are 3 recipients: one (1) awardee and two (2) finalists.

All Recipients:

- A plan for use of award funds to sustain and advance their initiative will be submitted by the recipient organizations during the application process and confirmed within 30 days of award notification.
- Following initial disbursement of award monies, the recipients must submit biannual reports (May/November) to the ASHP Foundation that address:
  - Sustaining and advancing their medication-use safety initiative and activities,
  - All specific plans for presentation and publication of related to their initiative.
  - A reprint of all articles that emanate from this study should be submitted to the ASHP Foundation.
- Recipient organizations will attend the ASHP Midyear Clinical Meeting;
- Recipient organizations will submit an article for publication to a peer-reviewed biomedical journal. If submission is made to a pharmacy journal, ASHP retains the right of first refusal for articles related to the project submitted for this award.
- Recipient organizations are expected to participate in subsequent outreach and education efforts aimed at disseminating the accomplishments of the recipient organization.

Awardee:

- The awardee organization will also be expected to host an on-site videotaping team for their program.
- Awardee organization will work with ASHP Foundation to plan and deliver a presentation at the ASHP Summer Meetings; and
- Participate in post-award media events, including a radio tour.
Finalists

- Finalist organizations will be expected to work with the ASHP Foundation to:
  - Identify the practitioner audience that would benefit from their work, and
  - Plan and deliver an educational webinar to highlight their program and disseminate best practices in medication-use safety.

Full Application Submission Information

****(For separate Letter of Intent requirements please go to page 9)***

The following must be submitted to meet the application requirements:

1. Completed on-line application form including uploaded CEO signature.
2. Initiative description that does not exceed ten (10) pages (using 11-point font or larger, 8.5 X 11 inch paper, 1-inch margins, single spacing and single-sided pages). The program narrative should be uploaded to the on-line system as one PDF. **The program narrative must be organized under the following seven subheadings:**
   - Abstract
   - Medication-Use System Initiative/Scope
   - Pharmacist Leadership
   - Planning and Implementation
   - Measurable Outcomes and Impact
   - Innovation and Generalizability
   - Sustainability and Advancement

Please note: All graphs, charts, and references should not exceed five pages in the appendices.

Applicants should receive a receipt confirmation email from the ASHP Foundation upon submission of the application. If this email confirmation is not received, applicants should immediately contact the ASHP Foundation at foundation@ashp.org to verify that the application and abstract was received.

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