

Welcome to the *ACHE Premier Corporate Partner E-Newsletter*. This quarterly publication educates ACHE members on healthcare trends, offers solutions to leaders, and shares information about complimentary education and networking opportunities being offered by ACHE's Premier Corporate Partners.

ACHE would like to thank our Premier Corporate Partners for their support of ACHE programs and for playing a critical role in helping ACHE advance its members and healthcare management excellence.

*Please note that reference to any specific commercial products, processes or services by a Premier Corporate Partner in this newsletter and featured educational content does not constitute or imply an approval, endorsement, recommendation or referral by ACHE. In addition, the views and opinions expressed in the featured educational content do not necessarily state or reflect those of ACHE.*

*The articles in this newsletter were submitted by Premier Corporate Partners and are generally published as submitted.*

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#### **Aramark**

The goal of hospitals is to provide the best quality care and meet the needs of the patients and communities they serve. At Aramark, we know every decision your healthcare system makes affects the patient experience now and in the future. With a relentless focus on decreasing the risk of healthcare-associated infections, increasing nurse and patient engagement, and adopting innovative technologies and programs, our mission is

to drive value, productivity and quality assurance at your hospital. These resources will help ensure your healthcare system is operating at the highest efficiency levels while providing a superior patient experience:

- **Facilities of the Future:** Numerous forces will challenge the healthcare industry's ability to meet its business objectives. [Discover](#) these dynamics now amid the innovation curve needed to ensure a competitive advantage tomorrow.
- **Patient Experience:** Learn [here](#) how Aramark's proprietary rounding tools and a focus on the patient experience led to an impactful process change at one organization—improving the dining experience and raising quality scores overall for food, nursing and the hospital itself.
- **Clinical Equipment:** A strategic capital allocation plan will keep your equipment in check, lower wasteful spending and improve patient care, but it can be an overwhelming endeavor. Check out our [guide](#) so you don't waste another minute overspending.

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## [Aramark](#)

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### **Baxter Healthcare Corporation**

Baxter Healthcare Corporation continues to support research and investigation into developing best clinical practices in fluid management that help healthcare professionals improve outcomes for their patients with various indications.

Baxter's [EQUILIBRIA](#) fluid optimization program has been designed to support organizations in the assessment and implementation of best practice fluid management. We are happy to discuss the options with customers for how to make this happen as efficiently as possible. To learn more, please contact [Bill Jackson](#), director, integrated delivery networks, Baxter Healthcare Corporation.

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## [Baxter Healthcare Corporation](#)

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### **BD**

Diagnostic accuracy of lab tests is critical to patient outcomes. A recent study in the *American Journal of Infection Control*, however, shows that urine specimen contamination, deterioration and overgrowth are widespread. Unpreserved urine specimens run the risk of contamination or overgrowth, which may lead to unnecessary antibiotic prescriptions, Clostridium difficile infections and slower reporting of results.

A 515-bed acute care community teaching hospital in Toronto partnered with BD to change urine test ordering and collection practices in its ED. With 73,000 ED visits annually, the hospital was looking to streamline its urine culture ordering process. It implemented a two-step culture protocol and the BD Vacutainer® closed urine collection system.

This led to a nearly 50 percent decrease in antimicrobial prescriptions for urinary tract infections among admitted patients, a 40 percent reduction in ED patient callback with no untreated UTIs and a 65 percent reduction in ED urinalysis turnaround time, according to results published in the *BMJ Quality & Safety* journal. Read more about the study [here](#).

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You also can access a BD Vacutainer® Urine Collection System presentation here [http://www.ache.org/pdf/secure/corp\\_partner/PAS\\_UC\\_BD-Vacutainer-urine-collection-system\\_BR\\_EN.pdf](http://www.ache.org/pdf/secure/corp_partner/PAS_UC_BD-Vacutainer-urine-collection-system_BR_EN.pdf)

BD is proud to host the [ACHE Washington, D.C., Cluster](#) Aug. 27–30. BD will host complimentary lectures, where attendees can earn ACHE Qualified Education credit, and networking receptions for Cluster registrants and local ACHE members Monday, Aug. 27, and Wednesday, Aug. 29.

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[BD](#)

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## Cardinal Health

Physician burnout poses a major threat to health systems and to public health overall. This calls for an ever-growing need to better define—and solve—the problems that lead to such widespread rates of stress and exhaustion among healthcare providers.

The Triple Aim of healthcare, as defined by the Institute for Healthcare Improvement, is to optimize patient care and satisfaction, increase positive health outcomes, and reduce per capita healthcare costs. Physician burnout, however, has been associated with the antitheses of all three aims: reduced quality of care, worse overall health outcomes and increased costs.

How can healthcare leaders address burnout in the workforce? [Read more and download a free infographic.](#)

Cardinal Health is proud to host the [ACHE New York Cluster](#) July 30–Aug. 2. On Wednesday, Aug. 1, it will host a complimentary panel discussion focused on *Leveraging the Potential of Blockchain in Healthcare*, where attendees can earn ACHE Qualified Education credit. Cardinal Health also will host networking receptions for cluster registrants and local ACHE members Monday, July 30, and Wednesday, Aug. 1.

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[Cardinal Health](#)

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## Cerner Corporation

Rural healthcare organizations face a unique set of challenges as they operate in an unstable environment year to year. It is all too common for these hospitals to lose funding annually and still face the expectation of meeting new demands or exceeding previous performance with fewer resources.

In this [blog post](#), Mitchell Clark, senior vice president of Cerner's CommunityWorks organization, shares near- and long-term strategies to support rural healthcare organizations in addressing the challenges they face.

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[Cerner Corporation](#)

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## Change Healthcare

According to a recent ORC International and Change Healthcare survey of hospitals, executives, payers and consumers, 72 percent of providers feel consumer-centric strategies are important, with 25 percent investing in

them and nearly 90 percent making related staffing changes. Yet, despite this commitment, more than 70 percent of consumers indicate their experience with providers and payers has not improved, with some indicating it actually has gotten worse.

Patients are looking for convenient access, service expedience and a personalized touch, all for the best price. These demands are not unexpected: Patients receive this kind of service in other areas of their lives, such as shopping, banking and travel. They expect their healthcare providers to be more like other service industries: fast, efficient and customer focused.

Unfortunately, the current staffing models in some healthcare organizations are not conducive to patient-centered dynamics. Registration and front-desk staff juggle multiple duties, including checking in patients, requesting payment and answering phones. When staff members have too many priorities, they cannot focus on any one thing and do it well.

To learn more about the survey results, please read the full report [here](#).

Change Healthcare looks forward to supporting [ACHE's CEO Circle Forum](#) Oct. 1–2 in Austin, Texas, and welcomes attendees to its complimentary networking reception Oct. 1 from 5–6 p.m. at the Hyatt Regency Lost Pines Resort and Spa. To RSVP, please email [Maria Perez](#).

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## [Change Healthcare](#)

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### **IBM Watson Health™**

Conventional wisdom has it that inpatient volume and length of stay will keep trending downward as more procedures are performed in outpatient settings. But given our aging population and geographic variations, that assumption may not hold true across the board.

Listen to this [informational webinar](#) to learn how to gather accurate inpatient volume growth for *your* market—which may not match the rest of the country—and use it to develop accurate facility plans that fit your population's predicted needs, including bed requirements. This [webinar](#) examines:

- Trends in population growth and aging and what they mean for the inpatient experience
- Differences in inpatient growth across states
- The impact of inpatient volume and LOS changes on facility and bed planning

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## [IBM Watson Health™](#)

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### **Optum**

Bundles are a versatile, indispensable reimbursement method and have risen and fallen in popularity over the past 30 years. They have a place in any provider's reimbursement strategy, whether that strategy is focused on fee-for-service, fee-for-value or somewhere in between.

Regardless of how regulatory bundles change, bundle arrangements between all types of payers and providers are here to stay. Bundles have gained prominence after the Affordable Care Act was passed and within the Centers for Medicare & Medicaid Services Bundled Payments for Care Improvement initiative.

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If an organization's plan is to move toward advanced [alternative payment models](#), bundles should be an integral part of the plan. Bundles help organizations think about episodes more broadly. They also promote clinical engagement by incentivizing them to more closely align to best practice protocols. [Read this white paper](#).

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[Optum](#)

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## Roche

With healthcare undergoing the transformation from volume to value, data and digitalization have become key enablers in resolving the dilemma of delivering faster and better care while reducing rising costs. However, vast amounts of disparate data and siloed systems also have made it challenging to get the information needed to deliver high-quality care.

Diagnostic data is an untapped resource that will allow laboratories to play a leading role in this data-driven world. Roche Digital Diagnostics is taking a unique and holistic approach to intelligence, giving the lab exactly the insights needed to make more informed decisions. Imagine the possibilities for care with access to data detailing operational effectiveness, financial outcomes and patient insights.

Our belief is that sustainability depends on diagnostics, and what is best for patients is what is best for our business. With the Roche Digital Diagnostics portfolio, we are embracing the opportunity to shape the way healthcare is delivered today and tomorrow across the entire healthcare continuum. [Be a part of today's efforts to build a better tomorrow](#).

Roche Diagnostics is proud to host the [ACHE Vancouver Cluster](#) Sept. 24–27. It will host a complimentary lecture, *Managing Antibiotic Stewardship From the Executive Level*, where attendees can earn ACHE Qualified Education credit, and networking receptions for cluster registrants and local ACHE members Monday, Sept. 24, and Wednesday, Sept. 26.

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[Roche](#)

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This email was sent from the American College of Healthcare Executives, 300 S. Riverside Plaza, Suite 1900, Chicago, IL 60606-6698.

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