



FOUNDATION FOR  
**Health Care Quality**

# 2025 Annual Report

## Letter from the CEO

Collaboration matters, now more than ever. Collaboration takes down silos, forms and builds relationships, changes culture, and improves care. Now, we are facing a growing health care economic crisis, a dismantling of the institutions meant to protect our health, and widespread public mistrust of providers, vaccines, and our health care ecosystem at large. This moment demands that we all come together as a health care community to promote what works and change what does not.

Our Foundation for Health Care Quality has had a tremendous impact on our region's health. Our Care Outcomes Assessment Programs have significantly reduced adverse events after surgery, lowered costs, and centered care on the patient. The Washington Patient Safety Coalition has helped to promote a culture where staff feels comfortable speaking up and identifying errors. The Bree Collaborative has improved clinical care workflows, payment strategy, and the public's health. Smooth Transitions has built relationships to improve care transfers for birthing people, providers, and organizations.

Each of us has a role to play. We look forward to partnering with you next year and beyond.

In community,  
Ginny Weir

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# BY THE NUMBERS

*Improving health and health care through meaningful clinical data; multi-sector action; education; highlighting success across our health care ecosystem; and empowering collaboration.*



5 Conferences and Summits



## Cardiac COAP Surgery Performance Award

- Virginia Mason Franciscan Health St. Michael Hospital
- Providence Regional Medical Center



## Cardiac COAP PCI Performance Award

- Harbor Regional Health
- MultiCare Auburn Regional Medical Center
- MultiCare Deaconess Medical Center
- PeaceHealth St. John Medical Center
- Virginia Mason Franciscan Health St. Francis Hospital
- Virginia Mason Franciscan Health St. Joseph Medical Center



Awarded by a panel of judges to organizations that demonstrate progress on embedding equity into Bree best practices

- Community Health Plan of Washington
- Kaiser Permanente Washington
- Virginia Mason Franciscan Health St. Francis Hospital



9 Publications  
17 Research projects



Award given to organizations that demonstrated fidelity with Bree best practice recommendations

14



115 Webinars, trainings, and presentations



8 Students mentored



Award given to organizations that demonstrate the initiation of work on implementation of Bree guidelines -

4



125 Participating organizations



Recognition program to celebrate staff and teams who voice their concerns to keep patients and staff safe, and their organizations that create work environments to encourage them to do so

2



Continuing education credits



Award given to organizations that demonstrate innovation in create equity in patient safety programs. This year's winner was Wellpoint Washington

1

CME - 169.5  
CE - 316  
CNE - 114.5



# CARDIAC CARE IMPROVEMENT ACROSS PROCEDURES



## Cardiac Care Outcomes Assessment Program

Launched in 1997, and guided by core beliefs that the direction of health care is best guided by physicians; the quality of health care is best measured by analyzing clinical data; and the improvement of health care is best achieved through universal program participation, COAP convenes clinicians from across the region at monthly meetings to review data, discuss current challenges, and identify areas for improvement. Individual hospitals and physicians are supported with real time data reports and access to COAP community resources and expertise. We convene members virtually for quarterly webinars and every year, in person, to review regional data, share practice, discuss current issues in cardiac care, and further build community.

***“...the PNW does a great job with our cardiac patients, but there is always room for improvement. Lots of new ideas to float around to improve outcomes...”***



### New Regional Initiatives

Surgery Initiative: Increasing rates of Left Atrial Appendage Ligation

PCI Initiative: Increasing rates of intracoronary Imaging during PCI



**PCI Bleeding Reduction Initiative Wrap-up: Final Report**  
June 2025. 25% reduction in PCI risk-adjusted bleeding rates 2021-2024



### Clinical Data and Medicare Claims Data

Integrated clinical data with Medicare claims data for PCI and cardiac surgery to track long term outcomes found the relative risk of adverse events to be significantly lower in Washington compared to rest of country.

## Jeannie Collins-Brandon Retirement

Jeannie has been leading Cardiac COAP for the past ten years and is retiring January 2026. She has been instrumental in bringing a strategic lens to the program and growing our impact across the region. Of our cardiac community, she says, *“You’re a dedicated, compassionate group doing life-changing work. I’m grateful to be a part of it!”*



***“COAP’s purpose is to support all hospitals and clinicians in achieving the highest levels of patient care and outcomes.”***

Get in touch with Kristin Sitcov  
[KSitcov@qualityhealth.org](mailto:KSitcov@qualityhealth.org)





# CLINICAL DATA TO IMPROVE LABOR AND DELIVERY MANAGEMENT AND OUTCOMES

Get in touch with Kristin Sitcov  
[KSitcov@qualityhealth.org](mailto:KSitcov@qualityhealth.org)

## Obstetrical Care Outcomes Assessment Program

We cannot improve what we don't measure; to improve care we need all those involved in providing birthing care to participate in measurement. We use granular, stratified, clinical data to pinpoint specific clinical areas where opportunities for change exist within the process of care given during labor, delivery, and the postpartum period. Balancing measures including newborn outcomes are a critical component. Built-in reporting tools provide real-time access to a participant's own data. Comparative reports are reviewed and distributed quarterly and include an assessment of results, allowing participants to focus on targeted strategies for change aimed at reducing variation and ensuring equity.

### Patient-Reported Outcomes



A birthing person's experience of their care can be as important as the clinical outcome. OB COAP has been funded by the Ballmer Group to allow participating sites to distribute a brief, online survey to birthing people, which is then matched with clinical outcomes. Patient experience data will be linked to a selection of clinical measures to better understand the relationship between patient experience and outcomes. The site launch is being aligned with TeamBirth implementation, supporting a goal to build on existing strategies and workflow for quality improvement.

### Papers & Letters Published 2025

- Racial and Ethnic Disparities in Low-Risk Unplanned Cesarean Birth: Disaggregating Asian Data; Spencer SM; Journal Racial Ethnic Health Disparities, March 2025. <https://doi.org/10.1007/s40615-025-02401-0>.
- Comparison of an Externally Validated Interpretable Machine Learning Model with the US Preventive Services Task Force Approach to Preeclampsia Risk Assessment; Bosschieter T; Ultrasound in Obstetrics & Gynecology, July 2025. <https://doi.org/10.1002/uog.29264>
- Episiotomy and Obstetric Anal Sphincter Injury in Operative Vaginal Birth; Souter V; Letter to the Editor, American Journal Obstetrics & Gynecology, Oct 2025. <https://doi.org/10.1016/j.ajog.2025.10.011>.

### Abstracts Presented 2025

- Comparison of an Externally Validated Interpretable Machine Learning Model with the US Preventive Services Task Force Approach to Preeclampsia Risk Assessment; Bosschieter T
- Episiotomy in the US: Have We Got it Right?; Souter V, Painter I, Sitcov K, Khalil A, Caughey AB
- Community-Level Social Risk Predicts Severe Maternal Morbidity Independent of Clinical Factors; Stewart N

### Manuscripts Under Review

- Maternal Vulnerability Index Predicts Severe Maternal Morbidity Independent of Clinical Risk





# DEEP DIVES INTO IMPROVING SURGICAL CARE



## Spine Care Outcomes Assessment Program

Spine COAP data includes elective cervical and lumbar procedures on four or fewer spinal levels, with an emphasis on fusion, excluding trauma, tumor and infection diagnoses.

## Surgical Care Outcomes Assessment Program

Surgical COAP data includes colorectal procedures (both elective and non-elective), bariatric surgery, appendectomies (adult and for pediatric—both medically and surgically managed appendicitis), and small bowel obstruction.



### Updating our Data Collection Tools

Improvements to our data collection include making data abstraction easier by standardizing variables in pre-, intra- and post-op periods (e.g., analgesic regimens, glucose control) and systematically eliminating free text fields (e.g., reclassifying erroneous entries).



### Patient Optimization

Improving patients' fitness for surgery can be done by using standardized protocols for optimization prior to procedures and unifying use of enhanced recovery process scores post-procedure. This can reduce complications associated with surgery, improve patient outcomes, and reduce cost of care through decreasing required interventions and length of stay.



## Quarterly Community of Practice Meetings

Learning is a social process that occurs primarily through our interactions with others in real-world contexts. In our quarterly community of practice meetings agendas included risk standardization vs. risk adjustment, readmission, prolonged length of stay, post-operative infection, and other topics of intervention that allow providers to share learning and best practices.

**“Data that sites  
and surgeons *need*  
to improve care  
across the region.”**

Get in touch with Vickie Kolios-Morris  
[VKolios@qualityhealth.org](mailto:VKolios@qualityhealth.org)





# COLLABORATING ACROSS HEALTH CARE SECTORS

## Bree Collaborative

### 2025 Guideline Topics



#### Blood Pressure Control

Improving care processes to decrease the number of people with undiagnosed and/or unmanaged hypertension.



#### Surgical Optimization

Optimizing patients with unmanaged or uncontrolled hyperglycemia and anemia to improve their post-surgical outcomes.



#### First Episode Psychosis

Defining and expanding coordinated specialty care services.

Established in 2011 by the Washington State Legislature to give public and private health care system organizations the opportunity to identify specific ways to improve health care quality, outcomes, affordability, and equity in Washington State, the Bree Collaborative has developed 40+ guidelines on a wide variety of topics.

Get in touch with Emily Nudelman, Beth Bojkov, and Karie Nicholas at [bree@qualityhealth.org](mailto:bree@qualityhealth.org)

Watch our three-part *Catalyst for Change* webinar series, our webinars on last year's guidelines, our hot topic series, *Measuring Change* evaluation series, and our *Health in Action Summit* [HERE](#).

#### Implement Bree Guidelines

- [Read our implementation guides and checklists](#)
- Talk to other implementers on our [message boards](#)
- [Submit](#) your data on adoption

## Washington Patient Safety Coalition

### 2025 Northwest Patient Safety Conference



At the 22nd annual conference, "Navigating Rough Seas", speakers provided insight and actionable tools and techniques to help providers address challenging and unique times.

Virtual conference with 14 presentations over 2 days

498 conference attendees in the US & globally

Highlighted Speakers: Michael Millenson - Pulitzer Prize nomination, formerly at the Chicago Tribune; MK Haber - Those Nerdy Girls; Dannagal Young - author of *Wrong: How Media, Politics, and Identity Drive our Appetite for Misinformation*



#### Safety Initiatives

- Promoting Psychological Safety
- Improving the Diagnostic Process
- Addressing Stigma & Bias



#### Speak Up for Safety Workshops

Our dedicated patient advocate members have led six workshops for patients in libraries across our region, with many more planned for 2026!



#### Communication and Resolution

This two-part learning series focused on the new patient safety structural measure, identifying CRP as a best practice, and how to attest to CRP to receive the full financial benefit. The trainings included 143 individuals across state 20 and three countries.

Get in touch with Steve Levy  
[SLevy@qualityhealth.org](mailto:SLevy@qualityhealth.org)



# IMPROVING COMMUNITY BIRTH EXPERIENCE AND OUTCOMES

## Community Birth Data Registry

The Community Birth Data Registry (CBDR), was created by midwives for midwives, to capture and measure perinatal care processes across all birth settings and provider types.



### Welcoming new members

In 2025 we added 24 new provider groups from across Washington State, and from Texas and Virginia.

Get in touch with  
Akane Sugimoto Storey  
[CBDR@qualityhealth.org](mailto:CBDR@qualityhealth.org)



### Providing hands-on training

The CBDR supports training for midwives on how to use our database, which is a key part of ensuring that we are working in partnership to support our community and allows us to measure and support improvement.

## Smooth Transitions

Families who choose to give birth at home or in a freestanding birth center deserve the best possible care when plans change and they need to access hospital services. Smooth Transitions™ is a Washington state-based quality improvement program, enhancing the safety of these hospital transfers. We bring together community midwives, hospital providers and staff, and EMS personnel to build a collaborative model of care that puts birthing families at the center.

Get in touch with  
Sarah Davidson  
[SDavidson@qualityhealth.org](mailto:SDavidson@qualityhealth.org)

***"It was scary and overwhelming to have to go somewhere else and have treatments I didn't initially want... But the team made sure I had all the information to make a decision and gave me as much time and space as possible to decide what to do. Then they provided me with exceptional care once the decision was made."***



### Protected case review

Smooth transitions is currently developing the capacity for internal and external protected case review.



### Transfer Surveys

In 2025, 1750+ transfer surveys were conducted, collecting qualitative data to provide a 360 degree view of the transfer process for holistic care improvement.





# NEW PROJECTS TARGET INEFFICIENCY

## Administrative Simplification

The Administrative Simplification program makes it easier for providers and payers in Washington state to do business together by reducing the cost and complexity of information exchange. Work groups bring together health plans, public payers, hospitals, practices, and public policy-makers to develop policies, best practices, and technology solutions in support of simplification. The Foundation for Health Care Quality is now designated as the Lead Organization for Administrative Simplification, taking over this role from OneHealthPort.

### Workgroups

Behavioral Health Work Services  
Over-the-Counter Contraceptives  
Federal ePre-Authorization Legislation

Business and technology  
Pre-Service  
Credentialing



The over-the-counter contraceptive work group provided information and established best practices around the “how to” of administering the contraceptive benefit. This increased awareness of covered services, enhanced consumer understanding, and provided information and training for pharmacists processing a claim.

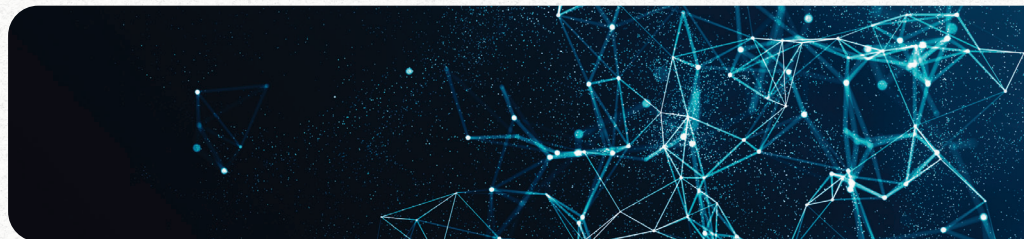
### Impacts

### Future Work



In 2026, we will add a focus on optimizing the electronic medical record patient portal and helping our community prepare for new prior authorization data interface requirements before the January 1, 2027 deadline.

Get in touch with Heidi Steeves at  
[HSteeves@qualityhealth.org](mailto:HSteeves@qualityhealth.org)



### Transformational Repository & Analytics eXchange (TRAX)

This year, we facilitated the Transformational Repository & Analytics eXchange (TRAX) governance committee. TRAX is a voluntary, opt-in, electronic health information exchange (HIE) system for data providers and users to provide health care and public health professionals with more timely, actionable chronic disease surveillance information using a shared platform model.

The administrative model would build on standard HIE agreements. Key goals include to:

- Build transparency and trust while seeking to limit administrative burden.
- Use existing public health resources to leverage early successes and identify new health care uses.
- Improved information exchange.

Join this critical work as a data trading partner!

Find out more: [fhcq@qualityhealth.org](mailto:fhcq@qualityhealth.org)





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- Ashok Reddy, MD, MS, Provider, Veterans Health Administration, Assistant Professor, Health Services, Medicine, University of Washington Medical Center

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## PROGRAM MEDICAL DIRECTORS

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- **Cardiac COAP:** Ravi Hira, MD, FACC, FAHA, FSCAI
- **Surgical and Spine COAP:** Nicholas J. Kassebaum, MD

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- Community Birth Data Registry Co-Director: Melissa Jean Cheyney, PhD, CPM, LDM
- Community Birth Data Registry Co-Director: Marit Bovbjerg, PhD, MS
- Cardiac COAP Statistician: Charles Maynard, PhD
- Cardiac COAP PCI Educator: Karen Young
- Statistician: Ian Painter, PhD
- Statistician: Nathaniel Henry, DPhil

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- **Chair:** Emily Transue, MD, MHA, Comagine Health
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- Avishai Meyer, MD, FACS Legacy Health System
- Thien Nguyen, MD, Overlake Hospital Medical Center
- Vlad V. Simianu, MD, MPH, FASCRS, Virginia Mason Franciscan Health

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- Yanling Yu, Individual
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- Timothy Davern, Wellpoint WA

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- Melissa Denmark, MS, LM, Co-Chair, Smooth Transitions
- Peter Napolitano, MD, Maternal Fetal Medicine, UW Medical Center

## Vision

All people in our Pacific Northwest region live long, and healthy lives supported by a health ecosystem based on evidence balanced with promising practice; that is centered on them and meets their needs; and uses appropriate, high-quality, and safe disease prevention, management, and interventions.

## Mission

To catalyze system-wide improvement through involvement and insight from cross-organizational, cross-sector health and health care providers, administrators, and those with lived experience within a framework driven by data, consensus building, feedback, evidence-informed best practice, and promising practice.

## Values

- Health equity – all people can attain their full health potential
- Clinical best practice – balance use of evidence with promising clinical practice
- Collaboration and inclusion – input from all those getting, giving, and paying for care
- Responsibility and empathy – for the health and wellbeing of our community
- Transparency and accuracy – of data, information, initiatives, and guidelines
- Appropriate and affordable care – that is valuable to people in meeting health needs
- Action – having a measurable impact on the health of our region

