

Philanthropy Profile

The Duke Endowment's Efforts to Support Population Health

The Duke Endowment has a long history of promoting population health in the Carolinas. The Duke Endowment's funding related to health care supports efforts to expand prevention, increase access to health care, and/or improve the quality and safety of health care for individuals. In particular, The Duke Endowment has been instrumental in facilitating the work of 2 initiatives at Duke University School of Medicine: the Duke Infection Control Outreach Network (DICON) and the Duke Antimicrobial Stewardship Outreach Network (DASON).

DICON was established in 1998 to assist hospitals with limited resources as they sought to develop top-notch infection control programs. DICON's primary focuses are to improve outcomes for patients by reducing the rate of health care-associated infections and to minimize the costs associated with these infections. Although infection control is a public health concern in all hospitals, many hospitals in rural communities face greater barriers when implementing infection control programs. These community hospitals often have smaller budgets and fewer trained staff members, and these staff members already have many other responsibilities.

DICON gathers evidence-based approaches for preventing infections and makes specific recommendations to help hospitals adopt appropriate strategies. In addition, DICON provides advanced data analysis and metrics, which allow the network to collect and share data across hospitals, and DICON provides access to trained experts through regular visits by nurses who specialize in infection prevention. Lastly, DICON offers both in-person and online educational training courses. Some courses are targeted for specific health care professionals—for example, "Prevention of Surgical Site Infection in the Operating Room" is tailored to operating room personnel—but other courses are appropriate for all health care professionals.

In 2003 The Duke Endowment awarded DICON a grant to further the growth of this network. Today, 16 years after its formation, DICON includes 43 community hospitals in Virginia, North Carolina, South Carolina, Georgia, and Florida. DICON has improved population health by significantly reducing the risk of postsurgical, device-related, and bloodstream infections at DICON-affiliated hospitals. In 2011 DICON was 1 of 5 academic centers to receive funding from the Centers for Disease Control and Prevention as an epicenter of health care-associated infection prevention. This national recognition highlighted efforts to develop, implement, and evaluate the effectiveness of strategies to improve health care quality by preventing adverse events such as health care-associated infections and antimicrobial-resistant infections.

In 2013 DASON was formed with support from The Duke Endowment; this 3-year grant totaled \$385,000. The purpose of DASON is to help rural hospitals in the Carolinas use antibiotics more effectively. With the widespread overuse of antibiotics in many hospitals, antimicrobial-resistant microbes now pose a serious threat to population health. Therefore, DASON aims to reduce the number of prescriptions for antibiotic medications and to assist clinicians in prescribing the right antibiotics when patients do need them. In the initial implementation of this project, DASON's administrative model is similar to that of DICON. The 3 main services DASON provides also align with those of DICON; these services are data analysis and collection, access to experts, and educational initiatives. In particular, the pharmacists and

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nurses employed by DASON-affiliated hospitals receive specific training and professional development to help them improve the quality of care they provide. DASON is still being implemented, but evidence from community hospitals demonstrates that it is already reducing the number of antibiotic prescriptions and changing clinicians' prescribing behaviors.

"Improving the quality and safety of health care delivery in the Carolinas is one of the primary focus areas for health care grant-making at The Duke Endowment," says Mary Piepenbring, a vice presi-

dent at The Duke Endowment. "DICON created a model in infection control across [North and South Carolina], and DASON builds on that successful network to further strengthen patient care at community hospitals. Especially important to our trustees was [the fact] that outcomes data will be routinely collected and analyzed to gauge the success of each hospital's efforts through DASON. These programs are already leading to improved care that could benefit hospitals and patients across the country." NCMJ