



Sidney R. Garfield, MD

Exceptional Contribution Award
2020

PERMANENTE MEDICINE®
The Permanente Medical Group

CONTENTS

Gabriel J. Escobar, MD	4
James Jang, MD	6
Leonid Pravoverov, MD	8
David Witt, MD	10



Sidney R. Garfield, MD, was the physician founder of Kaiser Permanente and one of the great innovators of 20th century American health care delivery.

Dr. Garfield was a surgeon and visionary. He first applied the novel principles of prepayment, prevention, and group medical practice in the 1930s, while he was providing medical and hospital services for construction workers building the Colorado River Aqueduct in the Mojave Desert.

Then, during World War II, he developed a medical care program for hundreds of thousands of workers and family members at Kaiser shipyards in the San Francisco Bay Area, the Vancouver/Portland area, and at the Kaiser Steel Mill in Southern California. His health care system focused as much on the prevention of illness as on caring for the sick.

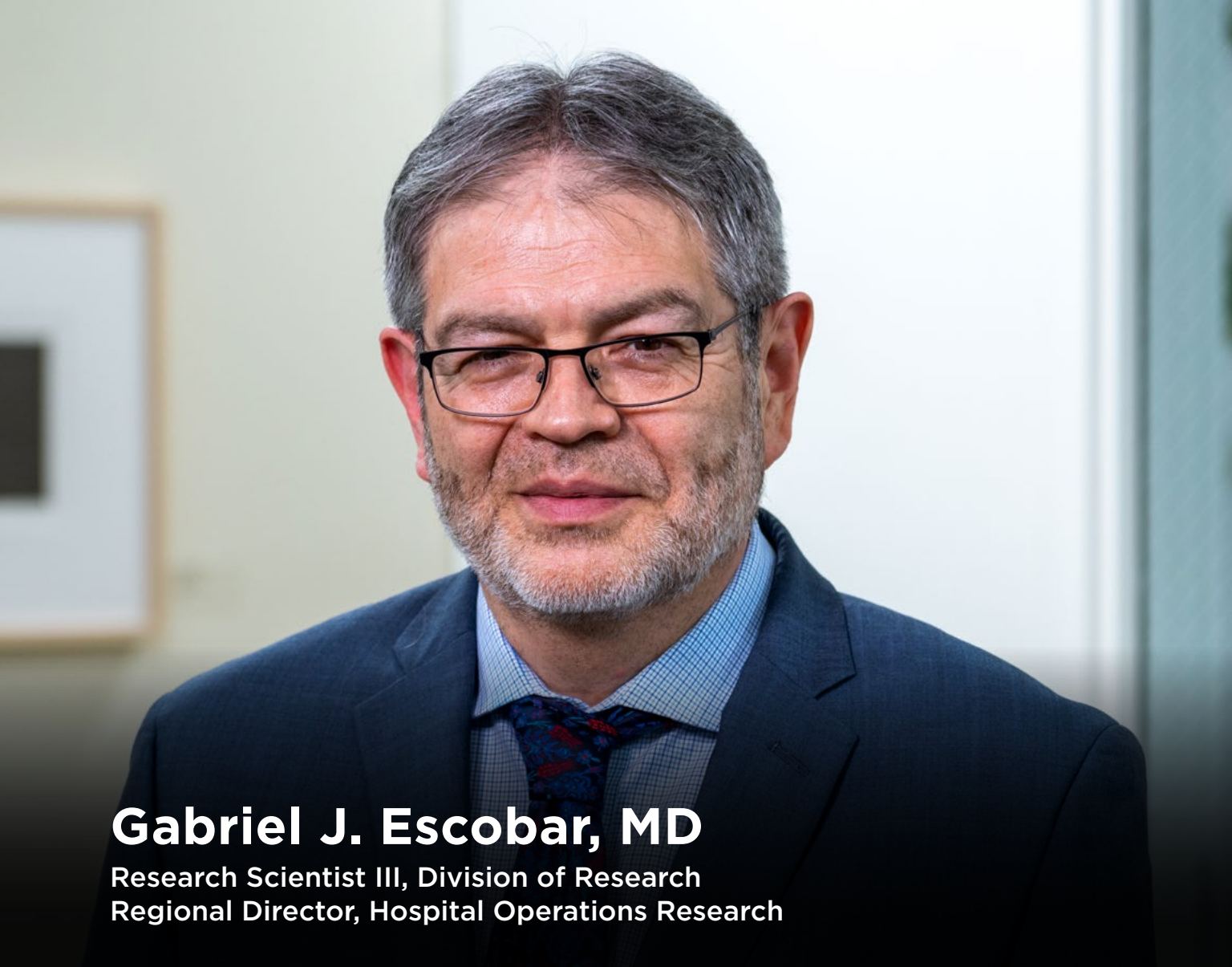
Dr. Garfield looked for innovations in health care throughout his career. In the 1950s, his revolutionary hospital designs drew international praise. In 1960, he was in the vanguard of physicians who embraced the computer as a tool that could radically improve the delivery of medical care.

Historians writing about events of the 1900s see the work of Dr. Garfield in co-founding Kaiser Permanente as one of the major social contributions of the century.

**“Keep your arms on each other’s shoulders
and your eyes on the stars for innovation
and change in the future.”**

- Sidney R. Garfield, MD

The Exceptional Contribution Award was established by the Board of Directors of The Permanente Medical Group in 2000 to recognize physicians who are instrumental in the development and dissemination of ideas and programs that have a significant impact on patients, colleagues, and the broader community.



Gabriel J. Escobar, MD

Research Scientist III, Division of Research
Regional Director, Hospital Operations Research

“It’s not unusual for health care organizations to be thinking about deploying, or planning to deploy, predictive analytic models. What is unique is that, unlike many organizations, Kaiser Permanente is able to quantify the impact of actually using them.”

GABRIEL J. ESCOBAR, MD

Advance Alert Monitor

“Twenty years ago, when Dr. Escobar started imagining a predictive analytic system that could identify hospitalized patients at high risk of deterioration, no one thought it was possible,” says Tracy Lieu, MD, director of the Division of Research (DOR).

Fast forward to today, and hospitals throughout Kaiser Permanente Northern California are using a first-of-its-kind algorithm that does just that, thanks to Dr. Escobar.

Advance Alert Monitor (AAM) is a predictive analytic tool that generates hourly risk scores to help physicians and nurses identify adult patients in our medical-surgical or transitional care units who are at risk for either an unplanned transfer to intensive care or an unexpected death within the next 12 hours.

Dr. Escobar conducted studies of KP hospitals in Northern California from 2004 to 2010 and found that, after controlling for severity of illness, patients unexpectedly transferred from medical-surgical units to intensive care have mortality rates 2 to 5 times higher than those admitted directly to intensive care, and comprise 20 percent of all hospital deaths.

The AAM algorithms are based on patterns in historical data, collected from hundreds of thousands of patient hospitalizations over a 13-year period. By synthesizing and analyzing

vital signs, lab results, and other variables, the AAM equations identify patients who have a greater than 8 percent chance of deteriorating.

A regional team of ICU-trained registered nurses receive these alerts and then partner with local medical centers to avert deterioration by identifying potential care gaps through real-time reviews of patients’ electronic health records.

Dr. Escobar’s recent analyses suggest AAM is saving approximately 500 lives each year. Other Kaiser Permanente regions are planning to deploy, or are in the process of deploying, similar systems.

“Some of Dr. Escobar’s greatest qualities are that he combines a quantitative approach with profound clinical understanding, which allows him to grasp the big picture,” Dr. Lieu says. “He’s done such an amazing job at bridging the worlds of cutting-edge research and what’s needed for practical applications in care delivery.”



James Jang, MD

Cardiology, Kaiser Permanente San Jose

“I find profound joy and meaning in taking care of not only my patients, but also those in communities outside our system who are in greatest need.”

Helping Low-Income and Homeless Populations

Dr. Jang's introduction to San Francisco City Impact came in 2012 at a conference hosted by the American College of Cardiology. Representatives from the nonprofit, which provides medical and social support to the 47,000 poor and homeless living in the city's low-income Tenderloin district, took the stage and invited physician attendees to volunteer their services at the organization's upcoming heart health fair.

Dr. Jang, whom colleagues describe as a deeply compassionate healer, jumped at the opportunity. "People needing medical care were lined up down the street the day of the fair," he says. "There weren't enough physicians on hand to help, so I felt I had to do something more."

Today Dr. Jang is the chief medical officer of City Impact's Health and Wellness Clinic, a free medical and dental clinic for which he helped obtain licensing in 2014, in addition to his work as a cardiologist on behalf of The Permanente Medical Group. To date, he has volunteered nearly 2,000 hours with City Impact, treating patients, developing programs, and generating support and community awareness.

"TPMG has supported this effort from the very beginning and encouraged me every step of the way," says Dr. Jang. "It speaks

volumes about our organization's dedication to community health."

Dr. Jang's contributions to City Impact include helping create the Home Visit and Patient Advocacy program, which brings social services and medical care to impoverished individuals living in residential hotels. The program, which Dr. Jang secured with a Kaiser Permanente Community Benefit grant in 2015, has reconnected 30% of its patient population with the health care system through primary care networks and services. He also procured grants and donations from other companies to help support clinic operations, install an electronic health record system, and upgrade technological hardware and infrastructure.

"Dr. Jang encompasses the best we have as a TPMG physician," says Efren Rosas, MD, physician-in-chief at KP San Jose. "His passion and commitment make the world a better place."



Leonid Pravoverov, MD

Nephrology, Kaiser Permanente Oakland

Medical Director, End-Stage Renal Disease Contracted Services

“Having the capability to change people’s lives is what drives me and my colleagues. We observe in a very real way how our coordinated efforts help people avoid complications and have a higher quality of life.”

Optimal Renal Replacement Therapy

Of all the contributions Dr. Pravoverov has made since joining The Permanente Medical Group in 2004, perhaps none is as impressive as his success in helping transform the lives of patients with end-stage renal disease (ESRD).

Just 1% of Medicare patients in the United States have ESRD, yet the care they require consumes 7% of Medicare spending. This is because their care is often complicated by blood stream infections, chronic inflammation, and stenosis of major blood vessels that result from the use of central venous catheters.

Dr. Pravoverov and his nephrology colleagues designed and implemented Optimal ESRD Starts, a remarkable dialysis program that reduces the use of these temporary catheters by getting patients started as early as possible on renal replacement therapy (RRT) via hemodialysis, peritoneal dialysis, or a preemptive kidney transplant.

Transitioning a patient from chronic kidney disease to early initiation of RRT involves tight coordination of a multidisciplinary team of nephrologists, vascular surgeons, general surgeons, social workers, and case managers. It also involves getting patients engaged early in the course of their disease by ensuring they understand what they're facing and what their choices are.

Dr. Pravoverov's drive to improve the quality of care for these patients, combined with his collaborative nature and creative approach to problem solving, enabled him to design a systematic and streamlined process that circumvents delays in care.

In 2010, just 2 years after the initiation of the program, 39% of patients began renal replacement therapy using an Optimal Starts method. In 2012, that number grew to 50%. Today 71% of patients with ESRD in Kaiser Permanente Northern California are starting RRT optimally, compared to 32% nationally.

"Dr. Pravoverov's keen ability to work with multiple stakeholders and understand diverse viewpoints was key to his success in moving such an enormous effort forward," says Stephen Parodi, MD, TPMG associate executive director. "He's an outstanding clinician, physician leader, and innovator who led the TPMG dialysis program to achieve unparalleled success."



David Witt, MD

Infectious Diseases, Kaiser Permanente Oakland
Regional Healthcare Epidemiologist, KP Northern California

“This is the first significant, well-documented report of a health care organization launching a prevention program for hospital-acquired pneumonia. We succeeded thanks to our integrated system, and our physicians and nurses working toward the same goal—patient safety.”

Preventing Hospital-Acquired Pneumonia

Hospital-acquired pneumonia (HAP) has been a leading cause of mortality among hospitalized patients in the United States for decades, and is the most common cause of mortality from hospital-acquired infection. Yet when Dr. Witt searched in 2008 for diagnostic and prevention guidelines in the medical literature to help reduce HAP in Kaiser Permanente Northern California, he came up nearly empty-handed.

“Very little research existed because the condition is hard to define and diagnose, and often occurs in elderly patients who already have serious underlying health conditions,” says Dr. Witt. “But it’s uniformly caused by aspiration of microorganisms, usually bacteria, which can be prevented.”

So Dr. Witt set out with a team of infection preventionists and patient safety staff. He investigated the limited literature available and the practices of the best-performing inpatient units in KP Northern California, and created a set of prevention guidelines known as ROUTE, which stands for Respiration and reduced sedation, Oral care, Up, Tube care, and Education. ROUTE components include regular toothbrushing with antibacterial mouthwash, incentive spirometer use, twice-daily ambulation, and sitting up when eating.

To support consistent implementation, Dr. Witt worked with colleagues across

disciplines to develop guidelines to identify at-risk patients, standardize physician orders for prevention strategies, and streamline documentation. After several successful pilots, the evidence-based HAP prevention program was rolled out to all KP Northern California hospitals in early 2013.

The results have been extraordinary. Incidence of HAP declined 66% between 2011 and 2016, and today it averages 2.4 per 1,000 hospital admissions, one of the lowest rates in the country. An estimated 1,648 cases of HAP have been avoided, 308 deaths prevented, and 22,944 patient days saved since 2013.

“Dr. Witt is an incredible human being, who cares deeply about his patients and is always looking for ways to make things better,” says Naveen Kumar, physician-in-chief at KP San Rafael. “His pioneering efforts have saved patients’ lives across Northern California.”

Sidney R. Garfield, MD | **Exceptional Contribution Awardees, 2017-2019**

2019

Naveen Chandra, MD

Ophthalmology
KP Diablo Service Area
Corneal Crosslinking

Issa Fakhouri, MD

Internal Medicine
KP Stockton
Diabetes Care Management

Jason Lee, MD

Pathology
KP Santa Clara
Blood Conservation Program

Suchada Nopachai, MD

Ob-Gyn
KP San Jose
Turning CPR Into Law

Bethan Powell, MD

Gynecologic Oncology
KP San Francisco
*Women's Hereditary
Cancer Centers*

2018

Ethan Cutts, MD

Pediatrics
KP North Valley
Safe Sleep Baby Program

Eric Dilda, MD

Emergency Medicine
KP South San Francisco
eHospital Safety Net Program

Dee Lacy, MD, PhD

Infectious Diseases
KP Fresno
*Vaccination Program for
Functional Asplenia*

Theodore Levin, MD

Gastroenterology
KP Diablo Service Area
*Colorectal Cancer Screening
Program*

2017

Daniel Jacobs, MD

Plastic Surgery
KP San Jose
*Microvascular Hand and Finger
Replantation Center*

Jeffrey Klingman, MD

Neurology
KP Diablo Service Area
Stroke Express Program

Lynda Lam, MD

Neurology
KP San Rafael
ALS Multidisciplinary Teams

Mai Nguyen-Huynh, MD

Neurology
KP Diablo Service Area
Stroke Express Program

Will North, MD

Neurology
KP Greater Southern
Alameda Area
ALS Multidisciplinary Teams

Steve Offerman, MD, FACMT

Emergency Medicine
KP South Sacramento
Regional Toxicology Service

Vivek Rao, MD

Neurosurgery
KP Redwood City
Stroke Express Program

Joanna Ready, MD

Gastroenterology
KP Santa Clara
Hepatitis B Screening Program

Sidney R. Garfield, MD | **Exceptional Contribution Awardees, 2015-2016**

2016

Joann Bergoffen, MD

Genetics
KP San Jose
Lynch Syndrome Screening Program

Lindsay Cheng, MD

Radiology
KP Diablo Service Area
Breast Imaging and Same-Day Biopsy Program

Michèle Evans, MD

Pediatrics
KP North Valley
CASP: Child Abuse Services and Prevention

Steven Levine, MD

Emergency Medicine
KP East Bay
R1 Expedited Cancer Diagnosis System

Dan Li, MD

Gastroenterology
KP Santa Clara
Lynch Syndrome Screening Program

Alison Meadows, MD

Cardiology
KP San Francisco
Adult Congenital Heart Disease Care

Michael Rizzo, MD

Radiology
KP East Bay
R1 Expedited Cancer Diagnosis System

Veronica Shim, MD

Surgery
KP East Bay
R1 Expedited Cancer Diagnosis System

Dorothy Wilborn, MD

Pediatrics
KP North Valley
CASP: Child Abuse Services and Prevention

2015

Clay Angel, MD

Hospital Medicine
KP San Rafael
Delirium Management Program

Wendy Eberhardt, MD

Psychiatry
KP San Rafael
Delirium Management Program

Charles Meltzer, MD

Head and Neck Surgery
KP Santa Rosa
Head and Neck Cancer Care

Stephen Wang, MD

Interventional Radiology
KP Santa Clara
Inferior Vena Cava Filter Program

Please visit tpmgawards.kp.org for a complete list of award recipients



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