The Right Care Initiative has worked since 2007 to improve clinical outcomes by catalyzing uptake of patient-centered, evidence-based best practices among medical groups, clinics, and health plans. This public-private partnership, operated by the UC Berkeley School of Public Health, was launched with the California Department of Managed Health Care and UC Berkeley School of Public Health, and includes clinicians, health systems, patients, the University of California (multiple campuses), USC, Stanford, Health Services Advisory Group (CMS QIO), California Chronic Care Coalition, and RAND. We collaborate intensively with local leaders in 3 major metro areas: San Diego, Sacramento, and Los Angeles, to work on improving care for preventing and better managing heart attack and stroke. Speakers are invited from organizations with breakthrough clinical quality examples and strategies to share for improving patient outcomes. The first University of Best Practices (UBP) launched in San Diego in February of 2011. Data examining impact on heart attack over the first 4 years of implementation in San Diego County are described here.

### University of Best Practices: Right Care’s Translational Model to Implement Evidence-Based Innovations

- Monthly 2-hour convenings are held with leaders from the major regional health care delivery systems.
- Leaders from successful organizations and/or expert presents for the first hour of the meeting.
- A break-out session or discussion involving all participants follows in the second hour to consider how to apply the speaker’s ideas in the local setting and to problem-solve how to overcome barriers to better uptake of evidence-based protocols.
- Trusted performance data is the bedrock of the UBP model.

### UBP Resources

- A National Institutes of Health - Grand Opportunity (NIH-GO) grant, awarded to the Right Care research team in late 2009, supported the UC Berkeley & UCLA Right Care research teams to meet with individual San Diego delivery systems in 2010; supported hosting of three separate day-long Right Care Initiative Scientific Summits in San Diego in 2010-2011; and in February 2011 which launched the initial University of Best Practices pilot in San Diego. The RAND data group support was also funded by NIH. When NIH-GO grant funds expired, Right Care Champions Judith and Jack White provided bridge funding to continue the San Diego UBP until new federal grant funds were obtained. Charitable contributions, grant funding, and some membership contributions continue to support this important endeavor across the 3 current UBP sites (San Diego 2011, Sacramento 2012, and Los Angeles 2013).

Since the introduction of the University of Best Practices in San Diego County in early 2011, there has been an observable decline in hospitalizations for adult heart attacks (myocardial infarction) when compared to the rest of California (see graphs below). This is similar to trends seen in South Carolina where physician collaboratives across the state focused on fighting against heart disease. South Carolina efforts on better control of blood pressure and lipids moved the state from 51st on CVD deaths to 35th place nationally between 1995 and 2006 (Egan et al, 2011).

**Figure 1: Hospitalizations per 100,000 Adult Population for Heart Attacks Comparing San Diego County with the rest of California, 2007-2014**

**Source:** Fulton et al, 2015, analysis of California Office of Statewide Health Planning and Development’s 2007 to 2014 Patient Hospitalization Discharge Data

Notes: SD County = San Diego County; CA (ex. San Diego County)= California excluding San Diego County; Heart attacks (ICD-9-CM code 410.xx); UBP= University of Best Practices. UBP started in February 2011, just after the 2010 data points. Percentages are percent changes since 2010.

**Figure 2: Age-Adjusted Death Rate for Coronary Heart Disease in San Diego County 2008-2013**

**Source:** San Diego County Department of Public Health

The Right Care Initiative began planning at the state level in 2009 and San Diego County in 2010. Since February 2011, San Diego County medical groups have been working in a data team meeting monthly to share evidence on control of cholesterol and blood pressure levels as one means for reducing heart disease. The two figures below illustrate individual medical group performance in San Diego in controlling LDL cholesterol and blood pressure levels. Results from recent state report cards appear below. While data are limited at this time, BP control has generally improved.

Looking Forward

Results and lessons learned from the University of Best Practices approach to prevention of heart attack and stroke are currently being spread to new UBPs in Los Angeles and Sacramento.

Significant progress has been made toward the initial goal set by the steering committee of medical directors from the initial Right Care Initiative San Diego University of Best Practices (now renamed Be There San Diego) who came to consensus in 2011 that heart attacks could be reduced by 50% in 5 years by implementing the interventions on the Right Care Triangle (see triangle to right and Right Care Initiative Project Brief). From 2011 to 2014, the hospitalization rate decrease in San Diego County was 16.5 percentage points more than the decrease in the rest of the state for heart attacks. If those results were achieved throughout the rest of California, there would have been approximately 5,000 fewer hospitalizations for heart attacks each year, saving over $100 million in annual payments to hospitals. Efforts are underway to determine statewide spread strategy.

Please see Press Release of recent study showing 22% reduction in Acute Heart Attack hospitalizations in our initial pilot: here

Building on the Shoulders of Giants

The Right Care Initiative launched the University of Best Practices pilot program in San Diego building on the conceptual learnings of collaboratives that had come before (Egan et al, 2011).

Note: The San Diego UBP, as of 2014, obtained independent funding and was renamed Be There San Diego University of Best Practices. Its goals and leadership by renowned cardiologist Anthony DeMaria, MD, remain unchanged.

Publications and References

Results of the Right Care Demonstration Project have been published in The American Journal of Managed Care 2017; 23(10):596-603. Additional resources can be found at: www.RightCare.Berkeley.edu.


