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SUMMER 2022 • EDITION 101

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A magazine for and about Nebraska community hospitals and health systems

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From the President's Office

Workforce. Inflation. These issues are not new and there's good reason why you continue to see these two topics frequently in the press.

Let's address workforce first. We all have seen the challenges caused by COVID, with record numbers of health care workers leaving the workforce early. Of course, staffing is not a new issue for our hospitals, but was certainly exacerbated by the pandemic. Earlier this year, the NHA worked closely with Nebraska legislators in proposing several bills that would go directly toward programs that would positively impact workforce (scholarships, loan repayment, workforce housing, among others).

Inflation continues to dominate the news cycles and is no longer a transitory economic issue – it's having real impacts on all Nebraskans. Every facet of our economy is being impacted and our hospitals are certainly not immune from these cost and price pressures. Labor expenses are the largest expense category

for hospitals, making up more than 50% of a hospital's total expenses. We will all be challenged to think creatively on how we can maximize our supplies while still maintaining our high levels of patient care we strive for. The NHA is actively working with state and local government leaders on these issues to make sure we're doing everything we can to curb the effects of inflation.

The next few months will be challenging for all of us; however, we will continue to diligently advocate on your behalf in navigating the issues that are most impactful on our Nebraska hospitals.

Jeremy Nordquist, President Nebraska Hospital Association

Jung Rufut

NHA and NeRHA host successful joint event; largest **Spring Forum to date**

Approximately 350 health care leaders, vendors and business partners met in Kearney recently for the 2022 NHA-NeRHA Spring Forum and Rural Health Clinic Conference.

Over the course of a day and a half, 20 speakers presented on timely topics including workforce recruitment, medical ethics, quality and health care innovation. In addition, HFMA, NHM and ACHE all hosted their respective meetings in conjunction with the event. New this year, the NHA held an NHA PAC reception with several state senators in attendance. By all accounts, the event was a tremendous success.









Integrating Travelers to Improve Retention

hy do traveling clinicians break contracts? Why are new clinicians leaving the profession after just one year? Voluntary terminations account for 93.9% of hospital separations, citing many reasons, such as workload/staffing ratios, working conditions, and scheduling¹. While many personal and professional factors may play into the decision to leave, a facility's lack of integration efforts may also be contributing to the problem.

Integrating new traveling clinicians into your facility or system can be an immersive experience – one that provides them with the opportunity to connect with staff and gain the confidence and awareness needed to thrive. Integration efforts for travel nurses have their own challenges, as contracts are temporary, they're not physically on-site until their start day, and you must trust that they complete their assignment. While reputable workforce solutions companies consistently supply clinicians who arrive knowledgeable, experienced, and ready to work, there are still action steps that a healthcare organization can take to help increase completion rates and improve traveler satisfaction.

Integration Takes Many Shapes

An increase in staff benefits your facility in numerous ways, including regaining the balance of patient/nurse ratios and reducing causes of burnout. But a focus must also be placed on how well you can incorporate travelers into your workforce. Better integration can reassure new travelers that they feel welcome and wanted, allowing them to give patient care their absolute best. The steps below highlight some actions you can take to meet your long-term integration goals.

- Integration starts at orientation. As travelers orient themselves, transition into their new environment, and adapt to new processes, they must also adjust to meet their new facility's social and professional expectations. A personal touch from a supervisor can help enhance the workplace experience. Whether it's a meaningful introduction, a small welcome gift, or a short scheduled one-on-one meeting, any extra step that a leader can take will genuinely help your traveler feel embraced as an asset to the team.
- Create an atmosphere of inclusion. Invite travel staff to celebrations or to participate in your facility's professional enrichment opportunities, like speed mentoring². Paving an inclusive path for all newcomers will encourage a positive atmosphere and help create a united clinical workforce where high-quality care can flourish.

Prioritize technology education. Your staffing partner will work closely with you to understand your workforce needs and supply candidates with the training, certifications, and clinical competency to complement your current workforce. However, a technology review is still a fundamental part of the acclimation process. Clinicians are more likely to leave a position when they encounter roadblocks that prevent them from succeeding in their roles.



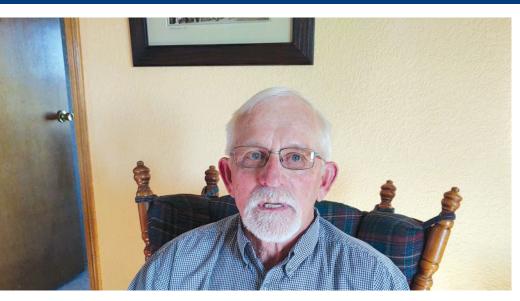
• Demonstrate leadership's commitment to integration. Successful integration requires a commitment to creating positive experiences at your facility. Using a human-first approach to create a better work experience for all, you can help tailor your efforts to support the needs of your workforce better, which will foster a supportive and collaborative ecosystem of travelers, stationary clinicians, and staff³.

Efforts like these can champion an environment that brings contingent and permanent staff together, relieving pressure points and decreasing workforce burdens. The suggestions above, along with these additional best practices for hiring and managing your travel workforce, should be adopted with all nurses and clinical professionals in mind, not just travelers⁴. With a commitment to improved integration, you can help strengthen the sense of comradeship in clinical units and increase retention among permanent staff.

If your facility is considering using traveling nurses and clinicians and want to leverage industry-leading expertise, reach out to Luke Christensen at 402.509.1329 or lucas.christensen@medicalsolutions. com to start a conversation about your specific staffing needs.

- 1 2022 NSI National Health Care Retention & RN Staffing Report. (2022, March). NSI Nursing Solutions, Inc. https://www. nsinursingsolutions.com/Documents/Library/NSI_National_ Health Care Retention Report.pdf
- 2 First Year Nurse Retention Toolkit. (2017, July 5). Advisory Board. https://www.advisory.com/Topics/Retention-and-Recruitment/2017/06/First-year-nurse-retention
- 3 Can human-centered design reduce burnout and improve the work experience for nurses and other clinicians? (2021, April 29). Deloitte. https://www2.deloitte.com/us/en/blog/health-careblog/2021/can-human-centered-design-reduce-burnout.html
- 4 Best Practices for Hiring and Managing Traveling Nurse Clinicians. (2022, March 22). Medical Solutions. https://www.medicalsolutions. com/blog/client/best-practices-for-hiring-travel-nurses/

Kimball man credits Great Plains Health stroke team with saving his life



t started as a typical day. Dave Snell's son-in-law, Bob, had just purchased a pickup truck in Grand Island, Nebraska. Snell gave Bob a ride out to get it and was following him home.

As he drove, Snell started to feel sick.

"My first thought was, 'Oh no, what did I eat?" says Snell, a Kimball resident.

But then he started having triple vision and seeing strange colors. "I was talking aloud to myself, but all I heard was babbling," Snell describes. "I tried calling Bob, but it looked like there were three phones in my hand. It was hard to find the numbers."

Bob answered his phone and asked where Snell was. Snell responded with the same indecipherable babble.

Bob asked Snell to honk twice if he thought he was having a stroke, and Snell responded with two distinct honks.

"Physically, I was fine, and I could understand what he said to me. I just couldn't speak," Snell says.

Bob instructed his father-in-law to pull over to the side of the road and said he would come to find him.

"There were no cars around, so I just threw the car into reverse on the interstate and went back to the rest area," Snell recalls.

Snell tried to flag someone down for help at the rest area, but no one stopped.

"I knew I looked like a crazy person, just babbling and waving," he says.

Finally, he stood in the path of a car, trying to get the driver's attention. The car stopped.

Snell wrote 'stroke' on a piece of paper and then 'Bob' before handing the driver his phone.

The driver found Bob's contact information, called him and then dialed 911. With the driver acting as a mouthpiece for Snell, an ambulance arrived quickly to help.

Time is brain

While the ambulance was traveling to pick up Snell, emergency responders called in a stroke code to the Great Plains Health emergency department.

"When a stroke code is called, a CT machine is cleared, labs are ready and cardiology is notified," says Chastity Orr, MSN, RN, SANE, Stroke, and Telemedicine clinical manager at Great Plains Health. "By the time the patient arrives, everyone is ready to go."

With stroke patients, the phrase "time is brain" means "patients can lose up to 10,000 brain cells every few seconds," Orr says. "The brain doesn't rejuvenate, so opening oxygen and blood flow is critical to avoid permanent damage."

"When a patient has a stroke, it is like a plane crash," says Great Plains Health Neurologist Anil Kumar, MD. "Once it crashes, it is gone."

Ensuring Snell received rapid treatment for his stroke was a matter of life and death.

"Without the proper medication, he would have died," Dr. Kumar says.

Snell came into the emergency room with expressive aphasia, meaning he could understand, but couldn't be understood.

"From his time of arrival, Mr. Snell saw the ER physician within one minute. and had a CT scan within 10 minutes," Orr says.

Members of the pharmacy team were waiting at Snell's bedside and, once the medical team confirmed he was having a stroke, they mixed and injected a clotbuster medication.



"Often with a stroke, there are no preceding symptoms. Someone who thinks they may be having a stroke should look for things like double vision, numbness and paralysis." --Anil Kumar, MD, Great Plains Health neurologist

"It goes right to the brain and breaks up the blood clot. With this medication, we have seen amazing results in preventing permanent brain damage in patients," Dr. Kumar says.

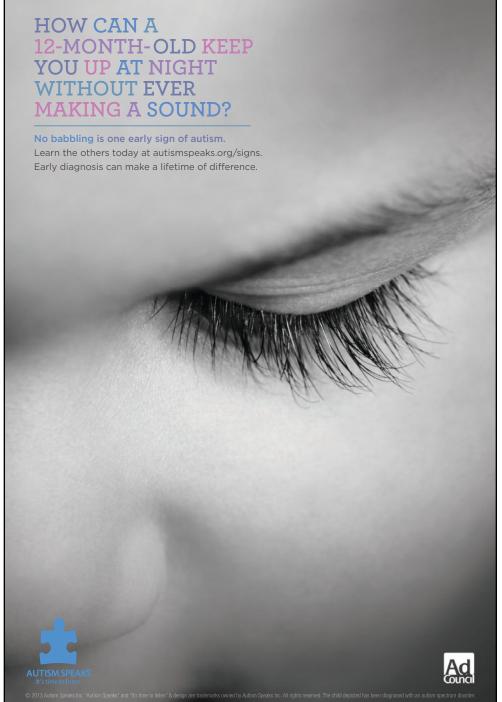
The road to recovery

After he was admitted to the intensive care unit, Snell began the arduous task of regaining his speech.

"I couldn't speak for the first three or four days," Snell says. "My first word was 'mama.' I knew I was going to be all right when I could say 'huckleberry.' That is now my lucky word."

Much like what happened to Snell, "often with a stroke, there are no preceding symptoms," Dr. Kumar explains. "Someone who thinks they may be having a stroke should look for things like double vision, numbness and paralysis."

Thankfully, Snell has made a full recovery and is grateful for the treatment he received at Great Plains Health. "Everyone I came into contact with was kind, helpful, knowledgeable and professional," he says. "Although having a stroke was a traumatic experience, with all the help and treatment I received, my time at the hospital wasn't unpleasant."



Prom rocks University Tower

The Child and Family Development team makes sure teen patient doesn't miss out on tradition.

By Kayla Thomas-Haire



olleagues walking past the University Tower private dining rooms on level three, April 21, couldn't help but notice the pulsing beat of the music and the flashing of multiple colors in the dim light. A peek through the door showed what was happening.

Austin Roberts missed the chance to take his girlfriend, Hannah Carlyle, to prom at Superior High School in southern Nebraska. He's been recovering from severe injuries from a car accident for several weeks in the Pediatric Unit.

The Child and Family Development team put together a prom party complete with decorations, a dance floor, flowers, a photo booth and snacks—including Austin's favorite, Cosmic Brownies! The playlist was specially curated with his favorite music, early 2000s R&B. Nurses, physical therapists, members of the Child Life team, and other colleagues even joined the couple on the dance floor, most notably for the "Cha-Cha Slide."

Thank you to everyone who brought this party to life and for showing the ITEACH value of Healing in an incredibly fun and thoughtful way! More pictures are posted at Facebook.com/NebraskaMed.



Members of Austin's care team hit the dance floor for the "Cha-Cha Slide."



Hannah Carlyle and Austin Roberts arrive at the med center prom.

CARDIAC CATHETERIZATION LAB

HEART CARE



There's a saying in cardiology: "Time is muscle."

In laymen's terms, the saying means that the sooner doctors restore blood flow after a cardiac event, the healthier the heart muscle and the patient will be.

Columbus Community Hospital's new cardiac catheterization lab puts time on a patient's side.

The hospital's new cardiac cath lab is fully equipped with advanced technology to perform minimally invasive tests and procedures that will diagnose and treat heart disease on-site.

In the past, Columbus Community Hospital needed to transport critically ill patients to large facilities that had cardiac cath labs.

With its new cath lab, staff will be able to treat those patients in-house, decreasing the time from diagnosis to restored blood flow — leading to healthier heart muscles and healthier patients.

It's lifesaving care, right here at home.



For more information on the new cath lab and its comprehensive cardiology services, visit columbushosp.org.





Pioneering Spirit

Cancer patient agrees to robotic-assisted surgery in investigational trial of MIRA

Before last August, Allen Voss of Carleton, Nebraska, didn't know he would be the first patient in the world to benefit from a new robotic surgery system called MIRA.

That's when Michael Jobst, MD, of Surgical Associates, PC, used this new two-pound miniaturized robotic device at Bryan Medical Center to perform a colon resection procedure on Allen.

It's all part of a Food & Drug Administration investigational trial of the Miniaturized In vivo Robotic Assistant (MIRA) platform, which was developed on the University of Nebraska-Lincoln's Innovation Campus.

Robotic-assisted surgery options have grown dramatically over the last two decades. These surgeries tend to benefit patients with shorter hospital stays, reduced pain, smaller incisions and faster recovery times. Because of this, demand for these minimally invasive surgeries is increasing.

Currently, most robotic surgeries rely on one device, which requires a dedicated operating room because of its size. Many smaller hospitals can't afford this more expensive system or don't have room to house the equipment.

"MIRA is a much smaller device that's a lot easier for the O.R. team to handle," says Dr. Jobst. "So, it may be a more feasible option for hospitals and communities."

Virtual Incision, the company that makes MIRA, was co-founded by University of Nebraska faculty member Shane Farritor, PhD, and Dmitry Oleynikov, MD, chief medical officer at Virtual Incision. Using their expertise with robotics and surgery, they developed MIRA with abdominal surgery in mind. Currently, MIRA is intended for use with colon resection surgeries, but they hope to develop platforms for other procedures.

PREPPING FOR HISTORY

Virtual Incision offers training for surgeons who are new to the platform. For surgeons at hospitals who don't have access yet to robotics, the company hopes MIRA could be the bridge to get them there.

Dr. Jobst remembers hearing about the project four years ago.

"Kim Russel, the previous CEO of Bryan Health, introduced me to Dr. Farritor at the Innovation Campus," Dr. Jobst recalls.

Throughout the project, the developers occasionally asked Dr. Jobst for input to help them keep the end user in mind. Dr. Jobst took on the role of principal investigator, working in collaboration with Bryan Clinical Research to take MIRA through the FDA's investigational device trial. This April, the FDA approved an Investigational Device Exemption (IDE)

supplement to complete the final stage of the clinical study. Approval puts Virtual Incision on track to obtain evidence needed to bring new innovation to the field of robotic-assisted surgery.

"Our clinical experience has been extremely positive so far," says Dr. Jobst. He and Kelly Krier, MD, of Surgical Associates, PC, have used MIRA to perform 12 surgeries at Bryan as part of the study.

Dr. Jobst is no stranger to robotic-assisted surgery — he began using robotics in 2010, and since then has used the technology to perform nearly 900 major resection surgeries.

FIRST PATIENT ON BOARD

This spring, as the team was preparing for the investigational trial to begin, Allen Voss was meeting with a doctor from Hastings for a routine colon exam. Allen, who is a retired agribusiness worker, learned he had a polyp that his doctor recommended be removed with surgery. A week later, the polyp began bleeding, and Allen was rushed to Lincoln, where he met with William Lawton, MD, of Gastroenterology Specialties, PC.

"Dr. Lawton took care of that problem, and he got me lined up with Dr. Jobst to have surgery to remove the polyp," says Allen.

Allen learned about MIRA at his first appointment with Dr. Jobst.

He says, "Dr. Jobst asked a few questions, and then said he'd been practicing with this new robot in the lab. He said he was getting along great with it, so I agreed to go with it."

Was Allen nervous to be the first patient to try this technology?

"Not really," he says. Allen says that he's a bit of an innovator himself. He's used to tinkering with welding and woodworking projects in his shop, and when he worked for a fertilizer outfit, he helped a company improve

Dr. Jobst is principal medical investigator during MIRA's trial at Bryan.

the functionality of their highboy sprayers. So, when Dr. Jobst described the MIRA as a new tool for a surgery he's done many times, Allen felt comfortable with trying it out.

Dr. Jobst says he was well prepared for the first-ever use of the MIRA system.

"I spent hours in what we call a 'dry lab' learning how to control the device," he explains.





Dr. Michael Jobst visits with Allen Voss, the world's first patient to benefit from the MIRA surgical system from Virtual Incision.

"I started with simple tasks, such as moving pegs around a board, and I then moved on to dissecting chicken breasts and chicken thighs. I spent many hours in the lab doing simulated surgeries before the trial began. It was an extensive process, but the end result was my complete confidence in both myself and MIRA."

GREAT RESULTS

Allen says he's pleased with his outcome.

"It was perfect. I had very little pain, and even when I went home I had very little pain," he says. He was in the hospital for a few days, and his recovery at home took a little more than a week.

"Allen recovered very quickly," says Dr. Jobst. "When compared to open colon resection patients, his hospital stay was half as long and his post hospital recovery took about a third of the total recovery time. When compared to conventional, non-robotic laparoscopy, his length of stay and time to full recovery were similar or slightly better."

For medicine to advance, Dr. Jobst recognizes the vital role that patients and their trust play in the process.

"I want to extend a heartfelt thanks to Allen and the other patients who trusted me and gave their consent to participate in this investigational trial," he says. "To enroll in a study like this one is truly an act of generosity to science and the ultimate display of trust in a surgeon, and I am truly grateful."

To see robotic surgery in action and learn more from Dr. Jobst about how it works, go to bryanhealth.org/robotic-surgery.

Columbus program aims to grow future health care professionals

(COLUMBUS, Neb.) – Like many people in health care, Josh Jaeger, PharmD, was drawn to the field because he wanted to make a difference in the world.

"Health care always interested me," he said. "I have always felt the need to help others, and health care allows me to do that."

In his position as director of pharmacy at Columbus Community Hospital (CCH), Jaeger's general duties are monitoring medication use and distribution, ensuring compliance with regulations and assisting the pharmacy staff in providing patients with the best possible care.

"It can be a very rewarding field," Jaeger said. "You truly have the opportunity to make a difference in people's lives."

Pharmacy is one career Columbus high school students will have the opportunity to explore, thanks to a new educational program in their community. The Health Science Pathway is a collaboration between Columbus area high schools, Central Community College (CCC) and CCH that allows students to learn about available careers in the medical field.

The program started after Columbus High School conducted a student career interest survey and determined more than 32% of its students were interested in a health care career.

"Although we offer courses such as health, anatomy and physiology, we knew there were other opportunities for our students to help them become college and career ready," said Dave Hiebner, principal at Columbus High School. "We also knew there were other school districts in Nebraska offering a health pathway. We felt it was in our students' best interest to begin to pursue these opportunities."

The program includes a series of classes that meet requirements from the state of Nebraska. The classes explore various facets of health care, such as phlebotomy, radiology, pharmacy, nursing, respiratory therapy, housekeeping, facilities and more.

"If you don't allow students to look at health care early, it's almost too late," said Dorothy Bybee, vice president of nursing and patient care services at CCH.

Students who complete the program can become certified nursing assistants (CNAs) through CCC. Additionally, they will receive training in cardiopulmonary resuscitation (CPR), first aid and Stop the Bleed techniques.

"They learn how to be patient-focused and reliable," Bybee said. "We also show them how medical professionals influence patient care. I think it's really an excellent program."

Columbus High School began offering the first class in the series at the beginning of the 2022 spring semester. There were 16 students in the first



class, with an estimated 60 more enrolled next semester.

According to those involved in creating the program, the Health Science Pathway is a win-win for everyone.

For students, it offers insight into careers many of them have never heard of, and gives them a chance to have hands-on experience before starting college.

"Currently, there are multiple professions in health care that are high skill, high wage, and high demand for students to pursue," said Jason Schapmann, assistant principal at CHS. "We believe there are many Columbus High School students who can potentially fill these positions with the right educational experience."

For CCH, it creates a larger pool of qualified job candidates, and helps combat the current labor shortage impacting the nation.

"It's a time unlike anything the vast majority of us have experienced," said Scott Messersmith, vice president of human resources at CCH. "We are seeing openings across the board, and this program will help fill some of those holes."

Messersmith said the program could potentially assist the hospital with long-term employee retention by keeping local students in their hometown. It could also help fill current vacancies, especially in nursing.

Hospital leaders recently lowered the minimum age requirement for CNAs to 16 years old. That means students who become CNAs through the Health Science Pathway could start gaining experience right away.

"Most students are looking for part-time jobs anyway," said Bybee. "A job as a CNA can fulfill that need and give them the opportunity to experience health care."

Although Columbus Public Schools was the only local system to offer the class in the spring, other schools are also planning to participate. Lakeview High School will offer its first class in the fall, with the second and third class of the series to follow.

"This is a community program, and it's very important to develop our future health care professionals in Columbus," said Messersmith.

STAND UP FOR US ALL

Clinical trials bring us closer to the day when all cancer patients can become survivors.

Clinical trials are an essential path to progress and the brightest torch researchers have to light their way to better treatments. That's because clinical trials allow researchers to test cutting-edge and potentially life-saving treatments while giving participants access to the best options available.

If you're interested in exploring new treatment options that may also light the path to better treatments for other patients, a clinical trial may be the right option for you. Speak with your doctor and visit StandUpToCancer.org/ClinicalTrials to learn more.



Sonequa Martin-Green, SU2C Ambassador

Photo Credit: Matt Sayles Stand Up To Cancer is a division of the Entertainment Industry Foundation, a 501(c)(3) charitable organization.























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To our heroes on the frontlines of healthcare for what you are doing each and every day.



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Purchased Services Present Niche Savings Opportunity

hile the supply chain improvements typically focus on pharmaceuticals and medical supplies, there is opportunity to find savings in a previously overlooked area of spend — purchased services.

Generally speaking, purchased services are the services a hospital outsources to a third party. While these services can include everything from laundry to landscaping, spend for purchased services resides in a number of budget categories including: facility support services; contracted clinical services; information technology and telecommunications; financial services; ancillary support services including marketing; insurance services; human resource support services; and pharmacy services.

Historically purchased services are challenging to manage for a number of reasons. First, purchases are often decentralized with decisions made at the department level. Limited benchmark information and a scarcity of relevant national contracts create additional barriers to cost management.

A Sizable Expense

While purchased services account for about 25 percent of a hospital's operating expenses, purchased services and products together make up 50 percent of the budget, with labor costs comprising the remaining half.

More recently, as personal protective equipment (PPE) and other critical supply costs have escalated, hospitals are seeking ways to offset these expenses in other areas. One area of potential savings is contracted purchased services, which touch every hospital department.



When beginning a purchased services cost-reduction program, it's best to garner support from the C-suite, especially financial, supply and other leaders who set goals and savings targets. In addition, functional area leaders are key for gathering current and historic spending data.

Savings on purchased services can range from 10% to 30% depending on the contracting service and access to category specific benchmarks (CHC Supply Trust).

Benefits of Coordinated, Managed Purchased Services

- Information: Benchmark hospital purchased service spending for each category against that of similar organizations to spot potential savings opportunities.
- Choice: Select your preferred service providers based on staff input, price and contract negotiation.
- Ease: Reduce implementation time and maximize savings with a supply partner managing each step of the process.

Resources to Help

In response to these challenges, CHC Supply Trust collaborates with Valify, a technology solutions provider, to provide a comprehensive, yet centralized view of their total purchased services expense. In addition to categorizing the expenses by functional area, Valify also provides benchmarks specific to each specific contract category and an apples-to-apples comparison regardless of the size of the health system.

Currently, more than 80 CHC Supply Trust hospital members have implemented the Valify application with more being set up each month.

An early adopter of the Valify application, Hunt Regional Medical Center in Greenville, Texas, has recognized its value in numerous ways. "The Valify platform has been a 'gigantic spotlight' on our service contracts and brings a lot of transparency," said Billy Robinson, Director of Supply Chain Services, Hunt Regional Medical Center. "The visibility to the data has facilitated more productive discussions with both internal staff and physicians to identify potential improvements as well as externally with vendor negotiations. The technology platform is not a quick fix, but it provides our own health system's data coupled with national industry information to create a baseline of information to support a collaborative approach to improvements."

Contracting Services

Services contracts are another area of savings opportunity for community hospitals. It's common for default service contracts to favor the vendor's interests without protecting the hospital. For example, autorenewal contracts can lock a hospital into long-term agreements even if pricing becomes non-competitive. Some contracts even hold customers accountable for vendor mistakes. CHC Supply Trust clients benefit from a contract review service which assists with the entire process of evaluating, selecting and contracting with vendors to make sure all agreements favor the hospital's interests.

About CHC Supply Trust

CHC Supply Trust raised the bar in helping member hospitals

during the pandemic and continues to help hospitals save on supply costs, including purchased services, through its long-standing relationship with HealthTrust, one of the nation's leading group purchasing organizations (GPOs).

CHC Supply Trust offers top-tier pricing for community hospitals regardless of their supply spend. To find out how much your hospital can save in supply costs, CHC Supply Trust offers a complimentary supply spend analysis that compares the cost of items that your hospital currently spends to member pricing for those same items. For more details, contact Phil Trent, VP of Business Development, CHC Supply Trust, at (972) 943-1204 or ptrent@ communityhospitalcorp.com.

Purchased Services Contract Categories

Ancillary Services, such as:

- Courier services
- Document shredding
- Marketing
- Subscriptions
- Transportation services

Facility Support Services, such as:

- Elevator services
- Housekeeping
- Laundry and linen services
- Pest control
- Security services
- Waste management

Clinical Services, such as:

- Blood bank services
- Mobile imaging
- Perfusion
- Reference lab services
- Hyperbaric services

Pharmacy Services

IT and Telecom

HR Services, such as:

- Background checks and drug screening
- Employee benefits administration

Financial Services, such as:

- Credit card processing
- Physician advisory services

Energy services (electric, natural gas)







D.A. Davidson & Co. member FINRA and SIPC dadavidson.com

NHA Services Makes it Possible for Nebraska Hospitals to offer Best-in-Class Education Benefits

ealthcare is one of the fastest changing professions today. Keeping current can be stressful for dedicated professionals.

That's why NHA Services made Bellevue University a preferred education partner of the Association. Bellevue University is a leader in making education accessible to busy working adults, with a long history of effective, interactive online learning.

The partnership also includes support for hospitals' tuition assistance programs. The generous tuition assistance program, called TA Boost,™ in some cases can double an employee's tuition assistance up to \$5,250 per year, making going back to school more affordable for Nebraska's health care professionals.



It's a win/win/win for everybody:

- Healthcare and health administration professionals can afford the education they need to grow and learn.
- Hospitals and other healthcare organizations can attract and keep talented professionals because it gives them a pathway to their education and career goals.

 Patients and clients win because they know they are being seen by professionals and organizations that care about staying current with the latest technologies and treatments.

Many Nebraska healthcare organizations have taken advantage of the benefit.

Employees from these organizations are utilizing TA Boost™:

- Avera St. Anthony's Hospital
- Community Hospital McCook
- Faith Regional Health Services
- Howard County Medical Center
- Memorial Community Health Aurora
- Memorial Community Hospital and Health System
- NHA/Bio-Electronics
- Perkins County Health Services
- Providence Medical Center

Bellevue University's leadership in serving adult learners made them a natural choice for this new program.

A long-standing partner with NHA since 2002, Bellevue University's commitment to "Real Learning for Real Life," assures learners have the skills and knowledge needed to be successful in work and life.

If your healthcare organization is interested in offering this extraordinary benefit, check out how you can:

NHAMembers.CorporateLearning.com

A non-profit university, Bellevue University is accredited by the Higher Learning Commission (hlcommission. org), a regional accreditation agency recognized by the U.S. Department of Education.



Let a wish begin with you.

Make-A-Wish Nebraska grants the wishes of more than 110 Nebraska children with critical illnesses each year. But we know there are more children who qualify but are never referred. We need your help to ensure every eligible child receives the power of a wish at a time they need it the most. Refer a child today!

REFER A WISH ★ DONATE ★ VOLUNTEER

800-760-9474 ★ wish.org/Nebraska







Equipment Service Programs

Improving patient care and facility productivity with expert medical equipment management, preventive maintenance and repair.

Fast service

Bio-Electronics offers two Preventive Maintenance (PM) programs as well as safety testing and non-contract repair services. By using a tiered service structure, facilities may select the level of maintenance and support services that best meets their individual needs. These options allow them to manage service costs and keep their equipment safe and operating properly.

Our PM programs are designed to prolong the active life of healthcare equipment through periodic inspections and maintenance. Bio-Electronics' program has been tested through The Joint Commission and State Medicare/ Medicaid certifications, along with State and Federal radiological health inspections and have proven to deliver high levels of regulatory compliance and exemplary uptime statistics.



What you can expect

PM ONLY

Provides a cost-effective way for healthcare facilities to satisfy regulating agency requirements for documentation, testing procedures, and testing frequency. Preferred pricing on repair labor and parts offer additional savings. This is our most - utilized service level.

PM & REPAIR

Offers PM service as well as demand (unscheduled) repairs for contracted equipment at a fixed annual cost. This service does not include repair parts but still helps facilities plan and manage medical equipment service expenses and minimize non-budgeted costs.

IN-HOUSE PROGRAM

This option provides technician(s) dedicated to the hospital on a full-time basis, 5 days a week, 8 hours per day. The In-House Program includes all preventative maintenance and repair labor and documentation.

INVENTORY MANAGEMENT

Provides a free mobile app for hospital and facility personnel to track their own equipment testing responsibility items. This is a cost-effective way for healthcare facilities to satisfy regulatory agency requirements for documentation, testing procedures, and testing frequency for both equipment that Bio-Electronics services as well as the items managed by hospital staff.

"Particularly impressive to me is a commitment by Bio-Electronics to provide outstanding service to customers. Bio-Electronics provides fantastic response times and work is thorough and cost effective" - LuAnne Jones, Materials Management Director,

York General Hospital



Hospitalized Nebraska Teen Battling Cancer Receives Special Animal Visitor to Boost Her Spirits



o celebrate 15-year-old Kayla's fifth, and final, round of chemotherapy to treat acute myeloid leukemia (AML), Children's Hospital & Medical Center team members honored her with a special visit from her favorite farm animal: a cow. Since receiving the diagnosis six months ago, Kayla, from Arapahoe, Neb., has undergone intense treatment and several month-long hospital stays, leaving her homesick.

During her hospital stays, Kayla decorates her room with cow artwork and décor, showing her love for the animal and the farming community back home. Team members took note of this and worked with Scatter Joy Acres, an animal rescue organization, to arrange a cow visit at Children's—bringing a piece of home to Kayla and hoping to make her last hospital stay brighter, better and incredibly memorable.

When Kayla found out about this special visit, she said, "I didn't know what to say but there was this big grin on my

face, and I couldn't quit smiling for the rest of the day. I was just so excited and couldn't believe they were actually bringing in a cow. I'm excited to be home after this but am going to miss everyone because they've been like a big family to me."

"Kayla is an inspirational kiddo and she's done a fantastic job on this journey. It's been difficult and she's had some highs and some lows, but she's persevered and even inspired others in their own journeys," said Sarah James, a chaplain on Children's Pastoral & Spiritual Care team. "We wanted to make this moment special for Kayla and for her mom."

Our patients and their families inspire us every day with their strength, perseverance and resiliency. In ways big and small, Children's aims to individualize the health care experience for our patients and, ultimately, improve the life of every child.

Focused on Your Health

he outpatient clinic expansion at Boone County Health Center (BCHC) is now complete and operational. The 54,000 square foot expansion offers an 80% increase in space. This addition houses the Boone County Medical Clinic, Specialty Clinic, surgery department, obstetrical wing, and the Rudman Rehabilitation Center, including cardiac rehabilitation and physical, occupational, and speech therapy.

The design plan assembles outpatient services into one location, creating conveniences for patients and enhancing collaboration among providers. Ultimately creating a more secure facility with only two public entrances.

The main structure of the hospital has grown significantly over time. The original hospital, built in the 1950s, has been completely enclosed by newer construction from various periods. The expansion enables BCHC to address their 1950s infrastructure from the original hospital and allows them to focus on the changing demands of healthcare.



A roomy centrally located registration area is just inside the doors. Five check-in stations with dividers for privacy and places to stand along with wheelchair-accessible stations allow for a quick check-in process. A private check-in room is available for lengthier encounters.

The new medical clinic has been much anticipated. Moving from a clinic built for five physicians nearly 30 years ago to a space that now fits 16 is priceless. The medical clinic boasts 24 exam rooms, ten more than previously. Nine additional exam rooms for specialty/visiting physicians are located next to the medical clinic, enhancing care coordination. Physician offices are located adjacent to the nurse collaboration space allowing for an easier workflow and ultimately keeping the patient at the forefront.

The OB Wing offers two huge delivery rooms and a postpartum room that can double as a delivery room, a new nursery, and a triage room. This space is also locked down for patient safety.



Our surgery department's new location next to OB is convenient for C-section procedures. The surgery space increased in size from one large operating room to two. Two rooms will solve the problem of rescheduled surgeries if there is an emergency c-section.

Adding five more therapy bays and additional private treatment rooms has enhanced patient care. The staff in these departments has tripled over the past ten years, so the added space was necessary. The Rudman Rehabilitation Center also added to their gym space size.

This expansion allows the facility to accommodate better the more than 10,000 residents we serve in Central Nebraska. As Boone County Health Center continues to grow its facilities, services, and medical group, the underlying focus is on improving the health of those we serve.



Why Brand Alignment Matters in Healthcare

hich comes first, the chicken or the egg? Although theories are abundant and opinions vary, what is not disputed is they are related and interdependent. Creating a recognizable and powerful brand identity for healthcare entities is not only valuable but crucial. Think to yourself, does the look and feel of our brand match the quality of care we provide?



A strong brand is built from the ground up, even if it can not be established first. The strategic thinking and foundational building blocks establish internal buyin, create external awareness, and foster community support. People are willing to support initiatives with staying power and want to support efforts that bring value to themselves or those they care about.

Healthcare doesn't follow the exact marketing model other businesses do, although we all realize the need to generate funding to continuously offer life-extending care. In healthcare marketing, people are sensitive—some are even protective of *how things used to be*. They don't want to be sold products or services, even though they may very well need them. They certainly don't want to see their doctor's office or hospital as a business.

The rising costs of everything, including healthcare, perpetuates the challenge of justifying marketing efforts. However, it's important to remember it is not a matter of if, but when someone needs or refers someone to you. Therefore, being visible and top of mind is a priority. All of our healthcare partners tell us the true reason for what they do is to help others. The key is choosing how to differentiate your organization from others and learning the most authentic ways to communicate who you are to the public.

"You have to start somewhere. Consistent branding creates trust, trust creates engagement, and engagement builds healthy communities," says Trent Wilcox, President of UNANIMOUS.

The first step in creating a representative verbal and visual presence is establishing a foundational identity. Some organizations develop this internally, while others outsource the tedious and arduous process, mainly because they have other pressing priorities and value an outside perspective. Your organization's mission, vision, and values matter, and your internal team should operate by them, and external supporters should witness them. This is where your brand originates—this is the what and why you do what you do. A solid foundation allows your team to "live" the brand. Are you able to hire and evaluate team members based on your values?

From there, developing insightful messaging and creating appealing visuals begin to fall into place, creating a brand identity. Your brand identity is simply the collection of outward elements representing



your organization. These may consist of an organization's name, key messages, tagline, color, design, logo, typography, etc.

Does your verbal and visual presence really matter? Do they have to align? After all, patients will choose you if you provide excellent service, and your employees will stay, right? Theoretically, yes. In reality, no. People tend to choose a provider they have heard of before, either from another person or elsewhere. Employees typically stay when they feel valued and part of a team.

Ask yourself:

- 1. Does the look and feel of our brand match the quality of care we provide?
- 2. Are our messages consistent internally to employees and externally to the public?
- 3. Does our organization look outdated or forward-thinking?

In healthcare, a progressive visual presence is crucial in building confidence with the community, especially patients and foundation supporters. Does an outdated brand create a perception of outdated technology and medical practices? Although assurance is often felt subconsciously, prospective patients find comfort in familiarity and develop trust in things that are recognizable. The internal dialog is usually "Oh, I've heard of them, so I will go there."

In truth, your organization still has to deliver—in service and quality care. True brand alignment means you and your entire team *live your brand*. Your mission is known, recited, and drives decisions. Your messaging has a consistent tone on every website page, testimonial video, print ad, and service brochure. Your visual mark is proudly worn by employees, conveys the quality of care you provide and is easily recognizable. True brand alignment is an accurate, appealing, and consistent outward expression of your organization to all key stakeholders.

Sometimes you are afforded the opportunity to engineer your brand alignment strategy from the ground up, beginning at the foundational concepts. Other times, immediate needs and services have to be met first, or you join an already established organization. Regardless of what comes first, establishing a brand identity that aligns with your mission, vision, and values is the heartbeat of healthcare marketing.

UNANIMOUS is a Lincoln, Nebraska-based agency that assists clients with branding, marketing, web, and video. With over 350 active clients across 15 states, the agency is known for its collaborative style and prides itself on rhyme, reason, and results. Visit BeUNANIMOUS.com to learn more.



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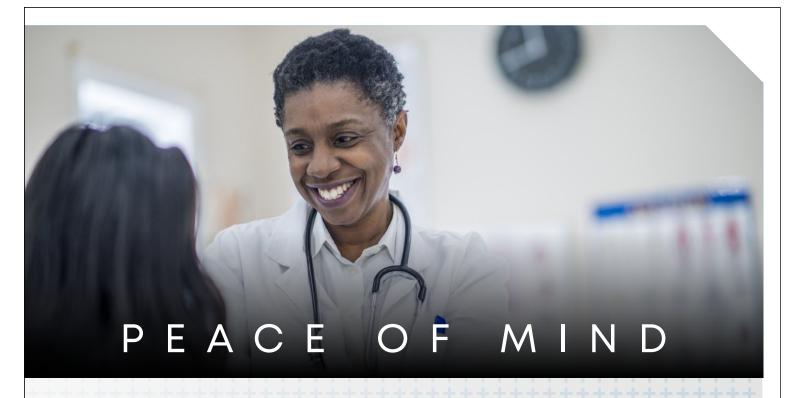


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