

2022



Quality Conference

**NEBRASKA CRITICAL ACCESS HOSPITALS AND
RURAL HEALTH CLINICS CONFERENCE ON QUALITY**



NEBRASKA HOSPITAL ASSOCIATION

Welcome to the 2022 Nebraska CAHs & RHCs Conference on Quality

TARGET AUDIENCE:

Quality Leaders, Nursing Leaders, Clinic Managers, Pharmacists, CEO's, Providers, Board Members

OVERVIEW:

This program has been designed to meet the education needs of health care professionals including hospital and clinic quality and nursing leaders, pharmacists, CEO's, governing board members, and providers. This program will focus on national and state best practices and create intentional thought around the role of CAH Quality in the future of Nebraska healthcare..

REGISTRATION:

[Click here](#) for more information and to register for the conference.

LODGING:

There is a block of rooms at the Comfort Inn & Suites for Wednesday & Thursday, Nov. 9-10 at the rate of \$115 + tax/per night. To make reservations at the discounted rate, attendees should call (308) 251-2722 no later than **October 26, 2022**. After that date, rates cannot be guaranteed.

To book your reservation online, visit this link:

<https://www.choicehotels.com/reservations/groups/QZ53U8>

Accredited Continuing Education



ACCREDITATION STATEMENT

In support of improving patient care, this activity has been planned and implemented by AXIS Medical Education and the Nebraska Hospital Association. AXIS Medical Education is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

CREDIT DESIGNATION FOR NURSING

JUST CULTURE FOR HEALTHCARE LEADERS:

AXIS Medical Education designates this continuing nursing education activity for a maximum of **3.25 contact hours**.

CAH & RURAL HEALTH CLINIC CONFERENCE ON QUALITY

AXIS Medical Education designates this continuing nursing education activity for a maximum of **9.25 contact hours**.

Learners are advised that accredited status does not imply endorsement by the provider or ANCC of any commercial products displayed in conjunction with an activity.

QUALITY PROFESSIONALS

JUST CULTURE FOR HEALTHCARE LEADERS:

This program has been approved by the National Association for Healthcare Quality for a maximum of **3.25 CPHQ** continuing education credits for this event

CAH & RURAL HEALTH CLINIC CONFERENCE ON QUALITY:

This program has been approved by the National Association for Healthcare Quality for a maximum of **9.25 CPHQ** continuing education credits for this event.

AXIS CONTACT INFORMATION

For information about the accreditation of this program please contact AXIS info@axismeded.org.

DISCLAIMER

Participants have an implied responsibility to use the newly acquired information to enhance patient outcomes and their own professional development. The information presented in this activity is not meant to serve as a guideline for patient management. Any procedures, medications, or other courses of diagnosis or treatment discussed in this activity should not be used by clinicians without evaluation of patient conditions and possible contraindications on dangers in use, review of any applicable manufacturer's product information, and comparison with recommendations of other authorities.

REQUIREMENTS FOR CREDIT:

- Attend/participate in the educational activity and review all course materials.
- Complete the CE Declaration form online by **11:59 pm ET on December 11, 2022**. Instructions will be provided. If you do not enter the online portal by the above date, you will not be able to retrieve your statement of participation.
- Upon successful completion of the online form, your statement of completion will be presented to you to print.

DISCLOSURE OF CONFLICTS OF INTEREST

AXIS Medical Education requires faculty, instructors, authors, planners, directors, managers, reviewers, and other individuals who are in a position to control the content of this activity to disclose all real or apparent conflicts of interest they may have with ineligible companies. An ineligible entity is any organization whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. All relevant conflicts of interest are identified and mitigated prior to initiation of the planning phase for an activity.

AXIS has mitigated and disclosed to learners all relevant conflicts of interest disclosed by staff, planners, faculty/authors, peer reviewers, or others in control of content for this activity. Disclosure of a relationship is not intended to suggest or condone bias in any presentation but is made to provide participants with information that might be of potential importance to their evaluation of a presentation or activity. Disclosure information for faculty, authors, course directors, planners, peer reviewers, and/or relevant staff is provided with this activity.

The **faculty** reported the following relevant financial relationships or relationships they have with ineligible companies of any amount during the past 24 months:

NAME OF FACULTY OR PRESENTER	REPORTED FINANCIAL RELATIONSHIP
Richard J. Priore, Sc.D., MHA, FACHE, FACMPE	Nothing to disclose
Scott Zeller, MD	Nothing to disclose
Rebecca Hedstrom, BSN, RN	Nothing to disclose
Valerie Hangman, BSN, RN	Nothing to disclose
Kathleen Jasa, CDIP, CCS	Nothing to disclose
Barbara Petersen RN, MSN, APRN-BC	Nothing to disclose
Tina Pate, MSN, RN, CEN	Nothing to disclose
Brant Loose, PT, DPT	Nothing to disclose
Jerry Bockman, PT, DNP	Nothing to disclose
Kendra Brown, MSN, RN, PCCN-K	Nothing to disclose
Mary Lutkemeier, MPT	Nothing to disclose
Kathy Middleswart, MSN, RN	Nothing to disclose
Anne Skinner, RHIA, MS	Nothing to disclose
Dana Steiner, BSN, RN	Nothing to disclose
Amber Kavan, BSN, RN	Nothing to disclose
Margaret Woepfel, MSN, RN, CPHQ, FACHE	Nothing to disclose
Kim Haney, AAS	Nothing to disclose
Judy Bors, MAM, BSN, RN	Nothing to disclose
Jackie Moline, BSN, RN, CLC	Nothing to disclose
Jenna Watson, BSN, RN	Nothing to disclose
Nicole Thorell, RN, MSN	Nothing to disclose
Charlotte Marks, BSN, RN	Nothing to disclose
Natalie Marsh, RN	Nothing to disclose
Stephanie Moody, RN	Nothing to disclose
Michael Cummings , CPP	Nothing to disclose
Marcus Engel, CPXP, CSP	Nothing to disclose
Katherine Jones, PT, PhD	Consultant: Ocuvera, LLC

The **directors, planners, managers and reviewers** reported the following financial relationships they have with any ineligible company of any amount during the past 24 months:

NAME OF PLANNER/MANAGER	REPORTED FINANCIAL RELATIONSHIP
Margaret Woepfel MSN, RN CPHQ	Nothing to disclose
Margaret Brockman, MSN, RN	Nothing to disclose
Nancy Jo Hansen, BS	Nothing to disclose
Dee Morgillo, MEd., MT(ASCP), CHCP	Nothing to disclose

Agenda - November 10

9:00 A.M. - 9:10 A.M.
DIAMOND 9 & 10

WELCOME

Margaret Brockman MSN, RN, DHHS - Office of Rural Health

9:10 A.M. - 10:30 A.M.
DIAMOND 9 & 10

MAKING THE BUSINESS CASE FOR QUALITY

Richard J. (Rich) Priore, Sc.D., MHA, FACHE, FACMPE

OBJECTIVES:

- Outline the cost of waste associated with a quality improvement opportunity.
- Translate quality improvement into measurable financial impact.
- Apply a five-step process for making an effective business case to justify increasingly scarce resources.
- Explore how to overcome common barriers to create key stakeholder buy-in.

10:30 A.M. - 10:45 A.M.

BREAK

10:45 A.M. - 12:15 P.M.
DIAMOND 9 & 10

IMPROVING CARE FOR BEHAVIORAL EMERGENCY PATIENTS FOR EVERY SIZE HOSPITAL AND EMERGENCY DEPARTMENT

Scott Zeller, MD, Vice President, Leading Acute Psychiatry at Vituity

OBJECTIVES:

- Anticipate key issues involving behavioral emergency patients presenting to hospital emergency departments of every size and shape.
- Describe traditionally ubiquitous practices in emergency departments that can worsen behavioral emergency symptoms and place caregivers at risk for violence.
- Review approaches to behavioral health patients which improve patient experience and enhance safety in emergency departments, including trauma-informed care, de-escalation techniques, parallel processing, avoidance of coercion, and reduction in overall lengths of stay, no matter what size emergency department.
- Identify how the "Six Goals of Emergency Psychiatric Care" apply to rural and critical access hospitals as well as high-utilization facilities.

12:15 P.M. - 1:30 P.M.
DIAMOND 4 & 5

RECOGNITION LUNCH

- Quest for Excellence Project Recognition and Overviews
- Rural QI Residency Participant Recognition
- Chartis Top Performing Hospitals

Agenda - November 10 - Clinic Sessions

DIAMOND 7 & 8

1:30 P.M. - 2:00 P.M.

NE SAFE BABIES CLINIC CAMPAIGN

Jackie Moline, BSN, RN, CLC

OBJECTIVES:

- Prepare approaches to educate the ABCs of Safe Sleep to patient caregivers.
- State 3 action steps to teach caregivers of children for prevention of Abusive Head Trauma / Shaken Baby Syndrome.
- Recite 3 reasons a baby may cry that need to be included in caregiver education.

2:00 P.M. - 2:45 P.M.

DEVELOPING AN OPIOID STEWARDSHIP PROGRAM IN THE OUTPATIENT SETTING – STRATEGIES TO DECREASE USE AND INCREASE SAFETY AMONG THOSE ON LONG TERM OPIATES

Jenna Watson BSN, RN

OBJECTIVES:

- Discuss successes and barriers to starting an outpatient opioid stewardship program.
- Describe methods used to decrease the use of opiates in the outpatient setting.
- Discuss practices used to increase the safety of those patients who are currently on opiate therapy.

2:45 P.M. - 3:15 P.M.

BREAK

3:15 P.M. - 4:00 P.M.

RURAL HEALTH CLINIC PERFORMANCE IMPROVEMENT AND MEASUREMENT

Nicole Thorell, RN, MSN

Gregory Wolf, MBA

OBJECTIVES:

- Differentiate Rural Health Clinic Reimbursement models.
- Identify quality metrics specific to rural health clinic and their reimbursement.
- Create internal benchmarking metrics for your quality measures.

4:00 P.M. - 4:45 P.M.

AGE-FRIENDLY HEALTHCARE COMMUNITIES: NEBRASKA HOSPITALS LEADING THE WAY

Dana Steiner, BSN, RN

Valerie Hangman, BSN, RN

Charlotte Marks, BSN, RN

Natalie Marsh, RN

OBJECTIVES:

- State the patient benefits of deploying the 4M's model through healthcare communities.
- Discuss strategies to overcome implementation barriers of anticholinergic medication.
- Discuss strategies to implement the "What Matters Story."

4:45 P.M. - 5:00 P.M.

ADJOURN

Agenda - November 10 - Hospital Sessions

DIAMOND 9 & 10

1:30 P.M. - 2:00 P.M.

NURSE DRIVEN FOLEY REMOVAL PROTOCOL

Becca Hedstrom BSN, RN

OBJECTIVES:

- State appropriate indications for an indwelling foley catheter to protect patients from hospital acquired infections.
- Examine foley catheter substitutions to decrease infection risk.

2:00 P.M. - 2:30 P.M.

CLINICAL DOCUMENTATION IMPROVEMENT

Valerie Hangman BSN, RN

Kathleen Jasa, CDIP, CCS

OBJECTIVES:

- Describe the steps to implement a documentation improvement program as it relates to providers and frontline staff.
- State the benefits and lessons learned when collaborating with an internal documentation improvement committee.
- Plan documentation improvement techniques to drive improvement and sustainment.

2:30 P.M. - 3:00 P.M.

ROUNDING FOR A CULTURE OF SAFETY

Barbara Petersen RN, MSN, APRN-BC

Tina Pate MSN, RN CEN

OBJECTIVES:

- Discover useful tracking methods to capture nurse leader rounding wins and improvements and how to filter those back to the staff level.
- Outline how to drive staff accountability through hourly rounding.
- Apply key strategies for driving HCAHPS scores upward and ensuring sustained results.

3:00 P.M. - 3:15 P.M.

BREAK

3:15 P.M. - 3:45 P.M.

IMPROVING MOBILITY OF SWING BED PATIENTS IN A RURAL NEBRASKA CAH

Brant Loose, PT, DPT

Jerry Bockman PT, DPT

Stephanie Moody, RN

OBJECTIVES:

- Infer mobility decline in hospitalized patients in Nebraska CAHs and globally.
- Apply interventions that will improve mobility and mobility scores.
- Evaluate the impact of increased mobility related to post discharge safety .

Agenda - November 10 Hospital Sessions

DIAMOND 9 & 10

3:45 P.M. - 4:15 P.M.

EFFECTS OF SWING BED SERVICES ON RISK-ADJUSTED MOBILITY

Kendra Brown, MSN, RN, CSA, PCCN-K

Mary Lutkemeier, MPT

Kathy Middleswart MSN, RN

OBJECTIVES:

- Discuss mobility decline in hospitalized patients globally.
- Discuss the impact of increased mobility for the patient and related care services upon discharge.
- Discuss interventions contributing to increased mobility scores at Kearney County Health Services.

4:15 P.M. - 4:45 P.M.

THE ROAD TO SUCCESSFUL PEER REVIEW AND CREDENTIALING

Kim Haney, AAS

Judy Bors, MAM, BSN, RN

OBJECTIVES:

- Construct the essentials of a CAH peer review processes.
- Employ essential tools for meaningful and standardized peer reviews.
- Construct the essentials of CAH credentialing.
- Design the standardized process for the verification of a healthcare provider's qualifications.

4:45 P.M. - 5:00 P.M.

ADJOURN

Agenda - November 11

DIAMOND 9 & 10

8:20 A.M. - 8:30 A.M.

OPENING STATEMENTS

8:30 A.M. - 9:30 A.M.

HEALTHCARE SECURITY TRENDS AND SOLUTIONS

Mike Cummings, TorchStone Global

OBJECTIVES:

- Review trending security incidents impacting hospital environments.
- Adapt mitigation strategies on how to address these risks.
- Adapt proven solutions in reducing hospital security risks.

9:30 A.M. - 10:45 A.M.

THE OTHER END OF THE STETHOSCOPE

Marcus Engel MS, CPXP, CSP

Marcus Engel speaks from experience, after being blinded and severely injured by a drunk driver, Marcus overcame unimaginable obstacles to reclaim his life. This dramatic story inspires healthcare professionals to reignite their passion for providing excellent patient care.

OBJECTIVES:

- Recognize that many times, the healing power of human presence is the best (and sometimes only) thing a health care professional can do for a patient.
- Demonstrate an understanding of individual patient and family needs in a clinical setting.
- Interpret patient and family interactions with an understanding of individual backstories, cultures, and experiences.
- Outline strategies to Implement best practices in patient communication.
- Create an atmosphere of security by communicating a commitment to patient empowerment (i.e., policies, procedures, schedules, plan of care, etc.).

10:45 A.M. - 11:00 A.M.

BREAK

11:00 A.M. - 12:00 P.M.

PRESENCE: THE CORNERSTONE OF CAREGIVING

Marcus Engel MS, CPXP, CSP

Presence trains healthcare professions to practice simple and effective techniques for mindfulness and growing.

OBJECTIVES:

- Convey the power of human presence in patient experience and outcomes.
- Interpret "presence" and its application to healthcare.
- Discover the impact journaling can have on combating compassion fatigue and improving resiliency.

12:00 P.M.

ADJOURN

Optional Ad On - November 9 (Supported by NAHQRS)

1:00 P.M. - 4:30 P.M.

with one 15 minute break



USE TEAM STRATEGIES AND TOOLS TO BUILD STAFF RESILIENCE

Katherine Jones, PT, PhD President, Board of Directors, Nebraska Coalition for Patient Safety, Adjunct Associate Professor College of Public Health, University of Nebraska Medical Center

OBJECTIVES:

- Define a "team" and "team structure."
- Explain the theory/rationale that supports the use of teamwork to manage complexity and improve staff resilience/team performance.
- Practice using TeamSTEPPS® leadership strategies and tools to overcome barriers to team performance and improve staff resilience and patient safety.
- Integrate TeamSTEPPS® strategies and tools for leadership, situation monitoring, mutual support and communication into a teamwork system that promotes psychological safety and organizational learning.

Your Conference Faculty

KIM HANEY, AAS

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Memorial Health Care Systems, Seward

JUDY BORS, MAM, BSN, RN

DON
Memorial Health Care Systems, Seward

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Physical Therapist
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Director of Quality and Infection Control
Kearney County Health Services, Minden

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DHHS, Lincoln

NICOLE THORELL, RN, MSN

CNO
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GREGORY WOLF, MBA

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Transition of Care Nurse/Patient Education
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