

# North Dakota Hospital Association Innovate-ND

## HRET Hospital Improvement Innovation Network

June 8, 2018

### EDUCATIONAL EVENTS

#### HRET HIIN

**HRET HIIN Readmissions Sepsis Fishbowl Series: Part 3**  
6/12/18 | 11:00 a.m.–12:00 p.m.  
CT

**Falls Virtual Event | The Triple Crown of Safe Mobility: Engaging Nurses, Patients and Families**  
6/28/18 | 11:00 a.m.-12:00 p.m.  
CT

**HRET HIIN Readmissions Sepsis Fishbowl Series: Part 4**  
7/17/18 | 11:00 a.m.–12:00 p.m.  
CT

**HRET HIIN Readmissions Sepsis Fishbowl Series: Part 5**  
8/07/18 | 11:00 a.m.–12:00 p.m.  
CT

Information, registration links and recording links for **all** HRET HIIN upcoming and past virtual events can be found under the “Events” tab on [www.hret-hiin.org](http://www.hret-hiin.org).

#### Event Recordings

All event recordings are/will be available on-demand on the HRET HIIN website [www.hret-hiin.org](http://www.hret-hiin.org). Select the desired topic and scroll down to “Watch a Recent Data Event”.

#### Partner Educational Events

### IMPORTANT DATES TO REMEMBER

**Remember to report your HIIN data in CDS every month!**

Deadline	Reporting Period										
6/15/18	<b>Quarterly Operational Measures</b> <small>Below are the measures available with this project. Click the "Enter Data" button to enter data. For additional details, click the Information icon next to the measure.</small> <table border="1"> <thead> <tr> <th>Measure (click the i button for measure specifications)</th> <th>Monitoring Period</th> <th>Baseline Status</th> <th>Monitoring Status</th> <th></th> </tr> </thead> <tbody> <tr> <td>HIIN - 1Q 2018 Operational Items: HIIN-Q12018 Process (Recommended)</td> <td>5/15/2018 - 6/30/2018 (Once)</td> <td>N/A</td> <td>No Data</td> <td><input type="button" value="Enter Data"/></td> </tr> </tbody> </table>	Measure (click the i button for measure specifications)	Monitoring Period	Baseline Status	Monitoring Status		HIIN - 1Q 2018 Operational Items: HIIN-Q12018 Process (Recommended)	5/15/2018 - 6/30/2018 (Once)	N/A	No Data	<input type="button" value="Enter Data"/>
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HIIN - 1Q 2018 Operational Items: HIIN-Q12018 Process (Recommended)	5/15/2018 - 6/30/2018 (Once)	N/A	No Data	<input type="button" value="Enter Data"/>							
06/30/18	Performance Data for May Discharges										

### QUALITY MILESTONES RECOGNITION

<b>COPPER Milestone:</b> Mountrail County Medical Center – Stanley	<b>COPPER, BRONZE &amp; SILVER Milestone:</b> CHI St. Alexius – Devils Lake CHI Garrison Community Hospital CHI Mercy Health – Valley City Heart of America Medical Center – Rugby Pembina County Medical Center – Cavalier Sanford Hillsboro Medical Center St. Aloisius Medical Center – Harvey
<b>COPPER &amp; BRONZE Milestone:</b> Ashley Medical Center Carrington Health Center CHI Community Memorial Hospital – Turtle Lake Cooperstown Medical Center Jacobson Memorial Hospital – Elgin Kenmare Community Hospital Linton Hospital Nelson County Health System – McVile Southwest Healthcare Services - Bowman St. Luke’s Hospital – Crosby Tioga Medical Center Towner County Medical Center – Cando Unity Medical Center – Grafton	<b>COPPER, BRONZE, SILVER &amp; GOLD Milestone:</b> McKenzie County Healthcare System – Watford City Northwood Deaconess Health Center Presentation Medical Center – Rolla Sakakawea Medical Center – Hazen Sanford Mayville Medical Center St. Andrew’s Health Center – Bottineau Wishek Community Hospital
<b>COPPER, BRONZE, SILVER, GOLD &amp; PLATINUM Milestone:</b>	

**Patient Safety Movement Foundation | APSS #6: Hand-off Communications Webinar**  
6/13/18 | 12:00-1:00 p.m. CT  
Click [here](#) to register.

**AHA Health Forum | Hospital's Partnerships to Address the Social Determinants of Health**  
6/13/18 | 12:00-1:00 p.m. CT  
Click [here](#) to register.

**PfP – PFE Learning Event The Path for Implementing a PFAC: Step 3. Building Infrastructure and Sustainability**  
6/14/18 | 12:00-1:00 p.m. CT  
Register [here](#)

**Great 8 2-part Immunization Champions, Advocates, and Mentors Program (ICAMP) Webinar Series**  
Part 1—06/12/18 | 2:00-3:00 p.m. CT  
Register [here](#).  
Webinar ID: 184-246-491  
Part 2—06/26/18 | 2:00-3:00 p.m. CT  
Register [here](#).  
Webinar ID: 898-175-019

**Sepsis Alliance It's NOT Always Sepsis: A Common Sense Approach for ALS and BLS EMS Providers**  
06/26/18 | 1:00-2:00 p.m. CT  
Click [here](#) to register.

**APIC 2018 45th Annual Conference**  
06/13/18-6/15/18 | Minneapolis, MN  
[Registration](#) is open!

**Great Plains QIN Improving Care Coordination by Working with Super-Utilizer Patients**  
6/27/18 | 12:00–1:00 p.m. CT  
Register [here](#).

**US Department of Health and Human Services, Office of Civil Rights**

Cavalier County Memorial Hospital – Langdon  
First Care Health Center – Park River

Congratulations to Heart of America Medical Center (Rugby) and St. Aloisius Medical Center in Harvey on meeting the SILVER milestone!

### **Innovate-ND HIIN Hospitals Receive Zero Harm Award Recognition**



*Do No Harm...* since the 5<sup>th</sup> century, the Hippocratic Oath has committed the medical community to a goal of zero harm, but this is not an individual endeavor. It requires the skills and commitment of an entire team—one that is open and willing to share their knowledge with each other and requires that we call on one another when the skills of another are needed for a patient's recovery. These ideals are outlined in the wise words of this ancient pledge.

Innovate-ND wishes to recognize the work of those teams who achieved this lofty goal in any one of three (3) most challenging harm events among ND hospitals:

- 1) Falls
- 2) Catheter-Associated Urinary Tract Infections (CAUTI)
- 3) 30-day Readmissions

Hospitals simply need to submit their data to HRET-CDS assuring they are using the proper definitions for each measure as outlined in the HRET-HIIN Encyclopedia of Measures. Innovate-ND tracks the data submissions to HRET-CDS of all participating hospitals and has identified those who were able to meet and maintain zero harm in any of these three categories for 12 consecutive months from October 2016 through March of 2018. Zero Harm Awards are evaluated on a quarterly basis through the HRET HIIN Contract period, which ends in March of 2019, with future notification of awards in May, August, November and a final review upon completion of the HIIN contract.

Hospitals receiving recognition for October 2016 through March 2018 include (\*indicates more than one Zero Harm Award):

<b>CAUTI</b>	<b>Falls</b>	<b>Readmissions</b>
Ashley Medical Center	Cavalier County Memorial Hospital (Langdon *)	Cooperstown Medical Center*
Carrington Health Center	First Care Health Center*	CHI Community Memorial Hospital (Turtle Lake)*
Cavalier County Memorial Hospital (Langdon *)	CHI St. Alexius Health Garrison*	
CHI Mercy Health (Valley City)	Linton Hospital*	
CHI St. Alexius Health Devils Lake	McKenzie County Healthcare System*	
Cooperstown Medical Center*	Mountrail County Medical Center*	
First Care Health Center*	Nelson County Health System*	

### HIPAA Training for Small Health Care Providers

7/12/18 | 8:30 a.m.-12:30 p.m.  
CT Minot  
7/13/18 | 8:30 a.m.– 2:30 p.m.  
CT  
Grand Forks  
Space is limited. Register Now!  
Click [here](#) for more information.

### Leading Together: New Paradigm for Health Care Training

July 17-18 | Denver, CO  
November 7-8 | Charlotte, NC  
Registration is now open for both trainings. Click [here](#)  
Visit HRET HIIN [Physician Page](#) for more details.

### HealthInsight QIN Trauma-Informed Care in Nursing Homes

7/24/18 | 3:30–4:30 p.m. CT  
[Registration Not Required]  
To participate:

1. Click [here](#).
2. Locate the event you wish to join, click “**Join Now**” (located to the right of the event title).
3. Enter your name and email address as prompted.
4. Enter the password: **Trauma** (The automatic system set-up should start at this point. If a dialogue box appears, click run. Please note the automatic system set-up does take a few minutes to complete.)
5. Dial into the teleconference: **1 888-896-0862**. The access code is **46703968**.

### SAVE THE DATE

#### Quality Health Associates of North Dakota 2018 Quality Forum

08/23/18 | Bismarck, ND

#### Healthcare Worker Immunizations | Return on Investment

08/30/18 | 12:00-1:00 p.m. CT

#### NDHA Annual Convention and Tradeshow

10/09/18-10/11/18

#### ND Cardiac & Stroke Conference

10/24/18-10/25/18

CHI St. Alexius Health Garrison*	Presentation Medical Center*	
Heart of America Medical Center (Rugby)	Sakakawea Medical Center*	
Jacobson Memorial Hospital (Elgin)	Sanford Hillsboro Medical Center*	
Linton Hospital*	Southwest Healthcare Services (Bowman)*	
McKenzie County Healthcare System*	St. Aloisius Medical Center (Harvey)*	
Mountrail County Medical Center*	St. Luke's Hospital (Crosby)	
Nelson County Health System*	CHI Community Memorial Hospital (Turtle Lake)*	
Northwood Deaconess Health Center*		
Pembina County Medical Center		
Presentation Medical Center*		
Sakakawea Medical Center*		
Sanford Hillsboro Medical Center*		
Sanford Mayville Medical Center		
Southwest Healthcare Services (Bowman)*		
St. Aloisius Medical Center (Harvey)*		
St. Andrews Health Center (Bottineau)		
Tioga Medical Center		
CHI Community Memorial Hospital (Turtle Lake)*		
Unity Medical Center (Grafton)		
Wishek Community Hospital		

The Best Place to Practice in the U.S.? North Dakota, of course! Click [here](#) to read more.

### FEATURED RESOURCES

#### ***Choosing Wisely®* App Available!**

Download the new *Choosing Wisely* app to your [iPhone/iPad](#) or [Android](#) device and have over 540 specialty society recommendations and 150 patient-friendly resources at your fingertips.

The mission of *Choosing Wisely* is to promote conversations between clinicians and patients by helping patients choose care that is:

- Supported by evidence
- Not duplicative of other tests or procedures already received

## NATIONAL PATIENT SAFETY FOUNDATION WEBCASTS

The National Patient Safety Foundation (NPSF) now offers complimentary access to past NPSF webcasts. Check back often to see what is available. [Visit the NPSF Webcast Archive](#) website and follow the instructions on your screen.



The flyer is for the Alzheimer's Association's Care Consultation program. It features the Alzheimer's Association logo at the top. Below the logo is a photograph of a healthcare professional sitting at a table with an elderly woman and a man, discussing documents. The text describes the program as an important service for professionals working with individuals with memory loss, providing education, support, and care planning. It mentions that professionals receive individualized assistance to support their clients and staff. The flyer is supported by funding from the North Dakota Department of Human Services, Aging Services Division. Contact information for alz.org and a 24/7 helpline (1.800.272.3900) is provided at the bottom.

## RESOURCES

### LISTSERV®

[Sign up](#) and help meet our goal of approximately 1,000 subscribers per LISTSERV® topic. These platforms enable peer-sharing and are used to promote virtual events and highlight innovative topic-specific strategies to reduce harm. New subscribers are added on the first day of each week.

### On the Web

The HRET HIIN website is a one-stop-shop for all HRET HIIN

- Free from harm
- Truly necessary

Beginning in 2012, national organizations representing medical specialists asked their members to identify tests or procedures commonly used in their field whose necessity should be questioned and discussed. This call to action has resulted in specialty-specific lists of [“Things Providers and Patients Should Question.”](#)

To help patients engage their health care provider in these conversations and empower them to ask questions about what tests and procedures are right for them, [patient-friendly materials](#) were created based on the specialty societies’ lists of recommendations of tests and treatments that may be unnecessary.

*Choosing Wisely* [Success Stories](#) detail ways in which clinicians are implementing the campaign in their practice and how patients are avoiding unnecessary care.

*Note: Choosing Wisely recommendations should not be used to establish coverage decisions or exclusions. Rather, they are meant to spur conversation about what is appropriate and necessary treatment. As each patient situation is unique, providers and patients should use the recommendations as guidelines to determine an appropriate treatment plan together.*

### Free HIPAA Training in North Dakota

The U.S. Department of Health and Human Services, Office for Civil Rights, is conducting **free HIPAA training for small health care providers** in North Dakota from 8:30 a.m. to 12:30 p.m. on **Thursday, July 12, 2018, in Minot** and **Friday, July 13, 2018, in Grand Forks.**

This training will be valuable to help smaller health care provider organizations understand their responsibilities under the HIPAA Privacy, Security, and Breach Notification Rules. If you own or manage a health care provider practice or service that submits certain transactions electronically, such as claims to health insurance companies, then your organization must understand how HIPAA works so you can appropriately protect the privacy and security of your patients’ information. This training will cover a number of important topics and address your questions.

This free HIPAA training is appropriate for all types of health care provider organizations such as: dental, medical, chiropractic, physical therapy, mental health, optometric, EMS, etc.

Click on this link [ND-Flyer.pdf](#) for details. Space is limited so advance registration is necessary. You may reserve a seat by emailing either:

- [Rachel.Lips@hhs.gov](mailto:Rachel.Lips@hhs.gov) or
- [Ian.Shipps@hhs.gov](mailto:Ian.Shipps@hhs.gov)

Be sure to indicate which training location you wish to attend.

### Utilize UP to Take Down Harms

AHA HRET HIIN has released a new UP Campaign video and updated UP Campaign resources. The video explains how the UP campaign works by addressing each of its key components and highlights hospitals that are using the UP Campaign to simplify safety and streamline interventions that improve quality care. The updates to the UP Campaign resources include: a

information and events! Check it out at [www.hret-hiin.org](http://www.hret-hiin.org).

### **Social Media**

Follow the HRET HIIN on Twitter [@HRETtweets](https://twitter.com/HRETtweets)! Here they'll be promoting virtual events, highlighting recruitment numbers, state partners and hospitals! Re-tweet, reply or like their posts and share your HIIN journey using #WhyImHIIN.

You can also join the HRET-HIIN on Facebook and LinkedIn. Follow the instructions for joining by clicking on the correlating icon on the right-hand side of the page when you log onto the HRET HIIN website ([www.hret-hiin.org](http://www.hret-hiin.org))

### **INNOVATE-ND SUPPORT**

#### **TEAM**

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revised UP Campaign brief and audience specific resources that contain why Script UP is important and what harms are reduced by Script UP. Additionally, the performance monitoring tool has been updated to include a monitoring section for Script UP. We encourage you to [view this video](#) and the updated [UP Campaign resources](#) to understand the importance of this campaign and its effectiveness.

### **Quality Improvement Fellowship**



The Quality Improvement (QI) fellowship, in partnership with IHI, delivers key concepts and strategies related to enhancing patient care and supporting QI. This cohort of fellows includes several members of hospital care teams, including nurses, physicians, pharmacists and other front-line staff that want to drive change within their organization. The deadline for fellows to submit their projects is Friday,

June 8. Fellows have until July 31 to complete required open school lessons (five minimum) and catch up on webinars (8 minimum). Please have fellows email their projects to [hiin@aha.org](mailto:hiin@aha.org).

### **ANTIBIOTIC STEWARDSHIP**

#### **Tales from the Field: Being a Good Steward**

*HRET HIIN Newsletter | May 25, 2018*

Johnson City Medical Center (JCMC) in Johnson City, Tennessee, has instituted a stringent antimicrobial stewardship initiative to address problems of improper prescribing and growing drug resistance. Keeping their main goal in mind, "doing what's right for the patient," they created a multidisciplinary stewardship team to educate prescribers and create processes with clinical decision support tools to bolster appropriate dispensing practices. Educational efforts ranged from e-mails, order sets, and computer modules to one-on-one conversations, case studies, and retrospective reviews. The main drivers of change were: continuously reinforcing the messaging as well as identifying and onboarding key practice leaders who drive change.

Additionally, to shift prescribers out of the autopilot prescribing mindset, they were asked to stop and consider two questions: is the therapy effective and is the therapy excessive? These questions along with best practice sessions that walked prescribers through case studies have assisted in reducing antibiotic utilization at JCMC. In the period between July 2015 and October 2016, the hospital saw a sustained downward trend in days of therapy per 1,000 patient days for fluconazole, levofloxacin, and vancomycin. There was also a 20 percent drop in hospital onset C. diff over a one-year period pre- and post-launch of the initiative even while there was a 14 percent drop in average proton pump inhibitor (PPI) use per 1,000 patient days and a 31 percent decrease in average IV PPI use.

For more information on Johnson City Medical Center's Antimicrobial Stewardship Program, please contact Tennessee Hospital Association's state lead Patrice Mayo at [pmayo@tha.com](mailto:pmayo@tha.com).

## HEALTHCARE-ASSOCIATED INFECTIONS

### **More US Youths Developing Antibiotic-Resistant Infections**

Researchers found that the rate of cephalosporin-resistant *Acinetobacter baumannii* among US children ages 1 to 17 rose from 13.2% in 1999 to 23.4% in 2012, while rates of cephalosporin- and carbapenem-resistant *A. baumannii* increased by 3% and 8% every year, respectively, during the same period. The findings in the *Journal of the Pediatric Infectious Diseases Society* also showed that pediatric antibiotic-resistant infections slightly declined after 2008, but remained higher than at baseline. [Specialty Pharmacy Times](#)

### **Tales from the Field: CLABSI Case Study**

Elizabeth Hernandez, an Accelerating Improvement QI fellow from Auxilio Mutuo Hospital in San Juan, Puerto Rico, submitted her fellowship project that included a compelling case study on CLABSI. The hospital aimed to reduce the incidence of CLABSI by 20%. The strategies utilized included: daily review of central line catheter necessity, heightened documentation, detailed reasoning for catheters, daily opportunities for central line removal and data sharing. The hospital continued performing tracers to identify opportunities in catheter insertion, daily care and central line catheter management. The tracers included:

1. Percent of time that daily assessments of line is completed
2. Percent of time of daily requests to remove central lines
3. Percent of time all elements of a sterile insertion is completed per a true evaluation checklist
4. Percent of nursing documentation completed
5. Percent of physician criteria insertion justification completed
6. Measuring the frequency with which the nurse performs the dressing change, maintenance of the insertion area and the documentation is performed

Lessons learned from her ongoing project to date include:

- Commitment from front line staff and leadership is integral to process improvement
- Sharing data and outcomes with staff is vital for buy-in
- Conducting drills and following up on compliance and education is important

To learn more about Auxilio Mutuo Hospital's strategies to reduce CLABSI, contact Puerto Rico's Hospital Association lead, [Gabriela Gata](#).

## FALLS

### **HRET HIIN Identifies Proven Fall Prevention Practices**

Earlier this year, the HRET HIIN published the resource [Fall Myth Busting: What to STOP doing to START Improving](#). This resource helps organizations identify fall prevention practices that may actually be contributing to patient harm but are still being utilized.

The HRET HIIN is observing changes unfold in hospitals as strategies including safe mobilization, addressing modifiable fall and injury risk factors, and engaging patients and families are used to reduce injuries from falls.

Examples of small and big changes occurring in the field:

- Falls Team is repurposed and re-named “Safe Mobility Team.”
- Patient sitters are being trained to ambulate patients.
- Medication administration specifications are being modified to decrease fall risk. For example, changing the timing of a cardiac medication that causes orthostatic hypotension to be administered at night.
- A gait belt in every room is being amplified to walkers in every room.
- Mobility progress is monitored by total # of feet walked by all patients as documented by nursing staff and pulled from electronic record.
- All mobility documentation is centralized in one location in the electronic record.
- Rounds by materials services to eliminate clutter or electrical cord tripping hazards.
- Adding to the patient white board: *I am risk for a fall because.....*

## **PRESSURE ULCERS**

### **FREE Nursing Continuing Education to Build HAPI Prevention Skills**

The National Pressure Ulcer Advisory Panel (NPUAP) has made their educational webinar recordings available to the public. The webinar recordings can be accessed at [NPUAP.org](http://NPUAP.org).

Each webinar is presented by a national subject matter expert and learners can access a recording, handouts and a continuing education test. CEUs are available for one year from the recording date.

Some of the recent recordings include:

- FAQs about Pressure Ulcer Staging. 2/20/18
- Unavoidable Pressure Injuries, Terminal Ulceration & Skin Failure: Where were we, where are we and where are we going? 11/16/17
- Operating Room Positioning and Pressure Injury Prevention. 9/13/17
- Why is This Wound Not Healing? 6/8/17

## **PFE**

### **New Prescription for Health Tool**

*May 29 HRET HIIN Hospital Wide Listserv Post | HRET HIIN Radiation Safety Team*

Many hospitals are looking for ways to increase patient engagement in their self-care. I'm happy to share a tool with you from Franklin Memorial Hospital Healthy Community Coalition in Farmington, ME. They are having great success using this [Prescription for Health](#).

### **New American College of Radiology Recommendations**

*May 25 HRET HIIN Readmissions Listserv Post | HRET HIIN Readmissions Team*

Five new American College of Radiology (ACR) Choosing Wisely recommendations were added to the "Don't" list in 2017. Two of the new recommendations pertain to abdominal CT protocol selection. The other three relate to recommendations radiologists should make to guide management of incidental findings. The full listing of recommendations can be accessed at: [ACR Choosing Wisely](#).

Here is a summary of the new recommendations:

1. Don't recommend ultrasound for incidental thyroid nodules found on CT, MRI or non-thyroid-focused neck ultrasound in low-risk patients unless the nodule meets age-based size criteria or has suspicious features.
2. Don't use a protocol for abdominal CT that includes unenhanced CT followed by IV contrast-enhanced CT, except for the following indications: renal lesion characterization, hematuria work-up, indeterminate adrenal nodule characterization, follow-up after endovascular stent repair, gastrointestinal hemorrhage or characterizing a focal liver mass.
3. Don't routinely use a protocol for abdominal CT that includes a delayed post-contrast phase after the venous phase, except for the following indications: renal lesion characterization, hematuria work-up, CT urogram, indeterminate adrenal nodule characterization, hepatocellular carcinoma and cholangiocarcinoma.
4. Don't make the diagnosis of Pelvic Congestion Syndrome on CT or MRI unless the patients meet clinical and imaging criteria.
5. Don't routinely recommend follow-up for non-obstructed, asymptomatic, isolated, short-segment jejunojejunal intussusception in adults.

The original 5 recommendations included:

1. Don't do imaging for uncomplicated headache.
2. Don't image for suspected pulmonary embolism (PE) without moderate or high pre-test probability of PE.
3. Avoid admission or preoperative chest x-rays for ambulatory patients with unremarkable history and physical exam.
4. Don't do CT for the evaluation of suspected appendicitis in children until after ultrasound has been considered as an option.
5. Don't recommend follow-up imaging for clinically inconsequential adnexal cysts.

## POPULATION HEALTH

### **Pathways to Population Health**

["Pathways to Population Health: An Invitation to Health Care Change Agents"](#) is a new resource developed through collaboration between HRET, Institute for Healthcare Improvement (IHI), Network for Regional Healthcare Improvement, Public Health Institute, and Stakeholder Health. This resource is intended to support health care professionals in identifying opportunities for their organizations to make practical, meaningful, and sustainable advancements in improving the health and well-being of the patients and communities they serve. The Pathways to Population Health framework provides a roadmap for health care professionals to accelerate their individual and collective efforts to improve care in the community through population health. Click [here](#) for more information.

## MISCELLANEOUS

### **Leading Together: The New Paradigm for Health Care**

HRET is continuing to recruit for the next two Leading Together: The New Paradigm for Health Care trainings. The summer training will be held in Denver, Colorado, from July 17-18 and the fall training will be held in Charlotte, North Carolina, from November 7-8. This is a 1.5-day collaborative workshop designed for physician-administrator dyad teams to join together to learn adaptive leadership principles that will assist in



providing insights and resilience needed to lead change when facing complex systemic problems. Adaptive leadership is:

- A people-focused approach to leadership development.
- Grounded in inclusion, honoring diverse perspectives.
- Based on the premise that leadership is an activity, not a person, and can be exercised by anyone, no matter their role.
- Focused on mobilizing people to tackle tough problems and thrive.

HRET is offering scholarships for HIIN hospitals. The scholarship covers the cost of registration only. Scholarship recipients would be responsible for their travel and hotel accommodations. We encourage you to share the attached flyer with hospitals who may be interested.

[Registration](#) is now open for both trainings. Please note all individuals interested in applying must identify their joining team member in the registration form. The joining team member also must register separately. The **deadline to register for the July training is Friday, June 22.**

Please contact [physicianalliance@aha.org](mailto:physicianalliance@aha.org) with any questions you may have regarding the event registration and/or its learning objectives.

### **Free Screening Clinic for Children with Bone, Muscle, or Joint Problems**

Free screenings for children with conditions of the bones, muscles, and joints available in North Dakota at 5 locations throughout the state. Please call today to schedule an appointment – space fills quickly. Flyers of each clinic available upon request.

Appointments: 612-986-7207

## **Free Screening Clinic**

**for Children with Bone, Muscle, or Joint Problems**



Toeing In



Bowlegs



Knock-Knees



Flat Feet



Toewalking

### **Will your child benefit from seeing a pediatric orthopaedic specialist?**

#### **Look for these signs:**

- In-toeing, toe walking, flat feet
- Bowed legs or knocked knees
- Sore, painful, or stiff joints
- Limb deficiency
- Curved spine indicating possible scoliosis
- Club feet

**Williston** on Monday, June 11 | 9:00 a.m.-12:00 p.m.  
Upper Missouri District Health Unit  
110 W Broadway #101

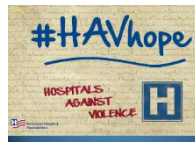
**Minot** on Monday, June 11 | 4:00 p.m.-7:00 p.m.  
First District Health Unit  
801 11<sup>th</sup> Ave SW – Entrance A

**Devils Lake** on Tuesday, June 12 | 11:00 a.m.-2:00 p.m.  
Lake Region District Health  
524 4<sup>th</sup> Ave NE #9

**Grand Forks** on Tuesday, June 12 | 5:00 p.m.-7:00 p.m.  
Valley Community Health Centers  
212 S 4<sup>th</sup> Street

**Fargo** on Tuesday, July 17 | 5:00 p.m.-7:00 p.m.  
Fargo Cass Public Health Department  
1240 25<sup>th</sup> Street South

### **Commit to Ending Violence**



Please Join AHA's Hospitals Against Violence (HAV) on June 8<sup>th</sup> and take a stand against senseless acts of violence by supporting #HAVhope Friday: National Day of Awareness. You can easily participate by:

- Becoming an [organizational supporter](#)
- Downloading the [HAV digital toolkit](#) for ideas to create awareness
- Posting [#HAVhope photos](#) on social media highlighting your organization's commitment to combating violence.

For more information please visit [#HAVhope Friday: National Day of Awareness.](#)