

# North Dakota Hospital Association Innovate-ND

November 4, 2020

## UPCOMING EDUCATIONAL EVENTS

### How to Address Patients' Social and Legal Needs During COVID-19

11/10/20 | 11:00 a.m.-12:00 p.m. CT  
Click [here](#) to register.

### 2020 Sanford Diabetes Symposium

11/12/20 | 12:00-4:30 p.m. CT  
Click [here](#) to register.

### Mental Health First Aid

11/04/20 | 1:00-6:30 p.m. CT  
12/01/20 | 1:00-6:30 p.m. CT  
12/09/20 | 7:30 a.m.-1:00 p.m. CT  
Free Adult Mental Health First Aid (MHFA) to be offered virtually to RURAL healthcare providers in communities served by community access hospitals throughout North Dakota.

Limited space is available. Class size minimum of 5 to 20 max. If you would like to organize a course for your facility or community at a different time, please contact us. For more information and to register for this great educational opportunity, please contact:

Michelle Lauckner  
[mlauckner@qualityhealthnd.org](mailto:mlauckner@qualityhealthnd.org)

701-989-6229 or

Elicia Jacobson

[ejacobson@hitinc.org](mailto:ejacobson@hitinc.org)

701-663-0376

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## EVENT RECORDINGS

### Diabetes Education Sponsored by NADONA

Part 1: [Essential Components of Effective Insulin Delivery: Devices, Technique and Expert Recommendations](#)

by Donna L. Jornsay, MS, BSN, RN, CPNP, CDE, CDTC, BC-ADM

*Thank you & best wishes!*

On behalf of the staff of Quality Health Associates of North Dakota, we would like to say thank you for the opportunity to partner with you over the past 8 years on hospital quality improvement efforts through Innovate-ND. We appreciate your commitment to excellence in healthcare for your patients. We wish you the best as you continue this important work and look forward to future opportunities to collaborate with you!



Quality Health Associates  
of North Dakota

## NEWS BLAST

The North Dakota Hospital Foundation (NDHF), a subsidiary of NDHA, is pleased to announce it is partnering with Health Services Advisory Group, Inc., (HSAG) to provide technical assistance for CMS's Hospital Quality Improvement Contract (HQIC). HSAG partners with hospitals to help improve quality, which will now be focused in three overarching areas: behavioral health outcomes, increasing patient safety, and increasing quality of care transitions. (See below.)

Very shortly, HSAG will be hosting informational webinars to learn more. Stay tuned for dates.

I would like to point out HSAG was the only contractor (QIN-QIO) chosen by CMS with previous HIIN experience.

Tim Blasl

Part 2: [Management of Diabetic Emergencies in Acute and Long Term Settings](#) (Previously Managing Hypo/Hyperglycemia) by Dr Naushira Pandya

Part 3: [Transitions of Care for Patients with Diabetes](#) by Jonathan Shaatal MS, RPh, FASCP

Part 4: [Challenges in Diabetes Care for Special Populations](#) by Richard Stefanacci DO, MGH, MBA, AGSF, CMD

Continuing education credits are available until 09/21/2021.

### Alzheimer's Association – ND Chapter

If you, your staff, your residents or their families ARE STRUGGLING WITH THE IMPACTS OF DEMENTIA, PLEASE CHECK OUT CARE CONSULTATION, provided FREE ONLY in North Dakota by funding through the ND Department of Human Services, Aging Services Division.



## CARE CONSULTATION



Care Consultation is an important program for professionals who are working with individuals with memory loss. The program is designed to provide disease education, support, and care planning for all aspects of memory loss. As a professional who receives care consultation, you will receive individualized assistance to support your clients, their family care partners and other members of your staff in effectively managing memory loss symptoms and issues.

**NORTH Dakota** | Human Services  
Be Legendary.™

This project is supported by funding through the North Dakota Department of Human Services, Aging Services Division.

alz.org 24/7 Helpline: 1.800.272.3900

## RESOURCES

### LISTSERV®

[Sign up](#) and help meet our goal of approximately 1,000 subscribers per LISTSERV® topic. These platforms

## HSAG HQIC Partnership

The Centers for Medicare & Medicaid Services (CMS) has awarded HSAG a Hospital Quality Improvement Contract (HQIC) to provide customized, data-driven quality improvement assistance to meet the specific needs of **small, rural, and critical access hospitals; those serving vulnerable populations; and hospitals facing quality improvement challenges.**

### Focus on Improving CMS Quality Goals



- Decrease Opioid Misuse**
- Implement Opioid Stewardship
  - Decrease Opioid-Related Adverse Events



- Increase Patient Safety**
- Reduce All-Cause Harm or Maintain Zero Harms
  - Implement Evidence-Based Practices to Create a Culture of Safety



- Increase Quality of Care Transitions**
- Improve Chronic Condition Management Across the Continuum of Care
  - Focus on High-Utilizer Readmissions

### Other Areas of Focus

- Improve Patient and Family Engagement**
- Create Patient-Centric Care
  - Engage Patients and Families as Part of the Care Team

- Improve Health Equity**
- Implement a Health Equity Road Map

- Create a Culture of Safety**
- On-Demand Quality Improvement Bootcamp
  - Infection Prevention Training and Support
  - Safety Across the Board
  - 4M Framework
  - Human-Centered Design

- Enhance Emergency Response and Planning**
- Pandemic Preparedness

### Benefits of Participation

- Leverage HSAG's robust data portal with advanced analytics and comparison data.
- Participate in one-on-one coaching with an HSAG quality advisor, certified infection preventionist, or other quality professional and receive evidence-based interventions and strategies.
- Engage in topic-specific peer group calls in an all-teach, all-learn environment.
- Join in multi-state and regional learning events, educational opportunities, and peer sharing of best-practice strategies.



*Continuing HSAG's Legacy of Success in Hospital Quality Improvement Work*

### HEN 1.0

2012–2014  
Program Evaluation Contractor

### HEN 2.0

2015–2016  
Program Evaluation Contractor

### HIIN

2016–2020  
Prime Contractor  
*Ranked #1 out of 16 HIINs*

### HQIC

2020–2024  
Prime Contractor  
*Only Prime that is a QIN-QIO with Previous HIIN Experience*

### Contact Us

📞 [www.hsag.com/hqic](http://www.hsag.com/hqic)  
✉ [tblasl@ndha.org](mailto:tblasl@ndha.org)

## SHOUT OUTS

Shout out to **Heart of America Medical Center** for keeping their patients and community updated with their most recent visitation updates. This example letter was spotted on a Facebook post shared by one of their nurses, Karen Drader!

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. [Send your questions](#) on your work with hospital-acquired conditions through the LISTSERV.

### **INNOVATE-ND SUPPORT TEAM**

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October 27, 2020

Heart of America Medical Center Visitation Updates

Rugby, ND –

With many of the recent changes taking place at Heart of America Medical Center due to the influx of COVID-19 cases in our community, the following information is being provided to inform the public of methods to communicate with family members who are currently admitted to the acute hospital wing.

- In person visitation is not allowed into the designated patient rooms, unless it is for compassionate care purposes.
- Family and friends are free to call the patient's room if the patients is taking calls.
- To receive updates on a patient's status the spouse, power of attorney, or designated family member should call the acute nurses station.

If you do not have a designated family member to relay information consider determining who that individual could be. Please note that when calling there may be a wait time before a call is returned with requested information and we ask that calls are limited to allow our staff to care for our patients. To call your family member directly please consider using the direct line to their room, 701.776.5455, with the extension of 2+Room Number. We thank you for your patience during this time, caring for your family member is our number one priority.

Dandie Rose, Public Information Officer  
701.776.5455 ext. 2218  
drose@hamc.com

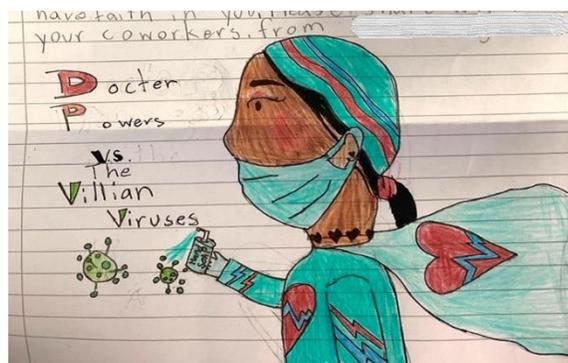
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clinics: rugby 701.776.5035 • madstock 701.438.2555 • darwith 701.244.5694

## **The Pandemic in One Child's Words: Doctors vs. Villain Viruses**

*Reprinted from AHA Today*

It's too soon now to know what kind of impact living through the COVID-19 pandemic will have on children. But the dedication and compassion of those working on the front lines is not likely to be forgotten, even by the youngest in our communities.

A fourth-grader wrote and illustrated a heartfelt thank-you note to doctors fighting "villain viruses." It was shared by Omaha-based [Nebraska Medicine](#) on one of its Twitter accounts. In this child's words:



*Dear Omaha Doctors,*

*I hope you are rolling in thank-you and appreciation notes you deserve it.*

*But I know that's not why you do it. You do it because you want to help people, even if it puts you in danger.*

*You are working hard to develop a vaccine for COVID and are with first-time parents during some of their happiest moments. You save people every day and help people during hard times.*

*You are all heroes and some of the smartest people out there. I hope this will encourage you to persevere in these difficult times ... not that I don't have faith in you.*

*Please share this with your co-workers.*

## **YOUR FEEDBACK IS NEEDED!**

### **Call For Feedback for the New ND Nursing Culture of Excellence Designation**

This new program hosted by the ND Center for Nursing was developed by a committee of 45 nurses and stakeholders across the state over the last two years. This program provides the opportunity to employers to work together with all levels of nurses to promote a positive workplace culture and environment and to support the formation of Professional Identity in Nursing. Obtainment of the ND Nursing Culture of Excellence Designation signifies an environment that promotes nursing recruitment, development, and retention. The committee has worked hard developing this new program with a targeted launch of January 2021. Your feedback is requested on the guidelines, process, and costs that are outlined in the flyer which is available at the link below. There is an additional link for an online feedback form. Thank you for your help!

[Link](#) to ND Nursing Culture of Excellence Designation Flyer

[Link](#) to Online Feedback Form

## **FEATURED RESOURCE**

### **Care Transitions Tools for Patients and Families**

The Care Transitions Program, directed by Dr. Eric Coleman, MD, MPH, at the University of Colorado School of Medicine, hosts a website created especially for patients, families and caregivers to reference during care transitions from hospital to home. It includes a discharge preparation checklist (written in plain language), as well as tips for managing care at home, how to recognize and respond to "red flags" that may lead to an unplanned readmission, and how to manage medication. The program also hosts care transitions tools for health care professionals: the [Family Caregiver Activation in Transitions® \(FCAT®\) Tool](#), [Care Transitions Measure® Tools](#) and the [DECAF™ Family Caregiver Tool](#).

## **PATIENT SAFETY**

### **AHA Launches Peer-to-Peer Learning Platform for Health Care Professionals**

The AHA Center for Health Innovation has launched the [Living Learning Network](#), a peer-to-peer community where health care professionals can connect, share and learn. The virtual platform offers a gathering place

for respected subject matter experts, thought leaders and colleagues across the nation to hear how their peers face unexpected challenges, manage change and work together to create tools and resources to reimagine health care. “COVID-19 continues to demand partnership and innovation in health care,” said Marie Cleary-Fishman, AHA vice president for clinical quality. “The Living Learning Network is designed to both accelerate and enhance collaboration and knowledge sharing — key factors in establishing widespread adoption of the most effective evidence-based clinical practices.”

### **New National Action Plan: CDC To Expand Global Antibiotic Resistance (AR) Activities**

***Five-year goals include a global lab network, vaccine data platform, and even greater investments in state and local health departments***

Today, the U.S. Government released the next [National Action Plan for Combating Antibiotic-Resistant Bacteria, 2020-2025](#) (pdf), presenting coordinated, strategic actions to change the course of AR in the next five years. Antibiotic-resistant infections kill more than 35,000 people in the United States each year. To protect people, CDC will continue to lead the public health response to AR across the One Health spectrum, which connects the health of people to the health of animals and the environment (soil, water). The new Plan includes CDC activities to combat antibiotic-resistant infections in healthcare, food and farms, animals, communities, and the environment, both at home and abroad.

AR remains a priority for the U.S. Government. The new Plan highlights steps to improve the health and wellbeing of all Americans by continuing to fight AR and address the threats outlined last fall in CDC’s [2019 AR Threats Report](#) (pdf).

### **Building on Success for Five More Years**

The first [National Action Plan](#) launched the nation’s successful federal response to the urgent threat of AR in 2015. The new Plan will expand evidence-based activities proven to stop the spread of AR, such as infection prevention and control and improving antibiotic use.

Building off work from the last 5 years, here’s what to expect next from CDC:

- Expand [CDC’s AR Lab Network](#) internationally, which was successfully established in U.S. health departments in 2016 to identify new and emerging threats. Since launch, it has performed more than 100,000 AR lab tests and sequenced more than 100,000 AR samples.
- Support infection prevention and control to decrease healthcare-associated antibiotic-resistant infections 20% by 2025. From 2012 to 2017, the number of antibiotic-resistant infections seen in hospitals dropped 27% and the number of deaths from antibiotic-resistant infections fell nearly 30%. CDC supported more than 5,000 infection control assessments in healthcare facilities to help stop the spread of resistant pathogens.
- Assist local responses across the nation to decrease community-acquired antibiotic-resistant infections 10% by 2025. CDC has supported more than 500 local AR experts since 2016 and reported an 18% decrease overall in deaths from AR since the 2013 AR Threats Report.

- Foster diagnostic, antibiotic, vaccine, and other novel innovations by funding hundreds of new projects, establishing “learning laboratories” to develop or test cost-effective solutions to contain urgent resistant pathogens globally, and building a vaccine data platform to make new vaccines available faster to help prevent infections.
- Work with global partners and low-and-middle-income countries to prevent human and animal infections. CDC will build on the success of the [AMR Challenge](#), hosted by CDC from 2018 to 2019, which gathered commitments from more than 350 partners worldwide to drive meaningful actions to combat AR across One Health.
- Collect antibiotic use data from 100% of U.S. acute care and 50% of critical access hospitals to help improve antibiotic use and drive action to reduce outpatient antibiotic prescribing. Antibiotic prescribing in outpatient settings declined 5% from 2011 to 2016.
- Double CDC’s investments in state and local health departments. Since 2016, CDC has provided \$373 million across every state to improve AR detection, response, and prevention.

Find the new [National Action Plan](#) on CDC’s website to learn how CDC and its partner federal agencies are leading the fight against AR in the United States and abroad.

The Plan supports a robust global response to protect Americans, building upon proven successes to improve capacities to detect, prevent, and contain resistant threats. Everyone has a role to play—together we can prevent infections and stop the spread of AR.

## HEALTH EQUITY

### **2021 Equity of Care Awards: Applications are Now Open: Share Your Story of Success!**

**Be influential in letting peers know how your organization is striving to improve health equity, diversity and inclusion.**

The application period for the 2021 Carolyn Boone Lewis Equity of Care Awards is now open. The AHA Institute for Diversity and Health Equity (IFDHE) wants to hear from you about how your hospital or health system’s efforts embody the core principals of the [#123forEquity](#) pledge:

- Increasing the collection and use of race, ethnicity and language preference (REaL) data and other socio-demographic data
- Increasing cultural competency training
- Increasing diversity in governance and leadership
- Improving and strengthening community partnerships

The award is an annual recognition of outstanding efforts among hospitals and health systems to advance equity of care to all patients, share lessons learned, and proclaim progress toward achieving health equity. The application period starts today, Sept. 28. Be one of the first to tell your story of success!

Please visit the AHA IFDHE Equity of Care Awards [page](#) for more details.

## PFE/AGE FRIENDLY

### **FCC Extends Purchase/Implementation Deadline for COVID-19 Telehealth Program**

The Federal Communications Commission's Wireline Competition Bureau has [extended to Dec. 31](#) the deadline for recipients of COVID-19 Telehealth Program funding to purchase and implement eligible telehealth devices and services to address the COVID-19 pandemic. The original deadline was Sept 30. The Coronavirus Aid, Relief, and Economic Security Act provided \$200 million in funding for the program to help health care providers furnish telehealth services to patients in response to the pandemic. The Bureau said it has received multiple requests to extend the purchase/implementation deadline for the COVID-19 Program due to procurement or implementation delays caused by the pandemic, recent hurricane damage or other factors.

## SOCIAL DETERMINANTS OF HEALTH

### **NIH Funds Program to Improve COVID-19 Testing in Underserved, Vulnerable Populations.**

The National Institutes of Health has [awarded](#) nearly \$234 million to improve COVID-19 testing for underserved and vulnerable populations, such as African Americans, American Indians/Alaskan Natives, Latinos/Latinas, Native Hawaiians, older adults, pregnant women and those who are homeless or incarcerated. The RADx Underserved Populations program will support projects with established research infrastructures and community partnerships that can swiftly implement strategies and interventions to increase access and uptake of COVID-19 testing among these populations.