



ND CAH Quality Network - Joint Executive & Stakeholder Committee Meeting Minutes

March 13, 2019 ♦ 10:00am – 12:00pm (CT)

Mission: To support ongoing performance improvement of North Dakota's Critical Access Hospitals.

Present:

Officers: Marcie Schulz (Chair), Coleen Bomber (Vice Chair)

Executive Members: Lori Seim (Park River), Jenna Bredahl (Jamestown), Mariann Doeling (Carrington)

Stakeholder Members: Darleen Bartz (Health Resources – ND DoH), Jean Roland (QHA of ND), Bridget Weidner (Health Facilities - ND DoH), Shila Thorson, (HPP Director – ND DoH), Chris Price, (EMS Division Director – ND DoH), Danielle Schoch – (EMS Program Representative – ND DoH), Sheldon Wolf (North Dakota Health Information Network)

Senior Project Coordinator: Jody Ward (CRH), **Project Coordinator:** Angie Lockwood (CRH), **Project Specialist:** Julie Frankl (CRH)

Workplan Update

Stakeholder Partner Sharing

- ND DoH Health Resources & Health Facilities (Darleen & Bridget)
 - Currently tracking bills in Legislature – budget bill passed the House are now waiting on the Senate.
 - Updating the application renewal process in the Nurse Registry
 - There was a new memo from CMS on 3/5 to revise Appendix Q – Immediate Jeopardy Process. There is a template for staff to use and information on how to convey to the facility.
- ND DoH EMS Division (Chris)
 - CMS announced a 5-year pilot to permit EMS to be reimbursed to navigate patients to more appropriate facilities – treatment/no transport – telemedicine. EMS have been doing this for years, but now will be able to be reimbursed. Looking for partners (telemedicine, etc). EMS & providers can be reimbursed. There isn't much guidance yet so will continue to watch.
- ND DoH Stroke/Cardiac System (Danielle)
 - Working on follow-ups for stroke designation.
 - Working on revisions and edits to the stroke treatment guidelines.
 - Advanced stroke certification classes are being conducted with AHA. They are 8 hour courses and are free.
 - Currently have 10 cardiac ready communities and another 25 that are working towards. Are expanding criteria to include campuses – currently UND is working towards the designation.
 - Upcoming education: EMS Rendezvous – April; State Trauma Conference – September; Stroke/Cardiac Conference – October.
 - Exploring using an app (Pulse Point) to track AED locations.
- ND DOH Hospital Preparedness Program (Shila)
 - Working on grant application for funding. Planning to replace outdated equipment
 - Last year of the EBOLA grant, but will continue to prepare. Sanford Fargo's Broadway campus in being converted to an Infectious Disease/EBOLA treatment center.
 - Will be doing an evacuation exercise in Bismarck on 4/25.
 - Assisted with evacuation of 35 individuals from Ashley Medical Center due to a fire.
- QHA of ND (Jean)
 - The HRET HIIN contract with CMS is set to expire on March 31st, waiting for word on an Option Year Contract.
 - Cultural competency surveys have been distributed on a quarterly basis to the hospitals, based on survey data, a Health Equity Organizational Assessment (HEOA) was created and all

participating HIIN hospitals are being asked to complete. Jean and Nikki are conducting coaching calls with the participating hospitals to assure the metrics are interpreted correctly and the responses are as accurate as possible.

- Focusing on reducing falls with injury and all-cause readmissions. Based on falls per 1000 patient days, ND ranks the highest among the 32 states.
- The Care Transitions team is currently working on updates to the National Healthcare Decisions Day Toolkit. They have also been providing Teach Back training across the state. They created a Teach Back virtual learning module that has been tested internally and will soon be released to ND's healthcare community.
- QHA's Health Information Technology team has locked arms with ND HIN to coordinate regional education events – referred to as Regional Optimization of Electronic Health Information Exchange. Report outs from these events is that participants are gaining a lot of good information from them.
- NDHIN (Sheldon)
 - There are two more educations that Jean referred to coming up.
 - Some needs that have been expressed are: Need for access to insurance by the providers; need for referrals to be housed in HIN; prescribed and filled medication data; and more medical documents from other facilities.
 - Sheldon will be retiring on April 30th and a replacement is currently being sought.
- Network update and discussion (Jody)
 - April 18 statewide CAH Quality Network meeting from 8:30am to 4pm CT. Care Coordination topic will be by subject matter expert Debra Laine from the National Rural Health Innovations technical assistance center in MN. She will provide an overview of care coordination with discussion of a care coordination canvas. BlueAlliance program, Pat Spier will share what they are working on. Our goal is to demonstrate activity happening in our state and how care coordination is beneficial. After the April meeting, with BCBS, DoH and Flex will focus on statewide activities through collaborative efforts. The afternoon will include Bridget Weidner and Monty describing CAH deficiencies with state survey. Success stories from 2 CAHs to reduce readmissions. Registration is now open. The Flex program is supporting travel and hotel for CAHs.
 - Planned for April 17 session from 1-4 will be on Palliative Care and project activity over the past year in collaboration with WA, WI and MN. The session will end with a one-hour participant only opportunity to share challenges and success on the palliative care project.
 - Peer Exchange Program- the Flex Program offers this program to provide opportunities for staff serving CAHs of ND to learn from their peers. The Program provides travel support for individuals to meet with similar entities from other areas of the state and share information, ideas, and successful approaches to improving quality and access to healthcare services.

Objective 1: Facilitate Best Practice Sharing

Objective 2: Engage in Rural Advocacy

Objective 3: Enhance Professional Development

Objective 4: Highlight Workforce Development Initiatives & Resources

Objective 5: Optimize Technology Utilization

- April meeting will have ND HIIN as presenter

Objective 6: Develop and Manage the ND CAH Quality Network

- The HRSA Federal office for Flex funding grant proposal is due March 29. We are writing for a 5-year cycle, all Flex programs across the nation. The program areas are similar to past years; Quality Improvement, Financial Opportunity, Population Health, Rural EMS and Innovative Models. As our team writes the grant, we are thinking of how to continue the good work we are already doing and think about what are new initiatives. We will continue the MBQIP work with a strong focus on Antibiotic Stewardship and CAH facility surveys annually. Inpatient reporting has been retired, no more IP CART. However, Outpatient CART will continue with 4 measures (Chest Pain/AMI OP-2, OP-3, OP-5 and ED Throughput OP-18). Patient Engagement with HCAHPs and Care Transitions (EDTC) will also continue. The ND Flex program will be working on 2 projects with the ICAHN on ED CAHPS and Swing Bed.
- CHNA technical assistance -planning to continue with training to guide CAHs through the full process to assess their communities, including focus groups, key informant interviews, and surveys.
- Financial and operational improvement, Flex will plan to assist CAHs to maintain and improve their financial viability and provide education and strategies for improvement.

2019 Network Meetings (All by conference call)

- May 15 10am-11:30am CST – Executive Committee
- June 26 10am-12pm CST – JOINT Executive & Stakeholder Committee
- August 14 10am-11:30am CST – Executive Committee
- September 25 10am-12pm CST – JOINT Executive & Stakeholder Committee
- October 23 10am-11:30am CST – Executive Committee
- December 18 10am-12pm CST – JOINT Executive & Stakeholder Committee