


Center for Rural Health



- ND Critical Access Hospital Quality Network- Journey Jody Ward
- Community Health Needs Assessment –Project Ben Bucher, Towner County Medical Center
- Community Health Needs Assessment- Project Wanda Kratochvil, Walsh County Health District

2

Center *for* Rural Health

- Established in 1980, at The University of North Dakota (UND) School of Medicine and Health Sciences in Grand Forks, ND
- One of the country's most experienced state rural health offices
- UND Center of Excellence in Research, Scholarship, and Creative Activity
- Home to seven national programs
- Recipient of the UND Award for Departmental Excellence in Research

Focus on

- Educating and Informing
- Policy
- Research and Evaluation
- Working with Communities
- American Indians
- Health Workforce
- Hospitals and Facilities

ruralhealth.und.edu

3

Center *for* Rural Health



ND Medicare Rural Hospital Flexibility (Flex) Team

- Brad Gibbens, Deputy Director
- Lynette Dickson, Associate Director
- Jody Ward, Senior Project Coordinator
- Kylie Nissen, Senior Project Coordinator
- Angie Lockwood, Project Coordinator
- Julie Frankl, Project Specialist
- KayLynn Bergland, Administrative Assistant

CAHs Nationwide = 1,339

Location of Critical Access Hospitals
Information Gathered Through January 25, 2017

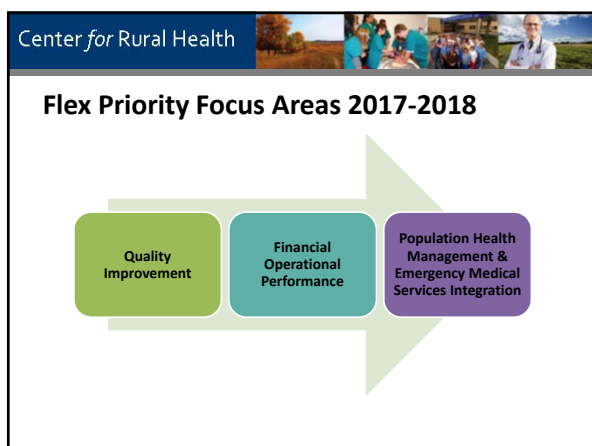
100 miles
100 kilometers

Legend:

- Critical Access Hospital (1,339)
- Metropolitan County
- Nonmetropolitan County
- Some Not Designated as Not Participating

Data from American Hospital Association (AHA), Critical Regional Office, Critical and State Office (contributing with AHA/HRSA, 2017)

Prepared by: Health Services Research, Health and Policy Analysis Division, Center S. Shipp Center for Health Services Research, University of North Carolina at Chapel Hill



Federal Office of Rural Health Policy (FORHP) Attention Toward Quality Improvement

Medicare Beneficiary Quality Improvement Program (MBQIP)

Quality Domains

1. Patient Safety
2. Patient Engagement
3. Care Transitions
4. Outpatient



Center for Rural Health

ND CAH Quality Network's Journey

9

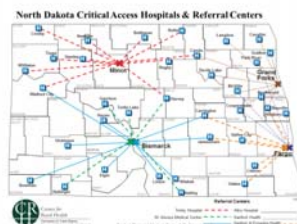
ND CAH Quality Network "Network"

- Created in 2007 (Network Executive Committee)
- Identified CAH Needs (Survey) 2007
- Hired Network Coordinator 2008
- Network Membership 2008
- Stakeholder Committee 2008
- Prioritized CAH Needs for technical assistance
- Initially Quality Improvement (QI)
- Expansion beyond QI

10

ND CAH Quality Network Executive Committee

President Doris Vigen – Mayville
VP Coleen Bomber – Northwood
 Jodi Atkinson – Bottineau
 Peggy Larson – Lisbon
 Candie Thompson – Harvey
 Marcie Schulz – Hazen
 Camille Settelmeyer – Valley City
 Ben Bucher – Cando
 Chris Wyatt – Langdon



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

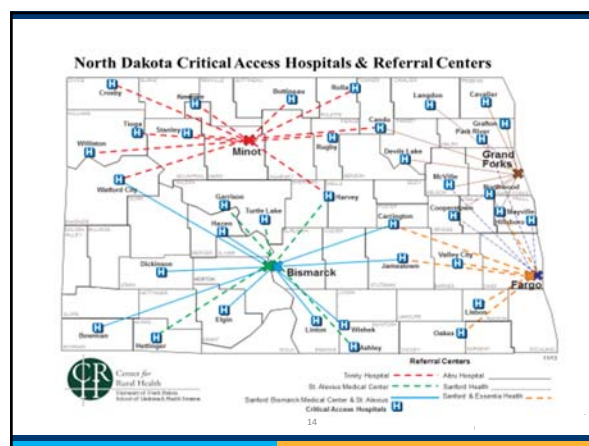
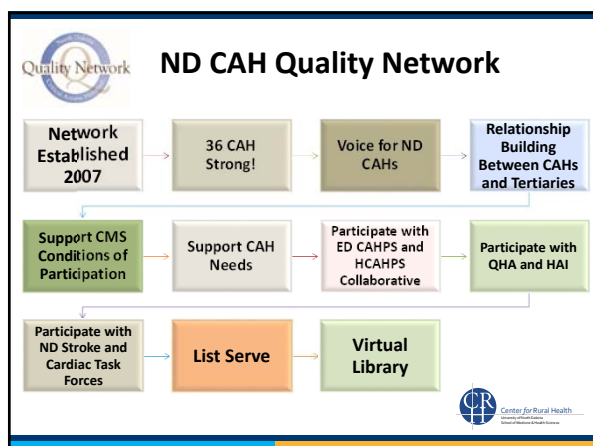


ND CAH Quality Network Stakeholder Committee

- Center for Rural Health
- Quality Health Associates
- Blue Cross Blue Shield of ND
- ND Hospital Association
- ND Dept. of Health- Health Resources
- ND Dept. of Health- Health Facilities
- ND Dept. of Health- EMS & Trauma
- ND Dept. of Health- Hospital Preparedness
- ND Dept. of Health- Stroke & Cardiac
- ND Health Information Network



12



Quality Improvement and Patient Safety

- CAH Site Visits-technical assistance
- Mapping quality improvement process(s)
- Analyzing data
- Building Implementation plan(s)
- Sharing success stories

Center for Rural Health
University of North Dakota
School of Medicine & Health Sciences



Center for Rural Health

Contact

Jody Ward, MS, RN, APHN,
Senior Project Coordinator
UND Center for Rural Health
School of Medicine and Health Sciences
1201 11th Avenue SW
Minot, ND 58701

Jody.ward@med.und.edu
Phone: 701-858-6729
Webpage: ruralhealth.UND.edu

Center for Rural Health
University of North Dakota
School of Medicine & Health Sciences

Implementing our CHNA

Towner County Medical Center and Towner County
Public Health
Cando, ND

Implementing our CHNA



Implementing our CHNA

3 significant needs were identified

- 1.) Ability for the community of Cando and health care facilities to meet the needs of the older population
- 2.) Ability to attract and retain young families
- 3.) Ability to retain primary care providers, nurses, and ancillary staff in the area

Implementing our CHNA

Significant Need #1

- ability to meet the needs of the older population

Outcome Goals and Anticipated Impact

- 1.) The older population of Cando and Towner County are comfortable with the level of care received at the hospital, clinic, nursing home, basic care, and independent living facilities
- 2.) The city of Cando and surrounding communities have available housing, safe environments, acceptable transportation systems, and an indoor exercise facility

Implementing our CHNA

Specific Actions and Activities

- Offer and encourage TCMC primary care providers to attend CME classes related to the geriatric population
- Provide recommended cancer and health screenings (mammography, low dose CT scan, MRI, colonoscopy, cardiac stress testing, DEXA, ultrasound, etc.)
- Continue to provide on-site chemotherapy
- Re-establish the foot clinic back at TCMC
- Redesign activity room at the hospital to cater more to the swingbed population

Implementing our CHNA



Implementing our CHNA

Specific Actions and Activities

- Evaluate the need to expand independent living from 10 to 20 units
- Nursing home patients to utilize the Can-do transport van to out of town appointments
- Contracted with a local driver for in-town appointments
- Expanded TCMC Fitness Center to include more low-impact equipment. Plans currently underway to increase our square footage by 60%

Implementing our CHNA



Implementing our CHNA

Specific Actions and Activities

- Remodeled unused conference room to accommodate community citizens to utilize the space for weekly exercise classes with a personal trainer, meetings, quilting, craft activities, etc.
- This space is also being used for the foot clinic

Implementing our CHNA

Resources to Commit

- TCMC financial resources
- TCMC fitness center
- Can-do transportation bus
- TCMC staff time

Implementing our CHNA

Accountable Parties

- TCMC administrative staff
- Towner County Public Health

Implementing our CHNA

Partnerships/Collaboration

- Local police force
- Towner County Public Health
- Can-do transportation
- Towner County Living Center
- Independent living facility
- TCMC primary care providers

2016 CHNA IMPLEMENTATION PLAN Walsh County

First Care Health Center-Park River
Unity Medical Center-Grafton
Walsh County Health District

PRIORITY AREAS

- Substance Abuse-
Alcohol and Drugs
- Nutrition and Physical
Activity

Collaborative Efforts-Nutrition & Physical Activity

- Walsh County Health District Chronic Disease Grant Opportunity
- Email Worksite Wellness List-FCHC
- Coalition Formation
- Membership is Broad
- Worksite Wellness Activities-UMC/Grafton School
- Worksite Wellness Activities-First Care Health Center –Color Run
- Training on PSE
- Training on Social Determinants of Health
- Mini Grant Opportunity

Collaborative Efforts Substance Abuse

- County SPF SIG Coalition in Place
- Grant Opportunity on Substance Abuse
- RBST & Saturation Patrols



Lessons Learned

In small communities we are all concerned about very similar issues. We are frequently working on these issues independently and have a broader reach working together.

It has been great fun!