ND Flex Program
Progress (2008-2009)
& Plans (2009-2010)

Advisory and Steering Committees
August 13, 2009

2008-2009 Objectives

- Supporting Hospitals
- Quality Improvement
- Conversion to CAH
- Strengthen EMS Services
- State Rural Health Plan (SRHP)
- Networking
- Program Management
Flex Coded Assists (N=953* in 34 Counties)
Sept 2008-August 2009

Note: Data reflects Center for Rural Health activity only (does not include all the great work of our partners!)

Supporting Hospitals

Presenter: Tim Blasl
## Supporting Hospitals

### '08-'09 Goals
- Coordinate/develop educational opportunities
  - CAH finance presentation at UND SMHS (Darrold Bertsch and Pete Antonson)
  - NDHA sent Dan Kelly to annual AHA conference
- Provide technical assistance to CAHs
  - Community Needs Assessment completed for 1 facility
- Foster adoption of performance management tools by CAHs
  - 4 Balanced Scorecard presentations given to CAHs - 1 implementation
- Promote visibility of CAH contributions to healthcare
  - NDHA submitted comments to:
    - WSI in response to recent public hearings
    - Division of Health Facilities at ND Department of Health on North Dakota Administrative Code
    - Senator Dorgan's on wage index floor impact
    - NDHA was requested to administer surveys on Primary Care Physician Shortage, Midlevel Salary, Construction and Renovation and Resident Students
    - Darrold Bertsch chaired a session at the NDHA conference on CAH payment updates
  - NDHA nominated Kathy Haith (Ashley) for the AHA 2009 Grassroots Champion Award

### Accomplishments
- CAH Finance presentation at UND SMHS (Darrold Bertsch and Pete Antonson)
- NDHA sent Dan Kelly to annual AHA conference
- 2 Board Boot Camp workshops held
- EMR Get Ready! - Flex dollars reallocated to help 15 CAHs who registered
- CAH Fiscal Management presentation - Eric Gilders presented on grants and Flex TA to a CAH Board July 09
- Community Needs Assessment completed for 1 facility
- Focus Groups and Key Informant Interviews held for 2 facilities
- TASC Toolkit for CAHs in progress (funding)
- TA featured in each Flex Update
- Continuing to update CAH profiles on Flex website (28 of 35 complete)
- Press releases:
  - UND School of Public Affairs, UND SMHS CRHL
  - SMHS Medicine
  - Grand Forks Herald
  - Minot Daily News
  - North Dakota Medicine
  - PRWEB
  - 17 local newspapers

### '09-'10 Goals
- Coordinate/develop educational opportunities
  - CAH Pre-Conference at annual Dakota Conference
- Health information technology offerings
  - NDHA to support CAHs
  - Kept CAHs up-to-date on issues including:
    - WSI info and medical fees schedules
    - Medicare Recovery Audit and HealthDataInsights – along with RACTrac tool
    - Federal Medical Assistance Percentages
    - NDHW Emergency requirements Conference calls
- Support workforce challenges
  - Work collaboratively with the ND AHEC, SORH, PCO to provide information to CAHs related to workforce initiatives
  - Give preference to workforce solutions through sub-award grant process

### '09-'10 Goals
- Coordinate/develop educational opportunities
  - CAH Pre-Conference at annual Dakota Conference
  - CAH Finance presentation at UND SMHS (Darrold Bertsch and Pete Antonson)
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Quality Improvement

Presenter: Barb Groutt

'08-'09 Goals

- Maintain CAHs reporting to Hospital Compare
- 2009 Qtr 1: 33/35 CAHs submitted data to CMS Warehouse
- About ½ of those reporting provide information on Hospital Compare
- Significant level of assistance from NDHCRI in increasing reporting numbers
- NDHCRI provided technical assistance and support via telephone and email to CAHs
- NDHCRI shared performance data on the CMS quality measures to CAHs via NDHA BTWAN presentation and at CAH Quality Network Conference
- NDHCRI provided technical assistance to CAHs through telephone and email

Accomplishments

- Provided TA with IHI campaign
- Explore need to focus on this area through the CAH Quality Network (e.g., peer mentoring)
- Provide TA with IHI campaign
- NDHCRI provided all CAHs with the Surgical Safety Checklist - collaboration with BCBSND for support
- Marlena Miller and Barb Groutt attended national meeting
- Marlena Miller interested in applying for 09/10 series - long term care, hospital, clinic and pharmacy

'09-'10 Goals

- Maintain connection to Institute for Healthcare Improvement (IHI)
- Work collaboratively with ND IHI Node - share information & educational opportunities and other activities as requested
- Participate in HRSA Patient Safety Collaborative
- NDHCRI provided all CAHs with the Surgical Safety Checklist - collaboration with BCBSND for support
- Marlena Miller and Barb Groutt attended national meeting
- Marlena Miller interested in applying for 09/10 series - long term care, hospital, clinic and pharmacy

- Support CAH participation in HRSA Patient Safety & Clinical Pharmacy Services Collaborative
- Disseminate information to CAHs
- Participate in meetings as needed
- Assist with travel costs
### '08-'09 Goals
- Support ND CAH Quality Network
  - Network Coordinator hired
  - Network brochure developed and disseminated
  - ListServ – over 100 CAH staff participating
  - Webpage developed and launched
  - CAH Quality Network Conference was held in Mandan (June ’09)
  - HRSA Network grant approved ($85,000) – strategic planning set for October ’09
  - 13 CAHs participating in Health Care Safety Zone Software Portal
  - Demos data and fact sheets supplied to CAHs
  - Developed policies and procedures document to assist with meeting the CoPs
  - Covered TeamSTEPPS at Altru Health regional ethics training

### Accomplishments
- All CAHs and IHS participating
- Executive Committee conference calls
- Network Coordinator hired
- Network brochure developed and disseminated
- ListServ – over 100 CAH staff participating
- Webpage developed and launched
- CAH Quality Network Conference was held in Mandan (June ’09)
- HRSA Network grant approved ($85,000) – strategic planning set for October ’09
- 13 CAHs participating in Health Care Safety Zone Software Portal
- Demos data and fact sheets supplied to CAHs
- Developed policies and procedures document to assist with meeting the CoPs
- Covered TeamSTEPPS at Altru Health regional ethics training
- Co-sponsored TeamSTEPPS master training for CAHs and other hospitals held in Aug ’08 – monthly calls with HCRP
- Survey administered winter 2008 to see interest in TeamSTEPPS training
- Fundamental training held in June ’09 (Flex, NDHCRI and CAH Quality Network)
- Co-sponsored TeamSTEPPS master training held in June ’09 (QIO sponsored)
- Corresponding with 5 state Flex programs regarding TeamSTEPPS initiative
- Presented on TeamSTEPPS to UND faculty of inter-professional courses
- QIO presented TeamSTEPPS at UND School of Medicine for Senior Colloquium
- Attended national TeamSTEPPS meeting in Omaha
- NDHCRI providing ongoing support to CAH participating in this initiative

### '09-'10 Goals
- Support ND CAH Quality Network
  - Strategic planning
  - 3 Year plan developed by membership, leadership from Executive Committee
  - 1 year workplan finalized
  - CAH use of data collection tools that facilitate quality improvement

- Coordinate CAH TeamSTEPPS training
  - HRSA Network grant approved ($85,000) – strategic planning set for October ‘09
  - 13 CAHs participating in Health Care Safety Zone Software Portal
  - Demos data and fact sheets supplied to CAHs
  - Flex helping with membership fees ($1,900 per CAH)
  - Developed policies and procedures document to assist with meeting the CoPs
  - Covered TeamSTEPPS at Altru Health regional ethics training

- Assist CAHs in reduce incidence of hospital-acquired pressure ulcers

- Presented on TeamSTEPPS to UND faculty of inter-professional courses
- QIO presented TeamSTEPPS at UND School of Medicine for Senior Colloquium
- Attended national TeamSTEPPS meeting in Omaha
- NDHCRI providing ongoing support to CAH participating in this initiative

- Helped new CAHs to reduce incidence of hospital-acquired pressure ulcers

- Presented on TeamSTEPPS to UND faculty of inter-professional courses
- QIO presented TeamSTEPPS at UND School of Medicine for Senior Colloquium
- Attended national TeamSTEPPS meeting in Omaha
- NDHCRI providing ongoing support to CAH participating in this initiative
### CAH Conversions

#### '08-'09 Goals
- Facilitate conversion of suitable eligible facilities to CAH status

#### Accomplishments
- Current CAH Status = 36
- Devils Lake (Mercy Hospital) received CAH designation 1/9/08
- Williston (Mercy Medical Center) received CAH designation 8/08
- Jamestown (Jamestown Hospital) received CAH designation 3/1/09 (36th CAH)
- Richardson (Richardson Health Center) relinquished CAH status 5/1/09 – converted to LTC
- Dickinson (St Joseph’s Hospital and Health Center) received CAH designation 6/30/09 (36th CAH)

#### '09-'10 Goals
- Assist eligible facilities to convert to CAH status
- Contact made with eligible facility
- Assistance offered and provided if needed
- Funds available through subcontract to cover $10K toward financial feasibility study

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### Strengthen EMS Services

**NORTH DAKOTA DEPARTMENT OF HEALTH**

Emergency Medical Services and Trauma

**Presenter: Tim Meyer**
### Strengthen EMS Services

#### '08-'09 Goals
- Assist CAHs with trauma designation
- Support newly developed online training for medical directors
- Explore regional access to medical direction or with enough interest
- NDNA
- NDHAA
- Other – Strategic Planning

#### Accomplishments
- Trauma designation grants - 1 facility applied and was awarded $9,000
- Part of the remaining funds shifted to cover speaker costs at the ND EMS Association’s convention
- Only 1 CAH remaining
- Much effort made to set up EMS directors training through Critical Illness and Trauma Foundation - found the person unresponsive no longer pursued
- Due to Flex funding reduction for program year 2008-2009, the activity was not completed.
- 17 CAHs received Healthcare Facility Competitive Awards from ND Emergency Preparedness program ($300,314)

#### '09-'10 Goals
- Assist CAHs with trauma designation
- Issue RFP for applications
- Award grants
- Flex Director continue to participate in state’s overall trauma care planning and development
- Facilitate access to TA for rural EMS units
- Meet with department of health’s EMS division to determine priority needs of rural EMS
- Align EMS needs with Flex Program scope of work (potential to develop assistance related to grant writing, strategic planning, and business planning)
- Support EMS Education
  - Explore collaboration with the ND Department of Human Services and Department of Health (EMS)
  - Leverage funding from the department of human services Block grant to offer mental health first aide training to EMS first responders
  - Assist with information dissemination, stipends for rural providers, and evaluation

### ND Flex Program

**EMS objectives are limited to the following areas:**

- Trauma and EMS systems (state, regional or community) assessment(s)
- Trauma center designation of CAHs
- Support CAH Trauma Team Development
- Improve EMS Medical Direction
- Implement mechanisms to support EMS agencies in efforts of recruitment, retention, reengineering and restructuring

- Employment of HRSA’s Benchmarks, Indicators, and Scoring (BIS) approach
- Facilitated Trauma System Development
- Conduct State strategic planning and systems development to address weaknesses identified by the BIS assessment; other weaknesses
- Rural Trauma Team Development (RTTD) courses
- Comprehensive Advanced Life Support (CALS) courses
- Training courses for Medical Directors
- Recruitment & Retention
- Implement evidence-based recruitment and retention programs
- Reimbursement
  - Training in comprehensive EMS agency budget processes
  - Participation of EMS agencies in group buying and billing programs
- Restructuring
  - Facilitation of BIS processes for EMS at the local and regional level.
  - Rural EMS Manager leadership and management training.
  - Development of Systems and Pilot programs to better utilize pre-hospital care personnel in meeting the health care needs of rural communities in cooperation with State EMS offices.
State Rural Health Plan

Presenter: Brad Gibbens

Accomplishments

- SRHP completed and distributed
  - http://ruralhealth.und.edu/projects/NDFlex/ND_rural_health_plan112608.pdf
- SRHP used to inform North Dakota Environmental Scan on health and health care
  - 2009 Flex application based on recommendations
  - Developed presentation from Plan
  - Review/Steering/Advisory Committees
  - Contacted key stakeholders
- Focus groups held for 2 CAHs
- Strategic Planning for 1 EMS Council
- Brad Gibbens submitted comments on Health Reform to Senator Conrad and provided input at Health Reform meeting in Grand Forks
- Potential work with Montana Hospital Association on new reimbursement policy for small CAHs

09-'10 Goals

- Share SRHP - build collaborative efforts around needs
  - Schedule meetings/presentations & identify presenters
  - Develop action plans
- SRHP as guide throughout the year
  - Review activities identified in Plan at monthly Steering Committee calls
  - Explore how Plan can facilitate addressing elements within the Center's statewide environment scan on health and healthcare
  - Discuss progress & next steps
- Continue input from rural health consumers
  - Utilize dialogue process to engage with rural community members
  - Host 2 community forums
  - Integrate community input into SRHP process and Steering and Advisory Committees
- Explore alternative models of health delivery systems
  - Contact HRSA regarding Frontier Extended Stay Clinic model in Alaska
  - Explore application in ND
  - Develop next steps

Other

- Potential work with Montana Hospital Association on new reimbursement policy for small CAHs
  - Contact HRSA regarding Frontier Extended Stay Clinic model in Alaska
  - Explore application in ND
  - Develop next steps
Networking

\[ \text{Presenter: Marlene Miller} \]

ND Flex Program

\textbf{08-09 Goals}
- Support/promote networking activities

\textbf{Accomplishments}
- Flex Update listserv continues to be maintained
- CAH CEO Orientation
- Flex calendar posted on website
- Altru Regional meetings with CAHs
- Flex Subcontracts
  - $195,000 Flex Program Grants – 18 applicants awarded
  - $12,000 Making a Difference Grant – 1 applicant awarded
  - $8,000 Trauma Designation Grant – 1 applicant awarded
- Two applications for mentoring funds were received and awarded for IT staff to prepare for EMR implementation
- Funds used for CAH Q Network Portal Pilot Project and Board Boot Camps

\textbf{09-10 Goals}
- Support/promote networking activities
- Develop/maintain listservs as requested for CAHs and their networks
- Coordinate new CAH CEO orientations as needed
- Meet with tertiary facilities
- Support mentoring program
- Administer sub-award grant process to CAHs
- \textit{Integration with other grant and program opportunities}:
  - \$12,000 Making a Difference Grant – 1 applicant awarded
  - \$9,000 Trauma Designation Grant – 1 applicant awarded
  - Two applications for mentoring funds were received and awarded for IT staff to prepare for EMR implementation
  - Funds used for CAH Q Network Portal Pilot Project and Board Boot Camps

\textbf{Additional Grant Awards:}
- \$290,000 SHIP grants awarded to all 35 CAHs
- \$375,000 BCBSND awards made to 11 CAHs
- Quality Network received HRSA Network Development Planning grant ($85,000)
- Work with Altru region to submit AHRQ grant

\textit{Integration with other grant & program opportunities:}
- NIH supplemental funding requested to support Workforce initiative ($500,000/2 years)
- Potential collaboration for USDA Teledistance learning grant for NW region
**ND Flex Program**

**Program Management, Development and Evaluation**

### '08-’09 Goals
- Develop, implement and evaluate 2008-2009 ND Flex Work Plan
- Review and finalize Work Plan
- Evaluate progress
- Flex Steering Committee meets monthly (2x in person)
- Conduct sub-grantee evaluations
- Evaluation of technical assistance provided
- Data collection and analysis completed – report posted online and distributed
- Map and description of Flex supported initiatives completed – updated appropriately
- CRH uses internal tracking program (CATS) to track all activities related to the Workplan

### Accomplishments
- Flex application for 09-10 submitted ($630,000)
- Assisted with national Flex orientation
- Marlene Miller served as mentor to new Colorado Flex coordinator
- Invitation extended to NDRHA for board members – still awaiting response
- Brad Gilbreath and Marlene Miller to attend ORHP Region E Meeting
- Participation NOSORH Flex and TASC 90 calls
- Data collection and analysis completed - report posted online and distributed
- Map and description of Flex supported initiatives completed - updated appropriately
- CRH uses internal tracking program (CATS) to track all activities related to the Workplan

### '09-’10 Goals
- Develop, implement & evaluate 09-10 Flex Work Plan
- Evaluate progress
- Flex Steering Committee meets monthly (2x in person)
- Conduct sub-grantee evaluations
- Data Collection and analysis (outcome forms and interviews of CAHs)
- CRH uses internal tracking program (CATS) to track all activities related to the Workplan
- Evaluation of technical assistance provided
- Conduct 6 month post technical assistance and workshop surveys
- Analyze findings
- Track Flex assistance provided using Center’s internal activity tracking system
- Evaluation of technical assistance provided
- CRH uses internal tracking program (CATS) to track all activities related to the Workplan
Program Management, Development and Evaluation

'08-'09 Goals

• Use of Flex Advisory Committee
  - Advisory committee met September '08 – worked independently on SRHP
  - Intended to meet at '08 Dakota Conference (cancelled due to flooding)
  - Steering Committee reviewed terms of Advisory Committee and selected 3 new members to fill vacancies
  - New Representatives in Aug '09: Dan Kelly, Mariann Doeling, Jim Long

• '08 CAH Survey
  - Analysis of CAH 2008 survey results were used to inform Flex program initiatives

• Other
  - Participated on an ORHP panel in Washington DC
  - 7 state Flex programs invited to gather information to develop a “Flex Success Manual”
  - Marlene Miller presented at Semi-annual Flex orientation for new coordinators and other staff
  - TASC, Marlene Miller gave National Flex Presentation
  - ND Flex featured at NRHA annual conference

Accomplishments

• Advisory committee met September '08 – worked independently on SRHP
• Intended to meet at '08 Dakota Conference (cancelled due to flooding)
• Steering Committee reviewed terms of Advisory Committee and selected 3 new members to fill vacancies
• New Representatives in Aug '09: Mitch Leupp and Roger Unger

'09-'10 Goals

• Continued input and advice from CAHs
• Maintain Flex Advisory Committee
• Meet twice per year
• Share program outcomes and strategies
• Solicit CAH input related to Flex Workplan

• 2008 CAH Survey

Flex in the Future

• Significant focus on impact/evaluation including impact at beneficiary level
• EMS and CAH Performance
• More prescriptive
• Workforce - questionable
For more information contact:

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http://ruralhealth.und.edu

Connecting resources and knowledge to strengthen the health of people in rural communities.