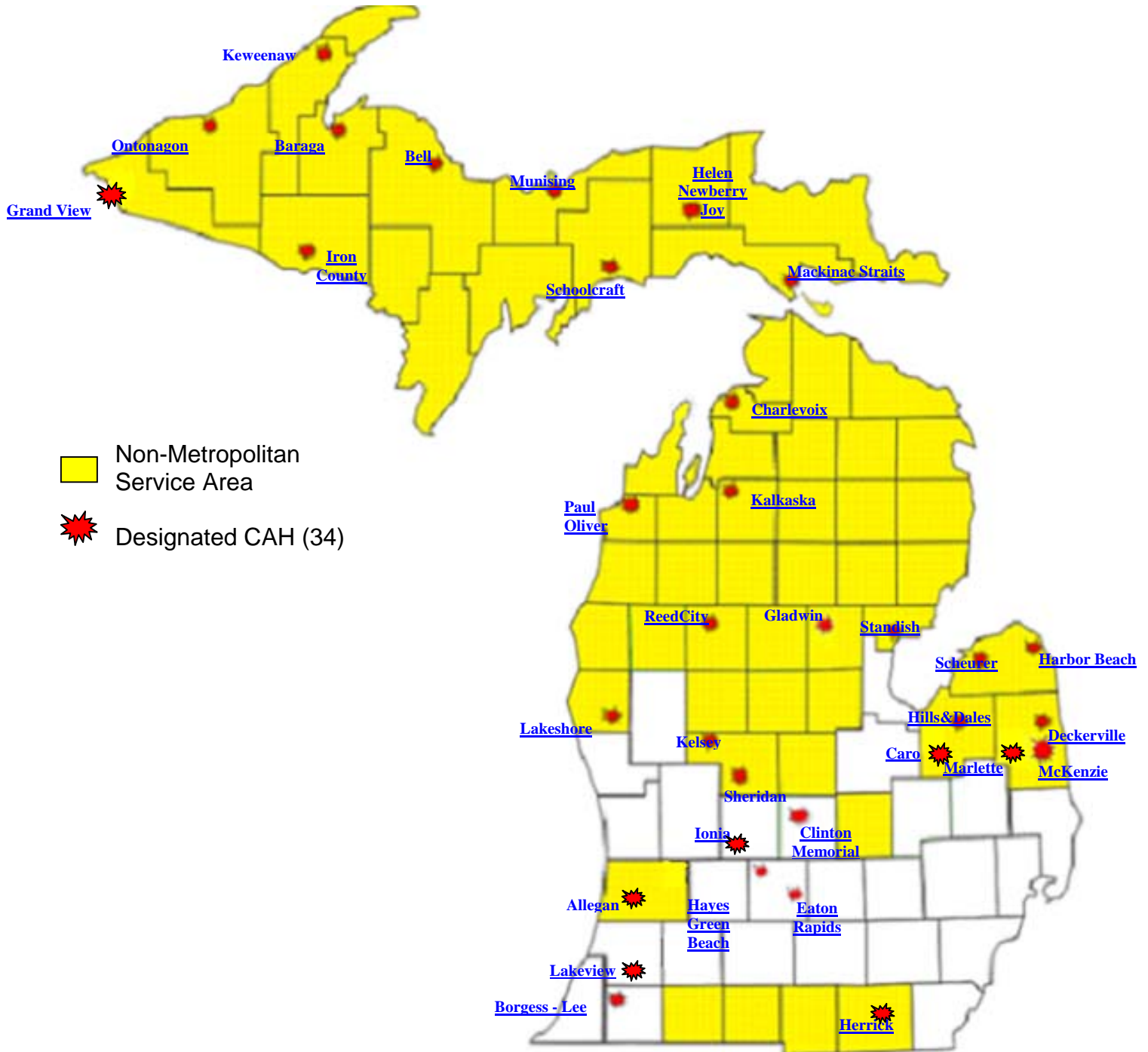


CAH Chronicle



Michigan Department of Community Health ♦ Michigan Center for Rural Health ♦ Michigan Health & Hospital Association

MICHIGAN CRITICAL ACCESS HOSPITALS



Kelsey Hospital Celebrates 100th Anniversary and unveiling of the Lena Rader Meijer Emergency Department

Kelsey Hospital celebrated its 100th anniversary and the 89th birthday of Lena Rader Meijer, on May 14th with the unveiling of the Lena Rader Meijer newly renovated Emergency Department.

In addition to the anniversary, birthday, and new Emergency Department celebration, more than 212

community individual and/or families were honored for their generous contributions to the “Building a Healthy Future Together-Kelsey Hospital Capital Campaign” that exceeded the goal of \$250,000, generously matched by Fred and Lena Meijer. The balance of the project was allocated from Spectrum Health United Memorial’s capital budget.



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Other highlights of the \$850,000 project include: a laboratory draw station relocated near the emergency department, with more space, extended hours, faster test turnaround time and more staff during busy times; a new patient-friendly and private Central Registration; a new Sleep Lab; and additional parking.

Lena Rader Meijer and her family have strong hospital and community ties. Dr. Kelsey was the Rader family



doctor. He would drive to the Rader home in the winter, leave his car, and Mr. Rader would take him in his horse and sleigh to make house calls. Mrs. Meijer’s mother was often called to be an interpreter for German patients and her grandmother lived in the hospital long-term care unit.

The tradition of community-based health care continues in Lakeview with new life for a facility that was built over 50 years ago.



Critical Access Hospitals Receive MPRO's Michigan Award of Excellence

The Michigan Award of Excellence honors nursing homes that are performing and embracing quality initiatives to improve resident care and safety. On April 2, at Lansing Community College, the following CAHs received MPRO's 2007 Michigan Award of Excellence for Improving Care in the Nursing Home Setting:

- Bronson Nursing & Rehabilitation – Bronson Lakeview Hospital
- Kalkaska Memorial Health Center
- Spectrum Health Skilled Nursing Facility – Reed City Campus

The award focuses on working to improve the quality and safety of care in clinical areas such as reducing pressure ulcers, identifying and reducing pain, reducing physical restraints, and identifying and managing depression. These topics have been designated as national healthcare priorities by the Centers for Medicare & Medicaid Services (CMS).

For selected clinical topics, a nursing home must receive a 15% relative improvement rate in at least one clinical area from baseline to re-measurement to qualify for the award. In addition, criterion highlights include; a survey of resident and staff satisfaction, submission of an essay on lessons learned, and completion of self instructional modules on quality improvement initiatives.

On May 7, 2008 the 2007 Governor's Award of Excellence for Improving Care in the Ambulatory Care Setting was awarded to many CAH outpatient clinics. Presented by the Governor, in partnership with MPRO, Michigan's Quality Improvement Organization, the award honors Michigan physicians' offices that are performing quality initiatives to improve patient care. This years awardees include:

- Hackley Primary Care – Lakeshore Medical Center Shelby
- Hackley Primary Care – Lakeshore Medical Center Whitehall
- Hills and Dales General Hospital – Cass City Family Practice
- Hills and Dales General Hospital – Cass City Medical Practice
- Hills and Dales General Hospital – Kingston Medical Clinic
- Hills and Dales General Hospital – Ubyly Medical Clinic
- Family Health Center – Ionia
- Family Health Center - Portland
- Keweenaw Memorial Medical Center

Award criterion aligns with the Physician Office Quality Improvement Program including the Doctor's Office Quality-Information Technology (DOQ-IT). The DOQ-IT project promotes the adoption of electronic health record systems in small-to-medium sized physician offices. The clinical topics addressed by the Governor's Award have been designated as national health care priorities by the Centers for Medicare & Medicaid Services. Clinical areas of focus are individually selected from one of the following areas: preventive care, coronary artery disease, diabetes mellitus, heart failure, or cancer screening.

MPRO honored the all recipients for their quality improvement efforts. A special awards ceremony was held at the Eagle Eye Golf Club in Bath, Michigan. 2007, marks the seventh time that the Governor and MPRO have presented the awards.



Robert Yellan, President & CEO MPRO, Pamela Yeager, Office of the Governor, Jane Emelander, Office Manager, Family Health Center-Ionia, Janet Olszewski, Director, MDCH



Robert Yellan, President & CEO MPRO, Pamela Yeager, Office of the Governor, Kelly Kaczmarek, Keweenaw Memorial Medical Center, Janet Olszewski, Director, MDCH



Robert Yellan, President & CEO MPRO, Pamela Yeager, Office of the Governor, Samone Ivan, & Sheila Wolschleger, Hills and Dales Clinics, Keweenaw Memorial Medical Center, Janet Olszewski, Director, MDCH

Locum Tenens Survey: Can Your Problem Be Your Solution?

As a healthcare executive, you are no stranger to the challenges of physician recruitment, particularly to rural areas. VISTA Staffing Solutions, a leading locum tenens company, commissioned a survey to test the potential impact of locum tenens on physicians' career choices and any resulting impact on physician availability for settings like yours. The survey asked whether locum tenens could help keep physicians in the workforce longer, help them avoid burnout, and help solve the physician distribution problem. The results were very positive, and we believe administrators can utilize information from this survey to start a new dialog about innovative strategies that help meet their physician staffing needs.

The results: Nearly 70 percent of respondents said they believe locum tenens can keep physicians in the workforce longer because it gives them more options and flexibility. One physician wrote, "Great option for physicians nearing retirement and wanting to continue but can't because of overhead and business concerns. Also allows for vacations. From the locum tenens' point of view, many benefits to broaden experience and add income later in and early in career."

Fifty-three percent of survey respondents said they believe locum tenens can help physicians avoid burnout. Specifically, one physician wrote, "I worked as a locum tenens when I left a job that had completely burnt me out. I was looking at leaving medicine completely and the locum tenens gave me time to find another position that kept me practicing medicine." The survey found that physicians are most likely to take on locum tenens assignments at certain points in their careers.

- Eighty-two percent of physicians surveyed indicated locum tenens would be a good way to transition into **semi-retirement** due to no longer having to pay for professional liability insurance (paid by locum tenens companies) and practice overhead.
- Fifty-eight percent of the physicians said locum tenens would be a good option for physicians seeking to make a **professional transition**, for example while they find a new permanent position or while they wait for a license to be granted in a new state.
- Working as a locum tenens right after **completing residency training** was cited as an attractive option by 47 percent of those surveyed.

In addition to the interest in traditional nationwide locum tenens, the survey found that 30% of respondents were interested in a part-time schedule close to home, 50% were interested in opportunities within driving distance, and 45% liked the idea of "return engagements" that would take them back to the same practice on a routine (but not full-time) basis.

"The survey indicated that many physicians feel practice is an all-or-nothing commitment requiring 60+ hour work weeks and a grueling pace to see enough patients to cover overhead," says VISTA President Mark Brouse. "We have to work

together to change that reality. In today's environment, we will have to find innovative ways to bring more flexibility and satisfaction to medical practice.

"We are encouraging clients to talk about job sharing, sabbaticals, and part-time options with their retiring physicians, with their mid-career physicians looking for more flexible lifestyles, and with the young physicians coming into their organizations with a new set of expectations," he says.

Many organizations structure these opportunities directly with their local physicians. Others partner with a locum tenens company to handle issues like professional liability coverage for a partial work schedule, payroll, scheduling, quality assurance, and logistics. "The survey clearly indicates that physicians would stay in the workforce longer if they had access to some of these arrangements," Mark concludes.

To request a complete copy of the survey or to get more information about locum tenens options, contact Brandon Tillotson at VISTA Staffing Solutions, 800-366-1884, or visit www.vistastaff.com.

Prevalence of Evidence-Based Safe Medication Practices in Small Rural Hospitals

Gary Cochran, PharmD, SM, Katherine Jones, PhD, PT, Liyan Xu, MS, Keith Mueller, PhD

This issue brief presents the findings of a national survey whose purpose was to describe the prevalence of evidence-based safe medication practices, including the use of voluntary medication error reporting, in the nation's smallest hospitals. The survey included questions related to all phases of the medication use process—prescribing, documenting, dispensing by a pharmacist (medication acquisition by nursing), administering, and monitoring

Hospitals with an average daily census of six or more patients were more likely to report having adopted safe medication practices than were hospitals with an average daily census of five or fewer patients. Hospitals with pharmacist's on-site more than five hours per week were more likely to report having adopted safe medication practices. The majority of hospitals with an average daily census of five or fewer patients does not systematically analyze medication errors or conduct a root cause analysis.

Approximately one in five of the nation's smallest hospitals have knowledge-based processes in place that can consistently achieve the following: (1) a pharmacist review of orders within 24 hours, (2) a double check of transcription to the medication administration record (MAR) before obtaining the initial dose of a drug, (3) an independent double check of the selected medication within the pharmacy or medication room prior to administration, and (4) verification of the five rights of medication administration by the nurse at the bedside using

Source: RUPRI Center for Rural Health Policy Analysis – Rural Issue Brief No. 2008-1, April 2008. To view a complete copy of the Brief, go to: www.unmc.edu/ruprihealth.

SAVE THESE DATES

Fund Raising 101

June 10, 2008: Otsego Club, Gaylord, MI. The Michigan Center for Rural Health is sponsoring a daylong Capital Campaign, Annual Fund Drive, and Endowment education session. The cost for the workshop is \$35.00. Registration information is available at the Michigan Center for Rural Health web site: www.mcrh.msu.edu.

2008 CAH Conference

Nov. 6-7, 2008

Mountain Grand Lodge Resort Boyne Falls, MI

Post Stroke Depression: Assessment and Treatment

Michael Schmitz, Psy.D. CBSM, from the Neuroscience Institute at Abbott Northwestern in Minneapolis, MN, will be presenting.

Speaker presentation will be available to download approximately 1 week prior to the call at <http://glrsn.uic.edu>.

Date: June 26, 2008

Time: 1:00 pm CT /2:00 pm ET

Presentation Time: Approximately 45 minutes

Discussion Time: Approximately 15 minutes

Dial In Number: 877-874-1570 Pass code: GWTG

Recommended audience: Rehabilitation Specialists (PT, OT, SLP), Home Health, Certified Nursing Assistants, Quality, Nursing, Social Worker, Discharge Planners

Learning Objectives

- Discuss screening tools for post-stroke depression.
- Outline treatment interventions for post-stroke depression.
- Discuss elements of assessment of post-stroke depression.

Email gwgtg@heart.org with your name, address, phone number, and email to register. In order to receive nursing CEU credits, participants must register and include the above-required information, participate on the call and complete the online evaluation.

Questions? Please contact Angela Bray Hedworth at hedworth@uic.edu.

**Oakton Community College, Alliance for Lifelong Learning, Continuing Education for Health Professionals is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation*

GRAND ROUNDS:

PHARMACY

Date: October 14, 2008

Time: 12:00 NOON – 1:00 p.m. EST

Pain Management – Terry Baumann, PharmD

Sponsored by: Michigan Center for Rural Health, Marquette General Health System and Upper Peninsula Telehealth Network

Continuing Education: for pharmacists pending.

ARTHRITIS

Held the second Wednesday of each month from Noon to 1:00 p.m. except in July and August.

Sponsored by: The Michigan Center for Rural Health and the Michigan Arthritis Collaborative Partnership.

2008 Schedule

- June 11- Back Pain Joseph Weiss, MD
- October 8-Psoriatic Arthritis- Robert Ike, MD

Accreditation: St. Mary Mercy Hospital, an organization accredited by the MSMS Committee on CME Accreditation, designates that this activity meets the criteria for a maximum of one (1) credit hour in Category 1 credit towards the AMA Physician's Recognition Award.

GERIATRIC

Held the first Wednesday of each month from Noon to 1:00 p.m. except July and August.

Sponsored by: The Michigan Center for Rural Health and the Geriatric Education Center of Michigan.

2008 Schedule

- No program June, July or August
- September 3 – ACOVE Quality Indicators in Primary Care Mark Ensberg, MD & Linda Keilman, MSN, APRN, BC, GNP
- October 1 – Oral Health in the Elderly Elisa Ghezzi, DDS
- November 5 – Health Literacy in the Elderly Marolee Neuberger, MS

- December 3 – Telemedicine and Remote Monitoring Pam Whitten, PhD

Accreditation: This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the Michigan State University College of Osteopathic Medicine and the Michigan Center for Rural Health.

NURSING

Held quarterly from Noon to 1:00 p.m.

Sponsored by: The Michigan Center for Rural Health and MSU College of Nursing

- Sept. 16 – TBD
- November 18 – TBD

Accreditation: Participants who attend the entire session and complete an evaluation form will receive a certificate for 1.5 contact hours.

Michigan State University College of Nursing is an approved provider of continuing nursing education by the Michigan Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

PSYCHIATRY

Held quarterly from Noon to 1:00 p.m.

Sponsored by: The Michigan Center for Rural Health and the MSU Department of Psychiatry.

2008 Schedule

- July 23 -Eating Disorders: Christine Shafer, MD
- October 22-Managing Bipolar Disorder Through the Life Span: Dale D'Mello, MD

Accreditation: This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the Michigan State University College of Human Medicine and the Michigan Center for Rural Health.

SOCIAL WORK

Held quarterly from noon – 1:15 pm

Sponsored by: The Michigan Center for Rural Health and the MSU School of Social Work

2008 Schedule More information coming soon.

- September 18 – TBD
- November 20 – TBD

Accreditation: Michigan State University School of Social Work (Provider No. 1136) is approved by the Association of Social Work boards (ASWB) approved continuing Education (ACE) program: www.aswb.org: 1-800-335-6880. ASWB ACE-approved programs are recognized in Michigan. In addition, Wisconsin, Illinois, and Indiana recognize ACE-approve providers. Social workers should verify recognition of ACE approval with their state boards.

For additional information or questions about materials contained in this newsletter, please contact:

EMS TELECONFERENCES

Quarterly 6:00-7:00 p.m.

Sponsored by the Michigan Association of Ambulance

- September 11– TBD
- November 14- TBD

For more information, contact Phyllis Ball, Education Coordinator at: ballp@msu.edu or 517-355-8250.

INTERESTING QUOTE:

A problem well stated is a problem half solved.

-Charles Kettering

For additional information or questions about materials contained in this newsletter, please contact:

Angela Emge

Hospital Program Administrator
Michigan Center for Rural Health
B-218 West Fee Hall
Michigan State University
East Lansing, Michigan 48824-1316

Telephone (517) 355-7757

Facsimile (517) 432-0007

E-mail aemge@msu.edu
www.com.msu.edu/micrh