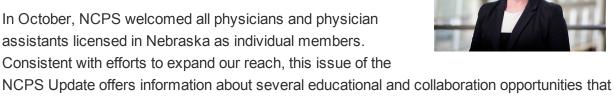
NCPS Update: November 2021



A Message from the Executive Director Gail Brondum LPN, BS

What Every Ambulatory Provider Needs to Know".



we hope will be of interest to a broad range of clinicians in various healthcare settings. Scroll down to find how you can: Earn Continuing Medical Education Credit for viewing the recorded webinar "PSOs -

- Register for the December UNMC Fundamental Critical Care Support course, which is being offered **free of charge** to the first 35 participants who sign up! This course is open to nurses, physicians, advanced practice providers, pharmacists, respiratory therapists,
- paramedics, residents, students and other clinicians from all over the region. • Engage with the expanded Great Plains Primary Care Practice-Based Research Network, which is seeking increased participation from primary care and rural community physicians.
- · Access pertinent patient safety resources that are worth a click. Topics include reducing surgical site infections for cesarean births, health equity, peer support, and communicating about COVID-19 vaccines, to name a few.
- Looking for on-demand patient safety resources? Check out the <u>resources and tools</u> on the NCPS website. Create an account to gain access to recorded educational webinars, patient safety alerts, toolkits and other resources on topics ranging from fall prevention to suicide risk mitigation located in the members-only section of our webpage.

Learning Opportunities for NCPS Members PSOs: What Every Ambulatory Provider Needs to Know - CME Available for Viewing **Recorded Webinar**

Continuing Medical Education may be earned by <u>attending the recorded session</u> and completing

If you were unable to attend our October virtual education program, the recording is now available.

the program evaluation and CME attestation. The Nebraska Medical Education Trust has designated this webinar for 1.0 AMA PRA Category 1 Credit(s).

During this program, Michael Callahan, Senior Counsel of Katten Law Health Care Team, explores

patient safety activities in the ambulatory care setting and their implications for privilege and

confidentiality protections within the context of working with a federally listed patient safety organization, such as NCPS. Mr. Callahan also describes common types of events which occur in the ambulatory setting, the purpose of working with a patient safety organization, and the structures and processes involved in maintaining a patient safety evaluation system. Nursing Continuing Education credits are not available for viewing the recorded webinar.

Support (FCCS) Course each month. As the result of an educational grant from the Society of Critical Care Medicine (SCCM), the December FCCS course (Thursday the 9th and Friday the

The University of Nebraska Medical Center (UNMC) now offers its Fundamental Critical Care

10th) will be offered free of charge to the first 35 participants who sign up! This will include

the books, lunch and the CE credit. Individuals who successfully complete the course will receive a certificate of completion from

Free Fundamental Critical Care Support Course at UNMC

their clinical profession. FCCS is a two-day course developed by the SCCM to better prepare patient care teams in the recognition and initial management of critically ill patients until transfer or appropriate critical care consultation can be arranged. It also is designed to assist those who manage critically ill patients

SCCM, which is valid for four years, and 17.5 hours of continuing education credits, appropriate to

the care of patients with critical illness and is geared toward nurses, advanced practice providers, respiratory therapists, physicians, pharmacists, paramedics, medical and surgical residents and health care students. Specific topics covered include:

A partnership with the UNMC Office of Continuing Education, the course is taught by experts in

 Metabolic and electrolyte disorders; Critical illness in pregnancy;

Life-threatening infections;

Acute coronary syndrome;

 Patient assessment; Respiratory failure;

with sudden deterioration.

- Trauma and burns;
- · Critical illness in the surgical patient; and
- Mark Hamill, MD, course director stated "I have been teaching this course for about 10 years now. I will say that it is a fantastic course especially for people who are not in large academic

Ethical considerations in critical illness.

 Invasive and non-invasive ventilation; Diagnosis and treatment of shock;

Courses offered after December will require a registration fee of \$400 for healthcare professionals

UNMC/Nebraska Medicine employees.

jess.bruno@unmc.edu or by calling 402-559-8884 or course director Mark Hamill, MD, at m.hamill@unmc.edu. Additional information about the course may also be found here. Opportunity for Primary Care and Rural Physicians to Engage in Research Network

The Great Plains Primary Care Practice-Based Research Network (PBRN) is seeking to expand

across the region. The expansion will increase opportunities for UNMC faculty to collaborate with

the network to improve access to health care resources and promote primary care research

involvement to improve the health and quality of life in the Great Plains.

happening outside of an academic medical center."

your calendar, contact NPQIC for a calendar appointment.

Reduced Incidence of C-Section Surgical Site Infections

For more information about the course or to sign up, contact course coordinator Jessica Bruno at

medical centers and need to think about transferring patients to get critical care services. Anyone

who takes care of patients with potential critical illness will get a fair amount of benefit from it."

who are employed external to UNMC/Nebraska Medicine. A discounted fee is available to

rural physicians on investigator-initiated studies and clinical trials, as well as expand recruitment of under-represented communities. Led by UNMC's Matthew Rizzo, MD, Jeffrey Harrison, MD, Paul Estabrooks, PhD, and others, the Great Plains PBRN was launched in 2016 with a mission to engage clinicians, investigators and patients through research, collaboration and community

"Clinical research is typically done at large academic health science centers, which is part of our mission, but we want to include more physicians in the community where most of the population

is getting most of their care, most of the time," said Dr. Rizzo, who serves as the Frances & Edgar Reynolds Chair and professor in the UNMC Department of Neurological Sciences. "We want to increase awareness of this network, encourage collaboration and drive enrollment. Rural community physicians have much to contribute. They have their ear to the ground on what health problems affect their communities, have research ideas to explore and provide value on what's

Dr. Rizzo said collaboration provides an opportunity to expand knowledge of health issues in the community, for example Alzheimer's disease, cancer, diabetes, obesity, drug and alcohol misuse and exposure to toxins. Already, more than 60 primary care sites across the region participate in the network. The majority of these are in Nebraska, but there also are participating sites in North and South Dakota. Learn more here. Nebraska Perinatal Quality Improvement Collaborative (NPQIC) Roundtable

The next NPQIC Roundtable event will be January 6th at 1:00 pm central time. All are welcome

as staff from three hospitals share how they have implemented plans of safe care for newborns affected by maternal substance use. In addition, a representative from DHHS will present an

overview and answer questions about plans of safe care. If you do not already have this event on

Patient Safety Resources

Use of a hospital-wide perioperative bundle was found to significantly reduce surgical site infection

Perinatal Care. The five elements included in the perioperative bundle for cesarean births were an antibiotic protocol, preoperative warming and maintenance of normal temperature interoperatively, standardization of the patient surgical preparation, standardization of trays for fascial closure, and standardization of the wound dressing application intraoperatively. The authors noted that much of the literature has focused on utilization of perioperative bundles to decrease rates of surgical site infections in colorectal and gynecological surgeries. This large study focused on obstetric patients and a standardized surgical site infection prevention bundle which is comprehensive and specific

rates in cesarean deliveries, according to a retrospective study published in Birth Issues in

to cesarean births. **Expanding Peer Support for Clinicians and Staff**

events. The toolkit and the accompanying implementation guide provide resources for

organizations to develop a successful peer support program.

A new Peer Support Toolkit is available from the Betsy Lehman Center for Patient Safety to help healthcare organizations that want to do more to support clinicians and staff after difficult adverse

Health Equity Work in the U.S. The Institute for Healthcare Improvement (IHI) polled health care leaders in July 2021 to better understand perceptions of health equity work and the challenges faced by health care organizations as they work to improve health equity. Key findings from the poll are available in the IHI 2021 Pulse Report on health equity. The poll found that health equity has become a top priority for health care leaders over the past two years. More information about the report can be found here.

The findings of a systematic review and meta-analysis of hospital adverse events published in the Journal of Patient Safety indicate that hospital adverse events have increased over time and more

COVID-19 Resources

Free resources to help communicate the importance of getting the COVID-19 vaccine are now

CDC Study: Protection from COVID-19 Vaccines is 5 Times that of Natural Immunity

According to a new study recently published in the CDC Morbidity and Mortality Weekly Report, the odds of COVID-19 re-infection among unvaccinated adults with previous infection were more than five times higher than the odds among fully vaccinated adults who had no prior infection. COVID-19 vaccination can provide a stronger more consistent level of immunity for at least six

than half are considered preventable. Surgical events, drug-related events, and nosocomial infections were the most evaluated events. The authors recommend that hospitals reinvest in

improving safety targeting the adverse events that are preventable.

available to support your vaccination campaigns. Posters, fact sheets, video testimonials, social media imagery and other media resources have been developed through a collaborative effort of the UNMC College of Public Health and United Healthcare and are available here. Media materials can be downloaded, printed and shared or <u>can be ordered</u> at no cost.

Evolving Factors in Hospital Safety

months than infection alone.

Take the Shot!

Rachel Pearson, MD, PhD is a physician, scientist, and author who is at the Center for Medical Humanities and Ethics at the University of Texas, San Antonio, and a pediatrician on the faculty of UT San Antonio Long School of Medicine. The <u>US Food and Drug Administration (FDA)</u> recently authorized Covid-19 vaccinations for emergency use in children aged 5-11 years. In this Medscape recorded interview, Dr. Pearson discusses how she brings along vaccine hesitant parents. (A no cost Medscape log-in may be required to access the recording and transcript.)

How Pediatrician Dr. Rachel Pearson Brings Along Vaccine Hesitant Parents

<u>here</u>. Be sure to check out the <u>Conversation Guide to Improve COVID-19 Vaccine Uptake</u> which can be downloaded for free by registering with IHI.

COVID-19 Guidance and Resources from IHI

For more information about NCPS and the services we offer, please contact Gail Brondum LPN, BS, Executive Director at: gail.brondum@unmc.edu

Subscribe to our email list.

The Institute for Healthcare Improvement (IHI) has developed and gathered COVID-19 guidance and resources for hospital and health system leaders. The IHI COVID-19 resources can be found

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