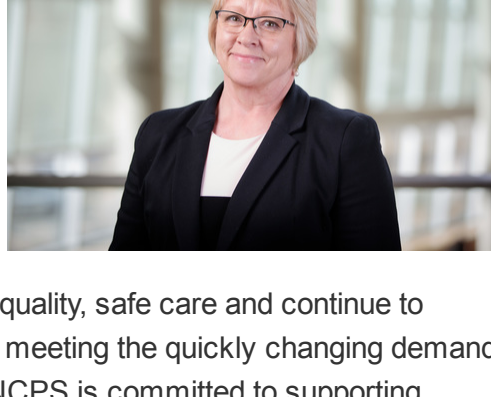


NCPS Update: March 2022

A Message from the Executive Director

Gail Brondum, BS, LPN

[Patient Safety Awareness Week](#) (March 13-19) is recognized each year as a way to encourage people to increase their knowledge about health care safety. It is also a time to acknowledge the work that is already being done to improve patient safety.



Healthcare providers are committed to delivering high quality, safe care and continue to demonstrate remarkable adaptability and innovation in meeting the quickly changing demands brought about by the current pandemic environment. NCPS is committed to supporting providers in patient safety improvement and continues to evolve to meet the changing needs of the providers we serve. Along these lines, please note the information in this newsletter about our partnership with the UNMC CAPTURE Falls program, our transition to a web-based event reporting platform, the upcoming launch of Affinity Group Safety Huddles, and the Executive Director position opening. I will retire at the end of April. It has been my honor to serve you. Thank you for your support of NCPS and your ongoing work to improve patient safety.

NCPS Shared Learning Resource: De-identified Event Retained Surgical Items

The NCPS learning resource this month is a De-identified Event and learning opportunity regarding [Retained Surgical Items \(RSIs\)](#). Included in this resource is information taken from a NCPS member's event report, national data about the incidence and cost of RSIs, and resources for best practices for prevention of RSIs. It also contains an organizational self-assessment, "Could this happen in your organization?" to use to identify gaps and next steps in developing risk mitigation strategies to reduce the potential for similar adverse events at your facility. The summary is also available to members by visiting the Educational Resources tab in the members only portal on the NCPS website <https://www.nepatientsafety.org/members/>

Member Update - What You Need to Know

Position Opening – NCPS Executive Director

NCPS is actively seeking an Executive Director. Under direction of the NCPS Board of Directors and in collaboration with NCPS Committees, the Executive Director is responsible for the day-to-day operation and implementation of the goals and objectives of NCPS in support of its mission to continuously improve the safety and quality of healthcare delivery in the region. If you, or someone you know is interested in this position, you may access the job posting [here](#). Questions about this position may be directed to Katherine Jones, PT, PhD NCPS Board President at kjones57@gmail.com or 402-598-7907. NCPS is moving through an exciting era of growth and this role presents a great career opportunity for an innovative leader in patient safety!

NCPS and UNMC CAPTURE Falls Announce New Relationship

NCPS and the University of Nebraska Medical Center (UNMC) CAPTURE Falls program has entered into a collaborative agreement. [Collaboration and Proactive Teamwork Used to Reduce \(CAPTURE\)](#) Falls program is a quality improvement and research initiative to improve inpatient fall risk reduction programs in Nebraska Critical Access Hospitals. The program began in 2012 under the leadership of Katherine Jones, PT, PhD, current President of the NCPS Board of Directors, while she was on faculty in the UNMC College of Allied Health Professions. Since Dr. Jones' retirement from UNMC, the program has continued under the guidance of Dawn Venema, PT, PhD, Victoria Kenel, PhD, and Anne Skinner, MS, RHIA, also faculty within the UNMC College of Allied Health Professions. The partnership between NCPS and CAPTURE Falls will improve the efficiency of reporting fall events and will allow for stronger confidentiality and privilege protections of the reported falls data. For additional information about the benefits and details of this partnership, click [here](#). Hospitals who are involved in CAPTURE Falls will receive additional communication from UNMC about this collaboration soon.

Electronic Reporting of Patient Safety Events

In the next few weeks, NCPS will begin implementation of a web-based platform for patient safety event reporting. NCPS has entered into an agreement with Press Ganey Associates to utilize its Patient Safety Organization Platform for the collection, management, and analysis of patient safety event related information for its member organizations. After NCPS workforce are trained, a phased approach will be used to implement the reporting platform with member organizations who are interested in participating. More information will be available as the project moves forward. Resources from the Patient Safety Cash Fund are being used to implement this program, which will improve the efficiency of collecting and analyzing patient safety event data and will enhance our understanding of the nature and scope of patient safety events in our region. If you have questions or would like additional information, please contact Gail Brondum, Executive Director at gail.brondum@unmc.edu.

Learning Opportunities

Webinar PSO Case Law Learnings on 4/12 at 1 pm CT

NCPS is a member of The Alliance for Quality Improvement and Patient Safety (AQIPS), the leading national nonprofit professional organization that assists members to build a safer health care system. AQIPS and Chart Institute PSO are offering a webinar which you, as an NCPS member, are invited to attend. PSO Case Law Learnings to Strengthen the PSES and Privilege Protection with Robin Locke Nagele, JD/Principal, Post & Schell, P.C. will provide practical tips derived from case law for strengthening the PSES framework that is the foundation for privilege protection under the federal Patient Safety Act. NCPS members may also extend this invitation to their legal counsel provider. Register [here](#) for the April 12th 1pm webinar.

Virtual PSES Summit

The Alliance for Quality Improvement (AQIPS) and the Collaborative Hospital PSO (CHPSO - California) are planning a Patient Safety Evaluation System (PSES) Virtual Summit. Included in the two day event are safe table discussions, topic-focused breakout sessions, and amazing keynote presenters all centered around Patient Safety Evaluation Systems; what we know, what we learned, and what needs to happen next. The Virtual PSES Summit will be held **May 24-25 from 10:00 a.m. – 2:00 p.m., CST** each day. NCPS members may [register](#) for this informative event.

Sensemaking in Times of Uncertainty: Essential for Safety

Join IHI's annual Patient Safety Awareness Week webinar to gain insights and perspective to foster sensemaking and action to reinforce patient and workforce safety in your organization. This topic is timely as we enter the third year of a global COVID-19 pandemic in which nearly every aspect of our care and caring has been disrupted. How do we make sense of and take action to prevent the unraveling of organizations and sustainably reverse setbacks in patient and workforce safety?

This session will provide insights and perspective to foster sensemaking and action to reinforce patient and workforce safety in your organization. Register [here](#) for the **March 15th 10am - 11am CST** webinar.

IHI Short Course: The Role of Leaders in Workforce Safety

IHI is offering this online course through their IHI Open School at no cost. In it the foundational role of leaders in keeping health care workforce safe and strategies that have succeeded in reducing physical harm and improving psychological safety across organizations are explored. Log in or register to begin [\[forms.ihi.org\]](https://forms.ihi.org) **CEs are available for this course.**

Sepsis Alliance Leadership Conference

Sepsis is the number one cost and cause of death in U.S. hospitals; it is estimated that 35% of all in hospital deaths are sepsis related. The Sepsis Alliance is hosting a conference to spotlight the role healthcare executives and leadership can play in improving the awareness, recognition, diagnosis, and treatment of sepsis. Attendees will have the opportunity to engage with sepsis leaders and subject matter experts from across the country and to claim **FREE nursing CE Credit**. Register [here](#) for the April 6th conference.

Collaborative Opportunity for NCPS Members

Coming Soon! Affinity Group Safety Huddles

NCPS is planning to host regularly scheduled Affinity Group Safety Huddles for NCPS members to gather and discuss pertinent patient safety concerns, using the Safe Table model. A Safe Table is a forum where healthcare providers can convene to review and discuss issues related to quality and patient safety improvement in a confidential and privileged space. Information discussed during a Safe Table is considered Patient Safety Work Product within the NCPS Patient Safety Evaluation System, as defined by the federal Patient Safety Act of 2005. An Affinity Group is a group formed around a shared interest or common goal, and is intended to provide benefit from interactions with people who share common identities or experiences. Affinity Groups can be a place to come together to feel less isolated and more connected or to work together toward a common goal. NCPS will begin by scheduling Safety Huddles for the following Affinity Groups: Critical Access Hospitals, Community and Specialty Hospitals, and Large Academic/Teaching Hospitals. Additional groups may be developed over time. More information will be coming soon!

Patient Safety Resources

Direct Acting Oral Anticoagulants

Although direct acting oral anticoagulants (DAOs) are generally considered safer than older anticoagulants, they are still a high-risk medication. This [review](#) found that between 5.3% and 37.3% of patients experienced either a prescription, administration, or dosing error. Read further to see the results of this review and meta-analysis in order to learn about the most common active failures found.

Age-Friendly Health System Resources

The US population aged 65+ is expected to nearly double over the next 30 years, from 43.1 million in 2012 to an estimated 83.7 million in 2050. How can health systems best provide healthcare for this group of people whose needs and wants are quite different from persons under the age of 65?

The John A. Hartford Foundation and the Institute for Healthcare Improvement (IHI), who in partnership with the American Hospital Association (AHA) and the Catholic Health Association of the United States (CHA) developed such a program. They identified four evidence-based elements of high-quality care, known as the "4Ms", that need to be provided to all older adult in a health system: What Matters, Medication, Mentation, and Mobility.

Learn more about this initiative and view the guide designed to help care teams test and implement a specific set of evidence-based, geriatric best practices. The guide is available to you [here](#).

Clinicians Involved in Medical Error

As quality improvement organizations and health systems work to address medical errors in a just and transparent way, they're realizing that finding ways to help traumatized clinicians is integral to their efforts. This recent Medscape article, [When Your Error Harmed a Patient and You're Wracked With Guilt \(medscape.com\)](#) provides information about Communication and Resolution Programs (CRPs) and AHRQ's Communication and Optimal Resolution (CANDOR) toolkit.

COVID-19 Resources

An Estimated 5.2 Million Children Orphaned Due to COVID-19

A February 27th [article](#) in *Lancet Child and Adolescent Health* estimates that worldwide 5.2 million children have become orphaned because of COVID. It further calls for and suggests meaningful interventions to ease the consequences of this "hidden" epidemic caused by the COVID pandemic.

Commentary of the Abrupt Expansion of Ambulatory Telemedicine; Implications for Patient Safety

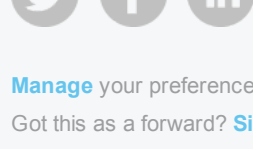
In response to concerns about COVID-19 transmission, many ambulatory care visits have transitioned to [telehealth](#) visits. This [commentary](#) describes the impact of telehealth on diagnostic errors and medication safety in ambulatory settings. Recommendations to further understand the impact of telemedicine on patient safety include systematically [measuring](#) patient safety outcomes and increasing reporting of safety incidents; identifying the patients and clinical scenarios with the greatest risk of unsafe telehealth care; identifying and supporting best practices to ensure [equal access](#) to safe telehealth.

UNMC Receives Grant to Address Nursing Burnout

The rate of nurses leaving in profession because of burnout has increased dramatically during the COVID pandemic. UNMC College of Nursing has been awarded a \$2.2 million dollar grant to address this significant workforce patient safety issue. Listen to a recent [interview](#) of Dr. Alyson Hanish by the Rural Radio Network to learn more about this program designed to improve the mental health of healthcare workers and reduce nursing burnout.

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

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