



Minnesota Alliance for Patient Safety (MAPS) Conference

Reigniting Our Passion for Safe Care



Oct. 25 - 26, 2018

Minneapolis Marriott Northwest, Brooklyn Park

Thursday, Oct. 25

7:30 – 8:30 a.m. **Registration**

8:30 – 8:40 a.m. **Welcome and Opening Remarks**

8:40 – 9:40 a.m. **Opening Session: Just Culture — Then and Now**

Sponsored by the Minnesota Hospital Association

David Marx, chief executive officer, Outcome Engenuity, Minneapolis, MN

Safety in the workplace is important, but how do we establish a culture that encourages open reporting of adverse events and risky situations, yet holds people and organizations accountable in a just manner? The challenge lies in distinguishing between a system that might create risks, human error which may result in a bad outcome and reckless behavior that intentionally puts lives or organizations at risk. In our opening session, Marx will explain how Just Culture reshapes our understanding of accountability, the role of the system and the role of human behavior, allowing us to distinguish between human behaviors to help us arrive at a consistent way to establish a safe environment by managing the system and behavior.

9:40 – 10 a.m. **Break**

10 – 11 a.m. **Breakout Sessions**

#1 Understanding and Responding to Dementia-Related Behaviors: A Guide for All Staff Roles

Katie Roberg, program and education manager, Alzheimer's Association Minnesota-North Dakota Chapter, Edina, MN

Some of the greatest challenges in providing care for an individual with dementia are the personality and behavior changes that often occur. This session will provide valuable strategies for staff in all areas of your organization to identify and respond to challenging behaviors associated with dementia in order to provide safe, person-centered care and enhance the lives of individuals living with dementia.

#2 Open Notes

Roxana Lupu, M.D., Sanford Health, Sioux Falls, SD

Open Notes is an international movement that promotes transparency and encourages health care providers to share visit documentation. Providing access to notes can empower patients, families and caregivers to feel more in control of health care decisions, help manage care and improve the overall quality and safety of care. This session will present the implementation process including barriers and challenges, physician and patient feedback, as well as further plans for expansion.

#3 Weaving Together the Critical Components of a Strong and Comprehensive Patient Safety Program Sponsored by the MMIC Group

Panelists: Chelsie Bakken, MBA, BSN, RN, coordinator, patient safety and Melissa Jones, MHA, BSN, RN, CNOR, CPSO, senior process improvement clinical consultant, CentraCare Health-St. Cloud Hospital, St. Cloud, MN; Facilitator: Martin J. Hatlie, J.D., co- director, Center for Open and Honest Communication, MedStar Institute for Quality and Safety (MIQS) Washington, DC

This session will explore the impact of harm events on the resilience of the care team and the effects on safety and experience. Panelists will emphasize the importance of providing immediate and ongoing emotional support to staff, patients and loved ones following unexpected events and weave together the strands of patient experience, patient safety and resilience, discussing how the three work together to support and strengthen each other. They will explain how the key aspects of CANDOR provide an interwoven foundation for an organization to establish a learning culture and trusting relationship with patients, families and their care teams.

11:15 a.m. – 12:15 p.m. **Breakout Sessions**

#4 Human Centered Design for Performance Improvement

Laurie Bell, care transformation program manager, Jill Goring, director of nursing practice, education and research, Pam Peine, nurse manager, MICU, and Jason Robertson, M.D., SFHM, chief of internal medicine, Regions Hospital, St. Paul, MN

Are your fixes to re-emerging problems starting to feel like Band-Aids for a major bleed? Do you spend too much time rolling out improvements that do not get adopted? If so, you may want to consider using Human-Centered Design (HCD). HCD is understanding the lived experiences of the people with whom you interact so that your designed product or service will be meaningful and of value. The Regions team will discuss their HCD experiences that led to a sustained reduction in hospital acquired conditions and infections, improvements in nurse onboarding and education and hospitalist driven design that supports top of license work for all care team members.

#5 Race, Racism and Health Inequity: What Can We Do About It?

Stephen Nelson, M.D. director of sickle cell clinics, Children's of Minnesota, Minneapolis, MN

This presentation is born out of work done by Dr. Nelson and the recognition of the impact of racism and provider bias on racial disparities in health care. Nelson has done extensive research and training on this content extensively for the last 7 years and, with Dr. Heather Hickman, has been conducting racial justice trainings for physicians, nurses, students and others in the Upper Midwest. As a result, he has accrued information regarding the transformation of racial disparities and will share this in his presentation.

#6 Community-Based Care Collaboration Prevents Opioid Abuse

Kurt Devine, M.D., and Heather Bell, M.D., CHI St. Gabriel's Health, Little Falls, MN

In response to the opioid epidemic, CHI St. Gabriel's Health helped develop an innovative model to prevent prescription drug and opioid abuse. As part of a \$45 million State Innovation Model (SIM) cooperative agreement to help implement the Minnesota Accountable Health Model, the hospital launched the program in partnership with the county sheriff's office, local police department, county social service and public health agencies, local school district, local pharmacies and home health services, along with skilled nursing facilities. As a result, prescription drug usage has decreased substantially. Join us as we hear from this award-winning team about their collaboration with multiple partners, lessons-learned and successes.

12:15 – 1:15 p.m. **Lunch**

Sponsored by Fairview Health Services

1:15 – 2:15 p.m. **General Session: Patient Story**

Sponsored by LeadingAge Minnesota

Patient panelists: Arabella Jones and Dar Hafner; Facilitator: Lisa Juliar, engagement specialist, Minnesota Alliance for Patient Safety, Minneapolis, MN

In an effort to understand the toll that human error can take on the lives of those receiving and delivering care, you will hear heart-felt stories from consumers who have experienced an error in their care journey. This session will provide lessons you can take back to your organization to encourage a safer, stronger and more trusting environment. Join us as we discover the ways to reignite our passion and build our knowledge to eliminate harm from our systems of care delivery.

2:15 – 2:30 p.m. **Break**

2:30 – 3:30 p.m. **General Session: Patient Safety and the Human Condition**

Sponsored by Allina Health

Danielle Ofri, M.D., Ph.D., author, clinical professor of medicine, New York University School of Medicine, New York, NY

Patient safety is a critical issue in medicine today. There is, rightly, a strong emphasis in systems approaches to improving medical care and decreasing error. However, medicine is fundamentally a human endeavor, and in the end, it is people, not systems, who cause medical errors. Without attention to the human aspects of the medical enterprise — emotions, respect, relationships — crucial aspects of patient safety will remain beyond our grasp.

Friday, Oct. 26

8:30 – 9:30 a.m. **General Session: Shared Decision Making**

Sponsored by Mayo Clinic

Victor Montori, M.D., M.Sc., speaker, author, professor of medicine, Mayo Clinic, Rochester, MN

What is shared decision making? The Agency for Healthcare Research and Quality (AHRQ) describes it as a mode of patient-centered care that enables and encourages people to play a role in the medical decisions that affect their health. Montori believes that we need to see people in high definition with flexibility and empathy. Join us as we look at the future of the next health system and aim towards being efficient and sustainable with the priority on its mission and holding itself accountable to patients and their care.

9:45 – 10:45 a.m. **Breakout Sessions**

#7 Human Factors Engineering: What is it and How Do We Use it?

Sponsored by the Minnesota Medical Association

Matthew Scanlon, M.D., CPPS, professor of pediatrics, Medical College of Wisconsin, physician, Children's Hospital of Wisconsin, Milwaukee, WI

Human Factors Engineering is an incredibly important but often misunderstood science. This session will explain the basics while identifying strategies to use Human Factors Engineering to improve the safety of care.

#8 Partnerships Make Safety Possible

Joy Benn, MBA, CPXP, project manager, patient/family engagement, Minnesota Hospital Association, St. Paul, MN; and Lisa Juliar, engagement specialist, Minnesota Alliance for Patient Safety, Minneapolis, MN

Person and Family Engagement is a critical component of ensuring that patients/residents/consumers experience safe care everywhere. This session will highlight best practices for engaging patients, residents and families in their care through stories of successful partnerships. Include Always, a Minnesota-based approach to including patients, residents and families as true partners in the health care system, will highlight current data and exciting new work being done to advance engagement efforts across the state and how consumers and organizations are responding to the invitation to "Include Always."

#9 Transitions of Care and Reducing Readmissions

Kristen Husen, director, home care and hospice, CentraCare Health, St. Cloud, MN; Mary Jo Huppert, director, care management clinical operations, Fairview/HealthEast Care System, St. Paul, MN; and Janelle Shearer, program manager, Stratis Health, Minneapolis, MN

This session will describe a collaborative focused on the hospital to home transition, for patients who need home care support. The aim includes improvement in home health care referral and acceptance of services, resulting in a reduction in readmissions. This session will provide an overview of the collaborative, share successful approaches used by both hospitals and home care agencies as they work with patients and families to increase the acceptance and use of home care services following hospitalization. It will also highlight tools and resources developed and tested by the statewide collaborative in support of this effort.

10:45 – 11 a.m. **Break**

11 a.m. – 12 p.m. **General Session: Communication and Optimal Resolution (CANDOR)**

Sponsored by CentraCare Health

Timothy McDonald, M.D., J.D., president, Martin J. Hatlie, J.D., co-director, Center for Open and Honest Communication, MedStar Institute for Quality and Safety; Washington, D.C.

A traditional approach when unexpected harm occurs often follows a "demand-and-defend" strategy, providing limited information to patients and families, and avoiding difficult conversations that might involve telling the truth and admitting mistakes. In contrast, the Communication and Optimal Resolution (CANDOR) is a truly patient-centered approach that emphasizes early empathic communication of adverse events, provision of early and ongoing peer support to provider staff, learning through human factors-based event review, complete transparency and a principled, proactive method of achieving a fair resolution for the patient/family and involved health care providers. McDonald and Hatlie will share evidence, best practices and lessons learned in assisting health care organizations assess readiness and integrate a CANDOR approach into their patient safety programs.

12 – 1 p.m. **Lunch**

Sponsored by the Minnesota Department of Health

1 – 2 p.m. **Breakout Sessions**

#10 Leadership Culture Across the Spectrum

Stacy L. Lee, J.D., CPA, LNHA, chief executive officer, Jen Erdmann, R.N., director of nursing, Johnson Memorial Hospital, Dawson, MN

Critical Access Hospitals that excel across national patient safety and quality measurements invariably describe strong leaders and a culture that expects and wholeheartedly supports excellence in patient safety, quality and patient experience. A collaborative of several successful mentor hospitals and organizations have gone on a journey towards building a culture of excellence. Lee and Erdmann will share Johnson Memorial Hospital's experiences and the successful ways they have created a culture of safety and excellence in their health care organization and community which actively engages their patients, families and staff.

#11 Elder Abuse: A Systems-based, Patient Safety Approach to Prevention

Katie Behrens, prevention and outreach coordinator, Minnesota Elder Justice Center, St. Paul, MN; Julie Apold, vice president of quality and performance excellence, LeadingAge Minnesota, St. Paul, MN; and Anneliese Peterson, vice president of operations, Walker Methodist, Minneapolis, MN

Approximately 1 in 10 Americans age 60 and older have experienced some form of elder abuse. Reducing instances of maltreatment (abuse, neglect, and exploitation) of older adults requires a systematic approach to preventing these events before they happen and learning from events when they do occur. In this session, presenters will describe efforts to understand and address the underlying causes of maltreatment and will share a case study involving abuse and lessons learned about the factors contributing to the abuse and effective solutions to address those findings.

#12 Surgical Time Out Process

Tania Daniels, MBA, BAsC, vice president, quality and patient safety, Minnesota Hospital Association, St. Paul, MN; Diane Rydrych, MA, director, health policy, Minnesota Department of Health, St. Paul, MN; and Chelsea Bakken, patient safety and performance excellence coordinator, CentraCare Health-St. Cloud Hospital, St. Cloud, MN

The Minnesota Time Out Campaign sought to eliminate wrong site events by providing resources to conduct effective time-outs for every patient, every invasive procedure, every time. Building off of this campaign, the Minnesota Department of Health and the Minnesota Hospital Association worked together to modify the Minnesota Time Out incorporating safe culture statements and expand it to incorporate standardized elements in the briefing. This presentation will provide an overview of the changes and new tools and resources available to reduce wrong site, wrong procedure events and will walk through the experience of a hospital implementing these tools. You will walk away with information on available resources and tools to reduce the number of surgical adverse health events.

2 – 2:20 p.m. **Break**

2:20 – 3:30 p.m. **Closing Keynote Session: Safety II**

Sponsored by Stratis Health

Matthew Scanlon, M.D., CPPS, professor of pediatrics, Medical College of Wisconsin, physician, Children's Hospital of Wisconsin, Milwaukee, WI

Traditional patient safety efforts were designed and implemented under the premise that our systems are well understood, well designed and predictable. Therefore, when things go wrong, individuals are often identified as the cause and focus for developing actions to prevent future harm. Today, we realize that most of preventable health care harm events are due to systems issues that are often overlooked. This session will describe the need to offer a new approach to safety that helps understand and address systems issues that contribute to preventable health care harm and provide a practical model for thinking about systems with suggestions for applications by safety teams

3:30 p.m. **Closing Remarks and Adjourn**



Conference Information

About the conference

“Reigniting Our Passion for Safe Care” is the ninth statewide conference sponsored by the Minnesota Alliance for Patient Safety (MAPS) since 2002. The 2018 MAPS Conference will disseminate leading edge practices, provide knowledge on critical topics in safe care and facilitate creative and solution-oriented dialogue about how to make health care sustainably and measurably safer in Minnesota.

Objectives

- Recognize trends in safe care to improve safety across health care settings;
- Provide strategies and actions for establishing and maintaining a culture of safety;
- Demonstrate how organizations have successfully measured the outcomes of their patient safety improvement initiatives;
- Provide creative and solution-oriented initiatives to make health care safer and more sustainable;
- Explore opportunities to improve engagement between patients, resident, families and providers for safer care everywhere.

Who Should Attend

Health care professionals, quality and safety leaders, managers, educators, patients involved in facility committee’s or advisory groups and others interested in patient safety across all health care settings.

Registration

Registration information about the patient safety conference can be found at www.mnpatientsafety.org.

You may register for this program in any of the following ways:

- By mail: download the registration form at <https://mnpatientsafety.org/2018-maps-conference> and mail to:
MAPS Conference
c/o Minnesota Hospital Association
2550 University Ave. W., Ste. 350-S
Saint Paul, MN 55114-1900
- By fax: (651) 659-1477
- Online: visit <http://www.mnhospitals.org>, log-in and select “Calendar of Events” to register.

Registration Fee

(Does not include lodging accommodations)

- Before Sept. 11
 - \$310 MAPS members
 - \$360 Non-members
 - \$75 Patient or Resident Volunteer Advisors (per day)
- After Sept. 11
 - \$395 all attendees
 - \$75 Patient or Resident Volunteer Advisors (per day)
- On-Site
 - \$500 All attendees

The fee reflects the cost of program development, administration, promotion, faculty expenses, lunch, and break items. MAPS reserves the right to cancel or reschedule due to an insufficient number of registrants or other unforeseen circumstances.

Registration will be accepted on a first-received basis.

Registration fees, less a \$25 cancellation fee are refundable if notice is received five working days prior to the program date.

Registrants unable to attend may send one alternate. “No show” registrations will be billed. Space is limited

Special Needs

If you have any special needs that we can accommodate for this program, please contact MHA’s Education Department at (651) 641-1121 prior to the event.

Accommodations

To make reservations call the Minneapolis Marriott Northwest directly at (763) 536-8300. Please indicate that you are attending the MAPS Conference when making overnight accommodations. Room rate: \$141 standard suite; Cut-off date: October 3, 2018.

[Book your room at the Minneapolis Marriott Northwest.](#)

Continuing Education Opportunities

- Nurses Contact Hours: This activity has been designed to meet the Minnesota Board of Nursing continuing education requirements. A total of up to 12.2 contact hours will be awarded to those attending this educational activity. However, the nurse is responsible for determining whether this activity meets the requirements for acceptable continuing education. (Day One 6; Day Two 6.2).
- Pharmacists: 10 contact hours have been applied for through the Minnesota Board of Pharmacy. Pharmacists must complete a CEU and program evaluation form at the conclusion of the conference. Official certificates of continuing education will be mailed to attendees after the program. (Day One 5; Day Two 5).
- Long-Term Care Administrators: 10 Continuing Education Units have been applied for through the Minnesota Board of Examiners for Nursing Home Administrators. (Day One 5; Day Two 5).

Sponsors

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Minnesota Alliance for Patient Safety 2018 Conference

Reigniting Our Passion for Safe Care

Name: _____ Title: _____

Facility/Organization: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

Email: _____

Please indicate which breakout sessions you will be attending (check one per time slot)

Thursday, Oct. 25, 2018 | 10 – 11 a.m.

- #1 Understanding and Responding to Dementia-Related Behaviors: A Guide for All Staff Roles
- #2 Open Notes
- #3 Weaving Together the Critical Components of a Strong and Comprehensive Patient Safety Program

Friday, Oct. 26, 2018 | 9:45 – 10:45 a.m.

- #7 Human Factors Engineering: What is it and How Do We Use it?
- #8 Partnerships Make Safety Possible
- #9 Transitions of Care and Reducing Readmissions

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- #4 Human Centered Design for Performance Improvement
- #5 Race, Racism and Health Inequity: What Can We Do About It?
- #6 Community-Based Care Collaboration Prevents Opioid Abuse

Friday, Oct. 26, 2018 | 1 – 2 p.m.

- #10 Leadership Culture Across the Spectrum
- #11 Elder Abuse: A Systems-based, Patient Safety Approach to Prevention
- #12 Surgical Time Out Process

Method of Payment

- Check made payable to Minnesota Hospital Association enclosed VISA MasterCard American Express

Card number: _____ Exp. date: _____ Sec. code: _____
(3 digit number on back of card)

Name on card: _____