

THE WEEK'S TOP STORIES

ANOKA-METRO REGIONAL TREATMENT CENTER RETURNS TO FULL FEDERAL COMPLIANCE

The Department of Human Services (DHS) announced that Anoka-Metro Regional Treatment Center has returned to full compliance with federal rules for hospital operations and patient care after two recent unannounced inspections by federal regulators. This comes after three separate investigations in 2015 found the hospital out of compliance with one or more federal regulations related to patient care and hospital operations.

Improvements at the 110-bed state-operated psychiatric hospital focused on patient rights, nursing services, treatment planning, quality assurance, and performance improvement. A variety of policies and practices were changed during implementation.

"The entire team at Anoka-Metro Regional Treatment Center has worked hard to bring about this crucial turnaround for patients, their families, and the staff," said Emily Piper, human services commissioner. "We've been focused on changing the way we do things. In a very challenging environment, we are on the right track."

After the issues in 2015, the Centers for Medicare and Medicaid Services (CMS) entered into a systems improvement agreement to correct the deficiencies and bring the hospital back into compliance to avoid losing federal funding. CMS has determined that the hospital successfully completed the agreement and will drop an earlier decision that would have blocked the hospital from billing Medicare and Medicaid.

Two outside consultants who were approved by federal regulators worked with hospital staff to make the improvements. The Minnesota Hospital Association served as of these consultants—it analyzed processes and systems at the facility and made recommendations for the corrective plan. The other consultant helped implement the plan.

"We were pleased to partner with DHS and Anoka-Metro Regional Treatment Center to ensure patient safety and improve the delivery of consistent, high-quality care in service of patients," said Rahul Koranne, MD, MBA, chief medical officer of the Minnesota Hospital Association. "These improvements will result in a stronger continuum of mental health services, which will benefit patients, families, and communities across Minnesota."

NEWS IN BRIEF

RADIOLOGIST RECEIVES 2018 HONORARY MEMBER OF CHINESE COLLEGE OF INTERVENTIONALISTS

Jafar Golzarian, MD, director of the division of interventional radiology and vascular imaging at the University of Minnesota, has been selected to receive the 2018 Honorary Member of Chinese College of Interventionalists (CCI). It is the highest honor awarded by the society.

"This honor is bestowed to those individuals who have rendered exceptional service to the field of interventional medicine and have dedicated their talents to advancing the quality of patient care with their outstanding achievements through the practice of interventional medicine," Gao-Jun Teng, MD, president of CCI, wrote in the award notification letter.

Golzarian is also an active researcher specializing in interventional treatment of peripheral artery disease, abdominal aortic aneurysms, uterine fibroid embolization, hepatocellular carcinoma, prostate artery embolization, and varicocele embolization.

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COLLABORATIVE WORKING TO REFINE BENCHMARKS FOR POST-OPERATIVE OPIOID PRESCRIBING

The MN Health Collaborative, a group of 14 health care systems, is currently developing an innovative approach to prescribing opioids for post-operative pain. The new approach addresses the unique needs of patients based on their health histories, current diagnoses, and required surgical and post-operative treatment needs.

To combat potential problems of overprescribing, such as side effects and dependence for some individuals, surgeons within the collaborative have begun an effort that uses a specific, nuanced approach to post-surgical opioid prescription. It was developed in part as an answer to the lack of evidence-based guidelines for post-operative opioid use and is based on available literature, expert consensus, and community data relevant to the effort. The best practices and takeaways will be shared with the healthcare community as the efforts progress.

“My colleagues within the MN Health Collaborative and I are working closely in a transparent way to better learn from each other’s experiences and more rapidly implement new, shared benchmarks for care,” said Tad Mabry, MD, an orthopedic surgeon at Mayo Clinic. “We’re already making considerable progress toward introducing new benchmarks for post-operative opioid prescriptions. This has been some of the most meaningful work of my career. Working with the MN Health Collaborative, it has become clear that we can balance reductions in the amount of opioid pain medication prescribed while maintaining a patient-centered approach to pain management.”

Some of the collaborative’s goals are to help reduce, and eventually eliminate, opioid overdose deaths, as well as provide better prevention and treatment practices for opioid addiction. These require a multi-pronged approach including stricter prescription guidelines, improved drug disposal, true care coordination, and stronger education and support for both patients and providers. The new approach to post-operative opioid prescription expands upon the State of Minnesota’s Department of Human Services newly released guidelines.

“We applaud DHS on its new guidelines, and want to build on that foundation by testing the approach recommended by surgeons within the MN Health Collaborative,” said Claire Neely, MD, chief medical officer for ICSI. “We believe this work will provide a clearer determination of the varying pain management needs required by different surgical procedures. This effort will help support a significant need to develop more patient-centered prescription practices where opioids are concerned.”

UNIVERSITY OF MINNESOTA KIDNEY TRANSPLANT TEAM EARNS NATIONAL HONOR

The University of Minnesota Medical Center has received the 2018 Excellence in Teamwork Award from the National Kidney Registry for demonstrating excellence in teamwork for a complex kidney swap. The hospital is one of ten member centers to receive this award.

NEWS IN BRIEF**SUPERIOR HOSPITAL RECEIVES TRAINING TO BETTER SERVE PATIENTS WITH DEMENTIA**

St. Mary’s Hospital in Superior has recently received specialized education to care for patients with dementia. The training, made possible through the Douglas County Caregiver Coalition, teaches staff to recognize signs and symptoms of dementia, how to assist patients with dementia, and to identify local resources that are available.

“We are offering this training as one of the ways to create a dementia-friendly community,” said Erika Leif, director of the Douglas County Aging and Disability Resource Center. “The demographics for those over 65 living in Douglas County will dramatically increase over the next 25 years. Because of this, we will likely see an increase in the number of individuals being diagnosed with some form of dementia.”

The trainings were offered three days in June, and focused on increasing awareness of dementia and how best to care for those with it. St. Mary’s campus now displays a dementia-friendly decal.

RURAL HEALTH CARE PROFESSIONALS HONORED

The Minnesota Department of Health, Minnesota Rural Health Association, and Duluth-based National Rural Health Resource Center have recognized three health care professionals who have made significant contributions to the health and well-being of their rural communities.

The Rural Health Hero Award was given to Donna Erbes, RN, health services director of the Southwestern Minnesota

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Together, the centers conducted a complex kidney transplant chain that involved 18 patients—nine donors and nine recipients—and resulted in nine life-saving transplants.

“Most paired-exchanged chains we participate in are three or four pairs long,” said transplant coordinator Margaret Voges, RN, BAN. “It was amazing that so many transplant centers teamed together to help so many people that needed a kidney. Transplant chains like this one bring down barriers, because we are all part of one team, working towards one goal.”

Paired exchange programs allow a transplant candidate with a willing but incompatible donor to match up with other donor-recipient pairs in the same situation. Once a match is found, the surgeries can be scheduled so that participants can be transplanted, usually on the same day. When swaps are arranged between more than two pairs, they are often referred to as transplant chains. These chains can be long, with dozens of people and numerous transplant centers involved across the country. Kidney chains can also be started by altruistic donors—people giving a kidney without an intended recipient, as was the case in this 18-person chain.

“We routinely educate and offer paired exchange to help inform our patients and families of all their options,” Voges said. “Some choose paired donation even when they are compatible—because they can leverage paired donation for a younger donor or a better match, or even just to help other patients. We share the ultimate goal—to get them transplanted prior to needing dialysis, and with the best long-term outcome.”

More than 100,000 people in the U.S. are in need of a kidney transplant but are currently waiting for a matching donor to become available. Recipients generally have two options—a transplant from a living donor, or a transplant from a deceased donor. Because of a donor shortage, an average of 13 people die each day waiting for a new kidney.

MINNESOTA PRACTICES RECOGNIZED FOR PREGNANCY AND NEWBORN CARE

Five Minnesota facilities have received the Triple Aim Best Practice designation from the American College of Nurse-Midwives (ACNM) for achieving exceptional results in pregnancy and newborn care.

Fairview Center for Women—Edina; Fairview Clinics—Riverside in Minneapolis; Health Foundations Birth Center in St. Paul; Minnesota Birth Center in Minneapolis; and Thrive Midwives, LLC, in New Brighton received the designation, which recognizes practices that meet the Institute for Healthcare Improvement’s triple aim of improving patient experience, reducing cost of care, and improving the health of populations. To receive the designation, clinics must demonstrate pre-term birth rates less than 11.4 percent, cesarean rates less than 23.9 percent, and exclusive breastfeeding for the first 48 hours greater than 81 percent.

Of the 257 practices participating in the 2017 ACNM Benchmarking Project, 97 were designated Triple Aim Best Practices.

Opportunity Council (SMOC) Family Planning Program and a leader in the field of reproductive health care in Minnesota. Recognizing that access to health care is a health disparities issue, Erbes expanded SMOC’s service area from eight to 15 counties during her tenure. She also volunteers as a preceptor for aspiring registered nursing students and has served on advisory boards for various Minnesota colleges and universities.

Caring Hands Dental Clinic, a designated critical access dental provider, received the Rural Health Team Award. It provides dental care and a dental home to Minnesota Health Care Programs recipients in 34 counties in the state. It began as a volunteer group of local citizens from Alexandria 12 years ago and has since added full-time dentists and created innovative programs to serve those covered by Minnesota Health Care Programs and the uninsured.

The Rural Health Lifetime Achievement Award was given to Michael Zakula, DDS, for his years of clinical practice in Hibbing as an orthodontist and his volunteerism on behalf of organized dentistry and rural health. He has worked tirelessly to ensure rural residents have access to oral health care and has been instrumental in creating scholarship and loan forgiveness opportunities for dentists who, in exchange, work in communities that would not otherwise have access to dentists. He was also instrumental in establishing the Hibbing Community College Dental Clinic, which has served as a training facility for dental assistants, dental hygienists, and dental students since its establishment.

