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WINTER 2015

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Edition 75

On the Cover:
Nemaha County Hospital
Auburn, NE

Nemaha County Hospital —

Accomplishing Remarkable Things



Nemaha County Hospital is located in Auburn, Nebraska.

The staff and Board of Directors at Nemaha County Hospital have always been willing to make a change or try something new and unique before other hospitals in the area do so. Many small, Critical Access Hospitals believe that they cannot do certain things because they are small. And, to some extent they may be correct. But we have tried to word that phrase a bit differently. We ask, "Because we are small, what can we do that the larger hospitals can't do?" This question, and the ensuing mindset that comes with it, have motivated us to be one of the first hospitals in the state and region to accomplish a number of remarkable things.

In 2002 we found out that our IT vendor had been purchased by another company and that the new owner planned to sunset the product that we were using. We used the circumstances

of this event to look to the future, and the future we saw was one where the IT system would not only have financial capabilities but also include an electronic medical record. We installed our new financial IT system in September of 2003 and in January of 2004 we went live with our EHR, including barcoded medication administration, and we have never looked back. We installed new software applications as they became available and in 2006 we went live with Computerize Provider Order Entry (CPOE). Other applications followed and in 2009 it was announced that as part of the American Recovery and Reinvestment Act (ARRA) CMS would be offering incentives to hospitals and physicians to install and meaningfully use EHR technology. We simply smiled because we were already meeting the objectives for Stage I Meaningful Use.

Since that time, we have received the AHA Health Forum's "Most Wired" award nine of the last ten years. This year we had the special pleasure of having a presidential appointee, Dr. Karen DeSalvo, visit our facility to see how we are effectively using EHR technology. She wanted to see our electronic medical record, complete with medication reconciliation. She wanted to see how the providers in the Emergency Department used NeHII to view patient data from other facilities or providers and to perform prescription drug monitoring. She wanted to see our patient portal and see what our patients see when they log in. Who would have thought that Dr. DeSalvo would take the time to visit a CAH in rural Nebraska?

Another example of our willingness to step out in front came when we had the opportunity to become a Trauma

Designated Hospital. As the hospital and medical staff discussed issues around achieving this designation, the importance of having a high quality Emergence Department became very clear. We are able to control the types of patients that we will see in every area of the hospital with the exception of the Emergency Department. We have to deal with whatever comes through the door. In 2006 we decided to seek designation as a Basic Level Trauma Center and soon became the first hospital in Southeast Nebraska to be so designated. Our physicians and Physician Assistants all became ATLS certified. Our RNs all became TNCC certified. We developed the policies, procedures and a quality review program, necessary to be so designated. This is, without a doubt, the most important thing we have done to improve patient care.

The one thing that is the leading cause of burnout among rural physicians is call. In fact, we were on the verge of losing one and possibly two long-term physicians



continued on next page



a few years back. One of the doctors that was considering leaving came to me with a plan. What if we place a Physician Assistant (PA) in our facility twenty-four hours a day, seven days a week and have a physician on call to come in whenever the PA needs assistance or a patient has more complicated needs than the PA is comfortable treating. The PA would cover the Emergency Department as well as serve as a Hospitalist for the inpatients.

We started this program in 2008 and it has been extremely successful. Three PAs are employed by the doctors in town, all of which are in one private practice group. Each PA works ten days a month and is off the rest of the time. The PAs care for about 80% of the patients who present to the ED. The doctors are more productive in their clinic so they can see more patients than before and they usually get a good night's sleep. And there is always a provider in our facility, which has saved lives. When it comes time to recruit a new physician and the question of how often they will be on primary call comes up, when we can say never, we will certainly have an advantage, if they want a rural practice.

Another time that we demonstrated that we don't mind being first was when we became the first hospital in the state to become DNV accredited, which lead to us becoming ISO-9001, 2008 certified. We had been researching the ISO certification for a number of years, because we knew that it is based on process based performance improvement. DNV received deemed status from CMS to accredit Critical Access Hospitals in December of 2010. In July of 2011, we went to the Board of Directors and asked to become DNV accredited. When they asked us why we wanted to pursue this accreditation, we said that it was because we wanted to be held to a higher standard. The Board approved our request, making us the first hospital in the state to seek this accreditation.

We had our first survey in August of 2011 and I can assure you that we were, without a doubt, held to a higher standard. We had over twenty "nonconformities," which is what DNV calls their deficiencies. We had lots of work to do if we were going to become ISO certified in three years.



Susi VonBergen demonstrates the patient portal to Dr. Karen DeSalvo, Director of the Office of National Coordinator for Health Information Technology. Also picture are Kermit Moore, COO and Boyd Douglas, President and CEO of Evident. Evident is the software company for NCH's Electronic Health Records System.

The only reason that we were able to become ISO certified was because the staff saw that process-based performance improvement was the best answer to providing better patient care and improving productivity in all areas of the hospital. We provided training for the staff involved. We formed a team and divided the work to achieving our goal.

Because DNV surveys its hospitals every year, we didn't have long to wait to see how we were doing. The following year the surveyors found that we had corrected all of the previous year's non-conformities and had made progress toward ISO certification.

Each year we have gotten better and when we went through our survey in 2014, we were found to have met the requirements to be ISO certified. Today we proudly display our ISO flag in our lobby, but we realize that process-based performance improvement is about constantly improving so we are not resting on our laurels. The next time the surveyors return, we know we will discover new ways to improve our processes.

You see, being small is all about being nimble. We are able to try new things without going through lots of red tape. And when you have the incredible staff that we have, all things are possible.



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Boone County Health Center CEO receives NHA 2015 Excellence in Service Award



Victor N. Lee, FACHE

Since 2000,
Victor Lee has
been at the
helm as chief
executive
officer at the
Boone County
Health Center
(BCHC) and
Medical Clinics
in Albion,
Nebraska.
During
the last

15 years, the health center has seen unprecedented growth on several levels. Under Mr. Lee's leadership, the hospital underwent extensive building and renovation campaigns resulting in a new patient wing, laboratory and radiology wings, specialty clinic, cardiac rehabilitation center, medical records and state-of-the-art technology community conference room. Two new medical clinics in Fullerton and Elgin were also completed under his tenure. All of this was accomplished, as well as paying off bonds, making the health center debt free.

His team approach to the BCHC's success has resulted in BCHC being named to the Top 20 Critical Access Hospitals, including being among the Top 10 CAHs in 2015 by the HealthStrong organization.

Internally, Vic Lee has been a strong advocate for recruiting and retention of rural health care providers. Under his efforts, staff has added additional doctor and physician assistants along with other professional staff. Mr. Lee believes strongly in keeping administration and board of trustees informed on the state of health care in Nebraska and proposed federal legislation, and providing monthly updates to both groups. Among staff, he is known for his daily "walkabouts," in which he engages both staff and patients in easy-going conversations! BCHC staff will also point out that their employee benefits have

not only been bolstered, but increased, due to Mr. Lee's attention to employee morale and well-being.

Senior administrative staff enjoy a professional, yet relaxed, working relationship with Mr. Lee. His open door policy encourages approachability and open discussion on pertinent health care issues. Among board of trustees and foundation directors, he has promoted open and forth-right communication. Mr. Lee welcomes discussion, different opinions and new solutions all for the

good of patients and our communities. He has modeled the importance of openness and change in the health center's conversion to electronic medical records. While adoption to EMR has been slow (and even painful!), he has been encouraging and patient. On a state level, Vic Lee has held numerous positions with the Nebraska Hospital Association, ranging from serving on the Executive Committee, Chairman of the Board of Directors, Foundation Board of Directors and Policy Development Committee.



NHA President, Laura J. Redoutey, presents Vic Lee with the NHA's highest honor.

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NHA BOARD OF DIRECTORS - LEADERSHIP PROFILE



Michael Hansen, CEO Columbus Community Hospital Columbus, Nebraska

A New Year offers new opportunities for many and such is the case for Michael Hansen, the 2016 Chairman for the Nebraska Hospital Association (NHA). "I am honored and humbled to have the opportunity to serve as Chairman of the NHA Board of Directors." Mike notes. "And, I look forward to continuing our work with the talented NHA team and the many Health Care Professionals that represent our 89 hospitals and health systems across Nebraska."

Michael Hansen, FACHE, began his career 33 years ago working part-time in a surgery department while obtaining his undergraduate degree in psychology from Louisiana State University in Shreveport, Louisiana. It was then that he realized he wanted to work and serve in the healthcare industry.

He worked his way up the healthcare ladder, beginning in management in many California hospitals and then moving to Texas and spending eight years in human resources at the Texas Department of Mental Health and Mental Retardation. He obtained two master's degrees: health services management and human resources development from Webster University in San Antonio, Texas. He has been the president/CEO of Columbus Community Hospital for six years.

Mike is originally from Akron, Ohio, but spent most of his childhood moving around with his military family. He is married to Colette and they have a blended family of four daughters, one son and nine grandchildren.

About Columbus Community Hospital

Columbus Community Hospital (CCH) is a community owned not-for-profit hospital. The facility opened its doors in its new location on August 2002 and is located on 80 acres in the northwest part of Columbus, NE. The 175,000 square foot hospital is a four story, prairie-style

building with an attached 70,000 square foot one-story medical office building housing both local and visiting physicians.

CCH houses 47 acute care beds (certified for swing beds), 4 skilled nursing beds and 14 ambulatory outpatient beds, all private rooms. Columbus Community Hospital is licensed by the Nebraska State Board of Health and is accredited through The Joint Commission and has been recognized by them for the past five years as a "Top Performer on Key Quality Measures"."

The Hospital is also a member of Nebraska Hospital Association (NHA), American Hospital Association (AHA), Voluntary Hospital Association (VHA), Mid-America Hospital Alliance (MAHA), Heartland Health Alliance (HHA) and Enhance Health Network.

Success can be measured in the quality of the Hospital's facilities and the commitment of staff, board, physicians and volunteers. Leadership consists of an 11 member Board of Directors, President/CEO and 4 Vice-Presidents, 41 "active" members of the Medical Staff, over 600 employees and 300+ volunteers.

Columbus Community Hospital is dedicated to responding to the ever-changing world of healthcare by staying conscious of community needs and by providing well-trained professionals committed to offering the highest quality health care and service.

Strategically Planning for the Future

Expansion and Renovation

On October 14, 2010 Columbus Community Hospital broke ground on an extensive expansion and renovation project. The project provided 30,662 square feet of additional treatment space, to include a heated two-bay ambulance garage and a new covered walk-in entrance.

The main focus of Phase 1 was expected to

take 12 months and added an 11,167 square foot first floor Emergency Department. This replacement doubled the number of rooms and significantly increased the physical size of each room. The area functions more efficiently and provides the great quality care that everyone desires

Phase 2 of the project took approximately 8 months and added another 10,000 square feet to the first floor, including renovation of the old emergency department. This phase provided a new Women's Imaging Center that allows testing in an aesthetically pleasing private area. The previous Diagnostic Imaging area also underwent a renovation to include more private dressing rooms and a newly designed Registration area.

Hospitalists - Providing Patient Care

In April 2009, the Hospital Board gave the go-ahead to search for physicians to support a Hospitalist program. Hospital personnel and area doctors worked closely together on the path toward implementation of the program and on August 2, 2010 four Board Certified Hospitalists began providing care for patients.

The program has allowed the Hospital to keep more patients closer to home, increase the Hospital's ability to recruit/retain physicians, augment existing physician services and improve physician satisfaction, and provide infrastructure for future growth.

Advanced Orthopedic Technology

More than 180 joint replacement surgeries are performed at the Hospital each year. By utilizing the latest technology and most advanced equipment, patients are offered surgical options that can restore range of motion and overall function.

Computerized navigation technology, in combination with the experience and expertise of Orthopedic Surgeons, Drs. Richard Cimpl,

Michael McGuire, Edward Fehringer, Dustin Volkmer and Podiatric Surgeon, Dr. Brandon Borer provide patients with exceptional surgical care.

The Hospital is also leading the way in cutting-edge technology for patients dealing with chronic shoulder issues. Our very own orthopedic surgeon Edward V. Fehringer, MD, is one of a handful of experts in the United States now replacing shoulders with the Simpliciti System — the first FDA-approved and clinically proven restoration device that preserves valuable bone. He and four other shoulder surgeons created and designed the innovative device with a team of engineers.

Columbus Wellness Center - Open for Business

Columbus Community Hospital's mission is to improve the health of the communities we Wellness Center allows easier access, more space and increased convenience for patients.

The Hospital, along with the Board of Directors, chose the YMCA of Columbus to be the fitness services provider. The YMCA has a strong commitment to health and wellness, which makes it the perfect provider for this service.

"The challenge we face today in our community and across the nation is a population at risk for, or living with, chronic diseases. We are seeing increased incidences of obesity, diabetes and heart disease at an earlier age in men, women and even children," Mike explains. Based on the community health needs assessment, this service is extremely necessary to help residents of the Columbus area lead healthier lives by providing a holistic approach to personal wellness.

Enhance was established by a group of independent healthcare systems in Nebraska whose purpose was to combine strengths to help one another reduce the cost of healthcare and enhance health at the community level.

The network provides a forum for members to jointly develop capabilities, share best practices and gain economies of scale to reduce inefficiencies and improve care — while maintaining their independence. With a strong focus on clinical integration and shared services, Enhance is preparing individual healthcare systems to successfully and sustainably transition to value-based care.

Vision for future as NHA Chairman

"It is a tremendous honor to serve as Chairman of the Nebraska Hospital Association," says Hansen. "The key issues I envision addressing in my role as NHA



serve. Preventive care and healthy lifestyles are important components to improving health and quality of life.

To help with this, Columbus Community Hospital (CCH) completed construction on a Health and Wellness Center on property purchased adjacent to the Hospital. And a Community Open House was held on Sunday, November 1, 2015 with approximately 3,500 attendees.

The Wellness Center brings together fitness, wellness, and outpatient rehabilitation, including physical therapy, occupational therapy and speech therapy. It is a destination where people can learn, plan and take action to improve their health and quality of life.

All medical rehabilitation services are provided by CCH. These services moved to the Wellness Center from their previous location of the Hospital's third floor. Their move to the

Strategic Planning: What is on the horizon for the Hospital?

As the "provide-more-services/receive-more payment" volume-based model changes in the future, Columbus Community Hospital is preparing to succeed under the new model of reimbursement. Good physician relationships, effective care coordination, sophisticated information systems, an efficient method of providing services, effective relationships with insurance companies and employers, attention to cost structure, sound financial management, and capabilities to grow size and scale of services will be areas of focus as we move forward.

Enhance Health Network

CCH is one of the nine founding healthcare systems called Enhance Health Network.

Originally named Regional Provider Network,

Chairman are ones that impact our entire state and its healthcare system. Access to healthcare for all Nebraskans and improving behavioral health are key issues across the entire state. Reinforcing the need to develop a robust data collection and analytics system as well as addressing difficulties that hospitals have in finding a qualified workforce are concerns for all Nebraska hospitals and the communities they serve."

Hansen has worked in organizations that have endured great changes driven by people, technology and information and with teamwork, they were able to create change. "The healthcare challenges that we face as hospitals won't easily be resolved," notes Hansen, "but by working together we can affect transformation in healthcare and significantly enhance the health of our state."

By Ashley Clouse RT (R) & Rita Hood RT (R), BSR



Patient Room

Rock County Hospital is a 24 bed rural Critical Access Hospital located in Bassett, Nebraska, a small town in the Sandhills region of north central Nebraska. The hospital opened its doors in 1961 and has remained a staple in the community providing quality service with a small town genuine caring.

Each year the hospital holds a fundraiser aiding the Sandhills Cancer Fund for Breast Cancer Awareness month and also aids in community service projects such as road cleanup along Highway 7.

We continue to strive to improve our facility with the help of Hospital Auxiliary funding. We are currently implementing new 25" TV's for each of our patient rooms and 3 of the acute care rooms are set to be remodeled with new flooring, lights, and stands.

Other new projects include fresh paint on the tile in the hallways and the implementation of a Keurig coffee station for guests in the hospital and clinic lobbies.

Rock County Hospital is staffed with 95 employees to service the hospital and attached 30 bed Long Term Care facility. The Hospital side offers Acute Care along with Custodial Care, Swing Beds, and Respite Care all in our spacious single occupancy rooms. Let our compassionate staff take care of your loved ones while your family is out of town. We also offer whirlpool services to the public for those who don't feel comfortable bathing at home or need assistance.

Meeting patient needs is a priority at our facility so we offer many in-

house services. These include 24 hour Laboratory and Radiology Services, along with daily access to Occupational and Physical Therapy, Pharmacy services, and the attached Rock County Clinic. Special services offered include:

- Cardiology Clinic and Vascular Ultrasound twice a month
- Cardiac Rehabilitation Services



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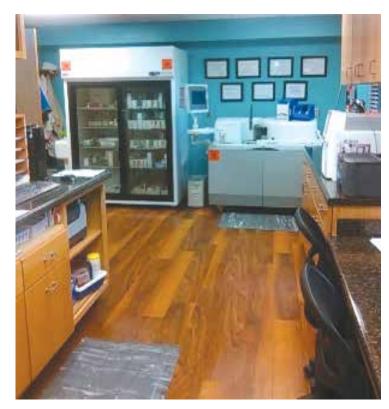
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- Sleep studies
- Colonoscopy and EGD (esophagogastroduodenoscopy) services twice a month
- Mobile MRI weekly
- Mobile Nuclear Medicine twice a month
- Mobile Ultrasound weekly

Rock County Hospital truly is a place where patients and families can come to get big hospital amenities with small town compassion and quality care. Please stop by to see our dedicated staff and excellent team of providers today!

Having an up to date facility helps us to stay current in today's ever changing healthcare system. New to the facility starting January 2016 we will have Avera Tele-Emergency allowing our Emergency Department to speak to a Doctor in Sioux Falls, South Dakota 24/7 for any type of assistance needed. In the last 6 years we have also updated all of our Radiology equipment including a new CR X-Ray system in 2009, in-house CT scanner in 2012, Mammography unit in 2012, DEXA scanner in 2013, and a portable CR X-Ray unit in 2015.



The Hospital's Laboratory equipment has been updated as well with a new sliding glass Refrigerator and tech area in 2013 and new CBC analyzer in 2014. We have also recently partnered with Red Cross Blood Services for all of our blood needs.

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Partnership for a Healthy Lincoln



Made possible with funding from the Centers for Disease Control and Prevention

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HealthyLincoln.org/Initiatives
Click on: Healthy Beverage Vending Initiative

Healthy Beverages in the Healthcare Workplace: Going Beyond Chronic Care

By Tami Frank, Program Coordinator, Partnership for a Healthy Lincoln (HealthyLincoln.org)

Hospitals have a role in prevention as well as chronic care. Two initiatives piloted in Lincoln hospitals have been shown to be successful in raising awareness and affecting real change. Interestingly, both have to do with healthy beverages. The first focuses on reducing sugar-sweetened beverage consumption and the second on promoting the ultimate healthy beverage for infants – breastmilk.

Why Focus on Beverages

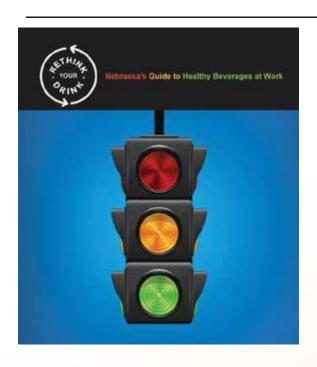
Interested in a \$27,000 cost savings?...hold that thought for later. Pop, energy drinks, sports drinks, sweetened tea, sweetened coffee drinks, juice drinks and even too much fruit juice are the #1 source of added sugar in the American diet. Lots of factors play a role in obesity. However, in attempts to improve the health of patients, families and staff, it is difficult to ignore that nearly 50% of all added sugars come from sugar-sweetened beverages. Let's do a bit of math: One 20 ounce pop has 240 calories. One 20 ounce pop a day equals 87,600 calories in a year or about 25 lbs. And you can buy these beverages everywhere - as part of a standard meal option at restaurants, in vending machines at work, school and maybe church, even in the check-out line at the copy shop.

What are Healthy Beverages

With so many beverage options available and companies attempting to market their product in the healthiest light to fit the current trend, it's hard to know what drinks are actually "healthy." Luckily, Nebraska's "Rethink Your Drink" campaign kit provides an easy-to-understand stoplight approach to help people identify healthy beverage options and make informed decisions.

Driving Change in the Workplace

Education on its own does not affect behavioral change. It's also important to make the healthy choice, the easy choice. Recently, Partnership for a Healthy Lincoln, in collaboration with the 3 worksite wellness councils across the state and the Nebraska Department of Health and Human Services released **Nebraska's Guide to Healthy Beverages** at Work. Following the Rethink Your Drink stoplight approach, the guide offers evidenced based steps to developing a healthy beverage policy in your workplace utilizing a staged approach to change at a pace designated by your organization. The brief guide is full of tools and resources to help organizations improve the culture of wellness in their organization. Download a copy of the guide at **www.healthylincoln.org**.



Breastmilk - the Ultimate Healthy Beverage

We can't talk about healthy beverages without acknowledging breastmilk as the original healthy beverage for infants. The 2012 PRAMS data from the Centers for Disease Control and Prevention (CDC) indicates nearly 90% of moms in Nebraska initiate breastfeeding. However, under half continue to breastfeed past 4 months. The American Academy of Pediatrics (AAP) recommends exclusive breastfeeding until 6 months and continued breastfeeding for the first year. In a study published by AAP, the most common factors mothers cited for discontinuing to breastfeed were:

- Lack of encouragement or education from their doctor
- Lack of confidence in their ability to breastfeed
- Challenges when returning to work/school

Policies, systems and environmental change are needed to support breastfeeding moms in our culture as well. Hospitals can evaluate their policies and practices on uninterrupted skin to skin time for the first hour of baby's life, not supplement with formula unless medically indicated, and provide adequate lactation support services giving new moms the tools they need to succeed. Find out how both Lincoln hospitals worked together to support breastfeeding moms in Lancaster County at:

http://www.healthylincoln.org/initiatives/breastfeeding.html.

And the \$27,000? One of Lincoln's hospitals signed on to the "Rethink Your Drink" campaign and discontinued providing free sugar sweetened beverages to their staff, patients and their families on each floor...\$27,000 is the amount they saved in the first year while "walking the talk" to create a healthy environment for all they serve.

About the Author: Tami Frank is program coordinator for Partnership for a Healthy Lincoln (HealthyLincoln.org), a non-profit organization dedicated to improving community health by decreasing obesity and increasing fitness. Ms. Frank also serves as project director for the Lincoln Community Breastfeeding Initiative.



Nebraska Medicine, Omaha, Nebraska

Alicia Parker, BSN, RN, was used to getting monthly text messages from the Nebraska Biocontainment Unit. They were usually about meetings, drills and training sessions. But this time was different. This time the unit was being activated.

Butterflies immediately flooded her stomach. A patient with Ebola Virus Disease (EVD) was being transferred to the unit within the next 48 hours.

This was not a drill.

A Neuro ICU nurse at Nebraska Medicine, Parker had trained for this event for three years. She was one of 22 nurses, 10 lab workers, six respiratory therapists, five care technicians and two dozen physicians who were part of the care team who treated three patients with Ebola at Nebraska Medicine's biocontainment unit in 2014.

Nebraska Medicine has one of three biocontainment units in the nation that has treated patients with Ebola.

The Nebraska Biocontainment Unit opened in 2005 in response to concerns about bioterrorism threats such as anthrax and contagious diseases like small pox and severe acute respiratory syndrome (SARS).

Phil Smith, MD, infectious disease specialist, director of the Nebraska Biocontainment Unit and principle investigator for the National Ebola Training and Education Center (NETEC), led more than two years of design and construction that incorporated input from the Centers for Disease Control (CDC), the National Institute for Occupational Safety and Health (NIOSH), military leaders and the Nebraska

Department of Health. When completed, the biocontainment unit was prepared to wage war against any microscopic enemy the world might dish out.

The 10-bed unit is the largest of its kind in the U.S. and the nation's only civilian facility. Other units are located at Emory University Hospital in Atlanta, Georgia, and the National Institutes of Health in Bethesda, Maryland.

Staff was recruited from throughout the hospital and participated in regular training and drills for countless hours each year leading up to the Ebola event: executing drills on admitting highly-infectious patients, reviewing detailed procedures for safe treatment and exercising what gear should be used for which diseases. New threats, new infectious diseases and new clinical and containment practices have kept team members on their toes.

So when the call came to accept a patient with Ebola last August, the biocontainment team was ready.

Parker was one of the first nurses to care for the first patient with Ebola, Rick Sacra, MD, who was admitted to the unit on Sept. 5, 2014. An American health care provider who was exposed to the Ebola virus while working in West Africa, Dr. Sacra was treated for almost three weeks and released on Sept. 25 after being cleared of the Ebola virus.

"It was great teamwork," says Parker.
"We had a variety of nurses from all over the hospital working in the unit so we had a large base of nursing skill sets. We all pulled together and used the skill sets that each of us brought to the table."

"There was no way to fully prepare for the

pressure, the national focus, the immensity of being responsible for curing a patient whose deadly disease was at the center of global debate," says Angela Hewlett, MD, infectious disease specialist and associate medical director of the Nebraska Biocontainment Unit. "However, each member of our team performed with skill, dedication and compassion, and I am so proud of them."

"This is truly an extraordinary team who worked in a hazardous situation, looked out for each other and always had a positive attitude," says Dr. Smith, the primary infectious disease physician, along with Dr. Hewlett, who treated the Ebola patients. "The support from their families, the hospital and the community were exemplary."

The eyes of the nation and of the world were fixed on Nebraska Medicine and the University of Nebraska Medical Center (UNMC) during the treatment of this first patient and then two more. It was estimated that an audience of nearly 895 million people were watching as the events unfolded with a tally of more than a billion unique online views.

The second Ebola patient, Ashoka Mukpo, was admitted to the Nebraska Biocontainment Unit on Oct. 6 and walked out Ebola-free less than three weeks later.

"After enduring weeks where it was unclear whether I would survive, I'm walking out of the hospital on my own power, free from Ebola," Mukpo said in a prepared statement. "This blessing is in no small measure a result of the world-class care I received at Nebraska Medical Center."

The third patient with the Ebola virus to be treated at Nebraska Medicine — Nebraska Medical Center, was Martin Salia, MD, who arrived on Nov. 15. Dr. Salia was suffering from advanced symptoms of Ebola, which included kidney and respiratory failure. Despite extraordinary efforts to save his life, he regretfully passed away as a result of his disease less than 48 hours later.

These three patients were among the 14,000 confirmed cases (located mostly in West Africa) infected with the Ebola virus during the outbreak that began in 2014.

Nebraska Medicine has since received national and international accolades.

For their dedication and effort, Ebola caregivers worldwide were honored with other

Ebola fighters as Time Magazine's 2014 Person of the Year. The team at Nebraska Medicine and UNMC also was honored by the Omaha World-Herald as the 2014 Midlanders of the Year.

The World Health Organization made UNMC a partner in its Global Outbreak Alert and Response Network (GOARN), a collaboration of institutions that provide rapid identification, confirmation and response to outbreaks of international importance.

"The most rewarding part of this whole experience was the gratification of building a unit, helping out in an international crisis and the national recognition of this team."

Nebraska Medicine and UNMC developed two free online Ebola education courses, available on iTunes University. The downloadable courses provide easy-to-understand instruction and resources for health care professionals, as well as the general public.

Nebraska Medicine and UNMC has also taken part in a CDC-led effort to train health care providers from around the country in Ebola readiness. Hundreds of caregivers from dozens of the most prestigious hospitals have come from around the country to Omaha to learn the Nebraska method.



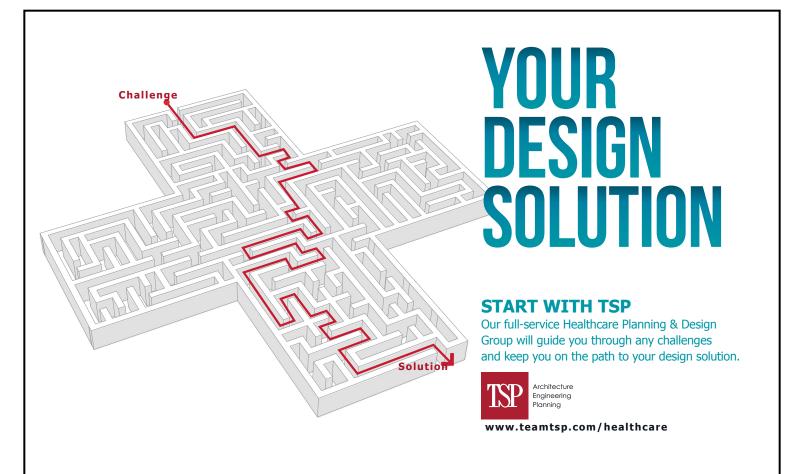
Left to right: Alicia Parker, BSN, RN; Phil Smith, MD; and Angela Hewlett, MD.

The team was recognized by President Barack Obama on Feb. 11, 2015 at an event to recognize the U.S. response to the Ebola crisis.

In June 2015, Nebraska Medicine and UNMC was named one of nine regional designated facilities to treat patients with highly-infectious diseases by the U.S. Department of Health and Human Services (HHS).

Nebraska Medicine and UNMC was also chosen as one of three health care facilities to partner with HHS and the CDC to support the training of health care providers on strategies to manage Ebola and other emerging infectious diseases. Dr. Smith is serving as

continued on page 18





Members of the Nebraska Biocontainment unit team pose for a picture at a press conference announcing Rick Sacra's discharge.



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one of three principle investigators for the NETEC.

"It is both humbling and gratifying to be praised by President Obama for the level of our care in the face of this crisis," says Jeffrey P. Gold, UNMC chancellor and chair of the Nebraska Medicine Advisory Council. "This is a compliment for the dedicated health care professionals of our biocontainment unit, but also for the professionals of Nebraska Medicine and UNMC as a whole. We also should see it as a challenge to maintain our national and international leadership position in the worldwide fight against Ebola and other highly-infectious agents as we continue our global educational efforts and regional preparedness."

"I'm pleased that we have established and shared the gold standard for Ebola treatment," says Dr. Smith. "I'm hopeful that the research opportunities and worldwide partnerships that have arisen from this crisis truly will make a difference in discovering and sharing better treatments and treatment protocols around the world."

The most rewarding part of this whole experience, says Dr. Smith, was the gratification of building a unit, helping out in an international crisis and the national recognition of this team. "I've never experienced anything like this in my career," he says. "This definitely takes the cake."

"The experience is indelibly etched in my memory," says Dr. Hewlett. "It was incredibly challenging, but so rewarding. Would I do it all again? Certainly. We are here for the purpose of helping patients in need, and that is exactly what we will do."

Nebraska Biocontainment Unit Milestones

- Sept. 5 Arrived, Sept. 24 Ebola Free, Rick Sacra, MD: Nebraska Medicine – Nebraska Medical Center admits its first Ebola patient, Rick Sacra, MD, on Sept. 5. He was released Ebola-free on Sept. 25.
- Oct. 6 Arrived, Oct. 22 Ebola Free, Ashoka Mukpo: Nebraska Medicine

 Nebraska Medical Center admits its second Ebola patient, Ashoka Mukpo, a videographer from NBC, on Oct. 6. He walked out Ebola-free less than three weeks later.
- Nov. 15 Arrived, Nov. 17 Lost His Fight, Martin Salia, MD: Nebraska

Medicine – Nebraska Medical Center admits its third Ebola patient, Martin Salia, MD, on Nov. 15. Dr. Salia was suffering from advanced symptoms of Ebola and passed away approximately two days later.

Recognitions

TIME Magazine: Ebola caregivers worldwide were named Time Magazine's 2014 Person of the Year.

Omaha World-Herald:
The biocontainment team
at Nebraska Medicine was
honored by the Omaha
World-Herald as the 2014 Midlanders of the
Year.

World Health Organization: The World Health Organization made UNMC a partner in its Global Outbreak Alert and Response Network (GOARN), a collaboration of institutions that provide rapid identification, confirmation and response to outbreaks of international importance.



Ashoka Mukpo, with his father, Mitchell Levy (left); and partner, Helen Finlay (right)

iTunes U: Nebraska Medicine and UNMC developed two free online Ebola education courses, available on iTunes University for health care professionals, as well as the general public.

Centers for Disease Control and Prevention: Nebraska Medicine and UNMC participate in a CDC-led effort to train health care providers from around the country in Ebola readiness.

U.S. Department of Health and Human

Services: Nebraska Medicine and UNMC is named one of nine designated facilities to treat patients with highlyinfectious diseases by the U.S. Department of Health and Human Services.

HHS & CDC: Nebraska
Medicine and UNMC is chosen
as one of three health care
facilities to partner with HHS
and the CDC to support the
training of health care providers
on strategies to manage Ebola
and other emerging infectious
diseases. Phil Smith, MD,
infectious disease specialist and
director of Nebraska Medicine's
Biocontainment Unit, accepts
the role as one of three

principle investigators at NETEC.

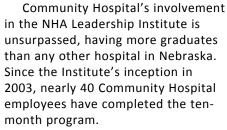
One-Year Reflections

Members of the team that cared for three patients with Ebola share their memories of the experience and reflect on the year that passed since the first patient arrived at the Nebraska Biocontainment Unit in September of 2014. Listen to their reflections.



Community Hospital leads the way with NHA Leadership Institute graduates

Nebraska Hospital Association



Developing leaders at their 25-bed Critical Access Hospital in McCook in southwest Nebraska is a high priority, says Jim Ulrich Community Hospital President & CEO.

"Educating our number one asset, our employees, is of utmost importance to us," he said. "We recognized when the program began it would be a consistent and reoccurring opportunity to develop leaders using a nice core curriculum through the Bellevue University."

Community Hospital alumni agree.

"One of the more memorable things that I realized is that leadership is more than just those in management. This was an eye opening revelation to me, and helped me to see that I had been a leader for longer than I was considering.

I learned a lot about myself as a leader during the class through the 360 degree feedback, the strengths finder, in attending classes and in reflecting on the areas that were discussed. It helped me immensely to have the one-on-one coaching session with one of the instructors.

Every so often I look back at materials I received in this class, even four years later. One of the things that I have found myself looking at is the ideas from the strengths finder. Remembering to keep in mind others' strengths can help me to better communicate and work with them.

I really cannot say enough positive things about this program. I would highly recommend it not only to a new leader, but



an established one as well."

Julie Wilhelmson, RN, Director of ED and Mother/Baby Services, Leadership Class of 2011

"The NHA Leadership Institute was an excellent experience in promoting a leadership mindset. Bellevue University professors who instructed the courses were top notch. The materials on strength-based leadership, the power of perception, and goal setting still influence my thought process all these years later

Most workforce education is focused on hard skills and knowledge of the industry. The leadership institute is focused on helping its members become better at managing themselves, understanding their own strengths, as well as common traps and bad habits to avoid, and not necessarily on how to change or directly influence others. That self-awareness allows individuals to better step into leadership roles and be successful in them. And that is one of the reasons Community Hospital has embraced the institute as strongly as we



have; as we promote a culture of ownership and empowerment, the institute helps our staff build skills that closely align with those values."

Sean Wolfe, Controller; Leadership Class of 2009

"I loved the program and learned so much. I especially enjoyed the class on strengths and weaknesses. It was great to learn what they were, and to share and obtain ideas on how to use them. Do not waste so much energy on your weaknesses as take time to develop those strengths. I also enjoyed meeting people from different hospitals and getting to know our

staff on a different level. Thanks NHA!"



Monica Wacker, RN, Certified Diabetes Educator, Leadership Class of 2010



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Most of Community Hospital's department directors have completed the program. Their mission now is to consider other employees from their departments who would benefit from the training. Nominations are sent to the Administrative Council, where up to six employees are chosen from Community Hospital for the upcoming class.

"We purposely choose employees from across the departments who may not necessarily know each other as a way to enhance and develop teamwork throughout our hospital," Ulrich said. "The Leadership Institute not only offers a unique opportunity to place our developing leaders with other hospital employees from throughout the state for a great networking opportunity, but promotes networking among our own employees."

"Being relatively new to Southwest
Nebraska the NHA Leadership Institute was
an opportunity to get to know colleagues
during the long distance travels. Additionally
I was able to connect with my counterparts
in healthcare fundraising across Nebraska.
Together we realized there was a need to
share ideas, challenges and successes. That
original NHA introduction launched what
is now Nebraska Healthcare Foundations,
a coalition of 46 Nebraska healthcare



fundraisers that rotate hosting quarterly conferences across the state."

Terri Shipshock, Executive Director Community Hospital Health Foundation, Leadership Class of 2008

"I had only been working with Community Hospital about a year when we started the training. It was a great way to meet & interact with other hospitals & their staff. But it was also a great way for me to get to know fellow staff members. Traveling together gave us time to get to know each other in a more personal way and share ideas about work at the same time. During training sessions, we heard a lot about other facilities' successes and struggles. I became more and more confident that Community Hospital was a leader in the state of Nebraska and that I was lucky to be a part of their future. The support we receive from Community Hospital to continue our education and become



leaders in our facility is a tremendous motivator to keep improving and building on our successes."

Diana Gross, Outpatient Clinic Manager, Leadership Class of 2008

The Institute is a tool to help Community Hospital support and develop its culture of excellence. "Using the program has paid off over the years as NHA has really strengthened the Institute," Ulrich said. "At Community Hospital we believe in being 'difference makers' and going above and beyond by consistently enhancing the healthcare experience of our patients, their families, and all of our customers. We have a strong set of organizational values. How we live these values everyday shapes the culture of our organization and in turn becomes the driving force behind 'excellence'." he added. "We see the Institute as another tool to develop leaders of excellence," Ulrich concluded.

"I appreciate the program provided me with the skills to promote our culture of ownership, accountability and teams within our family here at Community Hospital. I learned so much about my leadership style including solid strengths and opportunities allowing me to continue to improve in my role. The strengths finder, 360 degree feedback, coaching, development plans and networking tools



were excellent! I met so many wonderful people throughout the state and have stayed in touch with them."

Lori Beeby, Director of Information Systems, Leadership Class of 2010

Community Hospital appreciates the opportunity to strengthen and promote leadership skills among its employees through quality core curriculum, knowledgeable instructors from Bellevue University, and the opportunity to engage in peer-to-peer connections.

Community Hospital is located in southwest Nebraska in McCook, Nebraska, a community of 8,000. The hospital employs 282 people.

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