



Kansas Association of Risk and Quality Management

Thank you for making the Spring Conference a Huge Success!



Greetings KARQM members!

We hope your summer is going well. Many of you attended our spring conference in Lindsborg and we were so thankful for the great turnout and fantastic speakers. The energy in the room was palpable – lots of great networking taking place. The evaluations were overwhelmingly positive, and we appreciate your input.

SAVE THE DATE!

2023 Fall Conference
August 23, 2023
Wichita State University

We're in the final planning stages of our Fall conference and we'd love to see you in Wichita on August 23, 2023. Stay tuned for more details. Registration and conference material will be online and available via the KARQM website soon. [Register here](#) or paste the following into your web browser
<https://ezregister.com/events/38788>

Consider attending the KHC Summit on Quality- same place on the following day!
<https://www.eventbrite.com/e/591613260187>

KARQM -Why should you join?

Not yet a member?
Please join!

In addition to great networking and learning, your membership fees allow for economical programs and scholarships for our

members. **How can you join?** [KARQM - Kansas Association of Risk and Quality Management \(kha-net.org\)](#)

ECRI's 2023 Top 10 Patient Safety Concerns

1. The pediatric mental health crisis
2. Violence (physical and verbal) against healthcare staff
3. Uncertainty with maternal-fetal medicine
4. Clinicians working outside their scope of practice
5. Delayed identification and treatment of sepsis
6. Care coordination for complex medical conditions
7. Risks of not looking beyond the "five rights" of medication safety
8. Medication errors resulting from inaccurate patient medication lists
9. Accidental administration of neuromuscular blocking agents
10. Preventable harm due to missed care or treatment

Is your team working on any of these patient safety concerns? Are you willing to share your learnings? If so, please contact Liz Carlton (President, KARQM at lcarlton@kumc.edu). We'd love to highlight your successes regarding these challenges.

Answers to your questions: during our spring conference we were so fortunate to have KDHE representation. There were a few outstanding questions and we're happy to share the follow up responses from Kelly Rivera, Risk Management Program Coordinator with KDHE

1. “Identification between Physician, Contractor, and Staff issues” from the list of documents that might be requested during a Risk Management survey:

Surveyors will want to verify that the requirements in KAR 28-52-1(d) are being met. KAR 28-52-1 (d) states: “All patient services including those services provided by outside contractors or consultants shall be periodically reviewed and evaluated in accordance with the plan.”

For example, if KR, a contracted Physical Therapist Assistant who works for ABC Rehab, was working with a patient in your facility, the patient fell, and was injured, was a Risk Management investigation completed?

Surveyors will ask to review your Risk Management Log and will select investigations to review. The Employee ID list should include contractors and consultants who are involved in patient care.

2. There was also a discussion about whether a CNO could receive reports of reportable incidents.

KAR 28-52-2(a) states: “Each medical care facility shall identify a written form on which employees and health care providers shall report clinical care concerns to the risk manager, chief of staff, or administrator. The original or complete copy of the incident report shall be sent directly to the risk manager, chief of staff, or administrator, *as authorized in the facility's risk management plan.*”

If the CNO is an administrator who receives reports of reportable incidents at your facility, please make sure to specify in your Risk Management Plan specifies that the CNO is an authorized recipient of reportable incidents.

Kelly Rivera, CPTA

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CMS COVID Mandate Update

May 21, 2023, CMS released regulatory changes to COVID-19 healthcare staff vaccination requirements and long-term care facility testing requirements. The rule withdrew the COVID-19 healthcare staff vaccination requirements including removing the requirement for COVID-19 vaccination policies and procedures for healthcare staff. The rule also eliminated long term care facility COVID-19 testing requirements which had already expired in regulation but requires staff and residents of long-term care facilities to be educated on the vaccine and its benefits. CMS quality measures assessing the proportion of healthcare workers who are vaccinated for COVID-19 remain in place.

Although the healthcare staff vaccination requirement is ending, the requirement to report staff vaccination rates into NHSN remains in effect as a hospital condition of participation 482.42 (e). CMS proposed updated versions of the measures in several fiscal year 2024 payment rules this spring in the FY2022 IPPS/LTCH PPS final rule, CMS finalized the adoption of the COVID-19 Vaccination Among Healthcare Personnel measure beginning in October 2021 for the October 1, 2021, through December 31, 2021 reporting period affecting the FY 2023 payment determination and continuing for each quarter in subsequent years (86 Fr 45374). Failure to report this measure will continue to be associated with reductions in hospitals payments.

2024 OFFICER ELECTIONS

Current open positions include Secretary and President Elect. From our bylaws:

The President-Elect shall serve as a voting officer of the KARQM Board and perform the duties pertaining to the office of the President during their absence or inability to act. Candidates for President-Elect shall preferably have served at least one year on the KARQM Board. The President-Elect shall coordinate the new member orientation, mentor program, and maintain a roster of KARQM membership.

The Secretary shall serve as a voting officer of the KARQM Board and shall prepare and keep a permanent record of the agendas and meetings of the organization and of the KARQM Board. Shall submit such records for approval at the following meeting of the respective group, shall carry on the official correspondence of the organization under the direction of the KARQM Board, shall prepare, and give notices of all meetings in the manner prescribed by these Bylaws, and shall perform such other duties as the KARQM Board may determine.

The following candidates are slated for open KARQM offices. If you would like to add your name send your bio and photo to carlton@kumc.edu. Voting will occur during our Regular Meeting of the Board during Fall Conference Aug. 23, 2023,

Secretary



Cody Utz, current KARQM Secretary is running for a second term. Cody serves on the leadership team at Holton Community Hospital as director of quality and informatics. She has worked in health care more than 25 years, initially as an imaging specialist (X-ray and ultrasound) and transitioned to quality in 2015. For the past 18 years Cody has had the privilege to work and serve in her hometown community at Holton Community Hospital. She leads the PFAC council, quality council, recruitment and retention committee and is vice chair of the service excellence council. This is her third year on the KARQM board and also serves as chair of the KH A Quality and Patient Safety committee. Cody lives on a family farm with her husband and three teenage/young adult children. She enjoys spending time with family; watching softball and baseball, gardening, food preservation, walking and traveling to national parks.

President-Elect



Tereasa DeMeritt leads the Quality and Patient Experience Program at Labette Health. Tereasa has stewardship of numerous clinical and nonclinical service lines such as Case Management/Utilization Review, Hospitalist Program, Ancillary Services, and Security / Emergency Preparedness. Tereasa received her Bachelor's and Master's in Nursing (Family Nurse Practitioner) from Pittsburg State University, and a Master's in Health Administration from the Capella University. Tereasa has over 20 years of experience clinically that includes emergency, trauma, and primary care. Her passion for performance improvement and patient safety began in 2007 implementing Labette Health's Level III Trauma Program. Tereasa's expertise includes development of organization-wide performance improvement programs with a focus on quality and outcomes management in the complex healthcare environment. Tereasa and her husband Brad lives in Erie, Kansas. They have five children ranging from 30 to 11 years old, three grandchildren with another on the way this summer. For fun, Tereasa loves to spend time with her family and friends hanging out leisurely by the pool.



Michelle Lour graduated with her Bachelor of Science in nursing from Washburn University and received her MHSa at the University of Kansas. Michelle put her nursing skills to work in the Emergency Department at the University of Kansas Health System St. Francis Campus. Michelle extended her skills and transferred her passion to the Quality and Risk management role in 2017. She's been the Director of Risk Management and Compliance since 2020. When not working, Michelle enjoys spending time with her four children, eating good food, reading and playing games.

Your 2023 Board Members

President– Liz Carlton, RN, MSN, CCRN-K, CPHQ, CPPS

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KHA Liaison – Ron Marshall

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