

South Dakota  
Quality Collaborative  
**Call for  
Presentations**

2<sup>nd</sup> Annual Conference  
on Quality,  
Patient Safety and Value

**June 9, 2011**

**Best Western Ramkota Hotel**

**Rapid City, South Dakota**

**Submission Deadline: Friday, April 1, 2011**  
Download this application at [www.sdsma.org](http://www.sdsma.org)

The South Dakota Quality Collaborative is a joint undertaking of

# The South Dakota Quality Collaborative invites you to participate in the 2nd Annual Conference on Quality, Patient Safety and Value

## Introduction

This is a remarkable time for health care in South Dakota as the SDSMA and SDAHQ work collaboratively to improve health care quality, patient safety and value through the formation of the South Dakota Quality Collaborative (SDQC). In June, the SDQC will unite leaders from across the state to work toward the common goal of exceptional health care. SDQC encourages individual and team attendance, and the conference's target audience includes physicians, CEO's, CFOs, senior administrators, nurses, quality assurance professionals, trustees/board members, clinic managers, infection control professionals, hospital pharmacy directors, clinical pharmacists and other health care personnel.

## Call for Presentations

This Call for Presentations requests break-out session topics related to:

### ◆ Best Practice

*Presentations should reflect efforts or a change in practice that upon rigorous evaluation, demonstrates success; has had a positive impact on health care quality, value and or safety; and can be replicated.*

### ◆ Culture and Leadership

*Presentations should reflect an effort to create an organizational culture related to 1) improved quality or safety, or 2) enhanced engagement with patients and families.*

### ◆ Care Coordination (physician-focused)

*Presentations should demonstrate the successful transition or coordination of care among many different providers to avoid waste, over, or misuse of prescribed medications, and conflicting plans of care. Example topics: Accountable Care Organizations (ACOs), transitions of care, or re-admissions.*

## Proposal Selection

Members of SDQC Steering Committee will review proposals. Reviewers will evaluate the proposals using guidelines that include:

- ◆ Practical application of material
- ◆ Relevance to Annual Conference topics
- ◆ Timely or innovative issue
- ◆ Clearly defined objectives
- ◆ Demonstrable positive results
- ◆ Expertise of presenter
- ◆ Potential interest in information provided
- ◆ Balance of presentations by provider size and geographic location across South Dakota

## Additional Information:

- ◆ SDQC will send all applicants notice of their proposal status by Friday, April 15, 2011
- ◆ Proposal acceptance packets will include further information regarding conference specifics
- ◆ Conference registration fees are waived only for the primary presenter

# Presentation Application Form

**Deadline: Friday, April 1, 2011**

1. **Title of Presentation:** \_\_\_\_\_

2. **Abstract:** (Use no more than 50 words to describe the presentation's content. **This will be included in the program brochure.**)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. **Learning Objectives:** (Objectives for session participants are measurable and achievable, and begin with words such as *describe, explain, identify, design, and apply*. Examples: *Describe methods to measure hospital mortality. Learn the life-saving purpose of a RRT.* **These objectives will be included in the program brochure.**)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

4. **Primary Presenter:** \_\_\_\_\_

Suffix Credentials (e.g., RN) \_\_\_\_\_

Job Title \_\_\_\_\_

Department \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_

Email \_\_\_\_\_

List or attach a bio-sketch that includes educational background and briefly describes professional experience or areas of expertise. Please **DO NOT** send a CV.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **Additional Presenter Name:** \_\_\_\_\_

Suffix Credentials (e.g., RN) \_\_\_\_\_

Job Title \_\_\_\_\_

Department \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_

Email \_\_\_\_\_

List or attach a bio-sketch that includes educational background and briefly describes professional experience or areas of expertise. Please **DO NOT** send a CV.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **Session Topic Area:**

- Best Practice
- Culture and Leadership
- Care Coordination

7. **Style of Session:** (Please check all that apply.)

- Lecture
- Panel Discussion
- Interactive Seminar
- Workshop
- Case Study

8. **Target Audience:** (Please check all that apply.)

- CEO
- Hospital Senior Management
- Other \_\_\_\_\_
- Physician
- Quality Improvement
- Nurse
- Clinic Manager

9. **Audiovisual Requirements:** We will provide all AV equipment **EXCEPT** laptop computers. All rooms will be equipped with a head table and podium.

- Flip Chart
- Overhead Projector
- Video Projector (LCD)
- Other \_\_\_\_\_

Question or comments? Contact Mark East at SDQC: [meast@sdsma.org](mailto:meast@sdsma.org) / 605.336.1965.

Download this application at [www.sdsma.org](http://www.sdsma.org).

**\*\*This application is a self-mailer! Fold in half, seal, and affix postage.\*\***

You may also fax the application: Attn: Mark East 605.274.3274

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South Dakota Quality Collaborative  
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