Stability & Compassion: Leading Through Crisis in a Rural Community

Julie Lacy, CPA, MBA, FHFMA

President/CEO – Crete Area Medical Center

April Gaines, RN, MSN, Ed.D

CNO – Crete Area Medical Center

Compassion in the Face of Tragedy

Julie Lacy

President/CEO – Crete Area Medical Center

Agenda

- Introduction
- Compassion in the Face of Tragedy
- Stability Through Leadership and Preparedness
- Carrying Forward Stability and Compassion
- Questions and Discussion

Who We Are: Crete Area Medical Center

A small hospital with a deep commitment to our community.

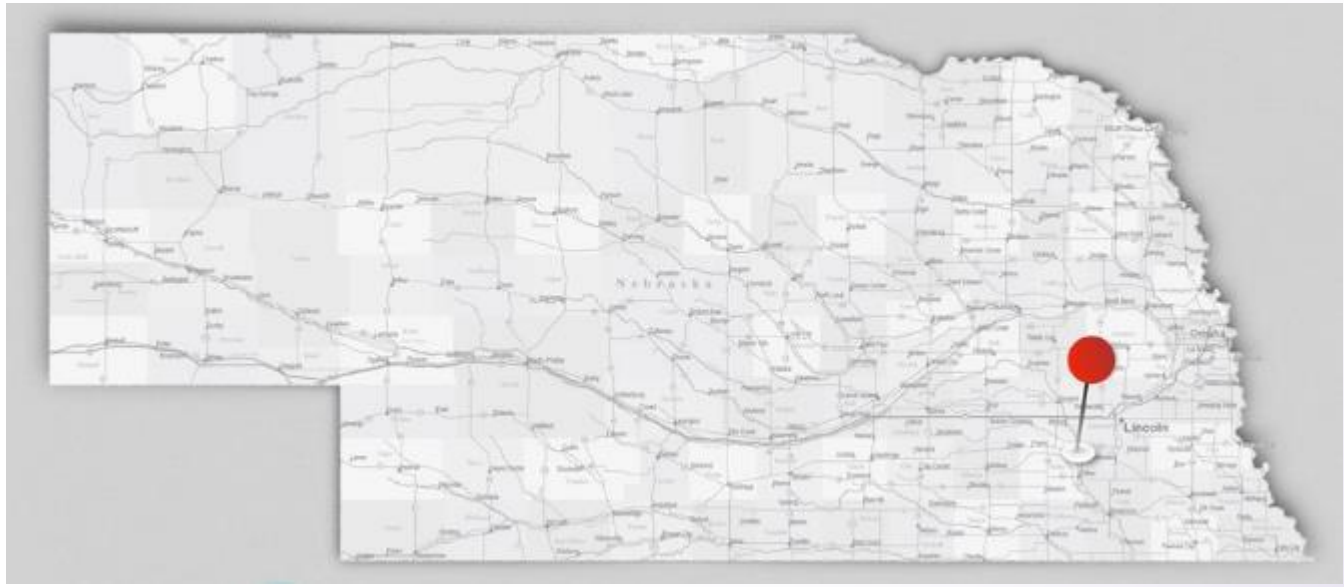
- **Hospital at a Glance**
  - 15 bed Critical Access Hospital
  - Celebrating 75 years – August 2025
  - 24/7 Emergency Department
  - 190+ employees
- **Our Medical Staff**
  - 3 Primary Care Physicians (including OB)
    - 64+ years combined experience
  - New Primary Care Physician
  - 1 Emergency Medicine Physician
  - 11 APPs

Bryan BEYOND 100

Crete, Nebraska: Our Community Context

- **Location & Demographics**
  - 20 minutes south of Lincoln
  - Population: 7,500+ (2023)
  - 49% Hispanic, diverse and vibrant

- **Community Strengths**
  - Police Dept. 8 Full-time officers
  - Volunteer Fire & Rescue: 50 members
  - Low crime rate
  - Major employers: Smithfield & Nestle-Purina
  - Education: Crete Public & Doane



Bryan BEYOND 100

June 28, 2024: A Day That Changed Our Community

- **This event tested us in ways we never imagined.**
- **That afternoon, our town faced an unthinkable tragedy.**
- **What happened**
  - **Mass shooting** in a Crete neighborhood
  - **7 victims**, many were children
  - **Shooter**: 74-year-old male, deceased by suicide
- **Emergency Response**
  - **First responders** arrived within minutes
  - **Law enforcement** secured the scene
  - **EMS and hospital staff** responded quickly

Leadership, Preparation, and Compassion called into Action

A Physician's Reflection: Dr. Russell Ebke

"I remember how incredibly angry I was that somebody would shoot children."

"I remember thinking how frightening it must have been for the kids, but the good part was our people."

"We had people that don't even normally have to be in the ED, who were not at work, who came in and that really impressed me."

Dr. Russell Ebke, CAMC Medical Director

What I Learned in a Crisis: My First Day As Interim CEO

1. **Leaders must be calm**, present and supportive
2. **You don't need all the answers** to make a meaningful difference
3. **Compassion, strong culture, and preparation** are the foundation of effective crisis response
4. **Our hospital proved its essential role** in the community during the crisis
5. **Empower your staff** to act quickly, and trust them to do it well
6. **Recognition matters**: take time to honor your people
7. **Build trusted relationships** with EMS, city leaders, and law enforcement, before a crisis

The Heart of our Response:
One year Later - Honoring the Staff Who Stood Strong

- **Why We Held the Ceremony**
  1. To recognize extraordinary courage and compassion
  2. To support healing for families, staff, and the community
  3. To reaffirm our strength and stability
  4. To say thank you in a meaningful way
  5. To Inspire continued hope and unity

What It Meant

1. Over 30 staff were honored by our Board
2. Team members from all departments were recognized
3. A reminder of the heart behind our mission

Bryan BEYOND 100

Stability Through Leadership and Preparedness

April Gaines

CNO - Crete Area Medical Center

Providing Stability in Chaos: Emergency Capacity & Staffing

- Crete Area Medical Center Emergency Department set up
  - 2 trauma rooms
  - 2 regular rooms
  - 1 minor care room (chair only, non-bed)

- Staffing
  - 1 Paramedic (Also ALS response paramedic)
  - 1 ED nurse, 2 Hospital nurses
  - 1 Advanced Practice Provider (APRN/PA)
  - 1 Physician on-call

June 28: Mass Casualty Response

- Scene included multiple blocks where EMS were staged as well as the active perimeter
- Scene was active – required Law Enforcement Protection to remove victims
- Initial report was single patient, but first responders were reporting multiple victims when on scene
- Injuries to victims included gunshot wounds to the head, chest, neck, abdomen and multiple extremities
- **Hospital paramedic** was one of the **first responders**, along with paramedics from Crete Fire & Rescue and crews from other local agencies via mutual aid request
  - Had other local counties offering/sending resources
- Media requests (called into dispatch) started 19 minutes after first 911 call
- CAMC received **4 pediatric patients**, with first arriving **23** minutes after the first 911 call
  - **2 additional patients** arrived later in the evening

Stability in Action: What went well

- Happened at end of clinic day
  - Nurses and providers from the clinic voluntarily reported to ED when heard about the incident
- Calling tree started by Nursing Leaders
- Incident Command stood up
- Cleared the ED of non-critical patients
  - Moved to another location in the hospital
    - Assigned nurse to care for those patients during incident
- Called in Maintenance on-call
- Had Interpreters available
- Had 1 ED trained nurse assigned to each room
- Assigned roles to additional staff (Monitor door, Answer ED Phones, Communication with EMS)
- All patients transferred out within 2 hours of arrival (Trauma metric)
- Reviewed instructions for media calls

Training that Made the Difference

- ESI – triage training for ED nurses
- Regular trauma education
- Incident Command training
  - Completed through Trauma education & through local Emergency management held trainings
- Emergency Preparedness training
  - Regular review of Mass Casualty event trainings & other Emergency Protocols
  - Multiple After Action Debriefs

Opportunities for Improvement

- Assigning providers to patients/rooms (similar to nurses)
  - Some confusion with who was giving orders on what patient
- Sending out a Mass Communication to staff
  - Multiple staff calling in to see if we needed more help
- Facility lockdown timing
  - Was an active scene when patients arrived
- Communication between hospital and EMS/Dispatch
  - Confusion as to how many patients we would be receiving

Supporting Staff After the Crisis

- Debrief immediately following event that evening
- Official debrief with member from our EAP the next week
- Consistent check in with those struggling
  - Offering additional EAP as needed
  - We checked in regularly to ensure no one felt alone
- Trauma Case Reviews
  - 3 weeks following event
  - Invited all agencies involved in the event
    - Police, EMS, dispatch, and CAMC staff

Looking Ahead: Sustaining Stability and Compassion

1. Strengthen emergency preparedness and response systems
2. Expand trauma partnerships
3. Continue supporting our staff emotionally and professionally
4. Continue to deepen our commitment to the Crete community through trusting relationships and compassionate care.

Discussion & Questions