

Room Kingfisher

Multidimensional Framework for Workplace Violence Prevention

Claude Stang, RN, MA, Executive Director, Clinical Operations, Emergency Department, Cedars-Sinai

Robert L. Parks, Chief/Executive Director, Security, Cedars-Sinai

Ed Becker, Executive Director, Environmental Health and Safety, Cedars-Sinai

(Moderator) **Clare Lee, MBA, FACHE**, Vice President, Operations, Cedars-Sinai

Tuesday, April 21, 1:20 to 2:20 p.m.

Workplace violence is rising across health care settings, and fragmented responses are making it worse. At Cedars-Sinai, leadership took a different tack. Every reported incident — whether a near miss or an assault — receives 100% follow-up, fast:

- Climate surveys feed into data-driven huddles
- A 24/7 security center monitors CCTV, access control, duress alarms and weapons detection
- A threat management committee and an ED safety task force provide cross-functional accountability

The result? Staff see their reports translating into action, which has driven steady increases in reporting and reductions in incident severity. This session shares the framework, technology and cultural levers that make it work.

Key Takeaways

Pairing robust data with timely, compassionate follow-up builds a culture of reporting. Security works best as a system, integrating executive strategy, frontline response and smart technology. Staff stay engaged when people see their concerns lead to real action.

Room Laviana

From ED to Post-acute: Using AI to See the Whole Patient, Cut Costs and Improve Outcomes

Megan Simon, MHA, Manager, Office of Population Health and Accountable Care, UCLA Health

Gina L. Sulmeyer, MD, Executive Director of Medical Informatics, Torrance Memorial Medical Center

Evan Cantor, Senior Account Executive, PointClickCare

Tuesday, April 21, 1:20 to 2:20 p.m.

When patients arrive in the ED from a skilled nursing facility (SNF), clinicians often lack key context — recent changes, medications or reasons for transfer. This session explores how AI closes those gaps by surfacing real-time SNF data within ED workflows, enabling faster triage, clearer handoffs and more informed decisions. It also highlights extending visibility into the post-acute journey through real-time data and predictive insights, supporting stronger coordination with SNF partners, earlier intervention and better outcomes by reducing avoidable ED returns and readmissions.

Key Takeaways

Delivering timely SNF context at ED triage improves coordination and reduces delays and unnecessary utilization. Predictive insights during SNF stays enable earlier interventions, better-aligned care plans and fewer rehospitalizations — helping hospitals improve outcomes while supporting throughput, cost management and value-based performance.

Room Mariposa

Less Sirens, More Sense: Nurse Navigation + Physician Telehealth for 911

Dany Accilien, MD, MBA, Chief Medical Officer,

RelyMD; Vice President, AI and Innovation, ApolloMD

Gerad Troutman, MD, MBA, Associate Chief Medical Officer, Global Medical Response

Tuesday, April 21, 1:20 to 2:20 p.m.

When a low-acuity 911 caller doesn't need an ambulance, what happens? In most systems, they get one anyway. RelyMD and Global Medical Response set out to change that. Their 911 Nurse Navigation program, already operating in Riverside County, California, places nurse navigators as the first clinical decision point. When callers' needs exceed what nursing protocols can address, they're transferred via telehealth directly to an emergency medicine physician — not as a consult for the nurse, but as a real-time patient handoff. This session walks through the full workflow: intake, triage, physician referral and escalation criteria. Attendees will leave with a replicable playbook covering staffing models, overnight coverage, clinical governance, documentation and a performance dashboard built for partner accountability.

Key Takeaways

Physician availability and minimal coverage gaps are the foundation for EMS trust. Shared, precise definitions of encounter types are essential for credible ROI conversations. Streamlined handoffs between nurse navigation and physician telehealth make the model scalable.

Room Kingfisher

Hospital Full-risk Capitation Programs — The Financial Impact to Hospitals

Steve Popkin, Senior Advisor, Zephyr Healthcare Advisors
Eric Themm, CEO, Zephyr Healthcare Advisors
Deb DuRoff, MPA, Vice President, Managed Care, CHA Hollywood Presbyterian Medical Center

Tuesday, April 21, 2:30 to 3:30 p.m.

Full-risk capitation arrangements can look strong on paper — until you look closely at what's actually hitting the bottom line. Zephyr Healthcare Advisors was brought in to assess a large independent Southern California hospital whose full-risk program, spread across six medical groups and four MSOs, had drifted substantially off course. Draw rate agreements hadn't been renegotiated in years; risk pool audits had lapsed. This session shares what the assessment found, how it was followed up and what hospital leaders need to know before entering or continuing in these arrangements.

➤ Key Takeaways

Evaluate capitation success on profitability, not revenue: Compare effective per diem rates across your payer mix. The MSO your medical group uses has an inherent conflict of interest; hospitals need independent oversight. Putting capitation programs on autopilot is how hospitals quietly lose money — actively managing them is essential.

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Room Laviana

AI and Robotics in Healthcare: UV Disinfection and Data Sensors in Real-world Use

Greg Mahdesian, Head of Partnerships and Government Affairs, Servicon
Charlie Elwell, Senior Regional Director, Healthcare, Servicon
Ryan Anderson, Director of Healthcare Sales, Servicon
Victor Pena, MBA, Administrator, Department of Emergency Medicine, Los Angeles General Medical Center

Tuesday, April 21, 2:30 to 3:30 p.m.

AI and robotics are no longer pilot projects in health care—they're operational tools. This panel focuses on two platforms already in use at Los Angeles-area hospitals. Akara's autonomous UV disinfection robots use real-time AI to improve infection prevention reliability in patient rooms and surgical suites. SpaceBot's occupancy and movement sensors give environmental services teams data-driven insights into space utilization, driving improvements in cleanliness and labor efficiency. Hospital leaders from Los Angeles General Medical Center will share results from live deployments, including infection prevention outcomes and patient satisfaction impact.

➤ Key Takeaways

AI-enabled UV disinfection improves infection prevention reliability without adding staff hours. Space utilization data is a direct lever for better cleanliness outcomes and reduced labor costs. With both platforms in active use today, this session will highlight actual results and benefits for hospitals.

Room Mariposa

From Community to Capitol: Messaging, Trust and Advocacy in an Era of Coverage Loss

Adam Blackstone, Senior Vice President, Communications and Event Management, HASC
Stephanie Cohen, Vice President, Government and Industry Relations, Cedars-Sinai
Misty de Lamare, Director of Communications, L.A. Care Health Plan
(Moderator) **Diane L. Martin, MBA**, Chief Marketing Officer and Managing Partner, Macan & Company

Tuesday, April 21, 2:30 to 3:30 p.m.

The One Big Beautiful Bill Act has triggered coverage losses, reduced care access and fewer safety-net options for millions of Californians. For hospital and health system leaders, the communications challenge is as consequential as the policy itself. This session brings together communications and government relations executives to share how they are responding. Communications leaders will address how they're managing patient and community concerns, countering misinformation and maintaining trust as disruption unfolds. Government relations leaders will discuss how they're translating community impact into narratives that move policymakers to act. Together, speakers will outline a coordinated approach that keeps public messaging and advocacy aligned.

➤ Key Takeaways

Empathetic communication builds the community trust that gives advocacy its credibility. Transforming human impact into policy narratives is a skill that can be systematized. Coordinated messaging between communications and government relations produces better outcomes than either role working alone.