



Thursday, January 20, 2011

CHA and The William W. Backus Hospital Host Sessions on Treating Psychiatric Patients in the ED

On Thursday, January 13, CHA and The William W. Backus Hospital hosted two, half-day educational sessions on “The Care of Psychiatric Patients in Emergency Settings.” More than 135 hospital representatives convened for the sessions, despite the residual impact of a significant snow emergency.



In his introduction, James O'Dea, PhD, Assistant Vice President, Program Operations, at Backus Hospital (*pictured left*), pointed out the timeliness of the topic. Dr. O'Dea focused on the challenge of creating a safe and therapeutic environment for psychiatric patients within emergency departments (EDs), which are focused on rapid diagnosis and streamlined procedures. He stressed that the system of care in each ED needs to be developed for the local community, and must be evaluated and designed in light of other community services and support systems. Psychiatric

services in the ED must be responsive, adaptable, and flexible, according to Dr. O'Dea, and the work is never done.



Dr. O'Dea introduced the keynote speaker, Scott Zeller, MD, the Chief of Psychiatric Emergency Services at Alameda County Medical Center in Oakland, CA (*pictured left*). Dr. Zeller is also President of the American Association of Emergency Psychiatry, and co-editor of *Emergency Psychiatry: Principles and Practice*. Dr. Zeller's lively presentation underscored Dr. O'Dea's point about community-focused care and stressed there are multiple models of emergency psychiatric care delivery. He reviewed a number of key treatment approaches, with a particular focus on forming therapeutic alliances. He discussed the importance of suicide prevention in emergency psychiatry and spoke at length about suicide, which is one of the top 10 causes of death in this country.

Statistics show that 6-10 percent of all ED visits are mental health-related, and having a well organized and collaborative care environment in place to treat these patients is essential. Dr. Zeller stressed the importance of good patient evaluation and knowledge of suicide risk factors in effectively managing psychiatric patients in emergency settings.

Following Dr. Zeller's presentation, a panel discussion on ED approaches to handling psychiatric patients included (*pictured below, from left to right*): Seth Powsner, MD, Chief of Psychiatric Emergency Services, Yale-New Haven Hospital and President-elect of the American Association of Emergency Psychiatry; Rose Zmyslinski, APRN, Attending Practitioner, The William W. Backus Hospital, and adjunct faculty member at St. Joseph's College; Louise Pyers, Criminal Justice Project Director at NAMI-CT and Executive Director and Founder of the CT Alliance to Benefit Law Enforcement (CABLE), Inc. The afternoon panel discussion included Karen Kangas, EdD, the Executive Director of Advocacy Unlimited.



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US House of Representatives Votes to Repeal Healthcare Reform; Governor Malloy Responds

Late yesterday, Governor Dannel P. Malloy responded to Wednesday's vote in the US House of Representatives to repeal the Patient Protection and Affordable Care Act (PPACA). The vote was 245-189 in favor of repeal, with three Democrats joining the entire Republican caucus in the majority. Connecticut's entire Congressional delegation voted against the repeal.

"No one can deny that reform of our country's healthcare system is badly needed," Governor Malloy said. "But today's vote is a step backwards in Congress's efforts to ensure that families, seniors, and small businesses have access to affordable care. Federal healthcare reform will help free families from having to worry about whether their coverage could be dropped, limited, or capped when it is needed the most. Repeal would put millions of federal dollars our state and hospitals are eligible to receive at risk, in addition to affecting thousands of Connecticut residents who are already benefitting from this law."

Governor Malloy thanked Connecticut's House delegation for standing up against the repeal. "My administration will continue actively working with them to ensure that our state receives its fair share of federal dollars and make sure that healthcare reform is implemented in Connecticut in a cost-effective and consumer-friendly way."

Last year CHA worked with Connecticut's Congressional delegation on the passage of healthcare reform, to ensure that the bill reflected the best interests of the state's healthcare consumers, patients, and hospitals. CHA supports federal healthcare reform as a means of achieving greater access to care for all Americans. Click [here](#) for the full statement.

Readmissions Collaborative Hears About "Heart Failure Navigator" Role

On Wednesday, January 19, CHA's Reducing Heart Failure Readmissions Collaborative heard a presentation on the Heart Failure Program and the new role of "Heart Failure Navigator" at Novant Health's Presbyterian Hospital in Charlotte, NC. One of the contributing factors in reducing readmissions for heart failure (HF) patients can be appropriate staffing to focus on the issue, and the development of this new role had an impact on the hospital's readmissions rate.

Jodie Bessinger, BSN, MSN, and Theresa Waldron, BS, RN, from Presbyterian Hospital explained how they were able to develop a Heart Failure Navigator for their hospital, a role funded by a grant from a hospital foundation. The purpose of the navigator role was to improve HF patient outcomes and enhance communication between patients and practitioners. At Presbyterian Hospital, the navigator reviews daily admission lists and identifies HF patients, who are seen twice in the hospital by the navigator for education and reinforcement of goals. Home transition is coordinated with an interdisciplinary team, and the navigator ensures that a post-hospital provider visit has been scheduled and that transportation is available.

The navigator for this 531-bed hospital has had success over the last two years in reducing their readmission rate to less than 8 percent. One of the main lessons Ms. Bessinger and Ms. Waldron have learned in the course of the program is that their educational material to HF patients was too robust—they realized they were initially overwhelming patients with information that was too much to absorb in the acute care setting. They are continuing to refine the role to add home visits and community events that focus on prevention.

For more information on the Readmissions Collaborative, contact Alison Hong, MD, CHA's Interim Vice President of Patient Quality and Safety at hong@chime.org.

Hearings Held on Commissioner Nominees

This week the Executive and Legislative Nominations Committee held two hearings on the nominations of several key appointments made by Governor Dannel Malloy. The Executive and Legislative Nominations Committee is charged with reviewing the qualifications of all executive and legislative branch nominees and making a recommendation to the General Assembly. The nominations included Commissioner of the Department of Children and Families (DCF), Secretary of the Office of Policy and Management (OPM) and Commissioner of Mental Health and Addiction Services (DMHAS).

On Tuesday, January 18, a hearing was held for the nomination of Joette Katz, current state Supreme Court Justice, who was picked by Governor Malloy to serve as the Commissioner of the Department Children and Families (DCF). During the hearing, Justice Katz stated that she would seek to utilize the resources of DCF more productively in order to reform an agency that is often considered unmanageable, inefficient, and unresponsive to those they serve. During the committee proceedings, Justice Katz said that she will soon propose relaxing some rules that are imposed on relatives who want to care for family members in their homes, but can't. Lawmakers on the panel also asked if, as commissioner, she intends to close Riverview Hospital, which houses about 215 children with mental health issues. Justice Katz responded that the closing of Riverview was not on her agenda for the year.

After ninety minutes of questioning, lawmakers on the panel unanimously approved Justice Katz's nomination. She is not expected to face any opposition in getting her final confirmation vote in the state Senate.

Today, hearings were held for former State Senator Donald DeFronzo, nominated as Commissioner of Administrative Services; Benjamin Barnes, nominated as Secretary of the Office of Policy and Management; and Patricia Rehmer, nominated to be Commissioner of Mental Health and Addiction Services. Nomination hearings were also held for Robert Ward, former Commissioner of the Department of Motor Vehicles and former Representative John C. Geragosian, both nominated to the Office of Auditor of Public Accounts. These hearings were still being held at the time of publication. Any information of interest to hospitals will be reported in the next week's *Update*.

CHA to Host 2011 Healthcare Executive Summit on Health Reform on January 26



International health strategy consultant, lecturer, and author James E. Orlikoff will provide the keynote address at CHA's 2011 Healthcare Executive Summit on health reform implications for hospitals, physicians, and boards. Jamie Orlikoff has been involved in leadership, quality, and health strategy issues for more than 30 years and currently is National Advisor on Governance and Leadership to the American Hospital Association and Health Forum, and Senior Consultant to the Center for Healthcare Governance. The Summit will also include presentations on Accountable Care Organizations (ACOs) and clinical integration—including the legal implications of ACOs, and a session on physician-led approaches to managing medical staff quality and financial performance.

Click [here](#) to view the brochure; click [here](#) to register.

Education Updates

Rescheduled Date: OPPTS Final Rule for 2011, Thursday, January 27, 8:30 a.m. - noon

The Centers for Medicare and Medicaid Services (CMS) has published the Outpatient Prospective Payment System (OPPS) Final Rule for 2011, defining what CMS will be implementing for OPPTS in 2011. The Final Rule documents CMS's final decisions regarding its proposed changes, including composite Ambulatory Payment Classifications (APCs), drug administration, visits, partial hospitalization, implantable biologicals, physician supervision (more changes), pulmonary rehabilitation, cardiac rehabilitation, reduced payments for therapy services, and new codes for 2011. In addition, the Final Rule continues to address quality reporting of outpatient services.

This program is approved for 3.0 hours of Category II credit through the American College of Healthcare Executives (ACHE).

Click [here](#) for the brochure; click [here](#) to register.

NNSDO Professional Development Certification Preparation Course, Thursday, January 27 and Friday, January 28, 8:00 a.m. – 5:00 p.m.

This two-day Certification Preparation Course, requested by several member hospitals, will prepare participants for the American Nurses Credentialing Center (ANCC) generalist certification examination in nursing professional development.

Designed to provide an extensive review of the staff development curriculum and a practice exam, this is a good foundation course for those new to staff development in addition to those wishing to sit for the certification examination.

At the conclusion of this program, participants will be able to: explore the knowledge and strategies needed to successfully prepare for the certification exam for Nursing Professional Development; review the foundations of practice for Nursing Professional Development; identify the steps and key elements in the educational process; compare the various roles of the Nursing Professional Development practitioner; discuss critical elements for managing educational activities; and develop a personalized plan for continued preparation by completing and reviewing results from a practice test.

Mary Harper, PhD, RN-BC, will be the program speaker. Dr. Harper's experience in nursing professional development enabled her to contribute a chapter to the *Core Curriculum for Nursing Staff Development, 3rd edition*, and to be a part of the ANA/NNSDO work group that revised the Scope and Standards for Nursing Professional Development in 2010. Dr. Harper serves as a Director on the NNSDO Board of Directors and represents NNSDO in the ANA Congress for Nursing Practice and Economics. She is certified in Nursing Professional Development and is the mentor for clinical faculty at Western Governors University where she teaches staff nurses in partner hospitals to coach BSN students in the clinical setting.

This continuing nursing education activity was approved by the Georgia Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation (16 contact hours).

Click [here](#) for the brochure; click [here](#) to register.

Eliminating Preventable Harm Through FMEA, Tuesday, February 15, 2011, 8:30 a.m. – 3:30 p.m.

Failure mode and effects analysis (FMEA) has become a centerpiece in today's proactive patient safety improvement initiatives. Although many healthcare organizations began using FMEA to meet Joint Commission standards, the technique has turned out to be a very effective process improvement strategy. However, misconceptions or misapplication can turn FMEA into a laborious project that generates a lot of paper work without sustainable patient safety gains. In this workshop, participants learn how to harness the power and benefits of FMEA for their organization by avoiding common pitfalls and concentrating efforts on making sustainable safety improvements.

At the conclusion of this program, participants will be able to: describe the steps required to implement an effective failure mode and effects analysis (FMEA); determine how to identify the potential failures in high-risk patient care processes and select failures most in need of prevention; identify and avoid common errors that turn FMEA into a "paper work" exercise rather than a tool to prevent harm; and integrate FMEA projects into the organization's quality improvement strategy.

The program's speaker, Patrice L. Spath, is a Healthcare Quality Specialist, teacher, and author, who over the last 25 years has presented more than 300 training programs on quality improvement, case management, outcomes management, and patient safety improvement topics for hospitals and healthcare organizations, including past programs at CHA. She has also authored numerous books and journal articles on these subjects for the American Hospital Association, Health Administration Press, and the American Health Information Management Association.

Click [here](#) for the brochure; click [here](#) to register.