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[Printer-Friendly Version](#)

In This Issue:

[Best Practice Resource Developed to Prevent Infections](#)

[Connecticut Residents Affected by West Nile Virus](#)

[Upcoming Financial Training Programs at CHA](#)

[National Association of Health Services Executives Social](#)

[Education Update](#)

[Update Archives](#)

Best Practice Resource Developed to Prevent Infections



American Hospital Association

Earlier this week, the American Hospital Association (AHA) and the Centers for Disease Control and Prevention (CDC) published best practices on using the healthcare physical environment to prevent infections. *Using the Health Care Physical Environment to Prevent and Control Infection: A Best Practice Guide to Help Health Care Organizations Create Safe, Healing Environments* contains information on case studies and resources. The [materials](#) are intended for infection preventionists, healthcare facility managers, and anyone else involved in designing, building, and operating healthcare facilities.

The new guidance was produced by two groups within the AHA—the Health Research & Educational Trust (HRET) and the American Society for Health Care Engineering—as part of a three-year CDC initiative to improve the implementation of infection prevention and control efforts in U.S. hospitals. The document, which can be downloaded [here](#), contains guidance on infection control risk assessments; hand hygiene infrastructure; reprocessing; cleaning of environmental surfaces; water-related environmental infection control; and flow of patients, personnel, equipment, and waste.

Connecticut hospitals have always been dedicated to reducing the incidence of hospital-acquired conditions and providing the best quality care to patients and have participated in multiple efforts to reduce infections through the CMS Partnership for Patients and through the HRET Hospital Improvement Innovation Networks (HIIN). As HIIN winds down this year, Connecticut had the opportunity to participate in the CDC-funded ICU Comprehensive Unit-based Safety Program with HRET. Seven hospitals from Connecticut, three hospitals from New Hampshire, and one hospital from Maine are participating with CHA. Connecticut's hospitals also participate in the CDC's Emerging Infections Program (EIP) through the CT Department of Public Health. The EIP focuses on reducing central line-associated bloodstream infections, C. diff, MRSA, and multiple drug-resistant organisms.

Connecticut Residents Affected by West Nile Virus



More Connecticut residents have tested positive for the West Nile Virus, bringing the total for this season to five human cases. The most recent case was diagnosed in a child from Newington, who became ill in August with fever and headache. Laboratory tests confirmed the presence of West Nile Virus antibodies in the child. The child, who is between 5-10 years of age, was not hospitalized.

According to the Department of Public Health Commissioner Raul Pino, MD, the West Nile Virus season will not end until the first hard frost in the fall.

West Nile virus has been detected in the state every year since 1999. Before 2018, 134 human cases of West Nile Virus were diagnosed in Connecticut residents, including three fatalities. Last year, three Connecticut residents were diagnosed with the infection.

Upcoming Financial Training Programs at CHA



CHA is offering two finance-focused training programs presented by William Ward Jr., Director of the Master of Health Science in Health and Finance Management program at the Johns Hopkins Bloomberg School of Public Health, and Principal with Healthcare Management Resources, a Baltimore-area consulting firm.

The first program, [Managing the Operating Budget](#), will be held on Wednesday, September 12, 2018. The full-day program will introduce managers to a variety of analytic tools (revenue and spending analysis, volume-adjusted variance analysis, work process and root cause analysis, and revenue and expense forecasting) as well as a number of strategies to improve revenue and expense performance.

On Thursday, September 13, 2018, Mr. Ward will provide managers and clinicians with [Financial Analysis Tools for Managers](#). This day-long program will enable participants to prepare an ad hoc financial analysis to better understand performance or soundness of an opportunity; support business decisions using a marginal profit and loss analysis; use benefit/cost analysis and break-even analysis to determine if an opportunity makes sound financial sense; and calculate the return on investment for any opportunity.

National Association of Health Services Executives Social



The Connecticut chapter of the National Association of Health Services Executives (NAHSECT) is inviting members, non-members, and healthcare executives to enjoy an evening of wine, good food, and great conversation at a social to toast Autumn's arrival. This will be a great opportunity to mingle with old friends and get to know some new ones.

The event is Friday, September 28, 2018, from 5:30 p.m. to 8:00 p.m., at Chamard Vineyards in Clinton, Connecticut. For registration and ticket information, click [here](#).

NAHSE is a not-for-profit association of healthcare executives founded in 1968 for the purpose of promoting the advancement and development of Black healthcare leaders, and elevating the quality of healthcare services rendered to minority and underserved communities.

Education Update

Staff to Management: Starting the Transition

Friday, September 14, 2018

9:00 a.m. - 3:00 p.m.

[Event Registration](#)

Making the transition from being a staff person one day to a supervisor/manager the next is a significant step. Transitioning from individual contributor to being effective in a leadership role is far more challenging and complicated than ever before and requires the ability to use the tools of diplomacy, negotiation, persuasion, and alliance-building to a greater degree than one used in the past. Managing the demands of the organization for high productivity and quality, combined with financial prudence and regulatory compliance, are only part of the equation. Participants will discover that those tasks must be balanced with an excellent grasp of human relations skills in working closely and collaboratively with others and managing change.

HIIN: Expanding the Definition of Adverse Drug Events

Monday, September 17, 2018

9:00 a.m. - 4:00 p.m.

[Event Registration](#)

The session will focus on adverse drug events in all venues and the state's response to the opioid crisis. The program will include an overview of how Good Samaritan laws operate in Connecticut and a special session to train participants in the use of Naloxone. Although pharmacy credits are available, this program will not meet the training or certification requirements that specifically allow pharmacists to prescribe Naloxone independently or dispense Naloxone pursuant to a pharmacy's "standing order" from a prescribing practitioner. However, the program will provide an overview of how those certifications can be obtained. Continuing education credits for pharmacists, physicians, nurses, and quality professionals will be offered. This session is supported by HIIN.

Peer Supporter Training

Thursday, September 20, 2018

9:00 a.m. - 4:30 p.m.

[Event Registration](#)

Gerald Lewis, PhD, will provide training for peer supporters and those who will train peer supporters in their organizations. Dr. Lewis has worked with national and international government agencies, healthcare facilities, educational institutions, and private businesses on a wide range of work, behavioral health, and organizational issues. His focus is facilitating organizational recovery and resiliency with the emphasis on "people-recovery."

HRO Cause Analysis - Two-Day Training

Tuesday, September 25, 2018

Wednesday, September 26, 2018

Participants should attend both days.

8:30 a.m. - 4:30 p.m.

[Event Registration](#)

This two-day session will be held from 8:30 a.m. to 4:30 p.m. on September 25 and 26, 2018. Cause analysis teaches staff how to evaluate events, patterns of events, and causes of events, and then helps staff ascertain how to implement solutions. The sessions are for quality, safety, risk management, and other staff who respond to events.

Lean Principles: Project Charter Preparation and Planning

Thursday, September 27, 2018

9:00 a.m. - 2:30 p.m.

[Event Registration](#)

Lean principles and methodology are valuable in improving healthcare, but evidence shows that learning about the principles and methodology is simply not enough. To get the desired results, the principles must be applied. This program, a follow-up to CHA's two-part *Lean Principles: Process Flow and Value Stream Mapping in Healthcare*, provides an overview of the methodology and tools needed for planning process improvement initiatives.

Participants are asked to bring a process improvement opportunity currently under consideration at their facility, enabling them to create a draft charter as part of their actionable plan toward their process improvement initiative.

