Hospitals Gather for Joint Commission Standards and Patient Safety Update

On January 22, more than 100 people from hospitals across the state participated in the 2015 Joint Commission Standards and National Patient Safety Goals Update.

Mark Crafton, Executive Director of Communications and External Relations, The Joint Commission (TJC), and Ann Scott Blouin, RN, PhD, Executive Vice President of Customer Relations, TJC, presented a comprehensive update on the 2015 Joint Commission Standards and National Patient Safety Goals.

Subjects covered included the Centers for Medicare & Medicaid Services (CMS) survey process changes, new developments in hospital options for the submission of core measure data to TJC, revised requirements for diagnostic imaging services, and compliance data on challenging accreditation standards in Connecticut hospitals.

Ms. Blouin said that TJC is working to move healthcare toward becoming a high reliability industry. “The Joint Commission is focused on identifying solutions to serious patient safety and quality issues, and it is focused on aligning activities and initiatives consistent with emerging payment reform and new healthcare delivery models,” she said.

Diana Scott, RN, Senior Director, Accreditation Services, VHA, discussed what’s new and different from 2014. She reviewed survey process changes incorporating the new patient safety systems chapter, second generation tracers for nutrition services, ambulatory clinics, and surgical services, as well as best practices for a successful survey. She stressed the importance of preparedness. Ms. Scott also reviewed best practices to meet the most challenging standards and led an interactive exercise for the group to generate new ideas.

Support Partnership Campaign to Preserve Property Tax Exemption

During the 2014 Legislative Session, a bill was proposed that would have eliminated the property tax exemption for not-for-profit hospitals and colleges; the measure did not pass into law. Although the language of such a bill has not been drafted for the 2015 Legislative Session, the media is reporting that a bill will be drafted that will contain a provision levying a property tax on any newly built or acquired property. Not only would such a measure fly in the face of 200 years of history, but it would make costs go up, and would negatively affect all Connecticut residents.

Connecticut’s not-for-profit hospitals are exempt from paying property taxes because of the critical role they play in the community. Changes to the PILOT structure that compel not-for-profit hospitals to pay property taxes would impose a new and unprecedented financial burden on hospitals. To preserve the property tax exemption, CHA has been working with the Connecticut Conference of Independent Colleges on a campaign called #FutureCT. We invite you to join this campaign by composing a letter of support to legislators by clicking here, and by following updates on Facebook and Twitter.

Meanwhile, the State Tax Panel is scheduled to meet next Thursday, January 29, 2015. Among other responsibilities, the panel will evaluate the feasibility of creating a tiered property tax payment system that includes any property owned by the state and not-for-profit hospitals, colleges, and universities for which the state made a PILOT payment to the host municipality or any not-for-profit entity. The panel may consider recommending the assessment of a “community benefit fee” on any tax-exempt property, thus taxing property of not-for-profit hospitals, colleges, and universities, and requiring these entities to report the value of their real and personal property.

CHA Offers Public Comment on SIM Quality Measures

Update Archives
On January 21, Mary Cooper, MD, Vice President and Chief Quality Officer, CHA, provided public comments to the Healthcare Innovation Steering Committee’s Quality Council Work Group. The work group, part of the State Innovation Models (SIM) initiative, is developing ways to track and measure quality improvement.

Dr. Cooper commended the Quality Council on the development of its ten Guiding Principles to assist Council members in taking a standardized and scientific approach to measurement during the consensus process.

In her letter, Dr. Cooper recommended that the Council adopt established and valid measures from the Medicare Shared Savings Program, the Medicaid Adult and Child Health Care Quality Measures, and the Physician Quality Reporting System. She informed the Council that the CHA Board endorsed the Association of American Medical Colleges’ (AAMC) “Guiding Principles for Public Reporting of Provider Performance,” and said CHA supports the principle of accountability through quality reporting if the measures used are meaningful, in that they serve a purpose, are transparent, and are scientifically valid.

As a stakeholder in reforming the delivery of care, CHA is working with the representatives of the hospital community to coordinate input and comments as the final details of the reforms to the payment and care delivery models are discussed. Dr. Cooper will provide oral comments at the Council’s next meeting in February.

Currently, at least 14 representatives of the hospital community along with a number of physicians participate on the various SIM workgroups and Pat Charmel, President and CEO of Griffin Hospital, serves as a member of the Healthcare Innovation Steering Committee.

Governor Announces Emergency Budget Cuts

On January 20, 2015, Governor Dannel Malloy announced that his administration will order a second round of emergency spending cuts due to a current year budget deficit of more than $120 million. No specifics of the budget cuts have been made public. When Gov. Malloy ordered emergency cuts two months ago, the deepest cuts fell on social services, education, and culture and tourism promotion.

In addition to the budget deficit, the Office of Policy and Management (OPM) also reported that various state agencies are running budget cost overruns totaling $50 million, with most overspending attributed to the Medicaid program.

If the deficit continues to increase and reaches at least one percent of this year’s $17.5 billion general fund budget, the Governor will be required to propose a deficit-mitigation plan.

OPM Secretary Ben Barnes stated, “We will announce additional rescissions (emergency cuts) in the very near future and additional actions may be required to address the projected change in operating balance.”

Existing law gives the state’s chief executive discretion to reduce most accounts unilaterally by up to five percent whenever “the Governor determines that, due to a change in circumstances since the budget was adopted, certain reductions should be made.”

Nonpartisan analysts from the Office of Fiscal Affairs (OFA) are projecting a deficit of more than $1.3 billion built into the next fiscal year, as well as a $1.4 billion shortfall in FY 2016-17.

The Governor must propose a budget to solve those deficits on Wednesday, February 18, 2015.

Education Updates

HRO Creating Sustainability for High Reliability Organizations
Tuesday, January 27, 2015
9:00 a.m. - 12:00 p.m.
Event Registration

This session is for leaders in the organizations that have trained staff in high reliability behaviors and practices and are looking for techniques to improve the likelihood that high reliability does not become a "flavor of the month."

HRO Safety Coach Training
Tuesday, January 27, 2015
1:00 p.m. - 4:00 p.m.
Event Registration
Monday, February 9, 2015
9:00 a.m. - 12:00 p.m.
Event Registration

Safety Coaches are peer mentors who help remind employees about the safety practices and behaviors that your organization has adopted.

HRO Leadership Method Training for Hospitals
Wednesday, January 28, 2015
9:00 a.m. - 4:00 p.m.
Event Registration
Tuesday, February 10, 2015
9:00 a.m. - 4:00 p.m.
Event Registration

This Leadership session is for new Level 3 hospitals and any new hires in previously trained Level 3 hospitals. Leadership sessions teach the science of safety and behaviors and practices of High Reliability organizations.

HRO Rounding to Influence
Monday, February 9, 2015
1:00 p.m. - 4:00 p.m.
Event Registration

Rounding to Influence is for leaders who want to learn how to be more effective up on the units, when they are coaching staff and reinforcing behaviors.

Lean Principles: Process Flow and Value Stream Mapping in Healthcare
Session 1: Wednesday, February 11, 2015
9:00 a.m. - 2:00 p.m.
Event Registration
Session 2: Wednesday, February 18, 2015
9:00 a.m. - 2:00 p.m.
Event Registration

As the demands of health reform drive change in all areas of healthcare delivery, hospital leaders are focused on transforming their organizations through strategies that simultaneously increase revenue and sharply reduce costs. Lean principles offer leaders a management system and methodology that
eliminates road blocks and allows hospitals to improve the quality of care for patients by reducing errors and waiting times. It is a systematic approach to reducing costs and risks, while simultaneously setting the stage for growth and expansion.

This two-session program will explain the value of applying Lean principles and methodology to improve healthcare—by providing examples of specific benefits that accrue when the people that actually do the work look at the details of processes and fix things where the work is done. Starting with a basic definition of Lean concepts and management methods, participants will learn how to define value for the patient (the customer) and eliminate common wastes in healthcare. Because one of the essential tools in applying Lean thinking is Value Stream Mapping (VSM), participants will learn how to use this technique through an interactive mapping exercise, which will have immediate "back home" application for understanding process flow and its impact on making measurable improvements.

Participants must attend both sessions, which will be presented following registration and a light breakfast at 8:30 a.m., from 9:00 a.m. to 2:00 p.m.

HIPAA Privacy and Security Basics
Thursday, February 12, 2015
9:00 a.m. - 2:30 p.m.
Event Registration

This program will review the current HIPAA Privacy, Security, and Breach Rules, with an emphasis on recent enforcement actions by the Office for Civil Rights and an overview of the newly announced government audit targeting HIPAA compliance. The program information includes strategies for maintaining continuous compliance, a review of business associates rules, and practical tips and solutions for remaining compliant with HIPAA as the transition from paper to EHR accelerates. We will also cover emerging issues in privacy liability, including costs associated with breach events and a new Connecticut Supreme Court case that is likely to increase liability and risk for HIPAA covered entities.

Demonstrating the Financial Impact of Quality Initiatives
Thursday, February 19, 2015
9:00 a.m. - 3:00 p.m.
Event Registration

Healthcare leaders in all disciplines recognize the need to identify, analyze, and demonstrate the financial benefit of quality initiatives. However, those involved in such initiatives, clinicians and non-financial managers, often find it difficult to articulate the positive financial outcomes that accrue to quality improvements. This program will help clinicians and non-financial managers involved in quality improvement initiatives understand the intersection between quality and cost, and how to "connect the dots" from quality improvement to financial benefit.

Presenter: William J. Ward, Jr. is the director of the MHS Degree Program in Health Finance and Management at the Johns Hopkins Bloomberg School of Public Health, for which he teaches accounting and finance, and a principal with Healthcare Management Resources, Inc., a Baltimore-area consulting firm.