Annette Wright, RN, can’t decide between vanilla or chocolate at Wednesday’s ice cream social to celebrate clinical excellence at University of Connecticut Health Center. (Photo by Janine Gelineau)

Jeannine Cyr Gluck, MLS, AHIP, Director of the Library, and Maria Cafro, Laboratory Clinical Coordinator, ECHN

CHA Annual Meeting: Save the Date

SAVE THE DATE

Connecticut Hospital Association’s 96th Annual Meeting

Wednesday, June 18, 2014
Aqua Turf Club, Southington, CT
4:00 p.m. to 7:00 p.m.

Connecticut Hospitals Celebrate Patient Safety Awareness Week

Connecticut hospitals are celebrating their work on quality and patient safety during 2014 National Patient Safety Awareness Week, held March 2-8. All Connecticut hospitals are involved in the Partnership for Patients national initiative to improve patient safety and the first-of-its-kind CHA statewide high reliability initiative, in which thousands of hospital staff members have been trained in high reliability practices.

Here are some examples of how Connecticut hospitals are celebrating National Patient Safety Awareness Week.

The University of Connecticut Health Center is celebrating two major clinical quality milestones. It has been more than a year since a central line acquired blood stream infection occurred in the John Dempsey Hospital adult intensive care unit. And in the last year, John Dempsey Hospital’s “door-to-balloon” time—the elapsed time between a heart attack patient’s arrival and intervention—met or exceeded national standards every time. John Dempsey Hospital reports an average door-to-balloon time of 48 minutes.

At Manchester Memorial Hospital and Rockville General Hospital, ECHN’s Patient Safety Committee and the Patient Safety Coach Committee displayed a poster presentation representing the many groups and activities that are involved in patient safety efforts at ECHN. Staff enjoyed giveaways and prizes.

At Hartford HealthCare, employees are an integral part of the process to protect patient safety. The system is dedicated to an effort to eliminate healthcare acquired infections and achieve 100% hand hygiene compliance. The effort includes unit-based champions who are providing leadership and support.

Saint Francis Hospital and Medical Center will host a talk from high reliability expert Steve Kreiser, CDR (USN Ret.), MBA, MSN, Senior Consultant, Healthcare Performance Improvement; a discussion on hand hygiene with Patient Advocate Jean Rexford; and a safety fair.

Yale-New Haven Hospital continues its Great Catch program. The program’s goal is to empower employees to raise their voices to keep patients safe. Every month, one employee is selected from nominations to be honored for his or her great catch. The employee receives a catcher’s mitt and his or her department receives a larger version for display.

National Patient Safety Awareness Week, sponsored by the National Patient Safety Foundation, aims to educate the public about and increase awareness of patient safety efforts across the healthcare continuum. On Friday, March 7, hospital leaders from across the state will celebrate at CHA’s sold out 12th annual Patient Safety Summit. Speakers include Tejal Gandhi, MD, MPH, CPPS, President of the National Patient Safety Foundation; Christina Michalek, Medication Safety Specialist at the Institute for Safe Medication Practices; Rosemary Kennedy, PhD, RN, MBA, FAAN,
CHA Testifies On Bills of Interest to Hospitals

Legislative committees continued to hold public hearings this week. CHA provided testimony on a number of bills that would impact hospitals, healthcare providers, and the patients they serve.

On March 4, CHA provided testimony on HB 5296, An Act Concerning Admissions To The Veterans' Home Or To A Hospital and HB 5378, An Act Implementing The Recommendations Of The Legislative Program Review And Investigations Committee Concerning Medicaid-Funded Emergency Department Visits. HB 5296, a bill opposed by CHA, would require a hospital to certify that it has taken sufficient steps to ascertain whether funds are available to pay for the treatment of a veteran in such a hospital before charging the state for treatment. Regarding HB 5378, CHA testified in support of the bill’s goals, but expressed some concerns with provisions of the bill as currently drafted. HB 5378 would implement the recommendations of the Program Review and Investigations Committee concerning avverting unnecessary use of hospital emergency departments by Medicaid clients.

Also on March 4, CHA provided testimony in support of SB 244, An Act Increasing Home Care Provider Rates, a bill that would increase rates for providers who serve senior citizens and disabled persons.

On March 5, the Public Health Committee held a public hearing and CHA provided testimony in opposition to HB 5384, An Act Concerning Reports Of Nurse Staffing Levels, a bill that would require hospitals to submit to the Department of Public Health annual reports on prospective nurse staffing plans and quarterly reports of actual daily nurse staffing levels by numerical staff-to-patient ratios for registered nurses, licensed practical nurses, and registered nurses’ aides as defined in Section 20-102aa of the Connecticut General Statutes. The bill also requires hospitals to report the method used to determine and adjust direct patient care staffing levels. CHA also provided testimony in opposition to SB 35, An Act Concerning Notice Of Acquisitions, Joint Ventures And Affiliations Of Group Medical Practices. SB 35, a bill proposed by the Governor and Attorney General, would require hospitals and physician group practices to meet three new requirements: (1) notify the Office of the Attorney General (and provide copies of filings upon request) when a hospital or group practice makes a filing with the Federal Trade Commission (FTC) or the United States Department of Justice pursuant to the Hart-Scott-Rodino Antitrust Improvements Act; (2) provide the Office of the Attorney General with written notice of any material change to the business or structure of a physician group practice; and (3) require hospitals and hospital systems to file annual reports describing the activities of group practices owned or affiliated with such hospitals or hospital systems. CHA testified in support of HB 5386, An Act Concerning Care Coordination For Chronic Disease, a bill that would require the Commissioner of Public Health, in consultation with the Comptroller, representatives of hospital community, and other healthcare providers, to develop a plan to reduce the incidence of chronic disease. The bill also calls for the development of an improvement plan for the coordination of care of such chronic diseases. CHA also testified on HB 5327, An Act Concerning Health Freedom And The Practice Of Classical Homeopathy, a bill that would permit a classical homeopath to provide complementary and alternative healthcare services without a license, provided their scope of practice is limited and that appropriate notice is provided to those seeking care. CHA testified in support of HB 5385, An Concerning Language Interpreters In Hospitals, a bill that would require hospitals to provide language interpreter services for non-English speaking patients. Additionally, CHA submitted testimony expressing concerns with the language of SB 296, An Act Concerning Medical Orders Written By Physician Assistants. SB 296 would remove the requirement that orders written by a physician assistant be followed by the printed name of the supervising physician. Lastly, CHA expressed concern with the language of HB 5457, An Act Concerning The Collection Of Data By Health And Human Services Agencies, a bill that would require the collection of race and ethnicity data by certain state agencies.

On March 6, CHA provided testimony expressing support for HB 5337, An Act Concerning Fees Charged For Services Provided At Hospital-Based Facilities, a bill of interest to the Attorney General that would require hospitals to provide patients with written notice regarding fees charged for services provided at hospital-based outpatient facilities.

General Assembly Hears From Hospitals on Hospital Conversions, Mergers, And Affiliations

On February 27, the General Assembly's Public Health Committee held its third and final Committee forum on hospital conversions, mergers, and affiliations.

During the forum, officials from Bristol Hospital and Eastern Connecticut Health Network (ECHN) presented to the Committee. Kurt Barwis, President and CEO, Bristol Hospital, and Marie O'Brien, Chairman, Bristol Hospital Board of Directors, spoke of the hospital's decision to merge with Tenet Healthcare and described how this process unfolded over the last several months.

Dennis McConville, Senior Vice President and Chief Strategy Officer, ECHN, provided Committee members with information regarding ECHN's plan to enter into a joint venture with Tenet Healthcare and Yale-New Haven Hospital. Mr. McConville highlighted the challenges community hospitals face with the implementation of health reform, low reimbursement rates in the Medicaid program, and the imposition of the state's hospital tax. He discussed how these external challenges and pressures have led ECHN to seek strategic partners to better fulfill its mission of serving the healthcare needs of the communities they serve.

Additionally, Kimberly Lumia, President and CEO, Sharon Hospital, provided information to the Committee about the experience of converting from a not-
for-profit to a for-profit hospital.

Committee members asked questions on issues related to hospital priorities and governance structure changes when it merges, affiliates, or converts with an out-of-state entity; the continuation of the community benefits; and out-of-state commitment to local communities.

Information gathered during the series of forums will help to inform members of the Public Health Committee as they study and debate legislative proposals related to hospital conversions, mergers, and affiliations.

In a related note, on February 27 the Labor and Public Employees Committee held a public hearing and CHA provided testimony in opposition to HB 5257, An Act Concerning Hospital Employees And Hospital Conversions. HB 5257 would impose a series of burdensome and unnecessary regulatory requirements on hospitals and other healthcare providers before, during, and after the acquisition of another healthcare provider.

Yale New Haven Health System and Tenet Healthcare Announce Partnership

On March 6, Yale New Haven Health System and Tenet Healthcare Corporation announced that they have formed a partnership to create a comprehensive healthcare delivery network in Connecticut, with the intention to expand into the greater Northeast region.

Using the strengths of each organization, the partnership will enhance the efficiency and coordination of healthcare in the region by offering comprehensive clinical services to a larger geography. Additional plans include creating a clinically integrated delivery platform with local physician groups and entering into value-based contractual relationships with employers and other payers of healthcare services. Under the terms of the agreement, Yale New Haven Health System and Tenet Healthcare will remain independent of each other.

“The Yale New Haven Health System has a strong reputation for innovation and shares Tenet’s intense focus on delivering high-quality, patient-centered healthcare,” said Keith Pitts, Vice Chairman of Tenet Healthcare. “This agreement capitalizes on the respective strengths of both organizations and will enhance the clinical care – and the access to that care – in the communities we serve. The partnership will bring improved clinical technologies, increased economies of scale, and capital resources to the hospitals, ambulatory care centers, and physician practices that we will become affiliated with in the future.”

As previously disclosed, letters of intent are already in place to acquire, subject to receipt of regulatory approvals and the execution of definitive agreements, Waterbury Hospital, Bristol Hospital, and Eastern Connecticut Health Network.

“We are excited to bring a truly innovative solution to some of the challenges in the Connecticut healthcare landscape through our partnership with Tenet,” said Marna Borgstrom, Chief Executive Officer of Yale New Haven Health System. “This agreement continues our efforts to provide patients with accessible, patient-focused healthcare services in more locations. In addition, Tenet’s leadership in patient care quality and innovations in technology and operational efficiency will strengthen our ability to provide even better service to our patients, employees, and physicians.”

CDC Report Reinforces Value of Connecticut Hospital Work on Antibiotic Stewardship

This week, the Centers for Disease Control and Prevention issued a new Vital Signs report on antibiotic prescribing practices, along with tools to help hospitals develop antibiotic stewardship programs. The tools include a checklist of seven core elements that should be part of any antibiotic stewardship program and guidance for implementing a stewardship program.

“Our hospitals have had great success working together to reduce patient harm and eliminate infections,” said Mary Cooper, MD, Chief Quality Officer, CHA. “We take antibiotic stewardship very seriously.”

Richard Melchreit, MD, Healthcare Associated Infections Program Coordinator, Connecticut Department of Public Health, encouraged hospitals to review and consider using the Vital Signs materials. He said the Department of Public Health is aware that Connecticut hospitals see antimicrobial stewardship as important for medical care quality, have antibiotic stewardship programs in place led by physician champions, are tracking and controlling antibiotic use, and offer provider education. Dr. Melchreit expressed a need for consistency in practice among all healthcare facilities and providers across the continuum.

“This is truly an issue that affects all healthcare settings,” said Dr. Melchreit. "Antibiotic stewardship is a critical issue nationally because we don't want to go back into a pre-antibiotic era, and there is a danger we could lose the effectiveness of antibiotics. We also recognize that we can't develop new antibiotics fast enough.”

Hospital Jobs Create Connecticut Jobs

On February 28, clinicians from Bristol Hospital, Johnson Memorial Hospital, and St. Vincent’s Medical Center participated in a video shoot about the great jobs provided by Connecticut hospitals. Connecticut hospitals employ more than 55,000 people, and each hospital job generates another job outside the hospital. That’s 111,000 Connecticut jobs. The video, part of CHA’s Care We Can Count On campaign, will be released soon.

The Care We Can Count On campaign was created to share stories about the excellent care provided by Connecticut hospitals. Radio ads can be heard on stations across the state, digital ads are running on various news sites, and a website, www.CareWeCanCountOn.org, features information about how
hospitals benefit their communities and the economy.

CHA wishes to thank the nurses, doctors, patients, and hospital volunteers who have contributed their voices to this campaign. We encourage you to follow CHA and receive the latest hospital news on Facebook and Twitter.

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Education Updates

Staff to Management: Starting the Transition
Friday, March 21, 2014, and Monday, April 28, 2014
9:00 a.m. - 3:00 p.m.

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 your organization for high productivity and quality, combined with financial prudence and regulatory compliance, are only part of the equation. You 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.

Sarah Campbell Arnett, MA, NCC, BC-DMT, returns at member request to present this full-day, highly interactive, management development program, the first in a two-part series specifically designed for new managers. The second program "Transitioning From Staff to Management: What’s Next" will be held on Monday, April 28, 2014.

Continuing education credits will be awarded. Please see the brochure for details.

View Brochure | Event Registration

HPI Level 3: Train-the-Trainer Session
Tuesday, April 1, 2014
9:00 a.m. - 5:00 p.m.

This train-the-trainer session is designed for hospital trainers to learn how to teach the staff safety behaviors and error prevention tools.

Event Registration

2014 Corporate Compliance Conference
Wednesday, April 30, 2014
9:00 a.m. - 2:30 p.m.

Connecticut healthcare professionals, like their colleagues nationwide are being asked to expand their knowledge and skills to respond to unprecedented challenges triggered by healthcare reform—including the ever-changing regulatory compliance landscape.

Please join us for CHA’s annual Corporate Compliance Conference, which will address several critical topics including the CMS 2-midnight presumption, documentation issues, and revenue cycle strategies. Additionally, there will be presentations covering physician-owned distributorships, the focus on transparency of industry physician financial relationships or the CMS Physician Payment Sunshine Act, and compliance strategies for both provider and patient health information exchange (HIE) portals. In addition to compliance, legal, and risk professionals, we also invite physicians, HIM, and other healthcare professionals to join us for a comprehensive conference.

Continuing education credits will be awarded.

View Brochure | Event Registration

HPI Level 3: Train-the-Trainer Session
Friday, May 2, 2014
9:00 a.m. - 5:00 p.m.

This train-the-trainer session is designed for hospital trainers to learn how to teach the staff safety behaviors and error prevention tools.

Event Registration