Conference Provides Guidance on Caring for LGBT Community

Keynote speaker Jaymie Campbell, PhD, Director, Training and Capacity Building, AccessMatters, offered participants insights to help healthcare providers gather pertinent medical information in a respectful manner when caring for LGBT patients. He provided participants with a deeper awareness of the cultural conditioning around sexual orientation and gender diversity with a goal of improving clinical services for people of all genders and sexualities.

Dr. Campbell's interactive discussion focused on strategies for improving patient care for transgender and gender non-binary populations. He also discussed the medical, legal, and social transitions for transgender patients and how, even though they can occur at different times, they are all considered to be stages of transition. He described clinical strategies, including education and training, for providing affirming and inclusive care to transgender patients.

Conference participants also heard from Carl S. Charles, a Transgender Rights Project Fellow at Lambda Legal, who emphasized the need for transgender-affirming healthcare policies and described how to implement them.

Karen Cornell, LCSW, Director, Patient and Customer Relations at Bristol Hospital, and Claire Davis, RN, Director of Quality, Middlesex Hospital, spoke about their hospitals' participation in the Human Rights Campaign Foundation's Healthcare Equality Index, which scores participating healthcare facilities on policies and practices dedicated to the equitable treatment and inclusion of their LGBTQ patients, visitors, and employees. Both hospitals were among four participants in the state to earn the designation of “2018 LGBTQ Healthcare Equality Leader” by attaining a score of 100.

The session closed with a presentation by Lawrence Peikes, an attorney at Wiggin and Dana, on proposed regulations from the Department of Health and Human Services (HHS) intended to ensure that entities receiving HHS funding do not have practices or policies in place that violate conscience, coerce practices, or discriminate in violation of federal law.

Mr. Peikes' presentation reviewed the content and implications of the proposed regulations, as well as compliance initiatives led by the Office for Civil Rights, including outreach programs, investigations, and enforcement actions, along with the scope of protections against conscience-based discrimination. Mr. Peikes also shared information about workplace discrimination law as it relates to religion and LGBT issues.

Fetal Alcohol Syndrome Focus at CHA Conference

While the effects of alcohol use during pregnancy are well known, early intervention strategies are still needed to improve the health of mother and baby, according to presenters at CHA's Best Practices in Caring for the Mother/Baby Dyad with Fetal Alcohol Syndrome or Neonatal Abstinence Syndrome conference, held on May 17.

The conference was attended by 70 people, including a clinical team from South Africa. Information was provided on best practices for caring for the mother/baby dyad, with a focus on patient and family education, as well as collaboration among state agencies caring for this population.

According to the Centers for Disease Control and Prevention, fetal alcohol spectrum (FAS) disorders can include abnormal growth and facial features, intellectual disabilities, and behavioral problems.

“We have known about FAS since 1973,” said keynote speaker Katherine Flaherty, a consultant with the Massachusetts Perinatal Quality Collaborative (MPQC). “And we’re still trying to get a better understanding of the prevalence and the numbers that are affected.”

The limited research that has been conducted estimates that 10 to 15 percent of women use alcohol during pregnancy, Ms. Flaherty said. Risk factors include poverty, homelessness, partner substance abuse, co-morbidities, psychiatric illness, and physical and sexual abuse. However, she noted, affluent women are also likely to consume alcohol during pregnancy, as are older women with additional children, those with poor nutrition, less education, and a lack of employment.
Strategies for prevention of FAS, Ms. Flaherty said, need to include public awareness, education – especially for middle school-aged girls, reducing the stigma around admitting to drinking alcohol, screening and treatment during primary care visits, and increasing resources.

“What we really want women of childbearing age to do is to avoid alcohol use before they become pregnant,” Ms. Flaherty said.

Fellow MPQC member Bonnie Glass, RN, noted that FAS has “been invisible. It hasn’t received as much attention as babies born addicted to opioids because the syndrome is often hard to recognize.”

There are several screening tools available for primary care providers to assess babies, she added, but challenges remain to determine the child’s exposure during pregnancy.

“We need to educate people,” said Ms. Glass. “If you are eligible to become pregnant, you should not be using alcohol. Pregnancy should be a powerful motivator for alcohol abstinence.”

Matthew Grossman, MD, Yale New Haven Children’s Hospital, and Ilana Waynik, MD, Connecticut Children’s Medical Center, presented on the Connecticut Perinatal Quality Collaborative’s Neonatal Abstinence Syndrome (NAS) initiative. They presented the results of a statewide hospital survey to assess current practices in caring for mothers and babies with NAS. They also provided a NAS Quality Improvement Change Package, which they authored, that includes evidence-based information and resources for hospitals to reference.

There were four guest speakers from the South African team. Their presentation on substance abuse and management in South Africa described some of the programs they have instituted.

Kristina Stevens, Deputy Commissioner, Department of Children and Families, presented information on the Child Abuse Treatment and Protection Act Legislation. Kimberly Karanda, PhD, Director of the Statewide Services Division at the Department of Mental Health and Addiction Services, discussed the importance of collaboration and reviewed the programs available for this population. Finally, Jennifer Chadukiewicz, Connecticut Community for Addiction Recovery ED Recovery Coaches, provided an overview of that organization’s program.

The patient perspective was provided by Cassie Duran, a Recovery Coach Specialist at Boston Medical Center (BMC), who spoke about her fight with addiction during five high-risk pregnancies. Ms. Duran received addiction recovery support and obstetrics care from BMC and the Project RESPECT team, and is now paying it forward by helping other women recover.

Over the past year, CHA has continued its efforts to improve the health and quality of care for mothers and infants through initiatives that address different aspects of the pregnancy and childbirth experience. The Connecticut Perinatal Quality Collaborative (CPQC) partnered with CHA to become an official CHA initiative. The CPQC addresses perinatal health and opioid addiction, among other issues, and plays an active role in CHA’s NAS and Improving kNowledge to Decrease Early Elective Deliveries (INDEED) initiatives.

**Conventions Held To Endorse Candidates**

Although Connecticut’s political parties have officially chosen their candidates for the vast array of public offices up for grabs in the November election, there are at least 10 primary battles looming this summer.

Most of the attention will be on the races for governor, lieutenant governor, attorney general, treasurer, and the congressional seat left empty by the departure of U.S. Representative Elizabeth Esty, who is not seeking reelection to her position representing the 5th District.

Although each party endorsed a candidate for these offices, there are a slew of other candidates who have qualified for the ballot by getting at least 15 percent of the vote at their respective conventions, which took place over the last few weeks. Primaries for these seats will be held on Tuesday, August 14; the winner of these primaries will represent their party on the ballot in the general election.

The gubernatorial field started out particularly crowded but was winnowed down during the political conventions. Republicans chose Danbury Mayor Mark Boughton to run for the open seat, while Democrats picked Greenwich businessman Ned Lamont. Trumbull First Selectman Tim Herbst and Westport entrepreneur Steve Obsitnik both garnered enough convention votes to primary Mr. Boughton. Mr. Lamont does not face a primary challenge at this time, but Bridgeport Mayor Joe Ganim, who failed to qualify at the convention, has indicated he will attempt to petition onto the primary ballot. Also in the race is Independent candidate Oz Griebel, the former President and CEO of the MetroHartford Alliance.

In the race for lieutenant governor, Republican Joe Markley, a Newtown attorney, and Democrat Susan Bysiewicz, former Secretary of the State, are the two officially endorsed candidates, and both face challenges. Mr. Markley will be challenged by New Britain Mayor Erin Stewart and Darien First Selectwoman Jayme Stevenson, while Ms. Bysiewicz faces a primary against Eva Bermudez Zimmerman, a labor organizer from Newtown. The Independent candidate is Newtown attorney Monte Frank.

In the 5th District race, Democrats endorsed former Simsbury First Selectwoman Mary Glassman, while Republicans chose New Britain Alderman Manny Santos. Ms. Glassman faces a challenge from political newcomer Jahana Hayes, who is a former National Teacher of the Year, while Mr. Santos will go to a primary against Ruby O’Neill, a founder of the National Latino Republican Coalition.

The constitutional office races are also crowded. Nominated candidates for Attorney General are Republican Sue Hatfield, a state prosecutor, and Democrat William Tong, a Stamford state representative. Both face primaries. Candidates for Treasurer are Salisbury Republican Thad Gray, who will be challenged by Westbrook State Senator Art Linares, and Democrat Shawn Wooden, a Hartford lawyer, who will face off against Hartford lawyer Arunan Arulampalam and former Wall Street trader Dita Bhargava of Greenwich.
PatientPing, part of a health data sharing collaborative with CHA known as the CHA Cross Continuum Patient Reference System (CCPRS), will hold an event at CHA on Wednesday, June 20, 2018, from 7:30 a.m. – 10:00 a.m., to introduce PatientPing’s “Stories.”

Stories, real-time patient clinical and administrative context at the point of care, helps ED providers and case managers improve care within the emergency and inpatient settings. Stories contain a patient’s in- and out-of-network visit and utilization history, diagnosis data, prescription histories, care team contact information, care guidelines, and program affiliation.

CHA’s CCPRS, launched in 2016, is a platform that securely protects patient privacy while giving providers access to real-time information, including a patient’s in- and out-of-network visit and utilization history, care team contact information, care guidelines, and program affiliation. As a patient passes through the healthcare system, this information is shared in real time with other members of the care team across the continuum, breaking down institutional barriers that have historically created silos between providers.

Stories are pushed directly into hospital EHR workflows in real time, and are also available via web application, text, e-mail, and more. Intelligent flags indicate high-utilizing and high-risk patients, those at risk for readmission, as well as those with recent post-acute utilization.

Register for the event by clicking here. If you have any questions, please contact Sarah Wigman at swigman@patientping.com.

Education Updates

HIIN: Social Determinants of Health Collaborative Kick-Off Program
Tuesday, June 5, 2018
9:00 a.m. - 1:00 p.m.
View Brochure | Event Registration

Save the date for an inspiring program marking the start of the Social Determinants of Health Collaborative with keynote speaker Pritpal Tamber, MD, Co-Founder and Chief Executive Officer of Bridging Health and Community.

This program is being offered under the Hospital Improvement Innovation Network (HIIN), a CMS national initiative aimed at advancing patient and family engagement and reducing events of preventable patient harm.

HIPAA Privacy, Security & Breach Rules: Keeping Current to Remain Compliant
Monday, June 18, 2018
9:00 a.m. - 2:30 p.m.
View Brochure | Event Registration

This program will cover current HIPAA Privacy, Security, and Breach Rules, with an emphasis on patient access rights, and emerging issues in cyber security, devices and technology issues, social media considerations, and the enforcement and liability risks for HIPAA covered entities and business associates. Particular attention will be paid to recent case law and enforcement activities by the Office for Civil Rights. The program information includes strategies for maintaining continuous compliance, a discussion of necessary policies and procedures, and practical tips and solutions to address real-life situations.

Nursing Professional Development Certification Preparation
Session I: Tuesday, June 19, 2018
Session II: Wednesday, June 20, 2018
8:00 a.m. - 5:00 p.m.
View Brochure | Event Registration

This program is intended to enable the learner to complete the American Nurses Credentialing Center (ANCC) generalist examination in nursing professional development. This course also enables novice NPD practitioners to develop foundational knowledge for the specialty practice.

Please note: This is a two-session program; participants must attend both sessions.

Lean Principles: Project Charter Preparation and Planning
Thursday, June 21, 2018
9:00 a.m. - 2:00 p.m.
View Brochure | Event Registration

Lean principles and methodology improve healthcare, but evidence shows that learning about the principles and methodology is simply not enough. To achieve 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.
This is a “how to make it happen session,” and will explain (and provide examples of) the elements of an effective project charter, a prerequisite to any successful improvement initiative. When properly prepared, the charter focuses the team on the business case, problems, objectives, and outcomes, and is a major factor in preventing project scope creep. Participants are asked to bring process improvement opportunities currently under consideration at their facilities.

This program is designed for those who attended CHA’s Lean Principles: Process Flow and Value Stream Mapping in Healthcare—or those with a basic understanding of Lean Principles and familiarity with the terminology.

HRO Leadership Method Training  
Monday, June 25, 2018  
9:00 a.m. - 4:15 p.m.  
[Event Registration]

Leadership Method Training is for organizations that are new to high reliability or for new management employees in organizations that are already on the high reliability journey. Both hospital and ambulatory organization leadership practices will be addressed. The leadership session is designed to teach hospital or ambulatory leaders the concepts of high reliability science and behaviors. The sessions are structured for leaders at the manager level and above.

HRO Train-the-Trainer  
Tuesday, June 26, 2018  
9:00 a.m. - 4:15 p.m.  
[Event Registration]

The model for spreading training to the rest of the staff is a train-the-trainer model. The training is scripted, and requires an enthusiastic participant who is willing to make time to train others within the organization. Other hospitals in Connecticut have trained educators, front-line managers, and senior leaders, including the CEO, as part of the training contingent. Train-the-trainer sessions are for hospitals and ambulatory practices.

HRO Safety Event Classification  
Wednesday, June 27, 2018  
9:00 a.m. - 3:45 p.m.  
[Event Registration]

When events occur in the hospital or ambulatory practice, they must be evaluated to assess whether the event is a Serious Safety Event, a Precursor Safety Event, or a Near Miss Safety Event. This session will review how the classification scheme works and how to utilize and standardize event classification.

HRO Fair and Just Accountability  
Thursday, June 28, 2018  
9:00 a.m. - 12:15 p.m.  
[Event Registration]

This session, for Human Resources executives and anyone else who manages people, trains staff to review performance from a standardized perspective when there is an adverse event and to focus on the behavior rather than the outcome.

HRO Safety Coach Training  
Thursday, June 28, 2018  
1:00 p.m. - 4:15 p.m.  
[Event Registration]

Safety Coaches are peer mentors, designed to recognize and acknowledge good high reliability behaviors and to remind people about opportunities to improve behavior that does not stay true to high reliability concepts.