Norwalk Hospital and The William W. Backus Hospital To Receive CHA Annual Awards

CHA is pleased to announce that Norwalk Hospital is the recipient of the 2011 John D. Thompson Award for Excellence in the Delivery of Healthcare Through the Use of Data and The William W. Backus Hospital is the winner of the 2011 Connecticut’s Hospital Community Service Award. Both hospitals will be honored at CHA’s 93rd Annual Meeting on Thursday, June 23.

The John D. Thompson Award is chosen each year by a panel of quality experts in a blinded judging process. This year’s recipient, Norwalk Hospital, was selected for its “Moving Stroke Care from Good to Great” program. In 2007, Norwalk Hospital recognized an opportunity to move stroke care from just good to great, and determined this could be done by seeking recognition by the American Heart Association (Get with the Guidelines), The Joint Commission (Primary Stroke Care Center), and the Connecticut Department of Public Health stroke certification. Only 12 percent of hospitals nationally have Joint Commission Stroke Certification, and Norwalk Hospital decided to strive to achieve all three levels, in keeping with the hospital’s organizational quality goal: to utilize evidence-based medicine and benchmarks, and move process and outcomes data by eliminating variation in practice.

Norwalk Hospital embarked on the journey and began collecting data in January 2008. The data—the eight Core Measures for stroke care—were collected retrospectively and then reported monthly at the stroke Continuous Quality Improvement (CQI) meetings. Both a stroke team and a stroke CQI Team focused on all eight measures, with an emphasis on improving use of t-Pa and rapid turnaround times from symptom to treatment.

There were two measures that were consistently below the standard set forth by the committee: the
administration of t-Pa for those patients who are eligible to receive this medication (including achieving the three-hour window for administration) and poor compliance with a swallowing screen prior to any oral intake. The committee utilized the rapid cycle improvement process to implement changes to the processes related to guidelines for immediate assessment and intervention.

These two rapid cycle improvement processes have led to an increase in compliance with the stroke measures as well as improved outcomes, particularly a significantly low mortality rate, which is attributed to rapid turnaround times in providing patients with t-Pa when appropriate. The improvement in Swallow Screens contributes to reducing mortality resulting from aspiration pneumonia. Following implementation of a Stroke Team and practice guidelines, the risk-adjusted predicted mortality rate has gone from 6.38 percent in 2007 to 8.58 percent in 2009, whereas the actual mortality rate has decreased from 6.14 percent to 1.69 percent for the same time period.

The success of Norwalk Hospital’s program is attributed to physician order sets, standardized acute stroke checklist, a dedicated acute stroke team, and continuously monitoring their improvements through data. The foundation of the program is the data, the driving force for every process improvement that is implemented.

Norwalk Hospital has moved from being unremarkable in stroke care to having outcomes in the top five percent of the national scores in 2009 and then on to the top 1 percent of best outcomes in 2010. (Photo caption: Norwalk Stroke Care Team: (Left to right) Winfred Wu MD, Mary Galasinski, Daryl Story MD, Dr. Claudio Petrillo MD, Ellen Dimuro, Nerissa Teodoro, Kate Melanson, Heather Thomas, Lesvia Jackson, Anjum Khan MD, Nancy Olean, Arlene Timpone, Charlene Cully, Michele Lecardo.)

Sponsored by CHA and the Connecticut Department of Public Health, the 2011 Community Service Award recognizes The William W. Backus Hospital’s Enjoy LIFE (Lifelong Investment in Fitness and Exercise) program for engaging its community in physical activities, reducing obesity, and giving people tools they can use throughout their lives to sustain healthy lifestyles.

A May 2010 Community Health Needs Assessment commissioned by Backus Hospital determined that approximately 28 percent of eastern Connecticut residents are obese, and nearly 69 percent are overweight. Both statistics are well above state and national averages. Studies by the Robert Wood Johnson Foundation and the New London County Health Care Collaborative produced similar findings. In fact, the Robert J. Wood Foundation study showed that Windham County had the highest obesity rate in the state at 28 percent.

Because studies show that overweight children tend to become overweight adults and children tend to mimic their parents’ habits, focus groups were formed to discuss obstacles families face in the region. Issues included: the closing of a local YMCA; lack of safe play areas; few organized groups that encourage exercise; rising numbers of working poor parents working longer hours without sufficient access to after-school activities for their children; cuts to school and recreation department sports programs; the rise of pay-to-play sports; and overuse of technology.

The hospital focused its efforts by creating the Enjoy LIFE program in May 2010 in its primary service area, where they estimated that 175,000 people were overweight. More than 400 people have participated so far with individual participant weight loss totals of up to 26 pounds. Among other things, the free program includes monthly community education programs; monthly access to a registered dietitian for nutrition advice; food and activity journals; group activities ranging from walking events to supermarket tours and even a community kickball game; and “weigh-ins” and “weigh-outs” to help measure progress. (Photos show some of the free activities sponsored by Enjoy LIFE.)

The hospital’s partner for this initiative is the Plainfield Recreation Department. Together, the hospital and the town aim to decrease the percentage of individuals living sedentary lifestyles, engage children at earlier ages in healthy and active behaviors, promote family activities, and build a sustainable program that can be easily replicated. The model in
Plainfield is expected to be duplicated in other parts of Backus Hospital’s service area, and is being discussed as a way to promote health and wellness for targeted populations and businesses.

CHA congratulates both award winners for their exemplary work.

**2011 CHA Board of Trustees Slate of Candidates Announced**

The Executive Committee of the CHA Board of Trustees has developed the 2011 slate of candidates for officers and trustees of the CHA Board. The Assembly will vote on this slate of candidates at the CHA Annual Meeting on June 23, 2011.

Richard Brvenik, President & CEO, Windham Hospital, is nominated for Treasurer

Executive Committee At Large Member nominees are Frank Corvino, President/CEO, Greenwich Hospital, and Bruce Cummings, President/CEO, Lawrence and Memorial Hospital.

Board of Trustees nominees include: Nancy Blanchette, Board Chairman, Bristol Hospital; John Murphy MD, President/CEO, Western Connecticut Health Network; Kevin Myatt, Senior Vice President of Human Resources, Yale-New Haven Hospital; Christopher O’Connor, President and Chief Executive Officer, Hospital of Saint Raphael; Clarence Silvia, President/CEO, Hospital of Central Connecticut; and Chad Wable, President and Chief Executive Officer, Saint Mary’s Hospital.

These candidates will join current Board members: Chairman Chris Dadlez, Saint Francis Hospital and Medical Center; Vice Chairman Susan Davis, St. Vincent’s Medical Center; Immediate Past Chairman Marna Borgstrom, Yale-New Haven Hospital; Secretary Peter Karl, Eastern Connecticut Health Network; Jennifer Jackson, CHA President and CEO; DNS Board Chairman Patrick Charmel, Griffin Hospital; CEO Forum Chairman Kurt Barwis, Bristol Hospital; Timothy Bates, Lawrence and Memorial Hospital; Brian Grissler, Stamford Hospital; Elliot Joseph, Hartford Hospital; Robert Lyons Jr., Gaylord Hospital; Lawrence McGoldrick, MidState Medical Center; John Michaels, Waterbury Hospital; Curtis Robinson, Saint Francis Hospital and Medical Center; Robert Smanik, Day Kimball Hospital; and David Whitehead, The William W. Backus Hospital.

Click [here](#) for the full slate of candidates.

**General Assembly Adjourns 2011 Regular Session: Malloy Addresses Legislators**

The 2011 legislative session ended at midnight last night *sine die*, which means there’s no day assigned for further meeting.

Following tradition, Governor Dannel Malloy addressed a Joint Session of the General Assembly at the end of the session at midnight. In his remarks, the Governor thanked the legislators and indicated that there was “much more to be done.” He highlighted the bills that were passed that will help create jobs and noted that the “signature effort of this legislature was the budget.” Governor Malloy stressed that jobs and education are the next two issues he will concentrate on in the coming months and he called for a special session in the fall to focus on job creation and economic growth.

The legislature passed into law [PA 11-44](#), the budget bill that includes a hospital tax, although details of the tax are still being analyzed.

During the final day of session, the House debated and passed in concurrence with the Senate, [SB 970](#), An Act Concerning Workplace Violence Prevention And Response In Health Care Settings, a CHA-supported bill that was transmitted to the Governor for further action. Among other things, the bill:

- Requires healthcare employers to develop and implement plans and training programs related to workplace violence prevention and response;
- Requires healthcare employers to report incidents of workplace violence to the local law enforcement agencies and the Department of Public Health (DPH);
- Establishes criminal penalties for assault of a healthcare employee; and
- Requires DPH to report to the General Assembly and the public at large incidents of workplace violence.

The Senate passed in concurrence with the House, [HB 6618](#), An Act Concerning Various Revisions To Public Health Related Statutes, an annual bill that makes several changes to the DPH statutes. Among other things, the bill clarifies, with CHA-supported language, a law in effect allowing certain hospital staff to transport patients with a portable oxygen
SB 921, An Act Establishing A State Health Insurance Exchange, a bill supported by CHA, was passed by the House. Governor Malloy has indicated his support, and once the bill is signed into law, it will establish a quasi-public agency that would be charged with developing and running the Exchange, a marketplace for individuals and small businesses to buy health insurance. CHA’s testimony requested that a hospital representative be included in the Exchange, but the Senate bill would prohibit anyone on the board from being employed by, or otherwise affiliated with, insurers, insurance producers or brokers, healthcare providers, healthcare facilities, or their trade groups.

The Senate spent the better part of yesterday afternoon debating HB 6487, An Act Concerning The Certificates Of Merit, a bill strongly opposed by Connecticut hospitals and the Connecticut State Medical Society. After a series of questions, the bill was laid aside and not taken up again prior to adjournment at midnight. SB 6487 would have revised and weakened provisions concerning Certificates of Merit and opinions and testimony of healthcare providers in medical malpractice actions.

Other bills of interest to hospitals passed include:

- After eleven hours of debate, early Saturday morning the House passed in concurrence with the Senate, SB 913, An Act Mandating Employers Provide Paid Sick Leave To Employees, the union-backed bill strongly opposed by Connecticut's business community. One of the most highly charged pieces of legislation during the 2011 Legislative Session, SB 913 would mandate that companies with 50 or more employees offer paid sick days to their workers. The Governor has pledged to sign the first-in-the-nation business mandate into law.

- The House also debated and passed in concurrence with the Senate SB 1152, An Act Concerning The University Of Connecticut Health Center. Another legislative priority of the Governor, SB 1152 would authorize $262.9 million in new bonding under the UConn 2000 infrastructure program, and increase authorizations for two enumerated UConn Health Center projects: a main building renovation and new construction and renovation.

- The Senate also voted last month, on consent and in concurrence with the House, on HB 6545, An Act Concerning The Provision Of Prophylactic And Emergency Care To Hospital Patients, a bill strongly supported by Connecticut hospitals. HB 6545 would allow hospitals to utilize protocols and policies, also known as “standing orders,” after an assessment for contraindications has been conducted. Such orders would need to be in accordance with a physician-approved hospital policy; used for care that is emergent, timely, and necessary or to advance patient care; and, only as permitted by the CMS Medicare Conditions of Participation for hospitals. The bill becomes effective July 1, rather than October 1, as originally stipulated.

For more information about hospital-related legislation, contact Jim Iacobellis at iacobellis@chime.org.

Recruiting for the Stop CAUTI Project

CHA is expanding the Stop BSI project to encompass the Stop CAUTI project, a national initiative aimed at reducing catheter-associated urinary tract infections (CAUTI). The goal of the project is to reduce CAUTIs by 25 percent through the implementation of best practices for the appropriate placement, continuance, and timely removal of urinary tract catheters, and improve the culture of safety in the hospital by utilizing the Comprehensive Unit Based Safety Program (CUSP), developed by Peter Pronovost, MD, PhD, and others.

Approximately 600,000 patients develop urinary tract infections per year which accounts for 40 percent of all hospital-acquired infections. For this reason the Department of Health and Human Services (DHHS) Action Plan to Prevent Healthcare-Associated Infections has targeted the prevention of CAUTIs as a national goal, and the Centers for Medicare and Medicaid (CMS) have included CAUTIs in the 2014 Value-Based Purchasing program. Joining the national initiative will allow access to content and patient safety experts, clinical guidelines and best practices, resources and tools, and will complement the infection prevention work that is already ongoing in an organization.

Recruitment is now open for the September 2011 cohort. To learn more, please contact Alison Hong, MD, CHA’s Interim Vice President, Quality and Patient Safety, at hong@chime.org.

The Stop CAUTI initiative is supported by the Agency for Healthcare Research & Quality (AHRQ) in partnership with the Health Research & Educational Trust of the AHA, the Johns Hopkins University Quality and Safety Research Group, and the Keystone Center for Patient Safety and Quality of the Michigan Health & Hospital Association.
Come early to the Annual Meeting to help support CHA’s diversity initiative by browsing at the CHA Supplier Diversity Program Vendor Fair, which will be held in the Wagon Room at the Aqua Turf Club June 23 from 1:00-4:00 p.m. The vendor fair includes displays from the variety of services offered by certified minority-owned vendors who are participating in CHA’s Shared Services Program.

We will celebrate the many accomplishments of Connecticut hospitals at the 93rd CHA Annual Meeting following the vendor fair on Thursday, June 23. Attendees will have the opportunity to discuss the challenges of the future, while networking with fellow colleagues.

The 93rd CHA Annual Meeting is made possible in part by Platinum Sponsor Credit Suisse. For more information on the Annual Meeting, contact Rhonda Bates at (203) 294-7267 or bates@chime.org. For more information on the education session or the vendor fair, contact Peggy Courchesne at courchesne@chime.org.