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Cross Continuum Patient Reference System Partner PatientPing Launches "Stories"



PatientPing, part of a health data sharing collaborative with CHA known as the CHA Cross Continuum Patient Reference System (CCPRS), launched "Stories" at a program held at CHA on June 20.

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, care

team contact information, care guidelines, and program affiliation.

"Our goal is to help you coordinate care by showing all the encounters your patients have had and connect them with providers in real time," said Sarah Wigman, Market Lead, PatientPing.

New features of the platform include hospital stories that include where a patient has received care outside of the current encounter to better coordinate treatment.

Caroline Segovia-Marquez, RN, BSN, ACM-RN, CMAC, Director, Case Management, Saint Francis Hospital and Medical Center, cited PatientPing for bringing together a wealth of patient information that is not always completely available in the electronic medical record (EMR).

"This is a way of knowing where patients have been and what agencies they've used, and even the best EMR doesn't give you all of the information you can get in a Ping," she said. "This tells us a lot more than we've ever had before, which means we can provide better care across the continuum."

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. Intelligent flags indicate high-utilizing and high-risk patients, those at risk for readmission, as well as those with recent post-acute utilization. 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 EMR workflows in real time, and are also available in other secure formats including via web application, text, and e-mail.

CHA Statewide Patient and Family Advisory Council Highlighted at National Conference



CHA and Middlesex Hospital were among the presenters at the *8th Annual International Conference on Patient- and Family-Centered Care: Promoting Health Equity and Reducing Disparities*, sponsored by the Institute for Patient and Family Centered Care.

Donna Drouin, Patient Advisor, Middlesex Hospital, and Ellen Crowe, BSN, RN, Director, Clinical Excellence and Care Redesign, CHA, outlined the journey of creating the CHA Statewide Patient and Family Advisory Council (PFAC) and discussed the statewide effort to improve patient- and family-centered care.

Ms. Crowe addressed the formation of the CHA Statewide PFAC, including its structure, mission, and goals. Ms. Drouin discussed Middlesex Hospital's journey toward patient- and family-centered care and the hospital's participation on the CHA Statewide PFAC.

The conference focused on the need for collaboration among healthcare professionals, patients, and families to address the challenges in complex healthcare systems, and to eliminate healthcare disparities. Presenters shared innovations at the direct care level as well as the organizational, community, regional, and national levels.

Patient- and family-centered care is an approach to the planning, delivery, and evaluation of healthcare that is grounded in mutually beneficial partnerships among healthcare providers, patients, and families. The CHA Statewide PFAC, which held its inaugural meeting last year, fosters a culture of patient-centered care.

Senate and House Fail to Override Governor's Vetoes

On June 25, the General Assembly met to consider overriding a number of gubernatorial vetoes from the 2018 Legislative Session, but

did not override any vetoes. In total, the Governor vetoed the following seven Public Acts:

- [SB 188](#) (PA 18-140), *An Act Establishing The State Oversight Council On Children And Families*
- [HB 5171](#) (PA 18-35), *An Act Prohibiting The Executive Branch From Making Rescissions Or Other Reductions To The Education Cost Sharing Grant During The Fiscal Year*
- [SB 261](#) (PA 18-80), *An Act Extending The Manufacturing Apprenticeship Tax Credit To Pass-Through Entities*
- [SB 453](#) (PA 18-89), *An Act Concerning Classroom Safety And Disruptive Behavior*
- [HB 5426](#) (PA 18-119), *An Act Concerning Election Day Registration Locations*
- [SB 523](#) (PA 18-156), *An Act Concerning An Animal Abuse Registry*
- [SB 528](#) (PA 18-157), *An Act Concerning State Contract Assistance Provided To Certain Municipalities*

Separately, it is expected that a Special Session may be called later this summer to debate online gaming and sports gambling, after the U.S. Supreme Court issued an opinion legalizing betting on professional and college sports. The decision allows states to pass laws allowing these forms of gambling.

Qualidigm and Maine Quality Counts Announce Merger



QUALIDIGM

Qualidigm and Maine Quality Counts, a regional health improvement collaborative of Manchester, Maine, announced plans to merge. Under the terms of the agreement, the merger will be complete on August 1, 2019.

Collectively, Qualidigm and Maine Quality Counts have been providing healthcare consulting and quality improvement services to a variety of government and private-sector clients for over 50 years. Currently, Qualidigm leads several local, regional, and national healthcare quality improvement programs. Maine Quality Counts leads initiatives in Maine, New Hampshire, and Vermont.

"This merger consolidates both organizations' well-respected experience and qualifications, with the goal of providing comprehensive, coordinated, quality improvement services that support patients and healthcare providers throughout New England and the United States," said Timothy Elwell, PhD, Qualidigm President and CEO. "Combining forces with Maine Quality Counts positions us to deliver healthcare innovations to all citizens and healthcare providers in Northern New England. Equally important is the national dissemination of innovative ideas and best practices that will be possible through our rural healthcare center of excellence centered in Maine."

"Maine Quality Counts is excited to join forces with Qualidigm," said Larry Clifford, Maine Quality Counts Executive Director. "The alignment and synergies of our combined expertise will enable us to extend the reach and impact of our services to improve and transform healthcare in Maine, New England, and beyond."

Dr. Elwell will lead the new organization once the merger has been completed.

Insights on Hospital Disaster Response



On an ongoing basis, Connecticut hospitals conduct a variety of drills and training exercises with the purpose of improving the response to any number of manmade or natural disasters. Although hospitals can never fully anticipate what will prompt the need to implement their disaster plans, insights and lessons learned from hospitals and health systems across the country serve as valued tools in building resiliency within the healthcare delivery system.

To that end, the Office of the Assistant Secretary for Preparedness and Response (ASPR), Technical Resources, Assistance Center, and Information Exchange (TRACIE), recently released a [document](#) focusing on the pre-hospital care, trauma, and emergency response to mass shootings. In case studies from recent mass shootings in Las Vegas, Orlando, and Clark County, Nevada, clinicians who were interviewed discussed how they provided emergency care and offered lessons they learned from the events.

Visit the [ASPR TRACIE website](#) to review resources available on healthcare system preparedness.

Education Updates

Create a Safer Hospital Initiative at Your Hospital

Monday, July 16, 2018

9:00 a.m. - 12:00 p.m.

[Event Registration](#)

Learn strategies and tools to enhance worker safety, minimize workplace violence, and facilitate the adoption of peer-to-peer support programs for healthcare workers and team members using the principles of high reliability.

Peer Supporter Training

Tuesday, July 24, 2018

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

[Event Registration](#)

Thursday, August 30, 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."

Crisis Prevention Institute Certification Training

Tuesday, July 31, 2018

Wednesday August 1, 2018

Thursday, August 2, 2018

9:00 a.m. - 5:00 p.m.

Participants must attend all three sessions.

[Event Registration](#)

The three-day Crisis Prevention Institute certification training program includes de-escalation training and strategies to recognize and address high risk situations. This blended course includes two-to-three hours of online learning before participants attend classroom instruction. This is a program conducted in collaboration with the Crisis Prevention Institute; the cost of the program is \$3,049.

Create a Safer Hospital Initiative at Your Hospital

Wednesday, August 22, 2018

9:00 a.m. - 12:00 p.m.

[Event Registration](#)

Learn strategies and receive tools to enhance worker safety, minimize workplace violence, and facilitate the adoption of peer-to-peer support programs for healthcare workers and team members using the principles of high reliability.

De-escalation Training

Tuesday, August 28, 2018

9:00 a.m. - 12:00 p.m.

[Event Registration](#)

De-escalation training will equip participants with proven strategies for safely defusing anxious, hostile, or violent behavior at the earliest possible stage. This training program is included in the CPI Certification Training program and is intended for those who have an interest in the subject but are not receiving the certification.

