Opening Doors-CT Hospital Foundation Receives United Health Foundation Grant

The United Health Foundation (UHF) has donated $300,000 to help extend the Opening Doors-CT Hospital Initiative, which is currently coordinating a network of five Community Care Teams (CCTs) across the state, with hopes to expand the network into additional Connecticut communities by the end of 2017.

The grant was announced on June 29, 2016, by the Partnership for Strong Communities (PSC), which oversees the Opening Doors-CT Hospital Initiative with CHA. The Initiative uses CCTs to connect people experiencing homelessness, who are also frequent users of hospital emergency departments (EDs), with housing and other services.

A study by the Initiative showed that 40 percent of frequent visitors to EDs are homeless or struggle with housing insecurity. According to recent data from the Connecticut Homelessness Management Information System (HMIS), there were nearly 11,000 people experiencing homelessness in 2015.

The Initiative assists in coordinating CCTs – teams of healthcare, housing, and social service providers who meet regularly to identify people with complex problems who frequently use hospital EDs to address primary healthcare needs. Once identification has taken place, CCTs connect people with housing and other services through the creation of individualized care plans.

The Opening Doors-CT Hospital Initiative began in 2014 with four CCTs operating in five hospitals – Hartford Hospital, Middlesex Hospital, Norwalk Hospital, Saint Francis Hospital and Medical Center, and Yale New Haven Hospital. The expansion of the program will include the creation of a Learning Collaborative with key partners who will share best practices, develop online resources, and undertake a qualitative and quantitative program analysis.

A $4.5 million appropriation by the Legislature to expand the CCT model across the state was rescinded by Governor Dannel Malloy during the last legislative session. While UHF grant funds cannot be used to operate CCTs, the development of a Learning Collaborative will lead to standard approaches to the establishment and administration of CCTs, as well as the adoption of common performance and outcome measurements, which will help facilitate the expansion of the model to other communities and empower CCT advocates. The need for funds to cover the costs of patient care management and to administer the operation of a CCT remains a challenge, however.

The grant announcement was made during the final forum in PSC’s annual IForum series, sponsored by the United Health Foundation, which brought together about 150 community leaders, including Gov. Malloy, homeless advocates, and healthcare professionals, to discuss innovative ways to increase access to care.

IForum participants spoke about the value of the CCTs to patients, hospitals, and the community at large.

“All of us, from hospital staff and housing providers to mental health professionals, are able to coordinate and make sure a patient is getting services and not falling through the cracks in the system,” said Terri DiPetro, Director, Center for Behavioral Health, Outpatient Services, Middlesex Hospital. “By meeting regularly to discuss cases and communicating vital health data in a timely manner, we can work together to make sure a client has everything he or she needs to recover.”

“Stable housing is a key component to reducing the number of emergency department visits, because without a safe, secure home to go to after hospitalization or treatment, people cannot recover and get back on their feet,” said Alicia Woodsby, Executive Director, Partnership for Strong Communities. “This initiative, supported through the generosity of partners like United Health Foundation, will provide valuable resources to expand the reach of CCTs and improve the care for our most vulnerable populations.”

For more information about the work being done by the Partnership for Strong Communities, click here.

Connecticut Hospitals Among Nation’s Most Wired

Connecticut hospitals ranked among the country’s Most Wired, according to Health Care’s Most Wired 2016 survey, published in Hospitals & Health Networks.

The William W. Backus Hospital, Bristol Hospital, The Hospital of Central Connecticut, Danbury Hospital, Middlesex Hospital, Norwalk Hospital, Saint Francis Hospital and Medical Center, Waterbury Hospital, and the Yale New Haven Health system were honored as among the country’s Most Wired hospitals.

As cybersecurity threats have grown in the last year, so have hospitals’ awareness of these threats and the steps they have taken to
protect themselves against attack, the survey found. Although Most Wired hospitals and health systems were already using intrusion detection systems, the survey found that they are now taking more aggressive steps to fight back against hackers trying to infiltrate their information technology systems. The survey found that 67 percent of Most Wired hospitals and health systems are using pattern detection to prevent automated logins, compared with 60 percent in 2015 and 48 percent in 2013.

Hospitals and health systems are also putting more resources into defensive systems and employee education, according to the results of this year’s survey, because of a growing concern about the practice of social engineering, which entails using personal interaction – such as posing as a co-worker or family member – to obtain password information or some other means to break into a hospital’s data.

Among Most Wired hospitals, 40 percent perform annual social engineering risk assessments, 28 percent perform unannounced assessments, and 7 percent perform assessments quarterly.

Other areas of importance, according to the survey, include using data to make the transition from volume-based to value-based reimbursement; helping to connect hospitals in remote locations with specialists via video or audio; and continuing work to make electronic health records more useful and shareable among different hospitals and health systems.

The survey also notably found that Most Wired hospitals are using telehealth to fill gaps in care so they can provide services 24 hours a day, 7 days a week, and expand access to medical specialists. This year’s results show:

- The top three telehealth services offered in hospitals are consultations and office visits, stroke care, and psychiatric examinations and psychotherapy.
- Stroke care is the most rapid growth area for telehealth services, up 38 percent from 2015, as evidence-based studies emphasize the time urgency of stroke care.

“Hospitals are breaking out of their traditional four walls and providing care where and when patients need it,” said AHA President and CEO Rick Pollack. “These Most Wired hospitals exemplify this transformation by harnessing technology, engaging patients, and offering services remotely. And, removing policy and other barriers to telehealth will allow even faster adoption of these amazing technologies.”

HealthCare’s Most Wired™ survey, conducted between January 15 and March 15, 2016, asked approximately 2,146 hospitals—more than 34 percent of all hospitals in the U.S.—how they are using IT initiatives to improve performance for value-based healthcare. Detailed results of the survey and study can be found in the July issue of the magazine.

Read to Grow Launches Books for Every Baby Campaign

Read to Grow, the organization that distributes more than 180,000 free books to Connecticut babies and children through 12 hospitals each year, launched a Books for Every Baby campaign on June 30, 2016. The organization currently reaches more than 58 percent of babies by giving out books in English and Spanish to new parents; the campaign aims to reach 100 percent of Connecticut newborns.

Read to Grow began in 2000, in collaboration with Yale New Haven Hospital. At a press conference launching the campaign, Marna Borgstrom, President and Chief Executive Officer, Yale New Haven Health, and Chief Executive Officer, Yale New Haven Hospital, spoke, along with Congresswoman Rosa DeLauro (D-3), New Haven Mayor Toni Harp, and Read to Grow Founder Roxanne Coady.

“We were proud to start out with Read to Grow,” Ms. Borgstrom said at Yale New Haven Hospital, where Read to Grow has given Literacy Packets to more than 85,000 mothers of babies born there. “One of the social determinants of the health of a child is education… and reading is a foundation for that.”

“There is simply no better way to invest our health and education dollars than in our children, and we can do that through early childhood education and programs like Books for Every Baby,” Congresswoman DeLauro said. “Read to Grow not only helps to foster the love of reading in a new generation in Connecticut, it helps kids discover the adventure that awaits us each time we open a book. This is a wonderful organization that makes a difference in so many lives.”

Ms. Coady said the campaign will work to spread awareness among all Connecticut citizens of the dramatic differences that early language skills can make, starting when a child enters kindergarten and lasting a lifetime.

“Parents are their baby’s first teacher,” she said. “We want to encourage them to read to their children and give their kids a good, strong beginning. Unfortunately, the reality is that too many families in Connecticut, especially low-income families, have no books for their babies and kids. We need to change that.”

Mayor Harp, who in 2015 established a Blue Ribbon Commission on Reading to improve reading outcomes from students in New Haven, also spoke.

“Reading proficiency lends itself to lifelong learning – that’s another reason early childhood reading must remain a priority,” Mayor Harp said. “When children are encouraged to read and become practiced, habitual readers, they’re more likely to become curious, stay curious, and satisfy that curiosity with additional reading and learning.”

Join the campaign by clicking here.
Connecticut Zika Cases Increase While Monitoring Continues

While efforts to fund the fight against the Zika virus have stalled in Congress, the number of confirmed cases in Connecticut has risen to 27 since the state began tracking the illness in February, according to data released by the state Department of Public Health (DPH).

More than 450 patients – including 363 pregnant women – have been tested for the virus so far in Connecticut as of July 12, according to DPH. Of the 27 patients who tested positive for Zika, three were pregnant. No locally acquired cases have been reported. Sixteen of the 25 cases originated in the Dominican Republic, while the rest were acquired in Puerto Rico, Columbia, Honduras, Jamaica, Haiti, and St. Lucia.

"Today’s results are another reminder to Connecticut residents travelling not just to the Dominican Republic, but to any Caribbean island or areas in Central or South America, that the Zika virus remains a serious health threat, especially for pregnant women," said DPH Commissioner Dr. Raul Pino. "It is critical to remember that the vast majority of people infected with Zika never show symptoms of the virus. Therefore, it is important for pregnant women who travel to a Zika-affected area to consult with their physician when they return, and equally important for their male partners and the male partners of women who would like to conceive to follow guidelines for sexual activity whether they exhibit symptoms or not."

Guidelines from the Centers for Disease Control recommend that pregnant women and their partners either abstain from sex or consistently use condoms for the duration of the pregnancy. Women who are trying to conceive should wait at least eight weeks for either the onset of Zika symptoms or the date of the last possible exposure, if asymptomatic, while their male partners should wait at least six months before trying to conceive if they have symptoms of the virus, or eight weeks after last possible Zika exposure, if they have no symptoms.

DPH also announced it has received $320,564 in federal emergency preparedness funding, which it will use to continue implementing the state’s Zika Surveillance and Response Plan. The funding will also be used to track Zika-positive pregnant women and their babies to monitor for microcephaly, other serious birth defects, and adverse pregnancy outcomes linked to Zika.

The increase in Connecticut cases of the mosquito-borne virus is not unlike the spread of the illness elsewhere in the United States. According to the CDC, there have been 1,133 positive cases of Zika since February, when the CDC started tracking the illness. None of the positive tests are locally acquired mosquito-borne cases, however. Of the 1,133 cases, 1,132 were travel related, and one was acquired in a laboratory. Fourteen of the cases were sexually transmitted, according to the CDC.

The first U.S. Zika-related death occurred in Utah last month, authorities announced. The elderly patient contracted the virus while traveling abroad to an area with a Zika outbreak, but the CDC has said it’s unclear if or how the virus contributed to the death because the patient also suffered from another health condition.