Connecticut Health Equity Efforts Highlighted Nationally

CHA’s efforts to improve health equity were highlighted during the American Hospital Association’s Health Research & Education Trust’s Quality and Equity Roadmap national conference, held July 22, 2015.

Elizabeth Beaudin, RN, PhD, Senior Director, Nursing, Health, and Workforce, discussed how the CHA Diversity Collaborative (now known as the CHA Health Equity Collaborative) is working to eliminate healthcare disparities and improve quality and health equity. She described hospital efforts including CHA’s statewide asthma initiative, created to improve patient care and access and to design new models of care that will transform community partner and hospital relationships.

Other presenters during the session included Joseph Betancourt, MD, Director of the Disparities Solutions Center, Massachusetts General Hospital, and Karen Garvey, Vice President, Quality, Safety, and Process Improvement, Parkland Health & Hospital System. The presenters highlighted the importance of community partnerships and designing improvement initiatives that can address health equity and quality, which were described by the speakers as being “two sides of the same coin.”

The national conference was held in San Francisco prior to the 23rd Annual AHA Leadership Summit. More than 400 participants took part in the program, which focused on the intersection of quality, patient safety, and health equity. Representatives from Eastern Connecticut Health Network, Griffin Hospital, Saint Francis Hospital and Medical Center, and Western Connecticut Health Network were also in attendance.

CHA’s High Reliability Program Expands to Patients and Families

The high reliability safety movement, which has resulted in more than 25,000 staff and physicians trained in high reliability safety behaviors since 2011, is now expanding to engage patients and families in quality and patient safety.

As part of this work, hospitals and patient care advocates are collaborating, through CHA, to build and strengthen patient family advisory councils. The kickoff event for this effort is Partnering with Patients for Better Healthcare: Establishing and Sustaining Patient Family Advisory Councils to Help Eliminate Harm, a program that will be held at CHA on Tuesday, September 29, 2015.

The program will feature keynote speakers Kimberly Blanton, Volunteer Patient Advisor at Vidant Health System, and Rosemary Gibson, Senior Advisor at The Hastings Center. Two breakout sessions, presented by representatives from Planetree and the Institute for Patient- and Family-Centered Care, will focus on establishing and sustaining patient family advisory councils.

There is no fee for this program. Registration will be limited to five attendees per organization. Organizations are encouraged to register both patients and staff.

Bill Requiring Hospitals to Notify Patients of Observation Status Heads to President

On July 27, The U.S. Senate passed legislation that will require hospitals to provide Medicare beneficiaries with written notification and a related oral explanation at discharge or within 36 hours, whichever is sooner, if they receive more than 24 hours of outpatient observation services. The measure, Notice of Observation Treatment and Implication for Care Eligibility Act (H.R. 876), was approved by the House in March, and now goes to the President for signature. The legislation would take effect one year after enactment. CHA will work with hospitals to coordinate the new federal law with existing state notice requirements.

The federal law requires that written notification must explain in plain language the Medicare patient’s status as an outpatient under observation, the reasons for that status, and the implications for cost sharing and Medicare skilled nursing facility coverage. The notice must be available in appropriate languages and signed by the patient or his or her representative, or by hospital staff if the former refuse to sign it.

Connecticut hospitals believe it is important for patients to know their status at the hospital and have been communicating information to patients about their observation status, both verbally and in written form, even prior to this measure. CHA has worked with the Connecticut congressional delegation on the issue, with a focus on minimizing confusion for patients, particularly with regard to the timing of the notice.

New Online Portal Enables Tracking of State Spending and Revenue

On July 15, State Comptroller Kevin Lembo announced the launch of an interactive portal that will allow the public to view how state spending and revenue is tracking against the state’s actual budgeted amounts throughout the year. The “OpenBudget” portal enables users to search the branches of government by
The information on OpenBudget features much of the information that the Office of the State Comptroller distributes in its monthly financial reports in an online format that is updated each month. Historical data are also available. Data regarding the new approved state budget will be added in September. The effort is part of Comptroller Lembo’s effort to improve transparency and engage the public in policy discussions.

**Education Updates**

**Lean Principles: Process Flow and Value Stream Mapping in Healthcare**
Session 1: Thursday, September 3, 2015
Session 2: Thursday, September 10, 2015
9:00 a.m. - 2:00 p.m.
Participants must attend both sessions.

As the demands of health reform drive change in all areas of healthcare delivery, hospital leaders are focused on transforming their organizations through strategies that simultaneously increase revenue and sharply reduce costs. Lean principles offer leaders a management system and methodology that improves team engagement, eliminates roadblocks, and allows hospitals to improve the quality of care for patients by reducing errors and waiting times. It is a systematic approach to reducing costs and risks, while simultaneously setting the stage for growth and expansion.

**Financial Skills for Managers**
Thursday, September 10, 2015
9:00 a.m. - 3:00 p.m.

Because healthcare delivery methods and payment systems are changing rapidly, carefully managing the financial health of the organization is more important than ever. Resources are scarce and stretched to the breaking point. Doing more with less is routine. The need for sound business and financial management tools—survival skills—is paramount for all managers. These include planning and budgeting, financial analysis, and maximizing resources, all of which are essential if managers are to achieve the institution’s mission and contribute to "bottom line" results. Bill Ward, a popular and dynamic lecturer on financial management in healthcare is back by member request to present the program.

**Staff to Management: Starting the Transition**
Tuesday, September 15, 2015
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.

**Conflict Management: Engaging the Difficult Employee**
Wednesday, September 16, 2015
9:00 a.m. - 3:00 p.m.

It is clear to almost everyone that conflict is inevitable in life—in our personal lives as well as in the workplace. Different personalities, different work styles, cultural/ethnic norms, and differences in generational mix, all lead to an endless possibility of conflict surfacing at work. What is not so clear is the role conflict plays in the process of change and effective team problem solving—both major factors in improving organization performance. How can we recognize and manage the sources and trigger points of conflict? When is conflict healthy—what makes it destructive? How can we reduce or defuse unnecessary conflict? What are the various styles of dealing with conflict, and the risks and benefits of each approach?

**HRO Train-the-Trainer**
Thursday, September 17, 2015
9:00 a.m. - 4:00 p.m.

After leadership training takes place with hospitals and ambulatory practices, individuals who embody a commitment to high reliability should be chosen from those organizations. Those are the trainers of the next generation of high reliability participants. They can include educators, front-line managers, and senior leaders.

Medicine, Nursing, Quality, and Radiology continuing education credits are offered for this session.
**HRO Leadership Method Training**
Friday, September 18, 2015
9:00 a.m. - 4:00 p.m.

Leadership 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 seven-hour Leadership sessions are designed to teach your hospital or ambulatory leaders the concepts of high reliability science and behaviors. The sessions are structured for leaders at the manager level and above.

Medicine, Nursing, Quality, and Radiology continuing education credits are offered for this session.

[Event Registration](#)

**Cross Cultural and Diversity Inclusiveness Training**

Session 1: Friday, September 18, 2015
Session 2: Friday, September 25, 2015
8:30 a.m. - 2:00 p.m.

This program is being held at the Connecticut Institute for Primary Care Innovation (CIPCI) in Hartford.

In partnership with the Hispanic Health Council, the Saint Francis Center for Health Equity, and the Connecticut Association of Healthcare Executives, CHA is again pleased to offer Cross Cultural & Diversity Inclusiveness Training (CC&DIT)—a unique, comprehensive, and interactive program to achieve the goal of improving cultural competence in the delivery of care and addressing healthcare disparities.

The CC&DIT curriculum was developed in direct response to member requests for help in providing diversity education and is structured as a two-module program, each session five hours in duration—delivered once each week over a two-week period. Training content is based on current research that emphasizes the idea that cultural competence is not achieved through a single training event—but is a lifelong commitment to learning, and professional skills development. With over 150 members completing the training, program evaluations have been consistently positive about the value of this training.

Diversity Collaborative team members are encouraged to attend as a way to help achieve team goals in their organization.

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