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[Printer-Friendly Version](#)

In This Issue:

[Chief Medical Examiner Predicts Increase in 2016 Drug-Related Deaths](#)

[Governor Issues New Executive Order on CON Task Force](#)

[First 2016 Human Case of West Nile Virus Identified](#)

[Yale New Haven Health, L+M Healthcare Affiliation Receives Full Approval](#)

[Hartford HealthCare Announces New Leadership Structure](#)

[End-of-Life Care Decisions is the Focus of CHA Educational Program](#)

[Education Updates](#)

[Update Archives](#)

Chief Medical Examiner Predicts Increase in 2016 Drug-Related Deaths



The state's Chief Medical Examiner is predicting that 888 people will die of accidental drug overdoses this year, which is a continuation of the annual increase in drug-related deaths that has occurred in Connecticut since 2012.

Chief Medical Examiner Dr. James Gill said in a release issued on September 1, 2016 that between January 1 and June 30, 444 people died of accidental drug intoxications in the state. In 2015, 729 people died from fatal drug overdoses, according to the Chief Medical Examiner's office.

Dr. Gill is projecting 528 of those projected drug intoxications will involve opioids, which includes heroin, morphine, codeine and fentanyl. Fentanyl, a synthetic opioid that is 50 times more powerful than heroin, is being found in more fatal overdoses in Connecticut. Last year, 188 accidental drug intoxications involved fentanyl; Dr. Gill's projection for overdoses involving fentanyl in 2016 is 446, more than double the 2015 figures.

The Chief Medical Examiner's office also said there has been an increase in overdoses that involve both opioids and benzodiazepines, which include drugs like Valium and Xanax, over the last four years. The state is attempting to address the epidemic by taking a number of steps, such as distributing more than 9,000 kits of the overdose reversal medication naloxone (known as Narcan) since 2014 and rolling out a new, interactive website that allows people to search for nearby pharmacies that carry naloxone.

CHA and Connecticut hospitals have been at the forefront in the battle to prevent prescription drug abuse by being early adopters of voluntary opioid prescribing guidelines for Emergency Departments and sponsoring training and education to programs for prescribers of opioids. Earlier this year, CHA provided testimony in support of a measure to increase access to overdose reversal drugs. [PA 16-43, An Act Concerning Opioids And Access To Overdose Reversal Drugs](#), is one component of a comprehensive statewide strategy to reduce the misuse and abuse of opioids and other prescription drugs in Connecticut.

Governor Issues New Executive Order on CON Task Force

On Wednesday, September 7, Governor Malloy issued [Executive Order 51A](#), which makes changes to [Executive Order 51](#). Executive Order 51 created the Certificate Of Need (CON) Task Force and placed a moratorium on any hospital mergers until after January 15, 2017. The updated Executive Order gives the Department of Public Health (DPH) the ability to take action on specific pending hospital merger/affiliation CON applications if certain conditions are met.

Additionally, Executive Order 51A extends the deadline for the Task Force to issue its report, from December 1, 2016 to no later than January 15, 2017, and extends the general moratorium on decisions issued by DPH and the Department of Social Services (DSS) on CON applications from January 15, 2017 until June 30, 2017.

The Task Force, which was established by executive order in February 2016, is charged with examining the state's oversight process for the establishment, termination, transfer, acquisition, and expansion of hospitals and medical service providers. The 17-member Task Force is chaired by Lt. Gov. Nancy Wyman.

Documents related to the work of the Task Force can be found [here](#)

First 2016 Human Case of West Nile Virus Identified



The Connecticut Department of Public Health (DPH) announced on August 30 that a resident of Milford has tested positive for West Nile virus (WNV) infection, in what is the first identified human case of WNV-associated illness in Connecticut this season.

According to DPH, the patient, who is between 70-79 years of age, became ill during the fourth week of August with encephalitis and remains hospitalized. Laboratory tests confirmed the presence of antibodies to WNV. The patient did not travel out of the state before becoming ill, DPH said.

"The identification of a Connecticut resident with West Nile virus-associated illness that required hospitalization underscores the potential seriousness of infection," said Dr. Raul Pino, DPH Commissioner. "Using insect repellent, covering bare skin, and avoiding being outdoors during the hours of dusk and dawn are effective ways to help keep you from being bitten by mosquitoes."

"We continue to have weather conditions that are favorable for the mosquitoes that transmit West Nile Virus," said Dr. Philip Armstrong, Medical Entomologist at the Connecticut Agricultural Experiment Station (CAES). "These mosquitoes are most abundant in urban and suburban areas with dense human populations. West Nile Virus-positive mosquitoes were identified in Milford on August 15."

West Nile Virus has been detected in the state every year since 1999. During 2015, WNV was detected in mosquitoes collected at trap

sites in 24 towns and ten confirmed human cases of WNV were reported in Bridgeport (6), Fairfield (1), Milford (1), New Haven (1), and Shelton (1).

The CAES maintains a network of 91 mosquito-trapping stations in 72 municipalities throughout the state. Mosquito traps are set on Monday through Thursday nights at each site every ten days on a rotating basis. Mosquitoes are grouped (pooled) for testing according to species, collection site, and date. Positive findings are reported to local health departments and on the [CAES website](#).

Exposure to mosquitoes and the risk of acquiring WNV infection varies by season and geographic region. In Connecticut, the risk is highest during August and September, and typically subsides in October as mosquitos die off due to lower temperatures.

Yale New Haven Health, L+M Healthcare Affiliation Receives Full Approval

The affiliation of L+M Healthcare and Yale New Haven Health was fully approved today by the State of Connecticut's Office of Healthcare Access (OHCA).

The parties received regulatory approval from all State of Rhode Island agencies last week and the Federal Trade Commission last year.

"We are grateful for these approvals of this historic affiliation," said Marna P. Borgstrom, president and CEO of Yale New Haven Health. "Our goal has always been to enhance access to high quality care in the most efficient manner possible for the people of southeastern Connecticut and western Rhode Island. We are confident that we can accomplish that with this affiliation of two exceptional health systems."

"This is a defining moment in the history of healthcare in our community," said Bruce D. Cummings, president and CEO of L+M Healthcare, the parent organization of Lawrence + Memorial Hospital, Westerly (RI) Hospital, L+M Medical Group and the Visiting Nurse Association of Southeastern Connecticut (VNASC). "Our industry is changing daily. Forming this affiliation – one which is built upon a history of successful clinical partnerships – is the step necessary to ensure our community continues to receive the highest quality of care it needs and deserves."

Per the affiliation agreement, L+M Healthcare is set to become a full corporate member of Yale New Haven Health and maintain its local board of directors with fiduciary responsibility. Each hospital, and the VNASC, will maintain its identity, and the hospitals will maintain separate licenses and medical staffs.

Under the approval by OHCA, YNHHS and L+M have agreed to conduct a market assessment that will establish baseline pricing levels in the region and have agreed to the appointment of an independent monitor to assess the impact on the market for a period of five years. Additionally, under the conditions, Yale New Haven has agreed to maintain services in specialties such as cardiology, obstetrics, behavioral health and critical care for at least five years.

"Through the CON process, we were able to demonstrate to OHCA that the affiliation with L+M would help promote accessible and affordable healthcare while maintaining L+M Healthcare as an engine for economic growth in the region," said Bill Aseltyne, general counsel and chief of staff of YNHHS. "The conditions imposed by OHCA address a number of issues raised during the regulatory process, including cost and accessibility, the maintenance of local control and commitments to the workforce. We are confident in our ability to meet the goals established through the OHCA approval."

With the transaction closed, Lawrence + Memorial and Westerly Hospitals will become the first hospitals to join Yale New Haven Health as a corporate member since Greenwich Hospital affiliated in 1998. Employees of each of these hospitals will remain employed by L+M Healthcare. Over time, L+M Medical Group will merge with Northeast Medical Group. YNHHS has agreed to recognize and honor all existing labor contracts within the L+M Healthcare system.

"We are truly excited about this affiliation, especially as we have gotten to know and appreciate the quality of the medical staff, employees and Board members associated with L+M Healthcare," said Ms. Borgstrom. "We welcome them to YNHHS and look forward to a long and successful future serving the critical healthcare needs of patients in this region."

Yale New Haven has also pledged to work collaboratively with the Governor's Office and appropriate state agencies to develop long-term strategies to support the State's Medicaid program.

Hartford HealthCare Announces New Leadership Structure



Hartford HealthCare has announced a change to its organizational structure, separating the roles of President and Chief Executive Officer, and expanding the responsibilities of some senior leaders.

Elliot Joseph, who has served as President and Chief Executive Officer of Hartford HealthCare since 2008, will remain as CEO of the integrated healthcare system. Jeffrey Flaks will be named President and Chief Operating Officer; he had previously served as Executive Vice President and COO.

"This change recognizes the remarkable evolution and maturation of Hartford HealthCare," Mr. Joseph said. "We are providing high value, coordinated healthcare across Connecticut. We have created an organization delivering on the promise of more affordable, high-quality care."

As President, Mr. Flaks will have overall responsibility for the direction of clinical operations, including clinical redesign, the system's institute model, the successful implementation of the Epic electronic health record, and clinical outcomes reporting.

"I am extremely humbled by the responsibility that's been entrusted to me, and grateful to have such a talented, committed team to work with," Mr. Flaks said. "I look forward to continuing the work of building a better system of care for our patients, customers, and communities."

Two other Senior Vice Presidents have been named Executive Vice Presidents with additional oversight and responsibility. Tracy Church, previously Chief Human Resources Officer, will be Chief Administrative Officer. David Whitehead, the organization's Chief Strategy and Transformation Officer, will have additional responsibilities for network growth, new venture development, and community benefit.

"As our organization matures, we must adapt our roles and processes to reflect our capabilities and priorities," Mr. Joseph said. "The framework I am announcing today will do that, and allow us to better serve those who depend on us."

The changes, which have been approved by Hartford HealthCare's board of directors, will take effect October 1.

End-of-Life Care Decisions is the Focus of CHA Educational Program



The Connecticut Hospital Association will hold an educational program on palliative care and hospice services on Monday, September 26, 2016, as part of a statewide initiative to improve end-of-life care in Connecticut.

The evening program, *Continuing the Conversation on Hospice and Palliative Care*, is co-sponsored by the Conversation Project and will feature presentations by experts who will review the evidence for appropriate use of palliative and hospice care, discuss techniques for initiating conversations, and advise providers how to implement sustainable change in their organizations.

The program is part of the work of the End-of-Life Care Advisory Group that was created this year, based on direction from the CHA Board Committees on Patient Care Quality and Population Health, to develop an evidence-based, compassionate, statewide end-of-life care strategy in collaboration with continuum of care partners. The advisory group, which is chaired by Adam Silverman, MD, Vice President, Ambulatory Strategy and Development, Trinity Health – New England, and Karen Mulvihill, DNP, APRN, ACHPN, FNP, Director of Palliative Care Services, Western Connecticut Health Network, is also charged with facilitating the statewide adoption of guidelines for practice improvement in palliative care.

[View Brochure](#) | [Event Registration](#)

Education Updates

Budgeting Basics for Healthcare Managers

Tuesday, September 13, 2016

9:00 a.m. - 3:00 p.m.

[View Brochure](#) | [Event Registration](#)

Many healthcare department managers have traditionally risen from the professional ranks as successful clinicians or technicians but with little or no formal business financial training. As a result, many are thrust into a chaotic environment without the necessary knowledge or tools in financial management. Skills in planning and budgeting are essential if they are to achieve the institution's mission and contribute to "bottom line" results, particularly in an environment of chronic federal and state underfunding. In a very real sense, these represent survival skills for both managers and organizations. This member-requested management development program, part one of a two-part series, provides managers with an introduction to budgeting concepts, including calculating the volume budget and a revenue budget, tools to develop staffing plans and salary and supply budgets, and information on how best to handle capital and equipment requests.

Continuing education credits are offered for this session. Please see the brochure for details.

Review Course for the ANCC's (RN-BC) and AAMSN's (CMSRN) Medical Surgical Certification Exams

Session I: Thursday, September 15, 2016

Session II: Friday, September 16, 2016

8:30 a.m. - 5:00 p.m.

[View Brochure](#) | [Event Registration](#)

This two-day course is designed to prepare the Medical Surgical Nurse with information needed to adequately prepare for both the RN-BC and CMSRN certification exams.

In order to take the Medical Surgical Nurse certification exam, the applicant must be a licensed Registered Nurse with an Associate Degree or diploma from an accredited two-year RN program. The nurse must have worked at least two years in a full-time capacity as a Medical Surgical nurse, with at least 2,000 hours within the past 3 years. Additionally, at least 30 hours of continuing education hours should have been completed in Medical Surgical nursing over the past 3 years.

Continuing education credits are offered for this session. Please see the brochure for details.

Worker Safety and Worker Engagement: A High Reliability Approach

Tuesday, September 27, 2016

9:00 a.m. - 12:15 p.m.

[Event Registration](#)

This session supports CHA's efforts to take care of the staff who take care of our patients. Worker Safety and Worker Engagement: A High Reliability Approach discusses behaviors, techniques, and measurement for worker safety, as used by other high reliability hospitals that are farther along their journey. Medicine, Nursing, and Quality continuing education credits are offered for this session.

HRO Safety Coach Training

Tuesday, September 27, 2016

1:00 p.m. - 4:15 p.m.

[Event Registration](#)

Safety Coaches are peer mentors, designed to recognize and acknowledge good high reliability behavior and to remind people about opportunities to improve behavior that does not stay true to high reliability concepts. Medicine, Nursing, and Quality continuing education credits are offered for this session.

HRO Rounding to Influence

Wednesday, September 28, 2016

9:00 a.m. - 12:15 p.m.

[Event Registration](#)

The program teaches leaders how to go out on the units to coach, mentor, and sustain high reliability habits and practices. Medicine, Nursing, and Quality continuing education credits are offered for this session.

HRO Fair and Just Accountability

Wednesday, September 28, 2016

1:00 p.m. - 4:15 p.m.

[Event Registration](#)

This session, for Human Resources executives and anyone else who manages people, will train staff to review performance from a standardized perspective when there is an adverse event – to focus on the behavior rather than the outcome. Medicine, Nursing, and Quality continuing education credits are offered for these sessions.

Staff to Management: Starting the Transition

Thursday, September 29, 2016

9:00 a.m. - 3:00 p.m.

[View Brochure](#) | [Event Registration](#)

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.

Continuing education credits are offered for this session. Please see the brochure for details.

Conflict Management: Engaging the Difficult Employee

Friday, September 30, 2016

9:00 a.m. - 3:00 p.m.

[View Brochure](#) | [Event Registration](#)

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?

Continuing education credits are offered for this session. Please see the brochure for details.

