CHA’s Nurse Preceptorship Program Strengthens Work of Nurse Preceptors

Florence Nightingale in the 1800s said: “Let us never consider ourselves finished nurses. We must be learning all of our lives.” On September 6, nearly 50 nurses participated in the CHA Nurse Preceptorship Program. The program, developed by CHA and a team of educators from hospitals and schools of nursing, offered content that is foundational for the role of nurse preceptor.

Janice Watts, MSN, RN, Program Director of Goodwin College Nursing School; Justin Sleeper, MSN, RN, Rushford Center; and Ellen Crowe, RN, BSN, Director of Clinical Excellence and Care Redesign, CHA, presented on a nurse preceptor’s role and responsibilities in educating and mentoring new staff members. They described the preceptor’s role as a role model, teacher, facilitator, guide, guardian, and evaluator, all in one. They emphasized how critical the initial experiences provided to staff members who are learning a new role are to their future success in healthcare.

The presenters also detailed the scope of practice for nurse preceptors, as defined by regulations and the Nurse Practice Act. Learning and communication styles were examined through interactive sessions. The group also explored the multi-faceted, multi-generational healthcare workforce, which requires a balanced and professional approach.

Ms. Crowe presented an afternoon session on the principles of constructive feedback delivery, evaluating competence, and new and different ways to foster critical thinking. She noted that instilling in new nurses that formal and informal lifelong learning are essential for nurses as frontline leaders is an important aspect that needs to be incorporated.

World Sepsis Day: September 13, 2018

Thursday, September 13, 2018, is World Sepsis Day. World Sepsis Day is an initiative by the Global Sepsis Alliance to unite people worldwide in the fight against sepsis, which accounts for at least 8 million deaths worldwide annually.

Connecticut hospitals have always been dedicated to reducing the incidence of sepsis; recent data have shown that hospitals have room to improve in this area. Connecticut hospitals are participating in projects to reduce sepsis through the HRET Hospital Improvement Innovation Network (HIIN), as well as through ongoing high reliability efforts. A model from the Sepsis Alliance, called It’s About TIME, is intended to help simplify the recognition of sepsis symptoms.

CHA is partnering with Qualidigm for a conference on sepsis that will be held on Wednesday, October 31, 2018. The conference, I Suspect Sepsis! Enhancing the Awareness of Sepsis Across the Continuum, is open to the public; patients and families are encouraged to attend. Click here for more information.

Patients and families play an important role in sepsis awareness, as the key issue involves recognizing the symptoms early. A model from the CDC, Suspect Sepsis, teaches providers, patients and families to articulate their concerns upon presentation to a provider or a hospital.

September is Sepsis Awareness Month; next week we’ll highlight hospital efforts to educate staff and/or patients about sepsis.

Health Equity Symposium to Focus on Bias and the Impact on Disparities in Health Outcomes

On Tuesday, October 16, 2018, CHA will hold its seventh annual Health Equity Symposium. The program, Improving Health Equity: Bias and the Impact on Disparities in Health Outcomes, will feature a keynote by David Williams, PhD, the Florence Sprague Norman and Laura Smart Norman Professor of Public Health at the Harvard T.H. Chan School of Public Health and Professor of African and African American Studies and Sociology at Harvard University.

Dr. Williams is an internationally recognized authority on social influences on health. His research has enhanced the understanding of the complex ways in which race, socioeconomic status, stress, racism, health behavior, and religious involvement can affect health. The Everyday Discrimination Scale that he developed is one of the most widely used measures of discrimination in health studies. Dr. Williams has served on the National Committee on Vital and Health Statistics and on eight committees for the National Academy of Medicine, including the committee that produced the Unequal Treatment report. He has also played a visible, national leadership role in raising awareness levels of the problem of health inequalities and identifying interventions to address them. This includes his service as the staff director of the Robert Wood Johnson Foundation’s Commission to Build a Healthier America and as a key scientific advisor to the award-winning PBS film series, Unnatural Causes: Is Inequality Making Us Sick? His research has been featured by some of the nation’s top news organizations and in his TEDMED talk released in 2017.

The symposium also includes presentations by: Dorothy Roberts, Penn Integrates Knowledge Professor and the George A. Weiss University Professor of Law and Sociology, the Raymond Pace and Sadie Tanner Mossell Alexander Professor of Civil Rights, and Professor of Africana Studies, University of Pennsylvania; and Michael S. Brownstein, PhD, Associate Professor of Philosophy, John Jay College of Criminal Justice (CUNY).
Trinity Health Among Hospitals, Systems Launching Generic Drug Company

Trinity Health is among the consortium that announced last week the creation of a not-for-profit generic drug company called Civica Rx; the company was created to correct a number of problems with consumer access to the nation's generic medicine supply. Civica Rx was formed to help patients by addressing shortages and high prices of life-saving generic medications. It will focus, initially, on 14 generic drugs used in hospitals, many of which face chronic shortages, putting patients at risk.

“The generic drug marketplace is broken and, in response, we have created a unique and innovative fix — a public utility that is governed, exclusively, for the good of the people it serves,” said Richard J. Gillfillan, MD, CEO of Trinity Health. "Civica Rx will not earn profits for its investors, but will, instead, ensure that patients receive the greatest benefit — access to the drugs they need at affordable price points.”

More than 120 health organizations representing about a third of the nation’s hospitals have expressed a commitment or interest in participating with the new company. "Civica Rx represents a clear and viable path to solving a major problem," said Lou Fierens, Executive Vice President, Administrative Services. "Remember, we are talking about generic medications here — medications that should be widely and affordably available. Civica Rx will bring efficiency and transparency to a very inefficient and opaque marketplace. This will benefit society.”

Initial governing members of Civica Rx include Catholic Health Initiatives, HCA Healthcare, Intermountain Healthcare, Mayo Clinic, Providence St. Joseph Health, SSM Health, and Trinity Health. These seven organizations, representing about 500 U.S. hospitals, will each provide leadership for the Civica Rx Board of Directors and will provide much of the initial capital for the company. The U.S. Department of Veterans Affairs (VA) will also work in consultation with Civica Rx to address its particular needs. New health systems participating with Civica Rx will be announced later this year.

Three major philanthropies will also join Civica Rx as governing members: the Laura and John Arnold Foundation, the Peterson Center on Healthcare, and the Gary and Mary West Foundation. The engagement of philanthropic members is intended to further support and safeguard the company's not-for-profit, social welfare mission.

Civica Rx will be an FDA-approved manufacturer and will either directly manufacture generic drugs or sub-contract manufacturing to reputable contract manufacturing organizations. It expects to have its first products on the market as early as 2019, and in the near future, also expects to provide generic medications to the retail market, offering an affordable alternative to products from incumbent generic drug companies.

Research into the actual costs of manufacturing and distributing generic drugs suggests that, in many instances, prices for generic drugs used in hospitals can be reduced to a fraction of their current costs. This can save patients, and the health systems that care for them, hundreds of millions of dollars each year.

Civica Rx is collaborating with the American Hospital Association’s (AHA) newly formed AHA Center for Health Innovation to respond to inquiries about the initiative.

Education Update

HIIN: Expanding the Definition of Adverse Drug Events
Monday, September 17, 2018
9:00 a.m. - 4:00 p.m.
Event Registration

The session will focus on adverse drug events in all venues and the state’s response to the opioid crisis. The program will include an overview of how Good Samaritan laws operate in Connecticut and a special session to train participants in the use of Naloxone. Although pharmacy credits are available, this program will not meet the training or certification requirements that specifically allow pharmacists to prescribe Naloxone independently or dispense Naloxone pursuant to a pharmacy’s “standing order” from a prescribing practitioner. However, the program will provide an overview of how those certifications can be obtained. Continuing education credits for pharmacists, physicians, nurses, and quality professionals will be offered. This session is supported by HIIN.

Peer Supporter Training
Thursday, September 20, 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."

Lean Principles: Project Charter Preparation and Planning
Thursday, September 27, 2018
9:00 a.m. - 2:30 p.m.
Event Registration

Lean principles and methodology are valuable in improving healthcare, but evidence shows that learning about the principles and methodology is simply not enough. To get the desired results, the principles must be applied. This program, a follow-up to CHA’s two-part Lean Principles: Process Flow and Value Stream Mapping in Healthcare, provides an overview of the methodology and tools needed for planning process improvement initiatives.

Participants are asked to bring a process improvement opportunity currently under consideration at their facility, enabling them to create a draft charter as part of their actionable plan toward their process improvement initiative.