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**Adverse Drug Events and Connecticut's Opioid Crisis are Foci of CHA Program**

A September 17 CHA program for pharmacists, physicians, nurses, and quality professionals focused on adverse drug events and the state's response to the opioid crisis.

Sean Jeffery, PharmD, Clinical Professor at the University of Connecticut School of Medicine, and Director of Clinical Pharmacy Services, Integrated Care Partners, Hartford HealthCare, highlighted that it is important for patients taking multiple prescription medications to know of potential adverse drug interactions. He encouraged physicians and patients to conduct an annual review of prescription medications, over-the-counter medications, and supplements, to determine which are medically necessary to reduce the overall number of medications, especially for older patients.



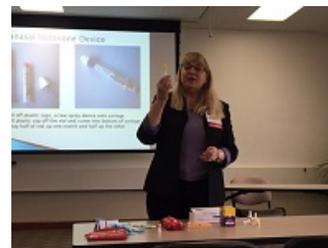
Department of Mental Health and Addiction Services Commissioner Miriam E. Delphin-Rittmon, PhD, provided an update on the opioid crisis in Connecticut and offered an overview of the state's response, noting that for the first six months of 2018, Connecticut has seen a leveling of the number of overdose deaths. She pointed out that heroin and other opiates accounted for more than half (53%) of all substance abuse admissions in 2017, outpacing alcohol-related admissions for the first time in recent years. The Commissioner also highlighted the state's Change the Script campaign, which is raising awareness of the crisis.

Carl Schiessl, Director, Regulatory Advocacy, CHA, reviewed recent changes in state law intended to address the opioid crisis. He also provided an overview of Connecticut's "Good Samaritan" laws, which encourage professionals and laypersons to help those in need of emergency medical assistance or first aid without fear of arrest or other negative legal consequences. He focused his presentation on the state law that offers immunity from civil or criminal liability and no violation of the standard of care for individuals who prescribe, dispense, or administer an opioid antagonist such as naloxone hydrochloride for the treatment of a drug overdose. All 50 states and the District of Columbia have modified their laws to increase access to naloxone.

Marghie Giuliano, RPh, CAE, Chief Executive Officer, Connecticut Pharmacists Association, described the impact that adverse drug events have on healthcare utilization, the impact of innovative practices on medication safety, and tools and resources that have been developed to reduce adverse drug events.

The program concluded with training by DHMAS Medical Director Susan Bouffard, PhD, on the administration of naloxone. Dr. Bouffard has trained more than 3,000 healthcare providers in the use of the overdose reversal medication. Information about naloxone and the Good Samaritan laws can be found on the DHMAS [website](#).

The program was supported by the HRET Hospital Improvement Innovation Network (HIIN).



**Hospital Programs Improve Sepsis Outcomes**

During Sepsis Awareness Month, hospitals and health systems throughout the state highlighted programs in place that focus on recognizing and treating sepsis. Here are some of the efforts under way.



Members of Bridgeport Hospital's Nursing Shared Governance Practice Excellence Council displaying information about the hospital's sepsis clinical redesign initiative during a September 13 Sepsis Awareness Day educational event.

Sepsis has been a major focus of **Bridgeport Hospital** clinical redesign efforts, and has produced encouraging results. Bridgeport Hospital developed a standardized process for early identification of inpatients who developed sepsis after admission and created automated triggers to alert staff, thereby allowing for rapid treatment. As a result, average length of stay for sepsis inpatients dropped from almost 7.8 days at the end of FY 2017 to just over 6.5 days through the first nine months of FY 2018 – a decrease of more than 15 percent.

Norwalk Hospital has joined other **Western Connecticut Health Network (WCHN)** hospitals to improve compliance with the CMS sepsis bundle requirements that were introduced in October 2015. At **Norwalk Hospital**, a multidisciplinary team comprising nurses, emergency department/ICU providers, laboratory, and pharmacy staff developed specific, evidence-based tactics to hardwire compliance with the sepsis bundle into the hospital's electronic medical record. The system includes triggering alerts to clinical staff when sepsis symptoms are recorded. This early warning system supports timely clinical staff decision making, which can improve health outcomes.

At **Danbury Hospital and New Milford Hospital**, EMS committed to assist with nationwide sepsis care initiatives by instituting a pre-hospital "Sepsis Alert." Nationally, hospital compliance with sepsis initiatives was only 35% in 2017, leading Danbury and New Milford Hospitals to consider additional ways of early identification of potentially septic patients. The EMS pre-hospital Sepsis Alert has contributed to increased sepsis compliance at both hospitals since the roll-out a year ago. Specifically, if a patient has signs of infection and has one very abnormal vital sign, the charge nurse and the Emergency Room doctor are notified while the patient is still in the ambulance. Also, patients are more likely to have sepsis care started by EMS staff in the field, including administration of an appropriate amount of IV fluids, as well as the possibility of IV pressors such as norepinephrine or epinephrine. Lastly, when the Sepsis Alert is activated by EMS, patients presenting to the emergency department are given the highest priority upon arrival to be seen by the ER team.

Sepsis education continues daily in the **Saint Francis Hospital and Medical Center** Emergency Department. Each morning, the ED huddle is attended by day and night shift nurses, techs, and providers, numbering about



50 in all. They are given hospital sepsis core measure compliance data, pointers on recent sepsis cases, and Sepsis Rock Star awards for excellence. When emergency staff are equipped with knowledge, they "Rock" the sepsis world and give excellent, evidence-based care.

Throughout Sepsis Awareness Month, **Yale New Haven Hospital** is running frequent reminders on all computers at clinical work stations throughout both the York Street and Saint Raphael campuses, raising awareness about the month and reinforcing the importance of using their order sets for sepsis treatment.

Connecticut hospitals have always been dedicated to reducing the incidence of sepsis, and are working on ways to continue improving. 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. 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 Requests Senators Sign on to Site-Neutral Payment Policy Letter

On Monday, CHA requested that U.S. Senators Richard Blumenthal and Chris Murphy sign on to a bipartisan letter to CMS on site-neutral payment policies. The letter, being circulated by Senators Rob Portman (R-Ohio) and Debbie Stabenow (D-Michigan), urges the Centers for Medicare & Medicaid Services (CMS) to withdraw proposals to expand certain site-neutral payment policies to grandfathered off-campus hospital provider-based departments (PBDs).

CHA asked Senators Blumenthal and Murphy to sign on to the letter, noting that Connecticut hospitals provide critical services and life-saving care on a daily basis. Withdrawal of the CMS proposals to expand certain site-neutral payment policies will go a long way toward providing Connecticut hospitals with the much-needed resources to continue to enhance the critical services provided to the residents of the state.

## Connecticut Hospitals Stand With North Carolina Hospitals



During hurricane Florence and in its ongoing aftermath, the women and men of North Carolina's hospitals have been putting patients first – even under difficult circumstances. Thousands of doctors, nurses, technicians, and support personnel have worked around the clock to care for those in need, even as their own homes and families were threatened by the storm. In particular, the southeastern part of the state was devastated and some hospitals have turned into makeshift housing for staff and anyone else in need.

The North Carolina Hospital Foundation, the 501(c)(3) affiliate of the NC Healthcare Association, has established a Disaster Relief Fund to support North Carolina's healthcare workers and their communities as they begin the process of rebuilding.

[Find out more and donate here.](#)

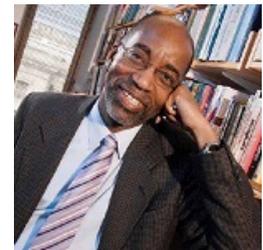
"In times of need, the public turns to their hospital and health system as a trusted destination for care," said Terry Akin, CEO of Cone Health and chair of the North Carolina Hospital Foundation. "When a disaster happens, we see our employees make remarkable personal sacrifices to ensure that care continues in their communities. This fund is an opportunity not only to provide help to those folks who are most impacted by this storm, but also to acknowledge the importance of the entire healthcare team."

One hundred percent of donations received will go to foster and accelerate the collective impact of hospitals, health systems, and care providers to help restore the health of communities affected by the storm. The NC Hospital Foundation will manage the distribution of funds to NCHA member hospital and health system employees who suffered significant property loss to their homes/residences during the hurricane and flooding.

## 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). There will also be a panel discussion on healthcare experiences in the Latino, African American/Black, and LGBTQ communities.

The Health Equity Symposium is presented as part of the Partnership for Patients HIIN educational series. Register for the event [here](#).

## Education Updates

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

[View Brochure](#) | [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.

Continuing education credits are available. See the brochure for details.

### **Create a Safer Hospital Initiative at Your Hospital**

Wednesday, October 17, 2018

9:00 a.m. - 1:00 p.m.

[Event Registration](#)

Utilizing the principles of high reliability, participants will 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.

### **Designing the Healthcare-Community-Based Organization Connection of the Future**

Wednesday, October 24, 2018

9:00 a.m. - 2:00 p.m.

[Event Registration](#)

A key component of CHA's *Statewide Collaborative to Address Social Determinants of Health* is the development of a technological platform through which hospitals/healthcare providers and community-based organizations communicate to effectively manage patients' social determinants of health related needs. This program will focus on designing the referral and communication process for the future.

### **Safe Patient Handling Forum**

Thursday, October 25, 2018

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

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

As part of the statewide *Safer Hospitals Initiative*, CHA, in partnership with PMA Companies, is hosting a *Safe Patient Handling Forum*. This Board-driven initiative is focused on providing healthcare staff with strategies and practices to improve worker safety, minimize workplace violence, and facilitate the adoption of peer-to-peer support programs.

The Forum will feature data-driven best practices, industry standards, and new strategies for reducing patient handling injuries. Attendees will have an opportunity to view and learn more about safe patient handling equipment currently on the market.

Continuing education credits are available.