



# Connecticut Hospitals: CARE WE CAN COUNT ON

The Connecticut Hospital Association 2014 Annual Report



PROGRAM *Agenda*

**Connecticut Hospitals: *Care We Can Count On*  
96th Annual Meeting  
June 18, 2014**

**3:30 – 4:00 p.m. Registration**

**4:00 – 5:00 p.m. Business Meeting and Awards Presentation**

Call to Order	Susan Davis
Invocation	Jeffrey Silberman
Report of the President	Jennifer Jackson
Report of the Chairman of the Board	Susan Davis
Awards Presentations	Susan Davis
AHA Grassroots Champion Award	
Healthcare Heroes	
Connecticut’s Hospital Community Service Award	
John D. Thompson Award for Excellence in the Delivery of Healthcare Through the Use of Data	
Acknowledgment of Outgoing Trustees	Susan Davis
Election of Trustees and Officers	Susan Davis
Passing of the Gavel	Susan Davis
Remarks of the New Chairman	Bruce Cummings
Presentation to the Retiring Chairman	Bruce Cummings
Presentation of the T. Stewart Hamilton, MD Distinguished Service Award	Bruce Cummings
Adjournment	

**5:00 – 6:00 p.m. Station Buffet and Open Bar**

**6:00 – 7:00 p.m. Guest Speaker** Quint Studer

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generous sponsorship  
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*MESSAGE from the Board Chairman and President*

IN A WATERSHED YEAR FOR HEALTHCARE, CONNECTICUT HOSPITALS HAVE CONTINUED TO LEAD THE CHARGE TO IMPROVE PATIENT CARE QUALITY AND ACCESS. This year’s Annual Meeting theme, Connecticut Hospitals: *Care We Can Count On*, reflects a clear message that Connecticut’s hospitals will continue to play a leadership role in transforming healthcare with a dedication to serving their communities by providing safe, accessible, equitable, affordable, patient-centered care for all.

With input from members, payers, business leaders, and community partners, CHA adopted a strategic plan that charts a course to continue providing leadership in the transformation to and demonstration of value-based healthcare in Connecticut, with a focus on the four strategic priorities of clinical and operational excellence, performance-based reimbursement, population health, and association effectiveness and member value.

We have much to celebrate this year. As part of Connecticut’s first-in-the-nation statewide high reliability collaborative, more than 10,000 people in hospitals across our state have been trained in high reliability science and behaviors – from CEOs to clinicians and non-clinical staff. This exciting and transformative work is resulting in a culture shift that is saving lives. And this year, Connecticut hospitals’ dedication to patient safety through high reliability science was recognized on a national level, as CHA was awarded the prestigious Dick Davidson Quality Milestone Award for Allied Association Leadership.

CHA advocacy during the 2014 Legislative Session focused on a broad spectrum of issues relevant to the hospital community, from new models of ownership and provider integration to continued advocacy for Medicaid redesign to better align cost and quality goals with value-based payment systems. More than 200,000 people have enrolled in Connecticut’s Health Insurance Exchange, and Connecticut hospitals played a key role in the process, as hospital staff provided outreach to help consumers understand and apply for health coverage.

We are working with partners across the continuum on population health, health equity, community health assessment, and health improvement. Through the CHA Diversity Collaborative, we are advancing health equity and working to eliminate disparities, with a focus this year on instituting the



*Susan L. Davis, EdD, RN*

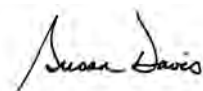


*Jennifer Jackson*

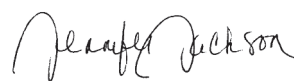
*2013 National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards) across all hospitals. CHA hospitals' focus on population health has often begun with improving employee health, as reflected in the recently launched statewide collaborative, Living Our Mission: Building Healthier Choices, establishing hospitals as models of good health for their communities.*

While we do not underestimate the ongoing financial, operational, and governance challenges that lie ahead, we remain confident that hospital leaders have all the dedication, resilience, and compassion needed to continue providing bold leadership.

On behalf of the CHA Board and the CHA staff, thank you for allowing us the privilege of serving you.



Susan L. Davis, EdD, RN  
*Chairman, CHA Board of Trustees  
 Board Member and Former President/CEO  
 St. Vincent's Health Services  
 President & CEO  
 Sacred Heart Health System (Florida)*



Jennifer Jackson  
*President and CEO  
 Connecticut Hospital Association*

## REPORT *of the Treasurer*

IT IS MY PLEASURE TO REPORT TO YOU THAT THE FINANCIAL POSITION OF THE CONNECTICUT HOSPITAL ASSOCIATION IS SOUND.

On June 10, 2014 the Financial Oversight Committee met with representatives of the Association's public accounting firm and management to review the results of the audit for the fiscal year ended April 30, 2014. The auditors issued an unqualified opinion on CHA's consolidated financial statements for the year then ended. In addition to the financial statements, the Financial Oversight Committee has reviewed the other required communications from the auditors. CHA's cash position is strong and its internal controls are effective and, for the tenth consecutive year, the auditors did not issue a management letter. For your reference, the consolidated balance sheet and income statement are included as an insert in the CHA Annual Report.

CHA followed a strong 2013 fiscal year with positive operating results in 2014. During FY 2014, CHA implemented expense controls that resulted in operating income well in excess of budget. After a thorough analysis by the Financial Oversight Committee, the CHA Board approved a "hard freeze" of the defined benefit pension plan and the implementation of a defined contribution retirement plan, resulting in a significant reduction in the pension liability and the elimination of CHA's net deficiency at year-end. CHA continued to enhance its member services and position them for future growth with initiatives such as the expansion of ChimeMaps and the development of advanced data analytics. Net operating income totaled \$294,000, a 1.3% margin. Inclusive of one-time non-operating expenses related to the pension plan freeze, CHA's net income for FY 2014 was \$84,000.

FY 2015 will focus on the implementation of CHA's 2014-2017 Strategic Plan, including changes to CHA's advocacy, services, and dues structure consistent with the recommendations of the Financial Oversight Committee and DNS Board in support of the four strategic priorities: Clinical and Operational Excellence, Performance-Based Reimbursement, Population Health, and Association Effectiveness and Member Value. CHA's business model has been refined to focus on three primary service lines: Advocacy and Public Policy, Quality/Patient Safety and Education, and Data and Information Technology. CHA will wind down and exit legacy businesses including Group Purchasing and Insurance Services.



*David Whitehead*



The Committee has reviewed the budget and business plan for the new fiscal year, which includes conservative projections that result in positive net financial performance. The FY 2015 budget reflects the continued implementation of broad-based advocacy at the state and federal level, supported by membership dues and subsidies from member services, and includes a 4% dues reduction for acute care hospitals as the second year of a five-year plan to reduce dues by 20%. The budgeted 0.9% pre-tax margin reflects the reduction in acute care hospital dues as well as the impact of freezing the defined benefit pension plan.

The Financial Oversight Committee will continue to monitor CHA's financial performance and will provide input and guidance to ensure that CHA remains a financially strong and stable organization to serve Connecticut's hospitals now and in the future.



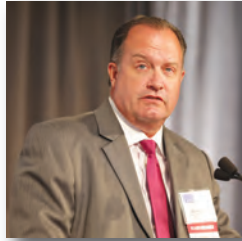
David Whitehead  
*CEO, Hartford HealthCare East Region*  
*The William W. Backus Hospital and Windham Hospital*





*Clinical and Operational Excellence, Performance-Based Reimbursement, Population Health*

CHA PROVIDES BOLD, INNOVATIVE STATE AND FEDERAL ADVOCACY AND HIGH QUALITY, COST-EFFECTIVE PRODUCTS AND SERVICES. The 2014–2017 Strategic Plan, endorsed by the CHA Board of Trustees in April 2014, reinforces hospital leadership in the transformation of care and focuses CHA's work on clinical and operational excellence, performance-based reimbursement, and population health.





*Clinical and Operational Excellence*

CENTRAL TO THE MISSION OF EVERY HOSPITAL IS A DEDICATION TO PROVIDING HIGH QUALITY, SAFE CARE FOR ALL. CHA supports this mission by facilitating hospital culture change focused on safety and quality and on patient-centered care redesign. Connecticut hospitals are recognized as national leaders in reducing all-cause preventable harm through CHA's statewide collaborative to empower hospitals to become high reliability organizations, creating cultures with a relentless focus on safety. As winners of the American Hospital Association's 2014 Dick Davidson Quality Milestone Award for Allied Association Leadership, CHA is particularly proud of the work of Connecticut hospitals that have collaborated to share, learn, and apply nationally recognized, evidence-based practices to achieve the highest standards of quality and safety.

*The prestigious 2014 Dick Davidson Quality Milestone Award for Allied Association Leadership was presented to CHA for the high reliability work under way at CHA hospitals.*

Hospital leaders have embraced the challenge of hardwiring patient safety into their organizational culture through high reliability science. Every day, staff, department heads, and executives are communicating in daily safety huddles, finding solutions to problems, and becoming more accountable for outcomes. Hospitals encourage critical thinking and questioning from all levels, and they "stop the line" whenever a concern is raised. They are standardizing communication and improving interdisciplinary teamwork across all settings. This work is saving lives, and the supportive and collaborative environment is strengthening hospitals.

To date, more than 10,000 hospital staff and physicians have been trained in high reliability safety behaviors.



Twenty-four of 28 hospitals have committed to training all of their employees and medical staff; several hospitals have completed the training.

At CHA's 12th annual Patient Safety Summit in March 2014, Tejal Gandhi, MD, MPH, CPPS, President of the National Patient Safety Foundation, praised Connecticut hospitals' work to eliminate harm. "Connecticut hospitals have been putting substantial time and effort into working together for the zero harm initiative," she said. "I want to applaud the Connecticut hospitals for their efforts in patient safety."

Integrated with this groundbreaking statewide effort is CHA's work with the American Hospital Association's Health Research & Educational Trust (HRET) on Partnership for Patients, a national CMS initiative designed to reduce preventable inpatient harm by 40 percent and readmissions by 20 percent. Connecticut hospitals have achieved the 40 percent reduction target in five categories and the target for 20 percent reduction in readmissions; hospitals remain committed to achieving all ten areas of reduction by the end of the project in December 2014. Connecticut hospitals have been recognized repeatedly for participation and performance in Partnership for Patients, with numerous opportunities for presentations to national audiences.

With CHA, all Connecticut hospitals have engaged in comprehensive programming aimed at

*"I train hospitals across the U.S. in strategies and methods to achieve optimal patient safety, and the level of enthusiasm statewide in Connecticut is higher than anywhere else I have seen."*

*Healthcare Performance Improvement Senior Consultant Steve Kreiser, CDR (USN Ret.), MBA, MSM*



preventing adverse drug events, falls, catheter-associated urinary tract infections, perinatal and maternal harm, central line-associated bloodstream infections, pressure ulcers, surgical site infections, venous thromboembolism and ventilator-associated events, and reducing preventable readmissions.

In February, CHA hosted its eighth annual *Smart Moves Forum on Safe Patient Handling*, which focused on safe approaches to helping patients transfer and ambulate, and provided best practices for caregivers in all healthcare settings. A collaborative effort of CHA, the Connecticut Nurses' Association, LeadingAge Connecticut, the Connecticut Association of Health Care Facilities, and the Connecticut Association for Healthcare at Home, the forum unites caregivers and leaders across the continuum to share best practices and learn about new developments and equipment for safe patient handling.



### Performance-Based Reimbursement

CHA AND HOSPITAL MEMBERS CONTINUED THEIR SHARPLY FOCUSED ADVOCACY AT THE STATE AND NATIONAL LEVELS ON PUBLIC HEALTH POLICY THAT EMPHASIZES THE MOVE TO VALUE ACROSS THE CONTINUUM AND THE NEED FOR A FAIR AND SUSTAINABLE PAYMENT STRUCTURE. Hospitals educated legislators about the increasing financial and regulatory burdens, and communicated about hospitals' role in assessing and addressing community health needs, serving as a safety net, eliminating health disparities, implementing quality and patient safety improvements, and generating good jobs and business in their communities.

A priority for CHA this year was working with the Malloy Administration to shape Medicaid system reform. CHA pursued a value-based proposal that would reward hospitals for achieving quality objectives and making care more effective, as well as for participating in programs to improve outcomes and share data. The hospital proposal was aligned with healthcare reform objectives, and the shift from payment for the volume of services provided to payment for value – focusing on the outcomes and quality of care people receive. Although funding was unavailable to pursue the plan, the proposal was endorsed by the Administration and resulted in ongoing discussions. The legislature created a permanent subcommittee on best practices for Medicaid savings, and CHA will hold a seat on the Council on Medical Assistance Program Oversight.

In a Board-supported move to improve transparency and accountability, in January 2014, the CHA Board unanimously adopted a recommendation that all Connecticut hospitals provide patients with information about facility fees in advance of their treatment. CHA then







worked with the Attorney General to craft legislation requiring hospitals to provide patients with written notice regarding fees charged for services provided at hospital-based outpatient facilities. The measure passed and was signed into law.

In Hartford, CHA continued its advocacy to phase out the hospital tax over a five-year period. As well, CHA supported Connecticut hospitals in their ability to make strategic decisions about their future and worked to oppose legislation that would impact not-for-profit hospitals seeking to align with other not-for-profits or convert to for-profit. The resulting measure that passed provides ongoing options and alternatives around hospital conversions. Additionally, CHA successfully opposed a measure that would have compelled not-for-profit hospitals to pay property tax, and successfully advocated for the elimination of the requirement of a collaborative agreement for APRNs with three or more years of licensure and at least 2,000 hours of practice. In Washington, DC, CHA and hospital leaders met with members of Connecticut's congressional delegation, urging them to reject arbitrary cuts to Medicare and Medicaid funding to hospitals, including site-neutral payment policies for hospital outpatient departments and reductions to payments for graduate medical education funding. Hospitals advocated for providing specific support for The Medicare Audit Improvement Act and the DSH Reduction Relief Act. These meetings helped







keep Connecticut's congressional delegation actively engaged with hospitals in the state, and provided a forum to discuss Connecticut hospitals' patient safety, quality, and diversity initiatives, as well as the continuing reimbursement issues facing hospitals statewide.

In February 2014, hospital leaders from across the state joined Congressman Joe Courtney (D-2) in CHA's inaugural Telephone Town Hall Meeting. During the hour-long conversation, Congressman Courtney provided members with an overview of the political climate in Washington, DC,

*In 2014, CHA reviewed more than 3,080 bills, took action on 37 bills, and monitored 184 bills.*

offered an update on the two-midnight rule, spoke of the challenges and successes Connecticut is having in implementing healthcare reform, and described how policy makers must always be mindful of patients when developing public policy.

CHA played a leadership role in furthering health reform enrollment. To support and encourage enrollment, CHA, in partnership with Access Health CT, conducted Certified Application Counselor (CAC) training, in which the majority of hospitals participated. CACs, a role created through the Patient Protection and Affordable Care Act, help consumers understand, apply for, and enroll in the Health Insurance Exchange.

CHA provided input to state officials as they developed a State Innovation Model (SIM) proposal document, considered a roadmap for the future delivery and payment of healthcare services



in the state. The plan incorporates promotion of integrated care models; use of the Health Insurance Exchange to inform and connect consumers to coverage; expanded supply of primary care physicians and other professionals; and increased engagement among regulators, providers, and consumers.

The resulting payment and delivery system model is expected to advance greater alignment across multiple payers on contracting and payment strategies that promote value over volume, greater consistency in quality and other performance metrics, and expanded primary care. The proposal, if accepted, would provide the basis for a new healthcare delivery and payment model that would impact 80 percent of Connecticut residents.

CHA's advocacy work was supported by a bold statewide communications campaign, *Care We Can Count On*, showcasing hospitals' care for individuals in the community. Leveraging new techniques, the campaign continues to grow a strong base of public support.

**Meeting the Challenge with Cost-Effective Services: Data and IT Innovation**

Through Data Services and ChimeNet, CHA supports hospitals' critical needs for data, information, and analysis, as well as high-speed connectivity, Internet access, and network services in a dynamic and rapidly evolving data and information technology environment.

As part of its strategic assessment process, CHA utilized DNS Board guidance and extensive member input to evaluate member perceptions of current data and IT products and services – and to chart new strategic directions that will enable the development of relevant new solutions and services providing value to members as the transformation of healthcare raises new demands to reduce the







cost of care, improve outcomes, enhance quality and patient safety, increase transparency, eliminate health disparities, and manage population health.

**Data Services**

To enhance value to CHA members, Data Services expanded data offerings and released three new advanced analytic prototype solutions on HAC/PSI Analytics, Readmissions, and Potential Value Opportunity. These new, advanced modular solutions and business intelligence capabilities include predictive modeling and innovative analytics, and will support hospitals in the management of clinical care redesign and navigation of evolving payment models.



CHA's traditional portfolio of data products was also enhanced and redesigned, including its Decision Support Tool (DST), Patient Census Report (PCR), Toward Excellence in Care (TEIC) program, Strategic Measurement products (including Physician Profile, Physician Performance, and Quality Monitoring), and *ChimeMaps*. Providing data infrastructure, tools, and information to support CHA's member hospitals through innovation, Data Services supports hospitals' need to reduce costs while enhancing quality and patient safety. Data Services also provides value by supporting advocacy and regulatory reporting requirements. Additionally, Data Services has implemented a market expansion strategy through *ChimeMaps* with other state hospital associations resulting in an expansion outside Connecticut.

**ChimeNet**

In a rapidly changing technology environment, ChimeNet continues to provide secure, high-speed connectivity, co-location, and fully-managed network, security, and wireless services for hospitals, physicians, municipalities, schools, and other select businesses that reduce costs, simplify IT infrastructure, and provide access to state-of-the-art technology.

ChimeNet's business model of network connectivity, security, and infrastructure is well established and respected in the marketplace. ChimeNet is leveraging its data center infrastructure as a platform

to deliver shared IT solutions for hospitals and physicians, as well as to support advanced data analytics and delivery of services to out-of-state hospital associations. Working with hospitals and physicians, ChimeNet is designing new products and services that will enable hospitals to reduce the cost of care, facilitate patient engagement, and respond to new trends such as telemedicine, home healthcare and provider collaboration via technology.

**Providing Cost-Effective Education and Leadership Development Programs**

Over the last year, CHA delivered 80 educational programs, issue-based conferences, and member briefings to hospital leaders, clinicians, and healthcare professionals to help them stay abreast of critical issues and challenges in the rapidly changing healthcare landscape. Approximately 10,000 hospital leaders and staff were trained in high reliability safety principles, and participated in various programs funded through the national Partnership for Patients Initiative. An additional 1,900 healthcare professionals participated in programs focused on timely issues related to



*“All across the country, people are yearning to see models of success. Your efforts have helped to establish Connecticut as one of the state leaders in advancing cultural competency and championing health equity.”*

*J. Nadine Gracia, MD, MSCE, Deputy Assistant Secretary for Minority Health and the Director of the Office of Minority Health, U.S. Department of Health and Human Services*

regulatory compliance, leadership and management development, community health and diversity, and reimbursement.

Revamped programs in 2014 included the CHA Leadership series on staff transitioning to management positions, coaching to improve performance, and conflict management – along with sessions on financial skills for managers and basics of budgeting for healthcare managers.

CHA held member briefings on a range of topics including creating a culture of health and wellness, and restraint and seclusion practices. CHA also held joint programs on end-of-life issues and mental health with the Collaborations of Care Partners, an alliance of Connecticut healthcare organizations from across the care continuum. CHA also collaborated with the state to provide certified application counselor training and courses on presumptive eligibility.

A number of notable speakers presented at CHA this year. J. Nadine Gracia, MD, MSCE, Deputy Assistant Secretary for Minority Health and the Director of the Office of Minority Health, U.S. Department of Health and Human Services, presented the keynote address at the Third Annual CHA Diversity Collaborative Symposium. Dr. Gracia touted Connecticut as having one of the strongest models for focusing on diversity and health equity in the nation.

Joan Ellis Beglinger, RN, MSN, MBA, FACHE, FAAN, Former Chief Nursing Officer, Vice President for Patient Care, St. Mary’s Hospital, Madison, Wisconsin, provided the keynote address at the Nurse Leadership Forum, describing opportunities and risks of healthcare reform related to



Foundation, provided the keynote at the Patient Safety Summit, discussing the growing focus on patient safety across the care continuum, the importance of education in conjunction with advances in information technology, and the need for increased transparency in reporting adverse events.

The continuation of the Lean Principles in Healthcare program this year focused on process flow and value stream mapping, to help hospitals reduce waste, streamline processes, and improve interdisciplinary collaboration.

nursing, particularly expanded roles for advanced practice registered nurses in the delivery of primary care and management of chronic disease. Rich Bluni, RN, a national speaker with the Studer Group, closed the forum with a thoughtful session on how nurses can sustain the spirit of caring that first inspired them, and the importance of recognizing the powerful impact nurses have on the lives of others.

Tejal Gandhi, MD, MPH, CPPS, President of the National Patient Safety

*“Patient safety is more important than ever. What clinicians really want is to know that if they report something, it will make a difference, it will improve things, and it will help ensure patient safety.”*

*Tejal Gandhi, MD, MPH, CPPS, President of the National Patient Safety Foundation*





### Population Health

CONNECTICUT HOSPITALS PLAY A MAJOR AND CONTINUALLY EXPANDING ROLE IN POPULATION HEALTH AND IMPROVING THE HEALTH OF THE COMMUNITIES THEY SERVE. CHA supports that work by facilitating care coordination and optimization across the continuum and focusing on integrated, equitable care.

In 2013, building on many years of community health engagement, Connecticut hospitals developed community health needs assessments and implementation plans in accordance with healthcare reform. CHA assisted hospitals in assessing their community health needs through the implementation of tools and analytics, developing hospital-specific community health profiles for all member hospitals. Each community health profile included an executive summary of insights and key actionable drivers, as well as health profile data comprising demographic and socioeconomic factors and leading health indicators. ChimeMaps, CHA's interactive GIS-mapping software, continues to be used to evaluate hospital, health, and population data for the purposes of strategic planning and business development, community analysis, and population health assessment.

To increase health improvement across the continuum, CHA and Connecticut hospitals collaborated with the Department of Public Health, local health departments, federally qualified health centers, and other healthcare sector providers and associations. CHA is working with the Department of Public Health through the Connecticut Health Improvement Planning Coalition to address identified health priorities statewide.

Ensuring integrated, equitable care is also a priority of Connecticut hospitals. In the third year of the CHA Diversity Collaborative, CHA continued to advance a broad



approach across all Connecticut hospitals and in partnership with communities to eliminate disparities and improve health equity.

Currently, CHA is working with acute care hospitals to assist them in implementing the enhanced 2013 *National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care* (CLAS Standards), utilizing its accompanying *Blueprint for Advancing and Sustaining CLAS Policy and Practice*. The CLAS Standards are intended to respond to demographic changes, improve quality of services and care, and meet legislative, regulatory, and accreditation mandates. By strategically incorporating the 15 CLAS Standards into the administrative, operational, and programmatic fabric of our hospitals, more culturally and linguistically appropriate services will ultimately advance health equity, improve quality, and help eliminate







healthcare disparities.

Meanwhile, teams comprising more than 150 people from 28 hospitals are working together to identify and implement improvement strategies and interventions, share best practices, collect data, and utilize metrics to track performance and progress. Hospital teams also participate in monthly team webinars and education programs at CHA.

In 2013, CHA and the Connecticut Association of Healthcare Executives (CTAHE) announced a formal Partnership on Diversity and Health Equity to work together to raise awareness and educate healthcare leaders on issues of diversity, inclusion, and reduction of healthcare

disparities; increase the engagement of healthcare executives in driving progress on diversity and health equity-related issues; and increase the diversity of CTAHE and hospital leadership. CHA has also worked as a partner with the New England Regional Health Equity Council to collaborate on projects of mutual benefit to drive the health equity agenda and eliminate health disparities.



As part of its commitment to support and engage diverse entrepreneurs and businesses, and implement strategies to increase hospital purchasing of supplies and services from diverse businesses, CHA will host its fifth Supplier Diversity Forum concurrent with the 2014 CHA Annual Meeting. The Supplier Diversity Forum provides senior executives and purchasing decision makers from member hospitals the opportunity to learn about products and services

offered by CHA's approximately 50 diverse vendors. Supplier Diversity Forum also includes educational sessions to integrate the goals of the CHA Diversity Collaborative.



Connecticut hospitals' contribution to their communities continues to grow. In 2012, Connecticut hospitals spent \$1.2 billion on community benefit initiatives, including providing services to those who cannot pay and covering the unpaid cost of government programs – 12.2 percent of total hospital revenue. Hospitals provided more than 12.3 million community benefit services to individuals and families. Consistent with their focus on improving population health, Connecticut hospitals are improving employee health. In February, CHA launched *Living Our Mission: Building Healthier Choices*, a statewide initiative to foster a culture of health in hospitals, provide a model of good health for communities, and reduce healthcare costs. In 2014, the Building Healthier Choices initiative is beginning with a focus on nutrition and healthy food, with CHA providing resources, educational programs, and forums for sharing best practices.





CELEBRATING Connecticut's Healthcare Leaders

*Kaytan Amrute, MD, Milford Hospital*  
*Kara Aparo, Bristol Hospital*  
*Daun Barrett, Griffin Hospital*  
*Donna Benzinger, Saint Francis Hospital and Medical Center*  
*Tim Bolton, St. Vincent's Medical Center*  
*Charles Botts, Connecticut Children's Medical Center*  
*Rachel Botts, Connecticut Children's Medical Center*  
*Onell J. Calderas, Connecticut Hospital Association*  
*Dorothy Carvalho, Middlesex Hospital*  
*Matthew Cassavechia, Danbury Hospital*  
*James Cooper, Danbury Hospital*  
*Barbara Davies, New Milford Hospital*  
*Gary Dee, MD, MidState Medical Center*  
*Terri DiPietro, Middlesex Hospital*  
*Daniel Diver, MD, Saint Francis Hospital and Medical Center*  
*Donna Donovan, Connecticut Children's Medical Center*  
*Alice Facente, The William W. Backus Hospital*  
*Marisol Feliciano, Saint Francis Hospital and Medical Center*  
*Ebony Forand, Johnson Memorial Hospital*  
*Carley Hauser, Saint Francis Hospital and Medical Center*  
*Debra Healey, Middlesex Hospital*  
*Bill Hoey, St. Vincent's Medical Center*  
*Paul Iverson, Milford Hospital*

**Connecticut's Healthcare Heroes**

Traditionally the Healthcare Heroes Awards honor ten notable caregivers nominated by their colleagues, but this year's award was changed to honor all those who have contributed their time and energy to the *Care We Can Count On* statewide hospital campaign – a campaign that tells the story of hospitals in the context of care. This year, CHA recognizes more than 40 doctors, nurses, volunteers, patients, and caregivers as Healthcare Heroes. These heroes have been featured on the *Care We Can Count On* website, in videos and on the radio, and have provided testimony before the legislature. CHA thanks this year's Healthcare Heroes for their contributions.



*Stephen Jones, MD, Greenwich Hospital*  
*Julie Kadamus, Johnson Memorial Hospital*  
*Brooke Karlsen, St. Vincent's Medical Center*  
*Kristine Lisi, MD, St. Vincent's Medical Center*  
*Dawn Martin, Danbury Hospital*  
*Wendy Martinson, John Dempsey Hospital*  
*Luis Mendez, Middlesex Hospital*  
*Ashley Moran, Bristol Hospital*  
*Augusta Mueller, Yale-New Haven Hospital*  
*Catherine Rees, Middlesex Hospital*  
*Margareta Reyes, MD, Bristol Hospital*  
*Rebecca Santiago, Saint Francis Hospital and Medical Center*  
*Maria Santos, Milford Hospital*  
*Victor Santos, Milford Hospital*  
*Leonard Savage, Waterbury Hospital*  
*Vicki Smetak, MD, Norwalk Hospital*  
*Kelly Soukup, Johnson Memorial Hospital*  
*Sherry Strammliello, Lawrence + Memorial Hospital*  
*Shirley Taylor, St. Vincent's Medical Center*  
*Marcy Tejada, MD, Waterbury Hospital*  
*Nicole Thomas, Waterbury Hospital*  
*Susan Twombly, New Milford Hospital*  
*Morag Vance, Bridgeport Hospital*  
*Roydell Weeks, Greenwich Hospital*  
*Melissa Ziogas, Bristol Hospital*



## AHA GRASSROOTS CHAMPION AWARD

### R. Christopher Hartley Saint Francis Hospital and Medical Center



The American Hospital Association Grassroots Champion Award was created to recognize hospital leaders who effectively educate elected officials on how major issues affect the hospitals' vital role in the community, who have done an exemplary job in broadening the base of community support for the hospital, and who have been tireless advocates for their hospital and its patients. The Grassroots Champion Award is presented annually to one individual from each state. Connecticut's 2014 Grassroots Champion is R. Christopher Hartley, Senior Vice President of Planning, Business Development and Government Relations, Saint Francis Hospital and Medical Center.

Chris is recognized for his exceptional leadership in generating grassroots and community support for issues of importance to hospitals and healthcare. A vocal advocate for hospitals, Chris works to educate legislators about the critical issues facing healthcare today.

As a member of CHA's Committee on Government, Chris provides valuable insight and guidance to the Connecticut hospital community that helps set the direction for statewide advocacy. In addition to serving as Senior Vice President of Planning and Government Relations, Chris is Staff Liaison for the Saint Francis Care's Board of Directors' Public Policy Advisory Committee. He is also a member of the Johnson Memorial Medical Center Board of Directors and the AHA's Society of Hospital



Planning and Marketing.

CHA congratulates Chris on this well-deserved recognition and extends our deep gratitude for his service to Connecticut hospitals.

## 2014 CONNECTICUT'S HOSPITAL COMMUNITY SERVICE AWARD

### Yale-New Haven Hospital Project Access-New Haven

With significant in-kind and financial support from Yale-New Haven Hospital (YNHH), Project Access-New Haven (PA-NH) brings the Greater New Haven community together to create an expanded network of medical care and services that improves access to care for underserved patients.

PA-NH was founded in 2009 to address health inequities in the Greater New Haven area. The program provides an organized system of care that emphasizes coordination of services and timely access to care for vulnerable populations. At the core of the program are Patient Navigators who coordinate care, remove access barriers such as language and transportation, and help patients navigate the healthcare system. By providing underserved patients with access to comprehensive, coordinated care in a timely manner, PA-NH improves patient care, increases health system efficiency, and reduces health disparities.

Since 2010, PA-NH has enrolled more than 850 underserved patients and coordinated the delivery of more than \$13 million in medical care. Key outcomes include reduced wait times and improved show rates for medical appointments. Due largely to PA-NH's model of intensive "high-touch" navigation, the no-show rate for medical appointments among PA-NH patients is 3% (vs. 34% for similar patients in hospital-based specialty clinics). Program participants also report improved health, quality of life, and access to care when surveyed one year after enrollment, and participating physicians report high program satisfaction.

The partnership between YNHH and PA-NH has been vital to the program's success. YNHH provides a full spectrum of ancillary services to support clinical care, including diagnostic testing and





inpatient and outpatient hospital-based services. In addition, more than 300 local physicians, many of whom are affiliated with the hospital, volunteer their time to care for PA-NH patients.

YNHH's commitment to PA-NH's mission goes well beyond clinical support. YNHH donates \$200,000 annually to ensure that PA-NH can continue its important work and provides approximately 40 hours of in-kind admitting, financial, and analytical support.

In 2013, PA-NH expanded its work in the YNHH Emergency Department in an effort to address the growing problem of ED overutilization. This pilot provides patient navigation to frequent users focused on improving engagement in primary care and reducing avoidable ED visits and hospitalizations. This work is a direct partnership with YNHH and the Yale-Robert Wood Johnson Foundation Clinical Scholars Program, which provides clinical, research, and analytic support.

The Project Access model was developed in 1996 and has been replicated in more than 150 communities across the country. PA-NH has successfully adapted the model for the Greater New Haven area and, with ongoing support from YNHH and other local providers, the program will continue to improve care for those in need well into the future.

CHA and the Connecticut Department of Public Health are pleased to recognize Yale-New Haven Hospital and those involved in Project Access-New Haven for their work to improve access to care and medical services to the underserved in the New Haven area.

## THE 2014 JOHN D. THOMPSON AWARD FOR EXCELLENCE IN THE DELIVERY OF HEALTHCARE THROUGH THE USE OF DATA

### **The William W. Backus Hospital Clinical Care Redesign: Bringing Nurses Back to the Bedside**

Everyone in healthcare is being asked to do more without increasing costs. At The William W. Backus Hospital, a highly committed staff-led team redesigned inpatient care delivery with one overarching goal: to enable each care team member, within his or her scope of practice, to be able to spend as much time at the patient's bedside as possible.

When the clinical care redesign project was complete, all key performance indicators improved. Staff reported having more time for their patients and higher compliance for hourly rounding. Results included improved patient experience, lowered readmission rates, a reduction in the cost of labor, improved staff engagement, smoother patient transitions, increased compliance with discharge appointments, and decreased patient calls, indicating staff are being proactive in care delivery.

Each aspect of care delivery was analyzed for efficiency and effectiveness as seen through the eyes of patients. The project, which included more than 100 process innovations, included the analysis of all aspects of process, practice, delivery, and workload.

Early in the data collection process, it became clear that registered nurses were spending 35 percent of their time on work that an ancillary assistant, such as a patient care technician, could accomplish. While busy, the nurses were being underutilized compared to what their clinical licensure and personal potential should permit them to do. The team set out to strategize how to implement a



different way to deliver care that would address this, as well as implement aspects of the recent Institute of Medicine “Top of the License” recommendations. The challenge was to enhance staff skills and roles to do more complex, meaningful, and hands-on work. Doing this at each licensure level would allow for less complex work to be offloaded from the level above.

The team started with the unit secretarial role and realized that with the implementation of computerized physician order entry, this team member had additional potential to do more tasks in patients’ rooms and form relationships with patients. The secretarial role was transformed into a patient liaison role, which is integral to the admission and discharge process in particular. Thus, the unit secretary would greet patients upon arrival to the units, orient them, and give them educational material important to their admitting diagnosis. The unit secretaries at discharge would partner with patients to schedule follow-up appointments. This partnership increased patients’ attendance at their discharge appointments from the previous 50 percent up to 98 percent post-implementation.

The liaison role, created from the unit secretarial role, took tasks previously completed by the ancillary patient care technician, which allowed them to potentially do more for the registered nurses. The team then began developing strategies to utilize nurses and other licensed healthcare workers to their fullest potential. The team collected data on the current responsibilities for each member of the medical-surgical team, and brainstormed how roles could change if each member was utilized fully to his or her individual capabilities. The staff team engaged in process mapping to identify inefficiencies that take caregivers away from the bedside. They focused on improving these processes, first by way of rapid-cycle change, and then using a more comprehensive strategy of incremental pattern trials.

After six months of weekly meetings and PDSA trials, a new model of care emerged: a nurse/patient care technician partnership in which they work together to meet the specific needs of their patients.

CHA is pleased to present the John D. Thompson Award to The William W. Backus Hospital for bringing nurses back to the bedside.

## T. STEWART HAMILTON, MD, DISTINGUISHED SERVICE AWARD

**Susan L. Davis, EdD, RN**  
**Board Member and Former President/CEO**  
**St. Vincent's Health Services**

**President & CEO**  
**Sacred Heart Health System**

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Susan Davis was taught from an early age that whatever she did in life, she needed to make a positive difference in the lives of others. She took this lesson to heart, and thus, the child who nearly fainted at the sight of blood and failed her Girl Scout first aid badge would go on to become a caring nurse and a visionary leader, inspiring hospitals across Connecticut to embark on patient safety journeys that are saving lives every day.

It turned out that healthcare was a natural calling for Susan. She was raised in New Jersey and spent much of her career in New York, rising through the hospital ranks. She came to St. Vincent’s Medical Center as CEO in 2004. At St. Vincent’s, she set the standard for nursing care and led the hospital to Magnet status on its first attempt. When she heard that Quinnipiac University was opening the Frank H. Netter School of Medicine, she developed a joint clinical partnership with the school – creating a third medical school in the state. As a result of that relationship, the first medical students will be coming to the hospital in the next year. She oversaw the \$160 million master facility plan and a \$60 million capital campaign. She led the building of the Elizabeth M. Pfriem SWIM Center for Cancer Care, which represents the largest expansion project in St. Vincent’s history, and the Michael J. Daly Center for Emergency and Trauma Care, which tripled the size of the emergency department, providing the community with access to care that did not exist previously. She also led the expansion of urgent care centers throughout the Bridgeport area, and launched the most ambitious technology upgrade in the history of St. Vincent’s.

But ask Susan about her greatest accomplishment, and she will talk with great passion about the introduction of high reliability science at St. Vincent’s and hospitals across Connecticut. St. Vincent’s



began the high reliability journey in 2010, focusing on creating an environment in which patients can trust caregivers, feel safe, and experience good outcomes. Though patients are most impacted by high reliability, Susan found that creating a culture of safety strengthens the whole organization.

As Chairman of CHA's Committee on Patient Care Quality, Susan then led the rest of the state in an unprecedented initiative to address patient harm. Her vision engaged the CHA Board, and hospitals across the state committed to the high reliability journey.

Susan has always put patients, and her community, first. In addition to her role as CHA Board Chairman, she served for eight years on the Board of Directors for the Bridgeport Regional Business Council (BRBC), including two terms as board chairman. Susan has been recognized for her service to the United Way, Hospice, and the American Cancer Society in both Connecticut and New York.

Susan has always viewed the opportunities given to her as journeys to a place where she is needed more. In her new role as Ascension Health Ministry Market Leader for Florida/Alabama/Community Health Ministries and President & CEO, Sacred Heart Health System, she and her husband Richard leave Connecticut for a new chapter of their life in Florida. But even from that distance, and without ever knowing it, patients in Connecticut owe their thanks to Susan Davis for leading the movement to improve safety across the state.

CHA is pleased to recognize this exceptional leader, colleague, and friend.

## IN APPRECIATION

CHA offers warm congratulations to Frank Corvino, President and Chief Executive Officer, Greenwich Hospital, on his upcoming retirement. We are grateful for his many contributions to CHA and the hospital community during his remarkable 43-year career in healthcare.

CHA has been privileged to work with Frank, who joined Greenwich Hospital in 1988, became CEO in 1991, and assumed the role of Executive Vice President with the Yale New Haven Health System in 1998. During his tenure at Greenwich Hospital, he has been at the forefront of healthcare satisfaction, integrative medicine, wellness programs, care for the aging, and the "green" movement. Under Frank's leadership, Greenwich Hospital improved clinically, operationally, and as an employer of choice, becoming a premier healthcare facility with a national reputation for exceptional patient experience.

We appreciate his service through multiple terms on the CHA Board, the first in 1993, and as a member of the CHA Executive Committee. For his dedicated advocacy in Hartford and Washington, DC, Frank was honored as Connecticut's 2012 AHA Grassroots Champion. Frank has received numerous other awards including the Ellis Island Medal of Honor and the Malcolm T. MacEachern CEO Award, and he has been honored by the Columbus Citizen's Foundation. In addition to serving member of the CHA Board of Trustees, Frank serves on the boards of Greenwich Emergency Medical Services, ONS Foundation, and Cabrini Elder Care in Westchester.

It has been a privilege to work with Frank Corvino and we wish him the very best!



## IN MEMORIAM

### **Teresa Biss**

**Clinical Director, A-3 (Med/Surg)  
The William W. Backus Hospital**



After a courageous three-year battle with leukemia, Teresa “Terri” Biss, RN, passed away in February 2014. Terri dedicated her life to caring for her family and patients, serving the underprivileged, encouraging others to be their best and, in the last chapter of her life, promoting the work of the Be The Match Foundation.

Terri earned her nursing degree from Adirondack Community College in 1975. Later she earned her bachelor’s degree in nursing from St. Joseph College of Maine. Her clinical experiences were rooted in OB-GYN, pediatrics, Med/Surg, and IV therapy. She spent the later years of her nursing career in leadership positions, the last of which was at The William W. Backus Hospital.

During her tenure at Backus Hospital, Terri was instrumental in the development of A-3 as the Innovation Unit. She led projects that were the springboard to the recent implementation of the Clinical Care Redesign project, for which Backus Hospital won the 2014 John D.

Thompson Award for Excellence in the Delivery of Healthcare Through the Use of Data.

Following her leukemia diagnosis, Terri continued teaching and encouraging the healthcare professionals who cared for her. Doctors determined that she needed a stem cell transplant, but Terri’s family was not a match, so she was added to a national stem cell registry. With the help of her colleagues, Terri organized two match drives at Backus Hospital through the Be The Match Foundation, and she received a transplant in May 2012.

Terri is remembered for her legacy of compassion, healing, and helping those less fortunate.

### **Tamrah Riley**

**Executive Director, Access  
Yale New Haven Health System**



Tamrah “Tammy” Riley, a beloved and well-respected member of Yale-New Haven Health System, passed away in January 2014. She left behind her husband, Robert, and daughter, Casey, of whom she was so proud and loved dearly.

Tammy came to Yale New Haven Health System from the Connecticut VNA, where she held the position of Vice President, Clinical Services. She also worked as the Director of Care Management at the Hospital of Saint Raphael for 14 years. Tammy also held positions at Physician Health Services, Connecticut’s peer review organization (now the state’s quality improvement organization, Qualidigm), Masonicare, and Stamford Hospital.

Tammy began her career at Yale-New Haven Hospital in 2007 as a Senior Manager in the Admitting Department. She was instrumental in a number of patient safety-related initiatives. Her work with the Safe Patient Flow allowed an entire redesign of the bed management functions. In 2011, Tammy was promoted to Director of Access & Clinical Bed Management, where she played a pivotal role in the development of the YNHH Transfer Center. She was a key member of the management team at Greenwich Hospital, Yale-New Haven Hospital, and both York Street and Saint Raphael campuses during the implementation of the Epic system in 2012 and 2013. At the time of her passing, Tammy had been promoted to Executive Director of Access, and approximately 500 people reported to her.

Tammy graduated from Maloney High School and the University of Rhode Island with a B.S. in Nursing. She had been affiliated with the Meriden-Wallingford IPA and the Alliance – Joint Oversight Committee, CT Association for Home Care, Community Relations Committee, and was a Founding member of the Nightingale Awards. Tammy also co-authored several publications on healthcare.



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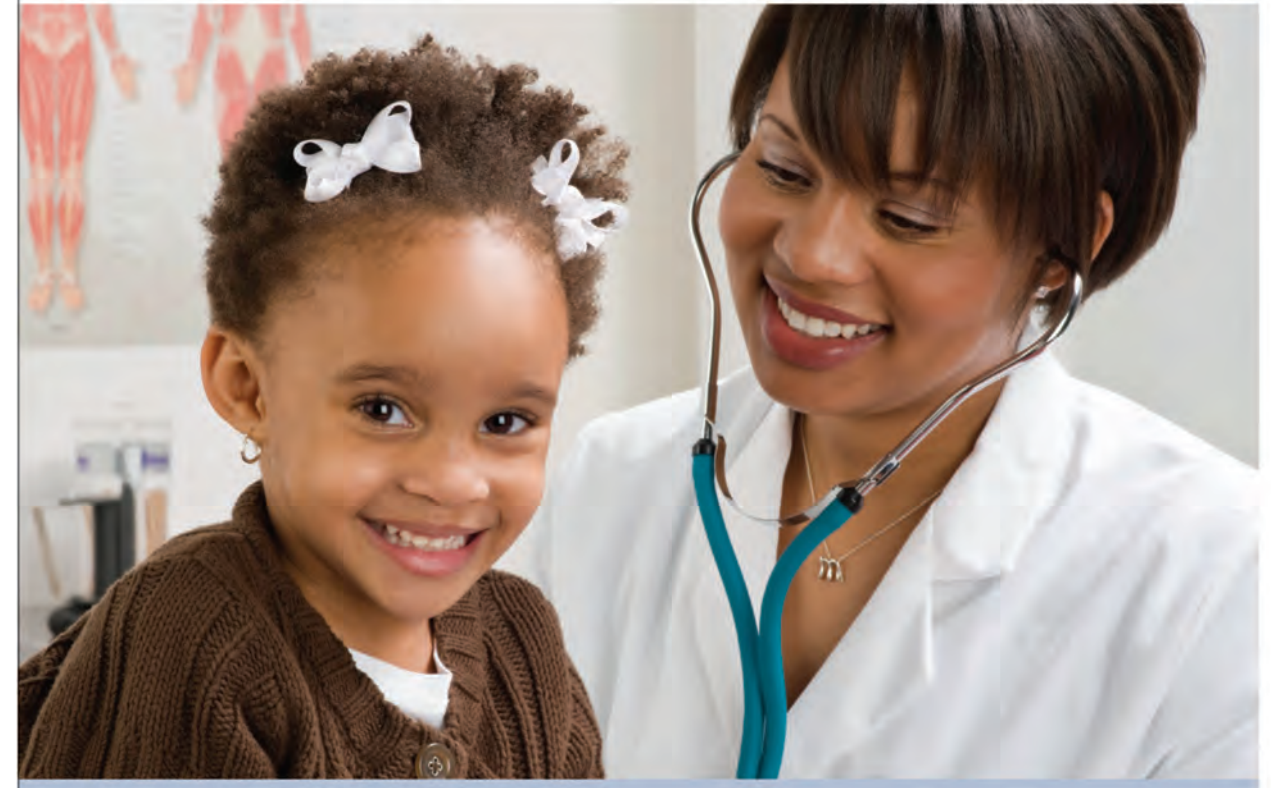
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Network

**Chad W. Wable**  
President and Chief  
Executive Officer  
Saint Mary's Hospital

## CHA 2014 BOARD OF TRUSTEES *Slate of Candidates*

The CHA Executive Committee, which is charged with the duties of a nominating committee, has developed the following slate of candidates for officers and trustees of the CHA Board of Trustees to be voted by the Assembly at the June 18, 2014 CHA Annual Meeting.

POSITION	NOMINEE	TERM
<b>Vice Chairman</b>	<b>David Whitehead</b> , President, Hartford HealthCare East Region The William W. Backus Hospital and Windham Hospital	2-year term
<b>Treasurer</b>	<b>Christopher O'Connor</b> , Executive Vice President, COO, Yale New Haven Health System	2-year term
<b>Secretary</b>	<b>Peter Karl</b> , President and CEO, Eastern Connecticut Health Network	2-year term
<b>DNS Board Chairman</b>	<b>Patrick Charmel</b> , President and Chief Executive Officer, Griffin Hospital	2-year term
<b>Committee on Patient Care Quality Chairman</b>	<b>John Murphy, MD</b> , President and CEO, Western Connecticut Health Network	1-year term
<b>Committee on Population Health Chairman</b>	<b>Christopher Dadlez</b> , President and Chief Executive Officer, Saint Francis Hospital and Medical Center	1-year term
<b>Committee on Hospital Finance Chairman</b>	<b>Elliot Joseph</b> , President and CEO, Hartford HealthCare	1-year term
<b>Committee on Government Chairman</b>	<b>Peter Karl</b> , President and CEO, Eastern Connecticut Health Network	1-year term
<b>Executive Committee At Large Member</b>	<b>Marna Borgstrom</b> , Chief Executive Officer, Yale-New Haven Hospital, and President and CEO, Yale New Haven Health System	1-year term

<b>Trustees</b>	<b>Christopher Dadlez</b> , President and Chief Executive Officer, Saint Francis Hospital and Medical Center	2-year term
	<b>William Jennings</b> , President and Chief Executive Officer, Bridgeport Hospital	2-year term
	<b>John Murphy, MD</b> , President and CEO, Western Connecticut Health Network	2-year term
	<b>Rohit Bhalla, MD</b> , Vice President, Chief Quality Officer, Stamford Hospital	3-year term
	<b>Kevin Myatt</b> , Senior Vice President of Human Resources, Yale-New Haven Hospital and Yale New Haven Health System	3-year term
	<b>Darlene Stromstad</b> , President and CEO, Waterbury Hospital	3-year term
	<b>Chad Wable</b> , President and Chief Executive Officer, Saint Mary's Hospital	3-year term
<b>CEO Forum Chairman</b>	<b>Kurt Barwis</b> , President and Chief Executive Officer, Bristol Hospital	2-year term

**Other members of the 2014–2015 CHA Board will include:**

- Chairman Bruce Cummings**, President/CEO, Lawrence + Memorial Hospital
- Immediate Past Chairman Susan Davis, EdD, RN**, Board Member, St. Vincent's Medical Center
- Vincent Capece Jr.**, President/CEO, Middlesex Hospital
- Ulysses Hammond**, Board Chairman, Lawrence + Memorial Hospital
- Jennifer Jackson**, President and CEO, CHA
- Curtis Robinson**, Board Member, Saint Francis Hospital and Medical Center
- Robert Smanik**, President and Chief Executive Officer, Day Kimball Hospital

**MISSION**

The mission of the Connecticut Hospital Association (CHA) is to advance the health of individuals and communities by leading, representing, and serving hospitals and healthcare providers across the continuum of care that are accountable to the community and committed to health improvement.

**CHA achieves this mission through:**

- Public policy and advocacy on behalf of the interests of hospitals and their related healthcare organizations.
- Leadership and innovative services to further community-based healthcare delivery.
- Strengthening ties and collaborative efforts with other organizations that have common values and aims.
- Innovative research and education in the delivery and financing of healthcare services.
- Leadership in fostering an environment within which integrated delivery systems can be created and thrive.
- Assistance to the membership in ensuring quality, increasing efficiency and effectiveness, containing costs, and enhancing revenue.



*Amended by CHA Board of Trustees, April 23, 2014*





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