

CONNECTICUT'S
HOSPITALS:

*Our
Healthcare
Safety
Net*

CONNECTICUT
HOSPITAL
ASSOCIATION

2003 ANNUAL REPORT





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The combination of the hospital "H" and "24/7" on the cover of this 2003 Annual Report creates a powerful image that symbolizes our hospitals' critical role as the state's healthcare safety net.

CHA utilizes this "H 24/7" image extensively as part of its ongoing efforts to raise awareness of the issues facing Connecticut's hospitals and to generate legislative and community support.

PRESIDENT'S MESSAGE



The theme for this year's Annual Report, "Connecticut's Hospitals: Our Healthcare Safety Net," is a reflection of our members' tradition of continuously providing service to others — no matter how difficult the circumstances.

And at no time have the challenges facing hospitals and other healthcare providers

been more trying. Mounting financial pressures, declining reimbursements, an increasing demand for services, a worsening workforce shortage, an uncertain economy, and the continuing national mandate to obtain a level of unprecedented preparedness for threats to safety, security, and health, all combine to make healthcare delivery increasingly difficult.

Despite these obstacles, Connecticut's hospitals are there to take care of each and every one of us, all the time. Whenever a sick child needs help, when accidents or disasters occur, and when there is no place else to turn, Connecticut's hospitals are there to serve.

For over eight decades, CHA has remained focused on helping hospitals fulfill this critical role in their communities. In today's environment of converging pressures,

collective strength is even more important, and our members have indeed rallied together. Active member participation in the Association has produced unity on key issues, and our members' direct involvement in our strategic planning process will ensure that we remain equipped to respond to any challenge facing our hospitals.

We are proud to be part of our members' tradition of unceasing service to others. Just as hospitals are there for all of us, we are and will remain committed to be there for hospitals to provide the highest level of advocacy, service, and support, as they carry out their community-based missions.

A handwritten signature in black ink that reads "Jennifer Jackson". The signature is fluid and cursive.

Jennifer Jackson
President and CEO
Connecticut Hospital Association

CHA OVERVIEW

CHA HAS BEEN DEDICATED TO REPRESENTING AND SERVING CONNECTICUT'S HOSPITALS SINCE IT WAS ESTABLISHED IN 1919.

2 WHILE CHA'S MEMBERSHIP HAS EXPANDED TO OTHER HEALTH-RELATED MEMBER ORGANIZATIONS OVER THE PAST 84 YEARS, ITS CORE FOCUS REMAINS HOSPITAL ADVOCACY, REPRESENTATION, AND SERVICES.

CHA encourages member participation in the development of association policies and positions through its Board of Trustees and member CEOs, as well as through a variety of standing and ad hoc committees, task forces, and peer-to-peer meeting groups. Participation in these entities not only ensures that members have input in statewide healthcare policy development, but that CHA's positions, including its annual legislative agenda, truly reflect the needs and concerns of its diverse membership.

Through nearly 150 member organizations – including all 31 of Connecticut's acute care hospitals – and approximately 300 personal and associate members, CHA maintains an extensive and effective grassroots network. The Association's staff works closely with agency representatives, commissioners, and legislative leaders at both the state and federal levels to identify and evaluate industry developments and trends and to represent and advocate for CHA members.

CHA tracks its various advocacy efforts and provides healthcare news and information in its weekly newsletter, *Update*. As part of its integrated communications strategy, CHA also launched a redesigned website (www.cthosp.org), which provides a broad overview of the Association's programs and services, along with a comprehensive range of both public and member-only information, including CHA's position statements, educational program offerings, and an archive of publications and legislative testimony.

CHA's activities in support of its members are divided into the two broad categories of **Advocacy** and **Member Services**. CHA's efforts in these areas over the past year are chronicled in the pages that follow.

ADVOCACY

ADVOCACY IS THE CORE OF CHA'S BUSINESS AND IS ITS PRIMARY AND MOST CRITICAL FUNCTION. THE GOVERNMENT RELATIONS STAFF COORDINATED CHA'S ADVOCACY EFFORTS ON BOTH THE STATE AND NATIONAL LEVEL, COLLABORATING CLOSELY WITH THE AMERICAN HOSPITAL ASSOCIATION (AHA) ON FEDERAL ISSUES.

CHA advocacy activities included: drafting and presenting legislative testimony; creating and providing "advocacy kits" on various issues to assist CHA members in responding to the media and communicating with legislators; and interacting directly with legislative, agency, and industry leaders to advocate for CHA's positions on various healthcare issues.

The Government Relations staff once again organized a very successful Hospital Day at the Capitol, which provided an effective forum for hospital CEOs and CHA staff to meet with members of the General Assembly and advocate for CHA's 2003 legislative agenda.

CHA's advocacy efforts are classified into three primary areas: Finance, Patient Care, and Human Resources.

FINANCE

CHA's finance advocacy efforts focus on matters directly linked to the financial



operations, systems, transactions, and overall fiscal health of CHA members. Specific areas of focus include: Medicare/Medicaid/third party reimbursement; insurer payment and denial practices; HIPAA transactions and code sets; OHCA financial reporting and analysis; and financial data analysis and reporting.

With hospital operating margins hovering at or below break-even for the past several years, a major part of CHA's legislative agenda has been centered on securing fair and adequate reimbursement for the services Connecticut's hospitals provide.

CHA's particular focus during the 2003 legislative session, despite the state's budget crisis, was on achieving a permanent repeal of the hospital sales tax and protecting hospital reimbursement. CHA's grassroots advocacy campaign included the distribution of postcards to legislators and community leaders urging them to support these important initiatives. As of the publication of this Annual Report, both issues remained unresolved as the General Assembly and the Administration failed to reach agreement on a biennial budget by the June 4, 2003, end of the regular legislative session. The budget will have to be resolved in a special session beginning in mid-June.

CHA advocated aggressively for medical liability system reform, which has become an arduous long-term issue in Connecticut and throughout the nation, as skyrocketing malpractice insurance costs threaten to limit the public's access to vital healthcare services. Specifically, CHA sought a cap on non-economic jury awards to help control

the rising cost of malpractice premiums for physicians and hospitals.

CHA also formed a member work group to focus on the implementation of Health Insurance Portability and Accountability Act (HIPAA) transaction and code sets, and worked in tandem with AHA to prevent further reductions in Medicare reimbursement.

PATIENT CARE

CHA's patient care advocacy initiatives encompass virtually every aspect of hospitals' delivery of care. CHA's efforts included assisting members with statutory, regulatory, and accreditation requirements associated with the care and treatment of patients, and continuing to strengthen relationships with government agencies and organizations such as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

CHA members and staff collaborated to interpret and implement the HIPAA privacy regulations, forming a member work

group and publishing a guidebook that contains practical guidance covering a series of HIPAA compliance scenarios hospitals are likely to encounter. CHA also provided members with ongoing support for various HIPAA-related issues.

CHA, in conjunction with the Office of Policy and Management (OPM), formed a series of work groups to address specific aspects of the state's mental health crisis. The work groups, which began meeting in June 2003, will bring together state agencies, providers, and payors with the common goal of analyzing the mental health system and recommending concrete solutions.

Under the direction of Board Committees, such as the Committee on Hospital Performance Reporting, CHA continued to work with the Department of Public Health (DPH), Qualidigm, and others in support of activities designed to improve healthcare quality and patient safety, including development of parameters for a report comparing Connecticut hospitals on clinical

quality that is aligned with federal reporting initiatives. CHA and its members also worked with DPH to implement the adverse event reporting system mandated by Public Act 02-125 and to recommend refinements to the reporting system that are essential to achieving the goal of improving the quality and safety of patient care.

On the last day of the regular legislative session, the General Assembly passed the outpatient surgical facility legislation that CHA, in conjunction with the Office of Health Care Access (OHCA), had supported. The new legislation will help ensure uniform levels of quality and regulatory oversight across different healthcare settings, requiring all new outpatient surgical facilities to comply with OHCA's Certificate of Need (CON) statutes and regulations and obtain a license from the Department of Public Health (DPH).

As part of its ongoing commitment to attaining the highest possible level of emergency preparedness, CHA

co-sponsored and helped organize, with DPH, Connecticut's first Disaster Medical Assistance Team (DMAT), a group of more than 150 volunteer healthcare workers from around the state, including many representatives from CHA member institutions. In addition, CHA hosted weekly meetings with DPH and other partners to improve Connecticut's ability to respond to bioterrorism. CHA worked closely with DPH to coordinate its smallpox vaccination program, and to prepare for management of severe acute respiratory syndrome (SARS) patients.

Other areas of concentrated advocacy efforts included licensure and scope of practice issues, regulatory compliance, emergency medical services, ethics, and assisting hospitals to prepare for new JCAHO standards and survey requirements.

PROJECTED GROWTH OF MEDICARE PATIENT VOLUME

CHA conducted a preliminary study of Connecticut's existing hospitalization rates and census data on patients age 65 and older to quantify future growth in the demand for inpatient care among Medicare patients.

CHA's study projects that, based on current utilization and mortality rates, Connecticut's acute care hospitals are likely to experience a more than four-fold increase in inpatient admissions as the state's population ages over the next 20 years. The number of inpatient admissions among this age group is expected to increase from 68,403 in 2000 to a projected 304,635 admissions in 2020.

HUMAN RESOURCES

CHA's advocacy efforts to assist members in addressing human resources (HR) management and healthcare workforce issues include initiatives related to the workforce shortage, recruitment and retention, compensation and benefits, unionization, employment issues, and HR policies and procedures.

CHA's focus during the 2003 legislative session was on achieving support for various healthcare workforce development initiatives and avoiding unnecessary legislation on mandatory overtime.

This year CHA was a founding partner and active participant in the Connecticut Healthcare Workforce Coalition – a broad-based group of advocates, providers, educators, state agencies, and others focused on addressing the healthcare workforce shortage, with whom CHA coordinated this year's testimony and other advocacy efforts. A primary focus this year has been the development of an automated license renewal-based data collection system for workforce planning.

CHA has worked closely this year with many partners, including state agencies, schools, professional associations, and others on workforce planning and recruitment projects such as grants, hospital-school partnerships, and outreach efforts.

CHA's annual "Healthcare Heroes" essay contest (see essay excerpts throughout this Annual Report), now in its second year, is part of a long-term strategic initiative to address the healthcare workforce shortage by promoting the many rewards of healthcare careers.

In addition, CHA conducted annual vacancy rate surveys for nursing and allied healthcare professions, as well as a variety of compensation, benefit, and policy surveys to assist its members in their recruitment, retention, and workforce planning efforts.

MEMBER SERVICES

CHA HAS DEVELOPED A NUMBER OF FEE-BASED SERVICES IN RESPONSE TO SPECIFIC MEMBERSHIP NEEDS. THESE MEMBER SERVICES COMPLEMENT CHA'S CORE ADVOCACY FUNCTION AND PROVIDE MEMBERS WITH RELIABLE AND COMPETITIVE ALTERNATIVES FOR HOSPITALS TO USE IN VARIOUS ASPECTS OF THEIR OPERATIONS.

CHA's Member Services currently encompass the following areas: Education, Quality (Toward Excellence in Care (TEIC) program), Data Collection and Analysis (ChimeData), Data Networking (ChimeNet), Group Purchasing (CHA Shared Services Program), and Insurance Services.

EDUCATION

Through the Connecticut Healthcare Research and Education Foundation (CHREF), CHA offered more than 100 educational programs over the past year, focusing on healthcare management and operations issues related to regulatory compliance, reimbursement, and manager skill building. More than 3,500 attendees from CHA member institutions took advantage of these diverse educational offerings, which included the annual Human Resources Forum and Nursing Leadership Forum, as well as a number of other programs designed to meet specific member needs, such as the emergency preparedness series offered in conjunction

with the Department of Public Health.

CHA also collaborated with other organizations to offer programs such as the *Healthcare Leadership Series* and a *Patient Safety Summit* for hospital leaders, and to provide access to a variety of distance learning programs via satellite broadcasts, CareLearning.com, and other online educational resources. New this year was a 10-month management development curriculum that featured both classroom and online learning events, augmented by online mentoring and peer interaction.

Through its conference and meeting group structure, CHA hosted hundreds of meetings throughout the year to provide a regular forum for members with similar management and leadership responsibilities to exchange ideas and information. This structure provided vital member input into the development of CHA policies, positions, and responses to member needs.

QUALITY (TEIC)

CHA's quality initiatives are provided under the auspices of the Toward Excellence in Care (TEIC) program.

TEIC provided hospitals with a variety of quality improvement services and tools to assist them in satisfying the increasing reporting and benchmarking obligations being imposed by regulatory and accrediting bodies, including Connecticut's new adverse event reporting system. TEIC created custom software to help CHA's acute care hospital members collect adverse event data electronically and submit it to DPH.

The TEIC program is an approved Joint Commission on Accreditation of Healthcare Organizations (JCAHO) performance measurement system and submitted required Core Measures data to JCAHO for participating hospitals. TEIC's Core Measures software product garnered high praise from JCAHO reviewers and has continually been modified to add new features in response to member needs.

The TEIC program also is working to align reporting requirements and facilitate hospitals' compliance with both the American Hospital Association voluntary public reporting initiative and the mandatory Department of Public Health hospital report card currently under development as a special project in conjunction with the Centers for Medicare and Medicaid Services (CMS).

CHIMEDATA

CHA's data collection and analysis services are provided by ChimeData, which houses one of the oldest and most comprehensive databases of patient encounter-level information in the country.

Based on feedback from CHA member users, ChimeData expanded its Patient Census Report (PCR) categories and definitions to include additional inpatient and outpatient categories. These new categories give hospitals the ability to compare and monitor monthly volume

trends for procedures such as cardiac catheterizations, gastroenterology, and chemotherapy visits.

After collecting and editing various hospital utilization data, ChimeData continued to submit the data to the Office of Health Care Access (OHCA) on behalf of CHA members to satisfy hospital reporting requirements.

ChimeData enhanced access to its online reporting capabilities for hospital members via CHA's redesigned website, and also produced a number of custom utilization, financial, management, and other types of reports and analysis (special studies) for members and outside entities on a fee-for-service basis.

ChimeData also conducted a number of pilot projects, including pharmacy data collection and analysis and developing emergency department measures.

INPATIENT ADMISSIONS

Connecticut Acute Care Hospitals 1992 – 2002

With the focus on primary and preventive care and increased opportunities to perform procedures on an outpatient basis, inpatient admissions declined over the past decade. While hospital admissions in Connecticut dropped from 391,914 in 1992 to 371,822 in 1998, they have been increasing for the past four years.

Connecticut's 403,707 hospital admissions in 2002 reflect the increased demand for inpatient care, primarily due to the state's aging population.

CHIMENET

CHA's information technology (IT) affiliate, ChimeNet, recently received a Certificate of Public Convenience and Necessity (CPCN) from the Connecticut Department of Public Utility Control, which certified ChimeNet as a facilities-based Competitive Local Exchange Carrier (CLEC) for telecommunications services. The CLEC certification grants ChimeNet the right to implement new technologies to deliver T1 and DSL service, to be a reseller of SNET/SBC products and services, and establishes ChimeNet as a regulated telecommunications carrier in the state of Connecticut.



ChimeNet's Network Operations Center (NOC), located at CHA's Wallingford, Connecticut, offices.

ChimeNet launched an innovative new program to allow CHA member hospitals to offer affiliated physicians secure, high-bandwidth access to the hospitals' clinical applications. By locating network equipment in a hospital's data center, ChimeNet can create a virtual private network (VPN) between the hospital and physician for secure electronic communication. This initiative allows ChimeNet to broaden its customer base and expand its statewide network, while helping hospitals meet their physician outreach goals and providing hospitals with revenue-sharing opportunities.

ChimeNet continued to improve its offerings to hospitals, physicians, and businesses, with turnkey managed connectivity solutions, featuring managed VPN, firewall, and wide-area network services, as well as Tier 1-level Internet connectivity with superior reliability, performance, and speed, all delivered with ChimeNet's unparalleled commitment to service.

As part of its continuing efforts to improve the services provided to its customers, ChimeNet also upgraded its online eligibility verification service to deliver real-time insurance eligibility and demographic information to hospitals and other healthcare providers during patient registration and pre-registration, billing, and collections. ChimeNet's clients will be able to use this information to improve cash flow, accurately register patients, reduce claims denials, improve net revenue, and more efficiently manage their businesses.

CHA SHARED SERVICES PROGRAM

A regional Group Purchasing Organization (GPO) with members in Connecticut and throughout New England, the CHA Shared Services Program (CHA SSP) provides cost-saving alternative choices to the national GPOs and innovative agreements with local vendors of products and services used by hospitals and healthcare providers.

10 Responding to a need expressed by CHA hospital members, CHA SSP developed two new group purchasing agreements to offer customized background screening services to Human Resources departments.

CHA SSP also formed a partnership with the Connecticut Business and Industry Association (CBIA) to market the CHA SSP portfolio directly to CBIA members through the CBIA website.

CHA SSP also enhanced its “Contracts Online” service, which allows members to view the entire portfolio of group purchasing contracts via the CHA SSP website, and published regular contract and vendor profiles, along with updates on contract changes, special vendor promotions, and other new cost-saving opportunities, in its member newsletter, *Purchasing Power*.

CHA INSURANCE SERVICES

Through its affiliate, Diversified Network Services (DNS), CHA provided a range of insurance services, such as Property and Casualty and Life and Health insurance products. CHA also offered, through CHA Securities, a number of financial service products through endorsement arrangements.

DNS provided medical management and administrative services to its clients, including Health Connecticut, a limited liability company that negotiates Medicare and Medicaid managed care contracts on behalf of its 22 members and operates a commercial Preferred Provider Organization (PPO).

HOSPITAL EXPENSE PER CAPITA

Hospital expense per capita is calculated by spreading total hospital expenses over a state’s entire population.

Connecticut’s hospital expense per capita of \$1,378 is lower than that of its neighboring states and New England and compares favorably with the U.S. average.

2002-2003 CHA BOARD OF TRUSTEES

EXECUTIVE COMMITTEE:

Chairman:

Robert G. Kiely
Middlesex Hospital
Term Expires: 6/04

Vice Chairman:

Larry M. Gold
Connecticut Children's
Medical Center
Term Expires: 6/04

President:

Jennifer Jackson
Connecticut Hospital Association

Secretary:

Thomas D. Kennedy III
Bristol Hospital
Term Expires: 6/03

Treasurer:

Robert J. Lyons Jr.
Gaylord Hospital
Term Expires: 6/03

John J. Meehan
Hartford Hospital
Term Expires: 6/04

Charles E. Riordan, M.D.
Hospital of Saint Raphael
Term Expires: 6/05

John H. Tobin
Waterbury Hospital
Term Expires: 6/03
(AHA Delegate)

TRUSTEES:

Raymond S. Andrews, Jr.
Hospital for Special Care
Term Expires: 6/03

David W. Benfer
Hospital of Saint Raphael
Ex Officio
(Chairman, CEO Forum)

Richard A. Brvenik
Windham Community
Memorial Hospital
Term Expires: 6/05

Frank A. Corvino
Greenwich Hospital
Term Expires: 6/05

Richard Davidson
American Hospital Association
Ex Officio
(AHA Senior Executive)

David D'Eramo, Ph.D.
Saint Francis Hospital
and Medical Center
Term Expires: 6/03

Ann Errichetti, M.D.
Day Kimball Hospital
Term Expires: 6/05

Michael B. Hammond
Danbury Hospital
Term Expires: 6/05

Harold P. Kaplan, M.D.
MidState Medical Center
Term Expires: 6/04

Diana O. Karish
Norwalk Hospital
Term Expires: 6/03

Alfred A. Lertz
Johnson Memorial Hospital
Term Expires: 6/03

Marc H. Lory
Eastern Connecticut
Health Network
Term Expires: 6/03

Paul E. Moss
Milford Hospital
Term Expires: 6/03

William J. Riordan
St. Vincent's Medical Center
Term Expires: 6/04

Laurence A. Tanner
New Britain General Hospital
Term Expires: 6/05

Joseph A. Zaccagnino
Yale-New Haven Hospital
Term Expires: 6/04

2003 CHA AWARDS

IN ADDITION TO THE 2003

“HEALTHCARE HEROES”

ESSAY CONTEST WINNERS

FEATURED THROUGHOUT

THIS 2003 ANNUAL

REPORT, CHA IS PROUD

TO ACKNOWLEDGE THE

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FOLLOWING ANNUAL

AWARD RECIPIENTS:



Raymond S. Andrews, Jr.

T. STEWART HAMILTON, M.D. DISTINGUISHED SERVICE AWARD

Raymond S. Andrews, Jr., the 2003 recipient of the T. Stewart Hamilton, M.D. Distinguished Service Award, is distinguished by both his professional career and his many years of volunteer service in the healthcare industry.

During his 22 years as an attorney for the firm of Robinson & Cole, he served as a respected and trusted counsel to a number of Connecticut hospitals, heading the firm's healthcare practice for 10 years. Mr. Andrews is a former Board Chairman of the Center of Special Care, the Hospital for Special Care, and the Capitol Area Health Consortium. He continues to serve on the hospital's Board today. Mr. Andrews also served on the Board of ConnectiCare for many years, as well as the Board of the Connecticut Health Foundation.

Mr. Andrews has served as an alternate member of the American Hospital Association (AHA) Regional Policy Board and as a member of the Editorial Advisory Committee for AHA's *Trustee* magazine.

In his current role as Trustee of the Patrick and Catherine Weldon Donaghue Medical Research Foundation, Mr. Andrews continues to work tirelessly to further the Foundation's goals in support of quality healthcare. A recent example of this work was the Foundation's sponsorship, along with CHA, the Hastings Center, and the Connecticut Health Foundation, of the April 14, 2003, patient safety conference for hospital leaders held at CHA.

His legacy of service to CHA, which includes a term as Board Chairman in 1997 and several terms as a Trustee, is personified by his strong advocacy for the vital role that voluntary trustees play in the governance of Connecticut hospitals. His writings on the subject of hospital governance have contributed significantly to the national body of knowledge. In addition, he has been influential in CHA's activities regarding ethics, calling attention to the need for strong organizational ethics policies.

CHA HONORARY MEMBERSHIP

CHA's 83 Honorary Members have been distinguished by their personal dedication and contributions to the advancement of healthcare services. The 2003 recipient of this honor, Gerard J. Lawrence, M.D., embodies this tradition.

During a career as an orthopaedic surgeon that spanned three decades, Dr. Lawrence served as President of the Orthopaedic Section of the Connecticut State Medical Society and Chief of the Society's Division of Surgery. His diverse professional experiences also include being appointed to the U.S. Olympic Committee and serving as team physician for the U.S. Men's and Women's Olympic basketball teams, as well as countless University of Connecticut and Eastern Connecticut State University athletes.

A former Chairman of the Board at Windham Community Memorial Hospital, Dr. Lawrence was instrumental in the hospital's effort to update its strategic plan to include stakeholders from throughout the community. His volunteer activities also include serving on the boards of the University of



Connecticut and its Foundation, as well as a host of other organizations in the Willimantic area. He continues to serve as Chairman of Windham Community Memorial Hospital's Capital Campaign Committee and as a member of the Board of Directors of the University of Connecticut Health Center.

Dr. Lawrence's broad wealth of knowledge, passionate advocacy for patients, and personal integrity have resulted in strong and effective leadership in every capacity in which he has served throughout his career.

Gerard J. Lawrence, M.D.

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

This is the second consecutive year that Yale-New Haven Hospital has received this prestigious quality improvement award, which is sponsored by the Connecticut Healthcare Research and Education Foundation (CHREF).

The 2003 John D. Thompson Award recognizes the hospital's initiative, begun in 2001, to reduce catheter-related bloodstream infections in its Surgical Intensive Care Unit (SICU). The project was aligned with the institution's goals for quality and principles of performance improvement that are based on the belief that "you cannot improve what you do not measure."

With fundamental process change seen as a cornerstone of the its improvement efforts, the hospital utilized a combination of standardized epidemiologic analysis (e.g., risk factor assessment using case-control methods and regression) and Six Sigma tools to reach

its benchmark for improvement. As a result, the hospital was able to achieve a nearly seven-fold reduction in its SICU intravenous catheter-related bloodstream infection rate from April 2001 through March 2003.



Members of the Yale-New Haven Hospital team who worked on the John D. Thompson Award-winning submission on reducing bloodstream infections are shown, l-r: Marie Devlin, R.N., Patient Services Manager, Surgical Intensive Care Unit (SICU); Heidi L. Frankel, M.D., Medical Director, SICU; Jeff Topal, M.D., Associate Hospital Epidemiologist; William Credé, M.D., Medical Director, Clinical Quality Improvement; and Sally Roumanis, R.N., Project Manager, Center for Outcomes Research and Evaluation.

CONNECTICUT'S HOSPITAL COMMUNITY SERVICE AWARD

Bristol Hospital is the recipient of the 2003 Connecticut's Hospital Community Service Award for its Colon Cancer Prevention and Awareness Program.

The award, sponsored jointly by CHA and the state Department of Public Health, each year recognizes a Connecticut hospital that has made an outstanding contribution to the health of its community.

In 2001, recognizing that colorectal cancer was one of the most common cancer diagnoses in Bristol, the hospital initiated a collaborative program to raise awareness in its service area about the often taboo subject of colon cancer. The program's mission: to save lives by educating the community about the risk factors, signs, symptoms, prevention measures, and detection techniques for colon cancer and increasing compliance with regular screenings.

The program involved the hospital's

physician community through a comprehensive outreach effort, and created greater patient access to screenings by providing free care and enhancing service delivery to eliminate barriers to screening. Working with physicians and other business and civic groups, the hospital also distributed more than 10,000 "EZ Detect" home testing kits.

The Bristol Hospital Development Foundation raised \$125,000 from the community to help fund the program,

80 percent of which will be used to provide ongoing free care, and the remainder used to provide free home testing kits and promote awareness via the hospital's "Don't Die of Embarrassment" media campaign, which features Bristol residents who have been screened for colon cancer.

As a result of Bristol Hospital's Colon Cancer Prevention and Awareness Program, colon cancer screening rates in the hospital's service area have increased by 42 percent in two years.



The three co-chairs of the Colon Cancer Prevention and Awareness Project (from left): Suzanne Onorato, Ph.D., Director of the Bristol Hospital Wellness Center, Ronald Green, M.D., Bristol Gastroenterology Associates and Daniel Smiley, M.D., Bristol Gastroenterology Associates.

OUR 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
THEIR RELATED
HEALTHCARE
ORGANIZATIONS 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.





CONNECTICUT HOSPITAL ASSOCIATION AND AFFILIATES

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