

# NorMet News . . . September 2012

**A Monthly Publication of the Northern Metropolitan Hospital Association**

*NorMet News publication is a summary of regulatory and legislative news, advocacy messages, and other relevant issues affecting the delivery of hospital and health care in the Hudson Valley.*

## Tax Hikes and Spending Cuts Cloud Horizon

Immediate worries about a federal government shutdown are off the table – at least until March 27, 2013 – as a result of a continuing resolution recently passed by the House and under consideration in the Senate. The stopgap spending bill funds federal agencies at current levels and even allows for a slight increase of 0.6 percent in accord with last summer's budget deal. While it is business as usual for now, the fiscal cliff draws ever closer and the prospect of steep tax increases and spending cuts occurring at year's end is very real. Most notably, unless lawmakers find other funding sources, the hospital industry will fall subject to automatic sequestration – two percent across-the-board Medicare cuts – millions in new Medicare reductions to hospitals throughout the lower and mid-Hudson Valley region. Sequestration is a result of the bi-partisan super committee's inability to reach a deficit reduction agreement last November.

It will likely fall to a lame duck Congress to tackle sequestration, as well as other fiscal concerns that hang in the balance – a Medicare physician pay cut of 27 percent, expiring Bush tax cuts, and expiration of the

Social Security payroll tax holiday. In mid-September, the White House released its report on how sequestration would be implemented. The report was required by sequestration language set forth last year.

Hospital leaders from the region visited lawmakers on September 11, 2012 - American Hospital Association Advocacy Day - to register their concerns with these upcoming tax increases and spending cuts. **Leaders will be back in Washington, DC on Thursday, November 9 and Tuesday, December 11 to further press lawmakers.** There is a threat that lawmakers could shift even more of the planned sequester cuts from defense to health care. Advocacy Days are sponsored by the American Hospital Association in conjunction with state and regional associations. Join NorMet president/CEO, Kevin Dahill, at either one or both of these advocacy days. To register and for more information about hotel locations go to:

<http://www.surveymonkey.com/s/WMDJCWK> - Michael McCue, [mmccue@aha.org](mailto:mmccue@aha.org). – Janine Logan, [jlogan@normet.org](mailto:jlogan@normet.org).

## Hospitals Await Fate of Observation Services Bill

Hospitals in New York continue to await the outcome of the **observation services bill** signed by the legislature this past spring and delivered to the governor September 21, 2012. The bill will clarify conflicting state and federal observation care regulations and, for many hospitals, alleviate logistical and fiscal concerns. Hospitals continue to negotiate the particulars of this legislation, while the governor considers it. State regulations finalized in January require that observation care be provided in a discreet unit, under the direction of the emergency department, with a specific designation of beds for the purpose of providing observation care. Many hospitals do not have the physical space to house such a discreet unit or the funds to construct it. Medicare rules allow hospitals to admit patients to observation status and place them on existing units that best meet patients' clinical needs. Further, state regulations limit observation care to 24 hours, while federal rules allow 48 hours. Because of these conflicts, hospitals admit patients to short stays, even when observation care is clinically more appropriate. These short stays trigger coding/payment audits and have resulted in loss of payment for valid and medically necessary services. The Suburban Hospital Alliance of New York State, LLC advanced legislation to correct these discrepancies.

Meanwhile, the outcome of the **wage deduction bill** is known, as the governor signed this piece of legislation into law earlier this month. The law expands the realm of allowable employee-authorized deductions to include deductions for services provided by employers such as parking, meals in the employer dining facilities, and onsite fund raising activities conducted by auxiliaries. This last deduction is important, as auxiliary-sponsored vendor sales and gift shop purchases are a vital source of fund raising for the auxiliaries and their hospitals. An interpretation of the labor law only allowed for

wage deductions that were classified as being for the benefit of the employee. This law, which takes effect October 6, 2012, clarifies the interpretation. – Janine Logan, [jlogan@normet.org](mailto:jlogan@normet.org).

# Quality Award Recipients Share Winning Strategies



**Hospital quality leaders gather at the NorMet office to hear from 2011 quality award winners.**

The four winners of the 2011 NorMet Quality Improvement and Safety Awards presented in-depth presentations about their award-winning initiatives for members of the full Regional Quality Improvement Committee on Tuesday, September 18, 2012 at NorMet's office in Newburgh. Innovations in process of care applications, operational streamlining and improvement strategies, and robust hands-on infection control programs enabled the winners to stand out in last year's competition.

The goal of all quality improvement initiatives is to enhance patient care and safety. A common theme among successful quality improvement programs is a concerted effort to facilitate communication both vertically and horizontally throughout the hospital and

beyond into community practice settings. This was especially the case with Ellenville Hospital's medication safety project. Ellenville Regional president/CEO and incoming 2013 NorMet board chair Steve Kelley opened the discussion about his facility's project and talked passionately about the success of Ellenville's initiative and the importance of CEO leadership in quality and safety. Among other directives, hospital pharmacists led an effort in the hospital and with local pharmacies to meet with community members. At Northern Dutchess, the highly successful reduction in surgical site infections was accomplished in part by empowering all levels of staff with the confidence to observe and then intercede regarding co-workers' hand washing compliance. For Northern Westchester, communication among staff took on an almost "concierge-like" approach, with staff members stationed at each elevator to bid a patient goodbye and good health, followed immediately by the push of a button placing the now vacant bed back on the bed board and notifying environmental staff to ready the room immediately for the next patient. The hospital's highly effective re-engineering of patient flow began with the emergency department and a mindful restructuring of roles and responsibilities in departments throughout the hospital. The Stellaris Health Network dramatically improved core measure outcomes through a diligent commitment to change that began with weekly meetings among all stakeholders from clinical staff, administrators, to support personnel.

"These are just a few of the many creative, strategic initiatives underway at hospitals throughout the Hudson Valley to improve patient care through process improvement," said Angela Skretta, vice president of NorMet. "The value of these successful programs extends beyond the individual hospital or system winner, because forums like this allow all members to learn from one another."

In December 2011, NorMet recognized first place regional winners in four categories:

- Hospital Division or Unit – **Northern Dutchess Hospital** for *Decrease the Number of Surgical Site Infections Following Total Joint Replacement of Hip and Knee*
- Small Hospital – **Ellenville Regional Hospital** for *Medication and Patient Safety Collaborative*

## Member Hospitals

Benedictine Hospital  
Blythedale Children's Hospital  
Bon Secours Community Hospital  
Burke Rehabilitation Hospital  
Catskill Regional Medical Center  
Ellenville Regional Hospital  
Good Samaritan Hospital  
Helen Hayes Hospital  
Hudson Valley Hospital Center  
Keller Army Community Hospital  
The Kingston Hospital  
Lawrence Hospital Center  
The Mount Vernon Hospital  
The New York Presbyterian Hospital Westchester Division  
Northern Dutchess Hospital  
Northern Westchester Hospital  
Orange Regional Medical Center  
Phelps Memorial Hospital Center  
Putnam Hospital Center  
St. Anthony Community Hospital  
Saint Francis Hospital  
St. Joseph's Medical Center  
St. Luke's Cornwall Hospital  
St. Vincent's Westchester (Division of St. Joseph's Medical Center)  
Sound Shore Medical Center of Westchester  
Vassar Brothers Medical Center  
VA Hudson Valley Health Care System  
White Plains Hospital Center

- Large Hospital – **Northern Westchester Hospital** for *Development of a Medical-Surgical Unit Environmental Readiness Process to Improve Patient Satisfaction with the Environment and Provide Support to the Clinical Staff*
- System – **Stellaris Health Network** for *Hardwiring Processes to Improve Core Measures*

The 2012 NorMet Quality Improvement and Patient Safety Awards is now underway. Fifteen entries were received. These entries will be judged by eight volunteer judges from the region, all leaders in quality improvement and safety. Winners will be announced and honored on Monday, **November 12, 2012** at the NorMet Quality Awards and Trustee Event, Doubletree, Tarrytown, NY. More details to follow.- Janine Logan, [jlogan@normet.org](mailto:jlogan@normet.org).

## NorMet VP Presents Provocative Analysis of Health Care Environment, Economy at HFMA Event

Recent conflict in the Middle East, the nation's fragile economic situation, and deficit reduction concerns sure to dominate Congress' agenda the remaining months of the year all impact the health care transaction between patient and provider. NorMet vice president Angela Skretta presented a thought-provoking and comprehensive analysis of these and other relevant political issues that are influencing the health care environment. She offered her in-depth analysis at the Healthcare Financial Management Association (HFMA) Hudson Valley New York Chapter's annual legislative update held Thursday, September 13, 2012 at the Ramada Inn in Fishkill, NY.

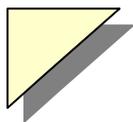


Consumers remain in poor fiscal health, even while the Federal Reserve acknowledges that consumers are better managing their overall debt. Along with weak employment gains, the nation and region remain in a recessionary slump that affects consumers' willingness to spend. That hesitancy affects even the health care

consumer, noted Skretta, as high deductibles and co-pays cause patients to delay care. The result is patients arriving at hospitals when conditions are more critical and more costly to treat.

State and federal reforms developed, in part, to counter the effects of the sluggish economy by holding the line on health care spending and in some cases hoping to reduce it have yet to demonstrate substantial savings. Initiatives such as value-based purchasing and Medicare readmissions penalty start hitting hospital payments in October 2012. On the state level, the Medicaid Global Spending Cap has quelled spending, although enrollment in Medicaid continues to climb due to the weakened economy, explained Skretta. Should the cap be breached, the threat of more across-the-board Medicaid cuts becomes likely.

Members can access the full slide deck by going to the NorMet website, [www.normet.org](http://www.normet.org) or by contacting Mindi Ottavan at [mottavan@normet.org](mailto:mottavan@normet.org).



### The Quality Corner

*An update on quality reporting measures*

Mary Jane Milano, Director

**Influenza Vaccination Notification:** Acute care hospitals participating in the Inpatient Prospective Payment System's Hospital Inpatient Quality Reporting Program are required to submit summary data on influenza vaccination of healthcare personnel beginning on January 1, 2013 for the 2012-2013 influenza season. Data must be reported for all employees on the payroll, licensed independent practitioners (physicians, advanced practice nurses, and physician assistants affiliated with the hospital but not on payroll), and students, trainees, and volunteers aged 18 or older. Go to the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network vaccination module website at [http://www.cdc.gov/nhsn/hps\\_Vacc.html](http://www.cdc.gov/nhsn/hps_Vacc.html) for additional information.

**Joint Commission Report:** The Joint Commission (TJC) recently released its annual report on hospital quality and safety. Hospitals must reach two separate 95 percent performance thresholds to be considered a top performer. The report lists 620 hospitals as "Top Performers on Key Quality Measures." these represent the top 18 percent of those Joint Commission-accredited hospitals that report core measure performance data and reflects an increase of 50 percent from last year. Additionally, another 583 hospitals (17 percent of hospitals) were only one measure short of being a "top performer." The report also notes that hospitals that are not recognized as top performers are still performing well on accountability measures and, overall, since reporting began in 2002, all hospitals have continuously shown improvement on core measures.

**Direct Quality Reporting:** The CDC is looking to use direct messaging to streamline quality reporting efforts. The CDC issued a request for proposals to vendors who can establish an infrastructure to make direct messaging for quality reporting possible. Currently, health care organizations that submit information to the CDC either report through their respective electronic health records, which requires uploading files, or through the Internet, which is labor intensive. Direct messaging may help streamline data submission.

**Obesity Epidemic:** The number of obese adults, along with related disease rates and health care costs, are on course to increase dramatically in every state in the country over the next 20 years, according to *F as in Fat: How Obesity Threatens America's Future 2012*, a report released by Trust for America's Health (TFAH) and the Robert Wood Johnson Foundation (RWJF). If obesity rates continue on their current trajectories, by 2030, the obesity rate in New York could reach 50.9 percent. According to the latest data from the CDC, in 2011, 24.5 percent of adults in the state were obese. Over the next 20 years, obesity could contribute to 2,260,299 new cases of type 2 diabetes; 5,217,841 new cases of coronary heart disease and stroke; 4,953,893 new cases of hypertension; 3,179,056 new cases of arthritis; and 762,062 new cases of obesity-related cancer in New York.



## Mark Your Calendar for Oct. NorMet Events

- Oct. 5 Dr. John Clarke, Patient Safety Presentation, 9 a.m.
- Oct. 26 NYPORTS Teleconference, 12:30 - 2:00 p.m.

See last page for meeting dates for the **NorMet Patient Safety Institute**

Meetings for NorMet members only and are held at NorMet offices in Newburgh unless otherwise noted. To register/info call: 845-562-7520.

## News Briefs . . .

**The Commission on Accreditation of Rehabilitation Facilities (CARF)** .

. . . awarded **Burke Rehabilitation Hospital** another three-year accreditation. CARF is an international, independent, nonprofit organization focused on advancing the quality of patient services.

**Stroke Gold Plus Performance Achievement Award** . . . goes to Orange Regional Medical Center. The American Heart Association/American Stroke Association's Get with the Guidelines-Stroke Gold Plus Quality Achievement Award recognized Orange Regional's commitment and success in implementing a higher standard of stroke care by ensuring stroke patients receive treatment according to nationally accepted standards and recommendations.

**Crisis Communication and Social Media** . . . conference offered by the Healthcare Association of New York State (HANYS) takes place Wednesday, November 14, 2012 at the Hotel Albany. Two sessions will cover: crisis vulnerability and planning exercises, secrets of developing compelling and quotable messages, exercises to develop and refine your social strategy, case studies of hospitals using social media successfully. Contact: Michael Pauley, [mpauley@hanys.org](mailto:mpauley@hanys.org).

**Historic National Cancer Prevention Study** . . . involves six hospitals in the NorMet region. The American Cancer Society's Epidemiology Research Program will be enrolling participants for their newest research study, the Cancer Prevention Study-3 (CPS-3). The study will follow participants for 20 years in an effort to figure out who gets cancer and why. Weight and physical activity will be a major focus of the study, but other behaviors, including the use of medications, will be examined as well. NorMet member hospitals participating in the study are **Hudson Valley Hospital Center, Lawrence Hospital, Northern Westchester Hospital, Orange Regional Medical Center, Phelps Memorial Hospital Center, and St. Luke's Cornwall Hospital**. For more information go to:

<http://www.cancer.org/Research/ResearchProgramsFunding/Epidemiology-CancerPreventionStudies/CancerPreventionStudy-3/cps3-locations#ny>

**Hospitals' Secret Gardens** . . . are growing throughout the region. Several hospitals now maintain vegetable, herb, and flower gardens on their campuses and patients and their guests are benefiting, as are staff. The healthful benefits of eating fresh produce are an important part of a healthy diet, especially for those recovering from illness and injury. These hospital-based gardens are also therapeutic for patients and families. The process of nurturing and growing aids in the healing process. **Good Samaritan Hospital, Northern Westchester Hospital, Phelps Memorial Hospital Center, and Hudson Valley Hospital** are now busy tending to their gardens.

**Drug Take-Back Day** . . . will occur September 29. The United States Drug Enforcement Administration (DEA) is sponsoring this fifth National Prescription Drug Take-Back Day. This initiative provides a venue for people who want to dispose of unwanted and unused prescription drugs and to remove them from their household medicine cabinets. In addition, it can be arranged for DEA agents to go to programs/facilities licensed as Class 3A

Institutional Dispensers, Limited to collect discontinued, expired, or unwanted pharmaceuticals. The Department of Health's Bureau of Narcotic Enforcement (BNE) is working with the DEA to facilitate the approval process for collecting drugs from institutions. Direct questions to the BNE at 866-811-7957.



Go to [www.normet.org](http://www.normet.org) and click on this **Vet Connect icon** to find online links to hospitals' job banks, health care services, and other community resources. The initiative is coordinated by NorMet and members of its Communications Committee. The **Vet Connect icon** is also located on each member hospitals' website.

## Committee/Meeting News . . .

*Nationally Renowned Physician John Clarke, MD, Speaks with Members on Friday, October 5, 2012 from 9:00 - 11:00 a.m. at the NorMet Office in Newburgh.* Dr. Clarke is a former trauma surgeon who presently serves as the Clinical Director at the Pennsylvania Patient Safety Authority, Clinical Director for Patient Safety and Quality Initiatives at the ECRI Institute, and Professor of Surgery at Drexel University in Philadelphia. The Pennsylvania Patient Safety Authority is analogous to the NYS NYPORTS system and a patient safety organization, all wrapped into one. His presentation will include information about:

- How to make a difference - and *what* makes a difference - in reducing error;
- The use of data to effect practice;
- Qualities of successful collaborations; and,
- Thoughts – based on experience – about integrating disparate guidelines.

Dr. Clarke is the first in a series of nationally renowned physician leaders who will share their experiences and is a joint initiative of the NorMet Hospital Association and the NorMet Patient Safety Institute. As a joint initiative of the NorMet Hospital Association and the NorMet Patient Safety Institute, we are pleased to invite you to join the first of a series of informative discussions with nationally renowned physician leaders. The goal of each discussion is to have the expert clinician share information, data and strategies to support clinical leaders from Member Hospitals in guiding healthcare professionals to provide even more reliable, high quality and effective care. *If you have questions about this meeting contact Angela Skretta or Lisa Corcoran at 845-562-7520. To register your attendance, contact Melinda Ottavan at [mottavan@normet.org](mailto:mottavan@normet.org).*

**Communications Committee:** Members of this committee met via conference call on Friday, September 7, 2012. Among items discussed were educational topics for 2012 – 2013, community service plans and population health management, and progress of the Vet Connect initiative.

## Patient Safety Institute Committee Meetings

### Surgical Site Infection Committee

Oct. 2 at 9 a.m.

### Patient Safety Committee

Oct. 5 at 11:30 a.m.



Northern Metropolitan  
**Patient Safety Institute**  
Collaborating to provide the safest, highest quality patient care.

*\*In order that your hospital may enjoy the confidential and privileged nature of these discussions, ONLY staff from the 23 hospitals that have fully executed their Confidentiality and Participation Agreements with the Institute will be permitted to participate in these meetings. Contact Angela Skretta for more information.*



400 Stony Brook Court  
Newburgh, New York 12550  
845-562-7520 • Fax: 845-562-0187  
[www.normet.org](http://www.normet.org)