

# NorMet News . . . December 2011

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.

## Hospital Trustees Celebrate Quality Initiatives

*Hospital trustees, chief administrators, and quality directors from throughout the Hudson Valley and Long Island recognize their peers for excellence in patient safety*

Trustees from hospitals in the Hudson Valley and Long Island gathered Monday, December 5, 2011, at the LaGuardia Marriott for a celebration of clinical excellence and to learn more about the crucial role trustees play in the changing health care environment. The event, sponsored by the Suburban Hospital Alliance of New York State (SHANYS) and the Healthcare Trustees of New York State, paid tribute to hospital quality initiatives recognized by the Northern Metropolitan Hospital Association (NorMet) and the Nassau-Suffolk Hospital Council (NSHC), as the most outstanding for 2011. NorMet and NSHC, representing hospitals from similar regions, share the same advocacy agenda through the Suburban Hospital Alliance and are jointly led by president/CEO Kevin Dahill.

Keynoter John Combes MD, president/COO, Center for Healthcare Governance, American Hospital Association, challenged trustees and hospital leaders to more fully engage physicians, establish a deep strategic quality plan, and demonstrate a consistency of purpose. "It's about our [hospitals'] ability to accept risk across the continuum of care while delivering quality care at a lower cost," said Dr. Combes.

In accordance with the categories used for the Healthcare Association of New York State's (HANYS) statewide competition, 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 the Hip and Knee*
- Small Hospital – **Ellenville Regional Hospital** for *Medication and Patient Safety Collaborative*
- 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*; and
- System – **Stellaris Health Network** for *Hardwiring Processes to Improve Core Measures*.

Health Alliance of the Hudson Valley, Vassar Brothers Medical Center, Bon Secours Charity Health System (Bon Secours, Good Samaritan, and St. Anthony hospitals), and Hudson Valley Hospital Center received Honorable Mentions for their entries.

**Nassau-University Medical Center (NUMC)** took the Hospital Council's top quality prize, the "Excellence in Patient Safety" award, for its project *Developing a Low Cost Solution to a High Risk Problem* concerning central line-associated blood stream infections (CLABSI). – [Janine Logan](mailto:jlogan@normet.org), [jlogan@normet.org](mailto:jlogan@normet.org).

*Photos from the event appear on page 2 . . .*

## NorMet 2011 Quality and Patient Safety Award Winners



**NorMet Small Hospital Winner – Ellenville Regional Hospital.** From left: All representing Ellenville Hospital are: Steven Kelly, President/CEO; Ashima Butler, VP Performance Improvement and Medical Staff; and Deborah Briggs, Director, Human Resources and Volunteer Services.



**NorMet Hospital Division or Unit Winner – Northern Dutchess Hospital.** From left: Susan Buckner, Director, Quality Utilization, Northern Dutchess Hospital; Glicerio Moura RN, Wound Ostomy Nurse Specialist, Vassar Brothers Medical Center; Denise George, President/CEO of Northern Dutchess Hospital; and Mike Weber, CEO of Health Quest and 2011 Chairman of the Board of NorMet.

*Congratulations to all Winners and Honorable Mentions!!!*



**NorMet Large Hospital Winner – Northern Westchester Hospital.** From left representing Northern Westchester Hospital: Maria Hale, VP, Patient Advocacy and Patient-Centered Support Services; Sicta Delacruz, Service Associate; Brian Tompkins, Environmental Associate; Liz Lanzano, Director, Patient-Centered Support Services; Valerie Zeller, Nursing Care Manager, Surgical Services.



**NorMet System Winner – Stellaris Health Network.** From left bottom row: Ellen Perlman (White Plains Hospital Center); Kate O'Keefe (Northern Westchester Hospital); Melissa Hershfield (Northern Westchester Hospital). Second row standing from left: Maria Costino (Stellaris); Bill Reifer (Phelps Memorial Hospital Center); Theresa Conway (Lawrence Hospital Center); Nora Mulcahy (Lawrence Hospital Center). In back row: Art Nizza, CEO (Stellaris Health Network) and Keith Safian, President/CEO (Phelps Memorial Hospital Center) on the right.

# Doc Fix Deadline Draws Near; Hospitals Remain Vulnerable to Cuts

Congress was able to avoid yet another government shutdown on Friday, December 16, 2011 when the House of Representatives approved a Consolidated Appropriations Act to provide discretionary funding for the rest of fiscal year 2012 to the Department of Health and Human Services and other federal agencies. The Senate soon approved the legislation. However, fixing the impending 28 percent Medicare physician pay cut has found no common ground among Washington lawmakers.

Separately, the “doc fix” and extension of unemployment benefits and the current two percent payroll tax cut are at a standstill. In mid-December, the House passed the Middle Class Tax Relief and Job Creation Act of 2011 that included a ‘doc fix,’ drawing upon massive cuts to Medicare hospital outpatient department

evaluation and management rates and cuts to Medicare disproportionate share payments to help fund the fix. The Senate rejected this plan and forwarded its own legislation to avert the doc pay cut and to extend unemployment insurance benefits and the Social Security payroll tax holiday - all for a two month period – without cuts to hospitals.

Initial indications were that the House would pass the Senate bill, but on Tuesday, December 20, 2011 the House rejected the plan. Therefore, hospitals once again are vulnerable to cuts, as negotiators will look for further cuts to offset the expense of the “doc fix,” payroll tax holiday, and extension of unemployment benefits.

As of the release of this newsletter, members of the Senate are now on holiday recess.- [Janine Logan, jlogan@normet.org](mailto:jlogan@normet.org).

## While Small Businesses and Many Non-Profit Organizations Relieved from MTA Tax Burden, Suburban Hospitals Reiterate Call for the Same Break

### *Urge Legislature to Expand Payroll Tax Exemption to All Non-Profit Institutions*

Hospitals in the suburban regions that comprise the MTA transit district were not included in the MTA tax relief plan that Governor Cuomo and legislative leaders recently worked out. The plan also included revisions to New York’s tax code. The MTA tax relief and revised tax code will provide residents and businesses with much needed tax relief.



Kevin Dahill, President and CEO of the Suburban Hospital Alliance of New York State (SHANYS), which represents 54 hospitals in the Hudson Valley and on Long Island, issued the following statement in response to the announcement by Governor Cuomo and legislative leaders of a deal to repeal the MTA payroll tax for some small businesses, private and parochial schools.

“The announcement by Governor Cuomo, Majority Leader Skelos and Speaker Silver to repeal the MTA payroll tax for many employers is a prudent action that will better enable job creation and ease the burden on educational institutions. We applaud the leadership of Senators Lee Zeldin (R-Shirley), Jack Martins (R-Mineola), John Bonacic (R-Mt. Hope) and Stephen Saland (R-Poughkeepsie), as well as Assemblyman George Latimer (D-Rye) and many other legislators in the suburban regions who pushed this issue to the forefront, and recognize that this provision has already been agreed upon in the context of a larger legislative package.”

However, suburban hospitals are urging the Legislature to extend this important tax relief to not-for-profit hospitals and health providers, which are the largest employers in the impacted communities. Within the region

covered by the tax, not-for-profit hospitals are the single largest providers of private sector jobs, supporting 150,000 jobs and \$23 billion in economic activity, while being subject to more than \$4.5 billion in state Medicaid cuts and \$13 billion in federal Medicare cuts in the last three years alone. Hospitals have great potential for job creation, but they are hindered by the uncertainties of state and federal reimbursements going forward. The MTA payroll tax, which costs suburban hospitals approximately \$20 million per year, adds to this burden.

The Suburban Hospital Alliance of New York State has endorsed S. 5596/A. 8193, legislation introduced by Senators Zeldin and Martin and Assemblyman Latimer, which would phase out the MTA tax for all employers in the suburban regions by 2014.

“We strongly urge consideration of this more comprehensive proposal when the legislative session resumes in January,” said Dahill. “Employers in New York desperately need tax relief and none more so than the health care institutions that protect the health and well being of our communities and provide more jobs than any other sector. It therefore stands to reason that the repeal of an onerous tax like the MTA tax should be expanded to include not-for-profit health care providers.”

The Suburban Hospital Alliance of New York State was formed in 2006 by the Northern Metropolitan Hospital Association and Nassau-Suffolk Hospital Council to ensure the specific concerns of suburban hospitals were heard by lawmakers in Albany and Washington. Suburban Alliance hospitals are a mix of academic medical centers, specialty hospitals, and community hospitals in the nine counties outside of New York City.



## The Quality Corner

*An update on quality reporting measures*

Mary Jane Milano, Director

**Sentinel Event Alert:** On December 14, 2011, the Joint Commission issued a new Sentinel Event Alert: Health care worker fatigue and patient safety. The alert urges greater attention to preventing fatigue among health care workers and suggests specific actions for health care organizations to mitigate the risks. An article in the Nov. 2007 issue of The Joint Commission Journal on Quality and Patient safety reported that nurses who work more than 12 hour shifts and residents working recurrent 24 hour shifts were involved in three times more fatigue related preventable adverse events. In addition health professionals who work long hours are at greater risk of injuring themselves on the job.

**Stage Two Meaningful Use:** The U.S. Department of Health and Human Services announced November 30, 2011 that they intend to delay the proposed start of Stage Two of meaningful use requirements for the Medicare and Medicaid electronic health record incentive program until federal fiscal year 2014 (October 1, 2013) for hospitals. Stage Two was previously scheduled to begin in Federal Fiscal Year 2013, October 1, 2012. Stage Two will require more strenuous requirements to complete. Proposed rules for Stage Two are expected in February 2012, leaving little time for hospitals to prepare for Stage Two requirements were they to become effective October 1, 2012, as originally planned. To meet Stage One meaningful use requirements, hospitals must implement 15 clinical quality measures. The clinical quality measures for Stage Two have yet to be finalized.

**Other Quality News:** The Joint Commission and the American Heart Association/American Stroke Association announced enhanced certification alliance. Beginning February 1, 2012, Certified Primary Care Stroke Centers and Heart Failure Programs can use designated seals from the Joint Commission and the American Heart Association/American Stroke Association to signify that they are providing the “next generation of stroke or heart failure care.” Primary Stroke Centers will be highlighted on the American Heart Association/American Stroke Association’s Stroke Care Near You website to assist the general public with locating stroke centers that meet criteria of the associations Get with the Guidelines® quality improvement program.

**Det Norske Veritas DNV:** is an independent foundation established initially in Norway in 1864 to inspect and evaluate Norwegian vessels. Since 2008, DNV has accredited hospitals using the National Integrated Accreditation for Health Care,

### 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  
 Westchester Medical Center  
 White Plains Hospital Center

NIAHO, standards platform developing in the U.S. and adopted by hospitals around the world. The standards integrate clinical and patient safety requirements with quality principles. DNV currently has accredited over 250 hospitals, including one in the NorMet region and a handful in Rochester. NIAHO integrates requirements based on the U.S. CMS Conditions of Participation with the internationally recognized ISO 9001 Standards. This helps organizations focus on effectiveness and efficiency, with improved clinical performance, financial outcomes, and operational processes.

**The Joint Commission and SGS Group**, beginning in 2012, will offer hospitals the option of pursuing both accreditation and certification to various ISO and industry best practices. SGS, a public company, is the world's leading verification, inspection, certification, and testing company focused on providing independent certification and quality assurance services. The Joint Commission accreditation decision and the SGS ISO certification decisions will be separate.

**New York State Partnership for Patients:** On December 15, 2011, the U.S. Department of Health and Human Services announced the joint Healthcare Association of New York State/Greater New York Hospital Association NYS Partnership for Patients (NYSPFP) was one of the 26 organizations nationally awarded a Hospital Engagement Network contract under the CMS Partnership for Patients initiative. The two-year contract, with an option for CMS to extend the work to a third year, will

drive hospital quality improvement programs to achieve reductions in hospital acquired infections by 40 percent and preventable readmissions by 20 percent. The NYSPFP Network will offer targeted strategies to build a sustainable quality improvement infrastructure; designated clinical advisors; training for teams and leaders to support quality focused organizational culture; dedicated strategically deployed project manager for each hospital participant; and sophisticated data analytics and measure tools

The NYSPFP Network is also working closely with the NYS Department of Health Commissioner Nirav Shah, MD, MPH, who has agreed to strongly consider using NYSPFP's measures and approaches as a method for meeting some of the new quality requirements of the NYS Hospital Quality Initiative and Medicaid Redesign Team. **Hospitals need to inform HANYS and GNYHA by Monday, January 9, 2012 whether they plan to commit to NYSPFP. For more information, contact Kathleen Ciccone at HANYS (kciccone@hanys.org) or Lorraine Ryan at GNYHA (ryan@gnyha.org).**

**The NorMet Patient Safety Institute** received approval from AHRQ for three years of continued listing, as a certified Patient Safety Organization. This means that the

Institute meets the federal regulatory requirements regarding purpose, activities, and security around the Institute so that federal designation and protections continue for the 22 member hospitals that are contracted to engage in patient safety and quality improvement work.

#### News Briefs . . .

**Medicaid Redesign Team . . .** approved the final recommendations from the remaining four MRT Phase 2 Work Groups: Basic Benefit Review; Workforce Flexibility/Change of Scope of Practice; Affordable Housing; Payment Reform and Quality Measurement. The Medical Malpractice Work Group was unable to reach consensus on recommendations and did not submit a report.

**Medicaid Global Spending Cap . . .** October 2011 Report show spending at 1.3 percent (\$124.7 million) below the global expenditure cap expenditure projections for April through October 2011.

**NorMet Staff Spreads Holiday Cheer:** In lieu of staff gifts, the NorMet staff collected over \$350 worth of food, baby supplies, and household cleaning items for the Hudson Valley Food Bank, the organization that supplies most of the soup kitchens in the region with food, as well as providing needy families with sustenance.

***Happy Holidays and Wishes for a Healthy and Prosperous New Year to All Our Members!!! The NorMet Staff***



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