

Spring 2019



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Making a Difference: Woodlawn Hospital Donates \$10,000 for Bus Cameras to Three School Corporations with Fulton County Students to Maintain the Safety of Children in Our Community:

Rochester is situated just southwest of Tippecanoe Valley Schools, a district where three children were killed and another child was seriously injured in a bus stop accident in October, 2018.

Woodlawn Hospital CEO John Alley prepared the emergency room staff that dark, early morning for the tragedy, knowing only children had been hit at a bus stop. Tragically, no one came through the doors. After receiving a notification of the deaths and the other child being air lifted, Mr. Alley decided we could not stand by and do nothing to support the safety of our county's children. He approached the Board of Trustees, and they agreed to provide our three major Fulton County school corporations with donations of \$10,000 each to purchase stop-arm cameras for buses in each school district.

Beginning with Rochester, the presentation was made at the board meeting. Rochester already had cameras for most of its buses, and Woodlawn's donation enabled the full fleet to be armed with cameras to put more teeth in motorists passing stopped buses – over 3,000 daily in Indiana alone. To view the information, click on the link: <https://www.wndu.com/content/news/Rochester-Community-Schools-gets-hefty-bus-stop-arm-camera-donation-504401521.html>



The next donation went to our southern border, our Caston School Corporation.

Woodlawn gives \$10,000 to Caston School Board for bus cameras to promote student safety:

Photo provided by The Sentinel/Tyra Bahney

DONATION Woodlawn Hospital CEO John Alley presents Caston School Board with a check for \$10,000 towards purchasing stop arm cameras for buses during the

school board meeting at Caston's administration building Wednesday, February 6. From left – Bruce Cress, Woodlawn Hospital CEO John Alley, Caston Superintendent Cindy Douglass, Chad Boldry, Christie Rans, Jeff Smith and Beth Howard

The third and final donation went to the Tippecanoe Valley School Corporation after adequate time was given to mourn the loss of these children. Click on the link to view the final presentation from WNDU's "Never Again" story regarding bus fatalities. <https://www.wndu.com/content/news/Never-Again-Tippecanoe-Valley-receives-donation-for-stop-arm-cameras-505905491.html>



Woodlawn Hospital CEO John Alley, below left, presents Tippecanoe Valley School Board president Adam Heckaman with \$10,000 for school bus stop arm cameras. Photo provided by The Sentinel/Tyra Bahney

The CDC's Office on Smoking and Health released the following article in the journal, *Preventing Chronic Disease (PCD)*.

Exposure to Secondhand Smoke and Secondhand E-Cigarette Aerosol Among Middle and High School Students

Over 14.3 million youth were exposed to secondhand emissions from tobacco products in public places in 2017.

The study assessed self-reported exposure to secondhand smoke and secondhand aerosol from e-cigarettes in indoor or outdoor public places among US students. Authors used data from the 2015 and 2017 National Youth Tobacco Survey, a school-based survey of US students in grades 6 through 12. Past 30-day exposures were assessed. From 2015 to 2017, no change in exposure to secondhand emissions from combustible or electronic tobacco products in indoor or outdoor public places was observed among US youth. In 2017, more than half (55.1%, 14.3 million) of US middle and high school students reported exposure to secondhand tobacco product emissions in indoor or outdoor public places. Fully enforced, comprehensive, smoke-free policies for indoor environments that include both combustible and electronic tobacco products can reduce the social acceptability of tobacco product use and protect bystanders from all tobacco product emissions.

The article's online version is available at https://www.cdc.gov/pcd/issues/2019/18_0531.htm.

For further information about the Indiana Tobacco Quitline, please contact Tina Elliott at telliott@indianarha.org.

"8 Hospitals Closed So Far This Year – Here's Why"

By Ayla Ellison

April 15, 2019 via *Becker's Hospital Review*

<https://www.beckershospitalreview.com/finance/8-hospitals-closed-so-far-this-year-here-s-why.html>

A brief summary of financial crises (and other factors) that have led to eight hospital closures around the country, though it is worth noting that nearly all of them are concentrated in the South and the Upper Appalachian region.

Parkview LaGrange Hospital Breaks Ground for Expanded Horse and Buggy Parking

Parkview LaGrange Hospital broke ground April 17, 2019 on a renovation and expansion of the facility's horse and buggy parking.



The work is in response to a growing need for overnight parking for members of the Plain Church community whose loved one may be hospitalized for an extended stay. When completed, the renovation of the existing buggy barn will provide long-term parking for up to five horses, with adjacent external space for the buggies. The wooden stalls will be replaced with metal and provide updated feeder baskets, hay storage racks and access to fresh water.



Jordi Disler, president, Parkview LaGrange Hospital (left), and Rose Fritzing, director, Parkview LaGrange Foundation, check out the site of the new short-term parking section for horses and buggies.

Generous support from the Amish community will provide a new, short-term parking section with covered space for six horses. The back wall of the new section will be made of brick and provide shelter from the prevailing weather.

“With the help of our kind donors, this will provide us with a tremendous opportunity to help our community members through the renovation and expansion of the buggy barn area. Their generous gifts will help community members for years to come,” said Rose Fritzing, director, Parkview LaGrange Foundation. “We are so appreciative of this unique opportunity to strengthen our long partnership with the Plain Church community.”

“5 Notes About CMS' Interoperability Program in 2019”

By Jackie Drees

March 27, 2019 via *Becker's Health IT and CIO Report*

<https://www.beckershospitalreview.com/ehrs/cms-releases-final-rule-for-interoperability-program-in-2019.html>

In its latest Inpatient Prospective Payment System and Long-Term Care Hospital Prospective Payment System rule updates, CMS introduced a new performance-based scoring method for eligible hospitals and critical access hospitals under its promoting [interoperability program](#).

IU Health Extends Virtual Addiction Recovery and Virtual Behavioral Health Support to Jay and Blackford Hospitals

Indiana University Health will soon begin providing virtual addiction recovery coaching and virtual behavioral health support to IU Health Jay and IU Health Blackford Hospitals, with an expected go-live date of Monday, April 1, 2019.

The new service provides around-the-clock access to peer recovery coaches and advanced practice nursing and psychiatry for emergency department patients needing help with substance use disorder, other addiction related concerns, or psychiatric evaluation. The virtual service aids the smaller hospitals within IU Health, such as IU Health Jay and IU Health Blackford, enabling access to behavioral health expertise found in many larger urban hospitals.



“Our team is excited to see this innovative approach to helping with addiction and mental health issues we are facing in our communities,” said Dave Hyatt, President of IU Health Jay and IU Health Blackford. “Having around the clock access to experts when help is needed most during critical moments is an important key.”

New Care Model

Use of virtual recovery coaches began last year as part a response by IU Health to a growing need for behavioral health services, including opioid addiction, across Indiana.

“Peer recovery coaches provide a lifeline of hope to those suffering with Substance Use Disorder (SUD),” said Stephanie Berry, director of behavioral health at IU Health.

“By offering access to recovery coaching services virtually, hope can be available 24-7 for patients with SUD or other behavioral health issues, at our IU Health hospitals.”

Patients will be assessed when they come into an IU Health emergency department as someone at high risk for, or struggling with, a substance use disorder or in need of a psych evaluation. ED personnel will connect patients with a recovery coach, advance practice nurse or psychiatrist who will then interact live via video.

For addiction recovery, the use of recovery coaches – all of whom are IU Health employees in active recovery from addiction – has proven effective in behavioral health treatment. The coaches aren’t meant to take the place of Alcoholics Anonymous (AA) sponsors, counselors or accountability partners, but serve as a stepping stone by providing patients with resources to move them toward recovery.

“I have experienced life as a person in active addiction and now am living in long-term recovery,” said Sarah Stillerman, a recovery coach working in the new hub. “It’s important that our patients know that. We’re here to remove barriers, provide hope, and help them find a pathway to recovery.”

Expansion of Services

Support does not end when the patient leaves the hospital. Recovery coaches follow up with individuals within 48 hours of initial contact and continue to provide additional resources as needed.

The launch also includes 24/7 access to social workers and therapists so that even when they are not admitted, they’ll have access to a safety plan, acute treatment and a follow-up the next day to connect patients with behavioral health services in their area.

IU Health is continuing to expand virtual coaching services across its 16-hospital system. This initiative is part of IU Health’s strategic plan and aims to impact the overall health of Hoosiers.

Rush Memorial News

A great event for the community. Rush Memorial Hospital invites preschoolers to their annual Teddy Bear Clinic. Over 140 preschoolers, parents, grandparents and teachers learned a lot about the hospital.



Dr. Jonathon LeSar, Podiatric Surgeon, joined Rush Memorial Hospital at the end of last year. What a great addition to the Med Staff!



Hospital Compare Results for CAHs, 2017

The Flex Monitoring Team has released reports of Critical Access Hospital (CAH) performance and reporting rates on selected Hospital Compare measures, utilizing data from 2017. Links to state-specific reports and a national summary report are provided below.

The Hospital Compare data in this report include several measures that are also measures for the Medicare Beneficiary Quality Improvement Project (MBQIP). Although the majority of CAHs report data on these measures to both Hospital Compare and MBQIP, the data in this report may differ from MBQIP reports because some CAHs only report data to one of these programs.

National Report:

<http://www.flexmonitoring.org/wp-content/uploads/2019/04/DSR-28-National-Hospital-Compare-2017-data.pdf>

Indiana State Specific Report:

<http://www.flexmonitoring.org/wp-content/uploads/2019/03/Indiana-Hospital-Compare-Report-2017-data.pdf>

Recap on State Legislative Tobacco Funding

As many of you know, the Statehouse Legislative Session ended; and below is a recap from Bryan Hannon (Tobacco Free Indiana Chairman). On behalf of all Tobacco Prevention and Cessation coordinators, thank you, Bryan and the entire TFI committee, for advocating and fighting for our causes. We may have lost a small battle but we will not lose the war.

The 2019 legislative session concluded without any action on priority tobacco issues that were supported by Tobacco Free Indiana. The coalition will regroup this summer and consider a refreshed approach to various tobacco issues in the year ahead.

CIGARETTE TAX

Without significant movement earlier in session, the \$2 cigarette tax proposal had become a longshot effort a few weeks ago. Nonetheless, the Raise it for Health coalition continued advocacy efforts on the issue in hopes that a dim revenue forecast would create a new opening for a cigarette tax increase. However, the revenue forecast that lawmakers received last week did not project a steep enough shortfall in revenue to prompt any renewed consideration of a tax increase.

E-CIGARETTE TAX

The Senate Appropriations Committee passed a 20% retail tax on e-cigarettes (liquids & devices) a few weeks ago that was supported by public health groups. That proposal was ultimately killed on the senate floor and the issue was sent to conference committee for further negotiation. The conference committee initially produced a proposal to tax e-cigarette liquids at 10% of the retail price, but eventually that proposal shrank to 5% of the retail price (liquids only).

Throughout the process, the tax had been whittled to such an insignificant amount that Tobacco Free Indiana and many legislators simply chose to oppose the bill rather than enact an ineffective tax that would do nothing to curb youth utilization. Working with a number of allies and friendly lawmakers, we were able to stop the 5% tax from passing.

TOBACCO PREVENTION FUNDING

Funding for the state's Tobacco Prevention & Cessation program was held steady in the final version of the budget at \$7.5 million.