



FutureThink News

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FutureThink Institute Launches Programs, Updates Look

In August, the OHA Board of Trustees approved the creation of the FutureThink Institute to continue the work begun by FutureThink in 2002 toward creating long-term solutions for Ohio's health care system. The FutureThink Institute takes a multidimensional approach to designing better ways to deliver care and changing the demand for health care professionals in order to achieve better results for our communities.

Since its inception, the Institute has worked with the Organization for Nurse Executives and several Ohio hospitals to develop the FutureThink vision, and it is now ready to launch a three-part program. The Institute will be made up of an Innovation Collaborative, a Transformational Leadership Academy, and a Research and Evaluation team. The Academy will provide health care leaders with transformational tools through discussions on risk-taking and innovation, by developing a strategic vision and through workshops on communication effectiveness, and is scheduled to premiere this fall.

Coinciding with the Board's approval, the Institute is in the process of updating its image through a newly renovated Web site, the release of a quarterly newsletter, and the debut of its new logo, reflecting the Institute's goal of "transforming the future of health care."

For more information on the FutureThink Institute, visit www.futurethink.org.

OHA Workforce Committee

The OHA's Workforce Committee met on Nov. 3 for the purpose of providing strategic direction for OHA's policy and work force advocacy. Two key issues discussed were Ohio's Jobs Cabinet and nurse staffing.

Ohio's Job Cabinet: Governor Taft has convened 12 state agency directors to formulate policy job development for Ohioans. Healthcare, and the hospital industry in particular, have become a major focus for the Jobs Cabinet as well as the Governor's Workforce Policy Board. Administrative staff representing both the cabinet (Scott Layson) and the board (Mary Benedict) provided an update on priorities of the Jobs Cabinet and requested feedback on what hospitals are doing to impact the pipeline for nurses prepared at various levels of education (including RN, LPN, MSN, ARNP, etc.). The Healthcare Jobs Cabinet drafted recommendations and strategies that included:

- Increase the capacity of schools to train
- Increase graduation and retention rates
- Retain nurse graduates in Ohio.

They also asked if there was a way to ameliorate sign-on bonuses and augment the salaries of nursing faculty. OHA committee members provided great information about the many activities hospitals have provided to schools for maximizing the pipeline including augmenting nursing faculty salaries, freeing nursing staff from hospital responsibilities so they could teach, providing incumbent worker training for their staff to become RNs and LPNs, and many other strategies. Furthermore, it was noted that hospitals provide unfunded clinical education sites for nursing schools and clinical preceptors for students. Hospital support in providing these services to nursing schools without governmental or outside funding was contrasted with the training of physicians which is supported by GME funding. OHA Committee members requested assistance in finding additional funding for continued support to attract healthcare providers. The state staff indicated that the draft recommendations and strategies from the Healthcare Jobs Cabinet would be presented to the Governor's Workforce Policy Board in December and more information would be available in January 2006.

Nurse Staffing: With a focus on the retention of nurses engaged in direct patient care as a key element to the looming nurse shortage, Jean Scholz and Reed Fraley are leading efforts of Ohio Nurses Association, the Ohio Organization of Nurse Executives and the Ohio Hospital Association in a series of

unprecedented meetings to discuss how the three organizations might work collaboratively to address the concerns expressed by members of each organization. Together they developed a statement that reflects the organizations' shared vision regarding the preferred future for professional nursing in Ohio:

Statement of Professional Nursing in 2015

Professional nurses are self-directed, accountable, and control their environment.

Nurses are professionally empowered to influence the delivery of high quality care that promotes positive patient outcomes through nursing leadership, coordination, and collaboration. Nurses are adequate in number, diverse, highly educated, and valued as clinical leaders across the continuum. The profession of nursing is respected and valued.

The practice environment is attractive, supportive of work life balance, flexible, and incorporates state-of-the-art technology. Compensation and benefits are reflective of nurses' contributions to the delivery of care. September 30, 2005

The statement will be used by participants from the organizations to collaboratively guide the development of action plans and strategies to achieve the results all believe are essential if the health care system of the future is to meet the needs and expectations of consumers and providers alike.

Pharmacy Board Regulations and Electronic Health Records

The Ohio State Board of Pharmacy in early November approved revisions to rules for institutional pharmacies, including greater flexibility in using electronic record keeping systems. Over the past year, OHA lead efforts to revise the rules to reduce regulatory burdens that were slowing and negatively affecting hospitals' ability to implement electronic systems for recording drug administration, prescribing and dispensing.

The Pharmacy Board worked with a team of hospital clinical administrators, recommended by OHA, to develop the revisions which will alleviate problems such as overly-rigorous identification requirements for electronically recording the prescription, administration and dispensing of drugs. Jean Scholz, OHA's director of health policy, testified to the board, giving OHA's support for the rules. The revisions now go to the Joint Committee on Agency Rule Review (JCARR) Dec. 5 and are planned to take effect Jan. 1.

To help hospitals implement the revised rules and maximize the new flexibility in meeting the requirements for positive identification, while reaping the patient safety benefits associated with electronic drug record keeping systems, OHA staff are leading the development of a February conference targeted for hospital pharmacy and information technology associates, compliance officers and pharmacy board staff and members to work together on making the implementation of the rules run smoothly. The session will be co-sponsored by the Ohio Board of Pharmacy, the Ohio Society of Health System Pharmacists and OHA.

Hospitals Tackle Rocky Road to Paperless Communication

In Ohio and across the country, Electronic Health Records (EHR) systems continue gaining positive momentum, and the speed and efficiency of paperless communication in hospitals can save lives, and potentially free up time for health care workers. In 2004, President George W. Bush's called for interoperable EHR—personal health records that patients, physicians and other health care providers access via the Internet from any location—to be adopted nationwide within 10 years. In June, 18 Ohio hospitals gathered in Columbus to begin an ongoing dialogue about technology and look toward the future of EHR in Ohio. The Institute of Medicine stamped its approval on EHRs in 2004, identifying them as a major tool in preventing medical errors. Efficient and accessible information also translates into more time caregivers can spend providing direct care. An Agency for Healthcare Research and Quality study showed computerized information could decrease the time nurses spend on documentation by 52 minutes during an eight-hour shift.

Agreeing on the ability of these systems to improve patient care, Ohio's hospitals will work to confront a number of barriers to the adoption of EHR systems, including lack of finances, implementation, personnel shortage, culture change, and no common model.

To read the complete August *Healthbeat* article, visit www.ohanet.org/healthbeat/2005/0805.htm.

The Next Generation of Technology

The next evolution in cell phone technology won't be about downloading music, video or even advertising. The annoying cell phone is going to do something unquestionably good; save lives via

medical monitoring.

A San Diego-based medical technology firm that has wired more than 35,000 cardiac patients with a cardiac monitoring service that transmits data using the *Sprint* wireless network for at-risk cardiac patients.

The PDA device that is being used by CardioNet patients sends and receives messages, it is not a cell phone yet. By early 2006, privately held CardioNet plans to reintroduce the monitoring device with cell phone capabilities. It won't be a typical cell phone, though, and will operate on a restricted basis, taking calls from a patient's physician, CardioNet's call center or a 911 dispatcher. CardioNet developed a device in conjunction with Qualcomm, the \$6 billion maker of digital wireless products, which itself is spending millions on research developing its own line of health phones. The product has the potential of helping consumers maintain their health and reduce expensive trips to the hospital. *AdAge.com, Oct. 3, 2005*

Hospitals are Embracing Information Technology

While 9 out of 10 hospitals are using or considering adopting health information technology (IT) for clinical uses, most hospitals, especially small or rural hospitals, cite cost as a considerable barrier to broader implementation, according to a study released from the American Hospital Association. The result from more than 900 hospitals show that IT use falls along a broad spectrum, ranging from hospitals just getting started to hospitals using sophisticated IT systems. While most are in the beginning stages, the survey shows hospitals are making investments in IT, in large part, to make gains in safety and quality of patient care. It also suggests that the use of health IT in caring for patients is evolving as hospitals adopt specific technologies based on their needs and populations. Factors such as hospitals size and location are related to the level of use, as is a hospital's financial status. *The American Organization of Nurse Executives E News Update Oct. 14, 2005*

Employment in Hospitals Climbs in September

Employment at the nation's hospitals rose 0.24 percent in September to a seasonally adjusted 4,403,600 people, the Bureau of Labor Statistics reported. That's 10,400 more than in August and 97,600 more than a year ago. Those numbers without the seasonal adjustment show hospitals employed 4,400,800 people in September, unchanged from August and 97,700 more than a year ago. The nation's overall unemployment rate rose by two-tenths of a percentage point in September to 5.1 percent. *AHA NewsNow*

Senate Panel OKs Visas for Health Care Workers

The Senate Judiciary Committee today adopted AHA-backed budget reconciliation legislation that would immediately increase the number of visas available to foreign nurses and other health care professionals in short supply in the U.S. The bill would bring back 90,000 congressionally authorized but previously unused employment based EB-3 visas, for which nurses and other health care professionals qualify. Those visas would be in addition to the 50,000 reclaimed visas for foreign nurses and physical therapists that Congress approved in May. The measure would exempt family members of visa holders from the numerical cap on visas, in effect, in effect more than doubling the total number of available EB-3 visas for skilled professionals. It also brings back 30,000 previously unused H-1B temporary visas, available to physicians, physical and occupational therapists and certain other health care professionals other than nurses. The Judiciary committee included the visa measure in legislation that achieves \$300 million in five-year budget savings – the panel's portion of the overall \$35 billion in savings from federal programs required under the fiscal year 2006 congressional budget resolution. *AHA News Now*

Health Care Jobs Outpace Other Fields

In northwest Ohio health-care jobs are among the few industry sects that have more employees than five years ago, but area counties often lagged in statewide growth.

In the new U.S. Census Bureau figures, Allen and Hancock counties added more health-care jobs than Lucas County between 1998-2003. New Census figures show that 16 northwest Ohio Counties and three southeast Michigan counties, health-care jobs grew eight percent from 1998-2003. Lucas County had an increase of two percent, Allen County had growth of 12 percent and Hancock County had growth of 28 percent. The statewide growth was 12 percent.

Growth in health care jobs in Hancock County the area's second largest increase during the five-year period is because of the commitment by the county's largest medical facility, Blanchard Valley Regional Health Center, according to the county economic development agency. *Toledo Blade; Sept 22, 2005*

Thousands of Emergency Physicians and Nurses Rally

More than 3,500 emergency physicians and nurses went to the steps of the U.S. Capitol to urge Congress to save emergency care and to make sure their patients continue to have access to emergency medical services. They also lauded the Access to Emergency Medical Services Act of 2005 (HR 3875), introduced by Representatives Bart Gordon (D-TN) and Pete Sessions (R-TX) and urged Congress to pass it quickly. Emergency Nurses Association (ENA) feel they are moving to protect the rights of patients and colleagues by urging legislators to partner with them to secure the future of emergency care as an essential public service. A report showed that the number of emergency department visits increased 26 percent in the past decade while the number of emergency departments decreased by 14 percent, resulting in dramatic increase in patient volumes and waiting times. The majority of the nation's hospital emergency departments reported that they are operating at or over critical capacity. *The American Organization of Nurse Executives E News Update*

The FutureThink Institute is an initiative of the Ohio Hospital Association, working toward creating long-term solutions for Ohio's health care system. The FutureThink Institute takes a multidimensional approach to designing better ways to deliver care and changing the demand for health care professionals in order to achieve better results for our communities. Learn more about the FutureThink Institute, and view the FutureThink News archives at www.futurethink.org.

Editor's note: Please share news or comments with Jean Scholz, jeans@ohanet.org, or call 614.221.7614. To be removed from this mailing list, please reply to this e-mail with "Unsubscribe" in the subject line.