

Happenings

Central Maine Medical Center Prepares for Baby Friendly Hospital Initiative on-site Assessment - September 26 & 27

What does a “Baby Friendly Hospital” mean?

The Baby-Friendly Hospital Initiative (BFHI) is a global program sponsored by the World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF) to encourage and recognize hospitals and birthing centers that offer an optimal level of care for lactation. The BFHI assists hospitals in giving breastfeeding mothers the information, confidence, and skills needed to successfully initiate and continue breastfeeding their babies and gives special recognition to hospitals who have received the designation.

We believe that all hospitals and health centers should provide a high standard of care for mothers and babies by following the Ten Steps to Successful Breastfeeding. CMMC has been adopting these best practice standards in support of breastfeeding mothers as part of the Certificate of Intent (displayed on M3 near Nurses Station) to become designated as a Baby Friendly Hospital.

World Breastfeeding Week which is celebrated each year from August 1st to 7th is sponsored by the World Alliance for Breastfeeding Action(WABA), WHO, and UNICEF. They have launched the “Global Strategy for Infant and Young Child Feeding” which ensures that all health and relevant sectors will work to promote, protect, and support exclusive breastfeeding for 6 months and

continue breastfeeding up to two years of age or beyond, while providing women access to the support that they require—in the family, the community, and the workplace—to achieve this goal. (Note the displays in each lobby area of the hospital during the first week of August.)

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Bridgton Hospital ‘Heart Walk 2005’ Breakfast for Team Leaders

On Tuesday, July 26, Bridgton Hospital hosted a Central and Western Maine ‘Heart Walk 2005’ kick-off breakfast for team leaders in the clinic of the hospital.

American Heart Association representatives Katie Rooks and Roberta Zimmerman led the presentation, organized by Pam Smith, Director of Development and Community Relations, for volunteer team leaders. John Carlson, President/CEO welcomed the team leaders and explained that the Central Maine Medical Family was the Presenting Sponsor for 2005 and the importance of the Heart Walk for our community members. John Cavanaugh, Director of Cardiopulmonary Services gave his personal story of dealing with heart disease and the important role the AHA has played in his life.



John Carlson, President/CEO of Bridgton Hospital (3rd from right) and the Team Leaders for the Heart Walk 2005.



For Your Benefit

Starting and Stopping your Insurance Coverage

There are many reasons why people want to make changes to their insurance coverage. Among these reasons are

Being hired at CMH

A change in marital status

The birth of a child

A child leaving home

Rate increases

A spouse changing jobs

As you are aware, we have many different insurance plans. Benefits-eligible new hires have access to all plans within 30 days of hire. Virtually all plans have “open enrollments” that allow changes. Additionally, many of the insurance plans may change due to Qualifying Events. Below is a summary of Central Maine Healthcare’s offerings:

Medical, Dental, Life and Long Term Disability coverage: Open enrollment is for January 1st of each year (paperwork done in November). Qualifying Events do allow you to make mid-year changes.

Spending Accounts: Open Enrollment is for January 1st of each year and Qualifying Events allow mid-year changes. Increases to spending accounts apply only to charges incurred AFTER the Qualifying Event.

Cancellation of spending accounts, including through termination of employment, changes the December 31st date to “use-it-or-lose-it”. The new date for using the account is the date of the qualifying event/termination.

CT/ET Cash outs: Must be indicated on the Re-enrollment form. Cash outs can not be changed after January 1st of each year.

Voluntary benefits for Home/Auto: You may enroll or cancel your coverage at any time. Also, if someone terminates employment, the insurance is billed to the home address.

Voluntary benefits for Short Term Disability and Vision: There are two enrollments, one to be effective June 1st and the other December 1st of each year. You may not enroll at other times. Cancellation of coverage can occur only for May 31st of each year.

If you have any questions, please contact your Human Resources representative.

... *Baby Friendly continued*

What is the purpose of a hospital achieving the Baby Friendly Designation?

The impact of implementing the BFHI from around the world shows positive outcomes of increasing the exclusive breastfeeding rate among infants and children. This has shown to be true here at CMMC:

The average breastfeeding initiation rate (a mother begins to breastfeeding her baby from the time of birth until discharge) during the fiscal years of 2002 – 2005 have shown a steady increase from 64%, 67%, 65%, 66%, 70%, 73.5% respectively.

The exclusive breastfeeding rate (a mother exclusively breastfeeds her baby during the hospital stay) has increased from 47% during June 2004 to 71% during November 2004.

The Baby-friendly Hospital Initiative (1991), the International Code of Marketing of Breast-milk Substitutes (1981) and the Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding (1990) were part of the global strategy for infant nutrition developed by the World Alliance for Breastfeeding Action. Part of the goal is to have comprehensive national policies on infant and young child feeding, including guidelines on ensuring appropriate feeding of infants and young children in exceptionally difficult circumstances, and the need to ensure that all health services protect, promote and support exclusive breastfeeding and timely and adequate complementary feeding with continued breastfeeding.

What are the advantages to the patient and community?

Breastfeeding is an unequalled way of providing ideal food for the healthy growth and development of infants; it is also an integral part of the reproductive process with important implications for the health of mothers. As a global public health recommendation, infants should be exclusively breastfed for the first six months of life to achieve optimal growth, development and health. Thereafter, to meet their evolving nutritional requirements, infants should receive nutritionally adequate and safe complementary foods while breastfeeding continues for up to two years of age or beyond. Exclusive breastfeeding from birth is possible except for a few medical conditions, and unrestricted exclusive breastfeeding results in ample milk production.

In the United States, these benefits could translate into millions of dollars of savings to our health care system through decreased hospitalizations and pediatric clinic visits. Some of the illnesses which are lower in incidence or severity in breastfed babies include:

Diarrhea • Respiratory Tract Infections • Otitis Media • Pneumonia • Urinary Infections • Necrotizing Enterocolitis • Invasive bacterial Infections



Heart Health Minute

Exercise can increase your HDL cholesterol and decrease your LDL cholesterol (which is good). In addition, it helps you lose weight, lower your blood pressure and relieve stress. You don't have to join a gym. An activity such as walking, when you do it routinely, will make a big difference. Try it..

HIPAA Question of the Week

CMH HIPAA Hotline Number: 795-2906

Q: Do the HIPAA Privacy Rule's provisions permitting certain incidental uses and disclosures apply only to treatment situations or discussions among health care providers?

A: No. The provisions apply universally to incidental uses and disclosures that result from any use or disclosure permitted under the Privacy Rule, and not just to incidental uses and disclosures resulting from treatment communications, or only to communications among health care providers or other medical staff. For example:

- A provider may instruct an administrative staff member to bill a patient for a particular procedure, and may be overheard by one or more persons in the waiting room.
- A health plan employee discussing a patient's health care claim on the phone may be overheard by another employee who is not authorized to handle patient information.

If the provider and the health plan employee made reasonable efforts to avoid being overheard and reasonably limited the information shared, an incidental use or disclosure resulting from such conversations would be permissible under the Rule.

Q: Are covered entities required to document incidental disclosures permitted by the HIPAA Privacy Rule, in an accounting of disclosures provided to an individual?

A: No. The Privacy Rule includes a specific exception from the accounting standard for incidental disclosures permitted by the Rule. See 45 CFR 164.528(a)(1).

Bricks and mortar at last!



Masons began setting brick for the exterior of the expanded RH Emergency Department the first week of August. Metal workers continue to add trim pieces to the structure above the brick layers. Next month the Emergency Department will move into the space reserved for the expanded Day Surgery Department, while workers renovate the current – and future – ED. “September will see the busiest and most exciting parts of the project,” promises Doug West, Facilities Manager.

We Honor Our Family Members



Flowers for Rumford Hospital patients

Tracey Milledge, who's been Rumford Hospital's Environmental Services Supervisor for only a couple of months, has already been a big hit with patients. Recently, she dreamed up a clever way to honor each patient with flowers. Using clips that normally hold brooms, she fastens a small bud vase filled with daisies to each patient's bulletin board. The charming nosegays brighten the rooms far more than even Tracey imagined given their diminutive size. Great idea Tracey.

Contributors to this issue

Gloria Ouellette, Jim Gaylord, Donna Jordan, Pam Smith, Jerry Marsteller, Jane Bubar, Susan Bowie, Susan Smith, and Randall Dustin

WELCOME CMMC Newcomers

Lewiston campus

Angelyn Addams — Phlebotomist, Pathology
Tari Advani — MD, Emergency Department
Michael Belanger — Security Officer, Security
Laura Boivin — Secretary, Medical Imaging
Michael Boucher — Coordinator Education, Single Stay Unit
Jennifer Cassidy — RN, Pediatrics
Linda Cote — Sec/Registrar Team, Breast Care Center
Kimberly Couture — Clinical Assistant, Central Maine Internal Medicine
Stacy Cullins — Care Associate, Cardiopulmonary
Scott Cyr — MD, Hospitalist
Veronica Duguay — Care Associate, Central Maine Rehab
David Engdahl — HVAC Controls Specialist, Plant Operations
Carl Germann — MD, Emergency Department
Jo Beth Hager-Perry — RN, Single Stay Unit
David Haugland — Speech Therapist, Speech & Hearing Center
Debra Hockensmith — Patient Services Rep, Central Maine Family Practice
Elise Hoy — LPN, Bolster H
Patrick Jensen — Periop Business Coord, Operating Room
Bruce Kenney — MD, Family Medicine Residency Program
Shannon Kenney — MD, Lisbon Family Practice
Kathleen Langelier — Case Manager, Infectious Disease Assoc.
Tina Lavoie — Distribution Specialist, Material Services
Angela Leclerc — Physician Assistant, Trauma
Patty Leslie — Radiologic Technologist, Medical Imaging
Monique Lucarelli — MD, Hospitalist
Teresita Maguire — MD, Infectious Disease Assoc.
Jennifer Methot — Patient Services Rep, Central Maine Pediatrics
Melissa Morgan — RN, Central Maine Family Practice
Amanda Murphy — CST, Single Stay Unit
William Pray — Envir. Serv. Aide, Environmental Services
Amelia Sandoval — Secretary, Medical Imaging
Thai Sinkinson — Care Associate, Central Staffing
Karen Twidwell — Patient Services Rep, Outpatient Rehab Services
Ashley Warren — Patient Services Rep, Cardiology

Rumford campus

Vanessa Adams — RN, Maternity
Casey Black — Envir. Serv. Aide, Environmental Services
Rita Leslie — Patient Services Rep, Admitting/Central Reg.
Janet Richards — RN, Med/Surg
Auxiliadora Smith — Linen Serv Aide, Linen Services

Bridgton campus

George Gardner — Phlebotomist, Pathology
Carolyn Laberta — Patient Services Rep, Internal medicine
Sarah Manchester — CNA, Med/Surg
Joenie Remsing — Med Lab Technician, Pathology
Richard Silva — Envir. Serv. Aide, Environmental services
Craig Smith — MD, Naples Family Practice
Jennifer Smith — MD Naples Family Practice

What does Central Maine Medical Center do to accomplish the designation?

CMMC has made the commitment to improve breastfeeding policies, training and practices by receiving the Certificate of Intent (displayed on M3 Near the Nurses Station) in the fall of 2002 to become designated as a Baby Friendly Hospital and initiating the Ten Steps to Successful Breastfeeding (displayed in each patient room on M3, and each of 4 doctor's office). The Ten Steps ensure that hospital routines, procedures and policies remain fully supportive of the successful initiation and establishment of breastfeeding.

The intent is for mothers to receive access to skilled support to help them initiate and sustain appropriate feeding practices, and to prevent difficulties and overcome them when they occur. Knowledgeable healthcare providers and nursing staff are available to provide this support, which should be a routine part, not only of regular prenatal, delivery and post-natal care but also of services provided for the well baby and sick child by:

Increasing access to antenatal care and education about breastfeeding, to delivery practices which support breastfeeding and to follow-up care which helps to ensure continued breastfeeding;

Promoting good nutrition for pregnant and lactating women, creating an environment that will enable mothers, families and other caregivers in all circumstances to make – and implement – informed choices about optimal feeding practices for infants and young children.

Training in how to provide skilled support by Physicians, Nurse Midwives and Nursing staff for exclusive and continued breastfeeding, and appropriate complementary feeding in all neonatal, pediatric, reproductive health, nutritional and community health services;

Promoting achievement and maintenance of “baby-friendly” status by obstetrical units in hospitals, consistent with the “Ten steps to successful breastfeeding”. The principle of not accepting free or low-cost supplies of breast-milk substitutes, feeding bottles and teats (CMMC has been paying for these supplies since July 2004).

Encouraging the establishment and recognition of community support groups and referring mothers to them.

References: www.babyfriendly.uk.org

www.waba.org

www.babyfriendlyusa.org

Your input is always welcome

Please remember that the *Employee Rounds* is for you. Submit suggestions for future editions to Tom Reichard at the Employee Center, or email them to reichart@cmhc.org