



Lori A. Shibinette
Commissioner

Heather M. Moquin
Chief Executive Officer

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
NEW HAMPSHIRE HOSPITAL

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February 28, 2020

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, New Hampshire Hospital to make a one-time **retroactive** payment to The Schwartz Center for Compassionate Healthcare, 100 Cambridge Street, Suite 2100, Boston, MA 02114, vendor number 273699 for continued participation in The Schwartz Center for Compassionate Healthcare in the amount of \$2,700.00, effective January 1, 2020 upon Governor and Council approval through December 31, 2020. Source of Funds: 83% General Funds and 17% Other.

Funds are available in the following account:

05-95-94-940010-8400 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: NEW HAMPSHIRE HOSPITAL, NEW HAMPSHIRE HOSPITAL, ADMINISTRATION

Fiscal Year	Class/Object	Class Title	Job Number	Amount
SFY 2021	026-500251	Other Medical Services	94012800	\$2,700.00

EXPLANATION

This request is **retroactive** because the invoice was not prepared and sent by The Schwartz Center until after the renewal date. The purpose of this request is to fund New Hampshire Hospital's continued participation in, not-for-profit, Schwartz Center for Compassionate Healthcare in order to continue the Schwartz Rounds collaborations. The Schwartz Rounds is a structured forum where all staff come together regularly to discuss the emotional and social aspects of working in healthcare. The membership will cover the time period of January 1, 2020 through December 31, 2021. The essence of Rounds is to understand the challenges and rewards that are intrinsic to providing care, not to solve problems or to focus on the clinical aspects of patient care.

Rounds can help staff feel more supported in their jobs, allowing them the time and space to reflect on their roles. Evidence shows that staff who attend Rounds feel less stressed and isolated, with increased insight and appreciation for each other's roles. They also help to reduce hierarchies between staff and to focus attention on relational aspects of care.

Listed below are answers to standard questions required for Governor and Council organization dues and membership approval submissions:

1. How long has this organization been in existence and how long has this agency been a member of this organization?

The Schwartz Center has been in existence since 1996 and New Hampshire Hospital has been a member since 2011.

2. Is there any other organization, which provides the same or similar benefits, to which your agency belongs?

No

3. How many other states belong to this organization and is your agency the sole New Hampshire state agency that is a member?

There are 45 states with membership in The Schwartz Center including New Hampshire. NH Hospital is the only state agency with a membership.

4. How is the dues structure established? (Standard fee for all states, based on population, based on other criteria, etc.)

Dues are based on a standard fee per hospital.

5. What benefit does the state receive from participating in this membership?

New Hampshire Hospital receives training, education, webinars and recognition for achievements' in compassionate care.

6. Are training or educational/ research materials included in the membership? If so, is the cost included? Explain in detail.

Yes, training and educational materials are included in the membership and at no additional cost.

7. Is the membership required to receive any federal grants or required in order to receive or participate in licensing or certification exams? Explain.

No

8. Is there any travel included with this membership fee? Explain in detail any travel to include the number of employees involved, the number of trips, destination if known and purposes of membership-supported trips.

There is no travel included in the membership fee, and NHH has opted not to participate in any of the away seminars or recognition events.

9. Which state agency employees are directly involved with this organization? (Indicate if they are members, voting members, committee members, and/or officers of the organization.

All NHH direct care staff members.

10. Explain in detail any negative impact to the State if the Agency did not belong to this organization.

If NHH did not belong to The Schwartz Center then the hospital would miss techniques and programs designed to strengthen patient relationships. The hospital would no longer be a leader in compassionate healthcare and would be out of touch with new developments.

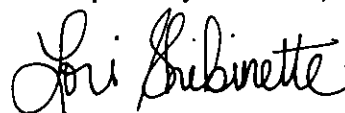
Should Governor and Council determine to deny this request, New Hampshire Hospital would lose an effective coping tool. Evidence shows that Schwartz Rounds improves communication between colleagues. Staff who regularly attend Schwartz Rounds feel less stressed and isolated at work and the process helps to normalize emotions.

Area served: New Hampshire Acute Psychiatric Facility.

Source of funds: 83% general funds and 17% other funds from agency fees and inter-departmental transfers.

In the event that other funds become no longer available, additional general funds will not be requested to support this contract.

Respectfully submitted,



Lori A. Shibinette
Commissioner

Invoice - Healthcare Membership



INVOICE #: RI-02025
 Invoice Date: 01/27/2020
DUE DATE: 03/12/2020

The Schwartz Center for Compassionate Healthcare
 100 Cambridge Street
 Suite 2100
 Boston, MA 02114
punderhill@theschwartzcenter.org
 Phone: 817.726.0127
www.theschwartzcenter.org

Co.: 10 Proc. Level: 09400
 Vendor # 273699 Remit To: 2001
 PO # _____ Line: _____
 Desc: Member # 740
 Approval: Soc Date: 2-19-2020

Acct Unit: 84000000 Acct: 500251
 Activity JN: 94012800
 Comments:

Member Site ID #: 740
 Renewal Date: 01/01/2020

Description	Term	Quantity	Unit Price	Amount Due
Annual healthcare membership fee	Your 1-year term beginning on the renewal date	1	\$ 2,700.00	\$2,700.00
SUBTOTAL				\$2,700.00
TOTAL				\$2,700.00

All Currencies in US \$

Make Check Payable To:
The Schwartz Center for Compassionate Healthcare

REMIT TO:
 P.O. Box 412106
 Boston, MA 02241-2106

Please include your invoice number on the remittance of the check

If you wish to pay by Credit Card.
 Please contact Peter Underhill at 617-726-0127 or Rattana Pheap at 617-643-9926.
 Internal entities, please credit via journal entry BU 1200, Account 744005, Fund 027183.

