

# carenews

together we are transforming the future of health care

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“Addressing community issues such as poverty, unemployment, transportation, housing, access to healthy foods and other socioeconomic factors are the building blocks laying the foundation of population health.”

Good day!

## In this issue:



In its profile of the new class of trustees for the American Hospital Association (AHA), Board Member Ramanathan (Ram) Raju, MD, president and CEO of New York City's Health and Hospitals Corporation (HHC)—the nation's largest municipal health care system, recently stated, “The AHA is part of the historical changes happening in this country, and I think we need to lead and redefine what the ‘H’ in hospital means... You can't do population health by providing just medical care.”

Instead, Dr. Raju refers to the broader role of hospitals leading initiatives to address community issues such as poverty, unemployment, transportation, housing, access to healthy foods and other socioeconomic factors. These are the building blocks laying the foundation of population health. It will be less about what happens in the four walls of our “H” buildings and more about what happens in our communities.

We know something about this at Care New England, and last week we were proud to announce a new federal grant based at Memorial Hospital which will enable us to improve our primary care coverage for underserved populations in Pawtucket and Central Falls. The five year, \$1.25 million grant, “Transforming Family Centered Primary Care for Children and Adolescents in Underserved Areas,” comes from The U.S. Health Resources & Services Administration (HRSA) and was bestowed to the Department of Family Medicine at Memorial Hospital to improve the availability of primary care for children and adolescents in these targeted communities.

In our news release announcing the award, Melissa Nothnagle, MD, MSc, residency director for The Warren Alpert Medical School at Brown University Family Medicine Residency Program at Memorial, and principal investigator on the grant, says, “The

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purpose of this grant is to enhance the training of medical students, family medicine residents and family medicine faculty at Memorial, as well as community faculty throughout these two underserved communities.”

In addition to cultivating a workforce of primary care providers who are well prepared to deliver patient and family-centered care for children and adolescents, the intent of the grant is to encourage practitioners to work in underserved communities.

“We will be looking to these practitioners to become the future leaders in transforming primary care delivery systems,” Nothnagle explains.

This type of transformation in the health care delivery system changes our focus on keeping people well instead of helping people when they are sick. This grant, according to Jeffrey Borkan, MD, PhD, chief of the Department of Family Medicine at Memorial and chair of the Department of Family Medicine and assistant dean for Primary Care-Population Health Program Planning at Alpert Medical School, will help further the efforts to strengthen the primary care services at Memorial and broaden their availability.

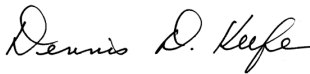
Dr. Borkan goes on to say, “This grant is a wonderful accomplishment and it will directly benefit the training of our residents and the patients for whom they care—both now and in the future. An incredible family medicine residency team put together a top-notch grant and this award will support continued educational innovation and the care of Rhode Islanders.”

Way to go, Memorial team! This is the kind of effort that will improve the health status of our communities. This is health care of the future.

Do all you can to help change our piece of the world—it’s how we make a difference every day.

Have a great week ahead!

Sincerely,



Dennis D. Keefe  
President and Chief Executive Officer



## CNE Cardiovascular Care taking part in irregular heart rhythms clinical trial

Care New England Cardiovascular Care has recently announced it is taking part in the TEMPO clinical research trial. The research will evaluate the effect of an investigational drug being developed for the treatment of heart rhythm problems. The study is specific to patients with Implantable Cardioverter-Defibrillators (ICD) or Cardiac Resynchronization Therapy-Defibrillators (CRT-D).



The purpose of the TEMPO study is to assure what effect the trial drug has on heart rhythm problems in patients who have an ICD or CRT-D, and also determine the safety profile of the drug in this phase II study.

Specific heart rhythm problems for which the investigational drug is being developed are ventricular tachycardia (VT) and ventricular fibrillation (VF), in patients with an ICD or CRT-D. VT and VF are major causes of sudden death relating to the heart. Patients who have a history of these conditions or are at risk for developing these conditions are usually treated with an ICD which can stop but does not prevent VT/VF. The drug may also be beneficial for potential defibrillator shocks which can be painful and psychologically traumatic to the patient.

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“We are excited to be conducting the TEMPO clinical trial for the many patients who have heart rhythm problems and live with ICD and CRT-D devices,” says Chester Hedgepeth, MD, PhD, executive chief of cardiology, Care New England. “These patients could greatly benefit from drug therapy to reduce the frequency of VT/VF and defibrillator shocks.”

Enrollment will occur over a 12-month period and the expected maximum treatment duration is approximately 18 months. Approximately 120 subjects will be randomized at about 120 study sites in North America, Europe and Israel. The study is open to male and female subjects, 18 to 80 years of age and is funded by Gilead Sciences, Inc. For more information on this study, please call (401) 681-4996.

From outpatient consultation, to treatment in a congestive heart failure clinic, to counseling for a heart transplant, Care New England Cardiovascular Care provides services at Kent, Memorial and Women & Infants hospitals, as well as Garden City in Cranston. Services include advanced cardiovascular imaging modalities such as cardiac CT, an advanced valvular heart disease service, and advanced heart failure service with transplant consultation. In addition, outpatient consultations and stress testing, cardiac catheterization and heart failure clinic nursing support are available. For more information, please visit our website at <http://carenewengland.org/cardiology>.

## The Internal Medicine Center of Memorial Hospital earns national recognition for patient-centered care

The National Committee for Quality Assurance (NCQA) has recognized the Internal Medicine Center of Memorial Hospital of Rhode Island with NCQA Patient-Centered Medical Home (PCMH) Recognition—Level 2 for using evidence-based, patient-centered processes that focus on highly coordinated care and long-term, participative relationships.

“We are very pleased to have received NCQA recognition,” said Dino Messina, MD, PhD, associate program director, Internal Medicine Residency Program, Division of General Internal Medicine. He adds, “It is our intention to take advantage of the opportunity to offer improved, patient-centered care to our community.”



The NCQA Patient-Centered Medical Home is a model of primary care that combines teamwork and information technology to improve care, improve patients' experience of care and reduce costs. Medical homes foster ongoing partnerships between patients and their personal clinicians, instead of approaching care as the sum of episodic office visits. Each patient's care is overseen by clinician-led care teams that coordinate treatment across the health care system. Research shows that medical homes can lead to higher quality and lower costs, and can improve patient and provider reported experiences of care.

“NCQA Patient-Centered Medical Home Recognition raises the bar in defining high-quality care by emphasizing access, health information technology and coordinated care focused on patients,” said NCQA President Margaret E. O’Kane. “Recognition shows that the Internal Medicine Center of Memorial Hospital of Rhode Island has the tools, systems and resources to provide its patients with the right care, at the right time.”

To earn recognition, which is valid for three years, the Internal Medicine Center of Memorial Hospital demonstrated the ability to meet the program's key elements, embodying characteristics of the medical home. NCQA standards aligned with the joint principles of the Patient-Centered Medical Home established with the American College of Physicians, the American Academy of Family Physicians, the American Academy of Pediatrics and the American Osteopathic Association.





## 17<sup>th</sup> CARE Awards celebrate excellence and innovation

Care New England celebrates the innovative and outstanding contributions to the improvement of patient care and the culture of CNE with our annual CARE Awards. Now in its 17<sup>th</sup> year, the CARE Awards remain an important way to celebrate and reward forward thinking at Care New England while encouraging all of our employees to redefine success.

To learn more about the categories or submit a CARE Awards application, visit <http://carenet/careawards>.

## Giving the gift of life

Care New England has been awarded Gold recognition from the Division of Transplantation (DoT) of the Department of Health and Human Services's Health Resources and Services Administration (HRSA) for outstanding voluntary efforts to educate staff, patients, visitors, and community members on the critical need for organ, eye, and tissue donors and to help promote enrollment in state donor registries. This is the third year Care New England has been honored. Through our collective efforts with organizations across the nation, more than 350,000 donors have been registered this year. It's always time to do what's right. Find out more about how to register for this life giving act. Call Nancy Hagerty in CNE Human Resources for more information. She can be reached at (401) 680-4337.



## Women & Infants nurses present poster at national conference

Congratulations to Dale Monnier BSN, RNC-OB, c-EFM, IBCLC, clinical nurse educator in LDR (left), and Donna Tucciarone BSN, RN, LDR staff nurse, who recently presented a poster at the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) National Convention, in Long Beach, CA.

The poster—a case study of a patient with maternal pulmonary arterial hypertension—generated much discussion, allowing them to share their experience with colleagues from across the nation. They are now working with a pulmonary counterpart at Rhode Island Hospital to refine the poster for presentation at a pulmonary conference in September. 