

carenews

together we are transforming the future of health care

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“As we seek to transform health care, it comes down to some basics about the way we ourselves would want to be treated, with caring, information and support.”

Good day!

I have often said that the market waits for no one. As our six month financial results underscore, the force of change within the health care industry does not lie in the future, it is here.

In this issue:



I must be frank. The changes we are seeing in the environment are accelerating. Despite diligent management and, in many cases, strong volumes, the dramatic reductions in payments that we are experiencing are creating serious financial challenges for us. And, with further cuts coming from both public and commercial payers, the situation will only worsen. This is no cry of wolf. This is the reality of today's health care environment. Expect to hear more in the weeks and months ahead as our system and operating unit leadership develop our action plans.

Yet, there is good news to share. We are creating the needed infrastructure to function effectively in the accountable care world. I have spoken here previously about the creation of Integra, our accountable care organization (ACO), our collaboration in this enterprise with the Rhode Island Primary Care Physicians Corporation and Care New England physicians, the recruitment of the very capable Dr. James Fanale as our ACO medical director, the expertise of Domenic Delmonico and his able team directing our ACO, and the leadership of Nancy Roberts and burgeoning body of knowledge in the area of care management that will serve as a critical underpinning of how we deliver care in the future.

We all know of countless examples where, in spite of great professionalism and the best possible intent, there is a breakdown in communications or in the transition of care from one setting to another. The goal of care management is to reduce that fragmentation and improve coordination so that there is increased quality, improved ability to stay at home, and less cost. Think of your own elderly relatives and the toll

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that repeated hospitalizations for serious illness can take on them. Through improved care coordination, we can work to enhance both quality of life and satisfaction with the health care delivery system.

We are learning much on how to better the care experience from our palliative care team and the huge inroads they are bringing to Care New England. Different from Hospice which provides care and support at the end of life, palliative care is an aggregate care approach that improves the quality of life for patients with serious illness, and it brings more attention to the management of their conditions. This type of care can be delivered for months to years.

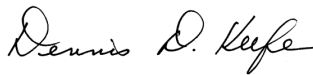
We are using this body of knowledge to improve our management of advanced illness. In our own ACO, we are creating a model which will offer a new approach to care for certain groups of patients with serious illness. In joining with patients and their families and encouraging their responsibility for the quality of their care, we help them navigate across the continuum of care from their kitchen table at home, to their primary care provider's office, to the ED, hospital, to aftercare. The point is to deliver high quality care at the right place, at the right time and at the right cost by providing a high level of attention to the clinical needs of the patient and to the critical transitions in that patient's progression.

For complex, chronically ill Medicare patients, the needs extend beyond the traditional mix of care providers and care settings. Think follow-up visits with primary care physicians, home or clinic visits, medication management, transportation, support services, and the overall health literacy of the patient and family. As we seek to transform health care, it comes down to some basics about the way we ourselves would want to be treated, with caring, information and support.

This is all about reimagining the way health care is delivered, and it's happening right here at Care New England.

Think out of the box. Our future depends on it! Have a great week ahead.

Sincerely,



Dennis D. Keefe
President and Chief Executive Officer



Study: Breast cancer patients treated with conservation therapy experience greater intimacy, sexual fulfillment

A team led by Jennifer S. Gass, MD, surgeon-in-chief at Women & Infants Hospital and co-director of its Breast Health Center recently presented research indicating that breast cancer patients who undergo breast conservation therapy instead of mastectomy experience greater pleasure during intimacy in survivorship.



The research, presented at the annual meetings of the International Society for the Study of Women's Sexual Health and the Society of Surgical Oncology, is entitled "Surgical management of breast cancer and impact on sexual function." In addition to Dr. Gass, authors from the Breast Health Center included Sarah Pesek, MD; Ashley Stuckey, MD; and Michaela Onstad, MD, a graduate of Women & Infants' obstetrics/gynecology residency and breast fellowship programs.

"What we found was that women who were treated with breast conservation therapy after being diagnosed with breast cancer reported a higher rate of pleasurable caressing of the treated breast

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during sex and intimate moments,” Dr. Gass explains, adding that women who underwent mastectomy and reconstruction were less than half as likely to experience such pleasure.

With the incidence of contralateral prophylactic mastectomy increasing across the country, the researchers evaluated the impact of surgery on sexual function among more than 4,000 women over a 12-year period using the Female Sexual Function Index (FSFI). Women having a lumpectomy, also known as breast conservation therapy, versus a mastectomy with or without reconstruction were significantly more satisfied with their own appearance undressed as well as being more comfortable being seen by their partner undressed.

“Women who were more satisfied with their own appearance undressed had remarkably significant higher sexual function, as measured by the FSFI,” concludes Dr. Gass, a clinical associate professor at The Warren Alpert Medical School of Brown University. “Reaffirming that women are our own most critical judges, we observed that a woman’s own opinion of her appearance was more powerful than how comfortable she felt being seen by her partner.”

For more information

on research being conducted at the Breast Health Center, or to make an appointment, call (401) 453-7540.

Butler psychiatrist awarded fellowship from the John Simon Guggenheim Memorial Foundation

Dr. Christine Montross, a psychiatrist at Butler Hospital and an assistant professor of psychiatry and human behavior at the Alpert Medical School, was one of the 175 awardees for the 2015 fellowships from the John Simon Guggenheim Memorial Foundation, selected from among more than 3,100 applicants. Dr. Montross, a writer, said the fellowship will support her next book. “I’m thrilled to have been given an award that has such a rich history and deep commitment to scholarship and artmaking,” she said. “It’s simultaneously humbling and inspiring to be in this cohort of big thinkers. The fellowship will allow me to dive deeply into my current nonfiction book project, which explores the intersections of mental illness and the criminal justice system.”



Dr. David Williams appointed to new CNE cardiology post

As part of our affiliation with Brigham and Women’s Department of Cardiology, David Williams, MD, has been named director of invasive cardiac services for Care New England. He will oversee the operations of the cardiac catheterization labs at Care New England and will be primarily responsible for clinical care, quality programs, and program development. Specifically, he will spearhead the implementation of Kent’s new elective and emergency angioplasty programs.



Dr. Williams is an immensely well-respected and renowned cardiologist regionally, nationally and internationally. He performed the fourth angioplasty in the United States and was head of the interventional cardiology program at Rhode Island Hospital where he helped to establish its angioplasty program. He is a current member of the Brigham and Women’s Hospital Cardiovascular Division, professor of medicine at Harvard Medical School, and has held numerous national leadership roles in cardiology and interventional cardiology.

In his new capacity, Dr. Williams will be working closely with Chester Hedgepeth, MD, PhD, chief of cardiovascular services for CNE, and all cardiovascular physicians who utilize CNE’s cath labs, including Dr. Ed Thomas at Kent Hospital and Dr. Tom Noonan at Memorial Hospital.

Please welcome Dr. Williams to this new role at Care New England.



Memorial offers new pet therapy program

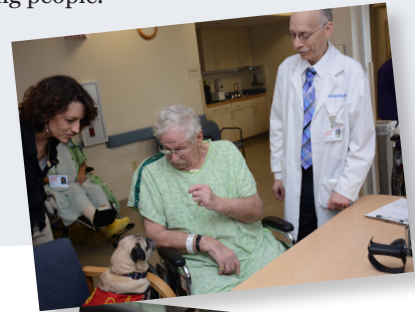
The Center for Rehabilitation at Memorial Hospital has launched a pet therapy program to enhance the environment of care for patients of all ages.

Keith Rafal, MD, MPH, chief of rehabilitation and medical director of the Center for Rehabilitation, said, "Memorial Hospital's pet therapy program is a special way we show compassion for our patients, their families and hospital staff."

Pet therapy is a guided interaction between a patient and a trained animal. It also involves the animal's handler. Therapy dogs are family pets, not service dogs like those that assist the disabled. These dogs are obedient and deal well with different situations and enjoy meeting people.

Memorial's program is offered to patients of the Center for Rehabilitation, both in the therapy area and patient rooms. Susan Higgins, owner/handler of her pug dog, Bridget, currently visits Memorial's rehab patients once a week for one hour. Bridget has been a therapy dog for the past six years.

The owners ensure their animals meet all the standards set by Therapy Dogs International, Inc. for medical pet therapy, including providing licensing, credentialing and general liability insurance. Please contact Memorial Hospital Volunteer Services at (401) 729-2325 or lfoster@carene.org if you are interested in learning more about the pet therapy program.



Pictured left to right in The Center for Rehabilitation at Memorial Hospital, Susan Higgins, owner/handler of Bridget, therapy dog, Bridget visiting with William Black, a rehab patient and Providence resident, and Keith Rafal, MD, MPH, chief of rehabilitation and medical director of the Center for Rehabilitation.

Therapy dog, Bridget at Memorial Hospital.



Kent Hospital celebrates Earth Day 2015

Kent Hospital and the Kent Hospital Keeping It Green committee celebrated the amazing planet we call home by educating staff about recycling, and giving away free basil plants.

The Keeping It Green Committee at Kent is comprised of members from a variety of service lines throughout the hospital. Their mission is to promote healthier communities, both locally and globally. Kent Hospital is committed to a philosophy of environmental stewardship. Kent's operational practices endeavor to protect environmental and human health. Happy Earth Day!

Pictured are Karin Jackman and Dorothy Hart as they greet staff and members of the community with recycling information.





HR on the move

The Care New England Human Resource Department will be moving from the Blackstone House on the Butler Campus to 4 Richmond Square, Suite 400, Providence. The move will take place over two days, Thursday and Friday, April 30 and May 1. The department's email and phone numbers will remain the same. During the move, HR staff will not have computers or phones, but will be checking voice mail and returning calls. The phones and computers should be operational by early afternoon on Friday, May 1.

As a result of the move, the conference room in the Blackstone House will no longer be available for use. HR is moving to make room for The Providence Center's Crisis Stabilization Unit, which cares for adults experiencing a psychiatric or substance abuse emergency. Prior to housing the HR department, the Blackstone House served as a group home and, as such, the offices can be easily converted to patient rooms.

Help for Nepal

The Alpert Medical School Internal Medicine Residency Program at Memorial Hospital is encouraging everyone to offer help to their Nepalese colleagues in the wake of the weekend's devastating earthquake. Humanitarian fundraising efforts are being coordinate through the Health Foundation Nepal at <http://healthfoundationnepal.org/earthquake-relief-fund.html>. 