

carenews

together we are transforming the future of health care

november 28, 2016
volume 6 | issue 48



“The Providence Center certainly provides residential and facility-based behavioral health care, but where the staff really shines is in providing community-based services.”

Good day!

In this issue:



Recently, I was listening to Rhode Island Public Radio's (RIPR) story on The Providence Center (TPC)'s pilot project placing mental health clinicians in five Providence public schools. You can listen to or read the story at <http://bit.ly/2dCRuVI>. As I listened, I was thinking about how this project is a great illustration of several concepts that are absolutely central to Care New England's efforts to improve the health of Rhode Island's population.

The first concept is the idea of “moving upstream.” There is an often-quoted parable that tells the story of a man and a woman fishing in a river. Suddenly, a person comes down the river, struggling for life, almost drowning. The fisherman and fisherwoman pull her out. Then, another comes and this man must be rescued too. This happens all afternoon and the man and woman are getting very tired from constantly pulling people from the river. Eventually, they think, “We need to go upstream and find out why so many people are falling in the water.” In other words, it's better to prevent the problem rather than trying to fix it time and again.

A great example of this is TPC's project in which they are placing clinicians in the Providence School District's George J. West and Carl Lauro elementary schools and Nathan Bishop, Gilbert Stuart, and Roger Williams middle schools to provide clinical services during the school day, at recess, or after school. The keys to making this program work are good relationships with school personnel who can make a referral as soon as they see something going wrong for a child and making clinical services available at times and places that are the most convenient for the family. These programs don't replace services for children with serious mental illness. But, as Dr. Gregory Fritz of Bradley Hospital points out in the RIPR story, this kind of intervention may be the key to catching problems before they escalate into crisis and/or warrant hospitalization. This is an example “getting upstream.”

continued

To be successful, we must go outside our walls. A recent article in the *Journal of the Healthcare Financial Management Association* drives home this point in discussing pediatric asthma, saying, “For children to thrive, the focus of health care can’t be just doing well in the hospital. We must go outside the walls.”

This ability to work beyond the walls, to help people in their neighborhoods and in the community is one of the prime reasons we made TPC part of Care New England not quite two years ago. TPC certainly provides residential and facility-based behavioral health care, but where the staff really shines is in providing community-based services. It’s hard working “in someone else’s house,” but as our efforts in the schools underscore, care is sometimes most effective when it reaches people where they live.

This is why we are particularly grateful for the involvement of key community leaders on the Public and Community Health Committee of our Care New England Board of Directors who are helping to ground our community health programming with keen insights, cultural sensitivity and a true spirit of inclusion. In fact, as a result of our recent community health needs assessment, we have identified work in the behavioral health arena and specific initiatives to combat the local opioid epidemic as key priorities. We are pleased to welcome the voice of the community to that of TPC, Butler and the other Care New England organizations as we work to improve public health.

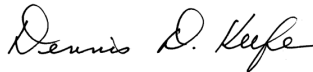
Community partnerships are strategically critical to our success. To put it simply, a big part of the success in population health strategies will be to intervene early and keep people out of hospitals whenever possible. Niñon Lewis of the Institute for Healthcare Improvement (IHI) makes the point well. “Health care organizations on the leading edge see community partnerships as strategically important,” she writes. She also talks about the mindset that makes the TPC-Providence Schools partnership go. “What we’re finding,” she says, “is that many communities are resource-rich and coordination-poor. That’s what health care organizations have to realize—the resources they can tap into are much more broad than what’s within the walls of the health care delivery system....It’s both the challenge and the beauty of the opportunity—there are a lot of hands in the community to help serve the needs of the populations they care for, and the key is knowing where they are, developing the skills to collaborate with new partners, and finding the means to pay for addressing the social determinants of health.”

The TPC-Providence Schools partnership gets all of this right. As you listen to the voices of parents, the school principal, staff from other agencies, and experts in the field in the RIPR story, what you’ll hear is population health management in action—and the beginning of a great partnership that will make a difference in the lives of our students and their families.

Please join me in congratulating the staff from all of the partner agencies who have made this possible. We need many, many more such partnerships to achieve our goals of making all of our communities healthy places to grow up and to build a sustainable health care system.

Have a great week ahead!

Sincerely,



Dennis D. Keefe
President and Chief Executive Officer

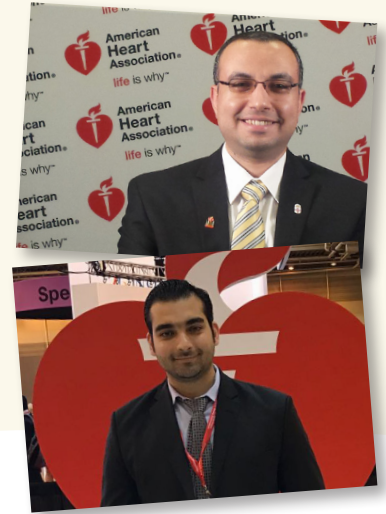
ConvergenceRI 
Click [here](#) to view this week’s *ConvergenceRI*



Young Memorial researchers earn international attention for presentations

After last week's American Heart Association Scientific Sessions, media from across the globe published news of research presentations made by a pair of young researchers who are third-year residents at Memorial Hospital. The projects included:

- Work lead by Somwail Rasla, MD, that demonstrates how harmful yo-yo dieting is on the heart. Healthy women who yo-yo dieted were 3.5 times more likely to die suddenly from a heart attack than women whose weight remained stable, according to Dr. Rasla's research, which he presented in an interview on the "Today Show," among other outlets. Yo-yo dieting was defined as fluctuations of 10 pounds or more in either direction. The conclusions were drawn from the self-reported weight history of more than 158,000 postmenopausal women ages 50 to 79 who were followed for more than 11 years. Weight cycling was also found to have a deadly impact on normal-weight women, who died within an hour of cardiac arrest. Interestingly enough, overweight and obese women who weight-cycled didn't see an increased risk in either type of death. There was also no higher mortality among women who put on pounds but didn't lose them, or among those who lost the weight and kept it off.
- Lead author Mohamad Barbour, MD, presented research showing that postmenopausal women over 50 who eat high-protein diets could double their risk of heart failure, especially if much of the protein comes from meat, when compared with those who ate less protein daily or more vegetable protein. The conclusion is based on an investigation of the self-reported dietary intake of 103,878 women over a five-year period. Dr. Barbour says the difference between meat and vegetable protein intake could be attributed to the molecular mechanisms of animal protein, which can turn to toxic molecules that can in turn affect the function of the heart's left ventricle and lead to heart failure. They can also increase body mass index, which is a known risk factor for heart failure. He does, however, suggest that more research is needed in the area.



In addition to these, Farhan Ashraf, MD, of the Internal Medicine Residency Program, attended the conference and presented his research entitled, "Decreased Kidney Function in the Form of Estimated Glomerular Filtration Rate Increases the Risk of Development of Incident Hospitalized Heart Failure and Its Subtypes in Post-menopausal Women." The research paper was published in the professional journal *Circulation*.

Women & Infants files Letter of Intent for renovation of labor and delivery suite

Women & Infants Hospital last week filed a letter of intent (LOI) with the Rhode Island Department of Health for its proposal, "Women & Infants Hospital Labor & Delivery Renovation." This LOI is the first step in the hospital's plan to file a certificate of need (CON) application in January 2017.

As one of the largest stand-alone obstetrical services in the country, Women & Infants was the birthplace of more than 8,800 babies last year. Since the current space was designed in 1986, there have been dramatic changes in the hospital's patient population, care models and the introduction of new technologies. Women & Infants has seen a sizable increase in patients with significant chronic illness who require specialized monitoring and care; has moved to an electronic medical records system; and has instituted a team-based model of care that includes patients and families in all aspects of care.

"As a specialty hospital with a unique focus, Women & Infants is a well-cherished jewel, providing incomparable care to the women and newborns of our region. Each and every day, I am honored by the women and families who choose to share with us some of the most precious moments of their



**BABY-FRIENDLY[®]
DESIGNATED
2015 – 2020**

continued



continued

lives—the delivery of a child. But our physical environment in labor and delivery no longer provides the optimal support for today’s modern birth approach,” said Mark R. Marcantano, president and chief operating officer of Women & Infants. “It’s time for our physical environment in labor and delivery to match the incredible level of clinical care provided here.”

Women & Infants’ Labor and Delivery Suite is comprised of 19 private labor/delivery/recovery rooms, three dedicated Cesarean birth rooms and a recovery area, and an Alternative Birthing Center that offers a high-touch, home-like, midwife-led birthing experience for low-risk births. This project will consist of renovating all 20 labor rooms and increasing the room size from 220 square feet to the current guidelines of 400 square feet with a private bathroom and shower in each room.

The project design will be based around a universal room that exceeds the needs for all levels of patient- and family-centered care. The renovation will integrate the newest technologies and include upgrades to the electrical, HVAC, plumbing and medical gasses systems.

The renovation, with a projected cost of approximately \$18.6 million, is scheduled to be completed in October 2018. It will be done in phases over 14 to 16 months in order to minimize any disruption to existing service.

2016 Care New England Leadership Seminar ready to graduate next class

Participants in the 2016 Care New England Leadership Seminar began presenting their program projects at the CNE Managers meeting last week in advance of their upcoming graduation. This 10-month program provides a comprehensive developmental opportunity enabling CNE leaders and aspiring leaders to engage with peers from across the system to explore, discover and advance their leadership competence through a wide range of experiences including lectures, workshops, small group activities and projects. Program highlights include:

- *Leadership Competency Development* – Participants explore the Care New England Competency Model, identify individual leadership strengths and opportunities and create a targeted individual development plan that is supported throughout the program.
- *Leadership in Action* – Participants self-select a leadership project that aligns with the CNE Balanced Scorecard and will advance their development while supporting the CNE strategic plan. The projects spanned the duration of the Leadership Seminar.
- *Exposure* – Participants have the opportunity to engage with peers from across the system, learn from CNE leaders and gain an understanding of strategic planning and goal setting, strengthening business acumen and gaining perspective.


The program, began at Butler Hospital in 2006, was expanded to include Care New England employees in 2009, and opened to employees system-wide in 2010. Since its inception, more than 100 participants have graduated from the program, 40 of whom have since been promoted. The 2017 application process will take place early next year for the March to December program. For more information, contact Meghan LaBranche at mlabranche@carene.org or (401) 680-4346.

Program projects focused on issues including the changing face of media in health care marketing, increasing cultural competency working with transgender and gender non-conforming individuals, and supply room improvement, among many others.

This year’s participants included:

Butler:

Andrew Boyer, BH Intensive Treatment Unit, MHW
Laura W. Carpenter, BH Occupational Therapy, occupational therapist

 *the right people
the right capabilities
the right roles
the right time*

**Human
Resources**

continued



continued

Wendy Grossman, BH Intensive Treatment Unit, activity therapist/MHW
 Micaela Condon, Butler Young Adult Partial Program, program therapist
 Jennifer Kokoszka, BH Kent Unit, activity therapist/MHW
 Lisa St. Germain, BH Social Work, social service clinician II
 Emma Welch, Butler Mood Disorders Research Program, research systems coordinator

Care New England:

Colleen Bernardo, CNE Marketing, public relations and marketing specialist
 James Harper, CNE Information Services, senior programmer/analyst
 Susan McDonald, CNE Marketing, marketing communications manager
 John McDonough, CNE Supply Chain Services, manager
 Will Rodriguez, CNE Information Services, database administrator
 Kimberly A. Viau, CNE Professional Revenue Cycle
 Scott Vincent, CNE Information Services, hardware technician
 Antonio Vizzaccaro, CNE Information Services, computer hardware technician
 Clint Whitman, CNE Information Services, hardware technician at Butler Hospital

Kent:

Elaine Fish, KH Volunteer Services, supervisor
 Mary Elizabeth Hanley DO, KH Wound Care & Hyperbaric Medicine, Hyperbaric Medicine director, wound care physician

The Providence Center:

Jaissen Jackson, MA QMHP, TPC Community Support Services, team 1B manager
 Jillian Pastina, RN QMHP, TPC Emergency Services, manager

VNA of Care New England:

Sarah Lovegreen, VNA of CNE Allied Health, manager

Women & Infants:

Emily A. Breguet, WIH NICU, ANM
 Melissa-Lauren Hooks, WIH Department of Medicine, research project coordinator
 Ann Schantz Meers, BS, RN, CCRC, WIH Division of Urogynecology and Reconstructive Pelvic Surgery, research supervisor
 Jai-Me Potter-Rutledge, MHA, CNE Simulation Program at WIH, simulation services supervisor

The Providence Center holds ribbon cutting for residential facility

On Friday, November 18, The Providence Center invited the public and community leaders to help celebrate the opening of its new Women's Roads to Recovery residential facility, located at 15 Baker Pines Road, in Wyoming, RI. The program specializes in meeting the unique needs of women in recovery, such as trauma, domestic violence, developing positive relationships, pregnancy health, employment and education and parenting skills.

Deb O'Brien, vice president and COO, spoke about TPC's commitment to the idea that recovery is possible, saying, "Our clients past and present know that recovery is what you make of it, and the journey is often long and arduous. But it is our mission to give people the tools and supports to guide them on the road to recovery."



Richmond Police Chief Elwood Johnson also gave remarks about the toll the overdose crisis has taken on the community. "In the past few years, it seems like everybody has been touched in some way by the overdose crisis. TPC offers resources, support and guidance to help empower people to change their lives."

Other community leaders in attendance included Rep. Justin Price, Sen. Elaine Morgan, and Linda Mahoney of the RI Department of Behavioral Health.



Kent Hospital and East Greenwich Drug Program to host opioid forum for community

Kent Hospital, in conjunction with the East Greenwich Drug Program, will host an opioid forum, *Unscripted*, highlighting the nation's opioid crisis, on Thursday, December 1, from 6:30 to 8:30 p.m., at the Westminster Unitarian Church, East Greenwich. The forum is free, open to the community and will feature an array of speakers and panelists who will share their insights into various components of a frightening epidemic.



"As the community hospital for East Greenwich and the 300,000 people who comprise Kent's service area, we are committed to bringing much-needed attention to this important issue as we continue to see tragic results coming into our emergency department and our intensive care unit," said Ehsun Mirza, MD, critical care specialist at Kent. "Opioid abuse has been on the rise for several years now and continues to have serious effects on our community. Coming together for this important forum can only help provide critical awareness on the dangerous effects of these drugs to so many in our area, especially our youth." The speaking program for *Unscripted* includes:

Moderator: Dr. Mirza.

Forum speakers: Michael J. Dacey Jr, MD, president and chief operating officer, Kent, and Christopher P. Zabbo, DO, emergency medicine physician, Kent.

Panelists: Lisa Marzilli, PharmD, adjunct professor, University of Rhode Island (URI) and nationally-recognized speaker; Kelly Matson, PharmD, member, Pediatric Pharmacy Advocacy Group, professor, URI School of Pharmacy; Michelle McKenzie, MPH, senior projector director, Miriam Hospital, and director of Preventing Overdose and Naloxone Intervention; Reinhard Straub, MSW, clinical and business liaison, American Addiction Centers; The Hon. Brian P. Stern, superior court justice, chief of staff for former Rhode Island Gov. Donald Carcieri; Thomas Raimondo, MD, pulmonary disease specialist, intensive care unit, Kent.

Event coordinator: Robert L. Houghtaling, MED, director, East Greenwich Drug Program, CEO, Academy Foundation.

For more information, please contact Robert Houghtaling at (401) 230-2246 or rhoughtaling2@verizon.net.

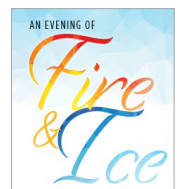
New Alzheimer's research study enrolling at Butler



Researchers in the Memory and Aging Program at Butler Hospital have begun enrolling participants in a new clinical trial called the Generations Study. This five-year study includes trial sites across the globe and is enrolling cognitively healthy adults, ages 60 to 75, at high risk of developing symptoms of Alzheimer's because they inherited two copies of the apolipoprotein E gene—a key genetic marker associated with Alzheimer's disease risk. The purpose of the study is to test whether two investigational drugs can slow the onset and progression of clinical symptoms associated with Alzheimer's disease in participants at risk of developing clinical symptoms based on their age and genotype. Participants in the study are randomly assigned to receive either the study medication or placebo. To learn more about this and other clinical trials being conducted by Butler's Memory and Aging Program, visit <http://www.butler.org/memory>.

VNA of Care New England presents 'An Evening of Fire and Ice'

There is still time to register for the second annual *An Evening of Fire and Ice* on Thursday, December 8, 2016, from 5:30 to 7:30 p.m., at the Roger Williams Park Botanical Center. The event is open to the community and funds raised will support the mission of the VNA. Enjoy the hot sounds of cool jazz, gourmet food and cocktails, all amid beautiful botanical surroundings. The presenting sponsor of An Evening of Fire and Ice is Centreville Bank.



"This wonderful event represents the hard work and dedication of so many at the VNA of Care New England and is a great way to kick off the holiday season," said Kathleen Peirce, RN, vice president of clinical operations, executive director, chief nursing officer, VNA of Care New England. "We look forward to celebrating the mission of the VNA with so many of our community sponsors, friends and supporters." Individual tickets are priced at \$100. Care New England employees can purchase tickets for a discounted rate of \$75. For more information or to purchase tickets, please contact Cezarina Jackson, special events coordinator, Care New England, at (401) 921-8508 or cjackson@carene.org.

