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“Ultimately, I hope we can get to a place where we can assure the viability of all of our organizations and address the need of patients of the Memorial community.”

In this issue:



Good day!

Last week we learned some powerful lessons about the democratic experience as we participated in three public hearings sponsored by the RI Department of Health reviewing our request to relocate the Memorial Hospital obstetric unit. We heard the impassioned appeals of the birth advocates, we watched the commitment of family practice residents who came out to speak, and we saw the love and affection that the Memorial Hospital nurses have for their patients and their hospital.

There was one woman who told of her personal birth experience and the reasons why she chose Memorial Hospital. With wisdom and eloquence, she spoke of the sanctity of the birth experience, the importance of feeling empowered and in control, the precious and unique choice that Memorial and its highly capable staff had provided her. She admitted candidly that she knew less about the business of running a hospital. She said she would leave it up to others to figure out how to continue the service even if it was not financially sustainable.

This woman was not alone in citing Memorial's non-profit status as an expectation that it was perfectly acceptable that the hospital lose money. It was echoed time after time that being concerned about "profits" was tantamount to not being concerned about patients.

I know there are two sides to the story about the Memorial obstetric service.

But, I hope all of us in health care realize that there is only one way to look at the issue of our financial performance.

continued

Plain and simple, without a margin, there can be no mission. Or, said another way, if we do not realize a gain from hospital operations, i.e., a profit, we cannot continue to pay staff, maintain services, grow programs or invest in our facilities or technology. Without a positive gain from hospital operations or a profit, particularly for those like Care New England that lack a sizable endowment to cushion the impact of losses, institutions enter a steady decline and a certain road to failure.

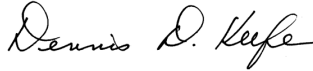
This is precisely why we have developed a plan to restructure Memorial Hospital. Despite our significant investments over the last three years, the hospital has faced reduced payments, increased competition and lower and lower utilization. We need to respond swiftly and decisively with a plan that stems the tides of losses, blunts the impact that these losses have on all of the Care New England organizations, and preserves Memorial's mission to serve its community with needed services.

We believe we must act out of consideration for the longer term and the greater good. This is our role as a health care organization, balancing the needs of many against the resources and the realities of today's health care environment.

Yes, we most certainly have work to do addressing the issues of the Memorial birth service supporters, and we look forward to the feedback from the thoughtful process organized by the RI Department of Health. Ultimately, I hope we can get to a place where we can assure the viability of all of our organizations and address the need of patients of the Memorial community.

Our strong future depends on it.

Sincerely,



Dennis D. Keefe
President and Chief Executive Officer



Care New England to host colorectal cancer awareness event at the Rhode Island State House

Join Care New England gastrointestinal health specialists at the Rhode Island State House this week for a special advocacy and screening event in recognition of Colorectal Cancer Awareness Month. Teams from Women & Infants and Kent hospitals will be on hand to address disparities and increase awareness about colorectal cancer screening in order to eliminate colorectal cancer as a major public health problem. The goal of the National Colorectal Cancer Roundtable is to have 80 percent of Rhode Island adults screened for colorectal cancer by 2018. The initiative encompasses the pledge of more than 690 organizations to commit to reducing colorectal cancer as a major public health problem for adults 50 and older.



Participating clinicians include, Christy Dibble, DO; Nnenna C. Okpara, MD; Mariam Fayek, MD; Nancy Botelho, RNP; Melissa Murphy, MD, MPH; Valentin Cristescu, MD; and John Issac, MD, of the Women & Infants Center for Women's Gastrointestinal Health and Kent Hospital Affinity surgeons.

DATE: Tuesday, March 22, 2016
TIME: 2 to 5 p.m.
PLACE: Rhode Island State House
Second Floor Rotunda
82 Smith Street
Providence, RI

For more information on the Center for Women's Gastrointestinal Health visit <http://talksyourhealth.com/colorectal-cancer-awareness>.



Women & Infants' researcher calls for more research into the benefits of medical marijuana use in oncology patients

A medical oncologist and researcher at Women & Infants Hospital recently published the results of a study examining the potential benefits from medical marijuana use in oncology patients.



"Medical Marijuana Use in Oncology," authored by Tina Rizack, MD, with Women & Infants' Program in Women's Oncology, appears in the most recent issue of the *Journal of the American Medical Society (JAMA)*.

Medical marijuana use is legal in 23 states, including Rhode Island, and the District of Columbia, which means more and more patients are questioning their physicians about the benefits and risks of use, Dr. Rizack says. Her research was prompted by this trend and her desire to have answers.

The article reviews the history, side effects and proposed mechanisms of action of marijuana and summarizes available literature regarding symptom relief and therapeutic value in the oncology patient.

"Marijuana in oncology may have potential for use as an anti-emetic, refractory cancer pain, and as an anti-tumor agent, but we need to pursue those benefits through further research," Dr. Rizack says. The article concludes that more research is needed in all areas related to the therapeutic use of marijuana in oncology. Much of the data to date, she notes, is based on animal studies, small trials or outdated research.

For more information, please call (401) 453-7520.

Breast Health Center at Kent receives accreditation

The Women & Infants Breast Health Center at Kent Hospital has been granted a three-year, full accreditation designation by the National Accreditation Program for Breast Centers (NAPBC), a program administered by the American College of Surgeons. Accreditation by the NAPBC is only given to those centers that have voluntarily committed to provide the highest level of quality breast care and that undergo a rigorous evaluation process and review of their performance.

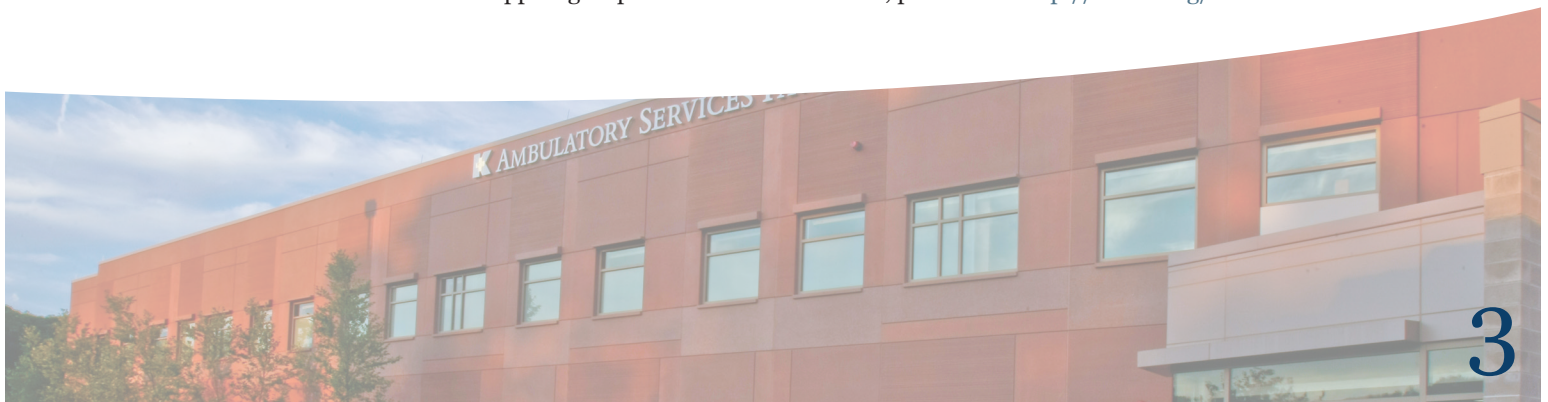
"We are extremely proud of the commitment to the quality care that we provide day-in and day-out at The Breast Health Center at Kent, and this accreditation is a reflection of the dedication that is consistently delivered to the patients and families of our local community," said Candace Dyer, MD, physician director of The Breast Health Center at Kent.

During the survey process, the center must demonstrate compliance with standards established by the NAPBC for treating women who are diagnosed with the full spectrum of breast disease. The standards include proficiency in the areas of: center leadership, clinical management, research, community outreach, professional education, and quality improvement. A breast center that achieves NAPBC accreditation has demonstrated a firm commitment to offer its patients every significant advantage in their battle against breast disease.

Receiving care at a NAPBC-accredited center ensures that a patient will have access to:

- Comprehensive care, including a full range of state-of-the-art services
- A multidisciplinary team approach to coordinate the best treatment options
- Information about ongoing clinical trials and new treatment options
- Quality breast care close to home.

The Breast Health Center at Kent is a unique collaboration with Woman & Infants Hospital that ensures comprehensive breast care to the women of our community. Joining the dedicated medical professionals at Kent with some of the nation's leading breast health experts from Women & Infants, The Breast Health Center at Kent provides a comprehensive array of services including: mammography, ultrasound, needle biopsies of the breast and breast MRI; clinical evaluation and treatment; fertility counseling; genetic counseling; social services; nutrition consultation and support groups. For more information, please visit <http://kentri.org/breasthealth>.



Memorial's 'Doctor is in' series continues

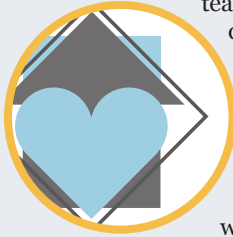
Memorial Hospital continues its "The Doctor Is In" Wellness Lecture Series on March 29th from 9 to 10:30 a.m., with a presentation titled "Colonoscopies and colon cancer information." Anthony Thomas, DO, chief of hematology/oncology at Memorial will give the lecture.

The free series is designed to benefit the community by offering the expertise of medical specialists and health care professionals in a relaxed, interactive setting. Advance registration is recommended. Call (401) 729-2459 to register or for more information.



VNA forms Accountable Care Organization Pod

The VNA of Care New England has formed an Accountable Care Organization (ACO) Pod (interdisciplinary team). The main goals of the VNA are very similar to Care New England's ACO Integra to provide quality care to patients and reduce hospitalizations. Integra monitors the patients throughout the entire care continuum, while the VNA monitors that patient for their period of illness requiring home health services.



The ACO Pod will utilize the Integrated Care Management Model (ICM) in planning patient care. ICM is a patient-centered model for the delivery of care in which the core is developing patient-centered goals. The VNA has completed two sessions of ICM training for visiting staff working in this Pod. There will be regularly scheduled interdisciplinary meetings which will be utilized to develop a comprehensive and impactful plan of care.

The management team at the VNA is working with Integra's director to determine methodology to manage, schedule and coordinate care, and allocate resources. The goal is to avoid the patient receiving calls and visits on the same day by clinicians within both the VNA and Integra. The VNA and Integra will be working together to design an integrated care plan based on best practices and the individual patient's goals that leverages the strengths of both organizations. 