



On any given day there is extraordinary clinical work taking place across our hospitals, through our community and home-based programs, and with countless direct patient care experiences.

This speaks to your dedication, and in an ongoing theme, your unwavering commitment to the community and each other. Sometimes it is easy to forget the lasting impact of the work or care provided here given the hectic pace of the day-to-day shuffle and the challenges of the moment. Even the simple things we might forget have a lasting effect on our patients and their loved ones—a reassuring conversation, a well-timed laugh, and just helping people to feel better.

Last week was no different. But the work of Care New England received some significant attention on some very important and timely issues that have far-reaching impacts. I will talk about those in a moment but simply put, I hope you never forget just how important your contributions are to the ongoing health and wellness of our community and just how much that is valued.

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Opioid epidemic hitting close to home—CNE leading the way in response

It's a tragic yet familiar story. The opioid epidemic once again hit close to home. With reports of a spike in overdoses, including heroin, over the previous weekend, attention turned to the epicenter—Kent Hospital. From March 24 to 27, there were a total of 16 overdoses reported in the state, with 11 being seen at the Kent ED. This information, gathered through the state's 48-hour reporting regulation, prompted the state Department of Health to convene community, health and law enforcement officials for an impromptu press conference held at Kent Hospital to address the alarming uptick. Kent was highlighted for its compliance with the reporting program by Health Director Dr. Nicole Alexander Scott. Dr. Michael Dacey, Kent president and COO,

noted at the event, "In the 25 years I've been practicing medicine, I've never seen something so significant."

And it's not just happening here in Rhode Island. Last week, a headline in *The Boston Globe* stated "Heroin use in US has sharply increased," while industry publication, *Modern Healthcare* had a cover story "Suburban providers feel the crush of heroin." Sadly, there are many, many more examples just like those. Despite these troubling headlines and increases in drug use, CNE can be proud not only of the frontline care provided but for being among the first in the state to provide Narcan to at-risk patients, while also leading the way in the use of recovery coaches in the ED setting.

“I hope you never forget just how important your contributions are to the ongoing health and wellness of our community and just how much that is valued.”

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The full continuum of addiction-related care is a true lead-by-example approach. The resources we provide whether it be at Butler, Kent or Women & Infants Hospital, The Providence Center, Anchor Recovery, or elsewhere is a bright light for those struggling with addiction. If you missed any of the coverage, click here to preview [The Providence Journal article](#) or the [NBC-10 story](#) and be sure to check out the item below about an important upcoming community education event in Bristol.



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Major funding headed to Women & Infants

I want to personally congratulate Women & Infants on the recent award of \$11 million in federal funding to establish a collaborative research effort to study an array of women's health conditions. I am extremely grateful to

our Congressional delegation for their dedication and support of the important work underway by researchers here. I have included the full announcement below for you to read. Again, great work!

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Important online training reminder

Under the terms of the CNE resolution agreement with the Office of Civil Rights, all members of our workforce—our paid employees, our volunteers, and credentialed physicians—must complete the modules on HIPAA Privacy and Security training. The OCR has allowed us a 60-day period from launch of the training for completion. Due to a system error, the initial launch of the training on Monday, March 27 had errors. Please be sure to delete and disregard the initial emails. The compliance team is working with the vendor to ensure that a single email is sent to each workforce member and that the links to the internet site will function. We believe these issues will be resolved this week.

Important notes:

- Workforce members who are employed will use their employee ID as their user name. For those who have multiple employment roles at CNE, you will receive a confirmatory email with your user name.
- Credentialed physicians who are not CNE employed should use their NPI. Due to system limitations in Internet Explorer, the link to training may not work. Use Google Chrome to begin the training.
- Classroom-based training is being offered for our facilities, dietary, and security staff, as well as for volunteers who may not have access to the internet.

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At The Table

I wanted to thank the wonderful group of staff from Kent Hospital who took the time to join me Friday for my At the Table lunch series. We covered a wide range of topics and a number of issues for follow-up. I was very impressed with the interest, dedication and commitment to our organization from everyone there. Thank you Kent!

This was the first At the Table session I've held this year. It is the continuation of a program I previously started and it serves as a great opportunity to hear from staff across the system. I personally find these opportunities important, eye-opening, and very informative. These lunches allow me the chance spend some time freely talking about

issues of importance to you and your colleagues, listen to your concerns, and follow up on your feedback. They are confidential and there are no managers present. I currently have two more sessions scheduled to date. The next one is planned for April 28 at Butler and May at Women & Infants. Each lunch is intentionally small, 10 to 15 people, but this size facilitates personal face-to-face engagement. I look forward to scheduling return visits and extending additional invites throughout our organization.



@ the table

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Sincerely,

Dennis D. Keefe

Dennis D. Keefe
President and Chief Executive Officer

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



Two CNE representatives to participate in opioid addiction panel

Bristol Health Equity Zone with support from Resources, Education, Support Together (REST), Anchor Recovery and East Bay Center is hosting “Opioid Addiction Panel Discussion” on April 12, 2017 from 6 to 8 p.m. at St. Mary’s Parish, 330 Wood Street, Bristol. The panel includes clinical experts, law enforcement professionals, policymakers and community members. Joining from Care New England are George O’Toole, manager of Anchor emergency department, and Dr. Kevin Baill, Butler Hospital’s inpatient intensive unit chief, president of East Side Recovery Services and a member of Governor Raimondo’s Overdose Prevention and Intervention Taskforce.



The panel will be moderated by Laurie MacDougall, cofounder of REST. For further information on the event, contact Laurie at (860) 952-4966. Bristol Health Equity Zone is a community-wide effort funded by the Rhode Island Department of Health to create innovative approaches that can reduce and manage chronic diseases, promote healthy lifestyles, assure healthy child development, and create environments where making healthy choices is easier.

RI delegation announces \$11 million to help Women & Infants Hospital bolster women’s health research



In an effort to expand research leading to potential advances for women’s health, U.S. Senators Jack Reed and Sheldon Whitehouse and U.S. Representatives Jim Langevin and David Cicilline announced that Women & Infants Hospital will receive over \$11 million in funding over five years through the National Institutes of Health (NIH) Centers of Biomedical Research Excellence (COBRE) grant program to boost interdisciplinary research related to women’s reproductive health. Through the program, Women & Infants will integrate the research of investigators who have primary appointments in pediatrics, obstetrics, and gynecology and establish a collaborative research environment to study a large number of women’s health conditions.

The Congressional delegation, which wrote a letter of support for the grant, noted that Rhode Island has now received over \$180 million of federal funding through the state’s eight COBRE and the Institutional Development Awards (IDeA) Network to further scientific research and economic development.

The delegation also noted that the award is being announced on the heels of President Trump’s proposal to cut NIH’s budget for next year by 20 percent, and their reported request for an immediate \$1.2 billion cut to the agency, which oversees groundbreaking, innovative medical research.

“I commend Women & Infants and its outstanding team of doctors, researchers, and health professionals for winning this competitive grant. This federal funding will provide researchers with the necessary resources to take on high-priority research objectives that will have lasting effects on women’s health care in Rhode Island and around the world,” said Reed, a member of the Appropriations Committee who helped include a \$2 billion increase for NIH medical research in the fiscal year 2017 Departments of Labor, Health and Human Services, and Education, and Related Agencies (Labor-H) Appropriations bill, bringing NIH’s annual funding up to about \$34 billion. “I will strongly oppose the Trump Administration’s short sighted cuts to scientific and medical research.”

“Congratulations to the researchers and medical professionals at Women & Infants on winning this federal funding to help improve women’s health care,” said Whitehouse. “We are fortunate to have Women & Infants providing exceptional specialized care to women and babies and conducting world-class research right here in Rhode Island. This award is another example of the important investments the National Institutes of Health makes in our local economy and in the future of health care.”

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“Women & Infants Hospital has provided Rhode Islanders with superior health care for years, and this \$11 million federal grant will build on that care by bolstering interdisciplinary research for women’s reproductive health,” said Congressman Langevin. “This competitive grant award is a testament to the commitment of the doctors and health professionals at Women & Infants, and this funding will support them in their ongoing research to better the lives of women in Rhode Island and across the country.”

“President Trump has proposed slashing funding for the National Institutes of Health (NIH) by \$5.8 billion in his budget outline, but this \$11 million grant award is a great example of how NIH is strengthening Rhode Island,” said Congressman Cicilline, who advocated for this funding. “This exciting research will pioneer new approaches to women’s reproductive health. It will make a difference in the lives of women and help to position Rhode Island as a leading center of research and innovation. Slashing NIH’s budget would be devastating for the health of people around the country and would do real harm to our economy. I am committed to fighting for robust funding for NIH, and I urge President Trump and Republicans in Congress to abandon this reckless proposal.”

“I’m so appreciative of the ongoing support of our congressional delegation. One of Women & Infants’ strengths is to advance innovation and discovery, as evidenced by the research being done through our COBRE for Perinatal Biology and now this COBRE for Reproductive Health, among other initiatives. This grant is a significant opportunity for us to continue our groundbreaking research and keeps us on the radar as a premier research institution, locally, nationally and across the globe,” said Mark R. Marcantano, president and chief operating officer, Women & Infants Hospital. “This investment in research is so important because it enables us to continue to recruit and retain the best and the brightest, and to demonstrate that the most advanced techniques and research are born and reside right here at Women & Infants Hospital. I congratulate Dr. Sharma and all of the professionals who will be part of this important research.”

Centers of Biomedical Research Excellence augment and strengthen institutional biomedical research capabilities by expanding and developing biomedical faculty research capability through support of a multidisciplinary center, led by a peer-reviewed, NIH-funded investigator with expertise central to the theme of the program. The centers promote collaborative interactive efforts among researchers with complementary backgrounds, skills, and expertise. Surendra Sharma, MD, PhD, Professor of Pediatrics at Women & Infants, will serve as the Principal Investigator for the COBRE for Reproductive Health, and much of the research will focus on the long-term impacts that pregnancy complications may have on a woman’s health and how complications suffered by a woman during pregnancy can offer a window into other future adverse health outcomes. Maureen G. Phipps, MD, MPH, chair and Chace-Joukowsky Professor of Obstetrics and Gynecology and assistant dean for Teaching and Research in Women’s Health at the Warren Alpert Medical School, professor of epidemiology at the Brown University School of Public Health, and chief of obstetrics and gynecology at Women & Infants Hospital and Care New England Health System, will serve as Deputy Director of the program.

CNE Joins Sen. Reed to discuss the impact of ACA repeal on behavioral health

In an effort to improve access to treatment for those suffering with mental illness and addiction, representatives of Care New England joined U.S. Senator Jack Reed, the Substance Use and Mental Health Leadership Council (SUMHLC) of Rhode Island, and advocates for mental health and substance abuse services from around the state for a wide ranging forum.

Under the Affordable Care Act (ACA), also known as “Obamacare,” 1.3 million people with serious mental health disorders and about 2.8 million people with substance abuse disorders gained coverage for the first time, providing them with better access to critical health services

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and treatment providers. There has been deep concern throughout the country that the Republican plan to repeal Obamacare and replace it with “Trumpcare” would lead to millions of vulnerable Americans losing insurance coverage and, with it, access to needed treatment. According to Sen. Reed, the Trumpcare plan would not only have harmed people’s ability to get mental health and addiction treatment, it would have cost Rhode Island taxpayers about \$200 million annually.

“Congress needs to take action to help families and individuals struggling with mental health and addiction. One of the steps we need to take is ending the stigma surrounding these issues, similar to the way we did for AIDS, because stigma is still a barrier to treatment and it is a barrier for investment. Second, we have to make the case that ensuring people have access to mental health and substance abuse treatment is good for public health and it is cost effective. Trumpcare was totally ineffective. If it passed, it would have shifted a heavy burden to states, cost taxpayers more in the long run, and more Americans could have ended up homeless, in crisis, in jail, or in the morgue,” said Reed. “The fact is funding for mental health and substance abuse services, particularly in the fight against the opioid epidemic, is totally inadequate. We beat back Trumpcare for now, but it is unacceptable that we’re talking about beating back cuts at a time when we really need to increase the national investment to improve access to comprehensive substance abuse treatment. This is about saving lives and strengthening our society.”

In December, Senator Reed helped pass the 21st Century Cures Act, which President Obama signed into law. This law directs \$1 billion over the next two years to help states combat the abuse of opioids, prescription drugs, and heroin. It also contains a key provision authored by Senator Reed to improve mental health services for young people and help prevent the tragedy of youth suicide. Overall, the law authorizes the federal government to award up to \$43 million annually to help states and non-profit institutions prevent youth suicide.

Deb O’Brien takes helm at The Providence Center

The Providence Center’s (TPC) Deborah M. O’Brien, BS, RN, MPA, has taken over as the new president, effective April 1, 2017. O’Brien is only the organization’s third president since its founding in 1969.



O’Brien joined The Providence Center in 1995 as director of quality improvement. She earned her bachelor of science in nursing in 1985 and masters in public administration in 1996, both from the University of Rhode Island. She previously held positions at South Shore Mental Health Center (Rhode Island) and Rhode Island Hospital.

“I’m honored to take on this new leadership role,” said O’Brien. “It’s very exciting to be part of The Providence Center, an organization that is so committed to innovation, new models of providing service, and new financing models. The organization is strong and getting stronger.”

“As part of taking on this new role, I’ve committed to visiting each of TPC’s 60 programs in April and May,” said O’Brien. “I look forward to talking to our staff and hearing about their concerns firsthand.”

TPC’s former president, Dale Klatzker, PhD, will be joining Care New England as its senior vice president of population health.



NBC News visits Memorial Hospital

Last week those at Memorial Hospital may have noticed a small film crew shooting around the halls. *NBC News* was on site interviewing Dr. Victor Pinkes, chief of emergency medicine, in regards to his research into alcoholism and substance abuse treatment. Interviewing Dr. Pinkes was NBC Weekend Today Show anchor Craig Melvin. Stay tuned for updates regarding the final air date and thanks to everyone in the Memorial Hospital ED for your cooperation!



Care New England presents safe patient handling and mobility symposium



Care New England will present the eighth annual Safe Patient Handling and Mobility Symposium on Monday, April 24 from 7:30 a.m. to 3 p.m. in the Malcolm and Elizabeth Chace Education Center, South Pavilion, Women & Infants Hospital. Topics include incorporating safe patient handling into injury prevention management programs, implementing a rounding program on a geriatric psych unit to reduce falls, performance improvement initiatives, ergonomics, and safe patient handling and mobility in labor and delivery.

A CNE panel and roundtable discussion will also be held. The cost is \$25 for Care New England employees and \$50 for non-employees. Continuing education credits are pending, find out more and [register online](#).

Research evaluates treatment of thyroid disease in pregnancy

Observational studies over the past 30 years suggest that subclinical thyroid disease during pregnancy may be associated with adverse outcomes, including a lower-than-normal IQ in offspring. The results of these studies led several professional organizations to recommend routine prenatal screening for and treatment of subclinical hypothyroidism in pregnant women.



New research, however, indicates that universal screening for and subsequent treatment of subclinical hypothyroidism does not result in improved health outcomes for mothers or babies. The research was conducted through the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development Maternal-Fetal Medicine Units (MFMU) Network and has been published this month in the [New England Journal of Medicine](#).

The research team concluded that, compared to no treatment, treatment for subclinical hypothyroidism or hypothyroxinemia during pregnancy did not result in significantly better cognitive outcomes in children through age five.

“The results of our study, the largest and most rigorous on this issue, do not support screening for subclinical hypothyroidism or hypothyroxinemia during pregnancy,” said Dwight Rouse, MD, one of the authors on the paper and the principal investigator for the MFMU at Brown University/Women & Infants Hospital. “Our results do not apply to women with actual hypothyroidism during pregnancy—such women should be treated during pregnancy, as treatment benefits them and their babies.”

The MFMU conducted two multi-center, randomized, placebo-controlled studies at its 15 centers, including at Women & Infants. They screened women with singleton pregnancies before 20 weeks gestation for subclinical hypothyroidism, characterized by a mildly high thyroid-stimulating hormone (TSH) level and a normal thyroxine (T4) level, and for hypothyroxinemia, characterized by low maternal free thyroid hormone (fT4) concentrations with TSH in the normal range.

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In separate trials, women were randomly assigned to receive levothyroxine, a commonly used medication to treat hypothyroidism, or placebo. Thyroid function was assessed monthly throughout the pregnancy, and children underwent developmental and behavioral testing for five years.

The research team found that treatment for subclinical hypothyroidism or hypothyroxinemia did not improve cognitive outcomes in children through five years and, moreover, did not improve obstetric or immediate neonatal outcomes.

The findings of the MFMU study support current American College of Obstetricians and Gynecologists (ACOG) recommendations against universal thyroid screening during pregnancy.

Rhode Island breastfeeding coalition annual conference

The Rhode Island Breastfeeding Coalition, in partnership with Women & Infants Hospital will present "Today's Tools for Tomorrow's Success" on Thursday, April 6 from 8 a.m. to 5 p.m. in the Malcolm and Elizabeth Chace Education Center.




The cost is \$135 and \$68 for nursing students. Continuing education credits are pending. Register online at <http://conta.cc/2nweBmI>.

Kent Hospital family medicine residents honored by The Rhode Island Academy of Family Physicians

Recently, four Kent Hospital family medicine residents were recognized during the Rhode Island Academy of Family Physicians (RIAFP) poster contest. Sarah Forsythe, PGY-3, showcased, "Patient Perspectives on the Impact of Obesity on Overall Health;" and Kara Kopaczewski, PGY-2, featured, "Prevalence of Hepatitis C and HIV Among Suboxone Patients at a Primary Care Clinic." Kara and Sarah's posters tied for first place in original research. Chris Loneygan, PGY-2, was awarded first place in case presentation for his research, "Distal Clavicle Osteolysis in a Female Weightlifter."



Yumi Aikawa, DO, PGY-2 was selected by RIAFP as Kent Hospital's Family Medicine Resident of the Year. RIAFP strives to promote the health of the patients, families and communities of Rhode Island by advancing the specialty of family medicine through education and advocacy. Congratulations to Sarah, Kara, Chris and Yumi for their awards and achievement in furthering the field of comprehensive health care dedicated to treating the entire patient. 



Care New England