

JANUARY 22, 2018 | VOLUME 8 | ISSUE 4



Thank you. Two words that in our haste to go onto the next task at hand we often forget to say. Likewise, in our effort to bring our best to our jobs every day, we don't hear the words. We just keep moving. This week, let's take some time to celebrate and recognize all the hard work you've all been doing to put Care New England and our operating units on the right path to improve quality, access, and service for our patients and their families—and in the process also improve our finances. We've undertaken a significant task, and you are all delivering exceptional results and coming together to achieve them.

Starting Thursday, there will be a series of gatherings and rounding efforts so we can all take a break to say and hear, "thank you."

So, later this week, I've partnered with the leadership at each operating unit to deliver to our employees a small treat that comes with a large dose of gratitude from me personally, and I am certain from all of leadership as well. Starting Thursday, there will be a series of gatherings and rounding efforts so we can all take a break to say and hear, "thank you." Thank you for your hard work. Thank you for your dedication. Thank you for your perseverance. Thank you for taking good care of our patients and their families. Thank you for pulling together and believing in each other. Watch for details on times and locations, and thank you to those who helped me pull this off!

With that same sentiment, I'd like to recognize the more than 150 primary care providers and specialists from the Integra Community Care Network who gathered at the Crowne Plaza in Warwick earlier this month for MedMixer IV and Integra's first all-POD meeting of the year.

Care retention remains a top priority across Care New England, and the MedMixer was an opportunity for Integra's primary care providers to network and learn about clinical advances as well as new programs and services. The all-POD meeting provided a more in-depth look at Integra's success during the past year and its growing national standing among Accountable Care Organizations. Following opening

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remarks by me, Dr. Albert Puerini, chairman of the Integra board of directors, and John Minichiello, executive director of Integra, several clinicians who are part of the Integra network delivered brief presentations, including:

James Greer, MD, Child/Adolescent Psychiatry – Discussed the need for substance use disorder treatment in Rhode Island, provided data on adolescent substance abuse and sources of treatment; and highlighted the success of recovery high schools like The Providence Center's Anchor Learning Academy.

Ambreen Ijaz, MD, Hematology/Oncology – Provided a review of guidelines and controversies in prostate cancer and lung cancer screening; and highlighted updates in hematology/oncology, including iron replacement therapy and the treatment of unprovoked venous thromboembolism.

Lucas Beffa, MD, General Surgery – Delivered an update on hernia surgery, focused on surgical approach (robotic vs. open vs. laparoscopic) as well as a summary of use of retromuscular mesh in hernia repair.

Ara Tachjian, MD, Cardiology – Provided updates on valvular disease, including the use of antibiotics for infective endocarditis and use of anti-coagulation; also summarized the use of sacubitril/valsartan in heart failure and discussed the 2017 guidelines for management of hypertension.

Integra's participating provider network includes Rhode Island Primary Care Physicians Corporation (RIPCPC), Care New England, South County Hospital, and employed and affiliated physicians. More information about Integra is available at <http://integracare.org>.



Thanks and have a great week!

Sincerely,

A handwritten signature in black ink that reads "James E. Fanale".

James E. Fanale, MD
President and Chief Executive Officer

ConvergenceRI
VIEW THIS WEEK'S EDITION HERE

QuitWorks-RI embedded into EPIC



QuitWorks-RI lets physicians easily connect patients who want to quit smoking with free counseling and other State tobacco treatment services. Any Rhode Island resident who uses tobacco, regardless of health insurance status, is eligible to participate. The ease of referring patients into the program has recently expanded, and physicians can now refer their patients directly within EPIC.

"The single most important thing all tobacco users can do for their health is quit smoking. Regardless of ability to pay, past quit attempts, or use of other cessation services, right now all patients who smoke can be enrolled in QuitWorks-RI. Participants in the program receive free, evidence-based counseling by phone from certified tobacco treatment specialists, along with clinically-proven safe and effective support tools and products—including up to a six-week supply of free nicotine replacement therapy (NRT) gum, patches, or lozenges while supplies last," said Erin Boles Welsh, program administrator of the Rhode Island Department of Health Tobacco Control Program.

Once a physician refers a patient, the QuitWorks-RI "quitline" staff reaches out to the patient by phone to begin the assessment and counseling process. Within two to three weeks, the referring provider receives a faxed report confirming whether QuitWorks was able to contact the patient and if the patient accepted services. After seven months, a follow-up report is sent to the referring physician regarding the patient's current smoking status, highlighting their long-term outcome.

"QuitWorks-RI provides primary care physicians with status reports, and referring is straightforward via online, phone, and now directly through Epic," said Joseph Diaz, MD, medical director for Integra. "In addition, patients can be referred more than once, as several attempts to quit smoking are often needed."

During each counseling session patients can expect to discuss their readiness and motivations to quit, gain knowledge of aids available to assist, develop a quit plan and set a quit date, continuously review quitting strategies, and discuss relapse prevention techniques.

Welsh emphasizes the impact Quitworks-RI has had thus far on Rhode Island residents, "Many health care providers who've connected smokers to QuitWorks-RI have seen patients welcome these valuable resources and get healthier."

Within EPIC, the referral to QuitWorks-RI can be found under the current order for AMB Referral for Smoking Cessation. Next, select "External" as class, then select Quitworks @ RI DOH as the location.

For more information on the program, visit <http://quitworksri.org>.

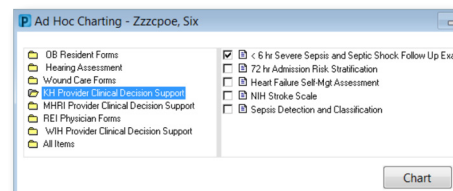
KENT

Tips for effective sepsis management

Sepsis and its complications impact six percent of all hospital admissions, and evidence-based treatment in the first three hours changes patients' lives—much like PCI revolutionized the care of heart attacks. At Kent Hospital, detection of sepsis and use of the Sepsis PowerPlans is already associated with a drop in length of time in hospital of 1.4 days.

The Agency for Healthcare Research and Quality (AHRQ) highlights three steps for effective management of sepsis: recognition, attentive treatment, and documentation.

- Recognition is enhanced using a screening tool, such as the St. Johns sepsis screen from Cerner (pictured here). While the EMR won't always be right, finding and treating sepsis early carries such an overwhelming benefit that false positives are considered well worth the effort.



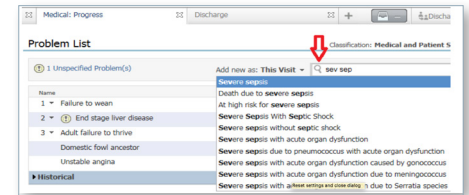
- Attentive treatment uses an evidence-based PowerPlan that automates time-critical treatments and testing. A reassessment as soon as the initial fluid bolus is complete, or in less than six hours, is required to reduce morbidity

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and mortality, and is tracked by CMS. This is easy with the Cerner “<6hr Severe Sepsis and Septic Shock Follow-up Exam.”

- Documentation drives the accuracy of care delivered by all members of the care team as well as the reimbursement for the care of the patient. With more accurate documentation comes more resources to care for all patients. Using Cerner’s ICD-10 Diagnosis List is an excellent way to find a very specific description of Sepsis (pictured here).



Sepsis include Drs. Jonathan Gates, John Gelzhiser, Erica Hardy, Sterling Malish, Diane RealMarini, Mark Salmon, Laura Shawhuges, and Roxanne Vrees. Interdisciplinary champions also include Alyson Burke, Sue Lasalle, Robert Martinez, and Linda Nelson. For questions, please reach out to any Sepsis champion. Moving forward, the team will be producing reports by provider on use of these PowerPlans and the sepsis follow-up form in patients with sepsis.

THE PROVIDENCE CENTER

The Providence Center begins SBIRT screenings

Beginning this year, The Providence Center will be implementing, “Screening, Brief Intervention, and Referral to Treatment (SBIRT),” an evidence-based practice designed to identify those who may have substance use disorders and help inform them of options for treatment. Funding for this project comes from two sources: a five-year grant from the Substance Abuse and Mental Health Services Administration (SAMHSA), and a three-year State Innovation Model (SIM) test grant from the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services (CMS).

The three major components of SBIRT include screening for risky substance use behaviors using standardized tools (AUDIT and DAST 10), a brief intervention using an evidenced-based algorithm to discuss risky substance use behaviors with patients, and a referral to treatment. SBIRT’s main goal is to improve the behavioral health outcomes in adults with substance abuse disorders by increasing access to screening services in primary care/health clinic settings, emergency departments, and the Department of Corrections.

“Our mantra is ‘we screen everyone,’” said Taylor D’Addario, BA, LCDP, manager of SBIRT at The Providence Center. “We are trying to normalize and integrate holistic health screening in highly populated settings like emergency departments.”

The Providence Center is responsible for managing SBIRT screenings in participating Care New England hospital emergency departments. The program is currently being implemented at Butler Hospital and will soon be at Kent Hospital.

WOMEN & INFANTS

Check out the Department of Ob/Gyn annual report



Each year, the Department of Obstetrics & Gynecology at The Warren Alpert Medical School of Brown University and Care New England’s Women & Infants Hospital publish an annual report. The department’s talented faculty members continue to be leaders in the field through a demonstrated dedication to and passion for innovation in clinical care, research, and education. All are focused on a collective mission to improve women’s health and the lives of women and their families.

Take a look at this year’s report <http://bit.ly/2DyedkB> (Note: Update your browser for the best viewing experience.)

Pharmacists recognized at society meeting



Congratulations to several pharmacists from Kent and Women & Infants hospitals who were recognized at the 49th Annual Installation Banquet of the Rhode Island Society of Health System Pharmacists (RISHP). Recognized as Health System Pharmacist of the Year was Michael Muller, PharmD, BCPPS, a clinical pharmacist specialist in neonatology at Women & Infants. This is the society's most prestigious award, honoring a health system pharmacist practicing in Rhode Island who has displayed outstanding qualities of leadership, initiative, and incentive in dedication to the ideals of pharmacy practice.

Muller was nominated by Tamatha Yeaw, PharmD, director of pharmacy at Women & Infants; Leslie A. Pires, PharmD, MS, manager of the 340B Program and Pharmacy Supply Chain at Care New England; and Linda A. Nelson, PharmD, BCCCP, FASHP, clinical pharmacy specialist at Women & Infants, who stated in the nomination letter, "Michael has become known as a subject matter expert in the pharmaceutical care of the neonate. He is a resource to Women & Infants Hospital and its extended neonatal network. Women & Infants pharmacists, as well as those from other institutions, call Michael for assistance when neonatal challenges arise. As a testament to his expertise, Michael achieved board certification as a Pediatric Pharmacy Specialist (BCPPS) in 2016...What distinguishes Michael from his peers is the leadership that he demonstrates in advocating for the care of these infants. In a decade of rapid change at Women & Infants and in health care, Michael has maintained a clear focus on patient safety and works tirelessly to provide tools to accomplish the highest quality of clinical care."

In addition, Ray Iannuccillo, PharmD, BCPS, was recognized as the Board Member of the Year. Iannuccillo also earned the Bill Pires New Practitioner Award, along with Kent Hospital's Sarah Hendrick, PharmD. This award is given to a RISHP pharmacist with less than five years of service in health system pharmacy who demonstrates professionalism and an interest in expanding the role of the pharmacist in patient care.

Melissa Previte, a pharmacy student at Women & Infants, earned the Robert Goulet Memorial Scholarship. This award goes to a University of Rhode Island student interested in hospital pharmacy with high scholastic standing and who shows enthusiasm for practice in the health system setting and the passion for patient care that Bob demonstrated in his practice. The nominee must submit an essay on their vision of the future of health system pharmacy practice.

The Rhode Island Society of Health System Pharmacists is a non-profit, professional association established to advance public health by promoting the professional interests of pharmacists practicing in hospitals and other organized health care settings. Visit their site at <http://www.rishp.org>.

CARE NEW ENGLAND

Influenza remains widespread in Rhode Island

- Please do not work if you are sick with flu symptoms. Though well-intentioned, working while sick places others at risk. Flu usually comes on suddenly with symptoms that may include fever, chills, sore throat, cough, runny nose, body aches, headache, and sometimes nausea or vomiting. You may return to work 24 hours after your fever has been gone while off fever-reducing medicines, and you are able to control your cough and secretions.
- If you are working with minor cold symptoms, please wear a mask to avoid spread to others. Colds usually have gradual onset of symptoms such as stuffy nose, cough, and sore throat, but rarely other flu symptoms. Stay home if you are unable to control cough or secretions.
- Unvaccinated workers must wear a mask whenever there is potential for direct contact with a patient, even when feeling well. The mask must be worn in patient rooms as well as public areas where patients and families are present.



Gastrointestinal (GI) illness or "stomach bug" is also circulating in the community.

- Please do not work if you have diarrhea or are vomiting due to acute GI illness. Some GI illnesses are highly contagious, and outbreaks in health care facilities occur easily. You may return to work once you are certain that symptoms have resolved.
- Clean your hands frequently. You may continue to shed virus even when feeling better. Meticulous hand hygiene is required to prevent spread to others.

If you have any questions about influenza or GI illness, contact Occupational Health or Infection Prevention.

Care New England is partnering with Rhode Island College Institute for Education in Healthcare

Based on high volume of Care New England and Memorial Hospital applicants, Rhode Island College Institute for Education in Healthcare will be offering the Community Health Worker Training Program onsite, specifically for CNE incumbents starting in February. Care New England will be hiring community health workers at Women & Infants Hospital, Kent Hospital, Butler Hospital, and The Providence Center, as part of The Centers for Medicare and Medicaid Services grant. To learn more, please attend a CNE information session:

- **January 23, 2018 – 10 to 11 a.m.** at Kent Hospital, Auditorium.
- **January 24, 2018 – 2 to 3 p.m.** at The Providence Center, Oster Board Room.
- **January 25, 2018 – 12 to 1 p.m.** at Women & Infants Hospital, Auditorium 1.
- **January 26, 2018 – 8 to 9 a.m.** at Butler Hospital, Ray Hall Backroom.

Training Details

This is a free eight week training program designed to give participants the opportunity to learn the skills, knowledge and responsibilities of a community health worker. A community health worker serves as a connector between members of their communities and health care providers and social services to ensure people are gaining access to the appropriate health care services and care. At the end of the training participants will have completed the required instructional hours to become a certified community health worker.

Community health workers work with individuals and the community to increase health care knowledge, and self-sufficiency through engagement, community education, social support, and advocacy.

This training will introduce participants to the core competencies required certification, basic advocacy skills to help families navigate the health care system, and guide them to eliminate social and cultural barriers to receiving the care they need.

Applicants interested in this training should send their resume or inquiry to Bonnie Heroux at bheroux@skillsforri.com by February 2.

**For collective bargaining unit employees, contact your local union representative for additional information regarding paid release time if applicable.* 