Good day!

Strong medicine stands on three pillars—outstanding clinical care, a commitment to training the next generation of caregivers, and a commitment to new discoveries through research.

Across Care New England, our clinicians have an unwavering focus on providing high quality health care for patients and their families. They work tirelessly with students, residents and fellows in training the doctors of tomorrow as well as future nurses, pharmacists, therapists, and more. And many of these same clinicians also split their time between clinical practice and research, working independently and in teams with one common goal—to advance medical science.

Last year Care New England researchers earned a total of more than $23 million in research funding in such areas as behavioral health, obstetrics and gynecology, general medicine, addictions, pediatrics, oncology, cardiology, infectious disease, memory and aging, movement disorders, and more.

One of the cornerstones of our research endeavors is our work improving the care and outcomes of high-risk pregnant women and newborns, especially very low birth weight infants. For 30 years, much of this work has been organized and conducted through two prestigious networks of the National Institute of Health’s (NIH) Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)—the 12-center Maternal Fetal Medicine Units Network (MFMU) and the 15-center Neonatal Research Network (NRN).

Today it was announced that, following a rigorous process, Women & Infants Hospital and The Warren Alpert Medical School of Brown University have received notification that their participation in both research networks has been renewed for another five-year cycle that begins this year. Women & Infants/Brown is one of only a handful of sites nationwide—and the only one in New England—to be part of both networks simultaneously.
What does involvement in these networks mean? Consider this—as a result of research conducted by the MFMU network, including at Women & Infants/Brown, it is now standard of care in the United States to:

- Use weekly 17-alpha hydroxyprogesterone caproate to prevent repeat preterm birth.
- Administer antibiotics to women with preterm premature rupture of membranes to improve neonatal health.
- Give women in early preterm labor magnesium sulfate to lower the chance that their baby will suffer from cerebral palsy.
- Treat mild gestational diabetes to improve maternal and neonatal health.

And, treatments that have been pioneered in NRN trials to help newborn infants include:

- **Therapeutic hypothermia:** Trial demonstrating that cooling the brain from a normal temperature to 92.30°F for three days is the only treatment to be of benefit for infants with encephalopathy, a serious brain condition at birth.
- **Targeted oxygen saturations:** Investigation into the risks and benefits of maintaining oxygen levels either high or low in extremely preterm infants requiring supplemental oxygen.
- **Aggressive phototherapy:** Research demonstrating better outcomes of extremely preterm infants when phototherapy for yellow jaundice was used aggressively compared to conservative use.
- **Vitamin A supplementation:** Administration of vitamin A over the first month of life decreased the risk of Bronchopulmonary Dysplasia (BPD, a form of chronic lung disease) among extremely low birth weight infants.
- **Prophylactic Indocin:** Administration of low doses of Indocin (similar to aspirin) in the first 24 hours of life reduces the extent of severe intracranial hemorrhage among extremely low birth weight infants.
- **Inhaled nitric oxide:** This trial helped clinicians understand when to start nitric oxide therapy for serious conditions affecting the circulation to and within the lungs among infants born at term.

The result of this important work? Healthier mothers and babies!

I offer my sincerest congratulations to Dwight Rouse, MD, of the Division of Maternal-Fetal Medicine at Women & Infants Hospital, professor of obstetrics and gynecology at the Alpert Medical School, and the Brown/Women & Infants principal investigator for the MFMU; and Abbot Laptook, MD, medical director of Women & Infants’ neonatal intensive care unit (NICU), professor of pediatrics at the Alpert Medical School, and principal investigator for the Women & Infants/Brown NRN—and all those involved with the MFMU and the NRN. And I thank all of the investigators across Care New England for continuing to push the boundaries of discovery.

Continue to do great things—and have a great week ahead.

Sincerely,

Dennis D. Keefe
President and Chief Executive Officer
Elizabeth Howard named director of nurse midwifery

Congratulations to Elisabeth D. Howard, PhD, CNM, FACNM, who has been named the director of nurse midwifery in the Department of Obstetrics and Gynecology at Women & Infants and The Warren Alpert Medical School of Brown University.

Dr. Howard joined the faculty and has been a clinical teaching associate at Women & Infants and Brown since 2004. She was promoted to assistant professor (clinical) in 2008. A graduate of William Smith College in Geneva, NY, Howard completed her midwifery training at the Yale University School of Nursing and her PhD in nursing science from Vanderbilt University School of Nursing. She has served as interim director of midwifery since 2014.

“Dr. Howard is a highly valued member of our department and is recognized for her clinical experience, her national leadership, her dedication to teaching, and her effective, collaborative leadership style,” said Dr. Maureen Phipps. “She has made significant contributions to enhancing the national recognition of the midwifery service at Women & Infants Hospital as an academic model of inter-professional education and clinical care, working collaboratively with physicians, advance practice nurses, and every member of the care delivery team.”

The mission of the nurse midwifery program is to support the educational goals of Brown University medical students and obstetric residents at Women & Infants Hospital regarding basic knowledge and skill acquisition in both obstetric triage and low-risk intrapartum care, including educational workshops.

The program further augments the clinical services provided by obstetric residents within the Department of Obstetrics and Gynecology by providing timely and expert care within the obstetric service—i.e., labor and delivery, operating room, maternal-fetal medicine, gestational diabetes clinic and obstetric triage.

The nurse midwifery program advances the academic mission of the Department of Obstetrics and Gynecology by participating in national and international presentations, publications and research projects advancing the scope of nurse midwifery.

Memorial resident earns first place in statewide research competition

Somwail Rasla, MD, a second-year internal medicine resident at Memorial Hospital of Rhode Island, Alpert Medical School of Brown University, was awarded First Prize in the Resident/Fellow Podium Forum at the American College of Physicians (ACP) Rhode Island Chapter Scientific Meeting which took place on March 30, 2016.

From 100 abstracts, seven residents were chosen to compete in the Podium Forum. As first prize recipient, Dr. Rasla will be invited to attend the 2017 National ACP Internal Medicine meeting as a guest of the Rhode Island Chapter and will be entered into the 2017 national poster competition.

Dr. Rasla’s presentation, “Quality Improvement for Amelioration of the Relevant Use of Electrocardiographic Monitoring in a Community-Based Teaching Hospital,” detailed a quality improvement project at Memorial Hospital that studied the use of non-ICU telemetry with the goals of improving patient safety and reducing cost.

This project is the result of the Internal Medicine Residency Program’s quality improvement curriculum. Starting in the intern year, residents are taught the essential elements of quality improvement through seminars, online modules, and self-directed study. The residency program was awarded a Walmart Community Grant earlier this year to purchase blood pressure cuffs as part of a QI project to improve outcomes for patients with hypertension.
TPC: Working to advance recovery services for state’s youths
There’s some good news for advocates of youth recovery in Rhode Island. Pending legislation in the RI House and Senate would give recovery high schools in Rhode Island a similar level of support as in Massachusetts, making it easier for students struggling with substance abuse to access a sober environment in which to reach their recovery goals.

This bill would:
- Remove school district approval from the enrollment process for recovery high school students.
- Require the transfer of the per pupil core instructional amount from the district.
- Require RI to annually provide no less than five hundred thousand four dollars ($504,000) to each recovery high school.
- Reduce burden on local school districts.
- Create a sustainable funding mechanism for recovery high schools in RI.

At a recent RI Senate hearing, some powerful testimony was given on behalf of the bill. “RI leaders have identified improvement in student outcomes, and access to higher education and good jobs as a priority for our state,” said TPC’s Community Relations Manager Lisa Tomasso. “The Providence Center wants to make sure we are supporting all students in that endeavor. Access to and sustainability of recovery high schools is an important part of that success for adolescents living with a substance use disorder.” Speakers also included bill sponsor Sen. Louis DiPalma and Anchor Learning Academy parent Bill Garcia.

Care New England pharmacists join in State House event
The pharmacists of Care New England participated in the 13th Annual Face of Pharmacy event at the State House. The Face of Pharmacy brings pharmacists, pharmacy students, college faculty and professional pharmacy organizations together to allow legislators to “see” pharmacy practice first-hand and support legislative changes to permit wider adoption and implementation of clinical pharmacy services.

Demonstration tables provided free services to the legislators such as hypertension and chronic disease screening, body fat analysis, and medication therapy management. Other tables highlighted progressive and successful practices of pharmacy in the state, such as Care New England’s table, highlighting addiction recovery resources throughout our system, and our naloxone distribution program. The CNE pharmacists Marco DelBove (Memorial), Linda Nelson (Women & Infants), Christopher Maxwell (Butler), and Alicia ZuWallack (Kent) represented the health system, and also provided legislators with medication bubble-packed M&M candies to help explain how pharmacists review physician orders and implement technology like barcode scanning to optimize medication safety in the hospital setting.

The event culminated with speaker presentations in the Capitol Rotunda. Leaders from all facets of pharmacy presented brief remarks on the successes and challenges facing pharmacists this legislative session. Alicia ZuWallack, also president of the Rhode Island Society of Health System Pharmacists, presented along with Lt. Gov. Daniel McKee; Lynn Pezzullo, president of the RI Pharmacists Association; Kelly Orr from the Board of Pharmacy and URI College of Pharmacy; and pharmacy student Katherine Corsi.

Shown here are Alicia ZuWallack from Kent Hospital, Christopher Maxwell from Butler Hospital and Marco DelBove from Memorial Hospital.
Celebrate the gift of giving
The week of April 10 to 16, 2016 is National Volunteer Week! Care New England is joining organizations across the country in recognizing the extraordinary impact of volunteers on our mission and programs.

During the last year, more than 1,200 volunteers from the community extended their time, talents and caring spirits in support of our staff, patients and visitors throughout our Care New England operating units. And let us not forget the efforts of our employees who have engaged in service and fundraising for an endless number of good causes and organizations throughout our community.

Please join the Volunteer Services departments across Care New England in saying a special “thank you” to the volunteers you interact with during the week—and throughout the year!

VNA of Care New England Hospice Care to hold spring memorial ceremony
The VNA of Care New England Hospice Care Program will hold its annual spring hospice memorial at the Warwick Country Club in Warwick at 6 p.m. on Tuesday May 10, 2016. This celebration of life will include candlelight, music, and a sharing of memories through photographs and remembrances for individuals who have lost loved ones.

“We look forward to once again gathering with members of our community for this wonderful, warm and caring tribute to lost loved ones,” said Kathleen Peirce, vice president of clinical operations, executive director, chief nursing officer, VNA of Care New England. “The VNA of Care New England is dedicated to the care and comfort of our patients and their families, and this event is a rewarding and meaningful way for us to help further capture the memory and spirit of these very special people.”

Photos of loved ones are encouraged to be submitted for the slideshow of the evening, even if you are unable to attend the event. Please submit photos, along with the name of the individuals pictured, in any of the following ways:

- Electronically to Kiel Mitchell at KWMitchell@vnacarenewengland.org.
- Mailed to the VNA office at 51 Health Lane, Warwick, RI 02886, Attn: Kiel Mitchell.
- Dropped off at the VNA office prior to April 22.

Hard copy photos will be returned after the remembrance. Please RSVP for this event by April 29 by calling (401) 737-6050 or by emailing KWMitchell@vnacarenewengland.org. Music will be provided by the Ocean State Women’s Choir. Refreshments will be served following the service.

Kent honors Daisy Award winner
Kent Hospital recently presented Jane LaManna, RN, BSN, OCN, Kent Infusion Center, with the winter 2016 DAISY Award. The award is part of the DAISY Foundation’s program to recognize the above-and-beyond efforts performed by nurses.

Jane was nominated by a patient, Cheryl Pertuso, who wrote, “I have been a patient at the Infusion Center for over four years. During that time my treatment has changed and it is very frightening at times. Jane is always there for me, even when I’m not her patient. She checks in on me, explains the process and reassures me. She has come to my rescue many times and treats me like a member of her family. I look forward to my ‘spa’ days at the Kent Hospital Infusion Center.”

“It is a pleasure to recognize Jane for all of her hard work and dedication to her patients and Kent Hospital,” said Rebecca Burke, RN, MS, NEA-BC, senior vice president patient care services, chief nursing officer.
care services, chief nursing officer at Kent Hospital. “In Jane’s nomination you can feel the appreciation of the patients as they explain how they were comforted to have Jane as their nurse. We strive for the best patient care here at Kent Hospital and Jane demonstrated that. Thank you, Jane.”

The not-for-profit DAISY Foundation is based in Glen Ellen, CA, and was established by family members in memory of J. Patrick Barnes. Patrick died at the age of 33 in late 1999 from complications of Idiopathic Thrombocytopenic Purpura (ITP), a little known but not uncommon auto-immune disease. The care Patrick and his family received from nurses while he was ill inspired this unique means of thanking nurses for making a profound difference in the lives of their patients and patient families.

Nurse Profile: Focus on The Providence Center’s Deb O’Brien

Currently the vice president and chief operating officer at The Providence Center, Deb O’Brien didn’t begin her journey in business school; she started as a nurse. A lifelong Rhode Islander, Deb has been at TPC for more than 20 years and has been in the behavioral health field for more than 30. Deb’s interest in health care started at the age of 12, when her father passed away from a heart attack at the age of 41 and she decided she wanted to help people live a healthier life. When she was in high school, her mother was a nursing assistant in a pediatrician’s office, where Deb started working with physicians to help with cardiac research. “I had mentioned that I wanted to work in health care, and the pediatrician convinced me that nursing was a great career that I’d be good at.”

She enrolled in the nursing program at the University of Rhode Island and worked as a nursing assistant at Rhode Island Hospital on weekends. After graduation, Deb started her career as a staff nurse there, but enjoyed her nursing school rotation at Butler and decided to make a switch. “My friends had always told me I was a good listener, and I noticed people generally don’t talk about their problems. I wanted to help people shape their lives differently and communicate about their issues.”

After working as a staff nurse and holding several management roles, Deb decided to pursue her master’s degree in public administration at the University of Rhode Island. Her experience with accreditation brought her to The Providence Center where she started looking for ways to improve clinical care. Deb was named chief program officer in 2004, became chief operating officer in 2009 and was named a vice president in 2012. Deb is the de-facto chief nursing officer for The Providence Center, and has also been involved with a number of boards and professional affiliations, including URI’s Nursing Advisory Board and About Families, Inc.

Deb actively encourages nurses to seek out leadership positions, and has found that the nursing field provides very practical training for an executive role. “The two biggest skill sets that nursing imparts are the ability to multi-task and prioritize, which are extremely helpful for most jobs. But while you’re doing all that, you also learn how to see the bigger picture as it relates to the whole patient, which is a crucial aspect of management.”

The knowledge and leadership skills Deb learned as a nurse have helped The Providence Center become an innovator in behavioral health care management nationwide. Her advice for nurses who want to move up: “Understand that health care is a business, and know the importance of data management when it comes to treatment practices, especially as population health moves forward. It’s something they don’t teach you in nursing school.”