Those enrolled in Integra@Home will also benefit from Integra’s Complex Care Management Program, which provides patients with ongoing access to a nurse care manager, social worker, and other resources depending on their individualized needs.

While our system-wide work regarding operational improvements continues to show progress and we move towards a potential Brigham Health/Partners acquisition, it’s important to highlight initiatives showcasing our collective understanding and efforts around the changing health care landscape. A clear example of this is the Integra@Home program, launched thanks to a grant received from the Institute of Healthcare Improvement (IHI) and West Health to implement a solution for unplanned acute events in older adults. Integra@Home began as a pilot of a “Hospital at Home” program in January 2018.

Integra is one of only six Accountable Care Organizations (ACOs) nationally to receive this grant, and the approach of Integra@Home represents a cutting-edge innovation in patient-centered care with the goal of minimizing hospital admissions and improving patient outcomes. Importantly, it allows patients, if they so choose, to receive care in the comfort of their own home. To date, only a handful of health care organizations have launched similar programs.

While there are some eligibility requirements (Medicare or Medicare Advantage insurance, 80 years of age or older, caregiver living at home, or available during a hospital at home episode) those enrolled in Integra@Home will also benefit from Integra’s Complex Care Management Program, which provides patients with ongoing access to a nurse care manager, social worker, and other resources depending on their individualized needs. While being cared for during an Integra@Home acute episode, the care team will include home visits by a geriatrician, Lidia Vognar, MD, and an experienced physician assistant, Stephanie Potts, PA-C, as well as wellness checks and urgent visits by trained community paramedics to help provide immediate care. The patient’s primary care physician is aware of and involved during these care episodes, and the team focuses on care that is aligned with each patient’s goals of care.

As always, success is a team sport. To ensure the outcomes of this program are positive, Integra is partnering with the VNA of Care New England, Women & Infants’ laboratory services, Kent Medical Equipment, Bioscript (infusion services), Genoa Pharmacy, and community paramedics via Professional Ambulance to implement this effort.
Integra is hoping to enroll between five and 25 patients before the end of the calendar year. Over the next few months, the Integra@Home team, led by Ana Tuya Fulton, MD, FACP, AGSF, executive chief of geriatrics and palliative care for CNE and medical director for Integra, and Ruth Scott, RN, BHA, director of care management for Integra, will continue to meet with primary care providers to identify patients who are a fit for the program.

If you have a patient who you believe would benefit from Integra@Home, please contact Dr. Fulton (430-3803 or AFulton@CareNE.org) or Ruth Scott (430-2170 or RScott@Carene.org). You can also learn more about the program by visiting http://integracare.org/patients/integra-at-home.cfm.

Have a great week ahead and thank you for all of your hard work.

Sincerely,

James E. Fanale, MD
President and Chief Executive Officer

This September the VNA of Care New England graduated its second class of New Graduate Home Health Nurse residents at their home office in Warwick. The residency program, a rarity in the home health arena, is designed to close the education to active practice gap through increased, specialized patient care experience.

“In a study conducted with more than 5,000 nurse managers across the country, participants reported that the skills new grads lack are delegation of tasks, the ability to anticipate risk, the ability to prioritize, the ability to keep track of multiple responsibilities, and conflict resolution,” said Lisa DiMaria, PhD, nurse residency program manager and program preceptor. “These are the skills that are developed and nurtured over time, and they are the skills that are key components of our residency here. The residents discuss their cases with not only me, but with many of our other clinical experts here at the VNA.”

Over the course of the residency, the five graduates—Lydia Dorsey, RN; Melissa Jean, RN; Julie Lee-Alvarez, RN; Jesmel Ocasio, RN; and Brenda Vanner, RN—conducted more than 4,000 patient visits. “Whether in the acute care or home care setting, the new grad is expected to make quick decisions and utilize clinical judgment and reasoning,” said DiMaria. “This requires pattern recognition, which occurs only after encountering many patients at different phases of illness.”

During the graduation Kathleen Peirce, RN, MS, vice president of operations, executive director, and chief nursing officer of the VNA of Care New England, also welcomed the incoming class, who attended the ceremony to hear firsthand from the graduates about the challenges and professional growth they gained through this experience. The program has further expanded providing two of the six incoming residents the opportunity to specialize in hospice care. All of the graduates have chosen to continue their career with the VNA of Care New England. “This residency program brings an energy and excitement to our agency,” said Peirce in speaking to the new graduates. “I hope that you continue to seek out the resources and opportunities that are here and ready for you. Congratulations to all!”

2018 GRADUATES

Lydia Dorsey, RN, of Westerly, received her bachelor’s degree in biology from the University of Rhode Island in 2013 before going on to receive her bachelor of science in nursing from Rhode Island College in 2016. Throughout her college years Dorsey worked as nursing assistant, which influenced her decision to concentrate on home health. “Before coming to this program, I had previously only worked with patients in a facility setting, and I decided that I wanted to be a part of the process that helps keep people out of the hospital and in their homes,” said Dorsey. “I think that the future of health care is home care.” Dorsey also stated that the residency program truly provided the structure needed to transition from a new grad to an effective home care nurse.

2018 GRADUATES (continued)
Melissa Jean, RN, of North Smithfield, received her associate degree in nursing from the Community College of Rhode Island and is currently pursuing her bachelor of science in nursing at Southern New Hampshire University (SNHU). Prior to diving into the world of nursing, Jean was a stay-at-home mom for 13 years. “This residency has allowed me to learn and grow with a support system there every step of the way,” said Jean. “The VNA of Care New England makes you feel like you are part of a family. Someone is always there to lend a hand, help with a challenge, or give you the reassurance you need as a new nurse.”

Julie Lee-Alvarez, RN, of Cranston, received her certificate in nursing from St. Joseph’s School of Nursing in 2017 and is currently pursuing her bachelor of science in nursing at SNHU. Lee-Alvarez brought a unique background to the residency program as she worked as a pharmacy technician for nine years and also held a bachelor’s degree in graphic design. “I enjoy working within the community and find direct patient care to be very rewarding,” said Lee-Alvarez. “I’m thankful for this opportunity to work in home care. Every day is an adventure!”

Jesmel Ocasio, RN, of Cranston, received her associate degree in nursing from the Community College of Rhode Island and is currently pursuing her bachelor of science in nursing at the University of Rhode Island. Ocasio was already a familiar face at the VNA as she worked as a nursing assistant before enrolling in the residency program. “I’ve always had an interest in home care,” said Ocasio. “This program allowed me to expand my knowledge, critical thinking, and prioritization skills.”

Brenda Vanner, RN, of Coventry, graduated with her bachelor of science in nursing from Rhode Island College and pursued home health after having a career as a registered optician. “I am able to get a true sense of my patients’ needs by being in their environment. Patients are happier when they are home,” said Vanner. “The relationships we establish are far reaching—our patients extend the trust they have for us as their caregivers to the agency and to Care New England as whole. I like to think it strengthens our community.” Vanner also explained that the journey to being a competent nurse certainly has its challenges, but DiMaria and the experts at the VNA were there to support her along the way. “Knowledge is acquired over time,” said Vanner. “This residency provided the support I needed to achieve that goal.”

Each of the graduates echoed sentiments of thankfulness for the unique opportunity to take part in a home care residency program and for the VNA staff who ensures the program trains a capable, confident, and compassionate group of home care nurses.

Thank you to our manager Lisa DiMaria and the rest of the staff at the VNA who were all an essential part of helping us transition into our roles as home care nurses.

Thank you Lisa DiMaria for all that you do! You are amazing! Thank you to everyone at the VNA of Care New England for all your help and guidance.

Thank you Lisa for your guidance and support!

Pregnant and postpartum women in Rhode Island to have increased access to behavioral health screenings

The number one medical complication of pregnancy and childbirth for mothers is depression and/or anxiety, with one in seven women suffering from a mood disorder during pregnancy and the postpartum period. Further, substance-use disorder remains one of the most pressing public health issues in Rhode Island, and pregnant and postpartum women are not immune. Each of these health issues is treatable, but the key to successful outcomes is proper screening so treatment can begin.

Toward ensuring that pregnant and postpartum women are properly screened, the Health Resources and Services Administration (HRSA), an agency of the U.S. Department of Health and Human Services, has recently awarded the Rhode Island Department of Health a five year, $650,000 per year grant in partnership with the Center for Women’s Behavioral Health at Women & Infants Hospital. Together, they will establish a centralized resource to assist health care providers in screening and treating pregnant and postpartum women who have behavioral health conditions.
Margaret M. Howard, PhD, is division director of the Center for Women’s Behavioral Health and founder of the Day Hospital at Women & Infants Hospital, the nation’s first mother-baby perinatal psychiatric partial hospital program. She has long been an advocate for mental health screening in pregnant and postpartum women and recently received the 2018 Leadership Award from the American Psychological Association’s Committee on Women in Psychology.

"Many people, including health care providers who treat pregnant and postpartum women, don’t realize how common mood disorders are and that they can affect any woman. Postpartum depression cuts across social, economic, geographic, racial, and ethnic lines," said Dr. Howard. "While there are risk factors for developing postpartum depression, the postpartum period (up to one year after delivery) is the most vulnerable time in any woman’s life to come down with a mood or anxiety disorder. This is exactly why screening is so important.”

According to the Rhode Island Department of Health, the overarching goal of the grant is to improve the mental health and well-being of pregnant and postpartum women and, thereby, their infants’ social and emotional development through increased access to affordable, culturally and linguistically appropriate treatment and recovery support services.

“The period of time just before and after a family welcomes a baby is one of excitement and hope, but it can also be one of the more vulnerable periods in a woman’s life. Among the many challenges that women can face are depression during pregnancy, post-partum depression, and substance-use disorder. For each of these issues, broad, comprehensive screenings programs are a key to successful treatment,” said Director of Health Nicole Alexander-Scott, MD, MPH. “This partnership will allow us to get vital screening services to women throughout the state and will allow us to focus on critical risk factors, such as experiencing stressful life events, being a teen mom, and having a history of depression. Working together, we can get every woman and family in Rhode Island the supports they need to ensure their health and wellness during every phase of life.”

This was a competitive grant and only seven were awarded nationally. The grant proposal included letters of support from Rhode Island Medicaid and the Department of Behavioral Health, Developmental Disabilities, and Hospitals (BHDDH).

Anchor Recovery to participate in research with Brown University

Anchor Recovery will join Brown University and Rhode Island Hospital to conduct the country’s first randomized trial of a peer-based recovery intervention for patients with a high risk of overdose. The four-year trial, funded by an $800,000 grant from the Laura and John Arnold Foundation, will evaluate the effectiveness of peer recovery coaching and social work interventions in the emergency department.

The Anchor ED program connects state-certified peer recovery support specialists, or coaches, with individuals in Rhode Island emergency rooms that have suffered an overdose. The program is the first of its kind in the country, and works with every hospital in the state. “We have seen firsthand the power of peer support, and are pleased that Brown has taken a lead in studying the effectiveness of peer recovery coaching in hospital emergency departments,” said Anchor Director Deb Dettor.

“Peer recovery support programs are a vital part of our fight against the overdose epidemic in Rhode Island,” Tom Coderre, a senior advisor to Rhode Island Governor Gina Raimondo said in the press release. “We hope that this randomized controlled trial confirms these programs are effective at connecting people with lifesaving resources and anticipate the results will encourage other states to undertake similar programs.”

Dettor was recently a participant in a National Expert Panel at SAMHSA in Washington DC that reviewed research and evaluation of recovery support services being offered across the country. “We are excited about the research underway to identify best practices in the field of peer recovery support, and believe that these types of services are effective in helping more people achieve and sustain addiction recovery,” said Dettor.

For more information, visit https://providencecenter.org/services/crisis-emergency-care/anchored.
Care New England wins HealthStream award

HealthStream recently presented Care New England with an Excellence through Knowledge award in the “Provision of Care” category. CNE achieved the highest national completion percentage and score rate for the Provisioning of Care modules that are part of the HCCS library.

The HealthStream Awards of Excellence acknowledge exceptional performance achieved by health care organizations, spotlighting innovative programs and superior leadership that support organizational excellence, workforce development, patient experience, employee engagement, and more. For a hospital to qualify for an Excellence through Knowledge award, it must achieve a minimum of 300 unique annual mandatory course completions.

HealthStream CEO Robert A. Frist, Jr. said, "We applaud Care New England’s high-level commitment to excellence in health care and are pleased to recognize their achievement through our presentation of an Excellence through Knowledge award."

Dr. Fanale visits each organization for October Town Hall series

The following Town Meetings have been scheduled. Please feel free to attend whichever day/time is most convenient.

Monday, October 22 | The Providence Center | 530 North Main Street, Community Room | 8:30 a.m.
Tuesday, October 23 | Service Avenue | Building 2 Lunch Room | 2 p.m.
Tuesday, October 23 | Kent Hospital | Doctors’ Auditorium | 3:30 p.m.
Wednesday, October 24 | Women & Infants | South Pavilion | 2 p.m.
Wednesday, October 24 | Butler Hospital | Ray Hall | 3:30 p.m.
Thursday, October 25 | CNEMG Primary Care & Specialty Services, Pawtucket | Noon

Annual PTO cash out 2018

CNE Flex Participants that elected to sell PTO for the annual cash out during open enrollment in 2017 for the 2018 plan year will be receiving their PTO payments on the following dates:

Butler  pay period ending 11/10  pay date - 11/15/18
CNE    pay period ending 11/3   pay date - 11/9/18
Kent   pay period ending 11/3   pay date - 11/8/18
W&I*  pay period ending 11/10  pay date - 11/16/18

*Includes eligible WIH 1199 sick time buyback participants