Good day!

This isn’t the first time I have uttered these words and it won’t be the last: The right care in the right place at the right time. This is also the essence of Triple Aim, two more words I repeat again and again. The goals of both are to improve people’s health, provide better care and, in the process, lower the cost of that care. Sounds simple enough, but we know like many things that seem easy, creating an environment to achieve these objectives is complicated and requires a comprehensive effort. Here at Care New England we are committed to making the Triple Aim a reality and have been hard at work untangling the complexities that create barriers to being successful. The process requires focus, stamina and vision. So much so, we might miss our achievements along the way.

Today, I call your attention to some areas where together we are making progress and truly transforming healthcare. It’s quite impressive and you should be proud of yourselves and your colleagues as you set the bar for excellence that other organizations are modeling.

Transitions in care for behavioral health
We know that without addressing mental health, we are not likely to resolve other medical conditions a person is facing. In fact, this year’s Community Health Needs Assessment for Rhode Island reports that behavioral health is one of the top three areas of health concern for Rhode Island. A team at Butler Hospital, led by Ana Tuya Fulton, MD, CNE chief of geriatric medicine, began to address this issue 10 years ago as a result her personal interest in geriatric behavioral health. Since then, the team has expanded to include 21 different disciplines from admissions to compliance to pharmacy to payers to billing as well as different types of care providers, both from within CNE and other health care organizations. More than 50 members form a Transitions of Care Coalition (TOCC). As the group understood more fully the
importance of how transitions of care are executed and the required follow-up, the scope of the team grew to include all touchpoints of care delivery.

The team also discovered that in some cases the barriers to success are simple to unravel. For instance, unknowing physicians were checking one area of the medical record for discharge information while the hospital was populating the information directly into a different area of the electronic record. Correcting this misunderstanding means physicians are informed easily and immediately of their patients’ next level of care and are able to assist with the transition.

Other barriers are more complex, like changing insurance coverage and reimbursement rates. Blue Cross Blue Shield of Rhode Island, in collaboration with Butler Hospital, The Providence Center and Continuum Behavioral Health, developed HealthPath, the nation’s first health home program for commercially insured and Medicare-covered adults. Enrollees in the program are pre-approved for one year with the care team receiving bundled monthly payments to cover all services, including support services not previously covered by insurance. Its team-based model allows for a range of services including psychiatry/psychology, case management, nursing, therapy, peer support, transportation, housing, employment placement assistance and coordination with primary care and other medical specialties as needed. What’s even more impressive is that the team has created literal pathways for communication and coordination of the treatment plan.

This open, honest partnership is delivering real health solutions for HealthPath members. Consider that:
1) 86 percent report either significant (53%) or some improvement (31%) in daily living activity scores,
2) eight percent reduction in behavioral health costs and
3) there was significantly lower readmission rates.

**Informing Integra’s care delivery approach**
Integra’s Behavioral Health Home Team began assisting patients earlier this spring through its offices on the Butler Hospital campus. Staffed by The Providence Center with prescribing support from Butler physicians, the team is benefiting from TOCC’s learnings and relationships. The wrap-around services begin while people still receiving inpatient services are identified as high-risk for readmission. The team, along with the Medicare Shared Savings Program for dual eligible and Accountable Entity Patients for Managed Medicaid with Serious and Persistent Mental Illness (SPMI) and Non-SPMI, begin the process of establishing a comprehensive discharge plan that addresses potential barriers to positive health outcomes. Currently, the team is managing about 40 active patients as well as a small group of referrals and readmissions, reviewing daily Integra’s member list of 120,000 individuals to identify people who are eligible for the services.

Even in these early stages of application, Integra’s Behavioral Home Health program is changing people’s lives as illustrated with this patient story:

*A 65-year-old man suffering with chronic hepatitis C, cirrhosis, congestive heart failure, chronic lung disease and chronic opioid overuse connected to pain management and depression experienced eight episodes resulting in admission to Butler Hospital over two years. Enter Integra. Since being discharged in March 2016, this gentleman has had no trips to the hospital emergency department or visits to Butler’s patient assessment services. He is receiving transportation services to assist with his medically managed Suboxone treatment through his primary care physician and social work and nursing care in his home. Through this care model, he is receiving the support needed to manage his behavioral and medical conditions successfully.*
Nationally recognized for creating best practices
Through the TOCC’s work with Healthcentric Advisors, a Medicare Quality Innovation Network-Quality Improvement Organization (QIN-QIO), their work has caught the attention of Centers for Medicare & Medicaid Services (CMS) and is being promoted as a best practice for others around the country to follow. In fact, Dr. Fulton—along with Butler Hospital’s Medical Director Lisa Shea, MD; Director of Care Management and Social Services Diane Ferreira, RN, MHA; and Social Services Administrator Carolyn Walsh, LICSW—have all been invited to present a webinar for the New England chapter of QIN-QIO. If you’re interested in learning more about readmission rate assessment, morning rounding practices, TOCC and Integra team collaboration, HealthPath success rates, lessons learned and next steps for continued process improvement, register today at http://bit.ly/1S2n9sL for the free one-hour webinar planned for Thursday, June 23 at 11 a.m.

This is just one of many areas in which CNE is excelling. Care New England Medical Group’s care retention team is developing tools and practices for streamlined referrals. Kent’s inpatient care teams have reconfigured their clinical documentation process and care coordination for more detailed and accurate medical records to improve care transitions and appropriate reimbursement. Even administrative teams are transforming, such as our newly-introduced system approach to talent acquisition in the human resources department. Collectively, the efforts of every person, every day, every step of the way are moving CNE in the right direction. Be sure to remind each other that you are making a real difference in our community.

Feel proud of the work you are doing, and have a good week ahead.

Sincerely,

Dennis D. Keefe
President and Chief Executive Officer

Women & Infants surgeon-in-chief invited to international breast cancer groups
Jennifer S. Gass, MD, surgeon-in-chief and co-director of the Breast Health Center at Women & Infants Hospital, continues to be recognized as an international resource in the field of oncoplastic breast cancer surgery and cancer survivorship issues and was recently invited to participate in two key groups.

Dr. Gass completed a one-month sabbatical at the Paris Breast Center in 2011 in the novel surgical procedure that combines the best techniques from plastic surgery with oncologic surgery to remove breast cancer, and then brought oncoplastic surgery to Women & Infants, making it the first facility in New England to use it.

Dr. Gass—who has also served as a surveyor for the National Accreditation for Breast Centers, directs the breast fellowship at Women & Infants, and serves as a clinical associate professor at The Warren Alpert Medical School of Brown University—was recently invited faculty to the Internationale Senologic Society in Warsaw, Poland. There, she presented on oncoplastic surgery and served on the Global Breast Health Initiative working group.

“As we gain a greater appreciation of the cancer survivorship journey, we better catalogue patient reported outcomes in survivorship. Oncoplastic surgery is one technique surgeons can provide that may empower women who want to preserve and reconstruct their breasts in the most natural looking way at the time the cancer is removed,” Dr. Gass says.

In addition, she was the invited co-chair of the American Society of Breast Surgeon’s survivorship pre-conference course at the group’s recent annual meeting. As such, she was asked to submit a manuscript for the course offering.
Butler’s Partial Hospital Program experiencing growth
Butler Hospital’s Partial Hospital Program recently revamped its admissions process and program scheduling for quicker, flexible patient access to programs and customized therapy formats to align with daily patient group profiles. To raise awareness, a marketing communications program has been underway since April integrating targeted online advertising and social media with radio advertising. The program is experiencing increased call volume and interest related to the campaign efforts.

An open house hosted on June 8 for the provider community drew around 50 visitors to provide tours of program space and educate on program enhancements within its 6 specialized programs. On the same day, the admissions office fielded 40 phone calls before 11 a.m. More importantly, the program is designed and able to deliver needed behavioral health care to a diverse population group. Learn more about Butler’s Partial Hospital Program at http://butler.org/partial and to say informed on other programs and initiatives Like Butler on Facebook (https://www.facebook.com/ButlerHospital).

TPC Annual Golf Tournament a swinging success
The Providence Center (TPC) held its 15th annual President’s Cup Golf Tournament last Monday at Rhode Island Country Club in Barrington. 150 golfers participated in morning and afternoon rounds of golf and enjoyed picture-perfect weather. The golf tournament is one of TPC’s biggest fundraisers, and this year it raised more than $108,000 for its programs.

After the tournaments, participants were treated to food and drinks, and many participated in a raffle for donated prizes, including dinner at The Lobster Pot and loge seat tickets to the Boston Bruins. To close out the event, TPC President Dale Klatzker, PhD, gave a speech thanking the sponsors and presented the President’s Cup to the winners.

Memorial residents present research at national internal medicine meeting
Second-year students from the Internal Medicine Residency Program at Memorial Hospital/Alpert Medical School of Brown University were invited to present their most recent research projects, conducted under the supervision of Memorial-based faculty clinicians, in the poster sessions at the 2016 Society of General Internal Medicine Annual Meeting in Florida last month.

Farhan Ashraf, MD, presented a poster on the research entitled “A Case of Losartan-Induced Immune Thrombocytopenia Purpura (ITP) Presenting with a Platelet Count of 0/uL.” The work was conducted with Iole Ribbizi Akhtar, MD, of The Cancer Center at Memorial Hospital.

Somwail Rasla, MD, presented a poster on the research entitled “Quality Improvement for the Relevant Use of Cardiac Telemetry Monitoring in a Community Teaching Hospital,” which was conducted with Ahmad Abdin, MD, Farhan Ashraf, MD, Saira Imran, MD, Anais Ovalle, MD, and Taro Minami, MD, of the Department of Medicine.
Giovanna, meet Giovanna!
Last week saw a wonderful story coming out of Women & Infants Hospital. A patient by the name of Giovanna Harris came in to the Emergency Department/Triage. When asked about her beautiful name, Giovanna responded that her mother named her after her labor nurse back in 1985 at the old Lying-In Hospital. That nurse is Giovanna (Jenny) Todisco, who still works at Women & Infants (she's now going on 55+ years)! So when Jenny came in to work that day, she took the opportunity to snap a photo with Giovanna and her mom, Michelle Hill.

Marketing posted that image and the story on the Women & Infants’ Facebook page. The post went viral, reaching 40,600 people with more than 100 comments, 84 shares, and 1,300 likes—and growing!

Kent Hospital Auxiliary turns 65
Members of the Kent Hospital Auxiliary celebrated 65 years of service to Kent Hospital at their Spring Luncheon at Quidnessett Country Club. Past presidents of the Auxiliary were honored, along with lifetime members of the organization. (Lifetime membership is an honor bestowed on members who have supported the Auxiliary with exceptional service for many years).


Lifetime members in attendance: Mary Cooper, Barbara LaPlume, and Annette Carpenter.

In addition, members of the Auxiliary presented Jim Burke, vice president of finance, with a donation in the amount of $65,000 to be used for patient care services. 😊