

The latest update on our efforts to provide world class "care coordination" across the SPHP system

TEAMWORK: Look what we can accomplish together!



Teamwork & Care Coordination Help Make Wish Come True for Dying Patient

At just 19 years old, Susan had been diagnosed with end-stage metastatic osteosarcoma – the most common type of cancer that starts in the bones. She suffered severe pain in her right shoulder.

Susan had been living at the Ronald McDonald House in Albany receiving end-of-life care but the continual debilitating pain she experienced forced her to return to the hospital.

Since Susan's pain could no longer be controlled on her current regimen, her physician, Dr. Joanne Porter from The Community Hospice & Palliative Medicine, ordered Ropivacaine, a local anesthetic used for acute pain management.

Susan was doing well on the new pain medication but being hospitalized kept her away from her family and her 10-month-old baby. Susan wanted nothing more than to be out of the hospital setting and to spend her remaining days with her child.

A team formed to make Susan's wish come true, including her physician and staff from multiple providers – The Community Hospice, Empire Home Infusion, Eddy Visiting Nurse & Rehab Association, and the Albany Medical Center Hospital discharge planning team.

The biggest barrier was putting together a safe, effective plan to infuse the Ropivacaine in a community setting. After a great deal of communicating, collaborating and coordinating, a solid plan was put into place.

"Everyone worked together for one common goal," says Patrick Archambeault, director of clinical specialties for Eddy Visiting Nurse & Rehab Association, "which was to get Susan to the Ronald McDonald House so she could be surrounded by people who love her, and most importantly, to be with her child.

"This was a true example of team work, compassion and making a dying woman's wish come true," Patrick says.



Congratulations to all the Rock Stars who contributed to Susan's care and helped make her wish come true:

Dr. Joanne Porter, Community Hospice & Palliative Medicine; Dr. Paul Heasley, chief medical officer, Community Hospice; Beth Carpenter, RN, Community Hospice, Colleen Christian, RN, central intake, Community Hospice; Kathy Lavigne, RN, supervisor for central intake, Community Hospice; Nori Giacchetta, regional director, Community Hospice; Caitlin Walsh, RN, manager, Hospice Inn; Diane Boschi, pharmacy director, Empire Home Infusion Services; Steve Berkley, pharmacist, Empire Home Infusion Services; Theresa Faul, supervising pharmacist, Empire Home Infusion Services; Anne Kramek, RN, IV supervisor, Eddy Visiting Nurse & Rehab Association; Agnes Petrucci, RN, IV nurse, Eddy Visiting Nurse & Rehab Association; Patrick Archambeault, director of clinical specialties, Eddy Visiting Nurse & Rehab Association; and the Albany Medical Center Hospital discharge planning team.



Time Doesn't Heal All Wounds: Albany Memorial & St. Mary's HBOT & Wound Care Programs Can Help

An estimated five million Americans suffer from chronic wounds caused by diabetes, circulatory problems and other conditions that negatively impact their quality of life. But there is help.

SPHP offers advanced therapies and treatment for a wide range of chronic or problem wounds at two locations – The Center for Wound Care & Hyperbaric Medicine at Albany Memorial Hospital, and St. Mary's Wound Care and Hyperbaric Program in Troy.

Our highly trained multidisciplinary teams provide an array of wound care treatments, including hyperbaric oxygen therapy (HBOT) in which patients breath in 100 percent oxygen within a pressurized environment. HBOT can dramatically increase a patient's likelihood of healing.

Conveniently located, Albany Memorial offers three HBOT individualized chambers, while St. Mary's offers the Capital Region's only multi-patient HBOT chamber accommodating up to 10 patients at a time, including those with wheelchairs.

Medicare, Medicaid and most insurances cover wound care services. For more information, please call **Albany Memorial**, (518) 471-3705, or St. Mary's, (518) 268-5380.

ICCS UPDATE



St. Peter's Health Partners is in Pursuit of Integrated Care Certification (ICC) from the Joint Commission

When SPHP was formed in 2011, a key goal of the merger was to deliver an integrated health system. Since then, becoming a people-centered health system has been our guiding principle. It is our strategic belief that we can differentiate ourselves from other health systems by being the health system that coordinates care for people in ways that other systems do not. Health care is a confusing place to navigate for health consumers and we owe it to them to provide a service that takes the burden off them enabling families to just care for their loved one.

The Integrated Care Coordination System (ICCS) is the structure that organizes our clinicians and care teams to enable people-centered coordinated care. The ICCS brings together all of our Ministry's colleagues, processes and technology under one integrated, care coordination team with a single clinical executive and shared leadership. While we've made great strides with integrated care coordination, we have not fully met the goal of the merger and SPHP. Since fall of 2016, ICCS has been in pursuit of Integrated Care Certification (JC-ICC) from the Joint Commission. The JC-ICC standards provide an excellent roadmap for integrated care coordination.

The survey ready process utilizes the JC-ICC standards to impact our work. Here is some key information about the certification and SPHP's pursuit:

- It is a voluntary 3-year certification. It was first offered 2015.
- It recognizes hospitals, post-acute and ambulatory care settings that excel at integrating:
 - Information-sharing
 - Transitions of care
 - Hand-off communications (as a patient moves between inpatient & outpatient care settings)
- Only one health system has achieved the certification to date: Parrish Medical Center, Titusville, FL in 2016.

SPHP's senior leadership reviewed the certification in early 2017 and thought it best to start small. Phase 1 of the pursuit of JC-ICC will encompass:

Samaritan → *Sunnyview → Homecare → SPHPMA Troy Internal Medicine → Troy Medical Group

* One entity must have Joint Commission accreditation

A Core Team of clinicians and leaders from these affiliates have been meeting since spring 2017. Leaders gathered foundational information (performed a standards

review, conducted patient and clinician interviews at receiving sites, garnered physician input through a survey, reviewed key handoff processes, conducted patient tracers, and solicited input from patient and family advisory councils (PFACs). They have been working on various processes system wide (alerts, high utilizers and high risk patients, handoffs, patient

education, rescue orders, post-acute follow-up needs, complex care plans, etc.). The Joint Commission

is expected **early fall 2018 to survey the Phase 1 affiliates** listed above. We know the commission will utilize the Tracer Methodology to trace a patient through the care settings, and conduct patient group interviews. A key focus will be on health literacy, patient goals and medication reconciliation. The surveyor is not focused on the direct care being given, but rather, on the information shared to the next setting. We're excited to have The Joint Commission assess our processes – a next step on our journey toward integrated care coordination.

QUESTIONS?

If you have questions about care coordination, how it works or what we hope to accomplish, we're here to help. Please contact:

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Please consider submitting patient stories that cross care transitions and/or service lines to be highlighted in the "Did You Know?" section of the newsletter. Your input is welcomed.