

THE WINDOW



A round-up of JHF news, events, milestones, publications, and more.

Celebrating the Vital Role of Community Health Workers at NEHI Summit



JHF President and CEO Karen Wolk Feinstein, PhD, explains how community health workers can improve population health during the Network for Excellence in Health Innovation's Community Health Workers Summit.

"Community health workers are more than physician extenders," says Jewish Healthcare Foundation (JHF) President and CEO Karen Wolk Feinstein, PhD. "They're a disruptive innovation and a window into the future. We need to reinvent primary care, and a key component will be the community health worker."

On October 20, Dr. Feinstein shared her observations on the myriad roles filled by international community health workers – and how their work can be applied to improve lives in U.S. neighborhoods – during a Network for Excellence in Health Innovation (NEHI) summit entitled "Community Health

Workers: Getting the Job Done in Health Care Delivery." The summit was sponsored by JHF, the Rose Community Foundation, and the Association of American Medical Colleges (AAMC), which hosted the event at its Washington, DC headquarters. JHF COO/CPO Nancy Zionts also attended.

The summit featured panel discussions on state and federal policy changes to integrate community health workers into the U.S. health system, ways that stakeholder groups can support this integration, and a roundtable with health systems that have fully embedded community health workers into care teams. There are currently around 120,000 community health workers in the U.S., according to the Health Resources and Services Administration. That

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total is expected to climb as the U.S. increasingly recognizes the potential of community health workers to care for patients further “upstream,” preventing more costly hospital stays and emergency department visits later on.

During her presentation, Dr. Feinstein highlighted four ways that community health workers can support population health: by improving maternal and child wellness through pre-and-post-natal care, early education, and immunizations; empowering females by ending gender violence, promoting education and financial literacy, and engaging males; helping patients better manage diseases such as TB and HIV/AIDS; and promoting environmental and community development through targeted nutrition education and assistance, establishing links to affordable housing, and ensuring that residents have access to clean water and sanitation.



Network for Excellence in Health Innovation CEO Wendy Everett, ScD, welcomes attendees at the “Community Health Workers: Getting the Job Done in Health Care Delivery” event on October 20, which was sponsored by JHF, the Rose Community Foundation, and the Association of American Medical Colleges. AAMC hosted the event at its headquarters in Washington, DC.

Deploying community health workers in underserved communities is an example of the kind of systems-based thinking needed to solve complex public health and social issues, Dr. Feinstein says.

“How can you get a handle on lifestyle, culture, and housing and environmental circumstances that contribute to the health of people in seriously impacted areas?” Dr. Feinstein asks. “Systems thinking helps you sort out how various pieces interact, and helps you see where you can intervene. Community health workers can get involved at those pressure points and make a major difference.”



Sergio Matos, founder and executive director of the Community Health Worker Network of New York City; Alan Weil, editor-in-chief of Health Affairs; and Rishi Manchanada, MD, president and founder of HealthBegins and author of “The Upstream Doctors” hold a “fireside chat” on opportunities to weave community health workers into a high-value health system.

Recent health policy changes help remove some of the barriers to community health workers making an impact. In January of 2014, the Centers for Medicare & Medicaid Services (CMS) changed Medicaid regulations to allow states to reimburse for preventive services recommended by a doctor or licensed practitioner. Those services can be performed by various health professionals, including community health workers. Previously, states could only bill for preventive services provided by a licensed practitioner. CMS has also provided a number of Health Care Innovation Awards for projects focused on community health workers.

To garner additional funding and supportive policy changes, community health workers must demonstrate a return on investment. Dr. Feinstein noted that properly trained community health workers can prove their value

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by delivering measurable clinical interventions. In developing countries, for example, supervised community health workers conduct immunizations, dispense antiretroviral drugs to HIV/AIDS patients, and monitor medication compliance. It's also important that community health workers affiliate with an established medical center that can offer expanded training and resources.

"There's a need for community health workers to deliver softer services, such as education, but also quantifiable care that makes the business case," Dr. Feinstein says. "Those measurable clinical interventions show why we should keep training and funding community health workers."

Systems Thinking, Community Health Workers Redefine Primary Care in South Africa

While visiting neighborhoods ravaged by disease and poverty during a recent trip to South Africa, Karen Feinstein witnessed the transformative power of community health workers. They bring diagnoses, treatment, and social service connections directly to their neighbors, establishing long-term relationships founded upon cultural affinity.



Karen Feinstein shares how the Foundation's Center for Health Information Activation (CHIA) supports engaged patients and receptive providers during the Third Global Symposium on Health Systems Research, held in Cape Town, South Africa. More than 2,000 policy-makers, researchers, activists, and educators representing 125 different countries attended the bi-annual conference.

comparing the strategies of South Africa and the U.S. to ensure patient-centered, quality health care. Fellow panelists included Georges C. Benjamin, MD, executive director of the American Public Health Association; CEO Carol Marshall and Chairperson Lizo Mazwai of South Africa's Office of Health Standards Compliance; and Lisa Simpson, MB, BCh, MPH, FAAP, president and CEO AcademyHealth. Director-General Malebona Precious Matsoso and Senior Technical Advisor Gail Andrews of South Africa's National Department of Health moderated the panel.

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"I met some wonderful health workers who, at great risk to themselves, are trying to address the plight of South Africa's most vulnerable," Dr. Feinstein says.

The essential contributions of community health workers and the potential of systems thinking to address the social, environmental, and economic determinants of wellness were the main themes of Dr. Feinstein's two-week trip, during which she presented at the Third Global Symposium on Health Systems Research in Cape Town, and toured non-government organizations, hospitals, and health clinics dedicated to serving marginalized populations.

On October 1, Dr. Feinstein discussed the "Role of Information Symmetry in Promoting Patient-Centered Care" at the bi-annual Symposium, which gathered 2,000-plus policy-makers, researchers, activists, and educators from 125 different countries. She participated in a panel

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“South Africa is bringing in the consumer voice by collecting extensive feedback from patients,” Dr. Feinstein says. “They’re also emerging as a center for research, garnering National Institutes of Health funding and using breakthrough systems thinking to address the extraordinary burden of disease in townships and slums.”

An estimated ten to 12 percent of all South Africans are HIV-positive, according to a national survey conducted in 2008. South Africa also has the third-highest rate of new tuberculosis cases in the world, including multi-drug-resistant strains of the disease. One epidemic exacerbates the other, with HIV-positive individuals left more susceptible to contracting TB due to a weakened immune system. Approximately 70 percent of South Africans living with HIV are co-infected with TB, according to the international HIV/AIDS charity AVERT.

Following the conference, Dr. Feinstein took part in a medical study tour to see the innovative ways that South Africa cares for complex patients. One of her stops was at Kheth’Impilo, an NGO that works with community-based organizations to increase anti-retroviral drug adherence among HIV patients, and to connect vulnerable groups to social welfare services. Kheth’Impilo has trained more than 500 community health workers who provide home-based HIV testing, hold education sessions on disease prevention, serve as pharmacy assistants, and lead early childhood and secondary education programs for kids infected and affected by HIV, among other tasks.



Karen Feinstein meets two community health workers from Gugulethu, a township located near Cape Town in South Africa.



Pebbles Owethu Clinic has a mobile van to bring primary care directly into surrounding farm communities.

“In underserved communities, there’s a particular focus on helping women and young girls achieve their full potential by staying in school and ending the blight of sexual violence,” Dr. Feinstein says. “Female empowerment lowers the burden of disease.”

Dr. Feinstein also visited the Student’s Health and Welfare Centres Organisation (SHAWCO), a non-profit founded in 1943 that provides primary health care in Cape Town through the contributions of more than 100 volunteer doctors, 800 medical and allied health sciences students from the University of Cape Town, and community health workers. From six community health clinics and three fully-equipped mobile vans, they offer wrap-around services including physical, occupational, and speech therapy, nutrition education, and free medications in some of South Africa’s most isolated areas.

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At Pebbles Owethu Clinic, Dr. Feinstein met community health workers and clinicians providing medical, dental, and early childhood development services to farm communities. The NGO has a daycare center, a meals program, and a van outfitted with computers that children can use to stay on top of their studies.

Many community health workers leverage technology to educate patients and help them manage their conditions. For example, some health workers use the messaging service MomConnect to answer questions from pregnant women and provide them with mobile updates on recommended care and local services available. Health4Men Connect, another cell phone application, sends patients information on HIV and sexually transmitted infections. These high-tech approaches supplement community health workers' door-to-door activities.

"You'd be surprised," noted Dr. Feinstein, "even with all the poverty, almost everyone has a cell phone, making this a very effective way to engage patients."

Community health workers could similarly help redefine primary care in the U.S. She recommends they receive certification for clinical work, establish ties to medical centers, and learn to measure and collect data in order to become researchers in the course of their work.

"There's a lot that the U.S. can learn from South Africa," Dr. Feinstein says. "Everywhere you go, community health workers are a critical part of the healthcare landscape. They represent something familiar and credible, and serve as a link between neighborhoods and the traditional medical system. Without them, you can't get the job done in terms of population health."

Health 2.0 Event Explores Role of Technology, Culture Change in Ending Campus Sexual Violence

Jayon Wang, co-founder of Pittsburgh tech startup Lifeshel, shared the story of a close friend who was attacked on a running trail near her home. As the assailant tried to pull her into the woods, she managed to dial 9-1-1 on an old flip phone in her pocket. The sound of the call connecting caused the assailant to run away, and Wang's friend reached safety.

The story of Wang's friend, an early partner in Lifeshel, led the company to develop Whistl, an iPhone case that strobes bright lights, sounds a piercing alarm, sends an alert to 9-1-1 and specified contacts, and activates video and audio recording with the push of a button. Whistl was among the innovations on display during an October 29 meeting of Health 2.0, which focused on sexual violence on college campuses and the role that technology can play in terms of prevention, advocacy, and outreach.

About one out of five undergraduate women has been the victim of rape or attempted rape, according to the Centers for Disease Control and Prevention. But many schools have yet to create a safe environment for women by educating students about abusive relationships and legal protections available to victims; establishing clearly defined reporting policies; ensuring a fair judicial process; and engaging in conversations with policy-makers,

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Lifeshel co-founder Jayon Wang shows how to use Whistl, an iPhone case that strobes bright lights, sounds a piercing alarm, sends an alert to 9-1-1 and specified contacts, and activates video and audio recordings with the push of a button.

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service agencies, and the community at large.

“Unfortunately, some of our college campuses have become a protective shield for criminals,” Karen Feinstein noted. “Women are vulnerable on our campuses, and it’s unacceptable.”

In addition to Whistl, the Health 2.0 event showcased two other tech products designed to reduce sexual assaults, assist those in distress, and catalyze a cultural shift in how women are valued. Samantha Bushman, founder and CEO of Talk, The New Sex Ed, explained how the non-profit’s new Campus Talk module provides an interactive, cloud-based educational experience that answers key questions for incoming freshman, such as their school’s reporting policies and the definition of consent. A version of Campus Talk will also be available for parents to promote dialogue with their children.



Technology entrepreneurs, campus and agency representatives, and other Health 2.0 attendees discuss creating safer college campus environments during a “fish bowl” exercise.

“Young people aren’t often engaging in these topics, either at home or in class,” Bushman said, noting that less than half of states require public schools to teach sexual education. “Our goal is to get a baseline on not only sex ed, but also what constitutes a healthy relationship.”

Barbara Nicholas, development director at the Women’s Center & Shelter of Greater Pittsburgh, described the organization’s RUSafe app. RUSafe gauges whether a person is in a potentially dangerous situation based on a series of relationship questions and connects users to the closest 24-hour domestic violence hotline if there’s cause for concern. Someone can also use the app to assess the safety of family or friends. More than 1,000 people in the Pittsburgh region used RUSafe during the first six months after its release, which may have contributed to a drop in local intimate partner homicides from 19 in 2013 to one so far in 2014. A national version of the app will be available on November 1.

The Pittsburgh Steelers’ William Gay, who lost his mother to domestic violence, has become a strong advocate for the shelter’s RUSafe, Nicholas said.

“William has stepped out with the message that we are all accountable for helping to keep women safe,” Nicholas said. “He says his mom didn’t have someone to help her, and he wants to make sure others in domestic abuse situations know there are people who care and places to turn.”

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The Health 2.0 event also featured presentations from three local agency and campus representatives on their efforts to stem sexual violence. Megan Schroeder, supervisor of crisis intervention services at Pittsburgh Action Against Rape (PAAR), explained that PAAR offers a 24-hour crisis hotline, medical and legal advocacy, and prevention education tailored to different age groups. Marian Vanek, director of Student Health Services at the University of Pittsburgh, said that Pitt has a multidisciplinary sexual assault task force and has established clear reporting guidelines (available at share.pitt.edu).



Samantha Bushman, founder and CEO of Talk, The New Sex Ed, describes Campus Talk, a new interactive education and dialogue tool for college students and parents.

Susan E. Eichenberger, PhD, associate professor of Sociology and Women's studies at Seton Hill University, outlined the school's STAR (Social Transformation through Awareness and Resolve) initiative, which allows students to explore the root causes of sexual assault, such as gender stereotyping and the objectification of women.

"The goal of STAR is to move from risk reduction, which puts the onus on the victim, to primary prevention that addresses the underlying causes of sexual assault and holds the perpetrator responsible," Dr. Eichenberger said.

Following the presentations, other Health 2.0 attendees entered the conversation through a "fish bowl" exercise. Audience members, agency/campus representatives, and

entrepreneurs rotated into a forum in which they discussed campus sexual violence issues and ways that they could work together to build the capacity for social change. Ilana Diamond, managing director of Alpha Lab Gear, served as moderator.

One of the keys to accomplishing social change is moving beyond the concept that sexual assault is a women's issue to solve, noted Kristy Trautmann, executive director of the FISA Foundation.

"If we stay within that frame, we'll be having this same conversation in 50 years," Trautmann said. "We need to broaden that frame, to create a climate where men are active voices in this conversation and become strong advocates for preventing violence against women."

The Health 2.0 event is but one component of JHF's larger initiative to end pervasive sexual violence on college campuses. JHF is working with JFilm on a campaign to raise awareness of campus violence and identify policies and procedures that will enhance security for women. The campaign includes 20 free screenings on local college campuses of "Brave Miss World," an award-winning film that recounts the journey of rape victim and 1998 Miss World Linor Abargil, followed by a student discussion led by a PAAR educator and/or an expert in the field.

JHF also convened meetings among local foundations,



Barbara Nicholas, development director at the Women's Center & Shelter of Greater Pittsburgh, says over 1,000 people have used the organization's RUSafe app to gauge whether they are in a dangerous relationship and connect with a local domestic violence hotline if necessary.

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resulting in the launch of *Funders Against Campus Rape* in September. A coalition that includes the Eden Hall Foundation, FISA Foundation, Jefferson Foundation, Jewish Federation of Greater Pittsburgh, JHF, Jewish Women's Foundation, Staunton Farm Foundation, the Heinz Endowments, and The Pittsburgh Foundation will work together to eliminate sexual violence and create safe, accountable college campuses.

PRHI, Allegheny County Health Department Issue Updated Guidelines to Prevent Future Legionella Outbreaks



(L-R): PRHI Chief Medical Officer Keith Kanel, MD, MHCM, FACP; Allegheny County Health Department Director Karen Hacker, MD, MPH; and JHF Program Associate Neil Dermody attend a June 2013 Legionella information session that the Foundation convened for local funders, public health officials, and providers.

Following an outbreak of Legionella at the VA Pittsburgh Healthcare System, the CDC turned to JHF to craft a community response aimed at preventing future outbreaks of the potentially deadly bacteria. During those efforts, it became apparent that existing Legionella testing and prevention guidelines — nearly two decades old — didn't prepare our region to protect senior citizens, those with respiratory issues, and others at higher risk of contracting Legionnaires' Disease.

In October, the Pittsburgh Regional Health Initiative (PRHI) and the Allegheny County Health Department [issued updated guidelines](#) that provide practical information on testing for and mitigating the risk of Legionella, which can grow in drinking water systems, air conditioner units, and pools, among other freshwater environments. The Foundation provided a grant to the RAND Corporation to prepare the guidelines, which were developed in coordination with PRHI under the leadership of Chief Medical Officer Keith Kanel, MD, MHCM, FACP.

The new Legionella guidelines for western Pennsylvania provide current, more detailed clinical and public health information, and reach beyond the scope of previous guidelines by considering non-healthcare facilities that also serve at-risk populations, such as assisted-living and retirement communities.

In response to the Legionella outbreak, JHF also convened experts from the CDC, the state and county health departments, and the VA to hold education sessions with local administrators, clinicians, facility management, and public health officials. The Foundation has a long history of uniting the community to take on public health threats.

"Communities that acknowledge there's a problem and address it collaboratively develop better solutions," says Karen Feinstein.

"Through our past work reducing Central Line-Associated Bloodstream infections (CLABs) and hospital-acquired Methicillin-Resistant Staphylococcus Aureus (MRSA), we brought people together and awakened them to the fact that infection is not

PRHI, UPDATED LEGIONELLA GUIDELINES IN THE NEWS

["Allegheny County Sets New Guidelines to Fight Legionella Bacteria"](#) (WESA 90.5—Pittsburgh's NPR News Station)

["Allegheny County Legionella Guidelines Updated"](#) (Pittsburgh Business Times)

["Allegheny County Health Officials Call on Retirement Homes to Stay Vigilant on Legionella Prevention"](#) (Pittsburgh Tribune-Review)

["Allegheny County Health Department Updates Guidelines for Controlling Legionella"](#) (Pittsburgh Post-Gazette)

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inevitable. We are sought out in these moments of need because we're interested in convening people for candid conversations, sharing information, and putting best practices in place reliably — that's our DNA. We're experts in community process and best practice."

To read the new guidelines, [click here](#) or visit the "News and Publications—Legionella Guidelines" section of the PRHI website.

PRHI, Quality Insights Preview QI Initiative Stretching from 'Burgh to the Bayou

PRHI's partnership with Quality Insights has led to 300-plus primary care practices across the Commonwealth meaningfully using electronic health records through [PA REACH](#), and is helping consumers make informed choices on doctors, hospitals, and healthcare providers through the [Qualified Entity](#) program.

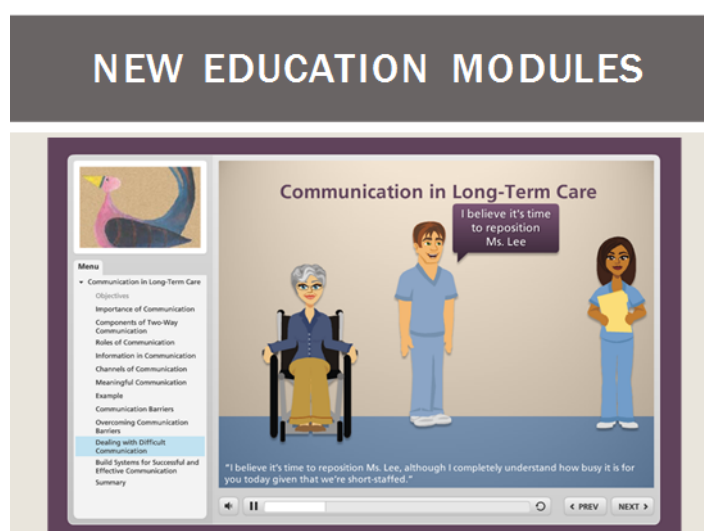
During an October 14 meeting of the PRHI board of directors, Quality Insights partners Rebecca Cochran, MSN, RN, CPHQ, and Chief Administrative Officer David Lambert, JD, joined Nancy Zions to showcase the latest joint project: the Centers for Medicare & Medicaid Services' Quality Innovation Network.

As a CMS-contracted Quality Innovation Network-Quality Improvement Organization (QIN-QIO), Quality Insights is spearheading initiatives across five states to reduce health disparities, promote chronic disease management, and lower costs. PRHI, as a subcontractor for the project, is bringing its Lean-based [Perfecting Patient Care](#)SM (PPC) curriculum and [Tomorrow's HealthCare](#)TM (THC) online knowledge network to providers in Pennsylvania, West Virginia, Delaware, New Jersey, and Louisiana to reach those goals (the rest of the U.S. is covered by contracts awarded to an additional 13 organizations).

Quality Insights is currently recruiting providers for the project, and THC is a major selling point, noted Cochran, director of the QIN-QIO. With geography making frequent in-person quality improvement training impractical, THC creates a learning community for providers anywhere from Pittsburgh to the Bayous to share best practices and resources, further their education, and receive virtual technical assistance.

"Our partnership with PRHI allowed us to win the contract," Cochran said during the board meeting. "Tomorrow's HealthCareTM puts us ahead of the pack — no other QIN has a knowledge network for quality improvement and education. It's a great resource for those on the front line."

The learning modules on THC have been revamped for the QIN project, with Lean-specific training offered in a variety of formats including videos, webinars, and podcasts to accommodate different learning styles. THC also has extensive subject matter resources and task-specific learning communities, where providers can get advice from peers and mentors on eliminating hospital-acquired infections and helping patients manage diabetes, among other



Tomorrow's HealthCareTM is empowering providers in five states to share best practices and resources, further their education, and receive virtual technical assistance.

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things.

“We want to shorten the distance between the front line and the C-suite, and provide real-time learning across state boundaries,” Zions said. “We’re offering something excellent online that will supplement the deeper dives and training events offered by Quality Insights and the QIN partners.”

The CMS contract provides flexibility and additional funding for organizations like Quality Insights to work with local stakeholders to identify community-specific health needs and develop targeted, high-impact interventions, Lambert told the PRHI board. That could lead to even greater collaboration between Quality Insights and PRHI during the five-year project.

“We’re pleased that our relationship with PRHI continues to grow,” Lambert said. “As new needs arise, we can respond to those on-the-ground situations together.”

Learning Event, Site Visits Help COMPASS Teams Navigate Third Year of Grant and Beyond

In October, the PRHI-led [Care of Mental, Physical, and Substance Use Syndromes](#) (COMPASS) consortium in Pennsylvania attended a collaborative learning event in Minnesota hosted by the Institute for Clinical Systems Improvement (ICSI) entitled “Navigating the Future.” During the two-day event, stakeholders reflected on the successes and challenges in COMPASS, and discussed ways to sustain the program’s integrated care model for patients with depression plus diabetes and/or cardiovascular disease after funding from the Center for Medicare and Medicaid Innovation (CMMI) ends on June 30, 2015.



PRHI and ICSI observe a systematic case review meeting at Saint Vincent Medical Group. The consulting psychiatrist attends through a video chat service.

Mark Valenti, PRHI’s director of education and coaching, attended the event with Beth Vrbanic, RN, a patient care coordinator from Premier Medical Associates, and Kelly Baker, RN, a care manager at Saint Vincent Medical Group. Vrbanic and Baker were selected as COMPASS champions because they promote organizational change and sustainability — characteristics we look for in all Champion program participants, including physician, nursing, pharmacy, EMS, and long-term care champions.

Vrbanic presented how Premier’s COMPASS care team increased their monthly follow-up contact rate for patients by 400 percent. She also shared a story of a patient suffering from cardiovascular disease, diabetes, and severe depression. After four months of COMPASS care, the patient now has minimal symptoms of depression and has lowered his A1c (a measure of blood sugar control) by 31 percent. Baker presented how her team responded to the monthly data reports in COMPASS by working directly with patients to obtain needed blood work, and shared a visual from Saint Vincent’s electronic health record showing how they track a patient’s hospital admissions, ER visits, primary care office visits, and prescriptions before and after COMPASS care.

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Following the event, Baker and Vrbanic said they had learned new approaches to COMPASS care and possess greater confidence in spreading their knowledge in their primary care offices.

One week after the event, ICSI Medical Director Claire Neely, MD, and Jeyn Monkman, MA, BSN, NE-BC, a project manager and health care consultant, conducted site visits at PRHI, Excelsa Health Medical Group, Premier Medical Associates, and Saint Vincent Medical Group to fine-tune goals and strategies for the third year of COMPASS. The PRHI and ICSI teams observed systematic case reviews and workflows in primary care offices, and met with COMPASS leadership, as well as care teams comprised of physicians, medical consultants, consulting psychiatrists, and care managers.

During the site visits, the medical groups noted that COMPASS has “opened our eyes to what is available outside of the walls of the practice” and “generated excitement about how to take care of challenging cases.” One care manager recounted a story of a severely depressed, suicidal patient who is now engaged in COMPASS care and has, so far, progressed to exhibiting moderate symptoms of depression. The patient’s experience was so positive that her partner asked if she could also receive COMPASS care.

The medical groups described how their [motivational interviewing and behavioral activation](#) skills help patients open up, discovering their own reasons for making positive behavior changes and engaging in new activities. The teams also reflected upon how COMPASS has boosted confidence in identifying and talking about behavioral health. As one team leader noted, “It took away the mystique of depression.”



COMPASS researchers, coaches, managers, and care teams gather for a group photo at the “Navigating the Future” collaborative learning event.



ICSI’s Claire Neely, MD, and Jeyn Monkman, MA, BSN, NE-BC, meet with Premier Medical Associates’ Patient Care Coordinator Beth Vrbanic, RN, and Quality Assurance Coordinator Star Rebarchak, RN, during a COMPASS site visit.

The site visits uncovered several goals for COMPASS’ third year, including gaining a better understanding of physicians’ experiences in the program, standardizing systematic case reviews, strengthening connections to organizations and resources outside of the practices’ walls, and measuring COMPASS’ impact on local emergency department visits and hospital admissions.

PRHI Elevating Role of Clinical Assistants Across PA through Partnership with Family Physicians, American Cancer Society

In September and October, PRHI held separate seminars in Pittsburgh, Harrisburg, and Philadelphia to prepare clinical assistants for a more prominent role in educating patients, tapping into patient motivations for behavior change, and connecting patients with community resources. Around 60 registered nurses, medical assistants, and licensed practical nurses attended the seminars, which PRHI conducted in partnership with the Pennsylvania Academy of Family Physicians (PAFP) and the American Cancer Society (ACS).



“These are people who are deeply involved in the day-to-day work in the office, and they’re eager to discuss their experiences and ways they can improve care,” says PRHI Chief Learning and Medical Informatics Officer Bruce Block, MD, who facilitated the sessions along with Practice Transformation Specialist Eletta Cameron, MSW, and Mark Valenti. “We talked about how health happens between doctor’s visits, and that they have to prepare the patient for the next appointment.”

During the seminars, the clinical assistants learned how to prepare for upcoming appointments, identify and fix gaps in care by implementing Plan, Do, Study, Act (PDSA) cycles, and elicit patients’ own reasons for making healthy changes through motivational interviewing. The PRHI team also stressed the importance of conducting a thorough post-visit wrap-up, where patients and providers may discuss future goals, new medications, educational tools for disease management, and social services that remove barriers to better health.



(L-R): Eletta Cameron, Bruce Block, and Mark Valenti are training clinical assistants to educate patients and motivate them to make positive behavior changes.

“The clinical assistants that we trained are from federally qualified health centers or residency practices, which serve many vulnerable people who may be uninsured or underinsured,” Cameron says. “It’s important that they know what’s available in their neighborhoods, from clothing to spiritual resources and everything in between. It’s also important that they understand why people may not be taking care of themselves — not because they don’t want to, but sometimes they don’t have the basic resources.”

The seminars promote many of the standards necessary to achieve patient-centered medical home status, such as delivering coordinated, team-based care, and providing patients with the tools to manage their health conditions. Bringing about positive behavior changes in patients starts with behavioral change at the practice level.

“We’re building confidence within these attendees and discovering their own needs, interests, and internal drives,” Valenti says. “We’re tying it back to their experiences, their communities, and their visits, with the goal of creating more collaborative patient-provider conversations.”

Karen Feinstein Talks Systems Thinking, Transforming Med Ed at Allegheny Health Network, and at Pitt

The U.S. healthcare system, which spends twice as much per capita as other developed nations yet produces some of the worst health outcomes, needs a reboot. In October, Karen Feinstein shared JHF's vision for creating systems thinkers capable of delivering quality care in a value-based, accountable era with graduate medical education leaders, faculty, residents, and students across the Pittsburgh region.

On October 16, Dr. Feinstein took part in Allegheny Health Network's Graduate Medical Education Retreat at West Penn Hospital, which focused on integrating quality and patient safety methodology into residency training. Dr. Feinstein presented and participated in a panel discussion along with Robert Keenan, MD, vice president and chief quality officer of Allegheny General Hospital (AGH) and West Penn Hospital, as well as a system chief of thoracic surgery at AGH; Anastasios Kapetanios, MD, an internist at AGH and an assistant professor at Temple University School of Medicine; and Jack E. Wilberger Jr., MD, vice president of Graduate Medical Education for West Penn Allegheny Health System.

During her presentation, Dr. Feinstein noted that providers are increasingly evaluated based on health outcomes, clinical processes of care, and patient satisfaction. To meet the demands of this new era, medical professionals must deploy a systems-based philosophy that recognizes and reacts to the social, environmental, and cultural factors that impact health. They must also forge partnerships with information-seeking patients who demand an active role in their own care.

Dr. Feinstein explained that JHF's QI²T Health Innovators, Patient Safety, and Jonas Salk Fellowships prepare students to solve problems as part of multidisciplinary teams and understand healthcare systems in a broader context than their particular subject field. This year's Salk Fellowship focuses on systems thinking, with students utilizing crisis management, predictive modeling, disruptive innovation, and advocacy "lenses" to confront intractable public health problems. Traditionally, students haven't been exposed to such systems thinking (the sixth core competency defined by the Accreditation Council for Graduate Medical Education) in class due to a lack of standardized curriculum, trained faculty, and assessment tools.

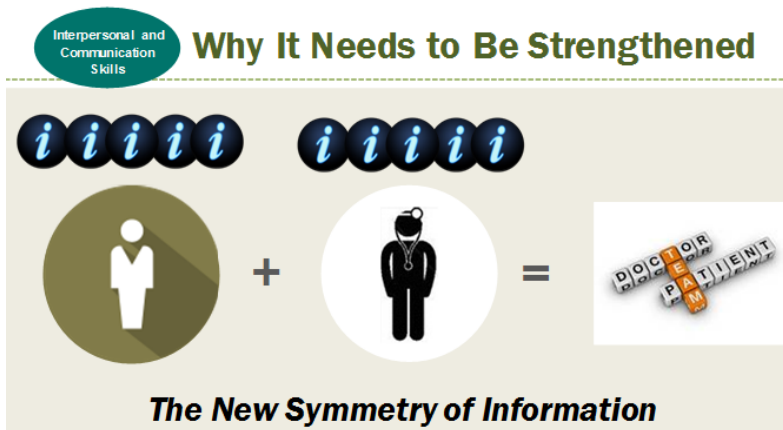
That's changing thanks to a CDC-funded Association of American Medical Colleges (AAMC) demonstration project at select medical centers. The initiative blends Duke University Medical School's population health curriculum with a systems-based learning curriculum that addresses local health needs. As a member of AAMC's Systems Thinking Advisory Group and Planning Committee, Dr. Feinstein is helping to define the project's curriculum and measures of success.

Dr. Feinstein also talked with participants about how JHF is planning to help strengthen the fourth core competency of graduate medical education — interpersonal and communication skills — through the new [Center for Health Information Activation](#) (CHIA). CHIA recognizes the mutual expertise of patients and providers and will provide a number of resources to assist both patients and providers in fostering two-way, goal-directed communication.



Karen Feinstein discusses changes in medical education that will prepare students to deliver quality care in a healthcare landscape defined by value and outcomes, rather than volume.

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During her presentations, Karen Feinstein explained that a new brand of tech-savvy, information-seeking patients will require providers to bolster their interpersonal and communication skills.

The Retreat highlighted some of Allegheny Health Network's efforts to develop systems thinkers. Among other initiatives, residents are encouraged to join multidisciplinary groups that develop campaigns to improve care for diabetics, heart failure patients, or those receiving palliative care. During ambulatory blocks, residents craft quality improvement projects based on what they learn from American College of Physicians- Alliance for Academic Internal Medicine curriculum that trains them to avoid overuse and misuse of tests and treatments that aren't shown to improve patient outcomes.

"I'm very impressed," Dr. Feinstein says. "Allegheny Health Network is immersing residents in quality improvement and safety practices so they can provide leadership in the organization and stimulate thinking among long-term staff."

On October 30, Dr. Feinstein also discussed systems thinking and recounted PRHI's 17-year mission to deliver safer and compassionate care as a guest lecturer for Professor David Young Miller's Introduction to Public Affairs class in the University of Pittsburgh's Graduate School of Public and International Affairs. She noted that there are more than 5,000 graduates of PRHI's [Perfecting Patient CareSM](#) curriculum worldwide, all schooled in the systems-based approach needed to give health care a reboot.

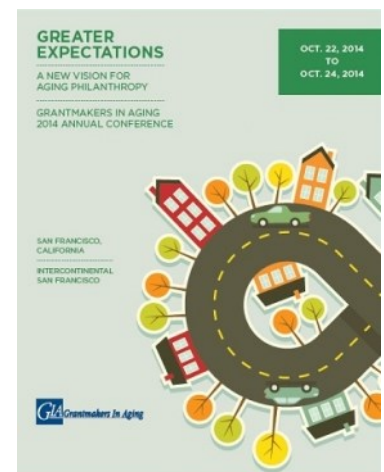
Nancy Zionts Shares Success of *Closure*, PA POLST During Grantmakers in Aging's National Conference

Grantmakers in Aging (GIA) held its annual national conference from October 22 to 24 in San Francisco, CA, where leaders from the philanthropic, public, business, academic, and healthcare sectors explored ways to better serve the diverse needs of a growing population of seniors. The theme for the 2014 conference was "Greater Expectations: A New Vision for Aging Philanthropy." Nancy Zionts served on the GIA Fellows Committee and also participated in two sessions.

Exploring Palliative Care Together

During a preconference session, Nancy, Amy Berman, RN (senior program officer, John A. Hartford Foundation), Alex Rossides (president, Social Impact Exchange), and Sandra Hernandez, MD, the new president and CEO of the California HealthCare Foundation (CHCF), welcomed funders who are engaged in or exploring palliative care. The session focused on how best to create and maintain an infrastructure supportive of palliative care, which elevates the quality of life for patients who are seriously ill while also decreasing unnecessary hospitalizations and the costs of care.

The group discussed the current state of palliative care, as well as opportunities to expand access and training in



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communities through systems change strategies, such as policy reform and specific scalable interventions. Nancy highlighted JHF's [Closure](#) and PA POLST (Physician Orders for Life-Sustaining Treatment) initiatives to show how local and regional funders concerned with aging, chronic disease, re-hospitalization, transitions of care, patient engagement, and family caregiving can raise expectations for senior care.

GIA Fellows: Meet Tomorrow's Leaders in Aging Today

Nancy, a member of GIA's Fellows Committee, moderated a session that enabled top young researchers in aging to present their findings to funders from across the country. The fellows delved into topics ranging from 'Aging and HIV/AIDS' to Alzheimer's disease to policy changes that could better protect vulnerable seniors.

JHF Bringing *Closure* to Harrisburg



Harrisburg's *Closure* initiative kicked off with presentations from (L-R): James Hoefer, PhD, a Political Science professor at Dickinson College; philanthropist Bob Haigh; Arlene Bobonich, MD, an internal and palliative care physician at Pinnacle Health System; and Nancy Zionts.

On October 13, Harrisburg kicked off a [Closure](#) series to spark community conversations on improving end-of-life care. Around 60 community advocates, primary and long-term-care professionals, clergy, social workers, academics, lawyers, and policy-makers participated in the first of six *Closure* sessions, which will run through March of 2015 and culminate with an end-of-life action plan tailored to the region. Harrisburg's initiative follows a successful *Closure* series launched in Carlisle, PA last winter.

During the first session, Harrisburg stakeholders learned more about key health, philanthropic, and policy issues surrounding end-of-life care from Nancy Zionts; Arlene Bobonich, MD, an internal and palliative care physician at Pinnacle Health System; Harrisburg philanthropist Bob Haigh; and James Hoefer, PhD, a Political Science

professor at Dickinson College. The Harrisburg sessions are sponsored by the *Closure* Planning Committee, Capital Blue Cross, Hospice of Central Pennsylvania, Pinnacle Health System, Partnership for Better Health, and The Foundation for Enhancing Communities.

New Video Recounts JHF's 20-Plus Year Commitment to Enhancing Seniors' Lives

Since the early 1990s, JHF has invested over \$50 million to improve the quality of life for older adults, and others nearing the end of life. With the 2007 kickoff of the [Closure](#) initiative, JHF sought to raise awareness and change expectations around end-of-life care, and ultimately to spark a social movement to improve care and respect patient preference.

Through in-person presentations, online learning material, *Closure* Community Conversations, and *Closure* 101 (a curriculum of lessons developed to educate consumers and healthcare professionals about end-of-life issues and options), *Closure* gives people access to the tools and resources they need to make educated end-of-life decisions that are consistent with their values and beliefs.

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Please take a few moments to watch this [video](#) that offers an outline of an agenda. We hope you might replicate some of what we, and the Fine Award winners, have done and also enhance it. You will see some heartwarming stories from our annual [Fine Awards for Teamwork Excellence in Health Care](#) about improving care for those in the final stages of life, training those who are caregivers, having important discussions with patients and families, training medical professionals, and extracting maximum value from a limited time on earth.

Jonas Salk Fellows Use Systems Thinking to Stem Disease Outbreaks, Predict Impact of Public Health Actions

During flu season, Pittsburgh is hit with a hoard of patients suffering from severe fever, chills, and muscle pain. Emergency departments and hospital beds quickly fill, and fear spreads among citizens. State and federal health experts confirm an outbreak of Middle East Respiratory Syndrome (MERS), which can be transmitted person-to-person and kills over a quarter of those infected. In response, the Allegheny County Health Department and EMS convene a meeting to develop an action plan.

What now? The 2014-15 Jonas Salk Fellows had to answer that question during a visit to the Allegheny County Emergency Services Situation Room on September 29, participating in a simulated exercise facilitated by Dr. John Mahoney, associate dean for medical education at the University of Pittsburgh School of Medicine. The Fellows took on roles ranging from medical director to reporter to police chief, considering all of the perspectives needed to keep the public safe and informed.



Knox Walk, EMS division chief, provides an overview of emergency management functions at the Allegheny County Department of Emergency Services Situation Room.



Priyanka Bagmar (right), a recent Carnegie Mellon University Masters in Biotechnology and Management graduate, discusses Health IT start-ups with Yang Cai, PhD, a principal investigator at the Disruptive Health Technology Institute.

The simulated MERS outbreak is just one example of how this year's fellowship provides hands-on opportunities for students to learn from experts in various approaches to systems-based problem-solving. Fellows are crafting their own solutions to complex public health issues by applying four problem-solving lenses: crisis management, disruptive innovation, predictive modeling, and activism and advocacy.

During the Allegheny County Emergency Services Situation Room visit, fellows also toured the 9-1-1 Center and received an overview of emergency management functions and procedures from Knox Walk, EMS division chief, and Dr. Ron Roth, professor of emergency medicine and medical director for the City of Pittsburgh and Allegheny County Emergency Operations Center.

Fellows explored Carnegie Mellon University's Disruptive Health Technology Institute (DHTI) on October 13, hosted by Associate

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Dr. John Mahoney discusses emergency response strategies with fellows during a simulated exercise about a Middle East Respiratory Syndrome outbreak. Each fellow assumed the role of a key stakeholder, including a hospital administrator, business leader, the media, and public safety officer, to generate a coordinated response strategy.

Director Charlotte Emig and Principal Investigator Yang Cai, PhD. The DHTI is developing technologies such as enhanced colonoscopy procedures and breast cancer screening using an in-home, hand-held palpation device. Dan Bishop, chief innovation officer at Qualaris Healthcare Solutions and a Health Careers Futures board member, also shared innovations in tracking quality improvement efforts to reduce healthcare-associated infections.

During the fellowship's fourth session on October 27, John Grefenstette, PhD, professor at the University of Pittsburgh Graduate School of Public Health, explained how predictive modeling can inform public health decision-making by simulating the spread of infectious diseases, creating "what if" scenarios, and gauging the effects of potential interventions.

On November 3, Seth Mnookin, associate director of MIT's graduate program in Science Writing and contributing author to *The New Yorker*, will examine the activism and advocacy problem-solving lens with fellows. In the final session on November 24, Fellows will apply what they learned this year by proposing solutions to population health problems including ending sexual assault on college campuses, preventing hospital-acquired infections, re-engaging people with HIV/AIDS in care, boosting low HPV vaccination rates, and helping seniors remain at home.

JHF Supports Jonas Salk Centenary Symposium on Sustainability

Few scientific achievements have had as dramatic an effect as the polio vaccine developed by Jonas Salk and his team of researchers at the University of Pittsburgh School of Medicine. It virtually eradicated polio, which disabled or killed tens of thousands of (predominantly) children before the vaccine was widely introduced in 1955.

In honor of what would have been Jonas Salk's 100th birthday, the University of Pittsburgh Graduate School of Public Health and Office of the Provost, and the Jonas Salk Legacy Foundation hosted the "Jonas Salk Centenary Symposium on Sustainability: Survival of the Wisest" on October 28. JHF, PNC, UPMC, and the Richard King Mellon Foundation supported the Symposium.

The Symposium featured speakers from multiple disciplines, with emphasis on the environment, the economy, and public health, including Peter Salk, Jonas Salk's son and president of the Jonas Salk Legacy Foundation. The keynote was delivered by the director of The Earth Institute at Columbia University, Jeffrey Sachs. Karen Feinstein introduced the luncheon presentation on "Finding Solutions and Creating Energy Smart Communities" by Joylette Portlock, president of Communitopia and member of the Allegheny County Board of Health.



Karen Feinstein introduced Joylette Portlock, who gave the luncheon presentation "Don't Just Sit There – Do Something! Finding Solutions and Creating Energy Smart Communities."

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In addition to his scientific work, Jonas Salk was interested in interdisciplinary interactions and “humankind’s capacity to emphasize and draw out its best characteristics to deal most constructively with the challenges and opportunities” that confront us. JHF named its Jonas Salk Fellowship, which introduces graduate students in health-related disciplines to the prominent ethical issues facing the healthcare system today, in his honor.

Local Leaders in Infection Control, Pain Management to be Honored at Fine Awards for Teamwork Excellence on November 12

On November 12, from 6:00 to 8:00 p.m. at the Carnegie Museum of Art, JHF will host the awards presentation and recognition of finalists for the 2014 [Fine Awards for Teamwork Excellence in Health Care](#). This year’s Fine Awards recognize frontline workers in the greater Pittsburgh area who elevate and disseminate best practices in infection control or pain management — two quality measures that influence whether providers receive incentive payments or incur penalties from CMS. The winning teams, selected by a national panel of experts, were required to show evidence of sustainable quality improvement.



Established by The Fine Foundation and JHF in 2008, the Fine Awards annually honor teams that galvanize system-wide change through innovative quality improvement initiatives aimed at delivering safer, more efficient, and patient-focused care. The 2014 finalists are:

Allegheny Health Network – Allegheny Valley Hospital: Eliminating Hospital-Acquired Clostridium Difficile Infections

Allegheny Health Network – Forbes Hospital: Reducing Incidence of Catheter-Associated Urinary Tract Infections

Allegheny Health Network – Saint Vincent Health Center: Improving Safe Use of Opioid Therapy

Children’s Hospital of Pittsburgh of UPMC: Creating a Culture of Excellence in Central Line Care

Excelsa Health: Acinetobacter – Learning How to Eradicate Resistant Organisms

St. Clair Hospital: Surgical Site Infection Prevention

The Bone and Joint Center – Magee-Womens Hospital of UPMC: Reducing Surgical Site Infections in Total Joint Arthroplasty

UPMC McKeesport: Resolving a Sudden Increase in Central Line-Associated Bloodstream Infections

UPMC St. Margaret: Spinal Fusion Surgical Site Infection Prevention

VA Pittsburgh Healthcare System: Regional Anesthesia and Pain Prevention for Joint Replacement

If you are interested in attending, please RSVP by November 4 to [Allison Maksin](mailto:amaksin@jhfh.org) (amaksin@jhfh.org or 412-586-

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6714).

To learn more about previous Fine Awards winners and see videos of their quality improvement projects, [visit JHF's website](#).

JHF-Funded Documentary on Empowered Patients Goes Nationwide

The Empowered Patient, a half-hour WQED-TV special exploring the new patient-provider relationship in the era of increasing accessibility to health data, is coming to Public Broadcasting Service (PBS) viewers across the country. The JHF and Josiah Macy Foundation-funded documentary has been selected for national distribution by PBS, which over 100 million Americans tune in to watch each month. The Empowered Patient first aired in Pittsburgh in June of 2014 and was featured in that month's [WINDOW](#).

To watch the full WQED-TV special online, [click here](#) or visit: <http://wqed.org/tv/specials/empoweredpatient.php>

JHF Staff Learn How HERL Improves Lives of the Disabled



Karen Feinstein and JHF staff tour the Human Engineering Research Laboratories (HERL) at the invitation of Deepan C. Kamaraj, MD, a 2014 JHF summer intern and a research associate at HERL. Karen and Deepan check out CAREN (Computer Assisted Rehab Environment), a 3-D virtual reality system that simulates different surfaces to observe a person's gait.

On October 15, Karen Feinstein, Nancy Zionts, and JHF Consultant Chris Fulton visited the HERL (Human Engineering Research Laboratories) at Bakery Square. Established in 1994, HERL is a joint effort by the University of Pittsburgh, the VA Healthcare System, and the University of Pittsburgh Medical Center Health System to develop and test assistive technology for returning veterans and others with disabilities such as multiple sclerosis, traumatic brain injury, and cerebral palsy. The work also has great potential to help frail seniors live independently in the community.

Karen, Nancy, and Chris visited HERL at the invitation of Deepan C. Kamaraj, MD, a 2014 JHF summer intern.

Dr. Kamaraj is a research associate at HERL and a graduate student researcher at Pitt's School of Health and Rehabilitation Sciences. Members of JHF's 2014-15 Salk Fellowship, including students who are developing strategies to prevent avoidable institutionalization of frail seniors, will soon have the opportunity to visit HERL.

Safety Net Medical Home Initiative (SNMHI) Featured in American Public Health Association Journal

From 2009 to 2013, PRHI provided training and on-site coaching to ten local community-based health centers as they endeavored to transform their practices into Patient Centered Medical Homes (PCMH). The practices, serving many at-risk patients, worked with PRHI to implement electronic health records, increase patient access, and reach out to those missing appointments or lacking connections to the health system entirely.

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Those local efforts were part of the [Safety Net Medical Home Initiative](#) (SNMHI), a multi-state project sponsored by the Commonwealth Fund to bring expanded primary care services to communities most in need. SNMHI is showcased this month in a special supplement of [Medical Care](#), an American Public Health Association journal. The nine-article supplement offers original research on what it takes to provide coordinated, wrap-around care to vulnerable populations and sustain the medical home model well beyond the four-year SNMHI project.

JHF Sponsors ReelAbilities Film Festival

JHF was a proud sponsor of the second annual ReelAbilities Pittsburgh Film Festival, which celebrates the stories and artistic contributions of those with disabilities through award-winning movies, live concerts, and community forums. ReelAbilities launched in New



York in 2007 and was brought to Pittsburgh in 2013 thanks to a partnership between JFilm and the FISA Foundation, which is committed to improving the quality of life for southwestern Pennsylvania's women, girls, and disabled individuals.

This year's ReelAbilities Pittsburgh Film Festival, held between October 22-30, featured special guests including Shailen Abram (a visually-impaired pianist and singer from the Pittsburgh Creative and Performing Arts school, who once jammed with Stevie Wonder) and Shawn McGill, a University of Pittsburgh graduate who founded a consulting service dedicated to adults with intellectual and developmental disabilities.

Recruitment Period Now Open for QI²T Health Innovators Fellowship



The QI²T Health Innovators Fellowship is a competitive, 12-week program designed to give students a meaningful entry into health entrepreneurship. Fellows will work closely with clinical and entrepreneurial mentors and a multi-disciplinary team to move from idea to implementation, and pitch for an opportunity to win \$5,000.

We're looking for graduate students (and select undergrads) interested in dramatically improving health care through technology and startups. That means people from fields as diverse as design, health sciences, computer science, business, engineering and more.

JHF has worked with more than 50 health innovation fellows since launching this program in 2013. Our fellows have gone on to launch startups, join major tech companies, and work throughout health care.

To start your health IT journey, [apply online](#) by **November 10**.

PRHI Welcomes New Staff Member

We are pleased to announce that **Carol Frazer, LPC**, has joined PRHI as a practice transformation specialist, working with the PA REACH West team to help providers deliver integrated behavioral and physical health services and achieve patient-centered medical home status. Carol most recently served as director of care management at Pittsburgh Mercy Health System, where she developed a comprehensive integrated care management program and assisted in developing quality measures that meet National Committee for Quality Assurance (NCQA) standards. Previously, she was an outpatient therapist, clinical supervisor, and unit director at Mercy Behavioral Health, spearheading efforts to co-locate behavioral health in primary care settings. Carol also maintained a private practice in the Pittsburgh region for 16 years, providing therapy to patients with comorbid health conditions and training local non-profits to help children cope with issues of sexual assault and alcohol dependency in their families. She earned a BS in Vocational Rehabilitation Education from Indiana University of Pennsylvania and a master's degree in Counselor Education from the University of Pittsburgh.

JHF, PRHI in the News

In addition to the articles about the release of the “Updated Guidelines for the Control of Legionella in Western Pennsylvania,” we had a number of other placements this month. We wanted to share a few with you:

The **Allegheny County Medical Society Bulletin** featured an article by PRHI Chief Learning and Medical Informatics Officer Bruce Block, MD, “[JHF launches program to support new patient-provider relationship](#).”

“[Innovative hospital-based care model puts pharmacists on the team](#)” (**Pharmacy Today**, October 2014) features the role of the pharmacist in the Primary Care Resource Center (PCRC) readmission reduction project.

Karen Feinstein wrote an Op Ed, “[Customer empathy motivator for perfection](#),” which was published in the October 24 issue of the **Pittsburgh Business Times**.

Happy Halloween!

