

# THE WINDOW



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

## Inside this issue

### 2016 Fellowship on Death and Dying Preparing Young Professionals for Difficult, yet Crucial Conversations

In late January, 46 graduate students and young healthcare workers began their journey in a Health Careers Futures (HCF) and Jewish Healthcare Foundation (JHF) fellowship designed to take on a key challenge: the reality that professionals are often ill-equipped to confront issues related to death, dying, and grieving families.

The second annual Fellowship on Death and Dying, featuring students and professionals from six local universities and more than a dozen disciplines, empowers participants to learn, confront, and discuss the legal, medical, social, cultural, familial, and spiritual aspects of death and dying in a low-pressure environment. Modeled after JHF's [Closure](#) Community Conversations and curriculum, the fellowship includes those with backgrounds in social work, nursing, occupational therapy, administration, medicine, genetics, ethics, public health, pharmacy, communication, divinity, policy, and psychology.

JHF's Fellowship on Death and Dying team includes COO/CPO Nancy Zions; Director of Government Grants and Policy Robert Ferguson; Physician Consultants Tamara Sacks, MD and Jonathan Weinkle, MD; Administrative Coordinator Ben Johnston; and Administrative Assistant Catherine Mutunga.

"To a person, all of the fellows expressed the desire to either

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supplement, or in many cases, have their only exposure to issues of death and dying in their formal education and training,” Zionts says. “This fellowship offers experiences and skills that you can’t get in a classroom.”

That lack of exposure isn’t serving patients, families, or professionals well. When matters of death and dying are taboo, patients’ and families’ care goals might not be honored. Invasive, costly treatments that do not extend life and diminish quality of life prevail. Unfortunately, conversations on the subject remain rare. While 80% of Americans would like to talk to their doctor about end-of-life care, less than one in ten actually do so, according to a survey conducted by the California Healthcare Foundation. Ninety percent want to talk to family about end-of-life care, yet only 30% follow through.

“It’s incredibly promising that these fellows have come forward in the formative stages of their careers, and realize how important having these conversations can be,” Zionts says.

On January 25, the fellowship began with a session at the QI<sup>2</sup>T Center that provided an overview of issues of death and dying, and the benefits of palliative and hospice care. On February 1, the fellows explored advanced care planning and the legal aspects of death and dying at UPMC Shadyside with Marian Kemp, coordinator for Pennsylvania Physician Orders for Life-Sustaining Treatment (PA POLST) and a member of the Coalition for Quality at the End of Life (CQEL). Fellows also toured the intensive care unit and discussed having difficult conversations with UPMC Shadyside internal medicine



JHF COO/CPO Nancy Zionts welcomes participants to the first session of the 2016 Fellowship on Death and Dying, held at the QI<sup>2</sup>T Center on January 25.



JHF Physician Consultants Tamara Sacks, MD (center), and Jonathan Weinkle, MD (far right), lead fellows in a discussion of advanced care planning and the legal aspects of death and dying during a session held in the UPMC Shadyside Board Room.

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physician Ron Stiller, MD, and Jason Byron, manager of medical ethics.

During the third session on February 22, fellows were exposed to the ethical and spiritual aspects of death and dying at Children's Hospital of Pittsburgh of UPMC. Children's Hospital Manager of Pastoral Care Rev. Richard Freeman, Sr., MSPC; Director of Pediatric Palliative Care Betsy Hawley; and Supportive Care Program Manager Carol May, RN, MSN, MBA, CHPPN, facilitated a conversation on family dynamics.

During future sessions, Fellows will learn more about community resources and options at the end of life at the Jewish Association on Aging; long-term care, dementia, and hospice care at West Penn Hospital's Forbes Hospice; and the experience of family caregivers at the Good Grief Center—Ursuline Support Services. The program culminates in early April, when fellows synthesize their new experiences and skills to create action plans that improve end-of-life education, policy, and attitudes in their programs and communities.

"The fellowship is timely, given that Medicare now reimburses physicians for counseling patients on end-of-life care," Zionts says. "But reimbursement changes don't suddenly make everyone an expert at having these conversations. These fellows will be able to have high-quality discussions that place patients and families at the center. For the Foundation, this fellowship is a culmination of decades of work in this field."



Marian Kemp (standing), coordinator of Pennsylvania Orders for Life-Sustaining Treatment (PA POLST), provides an overview of advanced care planning and legal documentation that can ensure patients' and families' goals of care are honored.



The 2016 Fellowship on Death and Dying features 46 graduate students and young professionals, from six local universities and a variety of disciplines.

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## Karen Feinstein Honored as 2015 Pittsburgher of the Year during Ceremony

A child and grandchild of movie fanatics, JHF President and CEO Karen Wolk Feinstein, PhD, logs serious hours at local theaters. The films she screened over the holidays—*Concussion*, *Spotlight*, *The Big Short*—all centered on large systems that had lost their moral compass, and truth-seekers who exposed problems and demanded more for everyday Americans.

Truth-seeking and compassion have defined Dr. Feinstein's 25-year tenure as founding president and CEO of JHF—and those qualities helped earn her recognition as a 2015 Pittsburgher of the Year by Pittsburgh Magazine. On January 14, Dr. Feinstein and fellow Pittsburghers of the Year Morgan O'Brien (immediate past chair of the Allegheny Conference on Community Development as well as president and CEO of Peoples Natural Gas) and Tony Award-winning performer Billy Porter were honored during a reception held at the Rivers Casino Ballroom.

"I like Karen because she always does what's right, not merely what's comfortable," Pittsburgh Mayor Bill Peduto said while introducing Dr. Feinstein to the stage to accept her award during the ceremony. "For shepherding JHF from its creation through its evolution into a national voice for patient safety and healthcare quality, we honor Karen tonight."

Revealing serious problems means disrupting business as usual, Dr. Feinstein told the crowd while noting the parallels between the protagonists of *Concussion*, *Spotlight*, and *The Big Short* and her band of truth-seekers at JHF/PRHI. "I want to thank the many board members and staff who have always brought evidence, credibility, and courtesy to our work. Each day, I am surrounded by heroes."



JHF President and CEO Karen Wolk Feinstein, PhD, (center), accepts her 2015 Pittsburgher of the Year award from Pittsburgh Mayor Bill Peduto (right).



Pittsburgh Mayor Bill Peduto (far left) with 2016 Pittsburghers of the Year Karen Feinstein and Morgan O'Brien (far right), immediate past chair of the Allegheny Conference on Community Development and president and CEO of Peoples Natural Gas. Tracy Brigden (next to Peduto), artistic director of City Theater, accepted a Pittsburgher of the Year award on behalf of Tony Award-winning performer Billy Porter.



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## 2016 Fine Awards to Recognize Teamwork Excellence, Spread Knowledge across Generations; Applications Due March 7

High-performing organizations require teams that work collaboratively to measurably improve care, save lives, and make important discoveries. Since 2008, JHF has partnered with The Fine Foundation to recognize and reward teams that demonstrate innovative, exceptional performance around patient safety and quality improvement within their organizations.

In 2016, the Fine Awards will honor teamwork excellence in three clinical settings—and the winners will have the opportunity to spread their knowledge and commitment to quality to a new generation of healthcare leaders.

Teams from a primary care practice, a skilled nursing or behavioral health unit, and a hospital unit are encouraged to apply for the 2016 Fine Awards. A panel of esteemed judges will evaluate Fine Award candidates based on whether their projects:

- Clearly identify the dimensions of the problem that they attempted to solve
- Demonstrate support of top administrators for the quality initiative
- Show innovation in the approach to the issue or problem
- Include a minimum of 12 consecutive months (through December 2015) of measurable data that demonstrate improvement
- Show that the team has moved the quality bar within their organization
- Include the plan for sustainability and/or spread where relevant

One winning team from each clinical setting will be selected, and will receive a \$20,000 prize. Members of the three winning teams will serve as mentors for [JHF's Patient Safety Fellowship](#), hosting the multidisciplinary graduate students for clinical observations as well as helping them apply quality improvement and teamwork concepts to their future roles in health care. Winners will also work with JHF and The Fine Foundation to guide future versions of the Fine Awards and Patient Safety Fellowship.

JHF opened the RFA process for the 2016 Fine Awards in January, and will accept [online applications](#) from interested teams through **March 7, 2016**. The application can be accessed at: [jhf.org/fine-awards/award.php?year=2016](http://jhf.org/fine-awards/award.php?year=2016)

To learn more about the Fine Awards and view short “Teachable Moment” videos on award-winning projects from years past, [click here](#) or visit: [jhf.org/fine-awards](http://jhf.org/fine-awards)



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## PRHI Releases Playbook for Preventing Falls in Long-Term Care

During the fall of 2015, PRHI launched the Positive Deviance Initiative to study high performers among local long-term care facilities, hospitals, and medical groups, uncover key elements that contribute to their success, and spread those best practices to peer organizations.

The first standout that PRHI partnered with for the initiative was Vincentian de Marillac, a skilled nursing facility that is part of Vincentian Collaborative System's network of senior care communities. Vincentian de Marillac is the only long-term care facility in Allegheny County to achieve a five-star rating in quality of care in four consecutive quarters, according to CMS Nursing Home Compare data, with top tier performance in a critical metric—prevention of falls with major injury.



(Clockwise): PRHI Quality Improvement Specialists Stacie Bonenberger, and Anneliese Perry; Jen Condel, Manager of Lean healthcare strategy and implementation; Vincentian Collaborative System (VCS) CEO Raymond Washburn; COO Susan Lewandowski, NHA; Vincentian de Marillac Administrator Jennifer Pruett, NHA; and VCS Director of Quality/Risk Management Louanne Plank, RN.

To understand how Vincentian de Marillac achieves those impressive results, a PRHI quality improvement team conducted thorough observations and interviews to learn more about the facility's leadership and culture, staff training and education, adverse event prevention and response, and sustainability. [In a new report](#), PRHI has released its findings on preventing falls in long-term care facilities.

PRHI identified ten drivers of success in preventing falls at Vincentian de Marillac, including favorable staffing ratios, highly visible leadership, a commitment to the organizational mission and values, an investment in staff growth and development, “warm hand-offs” during shift changes so that staff understand residents’ conditions and needs, front-line staff empowerment, an environment that eliminates potential hazards for residents, an “all eyes on deck” culture where all staff feel responsibility for residents’ well-being, an organizational commitment to quality improvement, and an emphasis on staff retention.

“Vincentian is still asking, ‘how can we be better?’” says PRHI Chief Medical Officer Keith Kanel, MD, who leads a PRHI Positive Deviance Initiative team that features Quality Improvement Specialist Stacie Bonenberger, MOT, OTR/L; Manager of Lean Healthcare Strategy and Implementation Jen Condel, SCT (ASCP)MT; and Quality Improvement Specialist Anneliese Perry, MS. “Even though they’re the best, they’re not taking the pedal off the accelerator. They’re focused on improving the entire operations and philosophy of the organization, and are implanting concepts from Vincentian de Marillac into their other

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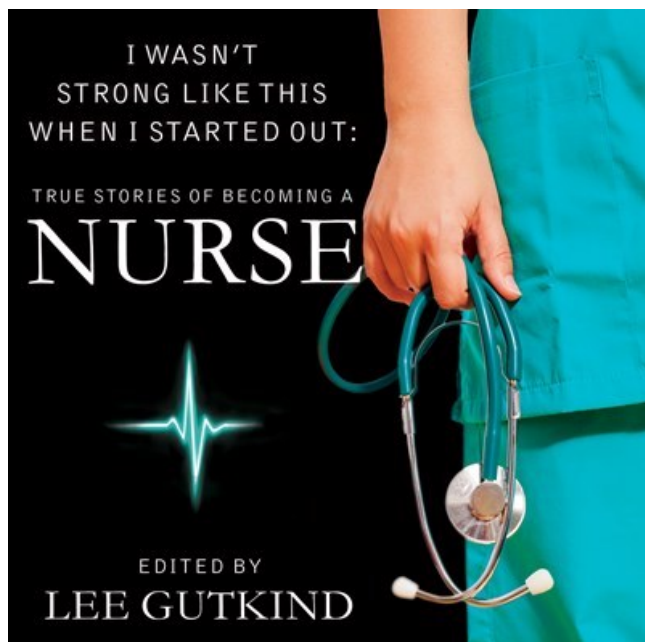
two nursing homes and their parent organization. They reduced falls—but they still had a fall. If you’re committed to getting to zero like they are, that’s not good enough.”

In addition to partnering with other nursing homes in the region to implement best practices in falls prevention, PRHI will begin its Positive Deviance efforts in hospitals during the spring. Work with medical group practices will follow.

“At Vincentian, we learned that leadership is paramount,” Dr. Kanel says. “As we look at the hospital domain, we’re going to shift our focus more toward positive deviants in leadership. Communities have to select their leaders well, and demand a certain standard from those leaders. PRHI can help identify that standard.”

## JHF, Creative Nonfiction Work on Nurses Nominated for Audio Book Equivalent of an Oscar

[\*I Wasn't Strong Like This When I Started Out: True Stories of Becoming a Nurse\*](#), a collection of personal narratives produced through a partnership between JHF and Creative Nonfiction, has been nominated for an Audie Award® in nonfiction. Bestowed annually since 1996 by the Audio Publishers Association, the Audies recognize excellence in audio books and spoken word entertainment. Winners of the 2016 Audie Awards—considered the audio book equivalent of the Oscars—will be announced on May 11 during a ceremony held at the Adler Planetarium in Chicago.





## JHF, Community Partners Continue Mission to Ensure Seniors, Disabled Benefit from Shift to Managed Long-Term Services and Supports

On January 1, 2017, a new Managed Long-Term Services and Supports (MLTSS) program will launch in western Pennsylvania, delivering long-term services and supports to seniors and disabled individuals through capitated Medicaid managed care programs. In other states that have implemented MLTSS, eligible populations have often benefited from a more integrated care network that increases access to home-and-community-based services, which preserve independence while helping to prevent avoidable hospitalizations and institutionalizations that diminish quality of life and deplete budgets.

Our region, with its strong track record in outreach, enrollment, and network-building for the health insurance marketplace, was selected as the first to implement MLTSS (called Community HealthChoices) in Pennsylvania. Last December, JHF began the process of ensuring a smooth roll-out of MLTSS by convening regional stakeholders for a meeting that offered an overview of the Community HealthChoices program, showcased effective MLTSS models elsewhere in the country, and forged new connections between medical, social service, and community-based groups.

On January 27, the Foundation continued its work on behalf of seniors and the disabled by hosting a second regional MLTSS



Bob Nelkin, president and CEO of the United Way of Allegheny County, welcomes the 95 people who attended the latest stakeholders meeting to ensure that there is a smooth roll-out of Managed Long-Term Services and Supports in western Pennsylvania.



Stakeholders work together to identify intermediaries who can help disabled individuals learn more about Managed Long-Term Services and Supports, and connect them with services that promote community-based, independent living.

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stakeholders meeting at the QI<sup>2</sup>T Center. Ninety-five attendees gathered to explore communications strategies that could help reach the goal that 95% of eligible individuals have heard about MLTSS prior to receiving enrollment documents.

“Those gathered here today represent many diverse groups, and you all have a role—outreach, services, communication—in ensuring the success of MLTSS in our region,” Karen Feinstein said while welcoming attendees. “Today’s turnout shows that western Pennsylvania wants to roll out MLTSS in the best possible way.”

During the meeting, stakeholders representing seniors, dual eligible populations (including veterans), and the disabled worked in three breakout groups to identify constituents’ concerns about MLTSS, effective ways to share information on enrollment and services, and trusted intermediaries who can help constituents maximize the value of those services.



During a meeting at the QI<sup>2</sup>T Center, Christopher Garnett, MSS, JHF’s HIV planning and evaluation coordinator (center), facilitates a brainstorming session on ways to ensure that dual eligible populations understand their options and receive seamless care through a new Managed Long-Term Services and Supports program.

Several unifying themes emerged. Messaging should be clear, relatable, and targeted to particular subpopulations, helping constituents understand how Community HealthChoices affects them without subjecting them to an avalanche of paperwork and academic jargon. Enrollment hotlines, FAQs, and public forums can help constituents give feedback and receive answers to critical questions. Libraries, senior centers, housing agencies, and faith-based groups are among the many non-medical partners who can play an important role. The messenger needs to be a trusted, neutral party. And the message can be

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delivered any number of ways—flyers, public service announcements, radio spots, text messages—depending on the constituent.

Jen Burnett, deputy secretary of the PA Department of Human Services' Office of Long-Term Living, then provided an update on Community HealthChoices. She noted that her office received more than 3,000 responses during an open comment period on the program, and that she will reach out again in the near future to set up listening sessions and craft marketing materials that help seniors and the disabled make informed decisions. A Community HealthChoices RFP will be released in the near future.

"We have an army of the willing, focused on ensuring that Community HealthChoices rolls out to the benefit of the whole community," Nancy Zions said while closing out the meeting. "We will work it out and succeed—it's the western PA thing to do."

## **Karen Feinstein Discusses Translating Data into Action, Partnerships for Better Population Health during Pittsburgh Business Group on Health Trends Forum**

On February 16, Karen Feinstein was a featured panelist during a Pittsburgh Business Group on Health Trends Forum event that focused on harnessing data analytics and innovation to move the needle on America's dismal population health, and creating work environments that support whole-person wellness. "America's Health Rankings—A Call to Action" was held at the Pittsburgh Marriott City Center.

Along with Dr. Feinstein, the Trends Forum panel included UnitedHealthcare Market Medical Director Craig Butler, MD, MBA, CPE; UnitedHealthcare Vice President of Sales and Account Management E.J. Heckert; and Jim Giel Jr., assistant VP of human resources and benefits for Dollar Bank. Allison Davenport, CEO of UnitedHealthcare Community Plan of Pennsylvania, moderated the panel.



Karen Feinstein (center) discusses employer-employee partnerships to achieve better health outcomes during "America's Health Rankings – A Call to Action," an event hosted by the Pittsburgh Business Group on Health. Allison Davenport, CEO of UnitedHealthcare Community Plan of Pennsylvania (left), moderated a panel discussion featuring Dr. Feinstein, Jim Giel Jr., assistant VP of human resources and benefits for Dollar Bank (right); and (not pictured) UnitedHealthcare Market Medical Director Craig Butler, MD, MBA, CPE; and Vice President of Sales and Account Management E.J. Heckert. (Photo credit: Mark Simpson)

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Dr. Butler set the stage for the discussion by providing an overview of how Pennsylvania compares to other states as measured by the annual America's Health Rankings® report, a joint effort of the United Health Foundation and the American Public Health Association that measures wellness by analyzing four core measures: behaviors, community and environment, policy, and clinical care. Overall, Pennsylvania ranks 29th in the health rankings report. The commonwealth boasts above-average immunization rates among children and adolescents, a decreasing population of smokers, and a low incidence of infectious disease, but is challenged by poor air quality, rising rates of obesity and diabetes, and a drug-related death rate that's nearly 40% above the national average.

During the panel, Dr. Feinstein noted that there's a shared responsibility between employers, employees, and providers to achieve better health outcomes. Employers can take steps to ensure that the healthy choice is also the easy choice. At JHF, for example, employees can work out on in-office gym equipment, have access to heart-healthy foods, and are encouraged to greet people with a fist-bump rather than a germ-spreading handshake. Employees, in turn, have to take responsibility for their own health, recognizing that there's no magic pill or practitioner that will cure all that ails them.

"We can help people own their own health," Dr. Feinstein said, "by rewarding them for positive choices and by giving them ways to act on the data that we have. We also have to engage the healthcare workforce—policy alone doesn't change behavior at the front lines. Clinicians and other professionals need to buy in to change the patient care dynamic, to partner with activated patients."

Eckert highlighted trends shaping workplace wellness in 2016, including integrating fitness into the workplace, and offering smoking cessation, weight loss and stress management programs. Giel noted that items like rebates on weight loss support groups or gym memberships can give employees an additional incentive to own their own health.

### **JHF a Partner in RWJF-Funded Program to Link Data Sources, Improve Cardiovascular Health in Allegheny County**

JHF is among a cadre of local organizations that will partner with the Allegheny County

Health Department (ACHD) as part of the Data Across Sectors for Health (DASH) grant—an initiative to merge healthcare, public health, human services, economic, transportation, and education data to address cardiovascular disease in Allegheny County. ACHD was selected by the Robert Wood Johnson Foundation



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as one of ten national DASH grantees to implement programs that improve health through cross-sector data sharing.

"Sharing data across sectors narrows knowledge gaps, increases collaboration, and ultimately improves community health," said ACHD Director Karen Hacker, MD, in a press release announcing the DASH grant. "In order for our community to see better health outcomes, we need more comprehensive data—including data that sheds light on the social determinants beyond clinical health care that influence our health."

Cardiovascular disease is the leading cause of death both nationally and in Allegheny County. Through DASH, the ACHD will form a learning collaborative of local organizations that will identify the root causes of the condition, create a cardiovascular disease prediction model (run through Pitt's Framework for Reconstructing Epidemic Dynamics simulator, or FRED), and identify best practices in prevention, treatment, and policy.

The DASH initiative, funded from January of 2016 through July of 2017, will emphasize inequalities in cardiovascular health. Age-adjusted mortality rates for cardiovascular disease are significantly higher among African-American males (312 deaths per 100,000 people) than for white males (222), and African-American women (177) than for white women (139), according to the ACHD.

JHF brings data mining and analysis capabilities to the DASH initiative, and has a customized database of Pennsylvania Healthcare Cost Containment Council (PHC4) metrics that allow for long-term studies of the region's cardiovascular health. The Foundation will also engage fellow members of the Pennsylvania Health Funders Collaborative (PHFC), a network of 40 foundations from across the Commonwealth that work at the intersection of health philanthropy and policy. Karen Feinstein serves as co-chair of PHFC, along with Russell Johnson, president and CEO of the North Penn Community Health Foundation.

In addition to the ACHD and JHF, DASH partners include the Allegheny County Department of Human Services, Allegheny County Economic Development, Carnegie Mellon University's Traffic21 Institute, UPMC Health Plan, Pitt Public Health, and the RAND Corporation.



**Shared data and information**



**Collaboration**



**Multi-Sector**



**Focused on improving the health of communities**

The core components of the Data Across Sectors for Health (DASH) grant.



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## JHF-Led HPV Vaccination Initiative Focused on Provider Outreach in 2016

While the Foundation's [HPV Vaccination Initiative](#) continues to engage stakeholders across the Pittsburgh region, JHF has ramped up its efforts in 2016 to reach providers—whose strong endorsement of the HPV vaccine can make all difference in whether kids and young adults receive the cancer-preventing shot.

In January and February, JHF's provider outreach efforts included:

- Collaborating with Pittsburgh Public Schools (PPS) to conduct an in-service training on adolescent vaccines for 42 PPS nurses on January 26. Brenda Cassidy, DNP, RN, MSN, CPNP-PC, an assistant professor in the University of Pittsburgh School of Nursing's Department of Health Promotion and Development, led the training along with JHF Quality Improvement Specialist Deborah Murdoch, MPH, and Program Associate Sue Steele. The training focused on helping nurses answer parents' questions about the safety and efficacy of the vaccine.

- Facilitating a webinar on HPV vaccination for UPMC Children's Community Pediatrics' 40-plus practices located throughout western Pennsylvania. Cassidy facilitated the webinar along with Alan Finkelstein, MD, a family physician and faculty member at the UPMC-Shadyside Family Medicine Residency Program who also co-chairs JHF's vaccination advisory committee. Murdoch and Steele provided examples of how the Foundation has partnered with practices to boost HPV vaccination.



Brenda Cassidy, DNP, RN, MSN, CPNP-PC (center), an assistant professor in the University of Pittsburgh School of Nursing's Department of Health Promotion and Development, provides an overview of HPV and the benefits of vaccination to more than 40 Pittsburgh Public Schools nurses during an in-service training session on January 26.

- Working with the Allegheny County Health Department and PPS to include information on the HPV vaccine as part of an adolescent immunization mailing sent to parents of PPS children. By bundling it with immunizations that are required to attend school, the hope is to normalize the HPV vaccine, which is approved for boys ages 9-21 and girls ages 9-26, is covered by insurance or the federal

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Vaccines for Children program, and can reduce the risk of developing HPV-related cervical, vaginal, vulvar, anal, throat, and penile cancers by up to 99%.

- Joining the Pennsylvania Stakeholder Leadership Team (SLT) cancer coalition, a working group that is partnering Vaccines for Children providers across the state to boost HPV vaccination rates. JHF was invited to become a member of the coalition by Joanna Stoms, cancer plan manager for the PA Department of Health.
- Submitting and receiving approval to offer Continuing Medical Education (CME) credits for an HPV vaccination workshop during an upcoming Allegheny Health Network conference focused on the science and public health implications of HPV. The Foundation partnered with AHN leadership on the CME application.

JHF is also traveling to local practices intent on boosting HPV vaccination rates to offer education sessions for staff, talking points for discussions with parents, quality improvement training, and reader-friendly communications materials on the benefits of the HPV vaccine.

Bloomfield-Garfield Family Health Center is one such HPV vaccination champion. After finding that Bloomfield-Garfield—which has the largest adolescent and pre-teen population among three UPMC St Margaret’s-affiliated health centers—was vaccinating around 40% of eligible patients, the health center launched a patient care project centered on HPV. Nicole Payette, PharmD, and Bloomfield-Garfield Family Health Center Chief Medical Officer Ann McGaffey, MD, are leading the effort.

After attending one of the Foundation’s HPV advisory meetings, Payette set up a practice visit and education session with JHF staff. Bloomfield-Garfield now uses JHF-developed cards, handed out to parents upon check-in, that answers key questions about the effectiveness, safety, and immunization schedule of the vaccine. On “HPV Fridays,” all staff sport powder blue T-shirts with the HPV Vaccination Initiative logo.



Every patient who receives the HPV vaccine has the chance to hit a gong placed in the Bloomfield Garfield Family Health Center’s waiting room, which is meant to raise awareness among other patients and families as well as staff.



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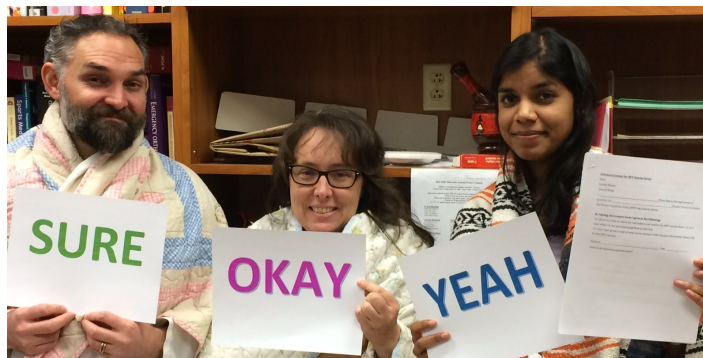
Bloomfield-Garfield is stimulating all of the senses to spread their cancer prevention message. Newly-vaccinated patients have the opportunity to hit a gong placed in the waiting room, to raise awareness among other patients and families. Patients also get to pick an item from a prize drawer, which includes items like sour candies, Play-Doh, and light-up rings. All vaccinated patients are entered into a twice-monthly gift card raffle.

If you see staff sporting blankets, don't check to thermostat—they're simply raising awareness about Bloomfield-Garfield's blanket consent forms. Parents can fill out the form to indicate that their child can continue the HPV vaccination series with another designated adult, such as a grandparent or sibling.

"All of these initiatives are designed to start a conversation about HPV and cancer prevention, and make it easier for parents to vaccinate their kids" Payette says. "We tell them why we're doing this outreach, that three shots of the vaccine works best, and that the younger their kids get the shots, the better. That's our pitch."



Staff at the Bloomfield Garfield Family Health Center sport T-shirts featuring JHF's HPV Vaccination Initiative logo. They wear the shirts each week on "HPV Fridays," part of a multi-pronged effort by the health center to boost uptake of the cancer-preventing vaccine.



Parents can fill out a "blanket consent" form at Bloomfield Garfield Family Health Center, which allows their child to continue to the HPV vaccination series with a designated adult, such as a grandparent or older sibling.

## Stakeholders in regional HIV/AIDS Care Learn More about AIDS Free Pittsburgh Initiative, Set Priorities for 2016

During the latest meeting of the Regional HIV Strategic Collaborative on February 3, stakeholders committed to improving the quality of HIV/AIDS services in southwestern Pennsylvania learned more about the game plan to create an AIDS Free Pittsburgh by 2020, and explored ways to extend the Collaborative's reach even further during the upcoming year.

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Julia Och, project manager for the AIDS Free Pittsburgh (AFP) initiative, explained how a coalition which includes the Allegheny County Health Department, Allegheny Health Network, JHF, UPMC, and a number of human service, academic, and non-profit organizations aims to eliminate new AIDS diagnoses in Allegheny County and reduce new HIV infections by 75% within five years. JHF serves as the fiscal agent for the initiative.

Och outlined the people, processes, and performance that will define her first 90 days on the job. She is focused on building relationships, meeting with Regional HIV Strategic Collaborative members to learn more about their work and the continuum of HIV/AIDS care in the region, and will reach out to the business sector, social justice groups, and substance abuse treatment providers to further expand the AFP coalition.

Och noted that other areas of the U.S. that have launched large-scale initiatives to eliminate HIV/AIDS, including San Francisco and New York state, effectively partnered with HIV-positive “ambassadors” who discussed their life experiences and educated other community members. In Pittsburgh, these ambassadors could help increase awareness of Pre-exposure prophylaxis (PrEP), a preventive, daily pill that can lower the risk of getting an HIV infection by up to 92% if taken consistently, according to the Centers for Disease Control and Prevention. A survey conducted by JHF and the Delta Foundation of Pittsburgh found that less than half of local HIV-positive individuals are aware of PrEP, Och said.

AFP is also focused on creating a strategic communications and social marketing plan, which includes



Julia Och, project manager for AIDS Free Pittsburgh (AFP), explains how partners in Allegheny County plan to eliminate new AIDS diagnoses and reduce new HIV infections by 75% by 2020.



Jen Condel, JHF's manager of Lean healthcare strategy and implementation, leads a discussion on ways that the Regional HIV Strategic Collaborative can engage new partners in 2016 and beyond.

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[Twitter](#) (@AIDSfreePgh) and [Facebook](#) accounts as well as a soon-to-be-launched website. Och said that to make the AFP website consumer-friendly, it could include visually engaging dashboards that gauge the initiative's progress over time, links to local HIV/AIDS services, and positive, de-stigmatizing stories of HIV-positive and high-risk individuals. AFP will also have a presence at street fairs and community events, such as the Pittsburgh Pride festival that draws tens of thousands of people to Downtown Pittsburgh during the summer.



Bethany Blackburn, MBA, administrative director of UPMC Presbyterian Shadyside's Department of Infectious Diseases, then provided an overview of Project SETT (Screen, Engage, Treat, Train). Project SETT, funded by the U.S. Department of Health and Human Services' Health Resources and Services Administration, is an initiative to integrate HIV/AIDS treatment into primary care at UPMC Latterman Family Health Center in McKeesport. Blackburn said that Project SETT has three key components: increasing access to services through practice transformation, boosting providers' clinical capacity to treat HIV/AIDS, and reaching out to the Monongahela Valley community to link more HIV-positive individuals to care.

JHF's HIV Planning and Evaluation Coordinator Christopher Garnett, MSS, and Manager of Lean Healthcare Strategy and Implementation Jen Condel, SCT(ASCP)MT, closed out the meeting by facilitating a conversation on the Collaborative's strategic priorities for 2016. Garnett said that community and stakeholder involvement in the Regional HIV Collaborative has grown since the initiative launched during the summer of 2014, and asked members how they could continue growing in 2016.

A number of Collaborative members stressed the need to bolster connections between AIDS service agencies and behavioral health organizations, and to work with practices to make Latterman Family Health Center-like models that integrate HIV/AIDS treatment into primary care more common. Partnerships with housing, substance abuse, and personal home care representatives could also improve the continuum of care, Collaborative members noted.

## **PRHI Launches the Training Center for Outcomes-Based Integration (TCOBI) to Improve Behavioral Health Organizations' Capacity to Measure, Improve Common Outcomes**

On January 21, PRHI held the first education session for the Training Center for Outcomes-Based

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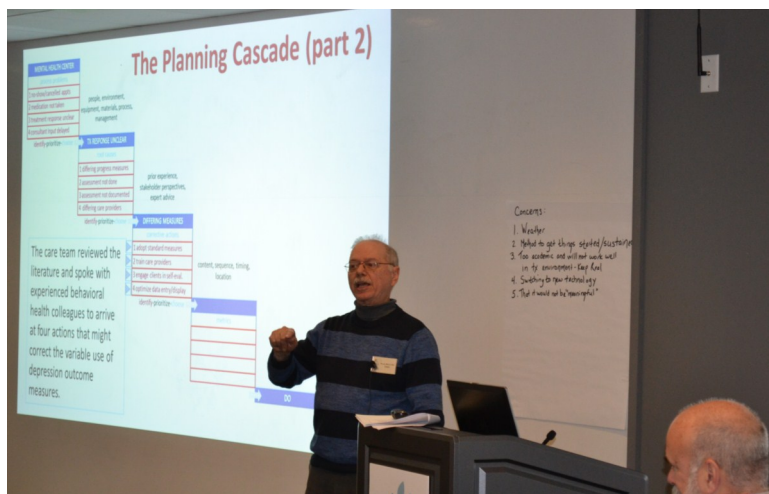
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Integration (TCOBI) at the QI<sup>2</sup>T Center. TCOBI, funded by the Staunton Farm Foundation, is a capacity-building training and coaching program for behavioral health agencies on how to collect, measure, and act on data to improve outcomes. Twelve behavioral health organizations are participating in TCOBI, which is being led by PRHI, Allegheny HealthChoices, Inc., and the Conference of Allegheny Providers.

“Accountable care organizations are going to say that we need to demonstrate behavior changes,” PRHI’s Chief Learning and Informatics Officer Bruce Block, MD, noted during the training session. “You are going to need to be able to show this value.”

Dr. Block led a discussion on creating a culture of quality improvement and described tools—including root cause analyses and Plan-Do Study-Act cycles—that behavioral health organizations can harness to support that culture. PRHI Practice Transformation Specialist Carol Frazer, LPC, facilitated a conversation to identify TCOBI participants’ goals, which include integrating data collection and measurement into their daily work and learning what methods work for other members of the training program.

Stephen Christian-Michaels, CEO of Family Services of Western Pennsylvania (FSWP), described the ingredients needed to achieve better outcomes through data collection and analysis: commitment from top leadership that provides ongoing training and celebrates “champion” staff members, organization-wide accountability, and workflows that allow staff to maximize the value of data at their disposal. Karen Brannon, PhD, director of research and organizational Development at FSWP,



PRHI Chief Learning and Medical Informatics Officer Bruce Block, MD, describes the tools that behavioral health organizations can utilize to support a culture of quality improvement.



PRHI Practice Transformation Specialist Carol Frazer, LPC (center), facilitates a conversation on the goals of organizations participating in the Training Center for Outcomes-Based Integration (TCOBI), a capacity-building training and coaching program for behavioral health agencies on how to collect, measure, and act on data to improve outcomes.

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explained how to use logic models to identify and work towards measurable outcomes.

PRHI will facilitate two more TCOBI training sessions at the QI<sup>2</sup>T Center in the next few months, before shifting to providing on-site or phone-based coaching and training from March to July of 2016. TCOBI agencies will stay in touch throughout the program via [Tomorrow's HealthCare™](#), PRHI's online knowledge network, as well as through learning collaborative webinars. By July, the goal is for TCOBI members to be able to track and report one to three common outcome measures across all participating agencies.

"In behavioral health, sometimes it feels like you're on an island," one participant said after the first TCOBI training session. "But today has been incredibly validating. I'm looking forward to learning from everyone in this room, and ultimately helping our patients lead happier lives."



(L-R): JHF/PRHI Director of Government Grants and Policy Robert Ferguson; Joni Schwager, executive director of the Staunton Farm Foundation; and Bethany Hemingway, a program officer for the Staunton Farm Foundation.

## **PRHI-Led Primary Care Resource Center Project Featured by the American Society of Health-System Pharmacists, COPD Foundation**

Through the Primary Care Resource Center (PCRC) Project, PRHI equipped six local community hospitals with the quality improvement, disease management, and motivational interviewing expertise to offer complex patients one-stop, coordinated outpatient care—while achieving both readmissions reductions and cost savings.

The PCRC Project created new roles within hospitals, and strengthened staff expertise in treating chronic diseases that drive readmissions. Two new articles highlight those innovations in care teamwork and delivery. The [American Society of Health-System Pharmacists](#) chronicles the role of PCRC pharmacists in expanding patient care, while the [COPD Foundation](#) highlights the PCRC as a promising practice in COPD treatment.

*To read the American Society of Health-System Pharmacists article, visit:*

[ashpintersections.org/2016/02/primary-care-centers-leverage-pharmacists-to-expand-patient-care](http://ashpintersections.org/2016/02/primary-care-centers-leverage-pharmacists-to-expand-patient-care)

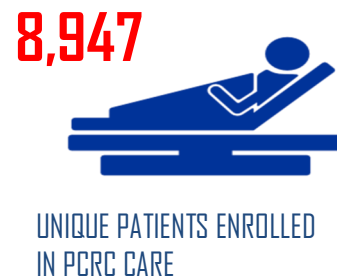
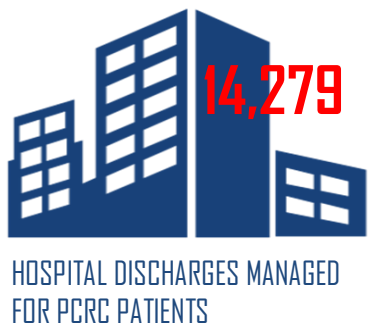
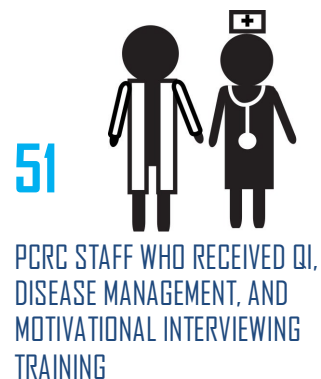
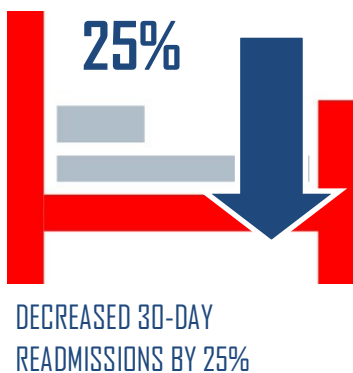
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To read the COPD Foundation article, visit:

[copdfoundation.org/Praxis/Community/Blog/Article/396/Promising-Practices-in-COPD-Care-The-Pittsburgh-Regional-Health-Initiative-PRHI.aspx](http://copdfoundation.org/Praxis/Community/Blog/Article/396/Promising-Practices-in-COPD-Care-The-Pittsburgh-Regional-Health-Initiative-PRHI.aspx)

## PCRC ACCOMPLISHMENTS



## JHF Welcomes New Staff to Work on HIV/AIDS, Aging

**Julia Och** has joined the Foundation as the project manager for AIDS Free Pittsburgh (AFP), a collaborative initiative to eliminate new AIDS diagnoses in Allegheny County and reduce new HIV

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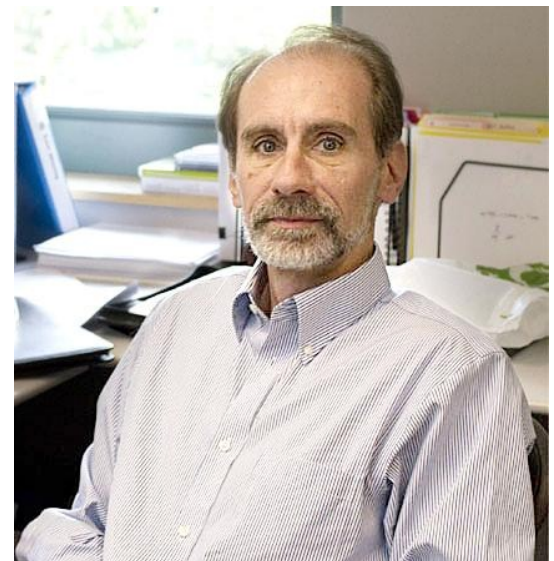
infections by 75% by the year 2020 (for more information on AFP, see the [November-December 2015 WINDOW](#)). As project manager, she coordinates efforts among AFP partners—including local service agencies, health systems, academic institutions, and the Allegheny County Health Department—to identify HIV-positive individuals who are currently undiagnosed and link them to medical care, and engage those at risk of developing HIV through education, routine screening, and access to pre-exposure prophylaxis (PrEP) treatment.

Prior to joining JHF, Och served as a policy specialist with Allegheny HealthChoices, Inc. (a non-profit behavioral health organization) and as an assistant planner at Gateway Rehab, where she provided project management support and analyzed program data. She also has experience in community health outreach on issues including substance abuse and sexual health. At Clark University, Och earned a bachelor's degree in International Development and Social Change, as well as a master's degree in Community Development and Planning.

**Jim “Oz” Osborn** has joined JHF as a consultant and project director of the Foundation's senior engagement initiatives. Previously, Osborn served as executive director of the Quality of Life Technology (QoLT) Center at Carnegie Mellon University, a National Science Foundation Engineering Research Center that he co-founded to improve and enhance everyday living for older adults and people with disabilities by advancing intelligent systems. Osborn has also served as Carnegie Mellon's coordinator of University Life Science Initiatives, executive director of the Medical Robotics Technology Center, and executive director of MERITS of Pittsburgh, a program to stimulate collaborations between clinical and technological researchers. Osborn founded the Pittsburgh Robotics Initiative, a regional economic development group, and led several multi-million dollar robotics research and development grants while holding research and management positions in Carnegie Mellon's Robotics Institute. He holds a bachelor's degree in Electrical and Biomedical Engineering and a master's degree in Civil and Biomedical Engineering from Carnegie Mellon.



Julia Och, project manager for AIDS Free Pittsburgh.



Jim Osborn, JHF consultant and project director for the Foundation's senior engagement initiatives.

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## PA Health Funders' Behavioral Health Action Group Outlines Priorities in Harrisburg

On February 4, Pennsylvania Health Funders Collaborative (PHFC) Executive Director Ann Torregrossa and behavioral health funders who are part of the PHFC's network of 40 foundations met in Harrisburg to create a behavioral health action plan.

The PHFC is co-chaired Karen Feinstein and Russell Johnson, president and CEO of North Penn Community Health Foundation. Joni Schwager, executive director of the Staunton Farm Foundation, chairs the PHFC's Behavioral Health Action Group.

Action Group attendees from the First Hospital Foundation, JHF, Lancaster Osteopathic Health Foundation, Partnership for Better Health, Scattergood Foundation, and Staunton Farm Foundation identified common priorities, including integrating behavioral health into primary care settings, strengthening the capacity of behavioral health organizations to measure outcomes, and collaborating more closely with social services and community-based groups.

The Behavioral Health Action Group also met with David Kelley, MD, chief medical officer of the Pennsylvania Department and Human Services' Office of Medical Assistance Programs (OMAP), and Dale Adair, MD, medical director of the Department's Office of Mental Health and Substance Abuse Services (OMHSAS), to discuss the Department's behavioral health projects.



Members of the PA Health Funders' Behavioral Health Action Group outline shared priorities in Harrisburg.

## PRHI and Institute for Clinical Systems Improvement Partnership on Scaling Behavioral and Physical Health Integration Featured at NRHI Event in D.C.

PRHI and the Institute for Clinical Systems Improvement (ICSI) have worked together to form multi-state partnerships that have resulted in the widespread use of models that address both behavioral and physical health in primary care settings, including Partners in Integrated Care (depression and unhealthy substance and/or alcohol use) and Care of Mental, Physical, and Substance Use Syndromes (depression

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along with diabetes and/or heart disease).

During a Network for Regional Health Improvement (NRHI) meeting in Washington, D.C. on January 14, PRHI's Robert Ferguson and Tani Hemmila, an ICSI consultant and project manager, explained how their organizations joined forces with others from around the country to scale integrated behavioral and physical health projects that began as local pilots. The event was part of NRHI's Collaborative Health Network HealthDoers series, which is funded by the Robert Wood Johnson Foundation. More than 40 representatives from regional health improvement collaboratives affiliated with NRHI attended the event, which was also [streamed online](#). To continue the discussion with more regional health improvement collaboratives, Ferguson and Hemmila co-facilitated a [HealthDoers virtual event](#) on January 28.



Robert Ferguson (far right) with Jan Singer of MA Health Quality Partners.

## Community Health Workers Champions Update

Through its Community Health Workers (CHW) Champions program, JHF is developing a curriculum to enhance the skills of CHWs so that they can offer at-risk seniors the support needed to avoid preventable hospitalizations and institutionalizations, and stay connected to their neighborhoods, friends, and families.

In support of this mission, JHF is researching the triggers for hospital admissions, emergency department visits, and institutionalizations for seniors, and has created statewide task forces comprised of experts in CHW training, policy, and workforce development.

The training task force is working on recommended CHW competencies around communication, interpersonal skills, health literacy, education, cultural, service coordination, community capacity, and advocacy. The policy task force recently developed a recommended CHW definition, and they are now developing a recommended CHW certification policy before moving onto financing and measurement. The employer task force is developing an online CHW survey to inform their work on a marketing strategy, toolkit, and fact sheet for employers.

JHF will also reach out to local LIFE (Living Independence for the Elderly) programs to engage CHWs in

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the Champions program. The CHWs from the LIFE programs would attend the training and collaborative learning sessions and work with at-risk seniors to help them receive the most appropriate care in the most appropriate setting.

## **JHF-Supported Report Calls for Overhaul Long-Term Services and Supports Payment**

In 2014, JHF provided a grant to support the Strategic Health Resource Center (SHRC), an initiative of the Jewish Federations of North America (JFNA) that launched in the fall of 2015. The SHRC is a research and policy development hub, serving as an advocate and influencer for the Jewish community to ensure high-quality, accessible, and culturally competent care. Karen Feinstein and Nancy Zionts serve as members of the SHRC's Advisory Council.



In February of 2016, the SHRC released a [final report](#) which outlines action steps to create a sustainable, accessible system of long-term services and supports—a level of care that is needed by more than six million older adults and individuals with disabilities currently, and an estimated 16 million by the middle of the century. The SHRC's recommends improving financing to increase access to home-and-community-based services, better support family caregivers, promote collaboration with social and behavioral health organizations, and improve insurance access while strengthening safety net programs.

## **JHF Preparing Nursing Homes for New-Age Performance Improvement**

Each month, the 18 long-term care facilities in Western Pennsylvania that participate in RAVEN—a CMS-funded initiative to reduce avoidable hospitalizations among long-stay nursing home residents—converge online for webinars that strengthen staff members' clinical, communication, and data-crunching skills, and prepare them to meet changing industry standards.

During January's webinar, JHF's long-term care team provided an overview to nursing home administrators and directors of nursing on the Quality Assurance Performance Improvement (QAPI) program, which is a data-driven, proactive approach to improving the quality of life, care, and services in nursing homes.

JHF Quality Improvement Specialists Stacie Bonenberger, MOT, OTR/L, and Anneliese Perry, MS, have

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created a QAPI Performance Improvement Project guide for RAVEN sites. Once QAPI standards are finalized, nursing homes will be required to implement a Performance Improvement Project that incorporates all staff members and tracks progress over time, as well as conduct initial and yearly training on QAPI and quality improvement methods.

“QAPI standards encourage facilities to conduct small tests of change to see what works,” Bonenberger says. “They empower all staff to identify opportunities for improvement, and make those improvements a reality.”

To further catalyze those quality improvement efforts, the Foundation’s LTC team has conducted site visits to observe RAVEN participants’ current Quality Assurance meetings. As a result, they have provided guidance in the development of individualized QAPI plans.



JHF Quality Improvement Specialists Stacie Bonenberger (left) and Anneliese Perry (right), with Manager of Lean Healthcare Strategy and Implementation Jen Condel (center).

“An educated, empowered staff is the foundation of quality care,” Bonenberger says. “We want the front line to be a big part of the process of creating, testing, and studying performance improvement projects.”

## **Karen Feinstein Selected as Technical Advisor for Mass. Health Policy Commission Program Focused on Payment, Delivery Innovation**

Karen Feinstein is one of a dozen healthcare experts from across the U.S. who have been selected to design and launch the Massachusetts Health Policy Commission’s new System and Payment Reform through Innovative Transformations (SPRINT) grant program. The SPRINT program, created to foster innovation in healthcare payment and service delivery, will award at least \$5 million in total funding to multi-stakeholder groups (including payers, providers, academic institutions, and community-based organizations) that demonstrate the potential to



The Massachusetts Health Policy Commission’s new SPRINT grant program emphasizes cross-sector partnerships.

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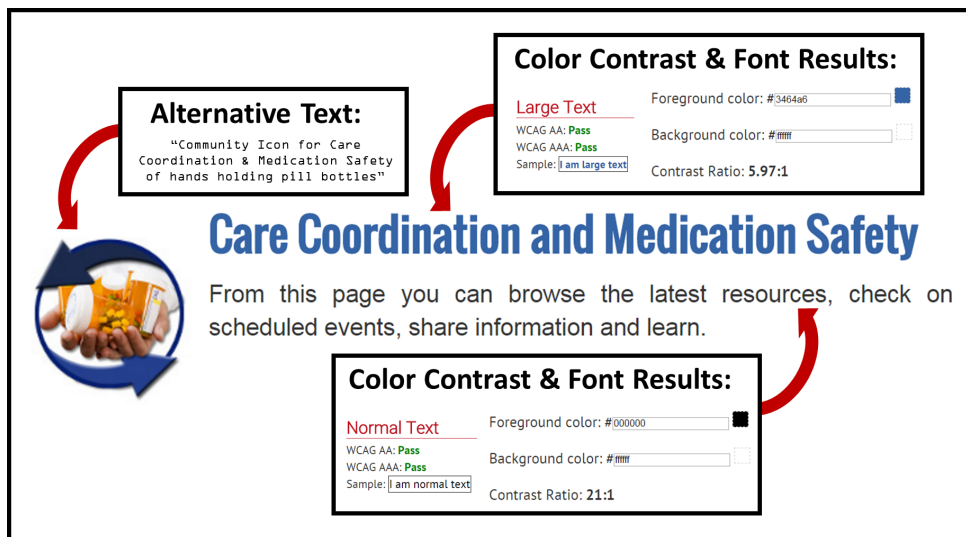
generate rapid-cycle, measurable improvements. Among the topics that the SPRINT program hopes to tackle are value-informed choices for purchasers and providers, integrated physical and behavioral health care, and advanced care planning.

## 508-Compliant Tomorrow's HealthCare™ Accessible to all Users

Following a recent audit, [Tomorrow's HealthCare™](#) was declared 508 compliant—meaning that PRHI's online knowledge network meets government standards in ensuring that all users, regardless of disability status, can access the technology.

Section 508 standards break down barriers and provide new opportunities for all Internet users. A clear 508 compliance check makes the system a viable and proven tool for grants with federal funding, as a means to collaborate and share best practices across geographic boundaries with all users.

As Tomorrow's HealthCare™ was built, its developers pre-emptively created guidelines to ensure 508 compliance. For example, the platform avoids tiny font sizes, uses appropriate color contrast, and provides alternative text for screen-readers (hover boxes with text explanations to support visuals.) When creating the online education courses, the designers also included audio transcripts, indicators other than color, and a consistent layout.



As a 508-compliant website, Tomorrow's HealthCare™ is designed to be accessible to all users, regardless of disability status.



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## Karen Feinstein Discusses JHF at 25 during 2016 Beth Shalom Health Initiative Series

Karen Feinstein recounted JHF's 25-year commitment to the Jewish community, and discussed the Foundation's vision for the next 25 years, during a special presentation held at Congregation Beth Shalom on February 27. Dr. Feinstein's presentation was part of the 2016 Beth Shalom Health Initiative Series, which is a set of events designed to inform and engage Pittsburgh's Jewish community on crucial health topics. JHF is a sponsor of the Health Initiative Series, along with the Beth Shalom Sisterhood, Fine Foundation, Jewish Association on Aging, Jewish Chronicle, Staunton Farm Foundation, University of Pittsburgh, and UPMC.

### Here We Go Steelers!

As the Steelers chased yet another Super Bowl title, JHF had the opportunity to tour Heinz Field on January 8. We thank Jim Rooney, a friend and staff member during the Foundation's early days, for the opportunity, and wish the Steelers good luck next year on their quest for a seventh Lombardi trophy.



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