Celebrating Quality of Life
Joyce Watts is a CNA at Visiting Nurse Services, where she has been on staff for 3 years. She worked at Newport Hospital for 40 years before becoming a CNA with us. What is remarkable about Joyce is not only her service to us, but her community involvement. Her projects include many years’ service with the Dr. Martin Luther King Center, clinical visits in Ghana, seven food missions to Haiti, and innumerable community food drives and projects. Joyce says she receives her inspiration from her strong religious faith, and “When I feel tired, God tells me to get up and go.”

Born and raised on Trinidad, Joyce came to the US as a young woman to pursue a career in health care. She is married to Lee Watts and has two daughters and two grandsons.

The “Mary A. Dwyer Award” was created in 1989 by the Board of Directors of Visiting Nurse Services of Newport and Bristol Counties to recognize individuals or organizations that have demonstrated outstanding service to the agency.

Mary Dwyer was the Executive Director from 1954 to 1979. During her tenure, Ms. Dwyer had a significant impact on the development of Health and Human Services on Aquidneck Island.
President, Board of Directors Message

Quality of Life! It means many different things depending upon one’s circumstances. To the board and staff at VNS, it means respect, care and patience when dealing with each other, our patients and our stakeholders. While the competition heats up, we work diligently to care for our patients with the best means possible. Upgrading internal systems to make it easier in the field has shown us that change can be a challenge but worthwhile in the end for all involved. Who knew we had our very own yellow brick road?

Looking ahead at the future and who we are has become our mantra to create best practices that will help us grow and care for even more people. Patient choice is a right that many of us don’t know we have, and it’s vital that we get the word out. Not all home-care agencies are created equal, but when one is in the hospital, we do what they tell us at discharge and don’t question the referral. We have the best home-care professionals available and hope you will help us spread the word. We’ll be making it easier with a potential name change in the future so we stand out among the others. Stay tuned!

Thank you to our wonderful staff for the superior work that they do both in and out of the Agency. The Board is proud to serve such a wonderful group of people. Remember, quality of life equals patient choice at VNS!

Stacey D. Carter
President, Board of Directors

Chief Executive Officer’s Message

Welcome to our 2016 Annual Meeting!

In late 2015, we created a three-year Strategic Plan focused on financial stability (Phase I), to enable technological enhancements (Phase II) that would eventually prepare us to implement a patient-centered care approach focused on quality and compliance (Phase III). We knew it was an ambitious plan, but we also recognized the rewards would be monumental if patient care could be enhanced as well.

In 2016, we achieved significant progress towards the completion of Phase II. After exploring multiple vendors, we selected a new Electronic Medical Record (EMR) provider and developed a plan to upgrade our antiquated phone system and increase our internet capacity.

We continue to grow and evolve as an organization, and there are many people to thank for their continued dedication to the VNS. First, I would like to thank our Board of Directors, who voluntarily donate their time and expertise to continue our mission. Second, I would like to thank our community supporters; organizations such as the vanBeuren Charitable Foundation, Champlin Foundation, Prince Foundation, RI Foundation, and numerous individual supporters. Last, and not in the least, I think our amazing staff, dedicated volunteers, and outstanding Management Team who collectively make the VNS an incredible place to work.

As we forge ahead, change will be a continual prerequisite, and I am confident we will be ready. We are paving the yellow brick road; Oz is on the horizon!

Candace Sharkey
Chief Executive Officer
Highlights of 2016

In 2015, we attained a positive bottom line for the first time in over a decade. The goal for 2016 was to maintain financial stability while preparing the agency for future growth. As outlined in the Strategic Plan, we recognized our current EMR (electronic medical record) system lacked a focus on compliance standards that have become essential to meeting continuously changing CMS guidelines. Additionally our IT infrastructure was inefficient and outdated.

Achievements in 2016

Electronic Medical Record vendor review and selection
- Contract finalized
- Implementation Plan launched
- Identification and approval for grant funding to support several aspects of the project
- Secured financing to execute the project

Analysis of IT infrastructure and selection of ancillary systems to support EMR
- Auto-fax
- Telephone system upgrade
- Remote monitoring security of mobile devices

Appointment of new Hospice Director
- Hospice census grew 100%
- Palliative census decreased by 25%
- Nurse Practitioner Palliative Care Consultation program

Increased grant funding
- Collaborative grant with URI for Pharmacist Program extended for 2 years
- vBCF grant obtained for collaborative education with Newport County Mental Health
- vBCF grant for Coaching senior leadership team
- vBCF annual support extended for a 3 year cycle

Maintained 4 STAR Home Health Compare quality ranking
- Successful Hospice survey
- CMS Probe audit (1 of 5 records rejected- no further review required)

Needless to say, none of the above could have been attained without a highly dedicated Management Team and ongoing support of the VNS Board of Directors.

Adult Homecare

In 2016 the VNS Adult Home Health Department focused on quality, collaboration, and patient centered care. As healthcare delivery moves toward value-based reimbursement, the attention of the Adult Homecare team has been focused on changes to the collaborative care processes. The emphasis is comprehensive, coordinated care with enhanced workflows to facilitate improvement in patient satisfaction and clinical outcomes. Using this multi-disciplinary approach, the departments became part of the Lifespan Performance Network for both Total Joint Replacements and Stroke.

With an effort to increase quality and patient centered care, the Adult Home Health Department has continued weekly clinical huddles. Each week, at risk and complicated patients are reviewed by the clinical team in order to determine the best approach to maximize their care and minimize the risk of re-hospitalization. These huddles have resulted in increased patient satisfaction and decreased re-hospitalizations.

Finally, the Adult Home Health Department is part of the Medicare Bundled Payments for Care Improvement Initiative with the members of CareLink. The members are collaborating to improve clinical pathways and outcomes. The department is also working closely with Remedy Partners who is the convener for the Lifespan Bundled care project. With Remedy, we share patient outcomes and discharge plans, again with the goal of maximizing quality and collaborative patient centered care.

Through these associations we are managing transitions of care utilizing evidenced based care plans.
Nursing Services
In order to meet the needs of our clients, VNS nurses have specialty teams including Cardiopulmonary Disease Management, Wound Care, Diabetes and Intravenous Care. The Nursing Department has over sixty RNs who have all been educated in Chronic Care management.

Rehabilitation Services
The Rehab Department continues to grow and now has a dedicated team of more than sixty-five therapists (physical therapists, occupational therapists, speech therapists, dietitians). Specialties include: Orthopedics, Stroke and Neuro, Cardiopulmonary, Lymphedema, LSVT “Big and Loud” for Parkinson’s disease, Vestibular Rehabilitation, Pediatrics, Splinting, Wheelchair Management, Aphasia, Dysphagia, and Bracing.

Quality and Performance Improvement
The quality of patient care, provision of care and patient satisfaction are important measures that the agency continually strives to monitor and improve. In 2016 our rate of re-hospitalization decreased from 21% to 19%, an important improvement. Our rating of improvement for pain interfering with activity improved from 68% to 80%. VNS of Newport and Bristol Counties is rated a 4 Star agency for patient care and outcomes, and a 5 star agency for patient satisfaction by Center for Medicare Services.

Home Care Pharmacist
Unique to VNS, we have added a PharmD Resident from URI and a part time pharmacist to our Homecare team. These pharmacists visit patients in the home upon hospital or nursing home discharge to do medication reconciliations and to educate patients on how to properly administer their own meds. This valuable program is the only one in the region, and it contributes to lowering rates of re-hospitalization.

Social Work Services
A team of eight Medical Social Workers works closely with the nurses, therapists and home health aides. They focus on the social and emotional issues related to illness or injury and bring a clinical understanding of family systems, human development, aging and psychotherapy.

Maternal/Child Health
The mission of the Maternal/Child Health program is to enhance the quality of life for all infants, children and families through evaluations, support and education. Skilled homecare visits are provided to preterm, sick or injured children to improve their health and well-being as they transition to their home environment. New mothers and families are educated in the care of their child, birth to 18, and provided with community supports to assist them as they adapt to their new parenting roles. Lactation Counselors are offered to all families for feeding assistance as well as offering the Edinburgh Post-Partum Depression screenings for their mothers. The MCH program includes both the Pediatric Home Health referrals and the First Connections Program referrals. MCH Staff recently attended a training on Neonatal Abstinence Syndrome to aid in the approach to care of these infants and families as well as facilitating the referral to specialized community resources for mothers and infants.

Pediatric Home Health
is available for recently discharged premature infants and children following illness or injury. Parents are supported and educated regarding the care of their infant/child as well as facilitating referrals to appropriate resources. Early Maternity Discharge visits are a continuing part of this program and include skilled nursing assessments of the new mothers as well as their newborns.

First Connections provides home visits by an RN, a Social Worker, or a Community Health Worker with the goal of linking these families to long term community resources. Collaboration with DOH programs such as Healthy Families America, Nurse Family Partnership, and Parents as Teachers are key to assuring that the needs of pregnant and parenting women are being met and improving the supports available to families with young children and new mothers.

Homecare/Children

www.VNSRI.org 2016 Annual Report
Hospice at Visiting Nurse Services
The Hospice program has its own name and identity: Hospice at VNS. The team is composed of experienced professionals trained in the art of caring for the terminally ill patient. The interdisciplinary team includes:

- Skilled Nursing
- Hospice-trained CNA
- Medical Social Work
- Spiritual care
- Volunteer service
- Physician oversight
- Bereavement care

Care is patient and family goal driven with a focus on dignity, comfort and quality of life. In 2016 our team served 235 patients at home and in assisted living facilities, skilled nursing facilities, group homes and hospitals. Hospice cares for patients 24 hours a day, 7 days a week.

Palliative Care
The Palliative Care team, led by a Nurse Practitioner, specializes in home healthcare for patients with serious or progressive health conditions. The VNS team assists patients with care plan goals and the decision of the patient to seek a cure or active treatment. We served 165 patients in Palliative Care in 2016. We do this through care, education, advocacy, coordination of services, and management of complex symptoms, medications and treatments.

Services include: Palliative care skilled nursing, hospice-trained CNAs, medical social work, rehabilitative therapy, volunteer services, and spiritual care.

The Conversation Project
Our hospice team provides community education through The Conversation Project, an outreach initiative encouraging individuals and families to have conversations about end of life wishes and to formalize them in documents and advance directives well before the stresses of end of life crises.

Community Health
Community Clinics
VNS community clinic nurses continue to have a large presence in the community. Our Community Clinic Team (CCT) consists of RNs and volunteers. In 2016 we continued our collaborative education program with VNS’s home care pharmacist and the CCT nurses. Our program this year was “Ask the Pharmacist”. Dr. Ng gave an overview of good medication management for the elderly. We offered the program at 9 Senior Centers. The CCT participated in another 8 Health Fairs/Talks. At the events we represented a wide range of subjects, from good handwashing to health screenings and foot checks.

VNS offers our regular Adult Wellness Clinics in 10 communities. In 2016 we held 303 clinics at 37 sites, from senior centers and public housing facilities to libraries. The nurses performed 2164 blood pressure/wellness screenings and 141 glucose and cholesterol tests at our regular monthly clinics and another 166 at other sites. The nurses documented and followed up on 66 abnormal readings and concerns. We held over 74 Flu Clinics and gave over 1900 flu shots many, 154, to the most vulnerable individuals who are unable to leave their homes.

Telehealth Program
Daily telemonitoring affects patient outcomes and satisfaction, and it helps VNS to remain competitive in the healthcare field. The VNS uses the Honeywell HomMed telehealth system and actively monitors up to 221 patients, providing nursing assessment over the phone. The system allows VNS to identify problems and changes in medical condition early and helps to prevent Emergency Room visits and re-hospitalizations.

Lifeline Personal Response System
VNS of Newport and Bristol Counties has the benefit of partnering with Philips Lifeline Personal Response System, the leading Medical Alert provider in the United States. Philips Lifeline has been an industry leader for almost 40 years. Through this partnership, VNS of Newport and Bristol Counties Lifeline is able to offer the most advanced technology. The Lifeline program maintained a census of about 441 subscribers and installed 119 new systems in 2016.

The newest Lifeline product offered is the Go Safe system, which is a mobile Personal Response System. The Go Safe is a cellular technology Help Button with built in GPS to allow for the subscriber to call for help anywhere in the USA.
Human Resources
In 2016, VNS had 245 active employees and, as always, the agency continues to grow. Turnover remains near 8%, which is excellent for our industry.

VNS volunteers were once again instrumental in helping at flu clinics and agency administrative tasks. We were privileged to work with over 120 Flu Clinic, Special Events, Office and Agency Committee volunteers for a total of over 2500 hours of volunteer service. In the Hospice Volunteer program, which offers specialized training, 43 Hospice Volunteers donated over 1,000 service hours.

Additionally, we were privileged to have 16 nursing student interns from both Salve Regina University, as well as pharmacy interns from the University of Rhode Island and therapy assistant student interns from the Community College of Rhode Island and the New England Institute of Technology.

Marketing and Fund Development
Marketing to our referral network was a focus for 2016 through a renewed focus on developing preferred partnerships, opening new opportunities with Massachusetts hospitals, strengthening our preferred partnership with Newport Hospital and the Lifespan organization, embedding our own clinical specialist at Newport Hospital, and utilizing the Carelink network of post-acute care facilities as industry colleagues.

Compliance
Compliance involves strict adherence to federal and state regulations, policies and procedures insuring we meet the highest standards. Coordinating teams, establishing internal controls and correcting activities is the focus of the Compliance Officer. This year we have focused on the recommended Joint Commission Patient Risk Assessments in preparation for our Survey in September. Our Annual Agency Evaluation requires significant time and effort by Board Members and our Professional Advisory Committee (PAC), where a diligent review of data and information offers invaluable advice and suggestions for improvement. For the first time in 20 years, CMS/Medicare/Medicaid has announced new Conditions of Participation (CoPs) for Home Care and Hospice. Management has been proactive in preparing for these changes in addition to the implementation of our new software, Home Care Home Base. Several of our required federal and state compliance regulations have been enhanced by monitored audits and enhanced reports this software provides.
In 2016, VNS embarked on a major effort to upgrade its IT infrastructure. A large server group was installed to replace a redundant, out dated system and enhancements were made to handle increased traffic across wired and wireless networks. In addition, the agency’s telephone system was upgraded to handle communications across newer, and future, technologies.

These changes and upgrades were on track with the roadmap/strategic plan to move toward a more robust and secure patient management and business architecture, which would incorporate a fully automated patient care documentation system. It also became evident, that there was a need to migrate the current in-house system to a cloud-based solution, making our core business system more robust and secure in today’s cybersecurity environment. With the addition of electronic faxing capabilities, these information systems will be able to communicate within agency systems and with our community partners’ referral sources and physician practices.

These IT initiatives will create a “circle of care” environment, enabling comprehensive patient support throughout their care journey with the VNS, while simultaneously increasing efficiency and a more standardized workflow.

Knowing this IT journey would create quite a “tornado,” we donned our ruby slippers, rattled our heads for some brains, and sought courage, while keeping our hearts focused on patient care....

The yellow brick road may be bumpy at times, but thanks to the great staff, the rainbow is on the horizon!
Volunteers

HOSPICE VOLUNTEERS
Blair Alexander
Cindy Allen
Emele Baker
Kathleen Banks
Gisele Brown
Barbara Carnes
Beverly Clark
Sue Crowsmith
Doris Deleka
Alice Dupre
Dale Dugas
Harent Dwyer
JoAnne Emerson
Richard Erwin
Diane Evans
Natalie Ferriera
Eileen Ferriera
Lee Ferriera
Richard Flanagan
Marilyn Hambley
Virginia Hein
Bridget Kelly
David Killebrew
Pat Lepanto
Marshall Landberg
Josephine Lyons
Cynthia Madden
Evelyn Marano
Lisa McCaffrey
Mary Medeiros
Steven Michael
Norman Moreau
John O’Brien
Kim Pachico
Paula Palumbo
Maureen Warner
Sara Pimentel
Ginny Prichett
Andrea Rounds
Karen Smith
Marlyn Stokley
Imelda Toomey
Suzanne Varisco

AGENCY VOLUNTEERS
Beverly Dowty
Pauline Dumoulin
Ruth Faria*
Marabeth Farrell
Jack Geyer*
Nancy Geyer*
Ashlee Gorman
Marlyn Hambley
Mary Harrington
Virginia Hein
Mary Jenkins*
Mary Pat Koon
Maryann Mastricio
Joan Murphy*
Paula Murray
Suzanne Newbauer*
Barbara Passmore
Maureen Warner

* Denotes over 100 hours
Celebrating Quality of Life

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