



FALL 2017 | VOLUME 3, ISSUE 4

VNSNY TODAY

NEWS FROM THE VISITING NURSE SERVICE OF NEW YORK



Philanthropies Boost Funding to VNSNY's Community Outreach Programs

3



VNSNY CHOICE SelectHealth Launches New Ad Campaign

4

FALL 2017 | VOLUME 3, ISSUE 4



VNSNY TODAY

NEWS FROM THE VISITING NURSE SERVICE OF NEW YORK

PEARLS Program Helps Depressed NYC Seniors Reclaim Their Lives



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Continued on page 2



In the New York City-funded PEARLS program, VNSNY mental health specialists use cognitive-behavioral therapy to help depressed seniors reconnect with their friends and family.

VNSNY Provides Specialized Post-Op Home Care for Gender Reassignment Patients

One of the first issues VNSNY nurse Soraya Gomez faced with her new patient, Roberta*, didn't involve medical care, but it was still vitally important. Roberta had just come home following gender reassignment surgery (GRS), in which her sexual organs were transformed from a man's to those of a woman. But her mother, who she was staying with during her recovery, continued to call her daughter by her former male name.

Drawing on the GRS training she had received at VNSNY, Gomez stepped in politely but firmly. "I pulled the mother aside and tried to explain in a nice way that it would be good if she addressed her child as she wished to be addressed," she says. "Traveling from one gender to another is a big change, and patients going through it really need to have their feelings supported."

Over the next several weeks, in addition to providing emotional support, Gomez monitored Roberta's overall recovery, coached her through the vaginal dilation process—something that needs to be done several times

Continued on page 3

Also in this issue:

• VNSNY Fellowship Gives Clinicians Hands-On Training in Hospice Care

• New Partners in Care Software Improves Efficiency



An Interview with VNSNY's Executive Vice President, General Counsel and Chief Risk Officer

Kerry Parker Talks about VNSNY's Strategic Direction

How would you describe VNSNY's main strategic challenges?

VNSNY's senior management is now in the process of plotting out the company's strategic direction over the next several years. No one knows how things in Washington will shake out, but we need to prepare for potential regulatory and policy changes to Medicaid, including possible reductions in funding for New York State. We're also seeing big changes in reimbursement, as value-based purchasing

arrangements begin to replace the old fee-for-service model. Plus, there are challenges in New York around minimum wage and overtime legislation, which affects the entire industry. We're also focused on how to grow VNSNY over the next three to five years, both organically and inorganically, while ensuring we have the scale and resources to deal with these impending changes. We're making good progress, and will present the plan to VNSNY's Board of Directors when we complete it.

Continued on page 4

FALL 2017
VOLUME 3, ISSUE 4

1

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When Natalia* was first contacted by Miriam Brand, a mental health specialist with VNSNY's PEARLS team, she was suffering from depression and overwhelming anxiety, to the point where she refused to leave her apartment. After assessing her condition, Miriam spent a number of one-on-one sessions helping Natalia identify concrete problems contributing to her condition and brainstorm practical ways to address them. A half-year later, Natalia is meditating and doing yoga to cope with her anxiety, and goes outside by herself on a daily basis. "I've learned to take things in stride," she says.

"Not only has Natalia developed skills for resolving today's challenges," adds Miriam, "but PEARLS has prepared her for future challenges as well." VNSNY's PEARLS program is part of an innovative, citywide initiative launched last fall by New York City's Department of Health and Mental Hygiene. The program's goal is to provide screening and treatment for New Yorkers aged 65 and older suffering from depression. To date, VNSNY's three outreach teams, two in Queens and another in Manhattan, have screened over 500 seniors and treated over 100 individuals, including many whose depression had rendered them virtually homebound.

The core of the program involves an evidence-based cognitive-behavioral therapy, administered by mental health specialists from VNSNY's Community Mental Health Services (CMHS) division. Each senior in the program receives six in-home visits from one of the clinicians, who then follows up with regular monthly phone calls. During the sessions, therapist and patient develop a list of specific changes the patient would like to make in his or her daily life, then work to develop solutions, one item at a time.

Do You Know a Depressed Senior Who Could Benefit From PEARLS Therapy?

VNSNY's PEARLS program operates in Queens Community Districts 1 (including Astoria and Long Island City), 7 (including Flushing and College Point), and 12 (including Jamaica, St. Albans and South Ozone Park), as well as Manhattan Community Districts 7 (covering the Upper West Side) and 8 (covering the Upper East Side and Roosevelt Island).

To refer someone to VNSNY for screening, call: 718-888-6884.



In the New York City-funded PEARLS program, VNSNY mental health specialists use cognitive-behavioral therapy to help depressed seniors reconnect with their friends and family.

For one patient, a man in his early 80s whose isolation had given rise to suicidal thoughts, these included rehearsing and then actually placing phone calls to an old friend, developing a plan to drive himself to church, and putting self-affirming notes around his apartment to counter the panic attacks he'd been experiencing. Today, he's calling friends regularly and attending church every Sunday. Meanwhile, his score on a commonly used screening questionnaire has gone from "moderate depression" to "no depression."

Connecting patients with regular medical care is another element of the program. "When people's physical issues are addressed, they also feel better psychologically," explains Annmarie Franco, PEARLS Program Manager for VNSNY. "Research shows that people treated with this approach have lower hospitalization rates and greater health-related improvement in quality of life compared to those who don't get treatment."

VNSNY's CMHS division is one of a number of mental health agencies now implementing PEARLS across New York City. While the division often gets referrals from local senior centers and other community organizations, individuals can be referred for a free in-home depression screening by anyone, including themselves, a nurse, or a friend or family member. "We have the capacity to treat even more people," notes Franco, "so we want to spread the word as much as possible about this highly effective program."

** The patient's name has been changed for privacy.*



VNSNY Provides Specialized Post-Op Home Care for Gender Reassignment Patients

One of the first issues VNSNY nurse Soraya Gomez faced with her new patient, Roberta*, didn't involve medical care, but it was still vitally important. Roberta had just come home following gender reassignment surgery (GRS), in which her sexual organs were transformed from a man's to those of a woman. But her mother, who she was staying with during her recovery, continued to call her daughter by her former male name.

Drawing on the GRS training she had received at VNSNY, Gomez stepped in politely but firmly. "I pulled the mother aside and tried to explain in a nice way that it would be good if she addressed her child as she wished to be addressed," she says. "Traveling from one gender to another is a big change, and patients going through it really need to have their feelings supported."

Over the next several weeks, in addition to providing emotional support, Gomez monitored Roberta's overall recovery, coached her through the vaginal dilation process—something that needs to be done several times a day following male-to-female surgery, to ensure that the newly fashioned vagina heals properly—and kept Roberta's surgeon, Dr. Jess Ting, and the rest of Roberta's medical team at Mount Sinai–Beth Israel Hospital in Lower Manhattan updated on the patient's progress. "Roberta told me she didn't realize that there were professionals like me," she adds, "who understand transgender surgery and will come to people's homes to take care of them."

VNSNY's Gender Reassignment program has trained 108 VNSNY clinicians in the post-acute care of GRS patients. While this group consists mostly of nurses like Soraya Gomez, it includes a growing number of rehabilitation therapists as well. The training program, which

began in March 2016—the same time Mount Sinai–Beth Israel launched its GRS practice—is directed by Shannon Whittington, a care team manager with VNSNY Home Care. The program includes a cultural sensitivity component and a clinical component, in which the clinicians learn how to support the patient's surgical recovery.

"The clinical aspect of the training is obviously very important," notes Whittington, "but we also really stress the cultural side. This population is accustomed to being discriminated against by healthcare workers. When our clinicians ask patients what their preferred pronoun is, for example—some people prefer 'he' or 'she,' while others may prefer to be called 'they'—the patient understands right away that our caregivers know what they're doing."

To date, VNSNY's Gender Reassignment team has cared for close to 100 GRS patients. While about 70 percent have been referred by the surgeons at Mount Sinai–Beth Israel, VNSNY also takes GRS referrals from NYU Langone Medical Center and the Rumer clinic in Philadelphia. Home care episodes typically last three to eight weeks. Each patient receives several home nursing visits per week at the start of care, with the schedule then tapering off as recovery progresses.

"Our collaboration with VNSNY has been fantastic from the get-go," says Zil Goldstein, Program Director for the Center for Transgender Medicine and Surgery at Mount Sinai. "Implementing this special training around the GRS process has been a smooth operation, and we've had some great outcomes right from the start—patients being very happy, and feeling they're really being taken care of after they go home. Post-operative care is a critically important part of the GRS clinical process, and there's a huge emotional element involved as well. For our patients, having someone available who has been trained in this area to come in regularly and make sure they're okay is incredibly reassuring."

* The patient's name has been changed for privacy.



VNSNY's Shannon Whittington (left) and Zil Goldstein, Program Director for the Center for Transgender Medicine and Surgery at Mount Sinai. VNSNY has trained 108 of its clinicians in the post-acute care of gender reassignment surgery patients.



An Interview with VNSNY's Executive Vice President, General Counsel and Chief Risk Officer

Kerry Parker Talks about VNSNY's Strategic Direction

How would you describe VNSNY's main strategic challenges?

VNSNY's senior management is now in the process of plotting out the company's strategic direction over the next several years. No one knows how things in Washington will shake out, but we need to prepare for potential regulatory and policy changes to Medicaid, including possible reductions in funding for New York State. We're also seeing big changes in reimbursement, as value-based purchasing arrangements begin to replace the old fee-for-service model. Plus, there are challenges in New York around minimum wage and overtime legislation, which affects the entire industry. We're also focused on how to grow VNSNY over the next three to five years, both organically and inorganically, while ensuring we have the scale and resources to deal with these impending changes. We're making good progress, and will present the plan to VNSNY's Board of Directors when we complete it.

What impact will this strategy have on VNSNY's role as a care provider?

For almost 125 years, VNSNY has been a provider of care in people's homes and the community through our nursing, rehabilitation therapy, social work, home health aide and hospice services. That's

core to our mission. Part of our strategy involves looking at how to strengthen our core businesses to best position VNSNY for the future. On our VNSNY CHOICE Health Plan front, we're very much committed to managed long-term care—it's mission-centric, and complements our provider side well. The same is true of CHOICE SelectHealth, our special needs plan for individuals with HIV.

How does VNSNY's strategy align with current healthcare trends?

With hospital admissions and readmissions being so costly—and readmission rates also becoming critical to value-based payment structures—VNSNY is in a very good position to help insurance plans and hospital systems bend that cost curve by providing care management that keeps people out of the hospital. In the value-based care arena, we've entered into some quite creative value-based payment arrangements with a number of payers. We're also looking at a number of innovative technologies to help us provide and manage our high quality of patient care more cost-effectively.

What are VNSNY's most pressing priorities moving forward?

It's imperative that we seize every opportunity to improve our effectiveness in care management and



population health management, and to keep improving and growing our business in order to stay competitive. At the same time, we continue to be vigilant on compliance. I'm extremely proud of VNSNY's efforts over the past few years to strengthen our compliance program, which have included implementing an entirely new compliance risk assessment process. The final thing I'd note is that, while we've come a long way in identifying and mitigating both our compliance and our overall financial, operational and strategic risks, there's still more to do in that regard. We're working with our risk management department across VNSNY's business units to improve this process, so we can better anticipate what's coming down the road and deal with it before it becomes a problem. We recognize that change is the new normal in health care. Now, we're executing on that.



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VNSNY Hospice Fellowship Welcomes Record Cohort

“He had just gone through a difficult time,” says Dr. Simone Douge, talking about a VNSNY Hospice patient she had recently visited, “and I asked how he coped with it. He mentioned oxygen and medication, of course. But he said the most important thing he’d found was meditation, which a Buddhist monk had recently taught him. Here is a man who has been in hospice for quite some time, and is still open to learning new things—because, he told me, each day is a new day. For me, talking to him was a real inspiration and motivation to keep doing what I’m doing.”

A hospice and palliative care physician in training at Memorial Sloan Kettering Cancer Center, Dr. Douge is also part of VNSNY Hospice and Palliative Care’s Physician Fellowship Training Program for the 2017–18 academic year. This year’s trainees include 38 physicians, five nurse practitioners, a social worker and a doctor of pharmacy, all drawn from eight area academic medical centers—the largest cohort in the program’s 13-year history. Each Fellow is “embedded” in a designated VNSNY Hospice team where they

provide hands-on care to hospice patients under the supervision of the team physician or discipline-specific preceptor, collaborating with the rest of their team, including hospice nurses, nurse practitioners, social workers and spiritual care counselors, to ensure that their patients’ physical, emotional, and spiritual needs are being met.

“This is the third full year in which we’ve used the embedded team member model,” explains Shannon Harris, Physician Fellowship and Medical Staffing Coordinator for VNSNY Hospice. “This approach gives our Fellows a robust clinical training experience, while at the same time they’re supporting and bolstering the care provided by the regional hospice medical teams in which they’re placed.”

As the largest hospice program in New York City, VNSNY Hospice offers an ideal training ground for clinicians interested in a career in hospice and palliative care. The Fellows work with their hospice teams in rotations that generally last several weeks or longer, and also participate in didactic sessions and Grand Rounds. “The rotations, including duration, are tailored to the needs of each partner institution,” notes Harris. “For example, some of the medical centers request a pediatric palliative care component.”

For the participating medical centers, the program adds an important clinical piece to their own training curriculum. Meanwhile, the Fellows themselves gain valuable experience providing home-based hospice care in a city environment.



In VNSNY Hospice’s Fellowship Training Program, participating Fellows such as Dr. Simone Douge, left, are “embedded” in a designated VNSNY Hospice team, where they collaborate with other team members to provide hands-on patient care.

Philanthropic support from a dozen funders, including individuals, foundations and corporations, helps fund the program. “It is a privilege to teach new clinicians about hospice care,” says Dr. Ritchell Dignam, Chief Medical Officer and Fellowship Program Director for VNSNY Hospice, who oversees the training program. “Our goal is that the Fellows will come away from their hospice rotations with a deeper understanding of end-of-life care, as well as for the team approach that is the hallmark of hospice.”

The VNSNY Hospice Fellowship Partners

VNSNY’s Hospice Fellows are drawn from eight partner medical centers in New York City: The Icahn School of Medicine at Mount Sinai, Memorial-Sloan Kettering Cancer Center, Metropolitan Hospital, NewYork–Presbyterian Hospital’s Columbia Campus, NYU School of Medicine, Lincoln Medical Center, the James J. Peters VA Medical Center, and NewYork–Presbyterian/Queens.



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Philanthropic Foundations Boost Funding for VNSNY Community Support Programs

In 2018, VNSNY's community programs will continue their innovative work to improve the health and well-being of vulnerable New Yorkers, thanks to sustained, new and expanded funding from a number of New York-based philanthropic foundations—including a \$1 million grant from Robin Hood to support VNSNY's Nurse-Family Partnership (NFP) in the Bronx.

VNSNY's NFP program, which serves Nassau County in addition to the Bronx, pairs young, first-time mothers with specially trained nurses, starting in pregnancy. Headed by director Carol Odnaha, the program has proven consistently effective at setting participants and their children on a healthier and more secure life path, and its outcomes are among the best in the national NFP program. "Robin Hood, which is dedicated to fighting poverty, has been a leading funder of our Bronx NFP for years," says Jacqueline Halpern, VNSNY's Director of Foundation and Corporate Relations. "We and our clients are immensely grateful that they've agreed to step up their support even more."

The foundation's increased funding includes a \$50,000 pass-through grant from the Joan Ganz Cooney & Holly Peterson Fund. "Robin Hood has the very highest standards for their awardees, and their partnership and support for our NFP program means a great deal to us," adds Halpern. "Their decision to increase that support demonstrates their

firm belief in the program's ability to produce positive outcomes for these families."

VNSNY also received three separate grants from the New York Foundation for Eldercare for its 2018 programs, including \$75,000 in renewed support for a project that administers free shingles vaccinations to New York City seniors; a new \$35,000 grant for a pilot program that will provide health coaches to residents at a naturally occurring retirement community (NORC) in upper Manhattan; and a \$15,000 award to VNSNY's highly regarded hospice program for U.S. military veterans. VNSNY also received a new \$15,000 grant from the Jean & Louis Dreyfus Foundation that will help fund senior support services for the neighborhood NORC in Manhattan's Chinatown district, which VNSNY manages.

Overall, 50 private foundations currently provide funding for VNSNY's various community programs, ranging from a pediatric initiative providing specialized home care for children with complex medical conditions, to VNSNY Hospice and Palliative Care, where foundation funding supports its Physician Fellowship program, veterans outreach, and end-of-life care to New Yorkers, including those who otherwise would not have access to hospice services.

"From newborns to the oldest New Yorkers, our organization touches the community in so many different ways, whether it involves helping the

elderly age in place, connecting people with mental health services, or teaching parenting skills," says Catherine Callaway, VNSNY's Vice President for Marketing and Development. "The many foundations that support our programs understand this. Even more importantly, they recognize that these programs are making a significant impact on people's lives."



Overall, 50 private foundations provide funding for VNSNY's community programs, including specialized home care for children with complex medical conditions as well as nursing assistance to low-income mothers and children in VNSNY's Nurse-Family Partnership, as shown above.



New Software Streamlines Workflow for Partners in Care Nurses

Since June of this year, the nurses and support staff in VNSNY's Partners in Care division have been using new documentation software that lets them draft and submit their clinical notes digitally, e-fax multiple physician orders instantly, and have their clients sign required paperwork by writing directly on a computer tablet touchscreen.

The new software system, a Sandata Technologies product called Santrax Point of Care (SPOC for short), allows nurses to access their assignment calendars directly as well, and alerts clerical staff when physician orders need to be signed. "SPOC avoids potential errors in documentation, since staff members no longer have to track clinical visits manually on spreadsheets, and it will improve our efficiency," says Joseph Perry, Director of Private Care Services at Partners in Care. "For example, our Clerical Coordinators previously had to print out and fax each physician order separately. Now, they can send out a whole list of orders electronically with the click of a mouse."

In addition, notes Perry, the system provides supervisors with real-time updates on all nursing visits, so they can confirm that documentation is being completed accurately and on time. The new tool is being used by the Partners in Care Managed Long-Term Care (MLTC) nursing staff, which manages the care for some 5,000



New documentation software lets Partners in Care nurses complete patient reports more efficiently and streamlines the submission of physician orders.

members of local MLTC plans who receive regular home health aide services from Partners in Care, and by the nurses who provide home nursing care for the division's private-pay clients.



New SelectHealth Ad Campaign Spotlights HIV Plan Benefits

“Still detectable?” asks the poster ad of a middle-aged New Yorker sitting with his chin on his fist. It then answers its own question with a powerful reminder: “81% of SelectHealth members have complete viral load suppression.”

This simple and compelling message is part of an advertising campaign recently launched by CHOICE SelectHealth, VNSNY’s Special Needs Plan for Medicaid-eligible individuals with HIV. The campaign, aimed at New Yorkers who qualify for SelectHealth but are not yet enrolled, includes oversized English- and Spanish-language



A new ad campaign for VNSNY CHOICE SelectHealth is aimed at New Yorkers with HIV who qualify for the Special Needs Plan but are not yet enrolled.

ads posted in New York City subway cars and at bus stops and subway stations in Manhattan, Brooklyn and the Bronx.

“We’re very excited about this opportunity to build awareness about how SelectHealth can help Medicaid recipients live well with

HIV,” says Cindy Zanca, Director of Marketing for VNSNY CHOICE Health Plans. “We want to make sure that eligible individuals across our service area know that Special Needs Plans like ours, which are tailored to their specific conditions, are available to them, so they can make informed decisions on whether a plan like SelectHealth meets their needs.”

SelectHealth has been a leader in implementing Governor Andrew Cuomo’s program to end the AIDS epidemic in New York State since it was first announced in 2014. For the past two years, SelectHealth has earned bonus quality awards from the state’s Department of Health for meeting or exceeding statewide quality benchmarks in areas such as members’ monitoring of viral load. SelectHealth has also been a key participant in Project INSPIRE, an initiative funded by the Centers for Medicare and Medicaid (CMS) that is testing whether an integrated model of care can help individuals with hepatitis C adhere to a curative multi-week drug regimen.

“We’re proud of SelectHealth’s contributions to Governor Cuomo’s program,” notes Dr. Hany Abdelaal, President of VNSNY CHOICE Health Plans. “This campaign is a chance to continue spreading the word about the considerable benefits that New York State’s high quality Special Needs Plans like SelectHealth, with their specialized networks of providers, can provide for individuals with HIV.”