



## Breakout Session Descriptions

### **Track 1: 9:50 am – 10:50 am**

#### 101. Physician Communication, Patients, and the Patient Experience

Adrienne Seiler, MD  
Susan Lawson, Patient Volunteer  
Baystate Medical Center, Springfield, MA

Communication is a critical skill in a physician yet it is often overlooked during standard medical training. In this session, the background, development, and implementation of a simulation program designed to enhance physician communication skills, engage patients, and improve the patient experience will be discussed.

#### 102. Older Adults in the Emergency Department: An Elder Friendly Approach to Care

Nancy Fogarty, BS, CPHQ, CPEHR  
Roger Williams Medical Center, Providence, RI  
CharterCARE Health Partners

Care is moving from patient centered to patient driven. The care of the older adults takes into account many variables that contribute to a robust plan of care. This session will focus on how CharterCARE Health system transformed the patient care delivery system to meet the special needs of elders in our Emergency Departments. We will discuss how the multidisciplinary team developed evidence based measurement tools and processes that allowed us to capture appropriate metrics to evaluate the multiple chronic conditions that elders can have.

#### 103. Something for Everyone: A Comprehensive Approach to Improving Patient Care Transitions in an Integrated Safety Net Health System

Maren Batalden, MD, MPH  
Cambridge Health Alliance

Richard Balaban, MD

The Affordable Care Act provides a mandate for reducing total medical expense and improving quality, safety and the patient experience through integrating care across the continuum. This work invites new partnerships among health care providers and with patients and families. This presentation will describe the teamwork that has made it possible to reduce our overall 30-day hospital readmission rate by 15%.

#### 104. Reaching the Triple Aim: The Value Proposition of Evidence based Programs in Patient Centered Care

Robert Schreiber, MD  
Hebrew Senior Life



This presentation will focus on the value proposition of evidence based programs which are being disseminated throughout the Commonwealth of Massachusetts via the Healthy Living Center of Excellence (HLCE). The role of the HLCE in disseminating these programs and creating an integrated delivery system in which health care systems, community-based social services and older adults and reach the Triple Aim will be discussed.

**Track 2: 11:00 am – 12:00 pm**

### 201. Leading Well: Promoting Clinician Resilience and Patient Safety through Provider Support

Patricia I. McCotter, RN, JD, CPHRM, CPC, Director, Patient Safety Innovation and Provider Support  
Ronald L. Hofeldt, MD, Director, Physicians Affairs  
Physicians Insurance, Seattle, WA

Current patient safety research demonstrates a significant human cost to adverse events, litigation, and burnout. This program raises awareness of the impact of adverse events, lawsuits, and burnout on the health care team and organization and offers strategies to promote clinician resilience. Participants will gain awareness of the prevalence, risks, and interventions to address the emotional impact of adverse events, burnout, and litigation stress.

### 202. Introduction to the Clinician Support Tool Kit for Healthcare

Linda Kenney, President & Executive Director Winifred Tobin, Communications Director  
Medically Induced Trauma and Support Services (MITSS), Chestnut Hill, MA

While many healthcare organizations have launched major initiatives to reduce medical error, it often seems as if the need for structured support for patients, families and providers at the “sharp end” of an error has been overlooked. This presentation chronicles the journey of a patient and physician who transformed an adverse medical event – one that nearly took the patient’s life – into a movement that supports healing and restores hope. As a passionate advocate for patients and families, as well as providers, presenters will discuss the need to raise the awareness of the emotional impact that the adverse medical event can have on ALL of those involved. They will introduce and discuss tools and resources found in the MITSS Clinician Support Tool Kit for Healthcare that is available to free for any organization wanted to set up a support program for their providers.

### 203. Shared Accountability on Every Shift Prevents Unplanned Hospital Readmissions

Herminia Shermont, MSN, RN, NE-BC Director of Surgical Services  
Bolanle Bukoye, MSPH, Analyst, Quality Improvement, Surgical Services  
Boston Children’s Hospital

This presentation provides hospital leadership with stepwise hands-on strategies to engage staff in the design, implementation and evaluation of a quality improvement initiative related to the discharge



process. The multifaceted strategies employed at our organization to change culture with the goal of reducing hospital-wide unplanned seven-day readmissions will be highlighted. Reducing readmission is an important strategy for improving overall quality of care that patients receive, while reducing cost of care.

### ***Track 3: 2:30 pm – 3:30 pm***

#### 303. Patient-Centered Care: The Linchpin of a Cohesive Quality Strategy

Patrick Charmel, President & CEO  
Griffin Hospital, Derby CT  
Chairman of the Board of Planetree Flagship Hospital

The presentation examines why adoption of a culture of patient-centered care, supported by structures and practices that promote partnerships between patients and family members and their professional caregivers, is essential for thriving in the new healthcare landscape in which healthcare value, defined by improved outcomes at lower cost, hinges on patient and family engagement.

#### 302. “Mission & Vision & Regs! Oh My! “

Natalie MacBrien RN, BSN, Vice President and Chief Health Officer at Edgewood Retirement Community, North Andover, MA

Learn about the journey of one health center and how they operationalized their mission and vision to improve the lives of their residents and staff and improved their regulatory compliance.

#### 303. A Prescription for Safety: The Clinical Pharmacist’s Role in Care Transitions

Lauren Doctoroff, MD, FHM  
Beth Israel Deaconess Medical Center  
Medical Director, BIDMC PACT program  
Hospitalist

May Adra, PharmD, BCPS  
Beth Israel Deaconess Medical Center  
Clinical Pharmacy Coordinator, Medication Safety

Post-Acute Care Transitions (PACT) at Beth Israel Deaconess Medical Center is a Center for Medicare and Medicaid Innovation-funded transitional care program that aims to improve care transitions for patients at hospital discharge with a multidisciplinary team of nurses, pharmacists and social work. The pharmacists’ scope of practice in care transitions initially included in-hospital medication reconciliation, patient counseling, assessing and addressing barriers to medication adherence. Over time, the pharmacist’s post-discharge responsibilities were expanded to include disease management in collaboration with the primary care physicians. The session will describe the PACT program, the role of the pharmacist, and provide strategies for incorporating pharmacists in transitional settings.