

Brown School of Public Health to Launch Center for Long-Term Care

PROVIDENCE – The American Health Care Association and the National Center for Assisted Living have awarded the Brown University School of Public Health \$1 million to launch the Long Term Care Quality and Innovation Center.

The center will work to improve the quality of long-term and post-acute care by studying best practices, conducting other research, and developing training and leadership programs in the field.

“A major goal of our research and teaching is to improve the quality of care, and therefore the quality of life, for our nation’s elderly and post-acute populations,” said **VINCENT MOR, PhD**, the Florence Pirce Grant Professor of Health Services, Policy, and Practice, who will direct the center. “We look forward to working with AHCA and NCAL’s support to discover, evaluate, advance, and apply practices that could benefit millions of people and their loved ones.”

The center is designed to become self-sustaining after three to five years. ❖

Flu Declared Widespread Masking Rule in Effect

PROVIDENCE – Director of Health **MICHAEL FINE, MD**, recently declared the flu to be widespread again in Rhode Island. This declaration triggers the requirement that healthcare workers who have not been vaccinated against the flu wear surgical masks during direct patient contact.

Rhode Island is seeing a second wave of flu that is even more intense than the first. The dominant strains in this late-season wave have been H3N2 – which has a great impact on the elderly – and influenza B.

The majority of the 13 flu-related deaths this season have been people in their 80s and 90s. There have been 464 flu-related hospitalizations this season. Seventy of these hospitalizations occurred between April 6 and April 12.

The masking requirement for healthcare workers will remain in effect until the widespread declaration is lifted. The flu was also widespread this year from January 8 until February 27. ❖

Kent Hospital to Seek Regulatory Approval to Develop Angioplasty Program

WARWICK – Kent Hospital is seeking approval to perform both emergency and elective coronary angioplasty procedures. The hospital submitted a letter of intent (LOI) to the Rhode Island Department of Health recently stating “intent to develop a coronary angioplasty program within one year” and within the next eight weeks Kent will submit a full application for a certificate of need.

Currently, there are three hospitals in the state (The Rhode Island and Miriam Hospitals and Landmark in Woonsocket) that offer the procedure.

“Kent Hospital is an extremely busy and important community hospital that is vital to its large catchment area in the southern half of Rhode Island. Community hospitals, like Kent, need to be able to provide emergency cardiac services for its patients,” said **CHESTER HEDGEPEETH, III, MD, PhD**, executive chief of cardiology for Care New England Cardiovascular Care and the Brigham and Women’s Cardiovascular Associates at Care New England. “Kent Hospital has made major investments in building its cardiology program in the last four years and is well-positioned to provide this lifesaving program to the community.”

Kent Hospital and Care New England have entered into a clinical affiliation with Brigham and Women’s Hospital of Boston (BWH), whose cardiovascular specialists serve on staff at Kent and Memorial hospitals. The design of the proposed angioplasty program is happening under the supervision of BWH.

“Ample data now convincingly demonstrate the value of acute angioplasty for patients with heart attacks. With proper supervision, equipment and training of physicians and staff, PCI can be provided in the community setting with excellent results. By making PCI more accessible, patients with heart attacks can have treatment earlier and expect to experience less heart damage,” said **DAVID O. WILLIAMS MD**, senior physician at Brigham and Women’s Hospital and Care New England director of invasive cardiac services.

In 2008, Kent was granted a certificate of need to pursue angioplasty, but the program was not launched because of difficulty in securing on-call coverage, a program requirement. During that implementation process, Kent worked with its staff and rescue personnel around its service area to provide advanced training while equipping ambulances with the latest monitoring equipment to assess patients for the possible need for angioplasty.

When the decision was made in 2010 to suspend the pursuit of angioplasty, it was noted that Kent would conduct a thorough review of its cardiology services to determine the future of the program.

The creation of the Brigham and Women’s Cardiovascular Associates at Kent Hospital and more recently the expansion of this service across the Care New England Health System, including the integration of existing BWH cardiology services at Memorial Hospital, means patients have improved local accessibility to advanced cardiac care.

Cardiovascular services available now include advanced imaging such as cardiac CT, valvular heart disease service, heart failure and transplant consultation. Cardiovascular clinical trials, telemedicine, congestive heart failure management and a full range of cardiac arrhythmia diagnostic and therapeutic procedures are also available. When appropriate, patients can receive seamless coordination of care at BWH and then quickly return home for follow up care. ❖