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R.I. Hospital receives $11.8M to establish Center of Biomedical Research Excellence (COBRE) on Opioids and Overdose

Center will be led by principal investigator Josiah Rich, MD, MPH and Traci Green, PhD, MSc

PROVIDENCE – Rhode Island Hospital has received an $11.8 million federal grant to address the nation’s opioid epidemic by establishing the Center of Biomedical Research Excellence (COBRE) on Opioids and Overdose at the hospital. The center, to be funded with a five-year, Phase I grant from the National Institute of General Medical Sciences, will work in partnership with Brown University and Women and Infants’ Hospital to develop and sustain a critical mass of investigators specializing in opioid use disorder. The center will be led by principal investigator JOSIAH RICH, MD, MPH and TRACI GREEN, PhD, MSc, who are both affiliated with Rhode Island Hospital and are recognized as national experts in the epidemiology of opioid and other illicit substances.

“There is a tremendous need for greater scientific understanding of the mechanisms underpinning opioid use disorder and a need for more effective interventions to treat and prevent opioid misuse and overdose,” says Rich, an infectious disease physician with Lifespan and Brown Medicine and the director of the Center for Prisoner Health and Human Rights at Lifespan-affiliated The Miriam Hospital. “This center will bring together experts from institutions across Rhode Island to support excellence in the research needed to combat the opioid epidemic hampering and taking the lives of our friends and neighbors.”

Rich and Green have more than 40 years of experience between them conducting research with people with opioid use disorder. The intent of COBRE grants is to establish leadership and mentorship by experienced researchers, overseeing and supporting the work of three to five junior investigators at once in thematic, multidisciplinary centers, until those researchers establish a body of work to enable them to secure their own independent funding. Over the possible 15-year span of COBRE’s three phases, this builds the institution’s capacity and expertise in a given area.

“Rhode Island continues to be a national leader in innovative approaches to addressing opioid use disorder,” says Green. “The unique political and public health climate that has been cultivated over decades of collaboration among members of this research team, community partners, and key stakeholders makes Rhode Island an ideal location to establish the COBRE on Opioids and Overdose.”

Rhode Island has high stakes in the success of this research. According to the NIH’s National Institute on Drug Abuse, Rhode Island is among the top ten states for rates of opioid-overdose death, with more than double the national rate in 2016. Rhode Island suffered nearly 300 deadly overdoses that year. A host of other public health threats come along with addiction, including neonatal abstinence syndrome, HIV and Hepatitis C.

Both Rich and Green serve as expert advisors to Governor Gina M. Raimondo’s Overdose Prevention and Intervention Task Force.

Three research projects by early-career project leaders have been identified to be supported with the inception of the COBRE on Opioids and Overdose. They are:

• “Informed opioid prescribing for acute musculoskeletal pain after motor vehicle collision: A support tool for assessing risks and benefits of analgesic medications before prescribing [STAAMP]”, FRANCESCA BEAUDOIN, MD, MS, Rhode Island Hospital
• “Contingency Management in Combination with MAT for Opioid Use Disorders”, SARA BECKER, PhD, MA, Brown University School of Public Health
• “Neonatal Abstinence Syndrome (NAS): Fetus to First Years”, ADAM CZYNSKI, DO, Women & Infants Hospital

In addition, Rhode Island Hospital will fund 15 junior investigators with a $600,000 pilot program.

The funding for the COBRE had the vital support of Rhode Island’s Congressional delegation.

“This NIH grant will advance research and help Rhode Island accelerate efforts to effectively treat opioid addiction,” U.S. Senator Jack Reed, a senior member of the Appropriations Committee said. “Further, this federal funding will help build a research infrastructure in the state for combating opioid addiction.”

U.S. Sen. Sheldon Whitehouse, who co-authored the landmark bipartisan Comprehensive Addiction and Recovery Act (CARA), sweeping legislation that guides the federal response to the opioid epidemic, said, “We still have a lot to learn about how to prevent and treat opioid addiction. That’s why medical research is a huge part of the battle against the opioid crisis, and why I’ve been fighting to unlock research funding like this for Rhode Island. This new center will help outstanding researchers at Rhode Island Hospital and other Rhode Island institutions expand work to answer tough questions about opioid addiction. It’s an important victory for those confronting addiction or walking the difficult, noble path of recovery.”

“Effectively combatting the opioid overdose epidemic requires investments in biomedical research to better understand the nature of addiction and develop targeted methods for prevention, treatment and recovery,” said Congressman James Langevin. “Congratulations to the team of researchers at Rhode Island Hospital for securing this federal funding and for your efforts to help bring this devastating public health crisis to an end.”

Congressman David Cicilline said, “This federal funding will support vital research aimed at combatting a serious epidemic facing our state and country. Opioid addiction affects all communities and is devastating so many families. It is a serious public health crisis that requires urgent action. Establishing this COBRE will help us better understand this disease and identify real solutions to address it.”
VA Cardiopulmonary Research Center of Excellence $10M grant renewed

PROVIDENCE – The National Institute for General Medical Sciences of the National Institutes of Health awarded the Cardiopulmonary Vascular Biology Center of Biomedical Research Excellence, a renewal grant of $10 million July 20, 2018, through the Ocean State Research Institute, or OSRI.

Known as the CPVB COBRE, the center is located at the Providence VA Medical Center and led by principal investigators, DR. SHARON ROUNDS and DR. ELIZABETH HARRINGTON, and the program administrator, SUSAN MCNAMARA.

“We look forward to expanding our team of outstanding investigators and the scope of our research in vascular biology,” said Dr. Rounds.

“The CPVB COBRE sparked a remarkable coalescence of cross-disciplinary scholars and researchers in vascular biology,” said DR. JACK ELIAS, dean of Medicine and Biological Sciences at Brown University’s Warren Alpert Medical School. “We look forward to accelerated growth in vascular biology research now that the NIH is funding this important inter-institutional collaboration for another five years.”

The phase II award will fund new and continuing initiatives for five years, and supports mentored investigators DR. ALAN MORRISON at the Providence VAMC; DR. HONGWEI YAO, DR. YANG ZHOU and DR. JESSICA PLAVICKI at Brown University; and DR. SEAN MONAGHAN at Rhode Island Hospital. The grant also supports pilot project research grants in the area of vascular biology in addition to two research cores: 1) Administrative, and 2) Cell Isolation and Organ Function.

“The renewal of the COBRE grant by NIH is acknowledgment of the outstanding cardiac, pulmonary and vascular research being conducted here,” said DR. ROBERT SWIFT, president of OSRI. “We’re very proud of our investigators and research staff based at the Providence VA Medical Center, the Alpert Medical School at Brown University and its affiliated hospitals.”

OSRI is a non-profit corporation affiliated with the Providence VA Medical Center. Its mission is to promote and conduct research and education activities to improve the health and lives of Veterans.

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¹ www.cdc.gov/tobacco/data_statistics/fact_sheets/cessation/quitting/index.htm
Advocates distribute fentanyl test strips on Overdose Awareness Day

Public health advocates in Rhode Island, including representatives of Preventing Overdose and Naloxone Intervention (PONI) at The Miriam Hospital, joined forces on August 31, the fourth annual International Overdose Awareness Day, to launch a campaign that will make Rhode Island among the first in the nation to distribute fentanyl test strips.

Advocates from public health, prevention, recovery and the harm reduction community visited sites in Providence and around Rhode Island on Friday to distribute the test strips. They also distributed doses of naloxone, a medication effective at reversing an opioid overdose.

“The opioid epidemic continues to transform, challenging us to employ creative and dynamic solutions to combat this crisis. Helping Rhode Islanders detect fentanyl in the drug supply, prior to use, will save lives,” said Josiah Rich, MD, co-founder of PONI, an overdose prevention and intervention training program at The Miriam Hospital.

Rich, an infectious disease physician at The Miriam, is a national expert on the opioid epidemic and an advisor to the Governor’s Overdose Prevention and Intervention Task Force. He is also the director of The Miriam’s Center for Prisoner Health and Human Rights and a professor of medicine and epidemiology at The Warren Alpert Medical School of Brown University. He co-founded PONI with Michelle McKenzie, who, as the director of the program, collaborated with 40 community organizations to distribute more than 5,000 naloxone kits in 2017.

An amendment to Rhode Island’s Good Samaritan Overdose Prevention law, which was passed this year, firmly makes the distribution and use of fentanyl test strips legal.

Women & Infants introduces new technology to guide breast surgeries

Women & Infants Hospital is introducing a new way for physicians to mark and find breast lesions. LOCaler™ is an FDA-cleared system that uses the latest technology to bring more precision for providers and less stress for patients. Women & Infants is the first in the region to adapt this new technology.

“The fact that we are able to detect breast lumps earlier is fantastic, but it has definitely made the removal of these significantly smaller masses more challenging,” said David Edmonson, MD, breast surgeon with the Breast Health Center at Women & Infants Hospital.

The LOCaler tag can be placed in the breast up to 30 days before surgery – this takes place under local anesthesia (the area is numbed) and the tag is inserted with a needle under ultrasound or x-ray guidance. Each tag has a unique identification number to clearly mark the lesion. On the day of surgery, the surgeon then uses the LOCaler reader to confirm the position and identification of the tag, allowing him to better plan the surgical path and remove the lesion.

Women & Infants introduced LOCaler earlier this year and has done more than 100 procedures using this technology.

Office of Continuing Medical Education

Some of our Fall 2018 Events | For a complete schedule visit: www.brown.edu/cme

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<td>How to Think &amp; Act Like a Dermatologist: Diagnostic and Treatment Strategies for Primary Care Professionals</td>
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<td>Saturday, September 22, 2018</td>
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<td>3rd Annual Interdisciplinary Spine Conference</td>
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<td>Saturday, September 29, 2018</td>
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<td>Oct 12</td>
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<td>A to ZZZs: Sleep and Sleep Disorders in College Students</td>
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Brookdale Overview

Independent Living An ideal retirement living experience
• Spacious apartments with minimal maintenance
• Restaurant-style dining
• Plenty of planned activities every day

Assisted Living The right choice for people who need extra help with daily activities
• Qualified staff assists with taking medication, dressing, bathing, etc.
• Floor plans, from studio to two-bedroom apartments
• Activities and events for various levels of acuity

Alzheimer’s & Dementia Care Person-centered care for people at various stages
• Programs that leverage the latest dementia care research
• A care philosophy defined by more than the symptoms of Alzheimer’s & dementia
• An experienced staff who help residents thrive

Rehabilitation & Skilled Nursing For short-term surgical recovery or long-term rehabilitation
• Around-the-clock, licensed nursing care
• Providing clinical resources in a comfortable setting that feels like home
• A mission and focus to helping residents get well and then get home as quickly as possible

Personalized Living For people who just need a little help with things
• One-on-one non-medical services for home care needs
• Additional personal needs for those in assisted living or home such as escorts to doctor appointments and more

Home Health For qualified people in need of therapy or rehabilitation — all in the comfort of home
• Get Medicare-certified assistance from experienced professionals
• Many healthcare services such as wound care and stroke therapy

Therapy Specialized programming personalized to encourage recovery
• An emphasis on education, fitness and rehabilitation that helps seniors retain or enhance their independence
• Most insurances accepted

Hospice Promoting comfort by addressing the full range of needs of patients and families
• Primary focus of quality of life
• Specially trained staff help families and patients cope with overwhelming feelings accompanying end-of-life care

Not all services are available at all communities. Contact community for details

The Rhode Island Network

Brookdale Center of New England
Brookdale Cumberland
Brookdale Smithfield
Brookdale Greenwich Bay
Brookdale Pocasset Bay

Brookdale Sakonnet Bay
Brookdale East Bay
Brookdale West Bay
Brookdale South Bay

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Partners HealthCare, Care New England, Brown negotiate partnership

PROVIDENCE – AUGUST 7, 2018 – Partners HealthCare, Care New England Health System and Brown University have signed a memorandum of understanding (MOU) to formalize a joint commitment to providing the highest quality of patient care, physician training and biomedical innovation to Rhode Island.

The MOU signed by the three organizations follows the announcement in May of a definitive agreement formalizing Partners’ planned acquisition of CNE, and aligns the shared vision of all three organizations to benefit the communities of Rhode Island. It establishes Brown’s Warren Alpert Medical School as the primary academic research and teaching institution of record for Partners-CNE in Rhode Island.

The memorandum details the terms for negotiating a formal agreement in the coming weeks.

“Today’s announcement represents an important step in this collaborative effort between our institutions and our collective commitment to strengthening the health care landscape in Rhode Island and for the advancement of academic training,” said Care New England President and CEO JAMES E. FANALE, MD. “This signifies tremendous opportunity for research, the economy, and most importantly, for those who rely on us for the best possible care.”

Brown has a longtime academic medical affiliation with CNE, which is home to Brown’s programs in obstetrics and gynecology and neonatology (at Women & Infants); in psychiatry (at Butler); and in family medicine (Kent).

Following Partners’ proposed acquisition of CNE, the three partners are committed to deepening their collaboration through a clinical, medical education and biomedical research affiliation.

“This agreement sets us on a clear path for achieving Brown’s goals of a partnership that will enhance the quality of clinical care, generate biomedical research that improves population health and fuel economic development in Rhode Island,” Brown President CHRISTINA PAXSON said.

The Partners-CNE-Brown MOU outlines a framework for a Rhode-Island based academic medical center that will drive new innovation, with the Partners affiliation helping to further position the health system to compete for research grants at a national level.

“The addition of Brown University will strengthen an already robust Rhode Island health care ecosystem and provide opportunities for new investments in patient care, research and health care innovation,” said BETSY NABEL, MD, President of Brigham Health, on behalf of Partners.

Other objectives of the new partnership include maintaining and enhancing the quality of medical education for medical students at existing and future CNE clinical facilities, evaluating ways to strengthen the relationship between CNE physicians and physicians in Brown-affiliated faculty practice groups; exploring the potential for a new medical research institute in Providence and shared governance to support the goals of the partnership.

As part of the MOU, Brown’s president would be added to the CNE Board of Directors, and the dean of the Warren Alpert Medical School would sit on any academic and research subcommittees of that board.

The shared governance would support Partners, CNE and Brown’s shared commitment to helping ensure that high-quality, affordable care remains available through the CNE institutions for the people of Rhode Island.

The goals of the affiliation announced by Partners and CNE in May include building on the existing clinical relationships between the parties; ensuring ongoing clinical research and educational collaboration in support of the parties’ charitable missions; enabling the organizations to more efficiently use their resources; and establishing effective and expanded approaches to population health management.

The agreement followed extensive due diligence, internal reviews and collaborative discussions between the two health care systems. Both organizations are working together to prepare and file all necessary Rhode Island, Massachusetts and federal regulatory filings, and, upon approval, move forward on Partners’ integration of CNE.

With the signing of the definitive agreement, Partners and CNE will continue discussions with Lifespan. Partners and CNE invited Lifespan to the affiliation conversations earlier this year because the parties share a mutual desire to improve access, quality and efficiency of care for all Rhode Islanders. Brown has a longstanding affiliation with Lifespan.

OFFICE SPACE AVAILABLE

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Inquiries to Newell Warde, nwarde@rimed.org
Care New England releases FY 2018 Q3 results

Obligated Group achieves $4.6 million gain from operations
CNE as a whole recorded positive gain from operations of $.8 million for quarter

Care New England Health System (CNE) announced August 14 that for the FY 2018 third quarter (April 2018–June 2018) its Obligated Group (CNE excluding Memorial Hospital) achieved income from operations of $4.6 million compared to a $6.5 million loss for the same quarter last year. Overall consolidated financial improvement (including Memorial Hospital wind-down) for the third quarter was $7.3 million better than the same quarter last year.

“The financial information reported today continues to show that the focus, strategic planning, and dedication of staff across CNE is making a significant impact,” said JAMES E. FANALE, MD, president and CEO, CNE. “We continue to make important strides in our clinical and academic partnership efforts and look forward to building on this positive momentum as we remain focused on quality, service, and access.”

Specifically, successful implementation of growth initiatives and cost management has been very effective. Action plan tracking, daily productivity monitoring, and revenue cycle improvements are making an impact on performance. More initiatives targeting growth, leakage, access, cost savings, and patient retention are ongoing.

Overall during the first nine months of FY 2018, the Obligated Group has improved gains from operations every quarter as follows: Q1-$8.7 million loss, Q2-$4.4 million gain, and Q3-$4.6 million gain. The financials for the first nine months of FY 2018 for the Obligated Group has improved $46.8 million from the same nine-month period last year.

Of note, Butler, Kent, and Women & Infants hospitals and the VNA of Care New England are all profitable from operations through the third quarter ending June 30, 2018.

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