

VA Providence Healthcare System holds ribbon-cutting event for Harwood Research Center

Primary occupant: Center of Innovation in Long-Term Services and Support

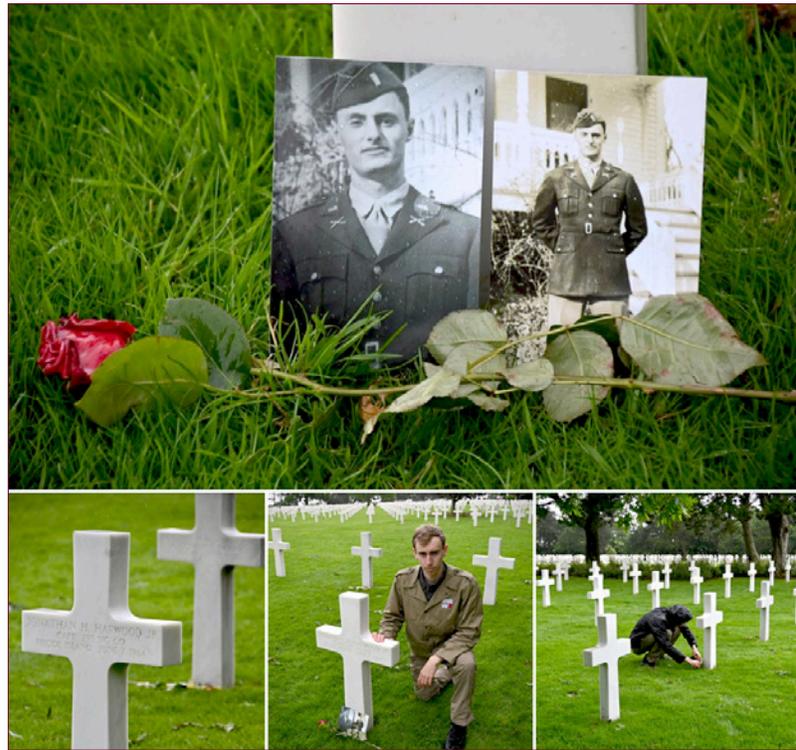
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PROVIDENCE – The VA Providence Healthcare System (VAPHS) held a ribbon-cutting ceremony for the Capt. John H. Harwood Research Center on March 21st at the newly renovated site located at 385 Niagara Street.

VA officials, members of the state’s Congressional delegation, and state and local officials attended the opening. U.S. Sen. **JACK REED**, an Army veteran, said the work in this new state-of-the-art facility will help identify better health solutions and improve outcomes for veterans and their families. “From better patient outcomes to systemic changes, we’re continually pushing to improve VA access and services for our veterans, and this new facility is a vital part of that mission.”

The VA said the research aims to improve care for veterans challenged by aging, disease or disability. **LAWRENCE CONNELL**, the VA director in Providence, said they are doing “groundbreaking medical research,” in large part because of their partnership with Brown University.

Researchers in Providence are working on new interventions to reduce veteran suicide and substance abuse after hospitalization, and ways to reduce depression among elderly veterans living in community living centers. They’re also identifying risk



Above: Photographs of **Capt. Harwood** were placed on his grave during the D-Day remembrance service in Normandy in 2019. He is buried at the Normandy American Cemetery and Memorial overlooking Omaha Beach.

[PHOTO: WORLD WAR II VETERANS HISTORY PROJECT; [HTTPS://WW2 VETERANSHISTORYPROJECT.COM/HOME](https://ww2veteranshistoryproject.com/home)]



Left to Right: **Kasim J. Yarn**, Rhode Island Director of Veterans Affairs; **Hon. Jorge Elorza**, Providence Mayor; **Hon. David N. Cicilline**, Congressman, Rhode Island 1; **Lawrence B. Connell**, Director, VA Providence Healthcare System; **Hon. Jack Reed**, US Senator; **Dr. James Rudolph**, Director, Long Term Services and Support (LTSS) Center for Innovation (COIN), VA Providence Research Service; **Hon. Seth Magaziner**, Rhode Island General Treasurer; **Dr. Gaurav Choudhary**, Associate Chief of Staff, Research, VA Providence Healthcare; **Matthew Goulet**, Associate Director for Patient Care/Nurse Executive, VA Providence Healthcare System; **Dr. Anmarie Dunican**, Chief of Staff, VA Providence Healthcare System.

[PHOTO: VA PROVIDENCE PUBLIC AFFAIRS]

factors for food insecurity among veterans, assessing for Alzheimer’s disease and dementia among homeless veterans, and looking at how veterans respond to COVID-19 vaccines and booster doses.

The facility

Total cost of the renovation for the nearly 30,000 square-foot research center, with a capacity for more than 100 researchers, totaled \$12.8 million. The primary occupant, the Center of Innovation in Long-Term Services and Support, conducts research designed to improve the

understanding of veteran independence, supported community dwelling, and supervised living environments during the last phases of life.

The facility was originally built in 1950 as an Army Reserve Center and was closed during the base realignment and closure process in 2006. The property was officially transferred to the VAPHS in December 2012.

Capt. Harwood: RI Army hero died during D-Day invasion

The center is named for Capt. Jonathan H. Harwood, Jr., a native of East Greenwich, who died on June 7th, 1944, succumbing to wounds received on Omaha Beach during the allied D-Day invasion the prior day.

Born on Dec. 29, 1918, to Jonathan and Ruth (Fisher) Harwood, he attended the U.S. Military Academy at West Point, Class of 1941, and was a graduate of Cornell University. He then assumed a position in the U.S. Army as a fire control officer in the 293rd Signal Company.

According to the WW II Veterans History Project, which has compiled biographies of veterans, he was attached to the 2nd Ranger Battalion during the D-Day invasion and was among the first to land before the artillery barrage began. He and his fire control group were pinned down on the beach and cliffs, infested with nests of German machine-gunners. The battalion radioed the USS Texas for naval artillery support as they scaled the cliffs to try and disable the German gun batteries.

During the barrage, he was severely wounded, along with many in his group. According to the Veterans History Project, "What would prove to be the fatal round for Harwood was an armor-piercing shell that contained a yellow pigment known as "Explosive D", or Dunnite. According to a soldier who was there, "The men were turned completely yellow. It was as though they had been stricken with jaundice. It wasn't only their faces and hands, but the skin beneath their clothes were yellow from that shell.' "

Capt. Walter Block, a hometown friend who served as battalion surgeon, tended his wounds, but Harwood died early the next morning. The valiant young officer from East Greenwich was but 25 years old. He was posthumously awarded the Purple Heart and Silver Star for valor in combat. The new research center named in his honor is an abiding legacy to Harwood and all veterans – past, present and future. ❖

Dr. Fauci to deliver keynote at RWU Commencement, receive honorary degree

BRISTOL – **ANTHONY S. FAUCI, MD**, Director of the National Institute of Allergy and Infectious Diseases and chief medical advisor to the president of the United States, will deliver the keynote speech and receive an honorary degree at the Roger Williams University Commencement ceremony on Friday, May 20.



"The ability to synthesize vast amounts of information and to make decisions that consider health, science, cultural, legal and political implications, is the type of education we strive to offer our students. Dr. Fauci's experience throughout his career, but especially over the last two years, has modeled how to do this exceptionally well and provides a real-world example to our students as they enter a complex world," said RWU President Ioannis N. Miaoulis. "We are thrilled to have Dr. Fauci join our distinguished group of honorary degree recipients and address our graduates and their families. We cannot imagine a more ideal leader to share insights on tackling monumental challenges and to inspire our graduates on how best to thrive in today's global society."

Dr. Fauci has served as director of the National Institute of Allergy and Infectious Diseases (NIAID) at the U.S. National Institutes of Health since 1984. As the long-time chief of the NIAID Laboratory of Immunoregulation, he has made many seminal contributions in basic and clinical research and is one of the world's most-cited biomedical scientists. He has advised seven presidents on HIV/AIDS and many other domestic and global health issues. He was one of the principal architects of the President's Emergency Plan for AIDS Relief (PEPFAR), a program that has saved millions of lives throughout the developing world.

Dr. Fauci has delivered lectures all over the world and received numerous prestigious awards, including the Presidential Medal of Freedom (the highest honor given to a civilian by the president of the United States) and the National Medal of Science.

The university ceremony will take place on the main athletic field. The processional steps off at 8:45 a.m. with the ceremony beginning at 9:30 a.m. ❖

AMA survey shows widespread enthusiasm for telehealth; urges Congress to take note of barriers to care

CHICAGO – An American Medical Association (AMA) survey released today shows physicians have enthusiastically embraced telehealth and expect to use it even more in the future.

Nearly 85% of physician respondents indicated they are currently using telehealth to care for patients, and nearly 70% report their organization is motivated to continue using telehealth in their practice. Many physicians foresee providing telehealth services for chronic disease management and ongoing medical management, care coordination, mental/behavioral health, and specialty care.

The survey comes as Congress recently extended the availability of telehealth for Medicare patients beyond the current COVID-19 public health emergency. Additional action by Congress will be needed to permanently provide access to Medicare telehealth services.

As physicians and practices plan to expand telehealth services, they say widespread adoption hinges on preventing a return to the previous lack of insurance coverage and little to no payer reimbursement. Payers, both public and private, should continue to evaluate and improve policies, coverage, and payment rates for services provided via telehealth.

“Physicians view telehealth as providing quality care to their patients, and policymakers and payers have come to the same conclusion. Patients will benefit immensely from this new era of improved access to care,” said AMA President **GERALD E. HARMON, MD**. “This survey shows adoption of the technology is widespread as is the demand for continued access. It is critical that Congress takes action and makes permanent telehealth access for Medicare patients.”

Physicians strongly support that telehealth via audio-only/telephone remains covered in the future to ensure equitable access. That coverage has been permitted

during the public health emergency and extended for several months afterward.

According to the survey, 95% of physicians report patients are primarily located at their home at the time of the virtual visit. Allowing patients to be in their home is a key component of making telehealth more accessible. Before the pandemic, Medicare patients needed to be physically located in a rural area to access telehealth services, shutting out urban and suburban patients from receiving the same benefits of virtual care. Before the pandemic, rural patients needed to travel to an “originating site,” essentially another health care facility, outside of their home to access telehealth services. The temporary extension in the omnibus will allow patients with Medicare to receive telehealth services anywhere they are located, including in their home. The AMA will continue to urge Congress to make permanent this and other policies that have offered coverage and convenience to patients.

Fewer than half of respondents report being able to access all of their telehealth platforms via their electronic health records, and more than 75% report that their support technology does

not automatically collect and deliver patient-reported data. Improving interoperability between platforms and support technology would improve and streamline telehealth services.

Physicians perceive technology, digital literacy, and broadband internet access to be the top three patient barriers to using telehealth. In addition, only 8% of physician respondents said they were using remote patient monitoring at this time. The AMA will advocate for patient populations and communities with limited access to telehealth service, including but not limited to, supporting increased funding and planning for telehealth infrastructure such as broadband and internet-connected devices. ❖

You could be part of the next life science breakthrough!

Sign up for the **RHODE ISLAND CLINICIAN-ENTREPRENEUR (RICE) NETWORK**

RICE connects entrepreneurially-minded clinicians with innovative RI start-ups seeking to develop technologies in the medical device, pharmaceutical, and biotech industries. Roles include critic, advisor, board member, or clinical trial runner. Visit ri-bio.org/clinician-entrepreneur-network for details.

RICE Network is a program of RI Bio, advancing the life sciences through education, collaboration, and advocacy.

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Providence announces next steps in creation of behavioral health crisis response program

City issues request for proposals to expand co-response model with Public Safety and Healthy Communities Office

PROVIDENCE – The City of Providence has released a Request for Proposals (RFP) to advance next steps regarding the City's implementation of a behavioral health crisis response program. The Behavioral Health Crisis Co-Response Team RFP is designed to implement the expansion of Providence's existing co-response efforts to include the fire department, and to increase the City's capacity to provide mental health guidance and intervention when residents dial 9-1-1.

"We're committed to challenging the way things have always been done and to find new solutions that better meet our needs," said Mayor **JORGE O. ELORZA**. "After designing this program with feedback from key stakeholders, this request for proposals will allow us to provide more and better treatment to people experiencing a mental or behavioral health crisis."

As Providence works to innovate and improve emergency responses to behavioral health crises, the City has invested in a multi-phased approach to creating a Behavioral Health and Social Service Crisis Response Program (BHSSCRP) within the Healthy Communities Office (HCO), in coordination with Providence Public Safety. As part of the program design phase, last year the City of Providence partnered with The Providence Center and Family Service of Rhode Island to provide analysis and planning services for public safety-related behavioral health and social service interventions. The partnership, guided by a multi-disciplinary Steering Committee, culminated with a final report titled, "Behavioral Health and Social Service Crisis Response Planning Services in Providence: Project Report and Recommendations." The RFP released by the City advances recommendations made within the report.

Expanding co-response efforts within the Providence Fire Department will allow the City to utilize existing infrastructure to rapidly respond to crises with appropriate interventions while also collecting necessary data and process improvements to scale up services. Responsibilities of the selected provider will include providing a clinician to respond to behavioral health and social services calls alongside the Providence Fire Department and emergency medical services crews, as well as providing a clinician to work with the Providence Public Safety dispatch team to answer and assist with behavioral health and social service emergency calls. The selected provider will also help the City to develop standard operating procedures and precedents for future behavioral health crisis response programs.

The Healthy Communities Office also announced the hiring of two full-time staff members dedicated to the programmatic

management and evaluation of the City's behavioral health programming, including this effort. **SILAPHONE NHONGVONG-SOUTHY** will serve as the Behavioral Health Program Manager and **RACHEL FERRARA** will serve as the Data and Evaluation Manager for the program.

"Our community and partner organizations have put in so much work already to design a robust program that meets the specific needs of Providence, and we're so excited to continue this work," said **LAURIE MOISE SEARS**, Director of the Healthy Communities Office. "I'm looking forward to working collaboratively to develop and implement this innovative co-response program."

Organizations interested in applying or learning more can read the RFP [here](#) and apply by the April 11, 2022 deadline.

The Healthy Communities Office (HCO) is the City's lead agency for health policy, health promotion and substance use disorder prevention. The HCO works to ensure that Providence residents have equitable access to the resources they need to lead healthy lives. ❖

HopeHealth Visiting Nurse earns home care and palliative care accreditation and recertification

LINCOLN – HopeHealth Visiting Nurse recently passed a rigorous federal review to maintain compliance with the terms of its home health care and community-based palliative care program accreditation and recertification.

The Joint Commission awarded HopeHealth its Gold Seal of Approval® for demonstrating continuous compliance with quality patient care performance standards after a five-day March 2021 review that took place virtually because of the COVID-19 pandemic. As part of that process, HopeHealth was required to pass a subsequent unannounced on-site inspection to achieve full compliance.

"We are pleased to have earned accreditation from the Joint Commission," HopeHealth Chief Operating Officer **MAUREEN BISCHOFF** says. "This approval confirms the deep commitment of our clinical care teams to providing quality care to our patients and their families."

The Joint Commission accreditation is valid for three years. ❖

Vivian Sung, MD, MPH, approved for \$6.9M for study on nonsurgical treatment options for urinary incontinence

Funds awarded by the Patient-Centered Outcomes Research Institute

PROVIDENCE – A research team led by **VIVIAN SUNG, MD, MPH**, at Women & Infants Hospital has been approved for a \$6.9 million funding award by the Patient-Centered Outcomes Research Institute (PCORI) to study nonsurgical treatment options for urinary incontinence.



This study will compare the next options of an oral drug beta agonist (mirabegron) or onabotulinumtoxinA injections (commonly referred to as Botox) among women who have unsuccessfully tried more conservative treatments. Both treatments have been shown to help UUI and are commonly used, but there are no studies directly comparing them, which makes decision making for patients more difficult and confusing.

This research led by Dr. Sung will enroll 432 adult women from five sites across the country, including Rhode Island, and will compare success and safety results that are most important to patients. The results from this study can be used by women and doctors to better decide their next best step for treating UUI. Patients have already worked closely with the study team to help design the study and choose the best ways to determine if a treatment is successful or not. The national research team also includes specialized community engagement teams, patient stakeholders, healthcare providers, representatives from social support organizations, insurer stakeholders, and

community leaders from across the country.

Dr. Sung's study was selected for funding through a PCORI funding announcement specifically focused on comparing the effectiveness of nonsurgical treatment options for urinary incontinence for nonpregnant women.

"This study was selected for PCORI funding for its potential to fill an important gap in our understanding of how best to treat a health condition common among women," said PCORI Executive Director Nakela L. Cook, MD, MPH. "Although the efficacy of many nonsurgical interventions for urinary incontinence is soundly substantiated, evidence gaps remain, particularly related to direct comparisons of the options. We look forward to following the study's progress and working with Women & Infants Hospital to share the results."

Dr. Sung's award has been approved pending completion of a business and programmatic review by PCORI staff and issuance of a formal award contract.

PCORI is an independent, nonprofit organization authorized by Congress in 2010. Its mission is to fund research that will provide patients, their caregivers, and clinicians with the evidence-based information needed to make better-informed healthcare decisions. For more information about PCORI's funding, visit www.pcori.org. ❖

W&I announces plans for Labor & Delivery Center, Women's Health Research Institute

PROVIDENCE – Women & Infants Hospital will embark on an initiative to rebuild its Labor and Delivery Unit, by enhancing birthing options, enlarging delivery rooms, and providing an equitable, state-of-the-art environment in which women can deliver their babies.

In addition to the redesign of the labor, delivery, and recovery suite, the campaign will raise funds for the Women's Health Research Institute.

Plans for the new Labor & Delivery Center include larger rooms to accommodate a greater variety of birthing practices. And, the Women's Health Research Institute will tackle important projects including much-needed health equity research. Ultimately, the new unit will help meet Women & Infants Hospital's goal of eliminating disparities of care, as well as elevate every mother's birthing experience.

With the kickoff of the capital campaign to meet the financial obligations of the new building, Women & Infants seeks not only to raise capital but to include the entire community in its effort.

The Hospital will connect with the Rhode Island community through storytelling, multi-media communications and online channels, in-person events, and grateful patient testimonials.

The Campaign's two Honorary Co-chairs, **ALAN HASSENFELD** and **ANNE SZOSTAK**, are venerated business and philanthropic leaders who are committed to top-notch healthcare in the State. ❖

Dana-Farber Cancer Institute, Lifespan renew strategic alliance agreement

PROVIDENCE – Dana-Farber Cancer Institute and the Lifespan Cancer Institute have agreed to renew their strategic alliance to advance cancer treatment and research. The organizations signed an initial agreement in 2017.

This renewed agreement will continue to support the expansion of clinical trials, access for Lifespan physicians to cancer-specific disease expertise for complex cases, and the continuation of a highly successful program coordinating the treatment of cell therapy and transplant patients. Cellular therapies and transplants are provided in Boston at Dana-Farber and care surrounding these procedures is provided in Providence at the Lifespan Cancer Institute. The two organizations share patient information through their respective secure electronic health record systems and use the same clinical trials management platform, resulting in better care coordination.

A top priority of Dana-Farber and the Lifespan Cancer Institute's work together is the ability to offer the latest and most advanced clinical trials to patients in Rhode Island. While many of these trials are developed at and provided by Dana-Farber, opportunities exist for clinical trials to be developed at the Lifespan Cancer Institute and offered to Dana-Farber patients. Increasing access to diverse patient populations is a common goal to help accelerate the development of new therapies. Other areas to be explored include genomics and precision medicine,

cancer disparities, innovation in the delivery of cancer care, and potential synergies in basic research. The two organizations have collaborated on a multi-site grant application for genomics with a health disparities component.

DAVID WAZER, MD, director of the Lifespan Cancer Institute, said, "The Lifespan Cancer Institute offers a robust array of cancer services, convenient access to care, and a rapidly growing clinical trials program. Renewing our close working relationship with Dana-Farber will allow the Lifespan Cancer Institute to continue to elevate cancer care in Rhode Island and provide even more treatment options, all in a carefully coordinated manner that prioritizes the needs of patients and their families."

HOWARD SAFRAN, MD, chief of the Division of Hematology/Oncology at the Lifespan Cancer Institute said, "Together the Lifespan Cancer Institute and Dana-Farber are expanding access to the latest and most advanced clinical trials for patients locally, nationally, and worldwide. We are also collaborating to accelerate the development of new therapies and to reduce cancer disparities through outreach and innovation in the delivery of cancer care. The two organizations share patient information through their respective cancer-specific electronic health record systems and use the same clinical trials management platform, resulting in better care coordination." ❖

Dr. Lorna Breen Health Care Provider Protection Act signed into law

WASHINGTON, DC – A new law co-authored by U.S. Senator **JACK REED** (D-RI) and signed by President **JOE BIDEN**, will help prioritize mental health support, treatment, and care for doctors, nurses, and health workers while also reducing burnout and improving retention rates in the health care profession.

The newly enacted Dr. Lorna Breen Health Care Provider Protection Act will fund federal grants, in-depth studies, and public awareness campaigns to encourage health care workers to seek support, access treatment, and eliminate the stigma that deters health care professionals from seeking mental and behavioral health care.

The law is named in honor of Dr. Lorna Breen, an emergency physician in New York City who took her own life in April 2020 after working on the frontlines to

care for patients during the first wave of the COVID-19 pandemic.

Specifically, the Dr. Lorna Breen Health Care Provider Protection Act will:

- Establish grants for health profession schools, academic health centers, or other institutions to help them train health workers in strategies to prevent suicide, burnout, mental health conditions, and substance use disorders. The grants would also help improve health care professionals' well-being and job satisfaction.
- Seek to identify and disseminate evidence-informed best practices for reducing and preventing suicide and burnout among health care professionals, training health care professionals in appropriate strategies, and promoting their mental and behavioral health and job satisfaction.
- Establish a national evidence-based education and awareness campaign targeting health care professionals to encourage them to seek support and treatment for mental and behavioral health concerns.
- Establish grants for health care providers and professional associations for employee education, peer-support programming, and mental and behavioral health treatment. Health care providers in current or former COVID-19 hotspots will be prioritized.
- Establish a comprehensive study on health care professionals' mental and behavioral health and burnout, including the impact of the COVID-19 pandemic on such professionals' health. ❖