



AHS News

A Publication of Arbour Health System

Arbour Hospital • Arbour-Fuller Hospital • Arbour-HRI Hospital • Pembroke Hospital • Westwood Lodge
Arbour Counseling Services • Arbour SeniorCare • Lowell Treatment Center • The Boston Center • The Quincy Center



Rachel Legend, new CEO of Arbour-Fuller Hospital

NEW CEO AT ARBOUR-FULLER HOSPITAL

Rachel Legend, MSW, LICSW, is Arbour-Fuller Hospital's new Chief Executive Officer.

Ms. Legend comes to AHS from Charter-CARE Health Partners in

Providence, RI where she was Director of Behavioral Health, responsible for two large urban psychiatric emergency

departments, outpatient clinical services as well as 110 inpatient psychiatric beds (geriatric, intensive treatment and med/psych units) across two hospitals. Prior to that, she was CharterCare's Manager of Centralized Access and Assessment, managing two large psychiatric emergency departments. She also held the position of Interim Executive Director and Program Director for Youth Pride, Inc. in Providence, RI.

In 2008, she received a national award, along with entertainer

K.D. Lang and former Speaker of the House Nancy Pelosi, from the Human Rights Campaign for her work with youth in California. More recently, she graduated from Leadership Rhode Island's year-long program for Rhode Island leaders and was recognized by Rhode Island College with the Annual Diversity Award.

Ms. Legend graduated Cum Laude from San Jose State University in California with a BS in Administration of Justice, and has a MSW from Rhode Island College.

REFERRER SATISFACTION SURVEY

In January 2016, Arbour Health System initiated a Referrer Satisfaction Survey program for its five hospitals. While AHS had a program some time ago that assessed referrer satisfaction through brief telephone surveys, the new process provides standardized surveying and benchmarking through a web-based application. Each hospital's community relations/business development representative sends out surveys no less than quarterly to recent inpatient referrers. A letter of invitation to participate in the survey is sent electronically or by mail. Referrers utilize codes that link the survey back to the facility and provide a level of security from automated responses. The day following a survey submittal, the CEO and community relations/business development staff receives a report which includes number of responses, aggregated question scores, and written responses. The reports also include benchmark statistics from other UHS behavioral health hospitals.

Survey questions include those on ease of admission process, timeliness of referrer being informed of the disposition of the referral, helpfulness of staff, care coordination overall, quality of patient care, and whether the hospital is their provider of choice. Scoring is on a one to five point scale from poor to excellent. There is an open-ended question for the referrer to provide the hospital staff with any other information that they want to provide.

Data is gathered and reviewed internally to identify opportunities for improvement and provides feedback on staff performance.

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AHS REPROCUREMENTS SUCCESSFUL

Recently, the space used by Lowell Treatment Center and The Quincy Center had to be reprocured following a Request For Response (RFR) that was issued by Massachusetts Department of Mental Health (DMH). Both Lowell Treatment Center and The Quincy Center have leased space for many years and there was an RFR issued by DMH in December of 2015 to reprocure space located at the H.C. Solomon Mental Health Center, Lowell, and Quincy Mental Health Center.

The RFR specified that the organization must use the space to

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QUICK RESPONSE AIDS LAWRENCE PATIENT

This past January 27, 2016, an adult male outpatient attending a group session at Arbour Counseling Services (ACS), Lawrence became physically ill during lunch. Everything after that happened very fast.

At first, no one realized he was choking on some food. The adult male in his 60s left his lunch table and approached staff member Jessica Soto, M.Ed., whom he knew well, in obvious distress. He did not indicate that he was choking, but was breathing heavily and was having difficulty standing. Immediately 911 was called as he was helped by several staff members to a prone position on the floor and rolled on his side. When he lost consciousness, Jessica started CPR.

Joseline Gonzalez, MS, LMHC, the director of Lawrence's Partial Hospitalization Program, says that everyone jumped into action, "Every one of the staff members did their part without hesitation." Some cleared the area, others went to reassure nervous members of the group that had been meeting at the time, Joseline called the patient's emergency contact and had the 911 operator on speaker, Maria Gaticales, MD, staff psychiatrist, was supervising the clinical response and both she and Angel Aponte, medical assistant, were assisting Jessica as she performed CPR. "I am very proud of Jessica's response. Of course we have plans in place to deal with emergency events like this, but when something actually happens, it is a true test of your team's preparedness."

Mike Gaudet, LICSW, Director of Quality Assurance, Corporate Compliance and Privacy Officer, Arbour Counseling Services, couldn't agree more. According to Mike, "Regulations require at least one person on duty at all times that is certified in CPR and other emergency procedures by the Red Cross, the American Heart Association, or a similar organization. Just about every month, there is a review of procedure on responding to emergencies. There are a series of

drills and one of them is on medical emergencies. Events like the one in Lawrence don't happen that often, but when they do, it shows how valuable our drills are. All our staff at all of our locations know exactly what needs to be done when faced with any one of a number of different types of emergencies."

It was only moments before the patient was able to expel the food to completely clear his trachea and quickly revived as the paramedics arrived. After the event, Ester Lan, M.Ed., debriefed the remaining outpatient group members as Joseline debriefed her staff.

The patient returned the next day, completely recovered and very appreciative. "He walked in with a big smile and said, 'I can't believe what happened and I'm so thankful to all of you. You saved my life!'" Joseline says, "I am very proud of my team!"

NEW DIRECTOR AT ACS, LOWELL

Jessica Shaw, LMHC, is the new director of Arbour Counseling Services, Lowell. She has a BA in Psychology from the University of Massachusetts and started at ACS, Lowell in 2007 as an intern through Salem State College where she received a MS in Counseling and Psychological Services in June of 2008. Jessica obtained her LMHC in 2010.

REFERRER SURVEY *From page 1*

Much of the feedback to date has been positive and referrer comments have praised intake department staff and hospital clinicians. Referrers are encouraged to participate in the survey as it is an important part of the organization's performance improvement effort and action taken on results will positively impact patient access and quality of care.

For more information on the Referrer Satisfaction Survey, please contact Judith Merel, Regional Director, Business Development at judy.merel@uhsinc.com.

SARAH QUINN RETIRES AFTER 31 YEARS

Sarah Quinn, PhD, Director of Arbour Counseling Services, Lowell, has retired after 31 years at the site.

Under her guidance, ACS, Lowell grew from billing 9,600 visits in 1984 to over 37,000 visits in 2015.



Sarah Quinn, retiring Director of ACS, Lowell and John Fletcher, CEO of Arbour Counseling Services

Among her many accomplishments, she is noted as having earned a PhD, being a Diplomate in Clinical Psychology, a Fellow of the Massachusetts Psychological Association, experienced as Adjunct Professor in Psychology undergraduate and graduate studies, a past Joint Appointment as Associate Scientist with the Psychology Department at Children's Hospital and Department of Psychiatry at Harvard Medical School.

Sarah's management style epitomized the "open door policy." Any time a staff member, whether administrative or clinical, had any type of problem they were welcome to talk it over with her. If Sarah did not have an immediate answer, she would research it and get back to the person.

Her open door policy applied to clients as well. There was a notice posted in the waiting area to "Stop in and talk" with any suggestions or concerns anytime her office door was open.

Sarah is highly respected and will be missed by colleagues and clients alike. Everyone at Arbour Health System wishes her the very best in her retirement!

HERE-FOR-YOU

Arbour Counseling Services is participating in an innovative program with Neighborhood Health Plan (NHP) and Beacon Health Options (Beacon). NHP and Beacon launched Here-for-You, which aims to reach up to 10,000 NHP members suffering with serious and persistent mental illness, specifically psychotic or bipolar disorders.

Here-for-You provides care coordinators in community mental health and outpatient centers where these patients receive most of their care. Integrated teams target a patient's most immediate and crucial needs, then customize a culturally and linguistically-appropriate treatment plan that

“Many of the patients that Beacon identified who were in the high utilizer categories were affiliated with one of the thirteen Arbour Counseling Services locations.”

Judy Merel

links medical, community-based and behavioral health services. Depending upon patient resource utilization, patients are placed in different tiers of care coordination intensity to enable them to best achieve a positive outcome.

The goal of Here-for-You is to improve health outcomes and reduce emergency room and acute hospital admissions. This program improves the communication and coordination between behavioral and physical health care providers to ensure patients care is better integrated as they transition between different kinds of care.

In addition to funding and training care coordinators who will be employed by the community-based clinics, NHP and Beacon also provide technical assistance including making its team of registered nurses and nurse practitioners available to ensure those with serious mental issues also receive the primary care they need.

Arbour Counseling Services was one of the programs NHP and Beacon reached out to when they began implementation. According to Judith Merel, Regional Director, Business Development, Arbour Health System, “Many of the patients that Beacon identified who were in the high utilizer categories were affiliated with one of the thirteen Arbour Counseling Services (ACS) locations. NHP and Beacon wanted to include ACS in the initial phases including for program development as we have experience in community outreach for care management. ACS staff utilizes a strengths-based, individualized and person-centered approach, and has experience in community-based care coordination.” Gina Desmond, Director, Community Services, ACS has led the “Here-for-You” effort including to assure staff training, communication with NHP/Beacon and patient engagement. ACS has enrolled 80 individuals who are current patients of ACS, Allston, or ACS, Woburn. Patients remain in the program

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ACS SCHOOL-BASED PROGRAMS THRIVING

Of children living in the United States, 13% to 20% experience a mental illness in a given year, and surveillance over the past two decades has shown the prevalence of these conditions to be increasing.¹

For about 35 years, Arbour Counseling Services has offered a clinical program of behavioral health services to children and adolescents in their school setting during school hours. Students may be referred for evaluation by their parents, teachers, guidance counselors, community-based support and emergency services or by the Massachusetts Department of Children and Families. That referral can be for any number of reasons, the child may be disruptive in class, have academic or developmental issues or trouble regulating their emotions.

Katie Goodman, LMHC, director of the ACS, Jamaica Plain School-based Program says, “Teachers may sense that something is going on but don’t always have the time or training to be able to understand and reach out to that individual child.”

Katie adds that the benefits extend beyond the classroom. “One of the most compelling benefits is the significant reach that school counseling has, which is often beyond their school life. In working with the child and that child’s family and teachers, their academic performance improves alongside their emotional, family and social life.”

“Schools appreciate that it is a complementary service,” says Maria Petersen, Director of the School-based Program at ACS, Woburn, “and can even serve as a wraparound service, communicating with family members, service providers, teachers and any involved agency, which always benefits the child.”

Counseling sessions are typically 45-50 minutes once a week and can extend through the summer. Sessions continue as long as the child is in need of the counseling. For example, Juliet Wheeler, MSW, LICSW, Director of the School-based Program at ACS, Lowell, usually counsels elementary school children, but will continue with the child, as needed, into middle school and even high school.

School-based Programs are offered by five ACS centers: ACS, Allston works with over 500 children in 15 schools; ACS, Jamaica Plain, 33 children in 7 schools; ACS Lowell, 260 children in 36 schools; ACS, Norwell (new), 25 children in 1 school; ACS, Woburn, 330 children in 23 schools.

Program components include: individual and group therapy, including specialized groups; on-going consultations with parents and school personnel; and clinical consultation to teachers, aides, school psychologists and guidance counselors. Psychological, neuropsychological and educational testing and evaluations are available as needed.

For more information visit:
arbourhealth.com/about/school-based-programs/

¹samhsa.gov/school-campus-health

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support to provide mental health services that supported the Department's specific goals for the property and specifically from bidders that would provide a complement of inpatient services, ambulatory services, crisis stabilization, respite care, or aftercare. In addition, the services provided by organization the must meet all state and federal licensing requirements and beds must be accredited by the Joint Commission and be CMS certified.

The written responses to DMH's RFRs were submitted in January for both locations. Lowell Treatment Center's response included a request for some additional space for training and education. The Quincy Center's submission included a request for new offices to

accommodate a partial hospitalization program (PHP). There are currently no PHPs in the greater Quincy area and this level of care represented a positive addition including to support referrals from neighboring organization South Shore Mental Health.

In being awarded the leases or "license to occupy," AHS secured both spaces for terms of up to five years. According to Judith Merel, Regional Director, Business Development, "The services at both locations were consistent with those identified by DMH as priority populations including adolescents and adults with serious and persistent mental illness and severe dysfunction. We look forward to continuing our positive relationship with DMH as well as with area agencies in both Lowell and Quincy on the delivery of inpatient, PHP and community-based services to meet the behavioral health needs of

individuals of all ages, enabling them to live, work and participate in their communities."

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until the goals of the care coordination plan have been reached or other transition of care criteria is met. According to Gina, "We are working with patients to assure compliance with treatment or assist with other needed social services. We want our patients to achieve goals at the lowest level of care possible. In addition, our skilled care coordinators are ensuring all medical providers work together so that all treatment, testing, and medications make sense for the individual. This new approach to health care could significantly improve the quality of life for those with the most need."

KUDOS FOR THE AHS INTAKE DEPARTMENT

AHS Intake Director, Noreen Gaspar, received the following message from a referring psychiatry emergency services manager.

"I wanted to tell you what my staff raised recently about the intake department at AHS, but I have known for years. Especially this past weekend, you helped out tremendously. Everyone who called us back was extremely helpful and professional.

"On days when we are totally hammered over here your staff always helps us out...everyone is always professional, calls back and lets us know who is on the wait list.

"It makes all of us here very happy. I wanted to let you know that."

PATIENT TESTIMONIALS

Excerpts from letters from former Arbour Health System patients.

"This program transformed me from a sacred, anxious person to a woman with more confidence and direction."

Westwood Lodge
Adult PHP Patient

"Everyone was stellar. They made me feel at home and safe. They were patient with me during my break-downs and panic attack. The last time I was here, my mental health coordinators were awesome teachers and supporters.

"This visit my coordinator was incredible. She took a lot of time talking to me privately, sitting with me when I had a crisis and helping me consider different options.

She patiently answered a deluge of questions and that was an incredibly generous gift and blessing. Because of her support and suggestions, I am able to test out different options for my continued care...mostly because of the skills I learned. Thank you all very much."

Pembroke Hospital
Adult and Adolescent Partial Hospitalization Programs

"Thank you for a wonderful experience! Every class was wonderful and educational. I came to the PHP after a series of traumatic events, and your DBT classes rebuilt my strength both inner and outer. I appreciate all of you! I know it is a team effort to help all of us, so from the bottom of my heart, thank you!"

Arbour-Fuller Hospital
Adult PHP Patient