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UVM Medical Center President Eileen Whalen to Retire in June

Dr. Stephen Leffler Will Serve as Interim President

UVM Medical Center President Eileen Whalen, MHA, RN, will retire in June after serving the organization for four years. Stephen Leffler, MD, will take on the role of interim president.

As president, Eileen has guided our organization with a focus on patient- and family-centered care. Under her leadership, the organization advanced key patient and employee initiatives including the building of the new mother baby unit, the construction of the Miller Building slated for completion in the coming months, establishment of the Emergency Medicine Residency and Acute Care Surgery programs, and innovative approaches to destigmatize and address the opioid crisis in partnership with community stakeholders. She has been a champion for efforts to address the social determinants of health through community investments in food security, housing, and transportation.

Eileen is also a nationally recognized leader in trauma systems. She successfully implemented a regional critical care transport system – both ground and air ambulance – to ensure patients across the region can transfer between health care facilities to get the care they need when they need it.

Stephen Leffler, MD is currently chief population health and quality officer for the University of Vermont Health Network, where he oversees the coordination of quality, patient safety and population health programs. Dr. Leffler will bring his passion for healthy communities to his work at UVM Medical Center. Prior to joining the UVM Health Network in his current role, Dr. Leffler was Chief Medical Officer for the UVM Medical Center. He is an emergency medicine physician who still works regularly in the UVM Medical Center emergency department.

“This announcement is bittersweet for me personally and professionally as I am incredibly proud to be part of the UVM Medical Center team working every day to care for the people of our community. After much reflection over the holidays with my husband, Bob, we determined that now was the right time for our family to begin this new chapter in our lives. I am grateful to each and every employee for their commitment and dedication to our patients and families, and I am grateful to the community for their support over the past several years.”

EILEEN WHALEN, MHA, RN
PRESIDENT, UVM MEDICAL CENTER

“It is an incredible honor to take on this role for the UVM Medical Center and I am humbled to be following Eileen and pledge to work tirelessly to support our employees as we care for our patients, families and communities. As Vermont’s academic medical center and a community hospital, we have a great responsibility to innovate, teach and research while staying true to our community roots.”

STEPHEN LEFFLER, MD
CHIEF POPULATION HEALTH AND QUALITY OFFICER
UVM HEALTH NETWORK

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John Brumsted, MD, CEO, UVM Medical Center, President and CEO, UVM Health Network, shared his thoughts on Eileen’s retirement: “I want to thank Eileen for her service to the UVM Medical Center, where she has guided the organization through many critical initiatives and led our work in the community to address some of our biggest health care challenges. Eileen has strengthened the organization and her efforts have improved care for patients, families and our communities both inside our hospital buildings and across the region. I wish her the very best in retirement.”

A Network Approach to Primary Care

A Network-wide effort to enhance our primary care services is underway, with a multi-level team addressing the myriad components of this essential element of the care we provide.

With a focus on the patient-centered medical home, the UVM Health Network Primary Care Council has been working on a number of fronts to develop the framework for a strategy and foundation that will ensure patients around the Network receive the care they need, as close to home as possible. The scope of this work includes developing:

- Guiding principles to anchor the primary care strategy for the network
- A primary care team-based model
- Guidelines for improving access, including TeleHealth options, an approach for managing inappropriate ED/Urgent Care volume, and a protocol for referrals to specialists
- A complete inventory and assessment of all Network primary care services
- Recruitment strategies
- An assessment of primary care workforce

“Our work is complex, robust, and long-term,” says Tom Peterson, MD. “I’m encouraged with the progress we’ve made so far and the steps we’ve taken to achieve our strategic vision. But there is much work ahead.”

That vision includes a comprehensive to-do list that will mean connecting a network of patient-centered medical homes for a highly reliable primary care foundation; a care delivery process founded on the principles of quality, standardization and reliability; full integration of primary care in the broader medical neighborhood; and an efficient and satisfying workflow for our providers and staff.

Work conducted and currently underway includes:

- A complete assessment of primary care space by geographic area to determine if we have the physical space for workforce changes
- Evaluation of what opportunities there are to add primary care sites where population density exists
- Evaluation of transportation challenges affecting access to care for patients
- Recruitment of Network provider positions
- Supporting EPIC roll-out and development and implementation of clinical pathways with specialty care across the Network.
- Establishing a model for primary care-based mental health care delivery
- Addiction care in the medical home

“And that’s just a fraction of the work underway,” says Dawn Godaire, RN. “We are working collaboratively on projects aimed at improving care, access, and efficiency— for our patients and our staff while recognizing all of the good work completed to date, across the network.”

Employee Discount

Spare Time (Bowling)
215 Lower Mountain View Drive
Colchester, VT 05446

One free game of bowling for up to 4 people in your party (must show ID badge). Valid Monday – Friday, 9 am – 5 pm.

For more details visit us on Facebook, or call Rick Hubbart at 802-655-2720 for more information.
Improving Care Delivery

A Conversation with Chris Dillon, Vice President, Integration and Strategy, about our Care Delivery Optimization Effort

Q: What is Care Delivery Optimization (CDO) and why are we doing it?

A: The goal of Care Delivery Optimization is to develop clinical programs that provide care strategically: keep our patients close to home when appropriate, support our clinicians in delivering high-quality care efficiently and sustainably, and, when patients need to move back and forth between institutions, doing so as seamlessly as possible from the patient, family, and clinical team perspectives.

Before CDO officially began, in 2016 we developed a network and regional stroke program intended to get appropriate care to our patients faster, wherever they presented throughout the region. We went through an extensive planning process that brought stroke providers and leaders from different institutions together to develop the program plan. High-level program strategy and ultimately a detailed financial and operational rollout plan were approved for implementation by the Network Leadership Council.

This started us thinking about how we could develop a streamlined version of the stroke process to support strategic clinical program planning and clinical integration across the board—a participatory and transparent process that reviews and optimizes current and new clinical programs across the UVM Health Network. The Care Delivery Optimization Committee, Chaired by Dr. Claude Deschamps, CEO of the UVM Medical Group and Vice Chaired by Dr. Steve Leffler, UVM Health Network Chief Population Health Officer, is comprised of senior clinical and operational leaders from across the network and includes members of our network communications team and an outstanding patient and family advisor. This group reviews and endorses clinical plans for ultimate approval by the Network Leadership Council (NLC). We have brought 8 projects through the CDO process thus far.

Q: What have been some challenges in the CDO process?

A: Few services operate in isolation. An elegant plan in one clinical service could have unintended consequences on another service. This requires our CDO process to be agile. In some cases we have brought services through the CDO process together to manage interdependencies and shared resource constraints. Transparency and communication will help us identify these overlaps early. At the same time, we recognize that the CDO process will be at least somewhat iterative. Previously endorsed plans may be re-reviewed when new information is available—that’s expected and we will work through these transparently and efficiently.

Q: What about key successes?

A: I think the process itself has been a success in that we have seen great buy-in, both from leadership and the folks who have participated in developing CDO plans. The CDO process has also kicked off a number of working groups that are connecting practitioners from around the network where we didn’t have that before. In orthopedic trauma, an interdisciplinary and inter-institutional team of 8 clinicians connect every other week to develop and refine protocols for orthopedic trauma care. For Mother-Baby CDO, we had a team of 25 people connecting every other week during the plan development process. This group will continue continued on page 5
to meet to develop plans around a number of special clinical situations in perinatal care. In general, the process is fostering a lot more communication and collaboration than we had before.

Q: Are we at the point where patients can see some of the improvements made possible by CDO?

A: We are in the process of implementing programs that we hope will have patient-facing impact soon. As a result of the Spine CDO process, we’re starting up a back health program at CVMC to help increase access to non-operative back pain services—spine care consultation, interventional pain services, specialized PT/OT, etc. We are working with primary care to streamline interactions with the back health service, treating patients in their medical home or in the spine clinic as appropriate. And UVM Medical Center spine surgeons also conduct on-site clinics at CVMC, so if patients do progress to needing surgical care, they are teed up to receive that care quickly. We are also in the early stages of developing something very similar for joint health. These initiatives really tie very closely into our population health strategy.

Q: It sounds like CDO is an approach that is here to stay.

A: It’s exciting work, it’s complex work, and it’s work that we need to do to support our patients, our communities and our providers, particularly in a population health environment.
Big Change Roundup

Join the Big Change Roundup!

The Orthopedics OSC department on Tilly Drive has been participating in the Big Change Roundup since it began. “We have buckets, a huge bake sale, everyone keeps jars at their stations. We had a pizza party for the group that raised the most,” says Marilyn Prevuznak, LPN. “Everyone is very generous.”

Marilyn has been integral in collecting and organizing all the donations from her department. She volunteered to do this because of her close connection to the cause. The first year of Big Change Roundup was right after her grandson died from heart problems. He had been in and out of the Children’s Hospital for years. Marilyn considers her work for Big Change Roundup a good way to honor his memory.

“The Big Change Roundup helps create a sense of community here at work and around Vermont,” Marilyn says. Everyone in her department gets really excited about raising money and she counts the amount they’ve raised every week to give them updates. When the Roundup ends, Marilyn goes to Walmart and brings the huge, heavy bag of donations. “I need a cart to bring it,” she says. Last year, the Orthopedics OSC department raised $1800 and they hope to top that this year.

You’re Invited – Join Big Change Roundup for Kids!

Lasso your posse and collect loot for our annual Big Change Roundup for Kids fundraiser benefiting the UVM Children’s Hospital. 100% of funds you raise helps support our kids. Whether spare change or dollars, every dime makes a difference!

Register now as an individual, create a team with your coworkers, friends and family, or join an existing team. It’s fast, easy and fun! Questions? Email the BCRU team.

Touring the Miller Building by Sydney Sloan

It’s one thing to look at the Miller Building “fun facts” and another to get a live, interactive tour of the new, innovative building.

This is exactly what I did on a Friday afternoon with a curious colleague of mine. I’m new to the medical center, only just experiencing my second full week in the bustling Marketing and Communications Department. My task: Go see the building! Look around! Take some pictures! Truth be told I had no idea I would be walking into what looks like an almost-functioning, inviting new destination for patients.

We started with an introduction from the effervescent tour organizer, Aimee Wilson. Tour go-ers get to use an interactive game to explore the tour and learn what we might miss by just walking through the building. The game draws attention to impressive features like the staff kitchen, team spaces, and family-experience spaces.

My favorite part of the tour, the feature that takes the cake, is seeing the ground-breaking technology utilized in the windows called “view glass.” Picture transitioning lenses, add a whole lot of satellite and rotation of the earth and sun science, and you’ve got view glass, a material that lightens and darkens depending on the position of the sun. UVM Medical Center will be the first hospital in America to use this glass in hopes of creating a comfortable, peaceful patient experience.

My advice: Stay tuned for opportunities to tour the new space yourself!

Want More Information?

Read the first issue of our Miller Building newsletter. Click here to watch a flyover video and visit our new intranet site.
AWARDS & RECOGNITION

VMS Honors Physicians

Four UVM Medical Center physicians have been honored by the Vermont Medical Society: Stephen Leffler, MD, Frank Ittleman, MD, Barbara Frankowski, MD, MPH, and Eliot Nelson, MD.

Dr. Leffler was named president of the 2,000-member Vermont Medical Society (VMS). A professor of surgery at the Larner College of Medicine and chief population health and quality officer for the UVM Health Network, Leffler is a board member for OneCare Vermont. In his role as president, he is responsible for leading the Society’s public policy efforts in Montpelier and Washington, D.C.

Dr. Ittleman was awarded the Distinguished Service Award—the highest award VMS can bestow upon one of its members—in recognition of the exceptional impact he has had on his patients and his valuable contribution to the science and art of medicine in Vermont.

Dr. Frankowski was awarded the Physician of the Year Award, which is granted annually to a Vermont physician who has demonstrated: outstanding performance in the quality of care given to his/her patients; skillful and compassionate patient care; and, dedication to the welfare of his/her patients in accordance with accepted principles of good medical practice. Dr. Frankowski was recognized for her exemplary service as a pediatrician, going far beyond the clinic walls into schools, homes and the communities of the children and families she serves.

Dr. Nelson was one of three recipients of a VMS Founders’ Award, which is presented to individuals who have demonstrated outstanding leadership, vision, and achievement in improving the health of Vermonters and all Americans. He and Governor Phil Scott and Senator Philip Baruth were recognized for excellent service to the people of Vermont in helping advance landmark gun violence prevention legislation in Vermont.

Stephen Berns, MD, Named Fellow of the American Academy of Hospice and Palliative Medicine

Stephen H. Berns, MD, of Burlington, Vermont, recently earned the designation Fellow of the American Academy of Hospice and Palliative Medicine. The Academy is the professional organization for physicians who care for patients with serious illness. Advancement to fellowship status within the Academy honors dedication to and scholarship in the field of the hospice and palliative medicine.

The Fellow of the American Academy of Hospice and Palliative Medicine (FAAHPM) status is the highest honor that can be bestowed upon a physician member.

Interested in Learning How to Stop the Bleed?

Trainings continue in the coming months, in Davis Auditorium:

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RSVP to bleedingcontrol@uvmhealth.org.
Click here to learn more.
Michelle Lemoine, LPN, Receives Academic Care Award

Michelle Lemoine, LPN, Colchester Family Medicine, has received the Academic Care Award. She was recognized by her peers for her exemplary management of the practice’s immunization program, her adherence to Transforming Primary Care workflows, and her work in exploring new pilots. Congratulations to Michelle!

Bruce Leavitt, MD, Honored by Undergraduate Alma Mater

Congratulations to Bruce Leavitt, MD, who has been honored by his alma mater, the University of Maine, with the Bernard Lown Humanitarian Award. Dr. Leavitt has traveled to Rwanda, Nigeria, Sri Lanka, Panama, Russia and China to perform heart surgeries as part of Team Heart Cardiac Surgery Mission, Doctors Without Borders and other humanitarian aid organizations. A Waterville native, Dr. Leavitt graduated from the University of Maine in 1977.

Andre Cerny Receives Good Catch Award

Andre Cerny, second from right, receives his Good Catch Award.

Andre was working on implementation of the Vendor Neutral Archive (VNA), a network-wide system that initially houses all Radiology and Cardiology patient images from across the network. Andre realized the vendor’s automated installation process was writing service account credentials in plain text to a log file - which would potentially open a major security vulnerability to the VNA system and private health information stored in the system. Andre reported this issue, and as a result, installs were halted and the vendor is developing a fix so the account credentials are not written to a plain text log file. Had this not been caught, we would have proceeded with opening up this security vulnerability on numerous servers across our network. Good Catch, Andre!

Please Give to the United Way!

There's still time to give! We ask you to support your communities through the many organizations made possible by the United Way.

The United Way improves the health of our community in countless ways, providing housing for those who struggle to find a safe place to live; increasing access to healthy foods; and enhancing the supportive services that can mean something as simple as getting a ride to work.

Please consider supporting the United Way. Whatever you can afford to give matters—even a dollar a week makes a difference.

For more information, visit our intranet page.