Demystifying Appropriate Management and the Regulatory Requirements -
A primer for cross-continuum coordination

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<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Presenter/Details</th>
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<tbody>
<tr>
<td>9:00–9:15am</td>
<td>Welcome &amp; Opening Remarks</td>
<td>Stephanie Baker, MHA is a Program Coordinator for the New England Quality Innovation Network - Quality Improvement Organization (New England QIN-QIO) contract at Healthcentric Advisors. Her work is focused on improving care coordination and reducing unnecessary hospital utilization throughout Massachusetts. Ms. Baker assists providers with root cause analysis, intervention selection, measurement strategies and analysis. She also supports the NE QIN QIO Patient Family Advisory Council in Massachusetts, and is a Stanford Diabetes Self-Management Education (DSME) Lead Trainer. Ms. Baker received her Masters of Science in Health Administration from Regis College and has spent her career in healthcare quality improvement.</td>
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<td>9:15–9:55am</td>
<td>Everything you’ve always wanted to know about Dementia and Delirium but were afraid to ask</td>
<td>Alejandro Mendoza, MD did his internship, residency, fellowships and Chief Residency at Harvard Medical School. He is board certified by the American Board of Psychiatry and Neurology with subspecialty board certifications in Addiction Psychiatry, Geriatric Psychiatry and Psychosomatic Medicine. He is Chief of Psychiatry at the BIDPlymouth, BIDMilton and South Shore Hospital. He is Assistant Clinical Professor of Psychiatry at Tufts University Medical School. His areas of interest include Geriatric Psychiatry, Neuropsychiatry, Neuroimaging, General Hospital Psychiatry, Psycho Oncology and Psychiatry in Primary Care.</td>
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<td>9:55–10:25am</td>
<td>The Evaluation of an Elderly Patient with a Change in Mental Status</td>
<td>Sherrie Hughes, MSN, APRN-BC has been a geriatric nurse practitioner for 25+ years. She spent ten years in the primary care setting, and then returned to a hospital environment to be a geriatric nurse practitioner. Sherrie has been working in the behavioral health unit, where she has worked for the past 9 years, with a 3 year break, working as a community health nurse for the hospital. Her years of working as a geriatric nurse practitioner highlight her vast knowledge and expertise in caring for the whole patient. Sherrie is more than a valued interdisciplinary member of the Senior Behavioral Health Center, but an extraordinary clinician to the hospital. In her role on the Senior Behavioral Health Unit, she oversees all the medical needs and care of their patients. Beth Israel Deaconess Hospital Plymouth is lucky to have her as part of their team.</td>
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<td>10:25–10:40am</td>
<td>Break</td>
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<td>10:40–11:20am</td>
<td>Non-pharmacologic Management of Difficult Behaviors of Dementia: A Primer</td>
<td>Stefan Gravenstein, MD, MPH, AGSF, CMD is Clinical Director of Quality Improvement at Healthcentric Advisors; Professor of Medicine and Health Services Policy and Practice at the Warren Alpert Medical School of Brown University; Adjunct Professor of Medicine at Case Western Reserve University; and Associate Director of the VA Providence Center Of INnovation. Dr. Gravenstein is a career academic geriatrician who researches clinical care and aging. He has ~20 years’ experience as a nursing home medical director, ~15 years as geriatrics academic program director and director of a memory assessment clinic, and ~10 years as hospice medical director. He received his Medical Degree from the Ohio State University, Columbus, OH; his Master’s in Public Health from Old Dominion University, Norfolk, VA, and completed medical residency and geriatrics fellowship at the University of Wisconsin-Madison.</td>
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1. Explain the various types of dementias.
2. Recognize the stages of dementia.
3. Describe the course of dementia.
4. Explain delirium and its profound impact on the elderly.
5. Describe the course of delirium.

1. Recognize and learn how to assess the mental status of an elderly patient
2. Discuss how to acquire collateral information
3. Illustrate how to check the vital signs

1. Explain why non-pharmacologic approaches usually come first
2. Classify difficult behaviors
3. Identify patient level factors
4. Identify facility level factors
5. Illustrate how to implement patient and facility-level interventions
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<thead>
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<th>Event</th>
<th>Description</th>
</tr>
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| 11:20-11:50pm| **Breaking Down Barriers for Dementia Care in the Nursing Home Setting** | - Define the Nursing Home Quality Measures  
- Explain the ins and outs of the CMS regulations around antipsychotic medications  
- Outline the gaps to communication among admission to the Nursing Home  
Sarah Dereniuk-Dudley, MHA, NHA is a Senior Program Administrator at Healthcentric Advisors and currently leads a multi-disciplinary team providing education and technical assistance to nursing homes throughout New England as part of the New England Quality Improvement Network Quality Improvement Organization’s (NE QIN-QIO) Nursing Home Quality Care Collaborative (NE-NHQCC). Ms. Dudley’s work focuses on quality improvement methodology, staff stability, leadership, and improving satisfaction, process and outcome measures. Previously, Ms. Dudley worked as a Nursing Home Administrator in Southern California, overseeing the daily operations of a 124-bed, independently owned nursing home specializing in short term post-operative skilled nursing and rehabilitation. She has a BA in Communications from Rhode Island College and MHA from Salve Regina University. |
| 11:50-12:05pm| **Break - Grab Lunch**                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 12:05-12:50pm| **Lunch & Learn: Panel Discussion - Pharmacologic Interventions**     | Alfred Baum, MD, CMD has practiced in Plymouth, Massachusetts since 1982 as an internist, geriatrician and a certified medical director in post-acute and long-term care. He is currently the medical director of the Plymouth Harborside Healthcare facility (previously known as Golden Living Center of Plymouth).  
Pedro Bonilla, MD graduated from Medical School at the University of Zaragoza in 1998 and moved to the US in 1999 to pursue training in Family Medicine, later completing a fellowship in Sport Medicine. In 2002 he entered residency at the University of Wisconsin’s Family Practice Appleton program and transferred to Harvard South Shore Psychiatry Program finishing in 2007. Dr. Bonilla was the Chief Resident at the Consultation/Liaison service at the West Roxbury VA. He worked for 8 years as a psychiatrist at Cambridge Health Alliance primarily integration Mental Health Services in Primary Care Centers in Cambridge and Somerville. Dr. Bonilla joined Beth Israel Deaconess Hospital Plymouth in 2015 through the CHART grant, working to integrate Mental Health into Primary Care and into the hospital’s Emergency Department.  
Eve Masiello, LICSW has been a clinical social worker for the past 35+ years, specializing since 1988, in treating the geriatric patient. She was the Director of the Senior Behavioral Unit at Good Samaritan Medical Center in Brockton for seven years, before joining the team at Beth Israel Deaconess Hospital Plymouth, formerly known as Jordan Hospital to open a geriatric behavioral unit. Nine years ago she joined Dr. Mendoza in starting this in-patient program at BID Plymouth where she continues to work as the Director of the Behavioral unit. In her role, she oversees all compliance, and regulatory standards, and best practices that enhance the care of their patients.  
**Panelists:**  
Alfred M. Baum, MD  
Pedro Bonilla, MD  
Stefan Gravenstein, MD, MPH, CMD  
Sherrie Hughes, MSN, APRN-BC  
Alejandro Y. Mendoza, MD  
Eve Masiello, LICSW  
To discuss current pharmacological interventions in an open forum encouraging questions for audience participants. As well as discussing best methods for reaching prescribing physician to discuss appropriate treatment for the patient. |
| 12:50-1:00pm | **Closing and Call to Action**                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

**Continuing Education Credits**

This continuing nursing education activity was approved by the Northeast Multistate Division, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation

The Connecticut Pharmacists Association is accredited by the Accreditation Council of Pharmacy Education as providers of continuing pharmacy education. Pharmacists in attendance who complete an evaluation can receive up to 3 contact hour of credit.

Beth Israel Deaconess Hospital - Plymouth is accredited by the Massachusetts Medical Society to provide continuing medical education for physicians. Beth Israel Deaconess Hospital - Plymouth designates this live activity for a maximum of 4 AMA PRA Category 1 Credit(s)™. Physicians should claim only credit commensurate with the extent of their participation in the activity. This program meets the Board of Registration in Medicine's criteria for 4 hours of Risk Management Study.

This material was prepared by the New England Quality Innovation Network-Quality Improvement Organization (QIN-QIO), the Medicare Quality Improvement Organization for New England, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. CMSMAC22017101184.