

THE **Inside** Scoop

Summer 2016



Decisions, Decisions

We make decisions every day, big and small. Some are clearly yes or no choices – will we get up in the morning, will we have breakfast, will we come to work? Will we open our doors to patients, will we turn on our computers, will we greet our coworkers with a smile?

Other decisions are more complex – like how best to attain our objectives, build our own and others' morale, and how to measure success. How best to grow our organization has been a subject of deep debate for all of our 35 years. Whether to grow, however, is no longer the subject of discussion. Rather, it is how best to manage our continued growth. What guides us to decide as we do?

We make our choices within a system of values, be they personal, corporate, or both. As an employer, our value system is what drives strategic, operational and financial decisions. Staffing is a key example. How do we decide to fill a position, or create one? Do we absolutely need another set of hands to get the job done and handle growth? If so, do we have the expertise in-house, is it a

new opportunity for one of our own, can we reliably fill the hole that's left behind? Do we have resident experts who can teach and mentor those who have the building blocks, but need more training to become our next experts, managers, and leaders? Or must we look outside for a particular set of skills and experience to fulfill our needs?

Decisions, decisions. Do we make it, build it, learn it ourselves...or do we buy the expertise? We face these kinds of make-or-buy decisions frequently, both at home and at work. Do we refinish the living room floor ourselves, or have a professional do it – with an expectation that it will be done quickly and expertly? Do we hire new managers who have a proven track record, who should be able to hit the ground running at a time when our growth demands it? There is a cost to hiring experienced professionals, of course.

There are also costs to DIY (do it yourself) efforts. Do we spend hours on YouTube, and absorb the cost of renting or buying equipment and supplies? Are we willing to spend

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Opening the Door to Our Magic Portal



OK, so calling our Patient Portal “magic” might be a bit of a stretch. But from a patient’s perspective, it’s an amazing opportunity to get educated about her own health and maintain a personal connection to her medical provider and team. Our patients are trying it, and liking it.

Here’s what’s hooking them: getting lab results and visit summaries; being able to send an email message and avoid drawn-out telephone tag; paying bills or co-pays online; rescheduling a quick appointment, getting meds re-filled, and checking on scheduled appointment times. This is what our Patient Portal is about. It’s about opening a door to improved and engaged patient care. It’s part of a movement that begs patients to get educated, participate in and take responsibility for their health – and gives them the tools to do it.

It’s fair to say we’re falling down on the job a little bit. Just 20 of our some 150 providers account for more than 40% of our patients registered on the Portal (a shout out to the top five: Drs. Borgos, Parker, Adams, Bergin, and Lynn Keil, PA). Four years ago, we had about 8,500 patients registered; today we have more than 32,000. It’s progress, but still just a fraction of our total patient population, barely 30%. Why is that? Best practices call for a 70% adoption rate. There’s a very good reason for walking them through that magic portal door: it helps engage patients in their own care. And when a patient is invested in his/her own health, pretty much everyone wins. What’s holding us back?

Here’s the other reality. We are moving rapidly from a test environment to the reality phase of value-based care and compensation. The goals are clear: improve quality, ensure access, and contain costs – with particular emphasis on preventive care and enhanced management of chronic conditions. The electronic patient record provides the tools for measuring; the patient portal can be the tool for building today’s improved working relationship between patients and their primary care team.

Encouraging patients to take more ownership of their own care is fundamental. Studies show that when patients have access to their health information and the decisions their providers are making, they inevitably feel more like partners in care rather than simply recipients of care. Reviewing summaries and results and having the opportunity to think about what was covered at the patient visit, in an unpressured manner (at home), increases understanding and participation, and can provide a starting place for online research.

Each of us has a role in encouraging patients to register for the Hudson Headwaters Patient Portal. Make no mistake, our providers must take the lead. They are the trusted source, and patients want to hear it from them. But every one of us can help reinforce the idea and benefits of signing up for a patient portal account at multiple stops along the patient’s journey through our health centers.

Knowledge is power. Our Portal is a key. Unlock the door. Let them in.

As the float Medical Assistant in my center, I’m often the one to “sell” the portal to new and established patients. Almost every patient I talk to signs up on the spot when they hear from a real person about it. Being able to see test results is actually not the biggest draw for most patients; it’s the way it solves THEIR problems... The accuracy of information in a patient EMR is reviewed each time s/he visits. Catching errors is a regular part of the job, and it seems to be working well so far. I think once patients use the portal a few times and find that it saves time and effort, they’ll come to use it more.

– (from: Debating Role of Patient Portal in Health Data Integration, EHRIntelligence)

Sketches

Learn more about your co-workers:



Candice M. Ciolac, MD

Lives in Plattsburgh, is a family practice physician, and has been with Hudson Headwaters' North Country Family Health for a couple of months.

Education/work background?

I graduated from University of Oklahoma-Norman with a degree in Communication/Spanish. I completed my medical degree from St. Luke's University in Belize, with clinicals in Saginaw, Michigan. This was followed by my Family Medicine residency at University of Oklahoma-Tulsa, and as a faculty member there for almost three years. And now I'm here with Hudson Headwaters.

Hobbies?

Playing outside with my kids and going to lots of sports activities; either going to the movies or watching them at home; travel whenever I can, learning new arts and crafts with my daughter, finding new Romanian recipes to try for my husband and his family (to see if it's anywhere near the real-deal).

Favorite vacation?

Backpacking through Europe after I studied abroad a semester in Valencia, Spain in 2001.

What section of newspaper first?

Newsfeed on my iPhone.

Favorite dinner?

Anything my husband makes FOR me! (He is really good at outdoor grilling.)

Favorite book/author?

Robert Jordan's *Wheel of Time* series.

One CD...what would it be?

No idea???

What might surprise people about you?

I used to be a cheerleader...and have taught gymnastics/coached cheerleading at my daughter's summer camp in Oklahoma.

What are you most proud of in your work with Hudson Headwaters?

So far, being able to work with some really great, really smart people. Everyone seems happy to be doing their job. A lot of positive energy. I am proud I get to be a part of it. Also, personally, I am proud to bring a new area of interest - namely women's health care - to the practice at NCFH. I look forward to being able to offer more services locally before the patient will need to be referred for advanced care.



Jennifer K. Ligon

Lives in Warrensburg and is on the front office team at the Warrensburg Health Center, and has been with Hudson Headwaters for 20 years. Education/work background?

Education/work background?

High school, some college. I have worked in construction, as a cashier, bookkeeper, night auditor, Town Historian for Thurman.

Hobbies?

Crafts, sitting in the sun, learning something new - anything new, vacations with family.

Favorite vacation?

Cruise to the Bahamas in 1975 -- five days, four nights of sun and fun

What section of newspaper first?

Obits.

Favorite dinner?

Anything someone else cooks.

Favorite book/author?

Clive Cussler.

One CD...what would it be?

My mother's piano playing.

What might surprise people about you?

That I can actually smile.

What are you most proud of in your work with Hudson Headwaters?

Lasting so long...though really, it has been most satisfying in facilitating and assisting patients with their requests within the scope of Hudson Headwaters.



Keith Lotich

Lives in Glens Falls, has been with Hudson Headwaters for about a year and a half. He is on the Information Systems (IS) team, mostly providing desktop support.

Education/work background?

I went to Chaffey College in Rancho Cucamonga, CA. Before coming to Hudson Headwaters, I was at St. Clare's/ Ellis Hospital, Schenectady NY and before that, the Jet Propulsion Laboratory in Pasadena, CA.

Hobbies?

Golf, woodworking and karate.

Favorite vacation?

Cape Cod, MA, in 2013.

What section of newspaper first?

Page one.

Favorite dinner?

Kibbeh with Saareyyah.

Favorite book/author?

Tom Clancy.

One CD...what would it be?

The Eagles.

What might surprise people about you?

I am a native Californian who prefers living in the Northeast.

What are you most proud of in your work with Hudson Headwaters?

Helping others do the work they do.



5K EVENT SCHEDULED

The 12th annual Care for Kids 5K Run and Fitness Walk will be held on Sunday, July 31 at 9am. Online registration is available at Finishright.com. Hard copy entry forms can be downloaded from the Hudson Headwaters website (hhhn.org). The entry fee is \$25 per participant if registered in advance, and \$30 the day of the event. Proceeds from the event benefit our pediatric program.



Staff who have joined us since April (or rejoined).

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|-------------------------------------|--|
| Traci Ash (FrOff-NCOG) | Elizabeth Maher, MD (-UrgCare-WHC) |
| Jennifer Bardin (PatSuppServ-CR) | Alena McArthur (FrOff-WMHS1) |
| Vicky Beury (FrOff-MFH) | Christie McAvey, RN (Lead-WMHS2) |
| Melissa Bolster, LPN (NCFH) | Stacey Merlow (FrOff-MFH) |
| David Burgess (SrAthenaAnlyst-CR) | Jane Morrissey (ClerkshipCoord-CR) |
| Erin Carey (ApptSchedCoord-CR) | Caitlin Palmer (CHCANYSIntern-333Glen) |
| Candice Ciolac, MD (FP, NCFH) | Karen Potter, RN (TeleHlth-QFH) |
| Kevin Dougrey (PerfAnlyst-333 Glen) | Valerie Ramsey Cummins, NP (WMHS2) |
| Deborah Dufore (Phleb-WMHS2) | Alexa Savoia, LPN (HCBS) |
| Katrina Fish (DocSpec-CR) | Brittany Sexton (ResourceAdvoc-333 Glen) |
| Brandi Flint (FrOff-WMHS2) | Heather Shouse (ClaimsAnlyst-CR) |
| Felicia Heber, NP (FEKHC) | Stacy Smith (AssistDirAdmSvcs-CR) |
| Wendy Herrold (FrOff-WMHS2) | Amy Tucker (Phleb-NCFH) |
| Sarah Humiston (SlidFeeProg-CR) | Sara Walkup, RN (TeleHealth-NCOG) |
| Rachel Joiner (RadTech-HCBS) | Amy Zuccaro (Intern-333 Glen) |
| Patricia Lefebvre (PayCoord-CR) | |

Anniversary Celebrations

June – August 2016



5 Years:

- Claire Anctil (FrOff-NCFH)
- Doriene Belden (DentAsst-TuckerBldg)
- Angela Brooks (Phleb-WHC)
- Patrick Carson (BudgAn-CR)
- Joanne Cooper, PA (GFH)
- Christina Crawford (340BPharm-333Glen)
- Donna DeLoria (FrOff-SLHC)
- Shannon Evellis, PA (CHHC)
- Lindsay Genier, LPN (MHC)
- Bonnie Jenkins (MgrPatSuppServ-CR)
- Lori Killon, PA (HCBS)
- Amanda Lane (FrOff-NCOG)
- Leslie Letourneau, LPN (NCFH)
- Joan Phelps (FrOff-FEKHC)
- Sue Ellen Roberts, LPN (ScriptRN-HCBS)
- Danushan Sooriabalan, MD (WMHS-2)
- Patricia Stevenson, PA (WMHS-2)
- Courtney Stewart, NP (GFH)
- Jennifer Tucci (FrOff-WHC)

10 Years:

- Michelle Aubin (DentOffMgr-TuckerBldg)
- Michelle Barcomb (DentHyg-TuckerBldg)
- Robert Cross, PA (GFH)
- Christina Kay, NP (WHC)

15 Years:

- PaulRizzo, DDS (TuckerBldg)
- Cathleen Williams (SrAcct-CR)

20 Years:

- Jennifer Ligon (FrOff-WHC)
- Suzanne Rayeski, DO (GFH)

25 Years:

- Robert Beaty, MD (HCBS)
- Irene Flatau, MD (Peds-QFH/MFH)
- Karen Hanley (Comm/Market-CR)
- David Paska, PA (WHC)

30 Years:

- Patricia Hughes, RN (CR)

35 Years:

- Daniel Larson, MD (CMO-CR/CHHC)
- Daniel Way, MD (ILHC/GFH)

New Staff, New Roles, New Titles



Clockwise from top left: Kimberly Barron (Bus-DevMgr-340BPharm-333Glen); Jackie Harrington (ComplianceMgr-CR); Felicia Heber, NP (FEKHC/MFH); Jessica King, DO (FP-NCFH) (Aug); James (Rob) McKenna, PA (UC-HCBS/WHC); Mark Quaresima, MD (FP-MFH/GFH) (Aug); Stacy Smith (AsstDirAdmServ-CR).

Not Pictured: Erik Istre, MD (Neuro/Psych) (Aug); Robert Orr, III, MD (FP-THC) (Aug); John Quaresima, MD (FP-WMHS2/GFH) (Aug); Holly Spire, LCSW (WHC)

SAVE THE DATE!
 Saturday, December 3, 2016
 Hudson Headwaters'
 HOPPIN' HOLIDAY PARTY
 at The Sagamore Resort



Reaping the Benefits of a Patient Portal

Despite some initial concern, we've found that patients use the portal service appropriately. Each physician receives an average of four new e-mails a day, and is able to respond quickly, while saving each conversation to the patient's chart. Our patients report greater satisfaction from writing messages directly to their physicians and receiving direct responses back. Since launching [our] Patient Portal, we have experienced other benefits in addition to decreased call volume and increased patient satisfaction. These include:

- **Better communication.** We have discovered that patients are more likely to provide necessary details in a written message than on a voicemail. Because they can be more thorough on the first interaction, patients now often have all of their concerns addressed in one exchange. Our physicians appreciate this increased level of detail because it allows them to construct better responses without excessive back-and-forth messages.
- **Greater efficiency.** For prescription refills, patients provide necessary information on the portal's medication refill page. In the past, patients often would forget information during a voicemail, requiring a call back. With the portal, the refill request is processed on the first e-mail message. If it is rejected, we can provide a complete explanation without having to rely on the pharmacist to relay the message.
- **Improved care.** While efficiency was the primary motivation to begin using a patient portal, it is the improvement in care that has made it a success. Our physicians have found that the portal allows them to be more engaged with their patients, so it is easy to check up on them, receive updates on any new changes, and conduct proactive outreach.

The demands on practices to provide better care coordination and chronic disease management have never been greater. Our experience shows how a simple, web-based patient portal can eliminate hours of non-productive time per week — ultimately helping us improve communication and provide better patient care.

Excerpt from "Good call: Patient Portal Improves Efficiency, Morale and Patient Care"
Dan Nelson, Desert Ridge Family Physicians, Phoenix, AZ



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our limited free time (and money) and risk a "so-so" result? Or do we have confidence in our abilities, and a handy, experienced neighbor who can lend a hand to assure success? At work, will we fail to meet our commitments, or be unable to keep pace with growth if we take time from our fast-paced schedules to teach and mentor staff who may ultimately not be up to the task? Or, do we build a structure to identify and teach those who may have the spark and talent, but who need guidance and training...creating a virtual pipeline of increasingly skilled staff?

We do both. We'll always have some jobs that require outside expertise. But we're also aware of how important

it has become, for an organization of our size, to increase our commitment to staff and management training (more on that coming soon!). Too, we're investing in future of our medical team, by developing a rural medicine teaching program with our partners in the North Country.

Our success over 35 years is not a result of a narrow-minded, one-size-fits-all approach to decision-making. Our success springs from continued efforts to encourage tolerance and creativity in the choices we make. Along with a bit of luck and serendipity, it comes from being nimble in the face of unexpected opportunity.

What we can count on as we approach our 35th anniversary is this: our continued success will be a result of decision-making that flows directly from the heart of our fundamental purpose – to provide the best care, and access to that care, for everyone in our communities.

Creative Outlets

Some of us hike, camp, or paddle. Others quilt, sew, or weave. Some run, bike, and swim – for miles! Still others grow grapes, build boats, or tame bees.

We do have lives outside of work. And while work is important, balancing it with other interests is key to good health – mental and otherwise.

Here's a small sampling of what some of us do when we're not here. What's your outlet?
Send photos and a couple of sentences, please! (to: hahn@hahn.org)



Caroline Dvorak and Janet O'Neil (both athena Support Analysts) took the time to teach a young group of home schoolers how to weave on little "inkle" looms at the Adirondack Folk School in Lake Luzerne. Caroline teaches monthly (adult) weaving classes on bigger floor looms at AFS.



Raising bees can be a fun and rewarding adventure. Just ask Tucker Slingerland, MD, who was partly inspired by master beekeeper Dave Paska, PA-C. Dave gave him one of his first hives. Dr. Slingerland started with two hives, and now, eight years later, manages 14. "Keeping bees, extracting honey and using the wax for candles is a great family activity."



Riding and raising funds for the American Diabetes Association's Tour de Cure is just one of Todd Eicher's (Finance) extracurricular activities. He's also a triathlete—a successful Ironman Triathlete--(swimming, cycling, running events) and serves as treasurer of the local Adirondack Triathlon Club. And Todd participates on the Queensbury Recreation Commission.