

THE COLLABORATIVE

ISSUE 2: JULY 2024

A St. Luke's GME Quality Improvement Newsletter



Building Community Health Infrastructure to Promote Health Equity and Address Identified Community Needs

(Presented by Rajika Reed, PhD, MPH, MEd, Senior Vice President, St. Luke's Community Health Department, to Collaborative QI Group, May 8, 2024)

St. Luke's Community Health Department is guided by its mission, "To create pathways for measurable health equity outcomes through advocacy, outcomes and navigation of resources for underserved communities and partners," explained Dr. Reed.

The Department was established more than 25 years ago with support from network President & CEO Rick Anderson and the Board of Trustees. Today, under Dr. Reed's leadership, the department forges long-term, trust-based relationships and designs community-based strategies with other like-minded individuals, community groups and business partners to pursue its mission.

"Our St. Luke's culture and values dictate that our Network must be deeply invested in and engaged with our community, from downtown neighborhoods to rural settings – and St. Luke's has been widely recognized for our initiatives."

According to the Lown Institute, a national think tank, St. Luke's ranks #1 in PA for charitable giving in its communities (for more information, see the May 10, 2024 front-page story in the Morning Call). Also, the Community Health Department received a 2024 Achievement Award from the Hospitals and Health Systems Associations of Pennsylvania for its initiatives for improving food access and addressing health inequities in underserved communities.

"We have boots on the ground serving our 15 campuses, associated facilities and their communities," added Dr. Reed. Community Health staff, St. Luke's leadership and partners participate in planning and implementing programs, which address the social determinants of health (SDOH), including access medical care, healthy food, safe and affordable housing and transportation, jobs and education.

In FY23, St. Luke's invested \$408 million in community benefit aimed at creating communities that are healthier, safer, health literate, economically viable and able to access care. In addition to the network, funding comes from state and federal programs and grants, businesses, community partners and generous donations from individuals.

The network's efforts target needs that are identified in the triennial Community Health Needs Assessments (CHNA) as required by the Patient Protection and Affordable Care Act.

The current areas of focus, based on the 2022 CHNA, include:

-Access to care, including workforce development, affordable housing and transportation;

-Chronic disease prevention, addressing food insecurity, wellness education and the promotion of physical exercise

-Mental and behavioral health services, including prevention, treatment and recovery programs for substance use disorders, including opioid use

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Building Community *Continued from p. 1*

“At St. Luke’s, we meet our community where they are,” said Dr. Reed.

“As trusted partners, we work together synergistically with our community, partners, businesses and network colleagues.”

A few of these ongoing initiatives include:

- Providing free summer meals to students and their families in economically challenged areas at Sacred Heart Hospital, Allentown, and Quakertown Free Fall Action Park.
- Partnering to conduct a free weekly Family Wash Day on Linden at a laundromat in Allentown, where the homeless and underserved can also receive free medical care from nurses, a physician medical students and residents on the St. Luke’s Medical Van.
- Funding safe Mindfulness Rooms in elementary schools for students who need calming time and assistance to enhance their learning as part of the network’s 150th anniversary.
- Operating dental and medical vans, in cooperation with Star Community Health, that provide often-neglected oral health care and medical care to at-risk school students and adults in disadvantaged urban and rural communities.
- Establishing and maintaining food pantries, where fresh, nutritious foods are distributed to citizens residing in food-insecure areas.
- Providing cultural and linguistic workforce development to reduce unemployment and teach useful vocational skills.

Currently, St. Luke’s Community Health and its partners are conducting CHNA surveys, holding meetings and leading interviews in the communities they serve to determine the areas of priority for the years 2025-2028. After analyzing the data, the findings and next steps will be shared and discussed in community forums throughout the network in the Fall of 2025, to obtain input, support and participation of these individuals, groups and communities.

“Our goal is to make the community feel like the CHNA is theirs,” said Dr. Reed, “so together, we can bridge the gap to better health.”

To learn more about the Community Health Needs Assessments, visit <https://www.slnh.org/community-health/community-health-needs-assessment>.

To learn more, please email community.health@sluhn.org or call 484-526-2100.



Message from the Chief Graduate Medical Education Officer & DIO **James P. Orlando, Ed.D.**

Where you train matters! At St. Luke’s, we know that choosing a post-graduate residency or fellowship is an important decision that will impact not just the next few years, but the rest of your life. The training you receive and the relationships you build are the foundation for your career trajectory. For example, based on research conducted by the Dartmouth Atlas Project, “Physicians who train at institutions with better, more patient-centered and efficient care will be better prepared to lead the transformation of health care when they are in practice.” The recognition from IBM Watson’s 100 Top Hospitals Award underscores St. Luke’s excellence in several key areas, demonstrating its dedication to providing exceptional healthcare and an outstanding clinical learning environment.

To help support the Network’s dedication to excellence, Graduate Medical Education (GME) established quality improvement expectations that include the following: 1) GME multi-year programs should submit one QI project per year & meet individual program QI expectations; and 2) residents should complete one QI project prior to graduation. With the support of program leadership, these expectations are being met, and projects are housed within the GME QI repository upon graduation with increasing QI project involvement as residency and fellowship programs have expanded.

The growth in the number of accredited GME programs and the onboarding of new residents and fellows reflect St. Luke’s commitment to nurturing the next generation of healthcare professionals. Moreover, the emphasis on QI initiatives ensures that residents and fellows are equipped with needed skills to drive positive change in healthcare delivery.

St. Luke’s sponsors over 50 accredited GME programs for over 500 residents and fellows in 2024 compared to 20 programs for 180 residents and fellows in 2017. St. Luke’s will onboard 204 new residents and fellows in 2024 compared to 75 in 2017. St. Luke’s success in recruitment, retention, and readiness is evident in the increasing number of residents and fellows with local ties and from regional medical schools; 80% have local ties to the tri-state area compared to 55% in 2017, and 45% of matches come from regional medical schools compared to 19% in 2017. The high percentage of Temple University/St. Luke’s medical school (TUSL) graduates matching into GME residencies reflects the institution’s attractiveness to top-tier talent. On average, 30% TUSL graduates have matched into our GME residencies.

Over 250 resident/fellow graduates have been hired by our Network since 2019. Additionally, the favorable ratings of the clinical learning environment given by residents and fellows, as well as the substantial number of graduates hired by the Network, further validate St. Luke’s as a premier institution for medical education, high quality clinical practice, and career advancement.

Ultimately, where you train matters!

52 ACCREDITED PROGRAMS

510 RESIDENTS & FELLOWS

GREATER THAN 95% BOARD PASS RATE

95%

100 TOP HOSPITALS

MAJOR TEACHING HOSPITAL

St Luke's
Graduate Medical Education

LOOKING AFTER OUR OWN

Addressing Critical Mental Health Issues in the Medical Profession

The national news media reported widely on the suicide of ED physician Lorna Breen, MD, in New York City during COVID in 2020, highlighting the extreme personal and professional struggles some physicians experience during their career, which can lead to alarming thoughts or behaviors if they don't seek mental health treatment.

Challenging mental health conditions, including burnout, depression, anxiety, substance use disorder and suicide, are on the rise in the medical profession, but they can be avoided and treated with reliable resources from their organizations—including St. Luke's—explained Kara Mascitti, MD, St. Luke's Chief Wellness Officer, in her aptly-titled presentation, *Looking After Our Own*, which she gave at last November's QI Quarterly Collaborative Meeting.

Dr. Mascitti cited national research from 2022, which found that 23% of physicians reported being depressed vs 15% in 2018. In addition, 64% of respondents to the survey said they have experienced on-the-job burnout; 24% admitted they suffer from severe depression; and 10% revealed they had contemplated or attempted suicide.

"Stress is an occupational hazard in our profession," she noted. "Physicians generally are more resilient than people in other professions, but they also may be reluctant to talk about mental health problems or seek treatment for one," she added. "As a result, suicide is higher in physicians than the general population."

Medical students generally have higher resilience than their peers who enter other occupations, said Dr. Mascitti, but burnout and depression in physicians quickly rise during residency and peak in mid-career. She cited St. Luke's OB/GYN Dr. Rick Boulay's op-ed in the *New England Journal of Medicine*, which detailed his daughter's struggles with depression during her surgical residency and led to a suicide attempt, as a close-to-home example of the consequences of the lack of mental health support or services available in some hospitals.

How to avoid, address or access stress and other mental health conditions

Dr. Mascitti stated that, while it's normal for physicians to feel some level of stress at times, "Multiple personal factors can lead to burnout or worse in this profession, and it's important to know one's risk for these stressors and how to deal with them."

She suggests consulting the Stress Continuum Model (include chart) to assess one's own stress level and triggers. A full battery indicates one is feeling positive and able to deal with daily stressors. An empty or partially empty one indicates a reason for concern and the need for something as simple as a discussion of the stress, a day off from work with a loved one or even a mental health evaluation or intervention. This chart is available also on the SLPG Sharepoint Site.

"Recognizing the levels, sources and signs of stress in ourselves, or a colleague, talking about it or recommending or accessing



Dr. Kara Mascitti and son, August

professional mental health help are critical steps that can help keeping the stress from becoming serious."

Untreated stress can lead to burnout, sleep problems, negative interactions with patients or colleagues, compassion fatigue, self-medication or even thoughts or attempts of suicide.

St. Luke's and SLPG offer a variety of confidential, effective, on-line and in-person mental health re-sources, treatments and referrals to all employees, including medical students, residents, practicing physicians and advanced practitioners.

"At St. Luke's, we are developing a culture of wellbeing that encourages colleagues to seek help if they are suffering a mental or emotional problem and to recognize and reach out to someone who might be suffering one before it becomes a crisis," explained Dr. Mascitti.

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SilverCloud®: A Confidential Online Resource for Resident's Mental Health & Well-Being.

*Providing Assessment Tools, Educational Programing & Coaching Support.
A first step, in self-care.*

WHAT IS SILVERCLOUD?

SilverCloud is an Electronic Wellness Platform (EWP) purpose built to meet the mental health and well-being needs of busy professionals. The programs are designed to inform and empower. Participants are shown the concepts, skills, and techniques needed to manage life's stressors in healthy ways.

Our evidence based and self-guided programming, includes...

- Space from Anxiety
- Space from Depression
- Space from Depression & Anxiety
- Space in Chronic Pain from Depression & Anxiety
- Space from Insomnia & Sleep Issues
- Space from Stress
- Space from Alcohol
- Space from COVID-19
- Space from Diabetes
- Supporting an Anxious Child
- Supporting an Anxious Teen
- Space for Early Parenting
- Space for Resilience

WHAT CAN I EXPECT?

Every participant first chooses a program. A Coach is then assigned who will check in weekly to provide support, answer questions, and otherwise help in navigating the experience, as needed.

Program content is separated into modules and can be approached compartmentally, at a pace of your choosing.

Module content is driven through engagement. Tools and activities are presented as an easy way to help "connect the dots" between individual circumstances and the module's subject matter.

IS SILVERCLOUD THE RIGHT FIT FOR ME?

Want to improve your overall health and well-being?

Looking for self-care best practices?

Feeling overwhelmed?

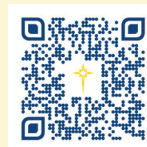
For anyone looking to further develop their "coping" skill set, our programs can be a great resource for you.

If you'd like to build your support system, our programs can be a great addition.

SilverCloud is accessible 24/7, so it's available when you are. No Scheduling. No Travel. Ready when you are!

Programs vary in duration but ultimately you control the pace.

Additionally, all participants of our EWP can easily reach out to their Coaches if something is amiss. All our Coaches are Mental Health Professionals within SLUHN and can assist with any next steps as needed.



HOW DO I ACCESS SILVERCLOUD?

To learn more about SilverCloud or sign up

Visit go.sluhn.org/silvercloud

Use access code: SLUHNRES at sign up

Access code is case sensitive

*If you would like to schedule a consultation to discuss this resource further, please contact
Phil Mazur, LSW, MSW | Clinical Liaison, Behavioral Health Access Outpatient Psych
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CELEBRATING EXCELLENCE: Our Graduate Medical Education Team Shines at AIAMC National Meeting II Tucson, AZ – April 4th – 6th

In the dynamic world of graduate medical education, innovation and collaboration are pivotal to driving progress and improving patient care. Recently, our Graduate Medical Education (GME) team of residents and administrative staff showcased their dedication to these principles at the Alliance of Independent Academic Medical Centers (AIAMC) National Meeting II by presenting five

posters representing the Anderson campus, Bethlehem campus with Star Community Health collaboration, and Miner's campus. The posters focused on various aspects of Social and Moral Determinants of Health (SDoH), as described below.

This national event presented a highly visible platform for our resident physicians, educators, and researchers to

share their quality improvement expertise and insights. Furthermore, the feedback-intensive group sessions enabled our team members to engage in meaningful discussions, exchange ideas, and forge connections with colleagues from other institutions. These interactions fostered collaboration and inspirational ideas for research and educational initiatives.



Anderson Campus

SLUHN's AIAMC Meeting II Representatives and Posters:

J.P. Orlando, Ed.D; Jill Stoltzfus, PhD; Parampreet Kaur, MD; Dania Mosquera, MS; Beth Adams, MPH; Franzes Liongson, MD; Brooke Lipton, MD; Sara Muder, MD; Catherin Wang, MD; Kelsey Steele, DO

Anderson Campus

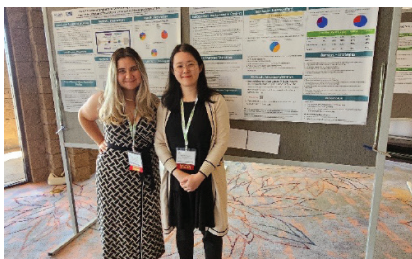
- Adverse Childhood Experiences, Chronic Diseases, Intervention, and Accessibility
- Emergency Medicine Study on Social Determinants of Health (SDoH)

Bethlehem Campus & Star Community Health

- Federally Qualified Health Center Look-Alike (FQHC-LA) Screening Patients for Social Determinants of Health (SDoH) Through an External Community Organization Database: Focusing of Communities Needs and Insecurities

Miners Campus

- Improving Adult Immunization Rate in Ethnic and Minority Populations
- Acceptance of Psychiatric Care in Rural Eastern PA: Challenges and Strategies



Miners Campus

**20-year
membership
award**



During the closing awards dinner, SLUHN received an award for its 20-year membership, recognizing our Network's dedication to supporting our community with the resources needed to improve patient care. It underscores our unwavering commitment to staying at the forefront of medical education and continuously striving for excellence in training the next generation of healthcare professionals.

As we celebrate this achievement, we look ahead with optimism and determination, knowing that our GME team will continue to drive innovation within medical education and make meaningful contributions to the advancement of healthcare for years to come.

Quality Corner

LEAPFROG SAFETY GRADE SPRING 2024!

The Leapfrog Group is a nonprofit industry supervisory body committed to improving safety in the U.S. health care system. As part of their work, Leapfrog analyzes hospital performance twice annually, in the Spring and Fall, and assigns a safety grade to nearly 3,000 hospitals across the country. This Leapfrog Hospital Safety Grade is comprised of up to 30 national quality and patient safety measures taken from publicly reported data sources, such as the Centers for Medicare and Medicaid Services (CMS), Agency for Healthcare Research and Quality (AHRQ), Centers for Disease Control and Prevention (CDC), Joint Commission (TJC), and the American Hospital Association. Leapfrog uses these objective measures to assign a letter grade, “A” to “F”, to a hospital’s overall performance in order to keep patients safe from preventable harm and medical errors.

In the latest report, a total of 9 St. Luke’s University Health Network hospitals received an “A” for patient safety, and 7 were awarded the “Straight A” designation for having earned As at least 5 times in a row. This consistent excellent is the result of your hard work and commitment to providing high quality, safe care to our patients.

Whether it is the extra attention given to

patient engagement; efforts to reduce device days and avoid infections; involvement in safe surgery checklist and the time-out process; a “just in time” hand hygiene reminder to someone else on the team; patient safety event reporting; or other ways you contribute, thank you for everything you do to help keep our patients safe!

30 National Performance Measures

Data Sources & Measures

- Leapfrog Hospital Survey
 - HCAHPS
 - Outcomes
 - SSI, PSI, & HAC
- NQF Safe Practices
- CPOE
- ICU Staffing
- Surgical Volumes
- Surgical Appropriateness

Distribution of Grades

A = 29% B = 26% C = 37%
D = 7% F < 1%

St. Luke's Hospitals	Spring 2024	Fall 2023	Regional Comparisons	Spring 2024	Fall 2023
Allentown	A★	A☺	LVH Cedar Crest	B	A☺
Anderson	A★	A☺	LVH Hazelton	C	B
Bethlehem	A★	A☺	LVH Hecktown Oaks	A	A
Carbon	A	NOT GRADED	LVH Muhlenberg	B	B
Easton	A	A☺	LVH Pocono	A	B
Miners	B	B	LVH Schuylkill	B	C
Monroe	A★	A	Geisinger Danville	A	A
Sacred Heart	A★	A	Reading	C	C
Upper Bucks	B	A	Grandview	B	C
Warren	A★	A☺			
Geisinger St. Luke's	A★	A			

A
B
C
D
F
NG

★ = Leapfrog Straight A's Hospital

☺ = Leapfrog Top Hospital 2023



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QUALITY WEEK

-Quality question
of the day
-Wawa gift cards
-End of the week
raffle



October 20-26

The Quality Awards
Ceremony will be
Thursday 10/24 at 11am
in Laros Auditorium.

Poster Display will
be held at Bethlehem
Campus Cafe on 10/23

*Other campuses announced at a later date

Role of AI in Predicting Risks and Needs of Patients with Social Determinants of Health

Social Determinants of Health (SDOH) are major contributors to health inequity and increasing healthcare costs in vulnerable populations. Healthcare innovators are building proactive care management programs by combining multiple datasets and connecting high-risk members with community-based organizations to arrange food delivery, transportation, neighborhood safety, emergency housing, and other services to mitigate SDOH risk. With limited care-management resources available, organizations are turning to artificial intelligence (AI) to correctly identify high-risk members with addressable SDOH and efficiently target interventions. According to healthcare IT news, machine learning technology can risk-stratify the population, placing patients with higher burdens of social risk impacting their health access and outcomes at the top, and those with less burden towards the bottom. There are many ways to maximize the predictive accuracy by training the model with specific populations like Medicare or Medicaid populations rather than general population. AI models can also identify the highest-spending members by combining

traditional data like claims, demographics, and SDOH admission alerts. AI accuracy can be improved by retraining models with the feedback loop to efficiently target interventions. In addition, predictive models can also assist decision-makers in cost-saving analyses to more effectively schedule and optimize hospital resources by identifying high-risk patients and correctly determining where resources will provide the most benefit and greatest positive impact.

Across the nation and locally here at St. Luke's, efforts are ongoing to decrease emergency department boarding and hospital readmissions. As described by Singer et al. in the *Journal of Academic Emergency Medicine*^{1,2}, emergency department boarding is associated with increased hospital mortality and hospital length of stay. Up to 25% of patients visiting emergency departments nationwide do so because of convenience and barriers to accessing primary care. A team of St. Luke's physicians has embarked on a quality improvement initiative to identify patients who would benefit from network or community resources and connect those patients to case management and findhelp.

org. Utilizing data collected directly from patients and leveraging data gleaned from the electronic medical record has the potential to more efficiently allocate available outpatient and community resources to those who need them most. A study published in the *American Journal of Managed Care* has shown that using AI to combine more traditional data such as claims and demographic information with more non-traditional data such as social determinants of health has improved the identification of higher-cost members. As AI becomes more embedded in healthcare and machine learning becomes more precise, there is the potential to more proactively identify and risk stratify those patients who may benefit from early intervention with a case manager to decrease re-admission or emergency department visits for preventable reasons.

**For more information on this topic,
please contact Dr. Kaur at
Parampreet.Kaur@sluhn.org**

1. Carroll, N., et al., *Improving Risk Stratification Using AI and Social Determinants of Health. The American Journal of Managed Care*, 2022. 28.

2. Boudi, Z., Lauque, D., Alsabri, M., Östlundh, L., Oneyji, C., Khalemsky, A., Lojo Rial, C., W Liu, S., A Camargo, C., Jr, Aburawi, E., Moeckel, M., Slagman, A., Christ, M., Singer, A., Tazarourte, K., Rathlev, N. K., A Grossman, S., & Bellou, A., *Association between boarding in the emergency department and in-hospital mortality: A systematic review. PloS one*, 15(4), e0231253, (2020).

CHIEF RESIDENT COACHING PROGRAM

The chief coaching program initiative was introduced, June 2, 2023, during the Chief Resident retreat. Coaching can be invaluable in supporting emerging leaders as they navigate the complexities of their roles. It's great to see that the program involves a multi-disciplinary approach, bringing together expertise from trained-coaches from Graduate Medical Education, Organizational Development, and Medical Staff.

The focus on coaching, resonant leadership, and self-reflection demonstrates a commitment to developing not just clinical skills, but also the interpersonal and leadership qualities necessary for effective healthcare leadership. By presenting challenging communication and conflict scenarios, the program provides a practical context for applying resonant leadership

principles, enhancing the chief residents' ability to navigate difficult situations with empathy and effectiveness.

On March 1st a group of chief residents gathered for a mid-year retreat. This retreat provided a well-rounded and hands-on approach to leadership development, which will undoubtedly benefit the chief residents and contribute to their growth as leaders in their respective fields.



Diabetes CARES Model at Star Community Health - Southside Bethlehem Quality Improvement Collaboration

Diabetes CARES is a quality improvement (QI) collaboration between St. Luke's Department of Community Health, Fitness and Sports Performance, Care Management, and Star Community Health. The team aimed to improve the HEDIS metric for hemoglobin A1c poor control (i.e., A1c greater than 9) utilizing a multidisciplinary approach which included clinical and lifestyle interventions.

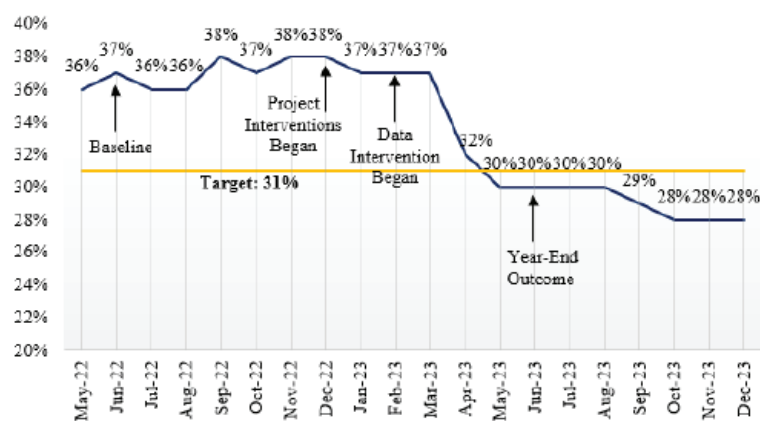
The Fiscal Year 2023 (FY23) implementation of the project at Star Community Health's Southside Bethlehem practice highlights the success the model created to positively impact patient care and outcomes. Baseline data in June 2022 showed a poor control rate of 37% at the practice. The team set a goal to reduce this to 31% by the end of FY23.

To accomplish this goal, attending and resident physicians at Star Community Health were the primary drivers behind the clinical intervention. During their initial appointments for patients with an A1c greater than nine, providers obtained a baseline A1c and introduced or modified diabetic medications as needed. Patients were educated on lifestyle modifications utilizing posters and providing educational material including pamphlets with meal options and appropriate portions, and business cards with QR codes for cooking and exercises videos. Social workers were available to connect patients

to Hispanic Center Lehigh Valley's food pantry to expand food access that included produce, meat, and dairy. Posters promoting these resources were displayed in every patient room at the Southside Bethlehem practice to diversify patient materials and foster doctor-patient interactions regarding diabetic care. Clinical follow-up was provided every 6-12 weeks to track patient progress. Patients were also referred to a 4-course diabetic education curriculum administered by St. Luke's Department of Community Health's registered dietitians. St. Luke's Fitness and Sports Performance created virtual exercise videos for the project, which were provided to patients and tailored to the physical health needs of individuals with diabetes.

The project interventions were implemented starting in December 2022. After a review of patients identified as having poorly

Star Community Health - Southside Bethlehem
FY23 Hemoglobin A1c Poor Control, % of Patients



controlled diabetes, it was determined that many were either no longer patients of the practice or had outdated A1c values. The team strategized to include a data review intervention that updated patient records to remove the practice as their primary provider or ordered A1c tests for current patients that were overdue for lab draws. This additional intervention began in February 2023. The combination of all interventions made a significant impact on the practice's HEDIS measure, reaching 30% (surpassing the goal) by the end of FY23 with further improvement to 28% through the second quarter of FY24.

Family Medicine Residents Represent at New Jersey Academy of Family Physicians (NJAFP)

The Family Medicine residents from Miners and Warren campuses presented their Quality Improvement work to colleagues at the New Jersey Academy of Family Physicians Annual Meeting. Dania Mosquera, MS, GME Program Manager, also attended as a GME representative. This annual event enables St. Luke's to recruit quality candidates and share the Network's continuous growth with interested faculty, residents, and medical students.

The following posters were presented:

From Warren:

1. Title: Emergent Result Management

- Authors/Presenters: Alexis Laguna, MD, PGY 1, Rabeea Farhan, MD, PGY1, and Dr. Majed Dayoub, MD (attending)

2. Title: Saving Lives by Completing Patients' Charts on Time

- Authors/Presenters: Jungsoo Kim, MD, PGY 2, and Dr. Nandhini Veeraghavan, MD (attending)

From Miners:

1. Title: Developing an Obesity Medi-

cine Track in a Rural Family Medicine Residency

- Authors/Presenters: Gayathri Gurmurthy, MD

2. Title: Developing an Addiction Medicine Track in a Rural Family Medicine Residency

- Authors/Presenters: Bijju Babu, MD

3. Title: A Novel Collaboration between Medical and Dental Providers: Identification of Gaps in HPV Vaccination Status

- Authors/Presenters: Anna Derian, MD

These poster presentations were informative and impactful, encompassing a diverse range of topics that addressed the common goal of improving healthcare outcomes. From managing emergent medical results to addressing specific needs in rural communities, each of these initiatives has the potential to make a significant difference in patient care. Additionally, collaborative efforts between medical and dental providers to improve HPV vaccination rates demonstrates the benefits of teamwork to help bridge gaps in healthcare delivery and focus on Social



Determinants of Health (SDoH).

For more information on this topic, please contact Dania Mosquera, MS at daniamosquera@sluhn.org

Supporting our Communities with Social Determinant of Health Research and Quality Improvement Projects

Jill Stoltzfus, PhD, Senior Network Director of GME's Data Management and Outcomes Assessment section, gave a presentation titled "Evaluating Social Determinants of Health (SDoH): Important Considerations for Research and Quality Improvement" at the QI Collaborative's quarterly meeting on Feb. 20, 2024. In this presentation, Dr. Stoltzfus defined SDoH and its five domains (Economic Stability, Education Access and Quality, Healthcare Access and Quality, Neighborhood and Built Environment, Social and Community Context); reviewed key similarities and differences between research and quality improvement (QI) as different methods for investigating SDoH; and discussed factors to consider in assessing the feasibility of conducting research and/or QI with SDoH. Of note, many variables can contribute to and/or confound SDoH realities for different patients; examples of

these variables include age, gender identity, marital status, personality, history of abuse or neglect, health behaviors, religious/spiritual practices, and cultural norms.

When considering whether to conduct research or QI, one should also be aware of the four key areas of difference, as follows: 1) designs and categories (research) versus plan-do-check-act, or PDCA (QI); 2) sample group composition and selection; 3) defining outcomes; and 4) types of data. In general, research is more rigidly defined, with specific rules and standards for hypothesis testing, versus the fluid and flexible process-outcome relationships of QI projects.

Additionally, when deciding how best to structure an SDoH project, one should consider whether there is actual opportunity for improvement; buy-in from front-line office staff; if the problem can be objectively

measured; if adequate resources are available; and if there is sufficient time to complete the project. As part of this process, one must also determine if contributing and/or confounding variables could further impact the SDoH outcomes of interest, and if so, whether these can be captured accurately and accounted for statistically (which isn't possible for QI projects due to more limited sample sizes).

In summary, evaluating SDoH is a complex and multifaceted process that requires thoughtful, well-organized planning and implementation, starting with a clear understanding of whether research or QI is best suited to one's project objectives based on the strengths and limitations of each approach.

For more information on this topic, please contact Dr. Stoltzfus at jill.stoltzfus@sluhn.org

SUPPORTING THE COMMUNITY WITH LIFESTYLE MEDICINE

The Lifestyle Medicine Residency Curriculum (LMRC) at St. Luke's Family Medicine Program at the Anderson Campus was created to equip residents with the knowledge and tools to help patients improve their health and wellbeing. Led by Program Director Andrew Goodbred, MD, and LMRC Site Lead Meagan Grega, MD, residents are able to integrate themselves into the community and address patients' social determinants of health (SDoH), especially in the Lehigh Valley's underserved areas. Lifestyle Medicine aims to treat and prevent chronic conditions by implementing six basic pillars: nutrition, physical activity, stress management, restorative sleep, avoidance of risky substances like alcohol and tobacco, and fostering positive social connections. SDoH are the nonmedical factors that influence health outcomes, such as the circumstances of a person's birth, working and living conditions, and access to education and healthcare. One of the most important indicators and predictors of patients' health is diet, which is strongly impacted by access to healthy and nutritious foods.



Research consistently supports a whole food, plant-based diet for improving healthcare outcomes and reducing morbidity. "Food deserts" are residential areas with limited access to affordable and nutritious food, which often exist in population-dense areas where residents do not have access to fresh foods within a mile of where they live. Within these areas, it is very difficult to adopt a whole food, plant-based diet that includes unprocessed fruits, vegetables, whole grains, legumes, nuts, and seeds. In order to meet this need, Dr. Grega, co-founder of the Kellyn Foundation, has created initiatives like the Eat Real Food Mobile Market. The Mobile Market delivers fresh, local produce and plant-based meals throughout the Lehigh Valley. Medical residents also have the opportunity to volunteer and provide education at local pantries and elementary schools, as well as cook meals.

St. Luke's Anderson is one of a handful of Family Medicine programs that offer a well-established lifestyle medicine curriculum that enables residents to practice what they have learned beyond the hospital or office setting. As part of these programs, residents are given multiple activities in which to participate, including leading "Walk with a Doc" outings, conducting Lifestyle Medicine visits in the office and community, collaborating with interdisciplinary healthcare providers, and practicing the six pillars of Lifestyle Medicine in their own lives. This curriculum is supported by the American College of Lifestyle Medicine, enabling graduates to be well prepared to pursue board certification in Lifestyle Medicine.

For more information on this topic, please contact: Dr. Andrew Goodbred at andrew.goodbred@sluhn.org



National Health Center Week (NHCW)

National Health Center Week (NHCW) to celebrate and increase awareness of America's 1,400 Community Health Centers (CHCs). National Health Center Week is an opportunity to highlight the commitment and passion of Community Health Center staff, board members, and supporters who play a crucial role in providing accessible and affordable, quality, comprehensive healthcare services to more than 31.5 million patients (about twice the population of New York) across 14,000 communities annually. Star Community Health's role is to connect the uninsured or underserved community to affordable, quality medical and dental care and any other enabling services they may need to live a full and healthy life.

This year NHCW is August 4th-10th. Star will serve the community, host legislators and other stakeholders at their practices, provide dental screenings and health education to their patients and wider community and celebrate their staff throughout the week. These activities highlight Star Community Health and the work its providers, staff and leadership team do each day to provide equitable, quality healthcare to the communities in the Lehigh Valley and Phillipsburg, NJ.

Visit Star Community website for practice locations at: <https://starcommunityhealth.org/locations>

For more information on this topic, please contact Karen Hepworth at Karen.Hepworth@starcommunityhealth.org

SHAPING FUTURE HEALTHCARE LEADERS: GME Data Management Internship Program

In the evolving landscape of healthcare, the role of data management is becoming increasingly crucial. Therefore, the GME (Graduate Medical Education) Data Management Internship Program has emerged to assist aspiring healthcare professionals as they seek to make a tangible impact in this field. The internship program provides hands-on experience as well as fosters a learning environment where interns can thrive and grow professionally.

This summer, Kaylah Doss and Errisangely Torres, both graduating with a Bachelor of Science degrees in Public Health with concentrations in Health Administration, from East Stroudsburg University located in East Stroudsburg, Pa, are embarking on a transformative journey as interns in the GME Data Management Program. Kaylah and Errisangely will have the opportunity to work across various areas within GME, gaining exposure to diverse facets of data management as part of a comprehensive approach to learning. From project planning to implementing quality improvement initiatives, they will play an active role in promoting positive change within GME.

A cornerstone of the internship experience is the opportunity to shadow key leaders in



quality improvement. By closely observing seasoned professionals in action, Kaylah and Errisangely will gain invaluable insights into effective leadership strategies and best practices in healthcare quality management. The program's mentorship component guides and inspires interns as they chart their career paths.

Another key aspect of the program is participating in a designated project. The program curriculum has been meticulously designed to equip interns with the necessary skills and competencies to excel in their future endeavors. Through a blend of workshops, seminars, and practical exercises, Kaylah

and Errisangely will gain a comprehensive understanding of data management principles, quality improvement methodologies, and emerging trends in healthcare.

The GME Data Management Internship Program clearly illustrates St. Luke's commitment to nurturing talent and fostering innovation. As evidence of the program's success, two of the previous interns secured GME positions within the Lehigh Valley area.

For more information on this topic, please contact Dania Mosquera at Dania.Mosquera@SLUHN.org

Senior Leadership at Medical Education Grand Rounds: "Empowering Communities: Collaborative Strategies for Addressing Social De-terminants of Health"

Donna Sabol, Senior Vice President, Chief Quality Officer, and Rajika Reed, Ph.D., Vice President of Community Health, co-presented on Quality Improvement and Social Determinants at the December Medical Education Grand Rounds. Their learning goals were for participants to "identify how to connect, data, people and resources to SDOH programs" and be able to "explain components of an evolving SDOH program." These objectives are in line with the many social determinants of health (SDOH) initiatives across the Network, as well as St. Luke's mission of improving communities' overall health.

In the presentation, Dr. Reed defined social determinants of health and how factors including economic stability, neighborhood, education, food, safety, and healthcare access

contribute to a patient's health and well-being. She noted that in the United States, communities of color experience health outcomes related to SDOH at a disparate level. Healthcare itself only accounts for about 20% of a person's overall health, with social determinants of health and health behaviors accounting for the remaining 80%. She also discussed the Community Health Needs Assessment conducted by the Community Health Department to understand the needs of the patient population served by St. Luke's.

Ms. Sabol explained some of the government requirements for health systems to address SDOH and health equity, including standards from Medicare and the Patient Safety Authority of Pennsylvania. She also mentioned that St. Luke's participates in voluntary programs related to improving

SDOH and achieving health equity. The St. Luke's team working on these initiatives includes people from a variety of departments, with the goal of screening, assessing, and connecting patients to resources.

During the presentation, many Community Health programs were discussed, including diabetes education, literacy and ESL education, working with the homeless population, and dental vans that serve communities in need. With these programs and more, St. Luke's has been recognized across the state and nationally for its work to enhance community health and wellbeing.

For more information on this topic, please contact Beth Adams, MPH at Elizabeth.Adams1@sluhn.org

Quality Improvement Curriculum: Enhancing Healthcare Delivery at Family Medicine Bethlehem

In healthcare, continuous improvement is not just a goal but a necessity to ensure the best outcomes for patients. At Family Medicine Bethlehem, a commitment to excellence is a lived reality, thanks to the concerted efforts of Nguyet-Cam Lam, MD, Program Director and Natalia Lapko, MD, Quality Improvement Faculty, and dedicated residents. Through their innovative approach to quality improvement (QI), the team has embarked on a journey to elevate patient care and outcomes.

Each June, Dr. Lapko convenes the residents to explore quality improvement in depth through brainstorming and reviewing the practice dashboard. This broad scope of information serves as the compass guiding upcoming QI endeavors. Together, they meticulously analyze the metrics, seeking out opportunities for value-based improvements that will make a tangible difference in patient lives.

One authentication of this comprehensive approach is the active involvement of residents in the decision-making process. In July, after thorough review, a project is selected, with a comprehensive plan of action drafted for implementation across the entire office. But it doesn't end there. Accountability and transparency are key to the progress reported monthly at residency meetings, which ensures that any course corrections can be swiftly made, keeping the initiative on track.

However, the journey doesn't end with the submission of final data in December. True to their commitment to continuous improvement, the team reconvenes the



following June to measure sustainability. This curriculum has been successful in recent years and has led the Family Medicine Bethlehem Residency to multiple awards and countless recognitions.

More than just getting the residents and the clinic excited about doing quality improvement, it is about striving to give our best for patient care through a team approach, which is the most important reason to engage in QI projects. This is how St. Luke's Bethlehem Family Medicine Residency team

has been able to sustain the effort of doing at least one QI project every year for more than 10 years in a row. This year's led by PGY-2 resident, Dr. Nidhi Kumar, was presented at the PAFP Research Day and won both "Best Resident Presentation" and "Best Overall Presentation".

For more information on this topic, please contact Dr. Lam at Nguyet-Cam.Lam@sluhn.org



REDCap (Research Electronic Data Capture) is a flexible and secure web-based system for collecting and managing research and quality improvement study data that was developed at the Vanderbilt Institute for Clinical and Translational Research.

Users enter study data in a web browser, either locally or from remote locations. The data are then stored centrally in a secure MySQL database.

For training registration and dates visit: www.slhn.org/research/gme-data-outcomes/redcap

Question Contact: Dania Mosquera, MS
REDCap Administrator

Required REDCap Timeline

You must be trained in REDCap at least 60 days before the start