

STATE OF CONNECTICUT
State Innovation Model
HISC Personnel Sub-Committee
Work Group Nominee

Practice Transformation Taskforce

Consumer Advisory Board nomination for consumer advocate with housing emphasis

Anne Klee

Qualifications: I am a psychologist with a background in public health and services for homeless individuals. I worked at the NYC Department of Health from 1995-2001 as an epidemiologist, at Yale School of Medicine/ Connecticut Mental Health Center as a predoctoral psychology fellow and postdoctoral fellow from 2001-2003 and since 2003 I have served in different capacities at the Errera Community Care Center of VA Connecticut Healthcare System. The ECCC provides specialized mental health and social services to veterans with serious mental illnesses, co-occurring substance use disorders and/or those without homes. Our focus is community mental health. I am currently the Director of Peer Services which encompasses thirty peer support specialists between the Newington and West Haven campuses. Over the past several years, I have co-authored several clinical grants including one to establish the Wellness Center at the Errera Community Care Center with the mission of providing individualized health promotion services to individuals with serious mental illnesses. I am also an Assistant Professor in the Department of Psychiatry of the Yale School of Medicine and contribute on a national level by serving as the Immediate Past President of Division 18 Psychologists in Public Service of the American Psychological Association. At the state level, I serve on the Peer Services Workgroup coordinated by the CT State Department of Mental Health and Addiction Services and I serve as the Federal Advocacy Coordinator for the Connecticut Psychological Association. In 2006 I was in the inaugural class of the Connecticut Health Foundation's fellowship program. Recently, VA Central Office mandated that each VA in the country hire "peers" -- health and mental health service consumers who have received peer counseling training, and have demonstrated the skill, motivation, and desire to help their peers in a supportive role. VA Connecticut is leading the way with the largest program of peer specialists in the VA nationally. As Director of Peer Services, I set up the infrastructure for hiring, orienting and training peers as well as creating a performance appraisal system, overseeing group supervision and establishing monthly training for supervisors of peers. The ECCC represents the vanguard of the national movement to integrate Peer Specialists into mental health treatment and recovery programs. I have the privilege of working with peer specialists on topics such as finding their "voice" to tell "their stories" in safe and meaningful ways, understanding the role differences between professional staff and peers, recognizing ethics and boundaries issues facing peer providers, and in some cases transitioning from client to service provider. As an advocate for individuals with serious mental illnesses, I have learned firsthand that people with mental illness can recover and lead rich lives in the communities of their choice. I also understand how mental health and physical health services can be integrated to provide coordinated and seamless care. As a clinical psychologist and from my years of working in a national fully integrated healthcare system, I am versed in clinical integration, community integration and measuring and reporting. I hope to bring these perspectives to the Practice Transformation Task Force.

Personnel Subcommittee nomination for provider with hospital and care management expertise

Beth A. Greig

Qualifications:

Ms. Grieg is currently Director; Case Management, Healthcare Value and Efficiency for St. Francis Hospital and Medical Center, which is a role that specifically focuses on clinical interventions required to continue to compress ED Boarding time, managing use of Observation Status, reducing hospital readmissions and enhancing transitions of care across the continuum.

Ms. Grieg has a long list of achievements including the following:

- Designed and implemented changes to position the hospital to manage and improve performance for value based purchasing by CMS and commercial payers. All areas that contribute to measurement, performance improvement, patient safety and quality are now organized under one umbrella to increase collaboration, efficiency and focus.
- Implemented hospital wide changes to support documentation of level of care to address high risk area for Medicare Recovery Audit Contractors. Executed 9 month project plan that included coordination of efforts and education with Information Services, physician, executive and nursing leadership. Hospital moved within a week of implementation from minimal level of care orders to over 90% of all admissions having an order at time of admission.
- Designed and implemented patient flow initiatives for numerous clients across the country and Canada with documented appropriate reductions in length of stay, emergency department wait times, and patient and physician satisfaction.
- Successfully facilitated transition of all work from external and internal consultants to operational areas to continue implementation of the multi-year program and technology strategy at a managed care plan. Overall project cost of program planned for \$63 million with an overall benefit of over \$400 million over multiple years.
- Developed an online emergency department registration system to support the triage, documentation and billing functions for large academic medical center. Project delivered on-time, defect free with positive customer satisfaction.
- Designed and implemented a program that supported the needs of patients requiring palliative and end of life care such that these patients were provided care in a setting particular to their needs and freeing up inpatient hospital capacity.

BETH A. GREIG

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SUMMARY

Experienced change manager that thrives on implementation of transformational initiatives including patient flow and clinical projects to improve revenue, efficiency, quality and satisfaction. Strong leader known for implementing programs and services that lead to fundamental organizational change.

Project Management
Business Planning
Fiscal Management

Systems Analysis
Program Design
Proposal Development

Group Facilitation
Communication/Writing
Change Management

ACCOMPLISHMENTS

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PROFESSIONAL EXPERIENCE

St. Francis Hospital and Medical Center

04/2009 to present

Director; Case Management, Healthcare Value and Efficiency

09/2013 to present

Assumed a role to specifically focus on clinical interventions required to continue to compress ED Boarding time, manage use of Observation Status, reduce hospital readmissions and enhance transitions of care across the continuum

- Launched a hospital wide initiative to improve patient flow with a goal to decrease ED boarding time and increase discharges by 11:00 AM.
- Initiated implementation of a universal readmission reduction “bundle” based on Project Red
 - Developed a project plan and led an initiative to provide training and education for all hospital based providers and nurses around accurate medical reconciliation. Focused on roles and responsibilities and correct use of EPIC processes
- Led initiative to embed the LACE readmissions risk stratification tool in EPIC and developing corresponding assessment and interventions tools based on the 8 Problem areas leading to readmissions

- Supported the formal launch of the Saint Francis Post Acute Platform
 - Led communications and ongoing activities around transitions of care and readmissions

Administrative Director, Quality and Organizational Effectiveness

04/2012 to 09/2013

Expanded responsibilities to include oversight of Quality, Regulatory Readiness, Performance Improvement, Infection Prevention, Patient Safety as well as Case Management. Organized the above entities under one umbrella reporting to the Physician Chief of Quality as well as the Vice-President of Patient Care Services to respond to the pressure by commercial payers and Medicare to pay or penalize hospitals for performance and ensure organization continues on a path of improvement towards a “safe hospital”

- Created business case to increase FTEs by 160% to support this initiative
- Entered into a contract with a Physician Advisory Service to respond to increasing pressure by Medicare to deny or pay for inpatient services at a lower rate than the patient’s stay and care requirements support
- Project manager for pilot development of Kaplan and Porter’s (Harvard) Value Measurement methodology in healthcare with an initial focus on scheduled C-section, STEMI PCI and Bariatric Surgery
- Work, in collaboration with PHO and Primary Care service line, to develop pilot strategies to coordinate care contributing to the Post Acute Strategy work team.

Director, Case Management

04/2009 to 04/2012

Manage team of 70 staff that provides case management services along the continuum of care in the inpatient setting as well as ambulatory care. In process of driving implementation of a 3-year redesign of the Case Management Department to provide leading practice case management services to patients and the organization. Redesign to date has focused in the following:

- Increase staffing to support leading practice guidelines; hired 15 staff over the course of a year with a focus on RN case managers and LCSW social workers
- Implement comprehensive case management services in the Emergency Department
- Redesign workflow to support regulatory and payer requirements
- Implement service level physician advisor program to support day to day operations of case managers
- Enhance case management software to support new workflow and implementation of an electronic discharge referral system for post-acute services
- Develop of a case management scorecard to track change process and impact on organization

Aetna, Inc.

09/2007 - 12/2008

Head, Business Services Group, National Care Management

Managed team of 11 Aetna based staff along with team of external consultants to provide project management and planning support for National Care Management. Drove implementation of the Aetna Health Connections program, a multi-year project, to design new or enhance existing care management programs and develop a technology solution to support member centric care. Developed strategic planning and operating plans to support the communication of goals and accomplishment at enterprise level. Provided chief of staff services to Head of National Care Management

- Provided project management from a business perspective for custom developed IT solution to support the delivery of disease management services to over 10 million members
- Developed 3 year strategic plan and 2009 operating plan that highlighted critical needs and systems gaps

Capgemini Ernst and Young, Capgemini, Accenture

09/2001 - 09/2007

Senior Manager

Provided project management and consulting support for assessment and implementation of case management and patient flow initiatives in academic and community provider organizations. Included facilitation of rapid design sessions, physician engagement, education and training of clinical and support staff, data analysis, trending and reporting. Focus on redesign of roles, functions and processes in the emergency department, bed management and case management areas

Sample clients and engagements

Academic Health System, British Columbia, Canada: Care Management Improvement Initiative

Project manager, for core team of 8 consultants across three facilities including 800 bed quaternary/tertiary care hospital, surgical short stay hospital and acute rehabilitation facility. Focus included design and implementation of case management model, improvement in operating room turn around time, standardization of nurse staffing ratios, systems of care for rehabilitation patients and evidenced based clinical redesign for key diagnoses

- Improved management and operations creating efficiencies and achieved targeted savings
- Improved ability of local health care authority to respond to health needs of the population in catchment area

Large Academic Hospital in Northeast: Project: Capacity Management Improvement Project

Manager overseeing implementation of all work plan strategies related to improving patient flow.

- Redesigned care management program including role clarification and education, redesigned bed management assignment and oversight processes, engaged physicians, developed monitoring and measurement tools and assisted in evaluation of software to support care management and bed tracking.
- Operational results achieved reduction in average length of stay, decreased emergency department holds and wait time, reduced extended length of stay patients and expedited patient placement to the appropriate level of care

Hartford Hospital, Hartford, Connecticut:

2000-2001

Director, Care Continuum Department

Responsible for process improvements in areas of pre-admission assessment of scheduled and emergent admissions, bed assignment and case management.

- Brought on-line a department of 85 FTEs with staff allocated to case management, bed management, social work, and pre-entry assessment
- Successfully implemented \$500,000 telephonic work center for pre-admission clinical and financial screening of pending admissions improving pre-surgical patient preparation
- Created a centralized process for allocation of beds including developing cutting edge software application now commercially available that supports the gathering of clinical as well as administrative information into patient placement process
- Integrated utilization management and discharge planning functions into the case manager role and improved coordination of care, efficiency of discharge planning and patient satisfaction

Hartford Physician Hospital Organization, Hartford, Connecticut

1998-2000

Director of Medical Management

Provided direction, along with Medical Director, to medical management team in the area of program development for patient management along the continuum of care

- Strengthened inpatient utilization management team producing a consistent workflow related to delegated agreements with payers
- Implemented provider-based community case management program where nurses worked in close collaboration with primary care physicians to manage high-risk enrollees in various managed Medicare plans with a positive impact on utilization of services, quality of care and member satisfaction

Hartford Hospital, Hartford, Connecticut

Senior Systems Analyst, RWJ Patient Centered Redesign Grant

Project Manager, Information Systems

Business Operations Administrator for Mental Health Division
Department Director, Department of Nursing
Instructor, Practical Nurse Education Program
Clinical Care Management, Department of Nursing

EDUCATION

University of Connecticut, Storrs, CT

Master of Business Administration, Healthcare Management

Master of Nursing, Nursing Administration

Bachelor of Science, Cum Laude, Nursing

Phi Kappa Phi

Sigma Theta Tau

Registered Nurse; State of Connecticut