Katie Joly, Sports Association Program Manager, Winner of the Hartford Business Journal Healthcare Heroes Award

The Public Relations Department is proud to announce that Katie Joly, MS, CTRS, Gaylord Sports Association Program Manager, was named a winner of the 2019 Hartford Business Journal Healthcare Heroes Award in the category of Healthcare Staff. The Health Care Heroes Awards identifies outstanding leaders in the healthcare industry who are the epitome of a “hero”. Whether they are companies, doctors, nurses, specialists or managers, join us in recognizing those who embody the word “hero” and prove their excellence in helping others.

Excerpt from Katie’s nomination, “Katie passionately leads others to embrace new challenges. She encourages everyone who comes through the program to reach beyond the barriers of disability to discover what is possible through adaptive sports. She keenly understands the immense positive physical, social and emotional impact that the program has on its participants.”

Katie will be recognized at the Healthcare Heroes event on December 12 at the Hartford Marriott. See Katie’s full nomination write-up on page 5.

Gaylord Purchases New Piece of FES Equipment Thanks to MSL Renewed Hope Foundation Grant

The Development Department is pleased to announce that thanks to a generous $30,000 grant from the MSL Renewed Hope Foundation, Gaylord was able to purchase a new piece of adaptive technology for inpatient called RT300 Supine by Restorative Therapies which is an in-bed functional electrical stimulation (FES) piece of equipment. The RT300 Supine provides leg and arm activity from a bed or bedside chair and is ideal for use in acute rehabilitation environments for early mobility. The RT300 Supine is mounted on an expandable cart that fits over and around hospital beds, allowing it to be brought directly up to the patient. Patients who have experienced a stroke, brain injury or spinal cord injury can benefit from this device. Our focus is to get the patient moving as early as possible in the patient’s stay to provide state-of-the-art rehab to prevent atrophy, sores, and loss of function.
Please Do Not Have Personal Packages Sent to Gaylord Hospital

With the holiday season upon us, we would like to remind staff not to have personal items delivered to Gaylord Hospital. We cannot accept responsibility for them and have recently had issues with outside companies leaving packages on the loading dock unprotected overnight. Please use your personal address or the address of someone you know who can accept the order for you. Some vendors now also offer drop sites where you can have your package delivered and you can pick it up at your convenience. Employees may refer to Gaylord Hospital Policy 2-200.2 SUBJECT: Purchasing Policy.

Think Possible: SCI Recovery Story

On July 28, 2019, Edwin Negron did a backflip while at a park with friends. But he landed on his head, resulting in a spinal cord injury. When he arrived at Gaylord, Edwin couldn’t move from the neck down. This is his amazing and determined story of recovery. Edwin’s wife Janisse carefully documented Edwin’s therapy, which she allowed us to use as part of this video. On September 28, Edwin walked out of Gaylord. Click here to watch a video about Edwin’s amazing recovery.

Next Casual for Causes: Friday, November 29

For a small donation, staff can dress casually for the day and help a local charity on Friday, November 29. Employees need a button or a Casual for Causes sticker to indicate their participation. Stickers can be purchased in the Cafeteria, Human Resources, Jackson 2 Outpatient, North Haven, Cheshire and the Servery. The cost of the sticker is $2. All proceeds benefit Cystic Fibrosis.

Ho, Ho, Ho! Santa Claus Is Coming to Gaylord

Santa and his elves invite the children (and grandchildren) of Gaylord employees to the Annual Children’s Holiday Party on Friday, December 6 in the Brooker Lobby from 3:30 p.m. to 5:30 p.m. Santa arrives at 4 p.m. Refreshments will be served. Help Santa out by bringing a wrapped gift for your child. Make sure that it is clearly labeled with the child’s first and last name. The gift should be brought to the Human Resources office anytime between Monday, December 2 and Friday, December 6.

ICARE. Do You?

Integrity, compassion, accountability, respect and excellence. Do you know of a Gaylord employee who lives these Gaylord values? If so, nominate an employee today for the 2020 Joseph A. Lindenmayer Employee of the Year award. Nomination forms are available with the registration and treating staff and Human Resources. Completed forms can be sent to Human Resources.

ICARE Calendar

November

- Employee Giving Donor Appreciation Event: November 21
- Flu Vaccination Deadline: November 29

December

- Brooker Tree Trimming Party: December 3
- Holiday Window Painting: December 4
- Employee Craft Fair: December 5
- Casual for Causes: December 6
- Santa Visit: December 6

January 2020

- Casual for Causes: January 20
- New Year’s Day: January 1
- Blood Drive: January 2
- Walter Camp Visit: January 17

February

- National Heart Month
- National Psychology Month

March

- National Nutrition Month
- National Professional Social Work Month

Think Possible: SCI Recovery Story

On July 28, 2019, Edwin Negron did a backflip while at a park with friends. But he landed on his head, resulting in a spinal cord injury. When he arrived at Gaylord, Edwin couldn’t move from the neck down. This is his amazing and determined story of recovery. Edwin’s wife Janisse carefully documented Edwin’s therapy, which she allowed us to use as part of this video. On September 28, Edwin walked out of Gaylord. Click here to watch a video about Edwin’s amazing recovery.
Gaylord would like to congratulate Cheryl Tansley, MS, CCC-SLP Level III Speech Therapist for inpatient therapy on being published in the most recent issue of *Aerodigestive Health* which is a Passy Muir publication. Please see her article on page 8 titled “Having Protocols for Clinical Use to Improve Patient Outcomes.” Cheryl was instrumental in Gaylord becoming a Passy Muir Center of Excellence, last year she was asked to be on a panel discussion for Passy Muir at a national conference and now Passy Muir has published her article. In all of these instances Cheryl has been a wonderful representative of Gaylord and has helped to advance our name.

**Gaylord Nurses Attend Rehab Nurses Conference in Ohio; Former Gaylord Patient Was Keynote Speaker**

Gaylord nurses Kristen Berg, Lydia Jandreau, and Janet DiBiaso recently attended the Annual Conference for Rehabilitation Nurses in Columbus, OH and meet the keynote speaker, Trisha Meili, also known as the Central Park Jogger. Trisha was a Gaylord patient and Traurig House resident in 1989. In 1996, she joined the Gaylord Board of Directors and in 2003, she published her book *I am the Central Park Jogger: A story of Hope and Healing.*

On April 19, 1989, Trisha set out for a run in New York’s Central Park, as she had many times before. Trisha was brutally attacked and found near death. Her attacker left Trisha with a traumatic brain injury that, along with multiple other injuries, led to physical and cognitive dysfunction. During her speech, Trisha told her inspirational story of how rehabilitation and all of the caretakers surrounding her helped her recover and reclaim her life.

The conference was underwritten by the Hank & Nancy Bartels Fund for education which is an endowment set up by former Board of Director Hank Bartels to help underwrite educational opportunities for staff and patients at Gaylord.
Important Deadlines Fast Approaching

**FLU VACCINATION DEADLINE**
**FRIDAY, NOVEMBER 29**

If you received the flu vaccine elsewhere, send a copy via email scanning to sbelcourt@gaylord.org or a hand delivered hard copy to the Infection Prevention Department, Brooker 108 by **Friday, November 29**. DO NOT FAX to Infection Prevention Department.

**WELLNESS POINTS DEADLINE**
**NOVEMBER 30**

Please note, employees and spouses covered by ConnectiCare, you have until **November 30, 2019**, to accumulate 100 Wellness Points in order to receive the 2020 premium incentive. You must complete both the biometrics and the health assessment for any points to be awarded. Those who do not reach 100 points will not receive the incentive for all of 2020. Please see the Wellness Grid on page 12. HR will communicate the new wellness plan structure through Anthem as we approach 2020 when more information is available.

Follow Gaylord Specialty Healthcare on Facebook!
www.facebook.com/gaylordspecialtyhealthcare

Gaylord is also on YouTube.
www.youtube.com/user/GaylordHealthcare

Check out Gaylord’s boards on Pinterest.
pinterest.com/gaylordhealth

Follow Gaylord on Twitter.
twitter.com/GaylordHealth

**STOP!**
PRESSURE INJURIES

1. **IS YOUR PATIENT AT RISK?**

2. **IMPLEMENT PREVENTATIVE STRATEGIES**

3. **DOCUMENT, DOCUMENT, DOCUMENT**

4. **REFER TO INTERNATIONAL PRESSURE INJURY GUIDELINES**

**Pressure Injuries**
Also known as bedsores, decubitus ulcers, & pressure ulcers

**Pressure Injuries**
are a major burden to patients, caregivers, the healthcare system & society

**WORLD WIDE PRESSURE INJURY PREVENTION DAY**
**NOVEMBER 21, 2019**

**Employee Giving**
Donor Recognition Event

**Thursday, November 21**
Chauncey Lecture Hall
2:30 pm - 5 pm

Refreshments, Snacks
and Giveaways

The Raffle will also be drawn
Katie Joly, MS, CTRS  
Gaylord Hospital Sports Association Program Manager  
Gaylord Specialty Healthcare  

Sometimes, the best medicine doesn’t come from a pill, a treatment … or even medicine at all.  

Over the last six years, Katie Joly, Program Manager of the Gaylord Sports Association, has improved the quality of life for hundreds of Connecticut and New England residents with disabilities by introducing them to the world of adaptive sports.  

The Gaylord Hospital Sports Association is a donor-funded program of the non-profit, rehabilitation-focused health system Gaylord Specialty Healthcare in Wallingford.  

The Sports Association provides adaptive sports and recreational opportunities for free or little charge to any adult with a permanent physical disability or visual impairment. The program also offers specialized programming for military veterans with PTSD or physical disabilities.  

A dynamic leader, Katie Joly has carefully nurtured and cultivated the Gaylord Sports Association to become Connecticut’s largest - and one of the Nation’s most widely recognized - adaptive sports program. She has improved the quality of life for countless people across the Northeast.  

Helping others “Think Possible”  

A leader in the care of spinal cord injuries, complex strokes, and traumatic brain injuries, Gaylord Specialty Healthcare prides itself on helping others “Think Possible”.  

To Katie Joly, “Think Possible” is a pledge that she takes to heart as she encourages others to remember that the only limitations in life are the ones we set for ourselves. She believes that everyone, regardless of their ability level, should have the opportunity to enjoy sports and recreational activities.  

Many of individuals who come to the Sports Association have suffered a devastating injury or illness as an adult and suddenly find themselves trying to cope with their new limitations. Often, they long to return to the activities in which they used to participate or try new activities. Katie Joly will stop at nothing to make that happen.  

Over the last four years, Joly has doubled the number of programs that the Sports Association offers to include adaptive waterskiing, golf, boccia, kayaking, alpine skiing, archery, paratriathlon, sled hockey, quad rugby, seated yoga, fishing, rock climbing, curling, tennis, and biking.  

She oversees nearly 150 events each year that are attended by hundreds of participating adaptive athletes. This wide range of events includes clinics, classes, discovery nights, special events and team practices. In addition to the Sports Association staff, Katie oversees approximately 13 coaches and instructors who are a vital part of the program. She has grown the Sports Association’s volunteer base by nearly 200 percent since her arrival.  

She also manages two competitive team sports, the Gaylord Sports Association Wolfpack Sled Hockey Team and the Gaylord Sports Association Jammers Wheelchair Rugby Team, who travel throughout the Northeast and the country to compete. Several Wolfpack team members also play on the USA National Paralympic team.
Within a year of taking on the position of Program Manager, Joly prepared the Sports Association for application to the USA Paralympic Excellence Program. Subsequently, the Sports Association achieved status as a Bronze Level Paralympic Sport Club, an accomplishment achieved by fewer than 20% of all adaptive sport clubs at the time.

**Fierce commitment to disabled veterans.**

Joly has gone above and beyond to serve Connecticut’s disabled veterans by developing and organizing the very popular SAVES (Sports Association Veteran Event Series) program specifically geared towards veterans with PTSD or a physical or visual impairment. Veterans can interact with other veterans and participate in a number of sports including archery, kayaking, waterskiing, adaptive cycling, a veteran’s golf class, and a challenge course event.

She also initiated a collaboration with CT Bass Nation and the Major Steven Roy Andrews Fishing Outreach program to offer disabled veterans fishing tournaments in CT and MA each year that continually grow in attendance.

**The “will” to help others find a “way”.**

Joly goes above and beyond the call of duty to make sure that anyone interested in participating in a sport is able to do so, no matter how profound their disability might be. She is a master of creating adaptations to compensate for a person’s limitation to enable them to participate fully in any activity.

In response to an identified need to help wheelchair-bound golfers more fully participate in adaptive classes and tournaments, she recently initiated the purchase of a ParaGolfer, an all-terrain wheelchair that can raise users into a standing position to fully execute a golf swing.

She helps organize the Gaylord Gauntlet 5k Trail and Obstacle Run, an annual event that draws a thousand runners to the Gaylord campus to raise funds for the adaptive sports program. Each year, she selects one wheelchair-bound adaptive athlete to represent the Sports Association as the Gauntlet’s “Featured Adaptive Athlete”. She spends countless hours building a support team and an effective plan to help the adaptive athlete conquer the grueling course with custom adaptations to allow them to be successful (i.e. using belays and harness to help them climb over a 10-foot wall, using a boogie board to crawl through mud obstacle, etc.).

**A forward-thinking leader.**

Joly well-understands the key roles that fundraising and public relations plays in her program’s success.

The Sports Association programs are provided at no cost (some have a minimal registration fee) to all participants, thanks to private donations and grants. Donor support is also vital to the purchase of specialized equipment that enables even the most profoundly disabled athlete to participate. Though she works closely with the fundraising team at Gaylord, she never hesitates to initiate her own opportunities to find and apply for new grants herself.

She adeptly leverages social, print and broadcast media to educate the public about this oft-overlooked faction of the sports world. With her leadership, the Sports Association has garnered over a hundred feature stories in major newspapers, television vignettes and other outlets over the last three years and the exposure has, in turn, attracted many new athletes, donors and volunteers.

This year, her efforts were essential in helping secure feature stories on Gaylord Sports Association's
athletes in several prominent national publications including *People Magazine* and *Men’s Health*.


**Getting others back into the “game of life”**

Katie passionately leads others to embrace new challenges. She encourages everyone who comes through the program to reach **beyond the barriers of disability to discover what is possible through adaptive sports**. She keenly understands the immense positive physical, social and emotional impact that the program has on its participants.

An avid biker and skier herself, she says, "I know what being involved in sports does for my own quality of life. To be able to share it with someone else is an amazing opportunity."

“To be able to see a person respond and say, ‘Wow, I thought I couldn’t do that again and here I am waterskiing,’ … or to hear a family say, ‘We’ve never seen our son smile so much’ is why I do what I do every day."

Thank you for your consideration of Katie Joly as a “Health Care Hero” for her commitment to providing adaptive sports and recreation opportunities to persons with disabilities throughout the Northeast.
Gaylord Specialty Healthcare was founded in 1902 as a tuberculosis sanatorium and has grown into a 137-bed long-term acute care hospital (LTACH) facility. Within this facility, specialties focus on the medical management and rehabilitation of patients who have suffered acute illness or a traumatic accident. Because of this focus, programs have been established in Pulmonary, Spinal Cord Injury, Traumatic Brain Injury, and Stroke as major diagnostic areas to provide intervention. Care of these medically complex patients is provided by a multidisciplinary team, including physicians, nurse specialists, respiratory care practitioners, radiology technicians, therapists (physical, occupational, and speech-language pathology), pharmacists, and care managers, for both adolescents and adults. The medically complex populations being seen also may include those patients with chronic obstructive pulmonary disease (COPD), restrictive lung disease, chronic emphysema, obstructive sleep apnea, bronchitis, asthma, respiratory complications from morbid obesity, and neurological disorders. Additionally, complex diagnoses also include muscular dystrophy and post-polio syndrome, as well as ventilator dependence due to illness or injury. Because of the wide range and complexity of the diagnoses being treated, a multidisciplinary team is essential to provide best outcomes.

As with many facilities in today’s competitive healthcare domain, it is a struggle to balance patient satisfaction with decreasing length of stays, all while supporting better patient outcomes. Various approaches to patient care have attempted to address the many issues for these patients. The approaches have proven successful, not only at improving patient satisfaction rates, but at expediting ventilator weaning processes and decreasing patient length of stay. The multidisciplinary approach to the care of these complex patients included the development of an Early Ventilator Mobilization Program, increased Passy Muir® Valve use, and Tracheostomy and Ventilator Rounds.

Research has shown that patients with tracheostomy and mechanical ventilation are particularly vulnerable due to the diminished options for mobility, communication, and participation in their care (Freeman-Sanderson, Togher, Elkins, & Kenny, 2018). Not only can this impact a patient’s motivation and psychological state, but immobility through bedrest has been shown to cause a rapid increase in muscle atrophy which may further complicate recovery (Adler & Mallone, 2012). To combat these issues, the implementation of several protocols may assist with improving patient care, satisfaction, and outcomes.

Early Ventilator Mobilization Program

Early Ventilator Mobilization (EVM) is an initiative designed to increase activity amongst the patient population with ventilator-dependence. There is no evidence that bedrest has any therapeutic value and often worsens outcomes (Adler & Malone, 2012; de Jonghe, Lacherade, Sharshar, & Outin, 2009; Forte, 2009).

During bedrest, such as occurs in an intensive care unit (ICU), it has been reported that significant changes can occur in both body mass and strength. In his 2009 presentation, Forte discussed that:

- Muscle mass decreases by up to 5% per week.
- Skeletal muscle strength decreases as much as 20% in the first week.
- An additional 20% loss may occur each subsequent week.
- Weakened muscles generate increased oxygen demand.

The initiative has led all disciplines to have more accountability for mobilizing patients and improving outcomes.
Even high intensity bed exercises do not counteract the adverse effects of bedrest. To address these issues with patients who are ventilator-dependent, EVM is a program designed for the physical therapist (PT), occupational therapist (OT), speech-language pathologist (SLP), respiratory therapist (RT), and nursing to be responsible parties in the documentation and mobilization of patients with ventilator-dependence. To increase mobilization, this program includes supine therapeutic exercise, bed mobility, seated balance activities, standing with a walker with assistance, transfers, and upright positioning for meals. All these activities may take place prior to a patient’s ability to be out of bed for walking or moving in the hallways.

The selection criteria for patients, who are candidates for EVM, may be those patients who are:

- Minimally able to participate with therapy.
- Stable hemodynamically.
- Receiving acceptable levels of oxygen.
- Medically stable (sufficient perfusion to maintain normal organ function).

Additionally, acceptable parameters for determining EVM candidates include:

- Heart rate < 110 beats/minute at rest.
- Mean arterial blood pressure between 60 and 110 mmHg.
- \( \text{FiO}_2 \) (Fraction of inspired oxygen) < 60%.
- Maintenance of oxygen saturation > 88% with activity.

The initiative has led all disciplines to have more accountability for mobilizing patients and improving outcomes. This program allows the team to track performance and to have the ability to adjust treatment plans based on trends seen in a patient’s performance. To increase staff communication, a shared documentation site was created to note patient performance with increased activity, including frequency and tolerance of mobilization, and all parties are responsible for the documentation related to the patient’s mobilization. In addition, signs were developed for posting on the doors of EVM candidates to remind all staff to participate in the program and to provide appropriate documentation.

**Increasing Use of the Passy Muir® Valve**

The Passy Muir® Valve (PMV®) is a speaking Valve that is placed on the end of a tracheostomy tube or in-line with ventilator circuitry. It allows air intake to continue though the tracheostomy tube during inhalation; however, air is redirected out through the upper airway during exhalation. The Valve closes at the end of inspiration and remains closed throughout exhalation, allowing airflow out of the nose and mouth, providing readiness for speech production. Studies have supported that wearing a PMV improves true vocal cord closure; restores voicing and communication; restores smell and taste; improves swallowing, by decreasing aspiration risk and restoring subglottic pressure; improves coughing; restores upper airway sensation; restores PEEP, alveolar recruitment to minimize atelectasis; increases gas exchange and improves saturation levels (O’Connor, Morris, & Paratz, 2018). It may also expedite the time to ventilator weaning and tracheostomy tube decannulation by rehabilitating respiratory musculature, increasing confidence and motivation, and potentially decreasing the need for sedating medications (Freeman-Sanderson et al., 2018; Kinneally, 2018; Sutt, Antsey, Caruana, Cornwell, & Fraser, 2017).

Healthcare facilities need to develop the right team, so that all staff are on the same page. This can be done by improving the education of staff and providing research to perspective team members, through readings, demonstrations, and webinars. Adopting a “Ventilator Bundle” order set, where the physician chooses the appropriate bundle, allows for physical therapy, occupational therapy, and speech therapy orders for Valve use to generate automatically. Having an order set also reduces the amount of time it would take to obtain the orders to initiate a PMV assessment and assists with getting the team onboard early in the process.

The respiratory and speech departments work collaboratively during both the evaluation and treatment sessions to improve troubleshooting and education. Respiratory and speech therapists work to place the PMV in-line for new patients, who are on a ventilator, usually within the first 24 hours from admission. A team assessment benefits the patient and facilitates success of Valve use because each person contributes a different aspect to the evaluation. Respiratory therapists have a primary focus on the tracheostomy tube type and size, proper cuff management, settings on the ventilator, patient’s vital signs, and safe and proper management of the ventilator and alarms during use of the Valve. The speech-language pathologist focuses on the patient’s ability to voice, their speech and language function, access to communication, cognition, and swallowing. Throughout use of the Valve, all team members maintain vigilance on the patient’s vital signs and status during use.

*continued next page*
Many patients and their loved ones have not heard their voice in several days or even weeks but may with use of the Valve. Communicating with family members, significant others, and staff improves a patient’s mood, psychological state, and motivation (Freeman-Sanderson et al., 2018). Lastly, to assist with communicating among the multidisciplinary team members, speech pathology, respiratory therapy, and nursing share a documentation site to note patient tolerance and progress with PMV use.

Establishing Tracheostomy and Ventilator Rounds

Developing a Tracheostomy and Ventilator Rounds Team as a part of the protocol for the care of patients with tracheostomy and mechanical ventilation is another way to enhance team communication and improve the standard of care. This team includes pulmonologists, hospitalists, respiratory therapists, speech pathologists, registered nurses, dieticians, pharmacists, and physical therapists. The Team coordinates all care of patients who are dependent on a ventilator or require use of a tracheostomy tube. Typically, meetings are held one time per week and may take up to an hour, depending on census. The team leader, often an RT, introduces each patient and the team members add to the discussion. Some rounds will incorporate a closed-circuit monitor to review chest x-rays, lab values, and medications, as needed.

In 2016, Gaylord expanded this process to weekly tracheostomy rounding on the rehabilitation and pulmonary floors. Having tracheostomy and ventilator rounds, with participation of a multidisciplinary team, has expedited decannulations (when appropriate) and facilitated better communication amongst the team regarding the plans and goals for the patients. Rounds also ensure the discharge plan is on target by regularly discussing the patients’ goals. Studies have shown that implementing Tracheostomy and Ventilator Round Teams improve recovery by increasing the speed at which the ventilator wean process happens, improving the quality and safety of patient care, ensuring early patient mobility, and supporting early communication (Speed & Harding, 2013; Yu, 2010).

Impact of Change

Challenges to implementing new protocols must be addressed to improve the transition into new processes. It is important to monitor change and conduct Quality Improvement (QI) studies to ascertain the impact. The biggest financial impact realized at Gaylord was seen in the decrease of ventilator days. A ventilator day at the facility costs an average of $1,400. Ventilator days were decreased by an average of 4.33 days. This translated to a cost savings of $6,062 per patient. From 2013-2015, an average of 65 patients were weaned from the ventilator per year. Decreasing the days on a ventilator for this population by 4.33 days translated to a savings of $394,000 per year.

Additional improvements were seen in the consistency of weaning rates and occurrence of decannulation. For this patient population from 2012 - 2017, ventilator weaning rates improved by an average of 6.8% and decannulation rates increased by an average of 447.4 patients per year following implementation in 2012 (see Figure 1).

When these protocols and plans were implemented, patient satisfaction improved, ventilator weaning increased, more patients were decannulated, and length of stay decreased. By working together as a team and implementing protocols designed to improve collaboration and accountability on the part of all staff members, the multidisciplinary team becomes a leader in the care of medically complex patients.
References
Speed, L., & Harding, K. E. (2013). Tracheostomy teams reduce total tracheostomy time and increase speaking valve use: A systematic review and meta-analysis. Journal of Critical Care, 28(2), 216.e1-10. doi:10.1016/j.jc rc.2012.05.005

Using the Passy Muir® Valve in Conjunction with High Flow Oxygen Therapy

Melissa Gulizia, BS, RRT
Cheryl Wagoner, MS, CCC-SLP, BCS-S

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Our facility, Madonna Rehabilitation Hospitals, utilizes warm mist humidification during the care of patients with tracheostomy. As innovation is one of the facility’s core values, the Vapotherm Precision Flow device for High Flow Oxygen Therapy (HFOT) was introduced at Madonna in January 2016. This technology allows for delivery of gas flow rates of up to 40 LPM (liters per minute) without discomfort or damage to airway epithelia (Lindenauer, Stefan, Shieh, Pekow, Rothberg, & Hill, 2014). Key clinical benefits of the Vapotherm Precision Flow device include:

- Humidification at body temperature and saturated – 37°C.
- Delivering consistent, energetically stable, vapor phase humidity.
- Rainout prevention.
- Mitigation of contamination via humidity.
- Mitigation of stoma irritation.
- Better secretion mobilization.

continued next page
# 2019 Step up to Wellness Program

Gaylord employees and covered spouses earn 100 points through the activities below between **1/1/19-11/30/19** to earn a $720 premium reduction in 2020. Check your status throughout the program on the Rewards Portal: log in to ConnectiCare.com>Care Dashboard> My Health>Rewards>Preferred Premium Program. When you see 100 points and fireworks you have earned the reward!

<table>
<thead>
<tr>
<th><strong>Assess Your Health</strong></th>
<th><strong>Meet 2 out of 3 Healthy Outcomes</strong> or <strong>Healthy Interventions</strong> Alternatives to Healthy Outcomes</th>
<th><strong>Choose between completing your screening onsite at one of three screening opportunities OR with your primary care physician and submit via biometric attestation.</strong></th>
<th><strong>Complete 1+2 by 6/30 and earn a $50 Visa Reward Card and a Wellbox.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Complete Biometric Screening</strong></td>
<td><strong>Blood Pressure in Healthy Range</strong></td>
<td>15 pts</td>
<td>Complete at least 3 coaching sessions. Suggested start by 10/1/2019 to meet the 11/30/2019 deadline’</td>
</tr>
<tr>
<td><strong>2. Complete Online Health Assessment</strong></td>
<td><strong>Glucose in Healthy Range</strong></td>
<td>15 pts</td>
<td>Complete at least two meaningful contacts with a ConnectiCare Nurse Manager if identified as eligible. Suggested start by 10/1/19 to meet the 11/30/19 deadline.</td>
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<tr>
<td><strong>3. Physical Exam OR OB/GYN</strong></td>
<td><strong>Waist Circumference in Healthy Range</strong></td>
<td>30 pts</td>
<td>Complete at least two meaningful contacts with a ConnectiCare Nurse Manager if identified as eligible. Suggested start by 10/1/19 to meet the 11/30/19 deadline.</td>
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<tr>
<td><strong>4. Attest to being Tobacco Free or participate in QuitCare</strong></td>
<td></td>
<td>10 pts</td>
<td>Options: Submit attestation for 8 of 12 weeks attendance at Weight Watchers; attend 3 visits with a Registered Dietitian; achieve 5% weight loss in 2019.</td>
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**In Healthy Outcomes Program, participants either meet 2 out of 3 healthy biometric values or complete a healthy intervention. Complete biometrics onsite OR submit attestation from provider. You may work with your provider to improve your outcomes and resubmit values within range.**

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**In Healthy Outcomes Program, participants either meet 2 out of 3 healthy biometric values or complete a healthy intervention. Complete biometrics onsite OR submit attestation from provider. You may work with your provider to improve your outcomes and resubmit values within range.**

*ConnectiCare’s wellness reporting system will capture screenings and exams within the given look back period for ConnectiCare members. If you had care prior to becoming a ConnectiCare member, please use the Preventive Care Attestation Form to receive credit for compliance.*
## 2019 Step up to Wellness Program

Earn additional rewards for completing healthy activities.

<table>
<thead>
<tr>
<th>Category</th>
<th>Rewardable Activities</th>
<th>Date Range</th>
<th>Reward Value</th>
<th>Notes</th>
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</thead>
<tbody>
<tr>
<td><strong>Healthy Activities</strong></td>
<td><strong>Colorectal Cancer Screening</strong></td>
<td>1/1/2019 – 11/30/2019</td>
<td>$50 VISA reward card</td>
<td>MUST BE 50 OR OLDER AND HAVE GAP IN CARE TO QUALIFY*</td>
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<tr>
<td></td>
<td>• Colonoscopy: past 10 yrs. OR</td>
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<td>Receive reward as long as you close screening gap by deadline.</td>
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<td>• Flexible Sigmoidoscopy: past 5 yrs. OR</td>
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<td></td>
<td>• Cologuard: past 3 years OR</td>
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<td></td>
<td>• FIT Test: past 12 months</td>
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<td></td>
<td><strong>Physical Activity Challenge</strong></td>
<td>3/5/2019 – 5/27/2019</td>
<td>$50 VISA reward card</td>
<td>Complete the 12 week requirements of the online challenge focused on physical activity OR sync your Fitbit to meet the goal individually.</td>
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<td></td>
<td>OR Individual Fitbit Tracking</td>
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<td></td>
<td><strong>Five to Thrive Challenge</strong></td>
<td>7/18/2019 – 10/9/2019</td>
<td>$50 VISA reward card</td>
<td>Complete the 12 week requirements of this online challenge focused on fruit and vegetable consumption.</td>
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</tbody>
</table>

Log in to the Rewards Portal for program details: ConnectiCare.com>Care Dashboard>My Health>Rewards>Healthy Activities.

* Individuals who are at least 50 years of age, who have not engaged in one of the referenced colorectal screening methods within the recommended lookback period, will be rewarded for engaging in one of the above colorectal screening methods by 11/30/2019.

Regular Preventive Health Examinations are recommended for both males and females. Your primary care provider knows you and your medical history, and can be the best partner that you have in keeping you healthy. An annual preventive exam is covered by ConnectiCare at 100% with no out of pocket costs or co-payments when coded as a preventive health exam by your provider. The exam can be scheduled any time during 2019, which means that you do not have to wait 12 months from the date of your exam in 2018 to schedule your 2019 preventive health exam. Follow-up visits may incur additional costs. Please refer to your benefit summary for a list of covered services under your specific plan.

If you have any questions, please contact Nicki Kurash at 860-674-5441 or NKurash@connecticare.com.