

# Care Transitions Coach COVID ED Diversion Program

Eddy Visiting Nurse and Rehab Association  
St. Peter's Health Partners Acute Care  
St. Peter's Health Partners Medical Group

February 3, 2022

**Statewide Hospital-Home Care Collaborative  
for COVID-19 and Beyond**



Support for this statewide collaborative training is provided through a generous grant from the Mother Cabrini Health Foundation.

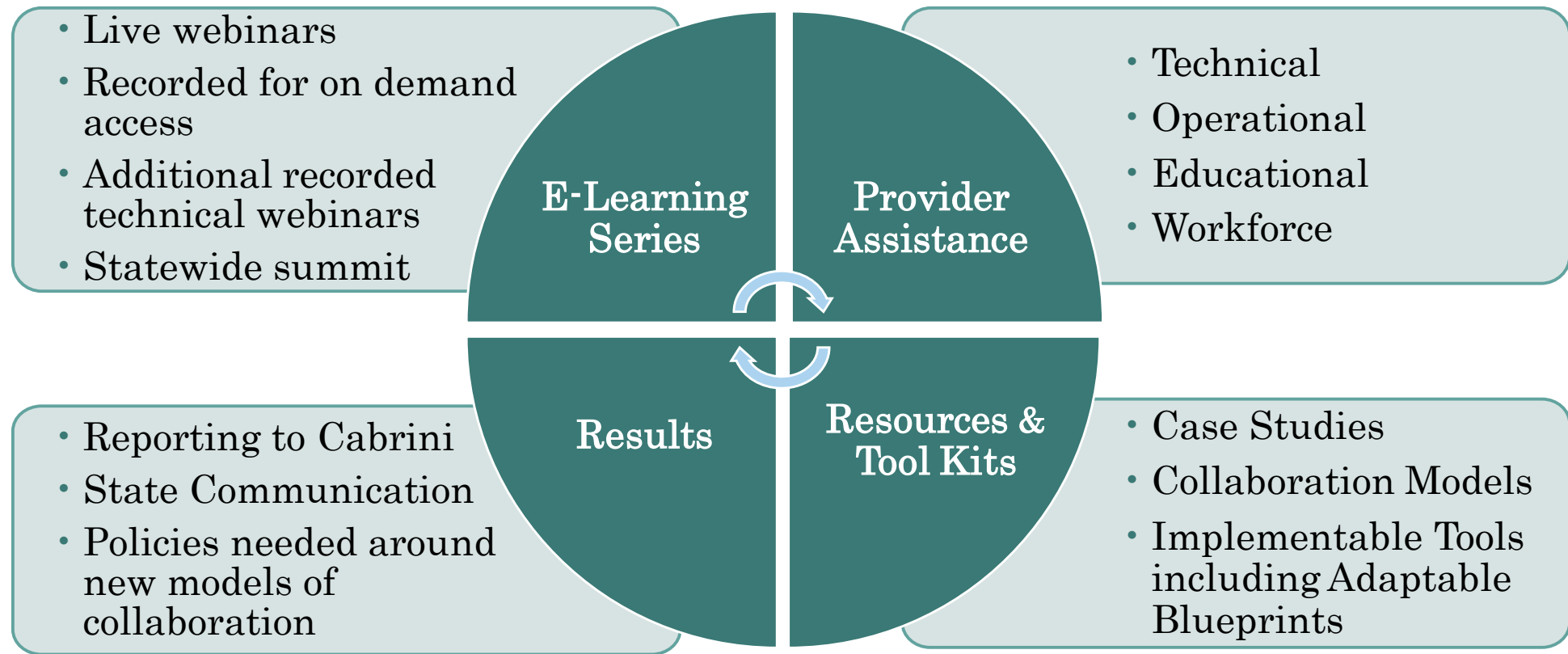
# Acknowledgement

Support for this statewide initiative is provided through a grant by the Mother Cabrini Health Foundation.

Thank you to the Foundation for its generous support.

# Overall Goal and Components of Grant

Creation of a Hospital-Home Care Collaborative to advance statewide systemic collaboration in pre-acute and post-acute care for COVID and beyond.





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HCANYS, HANYS & Iroquois Healthcare Association  
Hospital & Home Care Collaboration  
February 3, 2022



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# Care Transitions Coach

## COVID ED DIVERSION PROGRAM

EDDY VISITING NURSE & REHAB ASSOCIATION  
ST. PETER'S HEALTH PARTNERS ACUTE CARE  
ST. PETER'S HEALTH PARTNERS MEDICAL GROUP



# Introductions

- Dr. Dalfino is board certified in Internal Medicine and was the Chief of Hospital Medicine at SPHP from 2008-April 2021, at which time she became Chief Medical Officer for the Acute Care Hospitals (St. Peter's, Samaritan, Albany Memorial Hospitals).

# Introductions

Michelle Mazzacco, MBA, Interim President, SPHP  
Continuing Care Network (home health, hospice, PACE,  
DME, Infusion, Coach, telehomecare, PERS, home based  
primary care, palliative care (inpatient & community based),  
ALS Center, 7 skilled nursing facilities (4 with subacute  
rehab, 1 greenhouse model), 5 independent senior living  
communities, 2 memory care residences, 3 adult  
homes/enriched housing, and Eddy Alzheimer's Services

# Introductions

Susan Warren, RN

Supervisor, Eddy VNRA Coach Program

Several years' experience as a hospital care coordinator and management of an internal medicine practice.

(Credits to Suzanne Defruscio, RN Supervisor of the Coach Program when this hospital/home care collaboration occurred)



# St. Peter's Health Partners Overview

## St. Peter's Health Partners Promise

**St. Peter's Health Partners**  
**is a health organization** that  
provides coordinated **ease of access**  
and **ease of use** across a full  
continuum of health providers,  
services and facilities for the Capital  
Region and northeastern New York.

We do this because we provide  
care for *all* in body, mind and spirit,  
demonstrating that:

**We Listen**

**We Partner in Achieving  
Health Goals**

**We Make It Easy**



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# About St. Peter's Health Partners

People-centered, integrated care is at the heart of St. Peter's Health Partners (SPHP). Our breadth of services across the continuum of care uniquely positions us to be the region's leader for quality, efficiency, and innovation in delivering compassionate health care and senior services.

## OUR SERVICES

- Advanced Medical Care
- Inpatient Acute Care and Rehabilitation
- Outpatient Rehabilitation
- Urgent Care
- Primary and Specialty Physician Practices
- Adult Day Programs
- Alzheimer's Services
- Enriched Housing/Adult Homes
- Home Care
- Hospice
- Independent Senior Living
- Nursing Homes
- PACE (Program of All-Inclusive Care for the Elderly)



### ABOUT US

Nearly  
**11,000**  
Employees

**185+**  
Locations

**10**  
Counties



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# Background

- In December of 2020, the COVID-19 pandemic was having a major impact on our communities, and our hospitals were reaching surge capacity.
- Less “regular” hospital patients, more COVID patients, more in the ICU, more on vents, long LOS.
- How do we discharge COVID patients from the ED and keep them home?
  - Emergency Departments have not historically discharged patients on oxygen.



# Dr. Eric Coleman's Care Transition Model

*(modified w/RN trained by a  
Certified Chronic Disease  
Self-Management Trainer)*

**NOTE:** THIS IS NOT A CHHA Service.  
No hands-on care provided. No OASIS.

## Goal

*To improve the patient's health and well being and reduce rehospitalizations.*

The Care Transitions Model is a four-week program that encourages and supports the patient to take a more active role in his/her health needs.

## Focusing on the 4 pillars of care:

1. Medication reconciliation (sent to PCP);
2. Primary care provider and Specialist follow-up in a timely manner;
3. Use of patient centered health record that helps guide the patient through the care process;
4. Patient understanding of “red flag” indicators of worsening condition and appropriate next steps.

## And:

- Ensures patient has transportation to appointments
- Assess for other needs e.g. food insecurities, inability to afford or obtain medications, etc.



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# Care Transitions Coach Program History

- Started in 2010 – funding from Eddy Foundation.
  - Later value-based contracts with BSNENY, MVP and CDPHP
- Serving 2,000 a year.
- Targeting chronically ill patients (HF, COPD, Pneumonia, Diabetes, etc.) at high risk for readmission.
- Readmissions previously ranged 20-30%, now 5-10%.
- Adapted during DSRIP for Medicaid patients, including those with behavioral health / substance abuse needs.
- In 2020, adapted for high-risk OB patients for BSNENY.
- In 2021, adapted for high-risk ortho patients (MC FFS).



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# Collaboration and Approach

The Coach Team Redefined- Stepped up to meet the challenge!

For this presentation we have divided our process and results into the

- December 2020 - July 2021, alpha Covid surge
- August 2021 – November, delta Covid surge
- December 2021 – present, omicron Covid surge



The ED team developed criteria for who would be referred and how they would be referred.

# Alpha Surge Criteria



## ASSESS FOR HYPOXIA

1 min walk in place: Patient walks in place briskly for 1 min continuously.

1 min sit to stand: Patient continuously performs a sit to stand at the bedside for 1 min. Inability to perform is failure.

## ADMISSION/DISCHARGE PLAN

- Exertional SpO2 < 90% → Admit
- Exertional SpO2 90-92% and COVID symptoms > 7 days → Admit
- Exertional SpO2 90-92% and COVID symptoms days 1-6 or
- Exertional SpO2 92-94% →
  - D/C with PCP follow-up (Teams spreadsheet)
  - Oximeter & thermometer
  - Coach program



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## 1st Surge (Alpha)

## Criteria for Eligibility

Ages 18 yo and over

High risk for readmission

Comorbidity

Oxygen saturation less than 94% while in ED

Patients must have a Primary Care Provider



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# Different Referral Process

## Original Coach Program:

- Screeners in each hospital
- Proactively identify patients who can benefit
- Hospital staff also refer
- Screener obtains patient agreement

## Coach COVID ED Diversion:

- ED team identifies patients
- ED team adds to Teams spreadsheet
- Coach Team monitors the Teams spreadsheet (7 days a week) and follows up with patients
- Medical Group also monitors Teams spreadsheet for other follow-up



# Microsoft Teams Spreadsheet



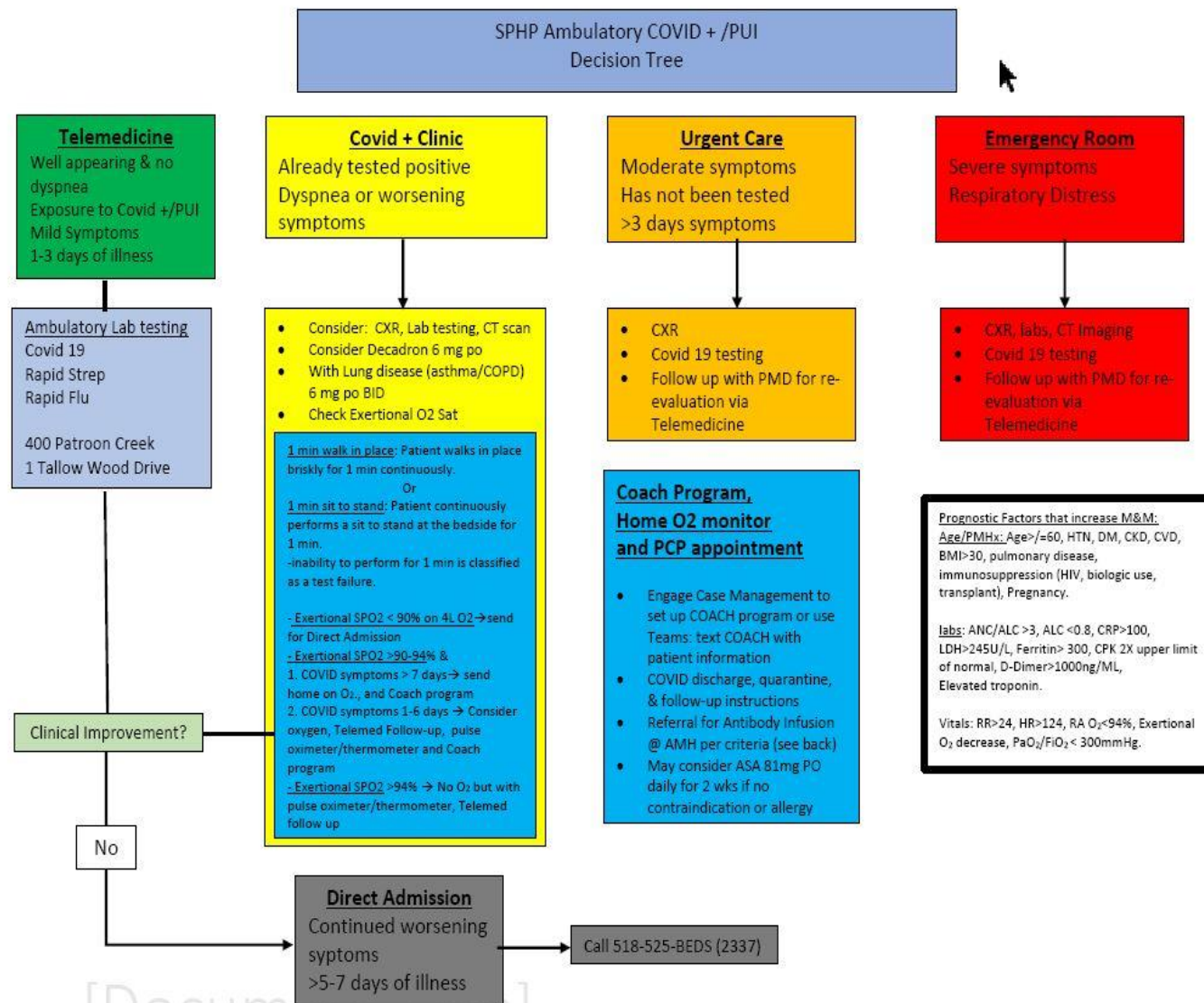
Today's Date Enter Date (MM/DD/YYYY)	Site of Referral Dropdown	Inpatient Unit Only Entered by C3 / Inpatient	Patient Name Free Text (Last Name, First Name)	Patient Date of Birth Enter Date (MM/DD/YYYY)	Patient / Contact Person Phone Number ###-###-####	COVID Status Dropdown	Discharge with Oxygen	Risk Score	Primary Care Provider Dropdown List	Medical Group - Do Not Complete - Automatically Populates	Eligible for COVID Coach Program
1/24/2022	SPH Emergency Department					Positive			Mumtaz, Choudhry (MD)	SPHPMA	Eligible: Please Complete Yes/No in Next Column
1/24/2022	AMH Emergency Department					Unknown	No		Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	SPH Emergency Department					Unknown	No		Specialty Appointment Required	Complete Specialty Dropdown	Eligible: Please Complete Yes/No in Next Column
1/24/2022	SAM Emergency Department					Unknown	No		Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	AMH Emergency Department					Unknown	No		Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	SPH Emergency Department					Unknown	No		Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	SPH Emergency Department					Unknown	No		Specialty Appointment Required	Complete Specialty Dropdown	Eligible: Please Complete Yes/No in Next Column
1/24/2022	AMH Emergency Department					Unknown	No		Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2021	SAM Emergency Department					Negative			Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	SPH Emergency Department					Unknown			Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	SPH Emergency Department					Unknown	No		Specialty Appointment Required	Complete Specialty Dropdown	Eligible: Please Complete Yes/No in Next Column
1/24/2022	AMH Emergency Department					Unknown			Needs a PCP		
1/24/2021	SAM Emergency Department								Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	SPH Emergency Department					Negative	No		Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	AMH Emergency Department					Negative			Needs a PCP	Refer to SPHPMA	Not Eligible, No PCP
1/24/2022	SPH Emergency Department					Positive	No		Not Listed (Not MA)	Not Listed (Not MA or CCP)	Eligible: Please Complete Yes/No in Next Column
1/24/2022	SPH Emergency Department					Unknown	No		Specialty Appointment Required	Complete Specialty Dropdown	Eligible: Please Complete Yes/No in Next Column
1/24/2021	SPH Emergency Department					Unknown			Specialty Appointment Required	Complete Specialty Dropdown	Eligible: Please Complete Yes/No in Next Column



# Coach Intervention: 1<sup>st</sup> Surge (Alpha)

- **Hospital:** Discharged from ED on oxygen, with pulse ox and thermometer, zone sheet, educational material
- **In-Home Visit Replaced** with telehealth or phone call encounter; same day as discharge or next morning
- **Call Frequency Increased** from weekly for 4 weeks to daily for 14 days, including weekends
- **24/7 On Call RN added** (NEW: patients were scared)
  - Review of oximeter use and when to report.
  - Educate patient/family on COVID zone sheet and CDC general information
  - Ensure f/u PCP/Specialist visit/telemedicine encounter is scheduled timely
  - PCP Interventions: Same day telehealth PCP visit. Might start on dexamethasone or AB, coordinate MAB treatment.

# SPHP Primary Care Provider Algorithm

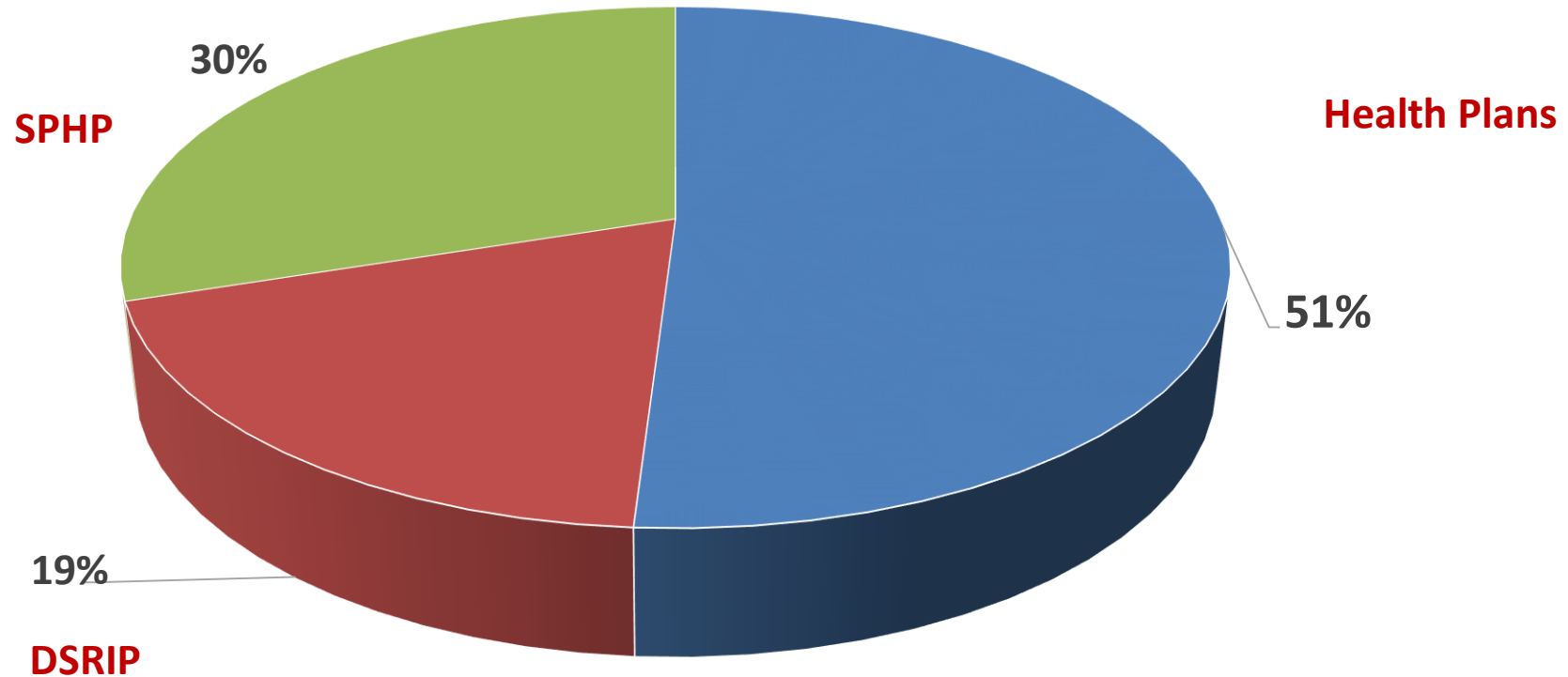


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Only one payer declined coverage (health plan case managers were calling members). However, due to our hospital workforce shortages, and the need to assure our ED physicians of a safe discharge plan, we continued to provide the service at no cost to the patient.

# Payment Sources



# COVID Zone Sheet



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INNOVATIVE  
Health Alliance  
of New York, LLC

## COVID-19

Every Day	<ul style="list-style-type: none"> <li>• Wash hands often.</li> <li>• Take your temperature.</li> <li>• Avoid touching your eyes, nose, and mouth.</li> <li>• Stay 6 feet away from others whenever possible.</li> <li>• Avoid sharing household items.</li> <li>• Clean household surfaces that are touched often.</li> <li>• Avoid contact with a person positive for COVID-19 or with someone who is waiting for test results.</li> </ul>
Green Zone	<p><b>ALL CLEAR! This zone is your goal.</b></p> <ul style="list-style-type: none"> <li>• No fever</li> <li>• No cough or sore throat</li> <li>• Easy breathing</li> <li>• No contact with a person positive for COVID-19 or with someone who is waiting for test results.</li> </ul>
Yellow Zone	<p><b>CAUTION! This zone is a warning!</b></p> <p>Call your home care nurse at _____, or call your doctor at _____.</p> <ul style="list-style-type: none"> <li>• Temperature more than 99.5°F (37.5°C)</li> <li>• New cough or sore throat</li> <li>• Contact with a person positive for COVID-19 or with someone who is waiting for test results</li> </ul>
Red Zone	<p><b>EMERGENCY Zone!!</b></p> <p>Call your doctor at _____ for direction.</p> <ul style="list-style-type: none"> <li>• Temperature of 101°F (38.3°C) or greater</li> <li>• Shortness of breath</li> <li>• Worsening cough or sore throat</li> </ul>

ERD-37 March 2020



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# Steps to help prevent the spread of COVID-19 if you are sick

**FOLLOW THE STEPS BELOW:** If you are sick with COVID-19 or think you might have it, follow the steps below to help protect other people in your home and community.

## Stay home except to get medical care

- **Stay home:** People who are mildly ill with COVID-19 are able to recover at home. Do not leave, except to get medical care. Do not visit public areas.
- **Stay in touch with your doctor.** Call before you get medical care. Be sure to get care if you feel worse or you think it is an emergency.
- **Avoid public transportation:** Avoid using public transportation, ride-sharing, or taxis.



## Separate yourself from other people in your home, this is known as home isolation

- **Stay away from others:** As much as possible, you should stay in a specific "sick room" and away from other people in your home. Use a separate bathroom, if available.
- **Limit contact with pets & animals:** You should restrict contact with pets and other animals, just like you would around other people.
  - Although there have not been reports of pets or other animals becoming sick with COVID-19, it is still recommended that people with the virus limit contact with animals until more information is known.
  - When possible, have another member of your household care for your animals while you are sick with COVID-19. If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with them. See COVID-19 and Animals for more information.



## Call ahead before visiting your doctor

- **Call ahead:** If you have a medical appointment, call your doctor's office or emergency department, and tell them you have or may have COVID-19. This will help the office protect themselves and other patients.



CS19118-4 05/06/2019

## Wear a facemask if you are sick

- **If you are sick:** You should wear a facemask when you are around other people and before you enter a healthcare provider's office.
- **If you are caring for others:** If the person who is sick is not able to wear a facemask (for example, because it causes trouble breathing), then people who live in the home should stay in a different room. When caregivers enter the room of the sick person, they should wear a facemask. Visitors, other than caregivers, are not recommended.



## Cover your coughs and sneezes

- **Cover:** Cover your mouth and nose with a tissue when you cough or sneeze.
- **Dispose:** Throw used tissues in a lined trash can.
- **Wash hands:** Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.



## Clean your hands often

- **Wash hands:** Wash your hands often with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- **Hand sanitizer:** If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.
- **Soap and water:** Soap and water are the best option, especially if hands are visibly dirty.
- **Avoid touching:** Avoid touching your eyes, nose, and mouth with unwashed hands.



## Avoid sharing personal household items

- **Do not share:** Do not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people in your home.



[cdc.gov/COVID19](https://www.cdc.gov/COVID19)



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# CORONAVIRUS DISEASE 2019 (COVID-19)



## 10 Ways to Manage Respiratory Symptoms at Home

If you have fever, cough, or shortness of breath, call your healthcare provider. They may tell you to manage your care from home. Follow these tips:



**Stay home** from work, school, and away from other public places. If you must go out, avoid using any kind of public transportation, ride sharing, or taxis.



**Wash your hands often** with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.



**Monitor your symptoms** carefully. If your symptoms get worse, call your healthcare provider immediately.



As much as possible, **stay** in a specific room and **away from other people** in your home. Also, you should use a separate bathroom, if available. If you need to be around other people in or outside of the home, wear a facemask.



If you have a medical appointment, **call the healthcare provider** ahead of time and tell them that you have or may have COVID-19.



**Avoid sharing personal items** with other people in your household, like dishes, towels, and bedding.



For medical emergencies, call 911 and **notify the dispatch personnel** that you have or may have COVID-19.



**Clean all surfaces** that are touched often, like counters, tabletops, and doorknobs. Use household cleaning sprays or wipes according to the label instructions.



**Get rest and stay hydrated.**



**Cover your cough and sneezes.**



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# Prone Positioning

PHOTOS BELOW TO DEMONSTRATE THIS:

LAS FOTOS DEBAJO DEMUESTRAN ESTO:

1. 30 minutes – 2 hours: laying on your belly
1. 30 minutos – 2 horas: acostado sobre su estómago (boca abajo)



2. 30 minutes – 2 hours: laying on your right side
2. 30 minutos – 2 horas: acostado sobre su lado derecho



3. 30 minutes – 2 hours: sitting up
3. 30 minutos – 2 horas: sentado



4. 30 minutes – 2 hours: lying on your left side

4. 30 minutos – 2 horas: acostado sobre su lado izquierdo



Then back to Position 1. Lying on your belly!

Luego, vuelva a la posición 1. ¡Acostado sobre su estómago (boca abajo)!



Self Positioning Guide\_Elmhurst Hospital\_SB



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# Satisfaction Survey



Eddy Visiting Nurse  
& Rehab Association

433 River Street, Suite 3000  
Troy, New York 12180  
Ph 518.274.6200

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Sphp.com

## SATISFACTION SURVEY

### COVID EMERGENCY ROOM COACH PROGRAM

Our records indicate that you were recently in the Emergency Room and were referred to our Covid Coach Program. Please fill out our brief Patient Satisfaction Survey so that we may continue to strive to provide the best care possible.

Were you provided information on the Coach program during your Emergency room visit?

Yes\_\_\_\_\_ No\_\_\_\_\_

Were you provided with an oximeter (to check your oxygen level at home) and a thermometer during your ER visit ?

Yes\_\_\_\_\_ No\_\_\_\_\_

Did you find the daily follow up calls from the nurse helpful?

Yes\_\_\_\_\_ No\_\_\_\_\_

Did the nurse provide education on Covid? E.g. Quarantine, ways to prevent spread of infection, use of the oximeter and when to call the MD?

Yes\_\_\_\_\_ No\_\_\_\_\_

Did the nurse review the importance of following up with your primary care physician?

Yes\_\_\_\_\_ No\_\_\_\_\_

Overall were you pleased with the follow up care you received after your ER visit?

Yes\_\_\_\_\_ No\_\_\_\_\_

Please provide any additional comments below so that we may better serve you in the future.

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# 1<sup>st</sup> Surge Outcomes (Alpha)

- Timeframe: December '20 through July '21
- 285 Patients Served
- 29 (10%) returned to the ED/hospital
- 94% overall satisfaction rating



# Patient Feedback

- I found the daily calls helpful and reassuring. She answered my questions, and I had many. She offered helpful advice to recover daily. It was good to know that I had someone checking on me daily. She was wonderful and this is a great service. Covid is scary and she calmed my fears.
- Having a coach was a great thing. I am very happy to have a nurse checking in. Every day was different with the virus and I had questions and concerns when she did call. She was very helpful.
- We were very happy with the follow up from nurse Cathy. She was very helpful with medical information and also helped with our anxiety over what to do and what to expect with the recovery from Covid. We are very grateful for her calls.
- We couldn't have a better coach. We had a lot of questions and Ellen answered all of them.
- I can't answer number 1 because I don't remember. Our contact, Amy, could not have been more caring and informative. I greatly appreciated her input and compassion.
- The coach program was very nice and helpful. I recommend it to all that need it. Thank you for your help.
- I welcomed my daily phone calls from Carolyn. Knowing that she would call made me feel comfortable being home. I spoke highly of this service and of her to many.
- Nurse Ellen was amazing and genuinely concerned. When I wasn't provided with an oximeter, she made sure one was mailed to me.
- Elizabeth was excellent!!! Very informative and very pleasant and caring. I looked forward to her calls every day. Please give her a big thank you!!!!
- ER nurse and doctor were the best!!



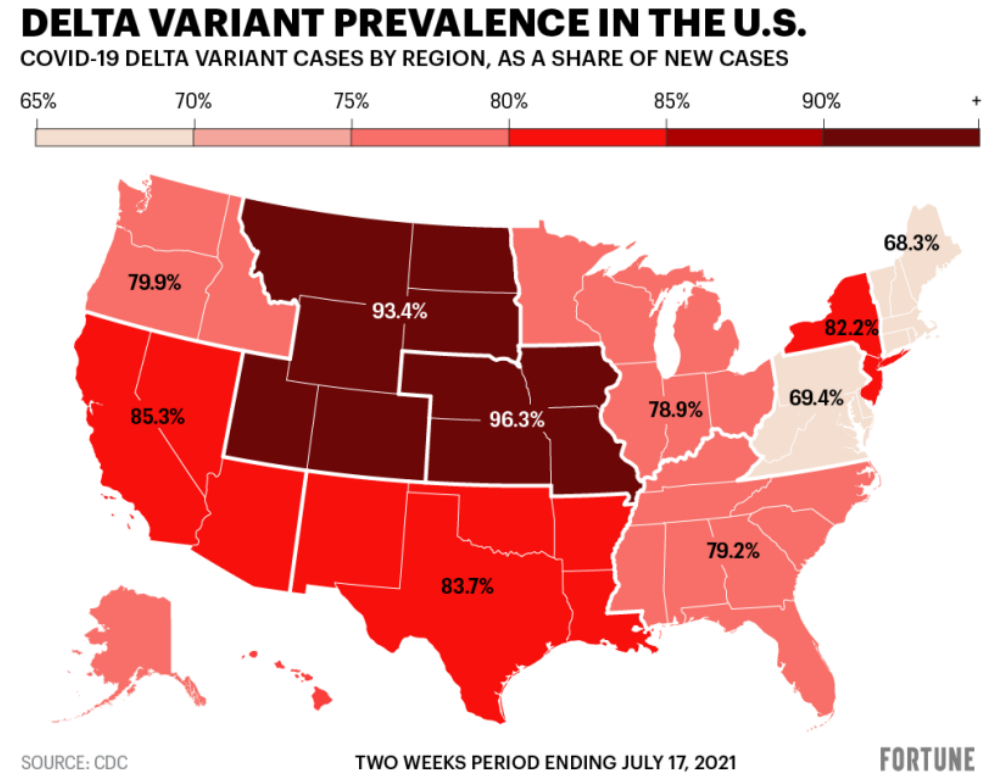
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# 2<sup>nd</sup> Covid surge Delta variant August 2021 to present

- Our ED referrals decreased in May- July but in August 2021 we saw a sudden increase in our referrals which was the beginning of the second surge.
- This was different:
  - Workforce shortage
  - Patients were vaccinated
  - MAB treatments available
  - Less severity of illness for those vaccinated
  - Limited ICU and medical/surgical beds



## 2<sup>nd</sup> Surge (Delta)

- Many COVID positive patients were not as ill and did not want or need the 14-day follow up.
- The Coach team was also finding it difficult to cover all of the ED referrals due to our RN shortage.
- Coach, ED and Medical Group met to develop new criteria for eligibility for the program.

# Program Changes 2<sup>nd</sup> Surge (Delta)

- Eliminated On Call RN mid-way thru the 2<sup>nd</sup> surge (no need)
- Continued refinement of the Teams spreadsheet

# 2<sup>nd</sup> Surge Outcomes (Delta)

- Timeframe: August 2021 through November 2021
- 174 served
- 4 (2%) returned to the ED/hospital
- 100% overall patient satisfaction





# 3<sup>rd</sup> Surge Outcomes (Omicron)

- Timeframe: November 2021 through present (1/25/2022)
- 142 Served
- 7 (5%) returned to the ED/hospital

# Patient Feedback – 3<sup>rd</sup> Surge

- Kelly was awesome!
- Thank you so much!
- Thank you for the concern and follow up care!
- Elizabeth was great. She called every day and followed up with me.
- It was nice knowing someone would call and check on me daily. Especially with my husband being out of town. I think this program is important and critical for patients without medical experience.
- They did a great job. I don't think they need to change anything!
- I think they did a great job. Nothing further is needed to improve.
- Thank you for all the follow ups.

# Special Thanks

- Dr. Christopher Guzda
- Suzanne Defruscio, RN
- Matthew Van Pelt, Medical Group
- Cailin Burke
- Dr. Katrina Kardos

# Questions?

Please feel free to reach out to us for more information:

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- [Susan.Warren@sphp.com](mailto:Susan.Warren@sphp.com)
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# Next Scheduled Webinar Series

Name of Session	Collaborating Organizations	Date**
EPIC Integration	Montefiore Hospital Montefiore Home Care	February 24
Innovations in Care and Management through Hospital-Home Care Collaboration	Catholic Health System Catholic Home Care	March 10
Collaboration of Care for Patients with Mental Illness Across the Health System	Catholic Health Mercy Hospital Catholic Health Home Care	April 7

\*\* All events are from noon to 1pm

# Important Links

## RESOURCE PAGE

<https://hca-nys.org/statewide-hospital-home-care-collaborative>

<https://www.iroquois.org/hospital-homecarecollaboration/>

[https://www.hanys.org/quality/patient\\_safety/](https://www.hanys.org/quality/patient_safety/)

## Statewide Hospital-Home Care Collaborative for COVID-19 and Beyond



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Support for this statewide collaborative training is provided through a generous grant from the Mother Cabrini Health Foundation.

# Contacts

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### Statewide Hospital-Home Care Collaborative for COVID-19 and Beyond



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