

PRESIDENT'S ADDRESS



RECENTLY I WAS THINKING THAT WE HAD BEEN LUCKY WITH THE WEATHER THIS WINTER, WITH A LIMITED AMOUNT OF SNOWFALL SO FAR AND WINTER IS ALMOST OVER. Unfortunately, March hasn't been as kind to us with the weather, but it wasn't the snow that wreaked havoc for many of us with the March 2nd and 3rd storm. Hopefully, you all have recovered with a minimal amount of property damage.

We were very lucky that the weather cooperated with us on January 25th, which allowed us to have a very informative meeting. Our three speakers were very well received and

provided us with a lot of useful information to utilize in our cardiac and pulmonary rehab practices. Please see the details in the Education Update. We were once again pleased to have the support of our sponsors, AstraZeneca and LSI. Without their support we couldn't continue to provide these conferences at such a low cost.

I would like to welcome our newest members to the Executive Committee; Sarah Melville, MHA, RRT from Anna Jaques Hospital Pulmonary Rehab has accepted the position of President Elect and Heather Nestor, MS, CEP from North Shore Medical Center Cardiac and Pulmonary Rehab has accepted the position of Newsletter Editor. We are very excited to have them step into their new roles and are looking forward to working with them on the Executive Committee. Jackie Pierce PT,CCS from Miriam Hospital who has been very active on our Education Committee for the past few years, has also stepped into her new role as Education Co-Chair. Welcome to all of you!

I would like to thank all of you who have been active in the effort to get the bills passed which will allow NPP's to meet the CMS requirement for "direct physician supervision" which will be effective 2024. I know many of you have gone to Day on the Hill and spoke to your congressman, as well as written letters and visited with your representatives locally to aid in this effort. Finally, all of our collective efforts over many years have paid off! Thank you!

As you all know, SET for PAD has been approved and I know a number of programs are beginning to start PAD programs in their facilities. We have also received some inquiries from members about information regarding how to start PAD programs. I would like to direct you to the many resources on the AACVPR website including the PAD Toolkit which goes over the nuts and bolts of starting a PAD program. There is also a webinar that provides an overview of PAD and outlines how to start a PAD program for \$39 for members. These resources should prove helpful to many of you.

I would also like to thank Jackie's husband for pitch hitting with this edition of our newsletter. We are in the process of purchasing new software for the newsletter as well as letting Heather get accustomed to her new role, so he nicely offered to help out and produce this issue of our newsletter. We are very grateful!!

We have a great line-up of speakers for our May 3rd meeting and our October New England Symposium agenda is already looking very exciting! I think we will have a great

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MACVPR EXECUTIVE COMMITTEE:

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Lynne MacDonald, PT, CCRP

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Karen LaFond, MSN, RN, CCRP

PRESIDENT ELECT

Sarah Melville, MHA, RRT

TREASURER

Donna Hawk, RRT, AE-C

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Paulette Pontier MSN, CNL, CCRP

NEWSLETTER EDITOR

Heather Nestor, MS, CEP

MEMBERSHIP CHAIR

Diane Gaughran, BS, ACSM-RCEP, CCRP

ADMINISTRATIVE ASSISTANT

Lisa Dion

MISSION:

The mission of the MACVPR is to promote the practice of high standards of care in cardiovascular and pulmonary rehab in Massachusetts.

year ahead and I look forward to working with all of you to continue to bring excellence to the care of our cardiac and pulmonary rehabilitation patients.

Warm Regards,



Lynne MacDonald, PT, CCRP

MACVPR President

EDUCATION UPDATE

Paulette Pontier MSN, CNL, CCRP

Education Co-Chair

THE HALF DAY EDUCATIONAL MEETING WAS HELD JANUARY 25, 2018 AT THE HAMPTON INN IN NATICK, MA. IT WAS THE RESULT OF THE HARD WORK OF THE MACVPR EXECUTIVE TEAM IN PROVIDING CARDIAC AND PULMONARY REHABILITATION PROFESSIONAL'S INFORMATION TO ADVANCE THEIR PROFESSION AND TO IMPROVE PATIENT CARE AND OUTCOMES. The program would not be a success without the interest of cardiopulmonary rehabilitation professionals throughout the area. The Executive Committee thanks you! These participants were provided 3.0 nursing contact CEU's through Berkshire Health Systems and 2.5 through AACVPR. Lynne MacDonald, President of MACVPR greeted participants then provided a brief business update.

Topics discussed during the half day meeting were spontaneous coronary artery dissection (SCAD), COPD action planning with promotion of wellness and the gold standards of care for patients diagnosed with COPD.

Dr. Hafiz Imran has been conducting research in the SCAD patients undergoing cardiac rehabilitation over the past two years. He explained the causes of SCAD and defined SCAD as a non-traumatic, non-iatrogenic separation of the coronary artery wall by intramural hemorrhage that creates a false lumen resulting in a hematoma that compresses the arterial lumen resulting in compromised blood flow, ischemia or infarction. He went on to discuss latest research findings and identified trends in cardiovascular risk factors and provided a SCAD-Cardiac rehab protocol. Participants felt SCAD was a fantastic topic and that Dr. Imran's presentation was interesting and informative.

Angela Butler is a respiratory therapist that holds credentials in a variety of areas within pulmonary disease management. She

currently works as a COPD health advocate for Lifespan and is a facilitator for Better Breathers Club for the American Lung Association. Angela discussed care transitions, introduced COPD educational tools/ Lung Talk/COPD Action Plan, the six steps to follow to enhance pulmonary wellness of the rehabilitation patient and stressed the importance of making connections with multidisciplinary groups to reduce hospital admissions in the COPD patient and enhance their quality of life. Participants felt Angela's presentation was very effective and engaging.

MACVPR executive member, Jacqueline Pierce PT, CCS concluded the session with a presentation on the gold standards for managing those diagnosed with COPD. Jackie explained how obstructive lung disease presents and current treatments utilized. She encouraged providing education for self-management. Jackie discussed evaluation on the COPD patient prior to beginning pulmonary rehabilitation then spent a significant amount of time discussing care of the COPD patient during their outpatient pulmonary rehabilitation program backed by numerous examples used in her facility. One example the participants enjoyed was the demonstration of the use of a harmonica for breathing exercises. Her presentation also included exercise considerations for those diagnosed with COPD. She touched base on each component of the individualized treatment plan as it pertained to the COPD patient. Feedback from participants included that the presentation was a great review for those who do not work in pulmonary and that great tips and action plans for activities with breathing were provided.

Participants stating satisfaction with the program as an excellent education program. They also stated appreciated of the later start time to allow for travel.

MACVPR does not accept responsibility for the accuracy of the information produced herein. The statements and opinions contained in the articles of the MACVPR Newsletter are solely those of the individual authors and contributors and not of MACVPR. We do encourage comments, articles, and other contributions while reserving the right to reject or edit the material. The articles in the newsletter are for readers to use as they deem necessary in their programs of clinical practice and are not necessarily standards of care by MACVPR.

Legislative & Regulatory Happenings

Wayne Reynolds, RN, FAACVPR, CCRP



March 5 2018

As I sit in my hotel room preparing this update and for my adventures on Capitol Hill, it occurs to me that though HR155/S1361 were in fact passed as part of the ACCESS bill, I'm distressed that so many of our lawmakers and their staff members cannot see farther than the CBO scoring on most

everything they deal with, which is why the effective date for these bills is January 1, 2024. I do understand that there are so many bills they have to deal with that certain details escape them, so I am hopeful that we (AACVPR & AHA) may be able to find a way in the future to possibly get that date moved up.

Systolic Heart Failure has also been added to the accepted diagnoses for Intensive Cardiac Rehabilitation. CMS will need to issue an effective date for this.

Of most concern, currently is section 603 of the 2015 Budget Act mandated that hospitals will no longer to be able to bill for off site outpatient services under the Hospital Outpatient Payment methodology (higher payments).

Existing OP services/clinics are "grandfathered" but if they move to greater than 250 yards from the main campus or unless a new op service is located within 250 yards, they will be covered under the Physician Fee Schedule (lower payments).

CMS recognizes this as an "unintended consequence" but has "no authority to address your problem".

AACVPR is seeking sponsors for legislation that would create specific financial thresholds that would exempt hospitals from Section 603.

More detail is available on the advocacy page of the AACVPR website and an update on progress with Section 603 will be in the next newsletter as it is our primary issue for this year's Day on the Hill.

TREASURY REPORT

Donna Hawk, RRT, AE-C
Treasurer

AS OF MARCH 4, 2018

- Checking - \$14,322.31
- Money Market - \$2,635.98
- Total - \$16,958.29

MEMBERSHIP REPORT

Diane Gaughran, BS, ACSM-RCEP, CCRP
Membership Chair

AS OF MARCH 2018:

The MACVPR currently has 97 members. As you may know, MACVPR is a Joint Affiliate organization with the American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR). Please encourage your co-workers and associates to join and receive all that the Joint Affiliation has to offer:

- **Continuing education opportunities:**
 - Two half-day complimentary meetings
 - Reduced registration fee at the Fall Full-Day Membership meeting with national speakers
 - Free access to all of AACVPR's educational webcasts and corresponding CEUs (a \$650) value
- **Full access to the AACVPR websites including:**
 - Roadmap to Reform presentations/resources
 - Latest updates on reimbursement and legislation
 - Certification updates
 - Access to members-only resources on the AACVPR website
 - Tri-annual 'MACVPR NEWS' newsletters
- **Automatic enrollment in MACVPR and AACVPR**
 - One annual dues payment of \$215 for the AACVPR Joint Affiliate membership for essentially two memberships with all the associated benefits.

If you have any questions about membership please feel free to contact Diane M. Gaughran BS, ACSM-RCEP, CCRP at diane.gaughran@steward.org or 781-278-6265.

Don't forget to renew your MACVPR membership!

Holly Brassett MS, RD, LDN

Outpatient Dietitian, Lahey Hospital and Medical Center



AS NEW YEARS RESOLUTIONS FALL TO THE WAYSIDE MANY OF US WONDER HOW TO STAY MOTIVATED AND STAY TRUE TO HEALTHY LIFESTYLE CHANGES..

As we turn the clocks ahead by an hour in the coming week lets spring ahead in our fitness goals and make our health a priority once again!

TIPS:

- Aim to have 5 or more servings of fruits and vegetables per day(1/2 cup cooked or 1 cup raw)to increase fiber and essential vitamins and nutrients.
- If you are craving sweets, stock up on fruit. You will get your sweet fix while adding in some delicious fiber to your diet. Prepare smoothies with low fat yogurt or prepare a home-made parfait with granola, fruit and angel food cake.
- Decrease red meats and increase lean proteins such as fish, chicken, turkey and lean pork. Make sure you are measuring protein portions (women on average can have 3-4oz per serving and men 5-6 oz) or use your palm of hand for simple measurements.
- Aim to eat at least 3 servings of low fat dairy per day; monitor cheese consumption as this can add up in saturated fats.
- Limit sweetened beverages and alcohol which are empty calories.
- Choose whole grains and limit refined flours and sweets.
- Choose to be active every day. Start out slow and increase to at least 30-60 minutes as able.
- Try to forgo the salt shaker at your table and enjoy the food for the natural flavors it provides. Use lemon, herbs and natural seasonings. Overtime, you may realize you do not even miss the salt.

Healthy Eating Tips: Spring Edition

If the winter doldrums have gotten you away from your health goals, try some of these motivating tips to get back on track.

Motivating tips:

- Join a spring/summer CSA(Community Supported Agriculture) to increase fruit and vegetable consumption and enhance cooking skills. Split one with a friend and exchange recipes.
- Come up with a workout plan and stick to it. Choose 2 days a week and work your way up to 5.
- Find some new recipes (Pinterest) and adapt to your liking.
- Download fitness applications such as my fitness pal to track intake.
- Experiment with legumes!!! Have a meatless Monday and share with co-workers.
- Purchase some new salt free spices and experiment with flavors.
- Too busy to cook on your own and find yourself getting take out or dining out? Try one of the commercial "Blue Apron" or "hello Fresh." I have personally tried Blue Apron though a free trial and found the food to be easy to prepare and very fresh. Find a recipe you like and replicate on your own. As someone who enjoys cooking it gave me a new take on salmon that was absolutely delicious! Sometimes you need a spring spruce up and it can help you to stay or get back on track from the holidays and winter.



Save the Date!

MACVPR Spring Half Day Meeting - Thursday, May 3

Hampton Inn & Executive Conference Center, 319 Speen Street, Natick, MA

- *Topics Include: TAVR, Outcomes Management and an interactive Tai Chi Session*

Pamela Katz Ressler, MS, RN, HNB-BC
Founder of Stress Resources



YOU MAY HAVE NOTICED A PLETHORA OF DIGITAL TOOLS THAT PURPORT TO AID IN RELAXATION AND MEDITATION. Have you wondered what is hype and what is helpful? Let me share with you some guidelines that I have found helpful in advising many of my clients.

First, there is a distinct difference between relaxation and meditation. Both have health promoting effects but have different characteristics and affect the body and mind differently.

Relaxation is a passive state that can be elicited by conscious breathing, guided imagery, music or distraction methods. Digital relaxation tools are often helpful in acute situations where preemptive training is not possible or effective. Tools to promote relaxation especially pre and post painful or uncomfortable procedures are popular and effective. Nature sounds, gentle music without lyrics, or virtual reality applications would fall into the category of relaxation. Virtual reality (VR) is gaining in popularity with the prevalence of smart phones and the cost effective effectiveness of the ancillary equipment (head sets can be purchased for between \$10-20 and many available VR software applications are free)

Meditation is more complex and elicits an active process in the mind and the body. This active process is not unlike physical training in the gym — challenging the “muscles of meditation” (brain and body) are necessary for results. Training takes time and cannot effectively be taught during a time of acute pain. Results of meditation training are long-term and grow over time. Digital tools are popular in supporting and strengthening a meditation practice. For a digital tool to promote and support meditation, I believe three components need to be met:

Awareness — Does the digital tool promote awareness of the present moment or is it pulling the user away from the present moment?

Attention — Does the digital tool help the user focus their attention in some way?

Action — Does the digital tool create an action in the user? Are they working to bring back focus during the meditation, are they receiving feedback from the digital tool?

Surprisingly, you will find that many digital tools that are on the market are helpful in assisting with relaxation but not as successful in promoting the key components of meditation—Awareness, Attention and Action.

Feel free to contact me for further information on how digital tools may be used as an adjunct to more traditional relaxation or meditation training of your patients and clients. As always, I welcome comments and feedback from readers. What topics of mind/body/spirit would you be interested in exploring in future columns? Let me know at pressler@StressResources.com

Coming October 25, 2018

MACVPR Fall Symposium

Hampton Inn & Executive Conference Center, 319 Speen Street, Natick, MA

Pamela Katz Ressler, MS, RN, HNB-BC is the founder of Stress Resources (StressResources.com) located in Concord, MA. Stress Resources specializes in providing individuals and organizations with strategic, sustainable tools to build resilience and mindfulness. Pam is a frequent speaker to local, national, and international audiences on topics relating to stress management, mindfulness, resiliency strategies, therapeutic communication, patient advocacy through social media, and holistic healthcare. She is an Adjunct Clinical Assistant Professor at the Tufts University School of Medicine teaching courses in pain research, education and policy, as well as stress management, palliative care, and mindfulness for healthcare providers. Pam serves on the Consumer Health Council of the Massachusetts Health Quality Partners (MHQP) and on the Executive Leadership Board of Stanford University's Medicine X Program.

CAREER OPPORTUNITIES

Milford Regional Medical Center, IncTwo Exciting Job Opportunities!

Milford Regional Medical Center is a comprehensive healthcare system that comprises the Medical Center; Milford Regional Physician Group, Inc., and Milford Regional Healthcare Foundation. The Medical Center is located at the intersection of Routes 140 and 16 in Milford, MA.

A full-service, community and regional teaching hospital, Milford Regional is a 145-bed, nonprofit, acute-care facility serving a region of 20-plus towns. With over 300 primary care and specialty physicians on the medical staff, our physicians are skilled in the most advanced procedures and technology, and provide personalized patient care in a warm and caring environment. Many hold teaching appointments at New England's finest medical schools preparing the doctors of tomorrow.

RN – Cardiac and Pulmonary Rehab – 24 hours, days, no weekends or holidays

Under the general direction of the Director of Cardiopulmonary Services, coordinates a comprehensive outpatient and inpatient cardiopulmonary rehab program while maintaining standards of nursing practice as well as those standards established by the American College of Sports Medicine, American Heart Association and the Association of Cardiovascular and Pulmonary Rehab.

Qualifications: BSN, Massachusetts RN licensure, BLS and ACLS certifications.

Experience: Five years of cardiac nursing with telemetry monitoring experience required. Specialty training and three years of experience in cardiopulmonary rehab also required.

If you meet the qualifications and would like to apply, please visit our Career Page at www.milfordregional.org.

Exercise Specialist – Cardiac and Pulmonary Rehab – 24 hours, varied days and times, no weekends or holidays

Under the general direction of the Director of Cardiopulmonary Services, coordinates a comprehensive outpatient and inpatient cardiopulmonary rehab program while maintaining standards of nursing practice as well as those standards established by the American College of Sports Medicine, American Heart Association and the Association of Cardiovascular and Pulmonary Rehab. Also responsible for developing, implementing and modifying individual exercise prescriptions on a session to session basis.

Qualifications: Master's degree in Exercise Physiology, ACLS and current CPR skills.

Experience: Three years of experience and specialty training in cardiac rehab. Must be knowledgeable and flexible to cover both cardiac and pulmonary rehab programs.

If you meet the qualifications and would like to apply, please visit our Career Page at www.milfordregional.org.

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