VillageCare Opens a New Chapter In Rehabilitation and Nursing Care
A progressive rehab/nursing center comes to the Village

BY JANEL BLADOW

A dream is about to come true with the grand opening of the new, state-of-the-art VillageCare Rehabilitation and Nursing Center.

This new 105-bed facility accomplishes two things for VillageCare, a community-based, not-for-profit health organization. It replaces the aging Village Nursing Home and largely completes a dramatic makeover of the way the not-for-profit organization delivers chronic care services to the community.

“It’s not your grandmother’s nursing home,” says Neil Pollack, administrator of Village Nursing Home, who also will be in charge of the new facility at 214 W. Houston St.

“Our goal is to get patients back home with a positive outcome.”

The new Center is geared toward serving adults, particularly those who are being released from the hospital and who are in need of rehabilitation services and what’s called sub-acute, or post-hospital, nursing care. Four floors of the six-story building are for short-stay patients, who most likely would be residents in the new Center for 21 or fewer days. The top-level floor is for long-term residents who require palliative and end-of-life care.

Construction of VillageCare Rehabilitation and Nursing Center began in 2009, but planning was in the works long before that. Reforming residential care was a VillageCare priority as it began shifting a decade ago toward providing a wide-range of community-based options, such as adult day health care and assisted living, designed to forestall, or even prevent, the need for individuals to go into a nursing home.

In planning the new center, no detail has been overlooked. VillageCare worked closely with its nursing home staff and with union officials and union members in developing a patient-centered model of care where workers engage and work in non-traditional roles to address the needs of patients and residents. This has included adoption of many of the concepts and ideals of the so-called “culture change” movement in nursing homes, with increased patient/resident involvement in decision-making along with collaborative and decentralized decision-making to empower direct-care workers.

As the first brand-new skilled nursing home construction in Manhattan in half a century, VillageCare Rehabilitation and Nursing Center is one of the few homes in the nation that has dramatically changed its physical environment to support culture change and patient-centered care.

In planning for construction of the new facility, VillageCare also worked closely with community leaders and residents.

While the existing Village Nursing Home in the West Village

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Workers put the finishing touches on the new VillageCare Rehabilitation and Nursing Center in preparation for next week’s open house and the upcoming grand opening.
You’re invited!

In a few weeks, we’ll be opening our brand new, state-of-the-art VillageCare Rehabilitation and Nursing Center, a wonderful new asset to our community that will help people in need of rehabilitation and recovery services get better faster and get back home more quickly.

On October 21, before the facility opens, we’re going to give members of the community the opportunity to stop by and get to know the new center with an open house and tours. And we’ll have some light refreshments.

Here are the details:

WHAT: A community Open House
TIME: 5 to 7 p.m.
DATE: Thursday, October 21, 2010
WHERE: VillageCare Rehabilitation and Nursing Center, 214 W. Houston St.

I think when you visit you’ll be amazed at the modern surroundings, and at how patient-friendly and patient-oriented our new Center is.

VillageCare Rehabilitation and Nursing Center replaces the aging Village Nursing Home, an iconic institution that has well-served our community as a mission-driven, not-for-profit residential long-term care facility for more than three decades.

I know that so many of you downtown are familiar with Village Nursing Home, and have been appreciative of the important role it has played in helping individuals and their families when they have been faced with a care crisis.

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The many thanks that we have received, both as an organization and as individual staff members, are testament to your respect for what we’ve sought to accomplish over the many years at Village Nursing Home.

Soon, we’ll be closing that chapter in VillageCare’s life and moving into the modern, new surroundings that are now being finished up at 214 W. Houston St.

How we got to this point started just a few short years ago, when it came time for us to consider the need to build a new nursing home. At VillageCare, we approached the task from the perspective of ways we could go about not just constructing a bricks and mortar replacement, but also looking at ways to reform and reconfigure the overall delivery of long-term care and chronic care services.

We wanted to find ways to give our community the best care we could, in the settings that are most appropriate for each individual we serve.

The goal we have pursued has been to offer older adults the opportunity to continue to live at home, or in another independent or supportive setting such as assisted living, and delay or avoid nursing home placement.

As we developed such alternate services, it became clear that the role of our nursing home was changing, and that it could be “downsized” and refocused in purpose.

The new VillageCare Rehabilitation and Nursing Center offers the latest in post-hospital care for those who are recovering from a disabling injury, condition or illness, and prepares them to return home. This reflects the demands today on our skilled nursing facilities to care for patients with greater clinical needs, but who require shorter stays.

The new Center will also offer residential end-of-life and palliative care.

We’ve gone to considerable lengths to create a new, unique, patient-centered environment. Residential floors have common areas and “neighborhoods” where families and friends can visit with their loved ones. Dining areas on each floor have self-serve hospitality food bars and full-service pantries. The staff has been specially trained to work in non-traditional ways with patients and their families, supported by state-of-the-art medicine and care and by an environment designed to promote healing and well-being.

We’ve integrated a healing bamboo garden as a place for quiet social interaction and contemplation.

I think you’ll find that our new VillageCare Rehabilitation and Nursing Center will be a welcome asset to the Village and our downtown community.

Please stop by on October 21 and see first-hand some of the dramatic changes in care that are now in the offing.

I hope to see you there.
Key to a quick recovery is top-notch care

Short-Stay Recovery – Successfully Returning Home

BY CHRIS OLIVER

For a temporary home away from home, the short-stay program operated by VillageCare can’t be beat. So believes The Rev. James Gardiner, S.A., a Roman Catholic priest.

Father Gardiner turned to Village Nursing Home’s short-stay rehabilitation program this summer to recover after hip replacement surgery. The nursing home is being replaced by a new, state-of-the-art VillageCare Rehabilitation and Nursing Center at 214 W. Houston St.

The 100-year-old-plus landmark building on Hudson Street was never designed to be a nursing home. The elevators are slow, hallways cramped. Over the years, it was renovated and the seventh floor converted to physical and occupational therapy center. And a residential short-stay unit was put in on the sixth floor. The facility, however, has always had space limitations, which greatly limited options to pursue major renovation and create a brand-new, state-of-the-art rehabilitation program. Construction of a new building – the first such new skilled nursing facility for adults in Manhattan in half a century – was deemed the best option for the quality of care the organization wants to provide the community.

“It’s the spirit and professionalism…I found it here.”

“I wanted to be the first in the new place,” jokes Father Gardiner, a Bronx-born Franciscan Friar of the Atonement. He first learned of Village Nursing Home while on the staff at St. Joseph’s Church in Greenwich Village. “Instead I was one of the last in the old place. Timing is everything.”

For short-stay rehabilitation, the 68-year-old priest recommends VillageCare.

“I would have students come here to pick up the techniques and the spirit. I’m very high on them.”

Father Gardiner, who recently started a sabbatical after 12 years as director of Graymoor Spiritual Life Center in Garrison, N.Y., was transferred by ambulance from The Hospital for Joint Diseases late Friday afternoon of Memorial Day weekend.

“Frankly I thought everyone would be gone and I could rest,” he says in his jovial manner with a twinkle in his eyes. “But everybody was here. I was brought on a stretcher up the elevator to my room. Next thing somebody was in with a meal. It all went incredibly smooth. I should have remembered that. But you have so much anxiety following surgery.”

Nearly eight years earlier, Father Gardiner had spent more than a month at the nursing home following prostate cancer surgery. While he vaguely remembers his first experience, the staff sure remembered him.

“Sonia came in Saturday morning and said ‘Welcome back.’ It was such a great feeling,” he recalls. Sonia McFarlane has been a certified nursing assistant, or CNA, with the facility for more than 10 years. She along with most of the staff will continue at the new building.

“I immediately fell into rhythm here. So many things going on, so many people knew me, and I was talking so much that I didn’t know there was a TV in the room,” Father Gardiner says.

That first evening, Father Gardiner started with physical therapy in his room and on the stairs. It continued throughout the weekend, two times a day. Once a day he had occupational therapy, to learn the proper ways to sit, stand and do daily activities such as getting dressed.

“Getting out of bed was really difficult at first,” he remembers. “They noticed I was favoring one side, stepping out with my left ‘good’ leg. Now, I’ve stopped favoring that leg.”

During his three-week stay, Father Gardiner would continue his recovery exercises in the seventh floor therapy unit. Here he practiced on a balance board to strengthen hips, knees and joints, and learned to use a walker then graduated to a cane. Ankle weights were gradually increased to strengthen his leg and hip muscles. He was taught a proper gait pattern – heel to toe – and taken outside for walks around the neighborhood. In occupational therapy sessions, he was given techniques to better perform everyday activities, including how to reach for an object without straining.

Some days I didn’t look forward to it,” he says honestly. “But the staff made it more than tolerable. They are competent and I have the highest regard and affection for them. The staff gives you a ‘watch me do this’ attitude. You want to bounce back,” he says.

“I wanted to get out and go home but I had a tinge of sadness leaving,” he continues. “I could never repay the staff. They were so good to me. Samantha (a student nurse) came down to the car with me and wished me the best. It’s the spirit and professionalism…I found it here.”

Back home now, Father Gardiner has resumed much of his hallmark active lifestyle that has seen him involved in a wide range of church and community activities and issues.

When the new facility opens in November, short-stay patients will be transferred to the new VillageCare Rehabilitation and Nursing Center, and the remaining long-stay residents will also be transferred there. Because the new facility is smaller than Village Nursing Home, staff worked with families and residents to find other skilled nursing care options for a number of individuals in the Manhattan community. Downsizing, or “rightsizing” the new facility was part of the approval process with the state Department of Health. In return, VillageCare received approval for several community-based options designed to delay, or even prevent, nursing home placement, such as a Medicaid Assisted Living Program.

Director of Rehabilitation Services Greg Westgate believes that the staff of VillageCare’s short-stay program is among the best around.

“Boundaries are meant to be crossed,” he says. “If a custodial worker sees your empty tray, he or she asks if you’re done and removes it. Everyone pitches in to help one another.”

Westgate adds that this modern “we’re all in this together” style of care will be integral to the way things work at the new center. It’s part of the special training the staff has received to create a unique, patient-centered brand of care for the new VillageCare Rehabilitation and Nursing Center.

“Your comfort and care are key,” Westgate says.
has been an icon in the downtown community for those in need of chronic care services, the aging facility proved inadequate for the organization to develop the type of care program it wanted to deliver.

“The challenges we faced in our old building to provide the care and quality we wanted would have made renovations astronomical,” said Emma DeVito, VillageCare’s president and CEO. “The quality and type of care we want to deliver in the nursing setting has also changed significantly over time, and building an all new facility represented our opportunity to respond to those changes.”

“With a good outcome, our mission is to get people back into their own homes.”
– VillageCare President & CEO Emma DeVito

“We have created a strong rehabilitation program and strengthened the skills of our staff, who have all been specially trained for the new Center. Basically over time and with a good outcome, our mission is to get people back into their own homes,” she said.

The main entrance to the new Center is on West Houston Street, and the new building goes through the entire block, with the other side facing Downing Street. A main feature of the main floor is a bamboo garden, with access off the lobby area and which is visible from the common and dining areas on each floor.

Patients will be in either the Houston Street or Downing Street neighborhoods, as the two sides of the building are known. Downing Street has rooms accommodating 11 individuals, while the Houston Street neighborhoods accommodate 10. There are many single rooms along with doubles, all of which are equipped with modern electronic health systems and the latest technology, including flat-screen, satellite televisions for patients and residents.

In the center of each residential floor is a common area where families and friends can visit with their loved ones. The common area is living room-like, with sofa, chairs and a 40-inch flat screen television. Dining areas on each floor have self-serve hospitality food bars in addition to a full-service pantry.

Instead of a traditional nursing station, a staff work room on each floor has built in desks with a window into the lounge area. Nearby is a spa, with the latest in whirlpool technology.

All administrative offices and services are located on the main floor. There is a gym for physical therapy and rooms for speech and occupational therapy sessions. A modern ADL (activities of daily living) therapy suite includes a kitchenette with overhead and under-counter cabinets, stove, refrigerator and a handicap-accessible bathroom with a tub.

The sub-floor houses building operations and a full-service kitchen.

Topping the brick structure designed by the architectural firm Perkins Eastman will be a lush roof garden with beautiful 360-degree views of New York City.

VillageCare Rehabilitation and Nursing Center is a “green” facility with LEED certification, designed and constructed to improve energy savings, water efficiency and indoor environmental quality, as well as to reflect stewardship of resources and sensitivity to their impact.

The building is completely wheelchair-accessible and smoke-free.

“Neighbors and community groups have been very patient and supportive,” DeVito said.

A brief ribbon-cutting ceremony will be held on October 21, which will be attended by local officials, Community Board members and other care providers, and the ceremony will be followed by an open house for the community in the late afternoon.

“We will also have a small reception for Village Nursing Home employees moving to the new facility, to welcome them to the new facility,” DeVito said.

The new center will continue to involve the community actively in the new VillageCare Rehabilitation and Nursing Center, which has always seen considerable volunteerism and participation by neighbors and friends of the organization.

“We plan to continue the good relationship we have with the neighbors, just as we have at Village Nursing Home over the many years,” DeVito said.

The Open House for the community will be held from 5 to 7 p.m. on October 21, and the public is invited to tour the facility and meet with staff.

VillageCare Rehabilitation and Nursing Services

CARDIAC REHABILITATION
People who have had a recent heart attack, coronary artery bypass surgery, angioplasty, stents, other coronary interventions, coronary artery disease or who have risk factors for developing heart disease will benefit from this program. The Cardiac Rehabilitation program guides patients through recovery, offering support, exercise and education for healthy lifestyle changes. This well-rounded approach ensures a quicker patient recovery time.

Orthopedic Care Management

AMPUTEE REHABILITATION
Limb loss is a physical and psychological trauma that has a profound influence on the life of an amputee. Providing comprehensive rehabilitation services and programs to individuals recovering from amputation is, therefore, a complex process. It is generally recognized that a multidisciplinary team approach is required to address the individual’s functional, emotional, social and psychological needs.

JOINT REPLACEMENT REHABILITATION
Joint replacement rehabilitation provides services for individuals who have had hip or knee replacement surgery. The philosophy is to let the patient be the guide, helping the team of skilled specialists design an individualized treatment plan to meet the patient’s specific needs and goals. Each patient is cared for by an interdisciplinary treatment team under the direction of a physician specializing in orthopedic rehabilitation.

PALLIATIVE CARE
The VillageCare Rehabilitation and Nursing Center includes 21 beds dedicated to end-of-life and palliative care.

The Palliative Care program provides individualized and compassionate care for terminal patients whose illnesses are no longer responsive to cure-oriented treatments. The care provided is designed to not only provide pain relief and management of physical symptoms, but emotional and spiritual support as well. Because family members are also involved in a person’s illness, the palliative care team supports them and helps them feel informed as well.

SUB-ACUTE CARE
When a patient is discharged from the hospital, but is not able to resume a fully independent lifestyle, the VillageCare Rehabilitation and Nursing Center is the bridge between hospital and home.

The new Center offers state-of-the-art rehabilitation and can address clinically complex care needs in a nurturing environment that encourages patients to be out of bed and mobile as quickly and as often as possible. The discharge planning procedure ensures that the transition to home is as smooth as possible. Each patient’s case is evaluated, and may include a home assessment and recommendations for any necessary adaptive equipment needed as well as home care referrals.

OVERALL FEATURES
• Physical medicine and orthopedics.
• A full complement of professional rehabilitation staff.
• Intensive rehab services, six days a week.
• A full therapeutic recreation schedule.
• Comprehensive discharge planning, home safety evaluation.
• Wound care specialist.
• Full-time medical staff with unit-based nurse practitioners.
• State-of-the-art gym and equipment.
• Activities of Daily Living retraining suite.
• Telemetry monitoring for cardiac rehab.
The new VillageCare Rehabilitation and Nursing Center offers the very latest in care, services, amenities and technology.

MAIN FLOOR:
Inside the main entrance on West Houston Street, a spacious entry lobby welcomes patients and families, where assistance is available immediately from the reception desk. The admission and discharge area is nearby, and escorts are provided to that office. Straight ahead is a large beautifully appointed reception room with couches, chairs and tables, in a calming blues and greens.

Beyond the desk to the right is a meditation room, available for patients and visitors. Both the meditation room and lobby look out through sliding glass doors to a serene, lushly planted bamboo garden with comfortable wooden seating and pavers.

Toward the Downing Street side is a gym with state-of-the-art physical therapy equipment, complete with ceiling lifts to help patients and therapists with balance and gait exercises. An activities of daily living suite (ADL) comes with a handicap-accessible tub and bathroom and kitchenette with cabinets, stove and refrigerator to help retrain patients to do everyday chores without injury. Speech and occupational therapy rooms, which can also be booked for private acupuncture or therapeutic massage, and a beauty salon, where guests can make appointments for services from haircuts to color, complete the public area.

SHORT-STAY FLOORS 2 THROUGH 5:
Short-stay rehabilitation patients will reside on the second through fifth floors. Hallways are carpeted in plush green wall-to-wall carpeting. All 21 rooms are equipped with hospital beds, built-in nightstands and wardrobes with hanging rod, drawers and shelving. Each has a 32-inch wall-mounted TV with bedside controls.

The 10 "Houston Street Neighborhood" rooms on each floor are a mix of singles and doubles, most equipped with ceiling lifts to help patients getting in and out of bed. In the "Downing Street Neighborhood," the 11 rooms are also singles and doubles, but also have in-wall oxygen and suction vacuum. One room each floor on this side is designed to handle bariatric patients with special equipment and an oversized bathroom.

Every room has a leather-bound directory, similar to those found in hotels. Inside is the facility’s layout and safety policy, a list of TV channels as well as nearby banks, florists, notaries and other information. Staff-approved licensed acupuncturists and massage therapists are also listed. Another section lists local restaurants for take-out.

The central, common area on each floor has a spa with latest easy-access whirlpool. A staff work room overlooks the lounge. Here, a home-like living room with couch, chairs, tables and a 40-inch flat screen TV, is in a setting with floor-to-ceiling windows that give view to the bamboo garden. The dining room of five round tables features a snack area with a refrigerator, microwave and coffeemaker available to patients anytime. Next to that is the staff kitchen where meals will be brought up from the sub-floor service kitchen and served individually to guests at their table. Staff selected all the china, flatware and glasses, including stemware.

LONG-TERM FLOOR 6:
Set up exactly like the guest floors below, the sixth floor will house palliative care and end-of-life residents. This floor is decorated in shades of blue and has full-emersion spa and other amenities necessary for longer-term care.

ROOF:
Two elevators access the rooftop garden which has 360-degree, uninterrupted views of New York City. Patients and residents, along with their families and other visitors, can visit here, or spend quiet time above busy Village streets below.
A Comfortable Home on the West Side
46 & Ten residents find plenty to do in this active senior living center

BY ROWANN GILMAN

The West Side's old "Hell's Kitchen" neighborhood is now a heaven on earth for the residents of VillageCare at 46 & Ten.

This senior living residence has a mix of both independent seniors and those who need assisted living accommodations, all of whom are very much at home in this spotlessly clean, warm and friendly environment. Quietly ensconced on 46th Street around the corner from Tenth Avenue, the six-floor residence has 84 units, which can accommodate 100 residents in studio and two-bedroom apartments.

All apartments include a personal alert system within reach so that help is always at hand if needed. A concierge is on duty 24/7, who attends both to security and helps with requests for special needs, whether it's assistance getting into the bathtub or a walking escort to the dining room or other activities.

VillageCare at 46 & Ten incorporates both a private-pay program along with a Medicaid Assisted Living Program, which is available both to new residents who are Medicaid eligible and for transition of private pay residents who become Medicaid eligible if they use up their resources.

VillageCare at 46th & Ten is different from other senior residences. What separates it from other, similar facilities is the people who live there, the city it's in, and the culture that exists within the community. Here you find a resident population whose life work and experiences help set a broad and interesting mosaic.

"Our goal," says senior housing manager Elaine Knight, "is to create a vibrant, congenial community offering safety and security, and it has become an environment that not only meets those needs but also understands the individual residents’ need for flexibility and choice."

What makes VillageCare at 46 & Ten special, though, is the wealth of activities lined up by Claudia Teller, the activities director. Designed to keep residents alert and on their toes (literally), there are not only dance classes, but courses in painting, sculpture, acting, singing and exercise. In addition there are more inward-focused practices including yoga, guided meditation and laughter therapy as well as a newly added morning talk and discussion about current events.

"I like to keep my residents engaged, happy, and thinking," says Teller. "We do this through the many classes we offer, and there's something for everyone nearly every hour of the day and evening. A typical day might start with yoga in the morning, a current events discussion at noon, an afternoon tenants meeting, and, like today, a vote on book club selections. I make copies of several book reviews, and the residents decide on their preferences. We also have movies six days a week, either in the afternoon or at night: I show new releases, older films, documentaries, and I even take requests from residents for special titles. One of my favorite comments from a resident's daughter is 'Gee mom, it took you until 90 to get some culture!'"

Last year, the theater group performed plays by Shakespeare and Molière, and were good enough to draw the attention of renowned playwright Edward Albee, who attended a performance, unannounced. Fridays are especially celebratory: a cocktail hour begins at three in the afternoon and features a live band and other live entertainment, as well as dancing. On the other hand, those who wish to spend some quiet time can take advantage of the hushed library with its large reading table and two big flat-screen computers.

Peggy Keating, a resident and a professional-level photographer, says that VillageCare at 46 & Ten is a very positive experience. "We're encouraged to do things, and the staff doesn't stifle initiative," she says.

Another resident, Eliza Cannaba, loves the small group feeling of the place even though she has relatives nearby.

"I have a family," she says, "but I like to disconnect and let my children do their own thing." In this smaller, warmer environment, Cannaba adds that every time she goes out, she can’t wait to get back "home" to VillageCare at 46 & Ten.

Special touches help residents maintain their dignity and importance in this group setting. A good example is the dining room. As found in upscale restaurants, residents dine on white tablecloths, with real china, flatware and glassware. A waitress takes residents’ orders, disappearing into the kitchen to have the meals prepared, including addressing special dietary restrictions, if any (a nutritionist, who works hand-in-hand with the chef, is also on staff). Residents are then served individually.

Just off the dining room is access to an expansive rooftop patio with gorgeous views of the city skyline, where residents can entertain family and friends, host parties and even hold specially catered events.

It's no wonder VillageCare at 46 & Ten now is pretty much at full occupancy.

Residents are supervised at all times, and all medical care is handled by a full-time LPN, and an RN during the day. Both are on call at night. Staff regularly interact with and assess assisted living patients and, if needed, its members assume the role of advocate, starting the necessary paperwork and process of providing access to other needed services and transferring a resident to another health care facility, or to a nursing home if need be.

Independent residents are free to come and go as they please, knowing their safe haven is never far, but not surprisingly, many opt to stay in and take advantage of the day's activities.
VillageCare Health Center, which provides primary care and other services to the downtown community, is integrating the concept of "care coordination" into its everyday operations. Care coordination efforts help patient access and negotiate care, arrange and schedule services, facilitate communications and monitor health changes.

This is part of a move toward creating a medical home model of care at the Health Center. With a medical home, individuals, and their families, are partners with their care providers in a patient-centered environment. As a comprehensive primary care approach, the medical home seeks to improve health, access and patient satisfaction.

To assist VillageCare Health Center as it moves forward in this area, two grants have been awarded to the Center that seek to improve overall care of patients and help them manage their own medical needs.

**Two new grants provide social services to support medical care...are completely different and separate programs**

By Chris Oliver

Both of the grants are targeted to assist HIV-positive patients at the Center. At the same time, the practices developed by these grant programs will help the Center in creating a patient-centered medical home and providing care coordination and medical case management to all its patients. The programs will make sure patients stay connected with their care, continue to be monitored and eventually become self-sufficient, so they can independently manage their own health treatments. Both improve coordination of all aspects of care each patient receives.

"HIV is becoming a chronic illness," Nicolas Rossetti, FNP, administrator of the VillageCare Health Center at 121A West 20th Street, said. "Multiple things can go wrong with patients medically. It is treated not as just HIV but as a chronic illness or disease as diabetes or high blood pressure, for example."

Additionally, the HIV-positive population is aging, he said, "in many ways, it’s becoming an older person's illness. The majority of those now living with HIV/AIDS are 40 or older, and the over-50 HIV population is quickly growing."

VillageCare Health Center serves adult patients (it does not see children) and has been licensed as a diagnostic and treatment center by the state Department of Health since 2006. Of more than 1, 100 patients seen a month, most 75 percent have Medicaid, Medicare or private insurance, with the rest being self-pay, including the uninsured.

"Our clients are predominately male, but we are seeing the number of women increasing," Rossetti said. "Care ranges from HIV to general medical attention to diabetic treatment."

The grants awarded over this past summer to the Center provide social services to support medical care coordination, and are separate programs. One uses federal funds that are administered under a New York State contract, the other is New York City-financed.

In the State contract, which consolidates two federal funding streams from the Ryan White program and from the Centers for Disease Control, the Health Center’s goals are to coordinate all medical-related care and services, diminish barriers to care and facilitate the delivery of social and supportive services, all in a coordinated effort to help patients maintain optimal health. Full 12-month funding under this grant will be $195,960, renewable annually after the 2010-11 for an additional four years.

These grants have been consolidated to create a Health Center initiative that has been dubbed “HELP” – Helping Each other Live Positively.

HELP is directed by Gretchen Winterkorn, LMSW, the program supervisor, who has a three-person team. Team members are Zil Goldstein, RN, an HIV health specialist, Yaneth Pichardo, case manager, and Richard Berrios, data coordinator.

The program began seeing 65 people in early August, working toward having up to 150 enrolled when it is fully running. The team seeks to empower patients to become more involved in their case, teach them healthy behaviors and encourage healthy beliefs, while helping them move toward higher functioning and independence. This is accomplished through meetings with medical staff, counselors, and group sessions. Interventions are on-one-on with the team working directly with the individual.

"In the HELP program, we seek to empower our clients to become active participants in their HIV health care, fostering independence and positive relationships with their primary care providers," Winterkorn said. "Among the services we offer are in-depth psychosocial assessments, assistance with disclosure of HIV status, HIV education, harm reduction, and evidence-based counseling and groups. Working from a client-centered approach, using a client advisory board and peer educator, we are building a program that assists clients with the health care concerns that are important to them. Our goal is an improved quality of life, with fewer patient hospital stays, and stability in their health they didn’t have before they came to us," she said.

Rossetti pointed out that "with this team approach, if a client is unclear about his or her treatment, we have all our doctors on site, all the people involved in his case, all talking to each other so that all the pieces of his puzzle come together for the best possible transition," Rossetti pointed out.

The New York City contract is a program running over a three-year period through February 2012 and provides $195,671 on an annual basis to provide care coordination and outreach to the underserved and underserved HIV population. (Both programs receive partial funding in their first years since they will not operate for a full 12 months).

The city-provided AIDS Care Coordination funds, which follow protocols of the New York City Department of Health and Mental Hygiene, have been consolidated into a Health Center initiative. Through a one-on-one approach, a staff member goes into the community seeking out individuals not receiving medical and HIV treatment, and works to get that person into the Center for services.

Care Coordinator Victoria Lampado, MSW, supervises the program of four outreach staff, called "patient navigators," who will be in the field, making home visits or meeting wherever clients feel most comfortable. They will attend doctors' visits with them if necessary and make sure the primary care physician and patient are a good fit to building a healthy relationship.

"We’ll try to make a match that is better, pick the appropriate personal care physician to solidify the bond between doctor and patient," Lampado said.

Patients in the program work through 13 educational modules in order to graduate and be self-reliant medically. One of the most popular, active pieces of the program is a group session called, "HIV & Me." Here clients talk about how HIV affects their lives.

"It’s very personal and we get to know the clients," Lampado said. "Once they’ve completed all 13 steps, we evaluate if they are able to be out on their own, including having a heightened awareness about HIV and other problems they may encounter in life."

Because the program is so grass-roots, it will also help the VillageCare Health Center learn more about changes that may be occurring in behaviors in the HIV community, an important piece because it can help the Center, and other providers, adapt their services.

For example, with a number of HIV-positive individuals having unprotected sex with each other, the risk of their viral strains mutating is high, Lampado said. This can result in re-infection of the partners with a new strain of the virus, which may be resistant to their current treatment regimen.

Moreover, she said, "This can create a new super strain of the virus, so emphasis is placed on promoting healthiser, safer sex practices. On the community level this can be huge. It affects all the community, not just the HIV one."

VillageCare Health Center, located at 121A W. 20th St., is open from 8 a.m. to 8 p.m., Monday-Friday, and from 9 a.m. to 5 p.m. on Saturdays. It is closed Sundays. The Health Center’s phone number is 212.337.9290. For more information, visit www.villagecare.org.

October 14, 2010
OPEN HOUSE
COME SEE THE NEW STATE-OF-THE-ART
Village Care
Rehabilitation and Nursing Center
THURSDAY, OCTOBER 21, 2010
5PM - 7PM
214 WEST HOUSTON ST.
www.villagecare.org/newfacility