

CASE MANAGEMENT



FLINT

Meet the new members of our Team!

Christine Gazda, RN: “ I have been working with patients for 24 years. I started out as a nursing assistance. I received my LPN in 2005 for Mott Community College. I completed my Associates in Applied Science in 2006 and received my RN license. I have worked for McLaren Lapeer and McLaren Health Plan. I am currently finishing my

Bachelor Degree in Nursing. I am married to my best friend and have two children ages 16 and 13. We love boating. I really enjoy my job in the Case Management Department. The CM and MSW team is an outstanding team to work with.”

Michelle Neddo, RN: “ I have been a RN for the last 7 years. I am currently working on my BS at Kaplan University. I am the mother of two sons ages 20 and 16 and I am currently engaged to be married. I am new to McLaren. I was an RN at St. Joseph’s Hospital in Pontiac and worked CCU. I love case management and I am glad I made the move McLaren Flint.”

Brittney Girard, RN: “I started my new adventure in the Case Management Department in April of 2014. Previously, I worked for three and half years on 11 South. I have my Bachelor’s degree from Michigan State University. I am married and have a puppy; while I’m not at work I enjoy shopping and camping.

Amanda Perry, RN: “I have been a Registered Nurse for 10 years. I started my career in 2004 at McLaren Flint. I have experienced working ortho/neuro, med/surg and telemetry. I am excited about my recent transition into case management and look forward to working with you.”

Monica Howard, RN: “I am from Flint but reside in Grand Blanc. I have been married for 14 years and have 4 kids, ages 17, 16, 15 and 12 years. I have been a RN since 2006. I worked in long term care [Grand Blanc Rehab.] I have done med/ surg, ER and step-down. I also teach clinical part time for Baker College. I am also in the process of working toward my MSN degree through Ferris State. I have been at McLaren for about 2 years.

Brandy Smuzeski, LLMSW: Graduated from Michigan State University with her Master’s Degree in Social Work in 2014. After interning at McLaren Flint, Brandy accepted the Casual Medical Social Work position and is excited about challenging herself in this new endeavor.

L to R: Monica Howard, RN; Christine Gazda, RN; Brittney Girard, RN; Michelle Neddo, RN; Amanda Perry, RN; Brandy Smuzesla, LLMSW

Meet McLaren Flint’s Case Management Department

The Case management Department has been expanding to help service the patient’s needs and our community. The main goals of the Case Management Department are to provide compassionate, ethical, integrity based services to both our internal and external customers. For the internal customers, the Case Management Department helps collaborate with multidisciplinary team members to evaluate, develop and implement discharge plans according to the needs of the patient. For our external customers, the Case Management Department provide resources, education and tools to maintain healthy lifestyles and decrease risk for avoidable readmission to the hospital. The Case Management Department is here to assist with transistion to the next level of care during their hospital stay and beyond.

Within the Case Management Department there are many components that work together to provide exemplary care. Our Case Management leadership team consists of:

- Dr. Edwin Gullekson, Medical Director
- Tamar Swain, Director
- Cherie Payne, Manager
- Ann Martin, Care Transitions
- Janet Popp, Lead Social Worker
- Danielle Lockhart, CM Coordinator

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In February of this year, McLaren Flint started a new program called "The 11:00 am Discharge Challenge!"

Our goal is to have the patients safely discharged and on their way to the next level of care, which includes: discharge home and/or with home care, LTAC or an ECF by 11:00am. This will allow timely and efficient room placement for our patients in the ED. By implementing this "Challenge" it will improve quality of care and patient satisfaction. Be a part of the team and win the Unit Challenge to meet this goal for your unit.



New 11:00 a.m. Discharge Time

Why?

1. To make room for our patients waiting in the ED.
2. To reduce the number of patients who Left Without Being Seen in the ED
3. To improve quality of care and patient satisfaction!

Who?

All of us are required to do our part to make this effort successful!

- Physicians
- RN's
- Transportation
- CNA's
- Unit Clerks
- CM/SW
- Leadership
- Housekeeping
- Ancillary Services/Depts.



11:00 AM Discharge Unit Challenge

- How? Round with Physicians to ensure communication is clear for the entire health care team and our patients
- Follow up on tests/procedure results timely, Be Proactive!
- Facilitate Discharges/Transfer Timely
- Clear/Detailed Hand-Off's to RN's and CNA's



11:00 AM Discharge Unit Challenge

- Beginning in February, we will initiate a "Unit Challenge".
- Alike Nursing Units will compete and be rewarded for the most patient discharges or transfers by 1:00 p.m. for starters!!
- There will also be individual prizes for the RN meeting this goal by unit!!
- More education and updates to come!!

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The Social Workers assist with legal forms, the adoption process, and identification of concerns related to abuse or neglect. The Social Workers will also assist with community placements and provide counseling and referrals for end of life matters, emotional and crisis support. The Lead Social Worker, Janet Popp, LMSW is a integral piece to the leadership team.

The Case Managers are a unit of specially trained Registered Nurses who coordinate and monitor patient care throughout the hospital stay. The Case Managers provide support to bridge the transition between hospital and home.

The CM Specialist and Administrative Assistants are there to greet you. Their main goal is to be the last call you make to get to the right person who can assist you with your needs: Shannon Smith, Debbie Hoffman and Anna Porsian.

This group of exceptional individuals are not hard to find. The main office is located on the 4th floor in the South Tower or you can locate them on the floors they are assigned to:

Melissa Ortiz, RN	12S
Michelle Neddo, RN.....	12S
Colleen Crowley Palmer, LMSW.....	12S and 6C
Monica Howard, RN	11S
Linda Everett, RN	10S
Lisa Robarge, RN.....	10S
Brandy Smuzeski, LMSW	10S, 4C and 5NW
Brittany Girard, RN.....	6C-CTU
Lois Jefferson, RN.....	8S
Christine Gazda, RN	8S
Barbara Raines, LLSW	8S and 11S
Alison Bayley, RN	9S-PCU
Janet Popp, LMSW.....	Lead Social Worker, 9S-PCU
Tricia Standley, RN	ICU/CCU
Amy Hawkins, LMSW	ICU/CCU
Ruthina Alston-Waller, RN.....	4C, 5NW and Float
Maggie Schaefer, RN	Weekend Cadre
Shannon Newman, RN	Weekend Cadre
Cathy Pugh, RN.....	CM Float
Jacqueline West, RN.....	CM Float
Amanda Perry, RN.....	CM Float
Shelly Bowers, RN.....	Weekend CM Float-Casual
Michelle Hollo, LMSW	SW Float
Icelinn Wallace, LLSW	Weekend SW-Casual
Susan Flint, LMSW.....	SW Float-Casual
Amy Sochowicz, LMSW SW	Float-Casual



An In-Depth Look at Lewy Body Dementia

Most, if not all of us have witnessed or experienced the devastating effects of dementia. According to the World Health Organization, in 2010 approximately 35.6 million people were living with dementia. Due to the aging population, this number is projected to triple by the year 2050. Although the umbrella diagnosis of dementia affects so many people, little is known about the specific forms of dementia such as Lewy Body Dementia. Lewy Body Dementia (LBD) gets the name from abnormal protein deposits in the brain, called Lewy Bodies. In patients with LBD, Lewy Bodies are typically found in the brain in the areas that control thinking and movement.

According to experts, Lewy Body Dementia is second most common form of dementia, however, little is known about it. LBD is characterized by a progressive decline in mental abilities, visual hallucinations, and delirium, Parkinsonism and sleep disorders. It can be difficult to diagnose LBD because the symptoms can manifest differently in each patient, however, the core symptoms remain the same. Patients with LBD typically have recurrent and complex visual hallucinations that are very detailed. Also, patients with LBD will have fluctuations in alertness and attention span. In addition, patients with this diagnosis will experience spontaneous features of those seen in Parkinson's disease such as gait difficulty and facial impassivity. Having the sleep disorder REM Sleep Behavior is also another suggestive symptom to LBD. During REM sleep our muscles are paralyzed, so we do not act out our dreams. In patients with REM Sleep Behavior Disorder, the paralysis does not occur fully or is absent all together. With LBD there are so many overlapping symptoms one would think that it could be treated with medications that help patients with Parkinson's or Alzheimer's, however, according to experts this is not the case.

Support Groups

Parkinson's Disease

7 p.m. second Wednesday, Stoney Creek Village, 1694 N. M-52, Owosso Township. [989] 743-5144

2-4 p.m. third Thursday, Genesys West Flint Campus Auditorium, 3921 Beecher Road. Jim and Ethel, [810] 629-6593.

2:30 p.m. first Monday, Devonshire Retirement Village, 101 Devonshire Drive, Lapeer. Darleen Wells, [810] 245-7646.

Alzheimer's Support

Alzheimer's groups, Alzheimer's Association, Mid Michigan Chapter, [989] 839-9910. Various meeting times and places include:

Second and fourth Wednesday
3:30 p.m. Lapeer Regional Hospital,
1375 N. Main St., Lapeer.
[810] 720-2791 or [810] 667-5579.

Third Wednesdays, for caregivers,
3 p.m. Canterbury Room, St. Paul's
Episcopal Church, 711 S. Saginaw
St., Flint. [810] 235-4360.

An In-Depth Look at Lewy Body Dementia Continued from Page 3

Experts have found that cholinesterase inhibitors (medications prescribed for patients with Alzheimer's) such as Aricept, Namenda or Exelon have shown to be useful in patients with LBD. Conversely, medications that assist patients with Parkinson's disease can have a very negative side effect on patients with LBD such as increased confusion, delusions and hallucinations. Also, antipsychotic medications can take a toll on patients with LBD. These medications can exacerbate (sometimes permanently) the Parkinsonism that is seen patients with LBD. In conjunction with medicine, patients with LBD need a supportive and encouraging environment.

It is important for patients with LBD to eat well and get exercise. Many patients with LBD do well with physical/speech/ occupational therapies. Also, support groups are a way for patients and their loved ones to open up about their diagnosis in a safe and confidential group setting. Unfortunately, there are no local support groups in the Genesee County areas for patients and their loved ones with LBD, however, there are support groups for Parkinson's disease and Alzheimer's type dementia.

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Fourth Wednesdays—6 p.m., Conference Room D, Memorial Healthcare Medical Plaza, 1488 N. M-52 Owosso Township. [810] 720-2791 or [989] 729-4516, ext 1516.

First Thursday, for male caregivers only—10 a.m., lobby conference room, Genesys West Flint Campus, 3921 Beecher Rd. [810] 715-1265.

Second Thursday—6:30 p.m., Clio Senior Center, 2136 W. Vienna Rd. Vienna Township. [810] 720-2791.

Second Friday—10 a.m. Davison Senior Center, 10125 Lapeer Rd. Davison Township. [810] 653-1875.

Transitions Early Stage Support Group, for people diagnosed in the early stages of Alzheimer's disease and their caregivers and their caregivers, meets in Flint. Details: [989] 839-9910.

Submitted by: Barb Raines, LLMSW 8S and 11 S

References for Lewy Body Article

<http://www.usatoday.com/news/health/story/2012-04-11/WHO-dementia-triple-2040/54169990/1>

http://www.mlive.com/living/flint/index.ssf/2009/09/sjupport_grops_2.html

[http://www.lbda.org/sptgroups/*/node?field_state_value_Many_to_one \[=MI](http://www.lbda.org/sptgroups/*/node?field_state_value_Many_to_one [=MI)

<http://www.aafp.org/aafp/2006/0401/p1223.html>

<http://www.mayoclinic.com/health/lewy-body-dementia?D0S00795/DSECTION=treatment-and-drugs>

Mission Statement

McLaren Health Care, through its subsidiaries, will be the best value in healthcare as defined by quality outcomes and cost.

Vision Statement

McLaren Flint will be the recognized leader and preferred provider of primary and specialty healthcare services to the communities of mid-Michigan

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