

# The Pulse

Keeping a pulse on healthcare integration at RBH



**Glaucoma  
Awareness  
Month**  
January

According to the National Glaucoma Research, Glaucoma is a leading cause of irreversible blindness in the United States. It is the second most common cause of blindness worldwide. Also, Glaucoma is the leading cause of blindness among African Americans and Hispanics in the United States.

**Glaucoma is a disease that damages the eye's optic nerve. It typically happens when fluid builds up in the eye causing pressure and damages the optic nerve.** When the optic nerve is damaged from increased pressure, it may result in open-angle glaucoma and/or vision loss. Open-angle Glaucoma is the most common form of Glaucoma and has no initial symptoms. In the United States, Open-angle Glaucoma strikes African Americans and Hispanics at a higher rate than other ethnic groups. Diabetes, high blood pressure, and heart disease are all risk factors for Glaucoma. **Glaucoma can develop in one or both eyes. Without treatment, people with glaucoma will slowly lose their peripheral (side) vision.** Glaucoma is detected through a comprehensive dilated eye exam that includes the following: Visual acuity test, Visual field test, Dilated eye exam, Tonometry, and Pachymetry. Early diagnosis is very important. Glaucoma treatments include medicines, laser trabeculoplasty, conventional surgery, or a combination of any of these. While these treatments may save remaining vision, they do not improve sight already lost from glaucoma. **Vision lost from the disease cannot be restored.** Everyone is encouraged to have a comprehensive dilated eye exam at least once every two years. **Remember that lowering eye pressure in the early stages of glaucoma slows progression of the disease and helps save vision.**

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# Glaucoma

## What is it?

Glaucoma is a group of diseases that can damage the optic nerve. There are often no symptoms in its early stages. Left untreated, it can lead to vision loss & blindness.

Most common form: Primary open-angle



## What are the numbers?

2.7 million people  
in the U.S. have **glaucoma**



**50%**  
KNOW

**50%**  
DON'T KNOW

By **2030**,  
4.2 million people  
in the U.S. will have **glaucoma**



## Who's at higher risk?

African Americans **40+**

Everyone **60+**  
especially **Mexican Americans**

 with a  
Family history of glaucoma

## What to do?



Get a comprehensive  
dilated eye exam  
every 1-2 years

# RICH Referral Profiler Workflow

1. Click the Clinical Assessments Button located at the Company Level of Navigator.
2. Click green plus button.
3. Select RBHA: RBHA from the Assessment Category drop-down menu.
4. Select PCP 01: RICH Referral (or Primary Care) from the Assessment Type drop-down menu.
5. Select RICH Referral: RICH Referral from the Assessment drop-down menu.
6. Select the most recent Diagnostic from the Clone From drop-down menu.
7. Click Open
8. The Primary Care Referral (RICH Referral) will populate.
9. Complete all required fields of the form.
10. Click the Save Draft Button.
11. Click the Effective Date box/Select Effective Date.
12. Click Save.
13. From current Clinical Assessments window, double click RICH Referral to reopen to task to Care Coordinator. Please do not use the Bookmark tool.
14. Task the Referral to RICH Care Coordinator (Sara Hilleary) by clicking on the Tasks tab located at the top of the assessment window.
15. Click the green plus button to add the Task.
16. Change CM/PSP name to Care Coordinator's name from the Provider drop-down.
17. Click Save.



*The task will populate on the Care Coordinator's Dashboard for review and to create Primary Care service plan. The referral is then sent to reception for scheduling.*

**NOTE:** It is the PSP's responsibility to check the Patient-At-a-Glance or Appointments report to confirm appointment and inform consumer.

## **Referring to SUD Services (OBOT only, in addition to RICH Referral)**

1. From the Navigator, at the Individual level, select Referrals.
2. Click the green plus button.
3. Select Type: Service Request.
4. Complete all appropriate information, providing detail in Presenting Problem field.
5. Select Notes/Dates tab at top of box.
6. Click the Effective Date box/Select Effective Date.
7. Bookmark referral to Andre Plummer.
8. Client will be contacted by SUD staff to initiate OBOT services.

*The OBOT Induction appointment will be coordinated after contact with SUD staff is made.*

**NOTE:** SUD referral is not necessary for Women's Services. Please complete RICH Referral and task to Sara Hilleary if your client is receiving services from the Women's SUD Services unit.



# It's Flu Season!

Don't forget that the RICH Recovery Clinic provides a wide range of immunizations for its clients including: Pneumococcal, Tetanus, Measles, HPV, Shingles, Hepatitis A & B, Meningococcal, Influenza/Flu, and COVID 19!



To make an appointment have your Case Manager email Chandra McMillan at [mcmillanc@rbha.org](mailto:mcmillanc@rbha.org)



## New Staff Alert!

The RICH Recovery Clinic would like to welcome MarQuetta Blakey! MarQuetta is the new Office Associate I and for fun she likes spending time with her dog Blu.

**Welcome MarQuetta!!!**

