

**UCHC Board of Directors
Clinical Affairs Subcommittee
Minutes
November 12, 2002**

Attendance

Voting Members: Mr. Chudwick (Chair), Dr. Devers, Dr. Lawrence, Ms. Leonardi, Mr. Samuels, Dr. Fuller, Dr. Garibaldi, Dr. Palmisano, Dr. Shafer

Staff: Mr. Borda, Mr. Grab, Ms. Lattanzio, Dr. Simon, Dr. Strongwater, Mr. Budlong, Mr. Kelly, Ms. McManus, Dr. Sanford, Mr. Upton, Mr. Walter, Ms. Gray (recorder)

Other Attendees: Mr. Carlson, Mr. Kleinman, Dr. Wetstone, Ms. Mazzone

Guests: Mr. Kennelly, Mr. Giannini, Mr. Noyes, Ms. Verde, Dr. Kels

- The meeting was called to order by Chairman, Bruce Chudwick at 9:03 a.m.

Public Comment

- There was no public comment.

Minutes

- Minutes of the May 7, 2002 Joint Conference Committee were approved by the members present at that meeting.

Introductory Remarks

- Introductions of those in attendance took place.

John Dempsey Hospital

- Dr. Strongwater introduced Pat Verde and Nick Noyes as this year's Connecticut Quality Improvement Award winners.

- Dr. Strongwater made the following announcements:
 - Clinical activity is strong – practice volume is good.
 - Patient safety is a continuous focus of activity. The Quality Act has become law. A process for implementation at JDH has been put in place.
 - Implementation of the Siemen's Patient Safety System is underway.
 - A redesign team for nursing improvements has been implemented.
 - A review of space issues regarding the clinical enterprise will be brought to the Clinical Affairs Subcommittee at a later date.
 - Areas of concern include:
 - Discussion regarding reinstating State sales tax for hospitals. This tax had been phased out but is again under consideration. Medicaid rates continue to impact reimbursement. Over the last ten years in which the tax was in place, JDH paid ~\$35 million more in taxes than it received from this tax pool.
 - The competitive marketplace.
 - Space for JDH and UMG
 - Improving patient access.
 - Correctional Managed Health Care remains focused on providing cost-effective care to incarcerated patients.

- Joan Mazzone and Jeanne Lattanzio presented the CY 2001 Human Resources report. They discussed the following:
 - Evaluation and education
 - Recruitment and retention
 - Continuing education

The committee raised concerns regarding the completion rate of annual evaluations (82% versus a 95% standard), employee turnover rates, and completion of mandatory training. There are action plans underway for each of these and positive results should be noted in the CY 2002 report.

It is a requirement of the Joint Commission on Accreditation of Healthcare Organization (JCAHO) that each hospital complete a human resource report on an annual basis and that such report be reviewed and approved by its governing body.

The motion was made and seconded (Leonardi/Samuels) to recommend **that the UHC Board of Directors approves the John Dempsey Hospital Human Resources Annual Report , Calendar Year 2001.** The motion was unanimously adopted.

- State Health Department site visit information was presented by Jeanne Lattanzio.
 - Nineteen problems were cited. Most citations were environmental; some were documentation issues, and most were minor in nature. We have submitted a response to the Department of Public Health (DPH).
 - We are anticipating a reaccreditation visit from DPH in December. Our hospital license expires December 31, 2002. The upcoming visit will cover licensing issues.
- Performance Improvement report was presented by Rhea Sanford. She discussed:
 - Ideology and plan
 - Leadership and responsibility
 - Methodology
 - Regulatory review

It is a requirement of the JCAHO that each hospital complete a Performance Improvement Plan and that such Plan be reviewed and approved by its governing body.

The motion was made and seconded (Lawrence/Leonardi) to recommend **that the UHC Board of Directors approves the John Dempsey Hospital Plan for Improving Organizational Performance.** The motion was unanimously adopted.

- Dr. Simon and John Kennelly explained the internal process of approval of medical staff appointments. Dr. Simon outlined the process as follows:
 - Application
 - Process of inquiry
 - Attestation of service chief
 - Delineation of privileges
 - Review by the Credential's Committee, the Medical Board and the Clinical Affairs Subcommittee of the Board of Directors
- Credentialing authority delegation to the Clinical Affairs Subcommittee was discussed.

- Credentialing is done every 2 years via the reappointment process.
- JDH does its own credentialing

A discussion took place regarding the mechanism to use to approve appointments and privileges. The Committee expressed a desire to be more involved and to receive more data before approving appointments. A monthly telephone meeting was suggested. Those cases in which any 'gray' mark had been noted would be discussed in executive session. A tentative schedule of 3rd Tuesdays at noon was recommended.

It is in the interests of JDH to facilitate the process for medical staff to attain and maintain privileges, in order to allow for new and continuing services. The process required to credential and recredential medical staff is labor and time intensive. The current recommendation is made in order to expedite the process.

The following motion was made and seconded (Fuller/Devers) to recommend **that the UCHC Board of Directors considers a mechanism for delegating the authority to approve medical staff credentialing to the UCHC BOD Clinical Affairs Subcommittee.** The motion was unanimously adopted.

- State Health Department Adverse Event Reporting. Dr. Barry Kels discussed the Risk Management process.
 - Reporting requires corrective action plan
 - Not all adverse events are related to medical errors
 - Risk Management files are peer review protected
 - DPH has the right to see all peer review documents
- A mechanism is needed to inform the Clinical Affairs Subcommittee of incidents when they are submitted to DPH. One suggestion was to provide a verbal report to the members. A question regarding how peer review information will be reported back to the Clinical Affairs Subcommittee was raised. This will be an agenda item for the next CA meeting.

The Committee unanimously voted to go into Executive Session at 11:22 a.m. to discuss preliminary drafts or notes having determined that the public interest in having this discussion in Executive Session clearly outweighed the public interest in an open discussion of these matters. Attendance included Mr. Chudwick, Dr. Devers, Dr. Lawrence, Ms. Leonardi, Mr. Samuels, Dr. Fuller, Dr. Garibaldi, Dr. Palmisano, Dr. Shafer, Mr. Borda, Mr. Grab, Dr. Strongwater, Ms. McManus, Mr. Upton, Mr. Kleinman and Dr. Wetstone

At the conclusion of the Executive Session, the Committee returned to open session at 11:50 a.m.

A motion was made and seconded (Leonardi/Samuels) to recommend **that the UCHC Board of Directors authorizes the University of Connecticut Health Center Finance Corporation on behalf of UConn Medical Group to form a limited liability corporation, MRI of Connecticut LLC, as a joint venture with Shields Imaging of Connecticut LLC, the purpose of which will be to own and operate facilities for the provision of high-quality MRI services in selected Connecticut communities, and to execute an operating agreement and such other documents as are necessary to form the corporation; and further endorse the submission of a Certificate of Need application to the Office of Health Care Access to secure regulatory approval to establish the facility(s).** The motion was unanimously adopted.

- **The date of the next Clinical Affairs Subcommittee meeting is Feb. 11, 2003.** A monthly telephone meeting was discussed. This meeting would take place after the monthly Medical Board Meeting, which usually takes place on the 2nd Tuesday of every month. The suggested date for the first telephone meeting would be December 17, 2002.

There being no further business, a motion was made and seconded (Samuels/Shafer) to adjourn the meeting. The motion was unanimously approved at 12:05 p.m.

Respectfully submitted,

Regina M. Gray
Recorder