



UCHC BOARD OF DIRECTORS Clinical Affairs Subcommittee

**November 28, 2006
MINUTES**

Attendance:

Voting Members: Dr. Friend via phone, Dr. Bigos, Dr. Fuller, Dr. Galvin, Dr. Garibaldi, Dr. Kozol, Mr. Cloud, Mr. Samuels

Non-voting Members: Mr. Borda, Dr. Deckers, Mr. Dugger, Ms. Leone, Dr. Menzoian, Dr. Sanford, Dr. Simon, Dr. Strongwater, Mr. Thibeault, Mr. Walter

Others: Ms. DeMeo, Ms. Horbatuck, Mr. Thornton, Dr. Wetstone

Guests: Dr. Adams, Ms. Armstrong, Ms. Capo, Dr. Coll, Dr. Kuchel, Mr. Giannini, Ms. Miller, Dr. Fang, Ms. Shanley, Ms. Schondebare

The meeting was called to order by Dr. Friend at 8:35 a.m.

I. Public Comment

Dr. Galvin made some brief remarks about recent statements that had been in the news regarding Stem Cell funding. He hoped that this would not cause a change of direction in the legislature and felt working cooperatively was the best idea.

II. Minutes of the Clinical Affairs Subcommittee Meetings

A motion was made and seconded (Friend/Fuller) to recommend that the Clinical Affairs Subcommittee approve the minutes of the Clinical Affairs Subcommittee meetings held on September 12, 2006, and October 17, 2006. The motion was unanimously adopted.

III. Geriatrics – Drs. George Kuchel & Patrick Coll

Dr. Kuchel gave a presentation on the geriatric foundational program at UConn. Highlights were: An Update on the 2003 Clinical Strategic Plan; Program Update; Budget; discussion of Future plans. The 45-64 population is increasing dramatically and has shown steady and predictable growth since 03 of 30-40%. Dr. Kuchel thanked both Paula McManus and Dr. Strongwater for their support of the geriatric program.

There was a brief discussion of the problem facing nursing home patients when they are at times admitted to different hospitals vs. the one where they have previously received treatment. Dr. Garibaldi said that the use of hospitalists at JDH has been a way to address this problem.

IV. Medical Staff Bylaws – Dr. Richard Simon

Dr. Simon reviewed suggested changes to the medical staff bylaws which had already been approved at the annual medical staff meeting:

- Clarification of eligibility requirements for general dentists
- Clarification of who is active staff
- Clarification of who is affiliated staff
- Clarification of who is professional staff
- Revising temporary privileges to 120 days in line with JCAHO regulations
- Eliminate Chief of Staff as voting member of Clinical Affairs Subcommittee
- Change quality outcomes & performance system language to QRM
- Clarification of attending's role after requesting a consult
- Clarification of documentation requirements in a medical record

Bylaw changes are made once a year, approved first by medical staff at the annual meeting and then to go Clinical Affairs Subcommittee. The bylaws are continually reviewed on an on-going basis.

A motion was made and seconded (Cloud/Samuels) to recommend that the Clinical Affairs Subcommittee approve the changes to the Medical Staff Bylaws. The motion was unanimously approved.

V. IT Update – Ms. Sandra Armstrong

- **e-HIM** (electronic medical record) through McKesson-Horizon will eliminate the paper medical record. Records are accessible anywhere and the system has an electronic signature feature. Improved security and HIPAA compliance. Currently we are in the process of scanning and bar coding forms. Planned go live date is 3/26/07. There is much discussion and debate about what gets scanned. Overseen by a multi-disciplinary committee.
- **EMR** (ambulatory medical record) Extensive investigation done into Siemens and Next Gen including on site demo. Plans are to move forward with Next Gen which is very flexible and customizable and includes electronic ordering and prescribing along with improved patient safety. The system will reduce or even eliminate transcription, provide medical record cost reduction and allow physician productivity reports. A start date has not yet been determined.

VI. Patient Education Binders – Ms. Julie LaFlamme Navigator Program – Ms. Ann Marie Capo

- Ms. LaFlamme explained and distributed for review patient education binders which are given to the patient and family of those experiencing congestive heart failure, post coronary intervention and cardiac bypass. Patients are able to keep the binders and review them at home for in-depth information about their disease. There is also a film series available on open heart surgery and congestive heart failure which includes testimony from actual patients. Dr. Fuller suggested that the information should be available on CD.
- Ms. Capo explained the Breast Cancer “Navigator” program which encompasses a meeting with a social worker to determine interest and need for a “Navigator.” A Navigator is one of a trained team of volunteers who volunteer their time to assist the patient in understanding services offered and ways in which they need assistance. There has been about a 50% participation rate which is typically based on the amount of support the patient receives from their own support network. Patients are also given bags which have been filled with items that other breast cancer patients have felt were useful but not typically included for patients.

VII. Compliance – Ms. Margaret DeMeo & Dr. Nancy Adams

- An overview of compliance as it relates to clinical affairs was presented. The purpose is to assure compliance with various laws, regulations and standards; prioritize risks and overview clinical risk areas. Progress in this area has increased from approximately 10% to 100% by September 06.

VIII. Clinical Enterprise Update - Dr. Steven Strongwater

a. State of the Clinical Enterprise – Dr. Steven Strongwater

- JDH was awarded a “Care Science Award –2006 Care Science Select Practice National Quality Leader in the Category of Acute Myocardial Infarction”
- Rhea Sanford presented the work of C4I at the 2006 CQC Quality Symposium sponsored by Rensselaer on Oct 4, 2006. This was an invited lecture and was very well received.
- The JDH Rapid Response Team presented their work at the Oct. UHC Safety Conference in Maryland. This was an invited presentation and in this regard, was quite prestigious.
- C4I had its national advisory board mtg. The mtg included the interim dean of the Storrs School of Nursing, the CMO from the U Michigan and recipient of the Keystone Award for Patient Safety, the Physician VP from UHC, a senior researcher from the Florida VA VISN, among others. There were many helpful suggestions which we will be exploring. For instance, no new nurse grads off shift; “stop the line” if there is a break in technique, etc.
- JDH received its JCAHO 3 year accreditation following a successful 4 day site visit, which began the day of our last Clinical Affairs meeting in Sept. We are quite proud of how our staff performed. There are some minor follow up items which we will follow up on. Special thanks to Rhea Sanford for coordinating the visit.
- Baldrige. We continue to make significant progress in all of our 7 work groups. A Strategic Planning retreat with senior management took place on 11/15 where we adopted a model for institutional planning that will be finalized and shared over the next several weeks/months.
- Annual Medical Staff meeting took place on Nov. 8, 2006. Dr. Plamisano handed over the reigns as President of the Medical Staff to Dr. Adam Silverman. Dr. Schaefer will remain the VP of the medical staff. John Kennelly and his staff did an outstanding job organizing and coordinating the meeting.
- Patient Safety Net, a documentation and tracking software product has been acquired and installed. All of our managers have been trained and all of our staff will be trained between now and Jan. We anticipate this to be a watershed event to improve awareness and reporting of potential adverse events. This will also be a cornerstone of prevention relative to our Risk Management Program.
- Image Campaign. Our “Know Better Care” image campaign has begun on television, print, web and mail. Preliminary feed back has been very positive. Concurrently, redesign of our web site is underway. Our appreciation and congratulations to Jim Walter for moving this ahead so adroitly.
- Cath Lab. Work has begun on constructing a second cardiac catheterization laboratory, scheduled to open at the end of this fiscal year.
- The CON for the tomotherapy unit was approved. Planned completion is August of 2007.
- Construction design for the Dental Implant Center has started.
- Volume for JDH and UMG are ahead of plan. JDH admissions and UMG volumes are approximately 4-5% ahead of last year. Revenues for JDH have lagged behind because of a change in payer mix w more Medicaid patients and fewer Medicare patients as well as a decline in indemnity insured patients.
- Multiple new faculty have arrived and are responsible for the bulk of this new volume.
- A plan has been developed to provide additional space to the Emergency Department. We hope to have this fully functional by March of 07.

IX. Watch List Items

- Market share data shows that JDH Emergency Department is the leading choice for care in the Farmington Valley.
- Inpatient census shows JDH as the hospital of choice in Farmington Valley for 24% of patients.
- There are several new reports this month including trended volume indicators (p23) and an average daily census report (p35).

There being no further business, a motion was made and seconded (Friend/Garibaldi) to adjourn the meeting to Executive Session. The motion was unanimously approved and the meeting adjourned at 10:25 am.

Respectfully submitted:
Linda Lock, Recorder