



UCHC BOARD OF DIRECTORS

Clinical Affairs Subcommittee

September 12, 2006
MINUTES

Attendance:

Voting Members: Dr. Friend via phone, Dr. Bigos, Dr. Fuller, Dr. Galvin, Dr. Garibaldi, Dr. Kozol, Dr. Palmisano, Dr. Shafer

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

Others: Mr. Carlson, Ms. Comerford, Dr. Wetstone

Guests: Ms. Horbatuck, Mr. Giannini, Ms. Coyne, Mr. Larsen, Ms. Schondebare

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

I. Public Comment

There was no public comment.

II. Minutes of the Clinical Affairs Subcommittee Meetings

A motion was made and seconded (Garibaldi/Galvin) to recommend that the Clinical Affairs Subcommittee approve the minutes of the Clinical Affairs Subcommittee meetings held on May 2, 2006, May 16, 2006, July 18, 2006 and August 15, 2006. The motion was unanimously adopted.

III. Leadership/Strategic Planning & Organization Results Overview – Dr. Strongwater

Dr. Strongwater first let the committee know that JCAHO had arrived for their unannounced 4 day reaccreditation survey visit.

Dr. Strongwater led the group through a presentation which elaborated on the processes being adopted in preparation for a Baldrige application. The presentation today was on organizational drivers, incorporating requirements, definitions and measures and the 20/20 vision process. Details of the leadership/strategic planning and organizational results overview were discussed. Explanation was given of the acronym ACES: Access, Communication, Effectiveness/Efficiency and Safety.

IV. Baldrige Leadership & Strategic Planning – Mission Statement – Dr. Strongwater

The current and proposed mission statement were distributed. The main difference between the two being the addition of skill and compassion, the sharing of knowledge and the acknowledgement of UCHC's partnership with the state. Dr. Garibaldi commented that he felt the new mission statement captures what we are about. Dr. Strongwater read our current vision at Dr. Galvin's request. It was noted that the title of the mission statement needed to be modified to include "University Dentists."

A motion was made and seconded (Friend/Garibaldi) to recommend that the Clinical Affairs Subcommittee approve the revised Mission Statement. The motion was unanimously approved.

V. Rapid Response Team – Mr. Kathleen Coyne

Ms. Coyne presented the Rapid Response Team and how it is bringing JDH one step closer to being voted the safest hospital in Connecticut. The basics of how the rapid response team works, the implementation process and the results to date were reviewed with the committee.

VI. Collaborative Center for Clinical Care Improvement Update – Dr. Rhea Sanford

Dr. Sanford reviewed the vision, mission and goals of the Collaborative Center for Clinical Care Improvement, along with progress to date, including statistics, measures and communication.

VII. Facility Planning/CON Submissions – Mr. James Thibeault

- The CON for the Mobile PET Scanner has been approved.
- OCHA denied the application for 7 additional ICU beds: we are working to reorganize beds to hopefully achieve the same result.
- The electrophysiology lab opened on August 7, 2006
- Construction has started on a second cath lab.
- A CON application for a tomotherapy unit is pending.
- The IVF clinic will be required to obtain an outpatient surgery license per DPH, they have until April to do so.
- New cardiologist Dr. Michael Fucci will practice one day per week in the Bristol area.

VIII. Performance Improvement Plans – Dr. Rhea Sanford

Dr. Sanford reviewed performance improvement plans for FY'07 including best practice, service, patient outcomes and teams.

IX. Clinical Enterprise Update - Dr. Steven Strongwater

a. Communications – Mr. Jim Walter

- Mr. Walter talked about the results of the first ever Patient School – patients want to take a greater role in their care and the system can be difficult to navigate. 30 patients in spring of '06 attended this program which will run again in the fall. We have been contacted by ABC regarding a segment on the school for Good Morning America.
- A new campaign resulting from work with Mintz & Hoke is scheduled to start the first week of October. It includes TV spots, print ads and billboards. The program is an investment and moves away from promoting specialty services lines to promoting the UCHC difference.

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

- Image marketing campaign is being planned. Jim Walter provided a brief update.
- Good Catch Award instituted. This award recognizes people for reporting on an error or potential error. Several awards have been distributed including during the under the tent celebration. We hope this will further enable a culture of safety, which requires open communication.
- CT Quality Improvement Partnership Innovations Award was given to JDH for the Rapid Response Team.
- Solucient Top 100 Hospital Performance Improvement Award received by JDH.
- Cleverly & Associates recognized JDH as a Community Value Index Top 100 hospital based upon publicly available data on 3072 hospitals. Data for 72 financial performance indicators were assessed.
- Physician Order Entry went live in May on Surgery 7, OR, PCAU. Implementation has gone relatively smoothly, but we continue to wrestle w issues related to order sets, nursing orders, and the like. A very talented team of MDs, RNs, and IT professionals continue to work on POE.
- eHIM project has begun—scanning solution for medical records.
- Storrs radiology images are now being sent to our PACS system and interpreted at here at UConn.
- Core Measures documentation project has begun using real time documentation by case managers into the Softmed Case Mgmt System.
- HCHAPS. Hospital Consumer Assessment of Healthcare Providers and Systems. We have seen the preliminary results of the HCHAPS pilot which will begin nationally in Oct. CT and RI were involved in a pilot over the past year. Compared to these hospitals whose average score was an 8.6 out of 10, we were also at 8.6. We out performed most hospitals in pain management, and scored poorest in environment for care. All hospitals have a long way to go regarding patient education and involvement regarding their medications, communications and responsiveness to patient needs.
- Farmington Surgery Center. Agreement was reached for JDH to acquire FSC. OHCA approved transfer of ownership on 8/28/06. A transition team headed by Jim Thornton has been put in place.
- Sleep Center accreditation site visit took place on 9/1/06. Preliminary feedback is the American Academy of Sleep Medicine will approve our application. Dr. Rains felt we had a “dedicated, well run, high quality program.” She was very impressed with the level of commitment and quality of care that Dr. McNally practiced.
- CON for ICU additional 7 beds was turned down by OHCA. We were unable to convince them of our need in comparison to other CT hospitals.
- CON for Tomotherapy was submitted.
- Critically important new faculty have been recruited. Most Notable—
 - Jay Lieberman, the Co Director of the Musculoskeletal Signature Program; Deputy Director for Cancer Prevention,
 - Dr. Richard Everson;
 - Dr. Molly Brewer, GYN Onc.
- St. Mary’s Hospital in Waterbury. We have been asked to consider assisting St. Mary’s in an affiliation process where we will evaluate over the fall. A letter has been distributed to you in August which outlined the issues St. Mary’s is reviewing.
- Opportunity register work is ongoing in f/u to our reduction in force. Approx 20 clinical positions in JDH and UMG were eliminated.
- CMHC. We are moving into a new phase of our relationship w the MOU beginning in Sept. We have prepared requests for changes in the delivery system, particularly around mental health that DOC is considering.

- JDH Inpatient Admissions. July was slightly behind plan 45 admissions, but August was 22 ahead of plan. This is a very positive sign as many newly hired surgeons will begin on Sept-December.
- The new MOU with the Department of Corrections has been signed. We have recommended changes in the delivery of mental health services. We await word from DOC.
- While we remain optimistic about financials, '06 malpractice costs were \$8 million.

X. Watch List Items

Jim Thibeault directed comments to several of the key indicator pages, specifically:

- X.17 – the primary service area has shown growth of 26% 02-06 including 14.4% growth in the signature programs.
- X.47 – 3 year growth in cancer program 31%, cardiology 25%, inpatient surgery 5.7%, ED 9.2%. There was a discussion about the return on investment and ED availability of statistics regarding those that leave without being treated and what patients clog the ED.
- X.49 – UMG +1% in 3 years, cardiology +26%, and cancer +60%. The musculoskeletal program lost 2 MDS and the signature programs have grown.

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 10:50 am.

Respectfully submitted:
Linda Lock, Recorder

**UCHC Board of Directors
Executive Session
Peer Review Subcommittee Minutes
September 12, 2006**

Confidential – Peer Review Protected

Attendance

Voting Members: Drs. Friend, Garibaldi, Palmisano, Shafer

Non-Voting Members: Drs. Deckers & Strongwater

Other Attendees: Attorney J. Comerford

The meeting was called to order by Dr. Friend at 10:55 a.m.

As a result of a series of previously self reported events and unannounced site visits, DPH performed its annual survey. In part, this led to entering into a consent agreement for close monitoring of several activities and a fine of \$22K, without admitting any wrong doing.

The meeting was adjourned at 11:00 a.m. after this item of business.

Respectfully submitted:

Linda Lock
Recorder