

MORNING CMO REPORT

06.25.2014

FROM THE DESK OF:

Anthony P. Weiss, MD, Chief Medical Officer,
Associate Dean for Clinical Affairs,
Upstate University Hospital

UPSTATE
UNIVERSITY HOSPITAL

Top 10 Communicators

Applies to All Physicians

Top 10
Advisory

I previously called attention to Upstate's performance in the area of physician communication with patients as indicated on our HCAHPS scores. While our overall performance remains lower than our aspirations, we should recognize that there are some extraordinary physicians practicing here whose patient ratings place them among the best in our field. Below you will see Upstate's "top 10" list (for those downtown physicians with at least ten completed surveys) for the past 12 months showing the percentage of time their patients rated their communication with their physicians as Always being superb.

Congratulations to these doctors! We may all have something to learn from the approach they take to the care they are providing.

Physician	Specialty	Communication with Doctors % Always
Wright, Jonathan	Oncology	95.2%
Bratslavsky, Gennady	Urology/Renal	95.2%
Gentile, Teresa	Oncology	90.0%
Graziano, Stephen	Oncology	87.9%
Bem, Jiri	Surgical	87.9%
Robinson, Barbara	Thoracic Surgery	87.9%
Chin, Lawrence	Neurosurgery	86.2%
Hurlong, Shernaz	Rehabilitation	85.2%
George, Tanya	Medical	83.1%
Sun, Mike	Orthopedics	81.8%
Kittur, Dilip	Surgical	81.8%

AMION

Applies to All Physicians

AMION
Advisory

Over the past several weeks, we have begun to examine more closely our hospital's mortality data and factors that contribute to its current state. One of the challenges we face here at Upstate is the very high percentage of transfers in from other hospitals. In fact, Upstate

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HIGH ADVISORY-High priority does not warrant immediate action but recipients should be aware.

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sees twice the number of transfers from other academic medical centers than the national average. As a result, our Transfer Center is under extreme pressure to swiftly and accurately connect outlying physicians with patients to the care they need at Upstate. We rely on Amion to serve as that connection. Unfortunately, we have become aware of several incidents where the name and phone number in Amion has not been correct. All Clinical and Division Chiefs need to be accountable for the accuracy of their Department's call schedule. I ask you to establish a process to verify Amion is continuously correct. Thank you for your attention to this extremely important issue.

BACK DOOR TRANSFERS

Applies to All Physicians

TRANSFERS Advisory

Lately we have had several "back door" transfers that do not utilize the Transfer Center. Many referring physicians will call their colleagues on their personal cell phone to discuss a transfer. When a referring physician calls The Upstate Triage and Transfer Center (UTTC) and states that one of our physicians have accepted a patient or when the accepting physician calls to say that they have accepted a patient, it takes twice as long to complete the transfer. The UTTC has to find the doctor to verify that they did accept the patient, make sure that there was a doc to doc conversation and obtain demographic information on the patient to be transferred. This usually takes several phone calls and many minutes to complete. When the referring physician calls the Transfer Center and lets their staff contact the accepting physician the process is more efficient, the conversations are recorded and time to complete is shorter.

Many referring facilities call back requesting information that is unavailable because the UTTC was not part of the doc to doc conversation. In that case, the UTTC has to track down the accepting physician again, pulling them away from patient care to answer a question from the referring facility. Other times when our accepting physician calls the UTTC staff has to call the referring facility back, taking the physician away from a patient that needs to be transferred for specialized or higher level of care, to get information to complete the transfer.

The recorded conversations are also used for quality and to verify we were given a true presentation of the patient. They are proof of what we were told was being transferred. Those conversations and the times that they took place, give us an idea as to when a patient should

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be arriving here at the facility. The Transfer Center is able to request a bed and notify consulting services that a patient is on their way.

The Upstate Triage and Transfer Center is looking for ways to decrease our time to yes numbers and our time to arrival numbers. Avoiding “back door” transfers that we are not a part of is one improvement that we can make. If a physician from another facility calls you about a transfer, please have them call the Upstate Triage and Transfer Center at 315-464-5449 and go through the process to make the transfer as smooth as possible. Thank you.

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