

MEDSTAFF NEWSLETTER

UPSTATE UNIVERSITY HOSPITAL

JANUARY 2015

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MESSAGE FROM THE MEDICAL STAFF PRESIDENT MITCHELL BRODEY, MD

The mission of the medical staff organization is to improve the health of the communities we serve through research, health care, and education.

The medical staff, led by the Medical Executive Committee has the responsibility to oversee the quality of the medical staff. This is predominately done by credentialing physicians for their appointment and reappointment to the medical staff. This is done through the granting of privileges. This power to give and take away clinical privileges is the means by which the medical staff can help fulfill this mission. In contrast to the other two hospital hierarchies, administration and academic, we are an independent, self-governing, democracy with elected representatives and officers. Any Active member of the medical staff can run for a position on MEC and eventually become the President. If I can be President, ANYBODY can be President. While the medical staff may have an interest in academic and administrative powers, and may try to influence the leadership to change, we have no control. And, all three leadership hierarchies ultimately report

to the President of Upstate who functions as the Board.

It is often said that getting physicians to do something is like herding cats or domesticating eagles. I think it's more like trying to push a truck up a hill with a rope. I borrowed that metaphor from the late comedienne Jackie "Moms" Mabley, although she was using it in a somewhat different context. At any rate, it may be difficult, but sometime it just takes considerable effort and creativity.

As an example let's take influenza vaccination rates for health care workers. While you may believe that influenza vaccine is of little value, the federal and state governments do not share that opinion and consider it a measure of quality medical care. The data is gathered and publically reported. Vaccination rates at upstate have been suboptimal for the medical staff, employees', house staff and students. Over the last year our medical staff rate has gone from 78 percent to 98 percent. How? Someone felt it was an important enough issue to change. That person made a proposal to the bylaws committee to make documentation of

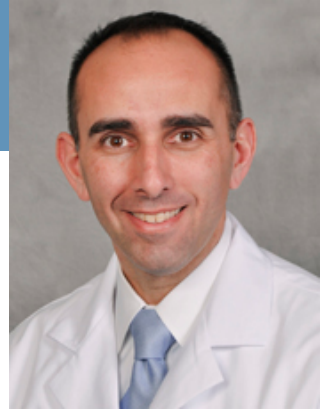
influenza vaccination a condition for membership on the medical staff. The only exception being a documented contraindication to the vaccine. The bylaws committee passed the resolution and brought it to Medical Executive Committee (MEC) for discussion. The proposal was discussed and passed unanimously at the next MEC meeting. It then went out for a vote by the medical staff and was again passed and then approved by Dr. Eastwood functioning as the board. By the official start of flu season there were 350 people out of medical staff of 1347 who had not provided documentation of the influenza vaccine. There could be two reasons for this; either done and not documented, or not done. So as not to impact patient care as this was the first year, Beth Erwin and her staff went about the process of

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HEALTHY DIALOGUE

ANTHONY P. WEISS, MD, MBA



The week between Christmas and New Year's Day is my favorite of the year. Things are typically quiet in the office, and it gives me an opportunity to reflect on the passing year and prepare for the one ahead. In reviewing what we accomplished as an organization in 2014, I was struck by how surprisingly impressive the list actually is. A partial listing includes:

- Full implementation of Epic at both campuses (and winning national recognition for the implementation success)
- Development of a new unit to care for patients with Ebola, or other infectious agents, and the training of hundreds of staff in appropriate care for these patients
- Management of a late summer surge of children with D68 enterovirus, including the first reported case of this infection outside of Colorado
- Attaining Level 1 Trauma Center certification from ACS, for both adults and children
- Opening of the extraordinarily beautiful Upstate Cancer Center
- Attaining Comprehensive Stroke Center Certification from DNV (this actually occurred in 2015, but worth mentioning here given the work involved last year).

I highlight these not to toot my own horn, since I personally had only peripheral involvement in most of these accomplishments. I mention them because we so rarely celebrate our successes here at Upstate, and despite the negative media attention we seem to receive, there is so much that is positive happening at Central New York's only academic medical center. Thanks to all who helped make these (and other great things) happen in 2014.

Not on this list is something that gives me even greater optimism for the year ahead: the increase in healthy dialogue on important topics facing our institution. The great business guru, Ram Charan, states that "dialogue is the basic unit of work in an organization" – by that he means that you can replicate most everything else an organization does, but you cannot replicate the quality of its dialogue. And it is the quality of this dialogue, how well we communicate with each other, that determines the culture of an organization. Over the past several weeks I've begun to see much more dialogue, much more good communication, about the things that matter here. Like how we are structured. How we work together. How we want Upstate to look in the future. These conversations are the key to even better days ahead for the hospital and the patients we serve.



WELCOME NEW MEDICAL STAFF & APC MEMBERS

Shernet Martin, CRNA	Anesthesiology
Bonnie Smith, CRNA	Anesthesiology
Nikki Smith, PA	Anesthesiology
Hisako Seignemartin, DDS	Dental Surgery
Brittney Pfohl, NP	Family Medicine
Beth Currado, NP	Neurosurgery
Christina Zaika, PA	Orthopedics
Alexander Banashkevich, MD	RAD/ON

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rounding up the documentation. Many assumed that the magic flu vaccine documentation fairy would magically deliver the evidence from where they received it to the hospital or that the hospitals actually communicated with each other. Emails went out to the individuals as well as clinical chiefs of service. Phone calls were made vaccines were administered and the list whittled down. A month ago Dr. McCabe signed 200 suspension letters which were then mailed to the providers. We are currently down to about 30 telling. They have been told that they should not be engaging in patient care, and in fact none of them are. It should also be noted that one cannot be reappointed if one is on suspension.

So in a year with a poor vaccine strain match did we accomplish anything? Yes, because it was not just about flu vaccines. The medical staff demonstrated that by working together, it had the power to improve a process and more important, was willing to use that power to make a difference. We learned by doing how to improve and streamline the process for the future. We can certainly try to influence the administrative and academic leadership to look at ways to improve vaccine rates for house staff, students and employees, but it is out of our sphere of control.

More important than that is, it should serve as an example to any member of the medical staff that if there is something that needs to be done to fulfill the mission of the organization they can initiate the process and help shepherd it through. Please just let me know.

I would like to thank Bettina Smallman for all her efforts over the past two years. I learned a lot from watching her lead the MEC. As the immediate past president, I look forward to her continued guidance. Besides starting this newsletter, she also started the process of succession planning for medical staff officers; two significant accomplishments.

In future newsletters, I would like to devote this column primarily to issues that are discussed at that month's MEC. If you have an opinion on any of these or other issues, please feel free to email me. I promise to read and respond to it in a timely manner. I am the president of a medical group, so I am used to ALL CAP emails and I grew up on Long Island, so you do not have to worry about violating the Medical Staff Code of Professional Behavior by using excessive sarcasm with me.

CORE MEASURE CORNER

As you know it is influenza season. All patients are screened regarding their current status of influenza vaccination. Though Nursing does the screening, it is always important for you to know whether or not your patient has had the influenza vaccine. If your patient has not received the vaccination and is a candidate, please discuss with Nursing to ensure the vaccine is administered.



MEC MEMBERS

Voting Officers

Mitchell Brodey, MD; Medical Staff President,
Chair, Medical Executive Committee
(Medicine, Infectious Disease)

Leslie Kohman, MD; Medical Staff Vice-President
(Surgery, Thoracic)

Howard Weinstein, MD; Medical Staff Vice-President
(OB/GYN)

Satish Krishnamurthy, MD; Medical Staff Treasurer
(Neurosurgery)

Bettina Smallman, MD; Medical Staff Past President
(Anesthesiology)

MEMBERS AT LARGE

Tamer Ahmed, MD; (Pediatric Surgery)

Sharon Brangman, MD; (Medicine)

Lynn Cleary, MD; (Medicine)

Timothy Creamer, MD; (Medicine)

Tanya George, MD; (Medicine)

Rolf Grage, MD; (Radiology)

David Halleran, MD; (Colo-rectal Surgery)

Po Lam, MD; (Urology)

Zulma Tovar-Spinoza, MD; (Neurosurgery)

APCC Elected Representative

Thomas Antonini, PA; (Surgery)

EX-OFFICIO, NON VOTING MEMBERS

Lisa Alexander, Esq; Senior Managing Counsel

Nancy Daoust, MS, FACHE; Chief Administrative Officer,
Upstate University Hospital at Community General

Gregory Eastwood, MD; Interim President, SUNY Upstate
Medical University

Beth Erwin, CPCS, CPMSM; Director, Medical Staff
Services

Sarah Fries, NP; Associate Director of Nursing for Advanced
Practice Services

William Grant, EDD; Associate Dean for Graduate Medical
Education

Bonnie Grossman, MD; Associate Medical Director
(Emergency Medicine)

John McCabe, MD; Chief Executive Officer (Emergency
Medicine)

Nancy Page, RN; Chief Nursing Officer

AD HOC, NON VOTING MEMBERS

Robert Carhart, MD; Chair, Credentials Committee
(Medicine)

David Duggan, MD; Dean, College of Medicine, SUNY
Upstate Medical University; (Medicine)

Anthony Weiss, MD; Chief Medical Officer and Medical
Director (Psychiatry)