

March 2013

Upstate University
Hospital

www.upstate.edu/medstaff

MEDSTAFF

NEWSLETTER

Welcome New Medical Staff Members

MEDICINE

- Rakesh Bhan, MD

PSYCHIATRY

- Sandra Barnett-Reyes, MD

RADIOLOGY

- Carl Bundschuh, MD
- Sudha Thota, MBBS
- Sumeet Verma, MD

Welcome New Advanced Practice Clinicians

ANESTHESIOLOGY

- Kyle Riley, CRNA

MEDICINE

- Judith Hamlin, NP
- Kimberly Kasprowicz, NP
- Jessica Tuzzolino, NP

INTRODUCTION

WELCOME! to the first issue of the Medical Staff Newsletter. The purpose of this letter is to communicate important medical staff issues discussed in the Medical Executive Committee and to help physicians and advanced practice clinicians better understand who the medical executive members are and their role and responsibilities.

PURPOSE OF MEC

The Medical Executive Committee (MEC) was founded in response to a requirement by the Joint Commission and is the representative of the Medical Staff.

THIS IS WHAT WE DO

- Make certain that the medical staff is of the highest quality through the credentialing process
- Provide oversight to the medical care that is provided at Upstate Medical University and University Hospital at Community Campus
- Oversee professional governance through the Clinical Quality Improvement Committee
- Provide ongoing link between the evolving status of hospitals with respect to DNV requirements. This is one of the most important issues that will impact all of our medical practices
- It is important for the Medical Staff to understand that the MEC is a resource for all Medical Staff Members. Any member of the MEC can be approached through an open door policy concerning any Medical Staff issue, positive or negative

DO YOU HAVE A QUESTION FOR MEC? PLEASE CONTACT....

askmec@upstate.edu

NEWS & NOTE WORTHY

Medical Staff Meeting

- April 30, 2013 5:30-7:30pm Downtown Campus, Weiskotten Hall



DNV/ISO

FREQUENTLY ASKED QUESTIONS

Q: WHAT IS DNV?

A: Det Norske Veritas (DNV) an accreditation body with CMS authority that includes the regulatory standards of both Medicare and Medicaid Conditions of Participation and the ISO 9001 Quality Standards. Up-state switched from the Joint Commission to DNV in 2010. We are audited yearly by DNV.

Q: WHAT IS ISO 9001?

A: ISO 9001 are a set of quality standards originating in industry now geared towards healthcare. The objectives for ISO 9001 are:

- Consistency of patient care
- Customer (patient) satisfaction
- Continual improvement.

The ISO standards emphasize consistency across all continuums of patient care.

Q: DOES ISO 9001 REQUIRE US TO DO ANYTHING DIFFERENT?

A: Yes it does. We will be surveyed against the ISO 9001 quality standards this fall. This survey will focus on quality and our processes for measuring and monitoring quality. It requires that our policies, forms, practices, and management of nonconformities are consistent across all areas that we provide care. It also requires that we continually perform internal audits to monitor our processes and improve where results show us improvements are needed.

Q: WHEN DO THEY COME TO ACCREDIT/SURVEY?

A: They come annually and are due to visit again in the late summer early fall. This year we are specifically being reviewed for our compliance with ISO 9001 as well as our regularly scheduled Conditions of Participation for Medicare and Medicaid compliance.

Q: WHAT CAN I DO TO HELP US MEET OUR COMPLIANCE SURVEYS?

A: Continue to provide complete and accurate documentation that supports the care you provided. Be certain that all documents, such as policies and forms, are the most recent version acquired from the intranet, learn the basics of ISO 9001 and share with others. Be familiar with the policies that pertain to procedures that you practice. Engage and cooperate with our internal auditors when you see them in your clinical area.

Q: WHY IS THIS ACCREDITATION IMPORTANT?

A: It is a requirement for hospitals to be accredited in order to receive Medicare and Medicaid reimbursements. If we are not accredited, we will not be able to function as a hospital.

FROM GRADUATE MEDICAL EDUCATION

ORCHIDS & NONNS

The GME office is in the process of switching our resident evaluation and information system to MedHub (<http://medhub.com/>). This new system will also be used by the medical school in the future. All faculty supervising residents will be using this new system for evaluation of resident/fellow performance and for credentialing procedure approvals. Others, such as floor nurses, will be using the information from this system to determine whether residents are appropriately credentialed for a given procedure. The new system will allow for most materials to be electronically stored and retrieved making all of our jobs easier.

The ACGME has implemented its New Accreditation System for program accreditation. Information can be found at its microsite ACGME-NAS.org. Under the new expectations in this system each department will be required to develop a system for patient hand-offs. This is also a concern of DNV and of regulatory and funding groups. Attendings should work with residents to be certain that all are following their department's hand-off processes.

A minority (but vocal minority) of graduated residents/fellows and medical students report that they have been abused by faculty and/or residents/fellows. This includes name calling, inappropriate touching, belittling, requests for personal services, etc. Physicians are reminded and are asked to remind residents/fellows that such behavior is inappropriate and will not be tolerated.

Any physician supervising a resident in particular a new resident must perform direct and indirect supervision as required by NYS and the ACGME. If circumstances require 'direct' supervision that usually means that the physician must be physically present with the resident. If there are any questions please check with your program director for specific requirements for your program.

Residents grow, learn and thrive under well constructed performance feedback provided regularly. Knowing specifically what has gone well and knowing specifically what can be improved are deeply appreciated.

William D. Grant, EDD

MEC MEMBERS

Bettina Smallman, MD, Medical Staff President,
Chair, Medical Executive Committee (Pediatric
Anesthesiology)

Mitchell Brodey, MD; Medical Staff Vice-President
(Medicine)

Robert Kellman, MD, Medical Staff Vice-President
(Otolaryngology)

Satish Krishnamurthy, MD; Medical Staff Treasurer
(Neurosurgery)

Colleen E. O'Leary, MD, Medical Staff Past President
(Anesthesiology)

MEMBERS AT LARGE

Sharon Brangman, MD; (Medicine)

Tamer Ahmed, MD; (Pediatric Surgery)

Timothy Creamer, MD; (Medicine)

David Halleran, MD; (Colo-rectal Surgery)

Leslie Kohman, MD; (Thoracic Surgery)

Kara Kort, MD; (Surgery)

Guillermo Quetell, MD; (Plastic Surgery)

Irene Sills, MD; (Pediatric Endocrinology)

Mike Sun, MD; (Orthopedic Surgery)

Zulma Tovar-Spinoza, MD; (Neurosurgery)

APC ELECTED MEMBER

Lisa Cico, NP; (Surgery)

EX-OFFICIO, NON-VOTING MEMBERS

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

William Grant, EDD; Interim Associate Dean for
Graduate Medical Education

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

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

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

Regina McGraw, JD; Senior Managing Counsel

Katie Mooney, RN; Chief Nursing Officer

Meredith Price; Chief Administrative Officer, Upstate
University Hospital at Community General

Paul Seale, FACHE; Chief Operating Officer

David Smith, MD; President, SUNY Upstate Medical
University (Pediatrics)

AD HOC, NON VOTING MEMBER S

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

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

Louise Prince, MD; Chair, CQI Committee & Chief
Quality Officer (Emergency Medicine)