MEDSTAFF NEWSLETTER

UPSTATE UNIVERSITY HOSPTIAL

Message from the Medical Executive Committee (MEC)

The following medical staff bylaws were up for review by the MEC Bylaws Committee. The amended bylaws were sent to all Medical Staff for vote by September 11, 2013 via SurveyMonkey.

More significant changes affected the following:



MSB A-02	Article II: Medical Staff Membership	Changes were made to clarify criteria for new applicants including qualification of new Medical Staff with respect to expected adherence to the Medical Staff Code of Behavior. On Call / Coverage Responsibilities are moved to MSB R-09 to make it easier to find.
MSB R-04	Rules & Regulations: Dental Surgery	Was changed to clarify admitting privileges for dentist and dental surgeons. In essence, in the absence of a medical license, dentist and dental surgeons need to enlist an attending physician to admit and manage the medical care of the patient, which also includes the history and physical.
MSB R-05	Rules & Regulations: Podiatry	Was changed to move Podiatry all under one department (orthopedics), independent of campus. Podiatrists need to enlist an attending physician to admit and manage the medical care of the patient, which also includes the history and physical.
MSB R-08	Rules & Regulations: Malpractice Insurance Coverage Requirements	Was revised to require Excess liability only from those who are eligible for Public Officer's Law Section 18 coverage. This applies to all physicians in the active, affiliate and pediatric courtesy Medical Staff categories. This does not include Podiatrists and Dentists.

Minor Changes were made to the following:

MSB A-06	Article VI: Medical Students	Was updated to reflect current practice for medical student supervision and medical record keeping.	
MSB A-13	Article XIII: Amendments (Medical Staff Bylaws)	Was edited to address the need for both campuses and remove potential restrictions of electronic communication type. Proposed amendments are sent electronically and/or by regular mail.	
MSB A-14	Article XIV:Rules & Regulations	Was edited to clarify the rules and regulations processes	
MSB A-01	State University of New York, University Hospital Medical Staff Bylaws	Was updated to reflect hospital mission.	
MSB R-01	Rules & Regulations: Preamble	Was edited to clarify Rule & Regulation Amendment processes and concert with MSB A-14.	
MSB R-09	Rules and Regulations: On Call / Coverage Responsibilities	Was removed from MSB A-02 (article 2 and Medical Staff Membership) for easier reference.	
MSB X-04	Addendum D: Disaster Credentialing of volunteering medical providers	Was updated to match DIS M-25, the hospital policy on disaster credentialing.	

Hospital bylaws are accessible online from the hospital intranet at http://www.upstate.edu/policies/intra/?CatID=MSB Additionally, members of the Medical Staff can call Medical Staff Services for assistance.

I-STOP

HELP WITH I-STOP (Mandated Duty to Consult)

New York State's Internet System for Tracking Over-Prescribing (I-STOP) law went into effect on Tuesday, August 27. The law includes mandated consulting of a database prior to prescribing controlled substances. There have been many difficulties as everyone attempts to comply with the I-STOP law. We've already heard of problems with accessing the sites, difficulty navigating once you reach the registration site, and lengthy hold times when calling for assistance from the Health Commerce System help line.

Licensed practitioners are required to establish their own Health Commerce System (HCS) accounts, regardless of whether they are prescribing on behalf of the institution. Complete instructions for establishing new HCS accounts are available at

http://www.health.ny.gov/professionals/narcotic/docs/hcs_licensed_professionals.pdf. Practitioner can apply for an active HSC account online at https://hcsteamwork1.health.state.ny.us/pub/top.html.

Licensed practitioners who have dormant or inactive accounts, the DOH sent instructions over the summer on how to reactivate them. To reactivate an existing HCS account, individuals need to contact the Health Commerce Account Management Unit (CAMU) at 1-866-529-1890, Option 1. Individuals will need their HCS Personal Identification Number (PIN) or NYS Driver's License available for identification purposes.

After establishing active HSC accounts, licensed practitioners may then assign designees to access the PMP (Prescription Monitoring Program) registry.

For easier access while at Upstate, there are direct links to the registry site from either campus. At the Downtown Campus, providers can access the I-STOP login through the ZENworks application window icon for 'Approved Internet Sites' or from the Clinical Launchpad. At the Community Campus, providers can access the I-STOP login through the Community Campus Homepage under Knowledge Bases (toward the center of the page).

To check the registry:

- 1. Access the Health Commerce System at: https://commerce.health.state.ny.us via the links provided or add this link to your favorites or desktop
- 2. Log onto the system with your user ID and password, click on Applications and select Prescription Monitoring Program Registry

In order to search the registry, practitioners must enter in the patient's first name, last name, date of birth and gender. The PMP will include two categories of search results, one entitled "My Prescriptions" and one entitled "Other's Prescriptions." The search results will include the name of the drug, the date of the prescription, the name of any other prescribers, payment method and the pharmacy name and location. Out-of-state patients filling prescriptions may not show up on the PMP registry, since not all out-of-state pharmacies are subject to New York pharmacy reporting requirements. Additionally, errors in patient names or dates of birth may result in a negative search.

More information will be provided as it becomes available.

UPSTATE INTRODUCES SCHWARTZ CENTER ROUNDS

In 1994, Boston Healthcare attorney Ken Schwartz was diagnosed with advanced lung cancer. As he reflected on his terminal illness, he discovered what mattered most to him was the connection between himself as a patient and his caregivers. He made a gift at the end of his life to create the *Schwartz Center for Compassionate Care*®. Its mission is "to promote compassionate care so that patients and their caregivers relate to one another in a way that provides hope to the patient, support to caregivers and sustenance to the healing process".

Schwartz Center Rounds, held at more than 300 hospitals in the US and Europe, provide a safe time and place for all caregivers to explore the impact that caring for patients has on us. Regardless of our role on the healthcare team...physician, nurse, social worker, case manager, sitter, therapist, housekeeping, security guard... or our medical specialties, we all deal with the difficult patient or family, with situations requiring us to provide care that we believe is futile or contrary to our own moral compass. We rejoice as a new therapy shows promise. We experience disappointment, anger and grief when our resources are exhausted. We become attached to our patients and their families. How does our own emotional engagement impact us as we care for these "special needs" patients....and all of the other patients who rely on our professional expertise?

Schwartz Center Rounds are multidisciplinary case presentations and discussions open to all staff and students at University Hospital. They provide a safe place for us to share our experiences, frustrations and coping mechanisms when we encounter these difficult situations and an opportunity to learn from each other. Please join us for our inaugural session:

"When Overwhelmed by a Non-compliant Patient and Family Conflict"
Tuesday Oct 1st 3:45-4:45
Performance Center, 11th Floor Tree House GCH
Refreshments and CME/CEU credits available

Please visit the following link for more information: www.theschwartzcenter.org

The Schwartz Center Rounds program is supported by the Dr. Daniel Burdick Compassionate Care Fund, established in 2013 by a generous founding gift from the children of Daniel and Billie Burdick. The gift honors Dr. Burdick's compassion for both patients and caregivers throughout his medical career as a surgical oncologist and general surgeon, and his foresight in recognizing the emotional toll of serious illness on care providers.

ANNUAL MANDATED EDUCATION

After four years, the drastically revised Credentialed Provider Mandated Education has been rolled out and sent to all members of the Medical Staff, and all health professionals credentialed through Medical Staff Services to provide care at Upstate.

This education, which consists of various topics required by regulatory agencies, is mandated for all credentialed providers annually, and replaces the need for several modules that were previously required; indeed, the education has been cut from more than 200 pages to four pages. In addition, the education does not need to be printed and signed – electronic attestation provides proof of completion.

This education can be found at http://www.upstate.edu/medstaff/forms/annual_education.php. Once reviewed and attested to, education is tracked for compliance, and attestations are filed in Provider credentials files each year.

The 2013 Credentialed Provider Mandatory Education is required to be completed by all members of the Medical Staff, regardless of staff status, and all Health Professionals, regardless of employer, no later than September 30, 2013. Please contact Medical Staff Services (medstaff@upstate.edu) with any questions.

COMMUNITY GIVING CAMPAIGN (CGC) LESLIE J. KOHMAN, MD

As a co-chair of the Community Giving Campaign (CGC), along with Dr. David Duggan and Ken Redmore I'm asking you to support some of the 600+ health and human services agencies in this annual campaign. It's a convenient way to support your favorite charities by check or payroll deduction for Upstate employees or credit card (ePledge only).

CGC agencies touch the lives of hundreds of Upstate employees and thousands of Central New Yorkers. Last year 1,726 Upstate employees (21%) raised \$652,000. This year, our goal is to raise our participation to 25%. Medical staff is encouraged to pledge at the Hamilton White leadership level (\$1000 or more). A \$1,000 pledge is only \$38.47 per bi-weekly pay period. Please give and encourage your colleagues to give. Employees will receive an e-mail from listservermanager@unitedway-cny.org on Mon., Sept. 23. A second email will be sent on Sept. 30 if they don't respond to the first email.

This year, we're offering a new Go Green ePledge incentive, the chance to win two special prizes—\$500 in cash or two Gala tickets (\$450 value). To be eligible, employees must donate online by Oct. 9. Those who do not have computer access at work/home can contact Rebecca Cerio at 464-4845 or cerior@upstate.edu After Oct. 9, the ePledge donor option will still be available www.upstate.edu/cgc but the ePledge incentive program will be over. Paper pledges will be mailed on Oct. 21 only to employees who did not ePledge during the two week drive, and to members of the medical staff who are not employees of Upstate.

Remember, in addition to hundreds of community agencies, your donation can be directed to any fund in the Upstate Foundation. As a medical staff member, you're an Upstate leader and your charitable giving sets the tone for all of Upstate.

I hope we can count on your support. Your donation sends a strong message that Upstate cares about its community. Your participation makes me proud to lead this caring Upstate team.

DISCHARGE SUMMARIES

Coming Soon....

Timely dissemination of discharge summaries is essential for continuity of care and improved patient outcomes. There is an association between delayed transmission or absence of discharge summaries and thirty day readmission As a result, CMS is paying increased attention to transitions of care and progression of service across the continuum, and has modified its interpretive guidance for Conditions of Participation accordingly. CMS update was issued on May 17, 2013, and has caused us to look in more detail at our processes for how and when we transmit information to our post-acute provider partners. Attached is a link to the most recent Conditions of Participation update. Please refer to Section A-0837, Standard: Transfer or Referral 482.43(d): The hospital must transfer or refer patients, along with necessary medical information to appropriate facilities, agencies, or outpatient services, as needed, for followup or ancillary care.

At the Medical Executive Committee Meeting held August 27, 2013, the following changes were approved:

- 1. All discharge summaries will be dictated at the time of discharge. They will be clearly marked preliminary, and may be subject to change once finalized. The cover letter will clearly indicate the preliminary nature of the discharge summary (therefore not final, and subject to change)
- 2. Transcription will occur within 24hours of dictation, and faxed to post-acute providers as a bundle which will include:
 - Preliminary Discharge Summary
 - Discharge instructions
 - Medication reconciliation form
 - Cover letter
- 3. Final discharge summaries will be faxed to post-acute providers when completed (marked final)

Important facts to note:

- Transmission of preliminary discharge summaries is the current practice for all dispositions, with the exception of home from the downtown campus
- This modification is the quickest, easiest solution to reach compliance and bridges us to EPIC
- Best-practice transitional care includes real-time transfer of information to post-acute providers
- UH Residents are currently paired with CDI specialists to improve quality of all documentation
- A random audit/comparison of preliminary dictated discharge summaries compared with final discharge summaries on 30 patients admitted after 7-1-13 showed minimal changes made to preliminary summaries

There will be additional information and education coming as we move forward!

You may click on this link for more information now: http://www.upstate.edu/medstaff/forms/pdf/cop_july2013.pdf

Welcome New Medical Staff & Advanced Practice Clinicians!

Stephanie Grice, MD	Emergency Medicine	Kirsten Manganiello, NP	Otolaryngology
Amy Macher, MD	Emergency Medicine	Brian Nicholas, MD	Otolaryngology
Katherine Nacca, MD	Emergency Medicine	Joyce Baker, NP	Pediatrics
Elizabeth Nicholas, MD	Emergency Medicine	Winter Berry, DO	Pediatrics
Susan Schreffler, MD	Emergency Medicine	Travis Hobart, MD	Pediatrics
Michael Ouigley, DDS	Dental Surgery	Sandra Antoniak, MD	Psychiatry
Cinthia Elkins, MD	Family Medicine	Harry Cowart, NP	Psychiatry
Emily Albert, MD	Medicine	Nanette Dowling, DO	Psychiatry
Thomas Lee, MD	Medicine	Gila Reckess, PhD	PM&R
Maniu Paul, MBBS	Medicine	Amit Goval, MD	Surgery
Sundus Latif, MD	Neurology	Indira Thirkannad, MBBS	Surgery
Jessica Lepkowski, NP	Neurology	Srinivas Vourganti, MD	Urology
Amy Sanders, MD	Neurology	<u> </u>	23

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-OFFICO, NON VOTING MEMBERS

Nancy Daoust, MS, FACHE; Interim Chief

Administrative Officer, Upstate University Hospital at Community General

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

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

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

Bonnie Grossman, MD; Associate Medical

Director (Emergency Medicine)

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

Regina McGraw, JD; Senior Managing Counsel Katie Mooney, RN, MS, NEA-BC; Chief Nursing Officer

Paul Seale, FACHE; Chief Operating Officer **David Smith, MD**; President, SUNY Upstate Medical University (Pediatrics)

AD HOC, NON VOTING MEMBERS

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)

Do you have information that you think the Medical Staff needs to know about? If so, please contact us at mailto:askmec@upstate.edu