

# MORNING CMO REPORT

02.10.2016

**FROM THE DESK OF:**

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

**UPSTATE**  
UNIVERSITY HOSPITAL

## 5E First Case Late Start Policy

[Applies to 5E OR](#)

Late Start Policy  
Informational

Late starts create delays that extend to all cases scheduled in that room throughout the day and have a negative impact on OR efficiency and throughput. Currently, we do not have a policy that regulates and encourages on-time starts. The policy below has been established by the 5E OR Committee under the leadership of Dr. Richard Tallarico. Important that all clinicians working the 5E environment be aware of it.

### Definitions

**First Case** - A scheduled case that is the first case of the day starting anytime between 07:30 and 10:00\* in any given OR room. \*Available first case start times are 07:30, 08:00, and 08:30 (at surgeon's request) on Monday through Saturday, excluding Wednesday where available first starts include 08:45, 09:15, and 09:45 (as surgeon's request).

**Late Start**- Any first case which enters the room ("wheels in") 5 minutes after the scheduled start time (grace period).

### Policy Approach/Goals

- Identify cases that are starting late.
- Evaluate the reason for the late start.
- Identify recurring patterns of common causes of late starts.
- Remediate individuals that are responsible.
- Provide feedback to all involved.

The **Source** of a late start will be assigned as follows\*:

- Equipment
- OR personnel/nursing staff (preop, intraop, combination)
- Surgeon factors
- Anesthetist factors
- Patient factors (including patient care logistics)

(\*more than one may apply)

It is the institutional expectation that all personnel have their preoperative responsibilities completed with sufficient time to allow for "wheels in" occurring on time. This mandates that anesthesia and nursing staff engage the patient in the preoperative holding area well in advance of the scheduled case start time. As guidelines, nursing staff should have preoperative

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responsibilities completed 20 minutes before scheduled case start “wheels in” time, anesthesia staff 15 minutes, and surgeons 10 minutes beforehand.\*

*(\*For cases requiring pre-induction epidural catheter placement, anesthetic blocks, central line placement, etc., surgeons should have all preoperative responsibilities completed no later than 30 minutes prior to the scheduled case start time.)*

When a first case late start occurs, it will be the responsibility the service coordinator to assess and ultimately assign a source(s) of the delay.

All cases will be reviewed by the 5E OR operations committee on a monthly basis to determine if any recurring patterns exist.

## Corrective Actions

1. Equipment problems will be addressed by clinical leaders and/or assistant nurse managers.

2. OR personnel issues will be addressed by clinical leaders and/or assistant nurse managers.

3. **Surgeons** who are identified as the source of a late start in **25%\*** or more of their first case starts in any 3 month period will be asked to meet with the 5E OR Operations Committee. The goal of the meeting will be to identify issues, to collaborate on solutions, and to rehabilitate negative practices. There will be **NO** excused delays (i.e., reasons for being “late” are not relevant to how or to whom the late start is assigned). In addition, a notification will be sent to their respective chairperson and/or to hospital leadership in cases where the offending surgeon holds the departmental chair position. The subsequent 3 months will be considered a “remediation period” during which the surgeon’s first case starts will be reevaluated. Surgeons who continue to arrive late for first case starts will not be permitted to have first start positions for 3 months, “probation period”. Continued offenses after this period of remediation may result in longer penalty durations. Loss of first case start position will place the earliest allowed start time to 10:30 Monday, Tuesday, Thursday, and Friday and 11:15 Wednesday. These penalties are surgeon, rather than service specific.

*(\* Late starts of 45 minutes or greater assigned to a surgeon will be evaluated individually. Late starts of this magnitude may lower the threshold for evaluation, remediation, and/or probation at the discretion of the 5E OR Operations Committee.)*

4. **Anesthesiologists** who are identified as the source late start in 25% or greater of their scheduled first starts in any given 3 month period will be asked to meet with the 5E OR Operations Committee. The goal of the meeting will be to identify issues, to collaborate on solutions, and rehabilitate negative practices. Anesthetists who continue to be late will be subjected to the

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internal policy of the Department of Anesthesia created by and specific to the Anesthesiology Department.

## National Patient Safety Week “United in Safety”

March 13-19, 2016

[Applies to All Physicians](#)

Patient Safety Wk  
Informational

Upstate University Hospital is celebrating National Patient Safety week 2016 with a new event. That new event is our first ever Quality and Patient Safety Poster presentation! Does your unit/department have a success story or solution regarding quality and patient safety that you would like to share? Well if so please read on!

We will be utilizing the six aspects of Quality Care as defined by the Institute of Medicine as our poster topics. Select one of these topic areas, write a small summary about your poster on the attached word document and email to Julie Briggs at [briggsj@upstate.edu](mailto:briggsj@upstate.edu) or Sally Ramsden at [ramsdens@upstate.edu](mailto:ramsdens@upstate.edu) so we can save your poster a place at the fair! We need your document by March 4. Now just create your poster and once we have a number of posters we will notify you of the place for display. We are looking to display at the downtown campus on March 15 and 16 and at the Community Campus on March 17 and 18.

Should you have any questions please do not hesitate to contact Julie Briggs 464-6170 or Sally Ramsden 492-5247.

Here are the topic areas for your posters:

### Six Aspects of Quality Care:

**Safe:** avoids injuries to patients from care that is intended to help them

**Timely:** reduces waits and delays for both those who receive care and those who give care

**Effective:** based on scientific knowledge, extended to all likely to benefit while avoiding underuse and overuse

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**Equitable:** provides consistent quality, without regard to personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status

**Efficient:** avoids waste, including waste of equipment, supplies, ideas, and energy

**Patient-centered:** respects and responds to individual patient preferences, needs, and values, ensuring that patient values guide all clinical decisions

Posters can be power points on single poster boards or trifolds and should include the following components: "issue/problem", "analysis of the problem", "solution" and "result".

## New Physician Welcome

[Applies to All Physicians](#)

We are proud to introduce the following new physicians to the Upstate Medical University community for the time frame October 1 – December 31<sup>st</sup>. Please take a moment to welcome them if you happen to cross paths!

New Physicians  
Informational

Name	Specialty	Post Graduate Training
Bernard N. Raasch, MD	Diagnostic Radiology	SUNY Upstate Medical University
Nidhi Bansal, MBBS	Endocrinology & Metabolism	SUNY Upstate Medical University
Helene B. Bernstein, MD	Maternal & Fetal Medicine	Albany Medical Center
Devamohan Sivalingam, MD	Medicine, Internal	SUNY Upstate Medical University
Sheena M. Stanard, MD	Obstetrics & Gynecology	Washington Hospital Center
Soma Sanyal, MD	Pathology-Anatomic and Clinical	SUNY Upstate Medical University
Asalim Thabet, MD	Pediatric Emergency Medicine	SUNY Upstate Medical University
Matthew D. Thornton, MD	Pediatric Emergency Medicine	Brown University/Rhode Island Hospital Pediatric Residency
Emad Awa, MD	Pediatrics	SUNY Upstate Medical University
Adrianne B. O'Quinn, MD	Physical Medicine & Rehab	SUNY Upstate Medical University
Kevin J. Anuvat, MD	Physical Medicine & Rehab	SUNY Upstate Medical University
Amina Akhtar, MD	Radiology	University of Nebraska
Sajeev R. Ezhapilli Chennan, MBBS	Radiology	SUNY Upstate Medical University
Benjamin D. Sadowitz, MD	Surgery	SUNY Upstate Medical University
Surya R. Kumar, MBBS	Thoracic Surgery	SUNY Brooklyn Medical School and Health Sciences Center

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Poster Submission form

Patient Safety Week 2016

Name of

Unit/Department: \_\_\_\_\_

Name of individuals working on poster:

\_\_\_\_\_  
\_\_\_\_\_

Title of

Poster: \_\_\_\_\_

Category for Poster :

☐ Safe

☐ Effective

☐ Equitable

☐ Timely

☐ Efficient

☐ Patient Centered

Brief description of poster topic:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return via email to Julie Briggs [briggsj@upstate.edu](mailto:briggsj@upstate.edu) or Sally Ramsden  
[ramsdens@upstate.edu](mailto:ramsdens@upstate.edu)

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## Note of Appreciation

[Applies to All Physicians](#)

Appreciation  
Informational

I received the following note from some members of the Nursing Support Services Adult SWAT Team (Lindsay Watkins RN, BSN, CCRN, Chrissy Martino RN, MSN, Alicia Lewis RN) and thought I would pass it along. Thanks to Dr. Pruthi for stepping in and helping to care for a patient in extremis.

"We were delighted to work with one of your residents today and we thought it was important that you know she really helped provide optimal care to a patient in need. Dr. Sonal Pruthi was walking by a room where an RRT was called for respiratory distress and she stopped to see if her assistance was necessary. We had a difficult time contacting the primary provider and she was willing to step in considering the patients urgency, and provide us with guidance to treatment. We are thankful for her dedication to quality patient centered care."

## Outstanding Physician Comments

[Applies to All Physicians](#)

Comments  
Informational

Each week we receive written comments from our patients regarding the care we provide within the Hospital. Below are this week's comments from grateful patients receiving care on the units and clinics at Upstate:

**Community General** – Dr. Kahn was very nice; explained everything very thoroughly.

Dr. Damron was very concerned about me and went out and talked to my wife after surgery.

**Emergency Dept** - Dr. Cantor was wonderful. His personality and bedside manner put us all at ease.

Dr. Cantor was calm, polite and took my concerns seriously; showed a sense of humor.

**11E**– Dr. Albanese is an amazing doctor; caring and professional!

Drs. Stanger and Whitney were very positive and very caring. I am so thankful for these two excellent doctors.

**9G** - Dr. Duleep was amazing. Very compassionate, professional and understanding. Her thoroughness is above any other doctor I have been treated by in any of my eight hospital admissions.

**5B** – Dr. Bratslavsky - superior care 24/7 and beyond. Saved my life.

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**10E** – Dr. Gajra is always very good to me and he takes the time to explain things so I can understand. He has the best bedside manner.

**Joslin** – Dr. Nadkarni was amazing.

Dr. Nadkarni was caring and kind. He explained everything with details that you can understand.

Dr. Feuerstein is very knowledgeable with a great personality and shows genuine concern.

**Vision Care** – Dr. Alpert helped me when my other doctors could not. I could tell that you really cared beginning with my first visit.

**Breast Care Center** – Dr. Albert was very patient, informative and reassuring.

**University Cardiology** – Dr. Carhart is very thorough in answering my questions.

**Transplant Center** – Dr. Whittaker is a very good doctor. Always answers to my questions; caring and professional.

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