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~ Regular Meeting ~



ERIE COUNTY MEDICAL CENTER CORPORATION

Tuesday, October 30, 2012

4:00 P.M.
Staff Dining Room, 2nd Floor - ECMCC

Copies to: Anthony J. Colucci, III. Esq.
Corporate Counsel



Mission

To provide every patient the highest quality of care delivered with compassion.

Vision

ECMC WILL BE A LEADER IN AND RECOGNIZED FOR:

- High quality family centered care resulting in exceptional patient experiences.
- Superior clinical outcomes.
- The hospital of choice for physicians, nurses, and staff.
- Strong collaboration with community partners to improve access to healthcare and the quality of life and vitality of the region.
- Academic affiliations that provide the best education for physicians, dentists, nurses, and other clinical staff.

The difference between healthcare and true care™





Core Values

ACCESS

All patients get equal care regardless of their ability to pay or source of payment. We address the healthcare needs of each patient that we can appropriately serve, without bias or pre-judgment.

EXCELLENCE

Excellence is a standard that will never be lowered; there is an expectation of excellence in all areas.

DIVERSITY

We recognize the importance and value of diversity and the enrichment that diversity can bring to ECMCC.

FULFILLING POTENTIAL

We respect the value and potential of each individual as offering a significant contribution to the good of the whole organization. Personal growth and development is important for organizational success.

DIGNITY

Each individual, no matter his or her limitations, background or situation, has intrinsic dignity and unique capabilities.

PRIVACY

We honor each person's right to privacy and confidentiality.

FAIRNESS and INTEGRITY

Equity and fairness are guidelines for all decision-making. We demand personal and institutional integrity.

COMMUNITY

In accomplishing our mission we remain mindful of the public's trust and are always responsive to the immediate surrounding community and our natural environment. This commitment represents both our organization and us as individuals. A successful future for ECMCC depends on a vibrant community and a healthy environment.

COLLABORATION

Collaboration with other organizations is beneficial within the context of our mission and is fundamental to achieving our goals.

COMPASSION

All involved with ECMCC's service delivery demonstrate caring, compassion, and understanding for patients, employees, volunteers, and families.

STEWARDSHIP

We can only be successful in carrying out our mission through solid financial performance and by assuring that resources provided to us are used effectively, in the way they were intended, and for the benefit of our patients and community.

The difference between
healthcare and true care™



AGENDA FOR THE
REGULAR MEETING OF THE BOARD OF DIRECTORS
ERIE COUNTY MEDICAL CENTER CORPORATION

TUESDAY, OCTOBER 30, 2012

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IV.	REPORTS FROM STANDING COMMITTEES OF THE BOARD:	
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Minutes from the



Previous Meeting

ERIE COUNTY MEDICAL CENTER CORPORATION

MINUTES OF THE REGULAR MEETING
OF THE BOARD OF DIRECTORS

TUESDAY, SEPTEMBER 25, 2012

ECMCC STAFF DINING ROOM

Voting Board Members
Present:

Kevin M. Hogan, Esq.,
Chair
Bishop Michael A. Badger
Douglas H. Baker
Richard F. Brox
K. Kent Chevli, M.D.
Kevin E. Cichocki, D.C.

Sharon L. Hanson
Anthony M. Iacono
Dietrich Jehle, M.D.
Thomas P. Malecki, CPA
Frank B. Mesiah
Michael A. Seaman

Voting Board Member
Excused:

Ronald A. Chapin
A. Zizzi, Sr., M.D.

Non-Voting Board
Representatives Present:

Jody L. Lomeo
Michael Hoffert

Also
Present:

Mark C. Barabas
Donna Brown
Richard Cleland
Anthony Colucci, III, Esq.
Leslie Feidt
John Fudyma, M.D.
Joseph Kowalski, M.D.

Susan Ksiazek
Charlene Ludlow
Brian Murray, M.D.
Kathleen O'Hara
Michael Sammarco
Karen Ziemianski
Janet Bulger, CSEA

I. CALL TO ORDER

Chair Kevin M. Hogan, Esq. called the meeting to order at 4:35 P.M.

II. APPROVAL OF MINUTES OF THE AUGUST 28, 2012 REGULAR MEETING OF THE BOARD OF DIRECTORS.

Moved by Anthony Iacono and seconded Dietrich Jehle, M.D. to approve the minutes of the August 28, 2012 regular meeting of the Board of Directors as presented.

Motion approved unanimously.

III. ACTION ITEMS

A. A Resolution Authorizing Representation and Submission Of Application to NYS Office of Alcoholism & Substance Abuse Services

Moved by Richard F. Brox and seconded by Douglas H. Baker.

Motion Approved Unanimously. Copy of resolution is attached.

B. Approval of Medical/Dental Staff Credentials, Resignations, Appointments and Re-Appointments of September 4, 2012.

Moved by Kevin Cichocki, D.C. and seconded by Sharon L. Hanson.

Motion approved unanimously. Copy of resolution attached.

C. Consideration and Approval of 2013 Operating Budget

Moved by Michael A. Seaman and seconded by Richard F. Brox.

Motion Approved Unanimously.

IV. BOARD COMMITTEE REPORTS

Moved by Douglas H. Baker and seconded by Anthony Iacono to receive and file the reports as presented by the Corporation's Board committees. All reports, except that of the Performance Improvement Committee, shall be attached to these minutes.

Motion approved unanimously.

V. PRESENTATIONS

KAREN ZIEMIANSKI, RN, INTERIM DIRECTOR OF NURSING

Karen Ziemianski, RN, Interim Director of Nursing, along with a team of staff nurses provided an overview of the TCAB (Transforming Care at the Bedside) improvement initiative. ECMC staff has been asked by the State of Minnesota to assist a consortium of hospitals to start implementation of this program in that state.

MICHAEL SAMMARCO, CHIEF FINANCIAL OFFICER

Mr. Sammarco provided an overview of the 2013 ECMC budget. The budget recommended by the Finance Committee for Board approval is based on 2012 year end projections.

VI. REPORTS OF CORPORATION'S MANAGEMENT

- A. Chief Executive Officer:
- B. President & Chief Operating Officer:
- C. Chief Financial Officer:
- D. Sr. Vice President of Operations:
- E. Sr. Vice President of Operations:
- A. Chief Medical Officer Report:
- G. Associate Medical Director Report:
- H. Senior Vice President of Nursing:
- I. Vice President of Human Resources:
- J. Chief Information Officer:

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- K. Sr. Vice President of Marketing & Planning:
- L. Executive Director, ECMC Lifeline Foundation:

1) Chief Executive Officer: Jody L. Lomeo

- ECMC Lifeline Foundation “Heroes 5K Run and Healthwalk” honoring WNY’s Firefighting and Law Enforcement Professionals, Emergency Medical Service Providers, ECMC Physicians, Nurses and Staff is scheduled Saturday, September 29th. Donna Lasko, Trauma/ICU Nurse and Michael Manka, M.D. from the Emergency Department are the honorees from ECMC.
- A Strategic Planning Board Retreat will be scheduled before year end to discuss further collaborations to reduce cost and grow revenue.
- Mr. Lomeo briefly discussed issues, challenges and growth areas for the 2013 budget.

2) Chief Financial Officer: Michael Sammarco

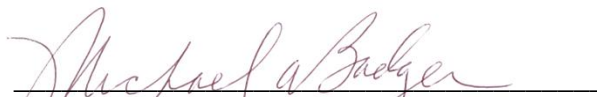
A summary of the financial results through August 30, 2012 and a Quarterly Financial Statement and projected statement of Yearly Cash Flows are attached in the Board Book for review.

Moved by Michael A. Seaman and seconded by Richard F. Brox to receive and file the August 30, 2012 reports as presented by the Corporation’s Management.

The motion was approved unanimously.

VII. ADJOURNMENT

Moved by Anthony Iacono and seconded by Douglas H. Baker to adjourn the Board of Directors meeting at 6:05 P.M.


Bishop Michael A. Badger
Corporation Secretary

ERIE COUNTY MEDICAL CENTER CORPORATION

**Resolution Authorizing Representation and Submission
Of Application to NYS Office of Alcoholism & Substance Abuse Services**


Approved September 25, 2012

WHEREAS, on August 13, 2012, the Corporation applied to the New York State Office of Alcoholism & Substance Abuse Services to increase by one (1) bed the Corporation's medically managed withdrawal and stabilization service (the application is publically identified as Certification Application number 2012.065.0); and

WHEREAS, the Certification Application submitted by the Corporation requires formal approval by the Board of Director's in order to be considered fully by the New York State Office of Alcoholism and Substance Abuse Services;

NOW, THEREFORE, the Board of Directors resolves as follows:

1. The Corporation is authorized to increase the medically managed withdrawal and stabilization service by one (1) bed and all actions of the Corporation in this regard that pre-date the date of this resolution are ratified by this Board of Directors.
2. All actions taken on behalf of the Corporation by senior administrators both before and after the date of this resolution in furtherance of the action contemplated are ratified and approved.
3. This resolution shall take effect immediately.


Bishop Michael A. Badger
Corporation Secretary

CREDENTIALS COMMITTEE MEETING
September 4, 2012

Committee Members Present:

Robert J. Schuder, MD, Chairman
Gregg I. Feld, MD
Philip D. Williams, DDS
Brian M. Murray, MD (ex officio)
Susan Ksiazek, R.Ph., Director of Medical Staff Quality and Education

David G. Ellis, MD (ex officio)
Richard E. Hall, DDS PhD MD FACS
Andrew J. Stansberry, RPA-C

Medical-Dental Staff Office and Administrative Members Present:

Jeanne Downey, Appointment Specialist
Emilie Kreppel, Practice Evaluation Specialist

Members Not Present (Excused *):

Yogesh D. Bakhai, MD (ex officio) *
Dietrich V. Jehle, MD (ex officio) *

Timothy G. DeZastro, MD *
Joseph M. Kowalski, MD (ex officio) *

CALL TO ORDER

The meeting was called to order at 3 PM by Dr. Robert J. Schuder. The proceedings from the previous meeting of August 7, 2012 were reviewed and accepted with the following change: Adel S. Sulaiman, MD did not withdraw a privilege request as indicated. The committee awaits documentation of training for final endorsement of previously requested privilege.

RESIGNATIONS

The Credentials Committee was made aware of recent resignations, application withdrawals, leave requests or conclusions and presents the following names to the Medical Executive Committee for information / overall action.

Deceased – None

Application Withdrawn – None

Resignations:

Yijun Cheng, MD	Internal Medicine	as of August 22, 2012
Mandeep Walia, MD	Internal Medicine	as of August 23, 2012
Maria L. Labi, MD	Rehabilitation Medicine	as of August 30, 2012
Meagan M. Miller, RPA-C	Cardiothoracic Surgery	as of August 30, 2012

APPLICATION PROCESSING CONCLUSION

Plastic and Reconstructive Surgery

Michael S. Haar, MD

Applied, Active Staff

Despite multiple information and documentation requests, the 180 day window for application processing defined in the Credentials Manual has been reached. The committee recommends conclusion of application processing.

CHANGE IN STAFF CATEGORY

Internal Medicine

Roberto O. Diaz Del Carpio, MD

Active Staff to Courtesy Staff, *Refer and Follow*

Neurology

Assad, Refat, DO

Active Staff to Courtesy Staff, *Refer and Follow*

Committee discussion: In anticipation of the GVI-ECMC Cardiothoracic Service, the Medical-Dental Staff Office was asked to reach out to two current Associate Staff members to upgrade to Active Staff designation.

ERIE COUNTY MEDICAL CENTER CORPORATION

Both members declined the proposed change for the present time, and move to Active if the required volume is achieved.

CHANGE IN COLLABORATING PHYSICIAN

Linda M. Blazier, ANP	from Dr. Mandeep Walia to Dr. Nimit Kothari
Magdalene S. Tukov, ANP	from Dr. Mandeep Walia to Dr. Muhammad Achakzai
Mercedes Barber, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Karen H. Binis, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Jacquelyn A. Botticelli, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Cele S. Cacho, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Stacy A. Dean, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Sylvia M. Dlugokinski-Plenz, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Janet M. Dreyer, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Nicole R. Gannon, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Merry Lyn Green, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Kevin L. Hennessy, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Camille M. Holynski, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Caitlin M. Lafferty, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Tania Lawniczak, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Shannon D. Marzullo, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Henry E. Moscicki, FNP	from Dr. David Eubanks to Dr. Stephen Evans
Beverley A. Seib, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Marcia A. Shiel, FNP	from Dr. David Eubanks to Dr. Stephen Evans
Suzanne E. Toland, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Lisa M. Wheeler, ANP	from Dr. David Eubanks to Dr. Stephen Evans
Kara A. Woods, RPA-C	from Dr. David Eubanks to Dr. Stephen Evans
Christine M. Hartnett, RPA-C	from Dr. David Eubanks to Dr. Stephen Evans

PRIVILEGE ADDITION

Family Medicine

- Mohammed Mohiuddin, MD
 - COMPLEX management of substance: Intoxication and Withdrawal
 - Methadone maintenance treatment
- Mathews K. Philip, MD
 - Thoracentesis, Emergency
 - ROUTINE Management of Substance Abuse and Chemical Dependence
 - Basic Substance Intoxication
 - Basic Substance Withdrawal
 - Basic Individual and Group Treatment Modalities

Internal Medicine

- Chiu-Bin Hsiao*
 - Lumbar Puncture
 - Skin Biopsy
- *FPPE to be waived as these are core competencies of infectious disease training*
- Alyssa R. Whiteside, RPA-C
 - Supervising MD: Dr. Muhammad Achakzai
 - Assist with Cardioversion

- DeMaris A. Wilson, ANP
 - Collaborating MD: Dr. Yahya Hashmi
 - Arterial Catheter Insertion, Percutaneous
 - Femoral Vein CVP Placement

Obstetrics & Gynecology

- Dennis D. Mauricio, MD
 - CESAREAN SECTION, with Extended Hysterectomy

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- AMNIOCENTESIS, Genetic <14 Weeks
- Clitoral Operations
- Vault Prolapse (Sacrospinous Fixation)
- LaForte (Vaginal Obliteration)
- Manchester/Fothergill
- Colpectomy
- Extended Hysterectomy (TeLinde)
- Paracervical Uterine Denervation

**Given consult nature of service, FPPE to be waived as core OBGyn competencies, on file at the primary affiliation*

FOR OVERALL ACTION

PRIVILEGE WITHDRAWAL

Family Medicine

Mathews K. Philip, MD

- First assist at major surgery

Internal Medicine

Kimberly A. Pierce, ANP

Collaborating MD: Dr. Jenia Sherif

- *Withdrawing Internal Medicine dual appointment/ privileges; now assigned only to Rehabilitation Medicine*

Urology

Valerie L. Burkhard, MD

- Moderate Sedation

FOR OVERALL ACTION

APPOINTMENTS AND REAPPOINTMENTS

- A. Initial Appointment Review (13)
- B. Reappointment Review (19)

Thirteen initial appointment and nineteen reappointment requests were presented to the Credentials Committee for review. The dossiers were found to be in order and are endorsed to the Medical Executive Committee for its approval with comments (if any) as indicated.

APPOINTMENT APPLICATIONS, RECOMMENDED

A. Initial Appointment Review (13)

Emergency Medicine

Ameer Ibrahim, MD	Active Staff
Jeffrey Thompson, MD	Active Staff
Carolyn Wiech, MD	Active Staff

Family Medicine

Kyle Wiktor, FNP Allied Health Professional (Nurse Practitioner)

Collaborating MD: Dr. Reza Azadfard

Internal Medicine

Kathleen Grimm, MD	Active Staff
Patricia Hammond, RPA-C	Allied Health Professional (Nurse Practitioner)

Supervising MD: Dr. Jenia Sherif

Swapnil Munsaf, MD	Active Staff
Andrew H. Talal, MD	Active Staff

Neurology

Susan Elrich, MD Active Staff

Orthopaedic Surgery

Carl Hoeger, DPM Active Staff
Nicholas Violante, DO Active Staff

Psychiatry

Michael Adragna, MD Active Staff
Jarod Masci, MD Active Staff

FOR OVERALL ACTION

REAPPOINTMENT APPLICATIONS, RECOMMENDED

B. Reappointment Review (19)

Cardiothoracic Surgery

Sharon R. Wittman-Klein, RPA-C Allied Health Professional (Physician Assistant)

Supervising MD: Dr. John Bell-Thomson

Dentistry

Nour Masud, DDS Active Staff

Family Medicine

Mohammed A. Mohiuddin, MD Active Staff
Mathews K. Philip, MD Active Staff
Marcia Shiel, FNP Allied Health Professional (Nurse Practitioner)

Collaborating MD: Dr. Stephen Evans

Internal Medicine

Olga V. Klinkova, MD Active Staff
Laurie A. Abbatessa, ANP Allied Health Professional (Nurse Practitioner)

Collaborating MD: Dr. Chiu-Bin Hsiao

Alyssa R. Whiteside, RPA-C Allied Health Professional (Physician Assistant)

Supervising MD: Dr. Muhammad Achakzai

DeMaris A. Wilson, ANP Allied Health Professional (Nurse Practitioner)

Collaborating MD: Dr. Yahya Hashmi

Neurology

Richard E. Ferguson, MD Active Staff

Obstetrics & Gynecology

Dennis D. Mauricio, MD Active Staff

Ophthalmology

Sandra L. Everett, MD Active Staff

Orthopaedic Surgery

Karen A. Taylor, RPA-C Allied Health Professional (Physician Assistant)

Supervising MD: Dr. Christopher Ritter

Radiology and Imaging Services

Shantikumar D. Bedmutha, MBBS Active Staff

Radiology and Imaging Services-Teleradiology

Brian Burgoyne, MD Active Staff
Jon P. Engbretson, MD Active Staff
Kathy A. Keller, MD Active Staff
Russ Savit, MD Active Staff

Surgery

Kathleen M. Barone, FNP Allied Health Professional (Nurse Practitioner)

Collaborating MD: Dr. Mark Laftavi

FOR OVERALL ACTION

PROVISIONAL APPOINTMENT REVIEW, RECOMMENDED

No Provisional to Permanent staff movements due in September 2012.

AUTOMATIC MEMBERSHIP CONCLUSION, RECOMMENDED

Expiring in December 2012

Last Board Approval Date

Ophthalmology

*Fasiuddin, Airaj, F., MD

Active Staff

12/01/2010

** Doctor telephoned on 8/22/12 to allow her membership to proceed to conclusion*

Reappointment Expiration Date: December 1, 2012

Planned Credentials Committee Meeting: September 4, 2012

Planned MEC Action date: September 24, 2012

Planned Board confirmation by: October 30, 2012

Last possible Board confirmation by: November 27, 2012

FOR OVERALL ACTION

FUTURE MEMBERSHIP CONCLUSION, UNDER CONSIDERATION

Expiring in January 2013

Last Board Approval Date

Family Medicine

Yates, Charles, W., MD

Active Staff

01/01/2011

Radiology and Imaging Services - Teleradiology

Doyle, Kate, Taylor, MD

Active Staff

01/01/2011

Reappointment Expiration Date: January 1, 2013

Planned Credentials Committee Meeting: October 2, 2012

Planned MEC Action date: October 22, 2012

Planned Board confirmation by: October 30, 2012

Last possible Board confirmation by: December 18, 2012

FOR INFORMATION ONLY

OLD BUSINESS

Collaboration Protocols

In response to the retirement of the previous ECH Medical Director, updated collaboration protocols for Family Choice midlevels have been received. The transition date for the permanent ECH Medical Director is in process.

Leave of Absence Confirmation

As follow up to that noted in the August Credentials Committee meeting minutes, formal notification of Dr. Moscati's leave of absence request has been received, reviewed and approved by the Chief Medical Officer. The anticipated date of return is July 2013.

Cardiology Coverage by Hospitalist Midlevels

No update provided. The committee will keep this item on the agenda until successfully brought to closure.

Privilege Form Revisions

INTERNAL MEDICINE

Work continues on a combined Allied Health Professional (Physician Assistant-Nurse Practitioner) Form. It is anticipated that this combined format will be used for all clinical departments moving forward.

UROLOGY

A rough draft has been submitted to the Chief of Service for review and revision.

ORTHOPAEDICS

A meeting was held with the Chief of Service to review formats for form revisions. ECMC and KH core templates, forms from other name organizations were provided. The Chief of Service will reach out to his KH counterpart to discuss the potential of harmonizing to the same format.

ANESTHESIOLOGY

A draft of form revisions has been forwarded to the Chief of Service for review and revision.

DERMATOLOGY

A previously approved form was utilized for the newly re-activated department and applicant. Once the new dermatologist is in place, the form will be updated and a new midlevel form devised.

Temporary Privilege expirations during Pending Initial Applications

A tracking system has been formalized to list Urgent and Temporary Privilege expiration periods and the status of application completion. The current tracking matrix attached.

OVERALL ACTION REQUIRED

NEW BUSINESS

Annual Medical Evaluation Form

The Medical-Dental Staff Office has encountered some physicians who have filled out their own annual health assessment. The committee reviewed a proposed form change, adding additional wording under Item I.:

~ ANNUAL MEDICAL EVALUATION FORM ~

MEDICAL-DENTAL STAFF APPLICANTS

-
- I. FORM TO BE COMPLETED BY THE EVALUATING PHYSICIAN. PRACTITIONERS MAY NOT COMPLETE THIS FORM ON BEHALF OF THEMSELVES.**
-

OPMC Notification

As follow up to that documented in the August Credentials Committee meeting minutes, a letter was issued to a member of the staff, reminding of their responsibility for timely notification of any action received from the OPMC. The Medical-Dental Staff Office will keep the Credentials Chair and CMO informed of the status of this open issue.

Delegated Credentialing Audit

A delegated credentialing audit with Wellcare has been tentatively scheduled for Friday, September 21, 2012. The Medical-Dental Staff Office is collaborating with Fiscal Services to compile the necessary documents and complete the pre-audit assessment tool. An on-site audit has been requested as this better assures accurate and avoids potential privacy breaches associated with desk audits.

Employed Members of the Medical-Dental Staff

An updated roster has been requested from HR to assist the MDSO and RM with ensuring that liability insurance aligns with employment status.

Rules and Regulations Update

The wording of the History and Physical section of the Rule and Regulations, modified to include all of the verbiage in the corresponding HIM Policy & Procedure was approved by the MEC and BOD at their August meetings, and posted on the ECMCC Intranet for the information of the organized medical-dental staff.

Flexing Re-appointment Dates to Balance Monthly Workflow

The previously approved concept of assigning the initial re- appointment date to a low volume re-appointment month for new members was approved by the Board of Directors to be expanded to existing members of the medical-dental staff. This one time re-alignment, well within the medical-dental staff bylaws, will allow the office staff time to better ensure

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accrediting/regulatory compliance and a customer service focus. The MDSO appointment and re-appointment specialists will coordinate the scheduling and quality control checks to ensure full adherence to the medical-dental staff bylaws while conserving staff resources.

Child Abuse Allegation Registry

The Office of Mental Health continues to seek verification in credentialing files that every credentialed behavioral health practitioner has been screened through the Child Abuse Allegation Registry. Due to limited access to this registry, the process needs to be coordinated through the Department of Psychiatry. The Medical-Dental Staff Office has reached back to Behavioral Health to ensure that the agreed upon process has been implemented and the required documentation for the credentials files is forthcoming.

New Department Title

A new department title has been approved for the Department of Radiology. The privilege forms will be updated accordingly:

2012 – 2013 Appointments / Reappointments

for privileges expiring in 2014 or 2015

Department of Radiology/Imaging Services

DEPARTMENT OF RADIOLOGY/IMAGING SERVICES

Privilege

Delineation Form

Hyperbaric Oxygen Therapy Memo

The committee reviewed a memo sent to the Surgical Chief of Service, Wound Center Medical Director, Interim Center Manager and HBO credentialed staff to remind of the continuing education requirement for this privilege. The criteria were taken from the managing organization, and so the question has been posed to the center’s management what options are available to satisfy the criteria. As there has been no formal response to the memo to date, the CMO will reach out to the Chief of Surgery for additional discussion.

The Credentials Committee did suggest a change in the wording of the criteria to make the responsibility to complete CE more explicit:

1. The applicant (licensed physician (allopathic or osteopathic) or podiatrist) ~~should~~ shall seek and gain continuing experience and knowledge through diligent practice, appropriate consultation, and ongoing medical education (a minimum of 12 hours of continuing Hyperbaric Oxygen Therapy education every two years).

Fluoroscanner C-Arm Privileging

Anticipating a focus on Radiology competencies in the upcoming Joint Commission survey, the committee welcomes input from the involved departments to document completion of the training required in the credentialing for mini C-arm use. The assistance of the radiation safety officer, Radiology/ Imaging Services management and the Chiefs of Service of affected departments has been enlisted.

Neurosurgical Critical Care

The committee received a newly issued position statement from the American Association of Neurological Surgeons and Congress of Neurological Surgeons on the competency of residency trained neurosurgeon to deliver neurocritical care. The ACGME approved neurosurgical residency training includes critical care management of patients with neurological disorders. Neurosurgeons are fully trained in neurointensive care by reason of training program requirements, and upon completion of training are competent to independently manage and direct treatment of patients with neurological disorders requiring critical care. Additional training is optional, but not necessary for neurosurgeons to manage neurocritical care patients following residency training.

Credentialing Criteria

A Chief of Service inquired of the Credentials Committee whether an ACLS requirement for an advanced level privilege can be waived in lieu of greater than 10 years of experience. The committee’s assessment was that for logistical and procedural

ERIE COUNTY MEDICAL CENTER CORPORATION

reasons, credentialing criteria must be uniformly applied to all clinical departments and for patient safety reasons, should be consistently enforced. A written response will be sent to the Chief of Service from the Credentials Chair.

Open Issues (Correspondence) Tracking

Open issues reviewed and noted.

OVERALL ACTION REQUIRED

OTHER BUSINESS

FPPE-OPPE Report (included in the consent calendar of the Medical-Executive Committee)

FPPE (Focused Professional Practice Evaluation)

- Anesthesiology (1 DO)
- Emergency Medicine (2 ANPs, 2 DOs)
- Internal Medicine (1 ANP, 1 MD)
- Orthopaedic Surgery (1 MD, 1 RPA-C)
- Radiology (1 DO, 1 MD)
- Radiology, Teleradiology (2 MDs)

OPPE (Ongoing Professional Practice Evaluation)

- The department of Pathology OPPE has been completed (4 MDs).
- There has been further discussion with the Neurology Chief of Service. A plan to complete OPPE has been established.
- Chiropractic is still in process as 2 chiropractors have not yet returned the documentation.
- Cardiothoracic Surgery final notices have been issued. Another request has been made to the Patient Safety Office.
- A template has been defined for the department of Plastic and Reconstructive Surgery. Data is expected early this month and completion of OPPE is expected by the next meeting.
- The department of Internal Medicine has been initiated. All mailing are complete.

Consistent with policy, the annual review of OPPE metrics and proposal of the metrics for the upcoming year will be reviewed with the Chiefs of Service at the September MEC meeting and approved as per the Professional Practice Evaluation Policy.

ADJOURNMENT

With no other business, a motion to adjourn was received and carried. The meeting was adjourned at 4:00 PM.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "R. Schuder". The signature is written in a cursive, flowing style.

Robert J. Schuder, MD,
Chairman, Credentials Committee



Executive Committee

Minutes from the



Buildings & Grounds Committee

ERIE COUNTY MEDICAL CENTER CORPORATION

BOARD OF DIRECTORS

MINUTES OF THE BUILDING & GROUNDS COMMITTEE MEETING

OCTOBER 9, 2012

ECMCC STAFF DINING ROOM

BOARD MEMBERS PRESENT
OR ATTENDING BY
CONFERENCE TELEPHONE:

FRANK MESIAH

MARK C. BARABAS
JODY L. LOMEIO

EXCUSED:

RICHARD F. BROX, CHAIR
RONALD CHAPIN
MICHAEL HOFFERT

DIETRICH JEHLE, M.D.
JOSEPH A. ZIZZI, SR., M.D.

ALSO PRESENT:

DOUGLAS FLYNN

RICHARD C. CLELAND

I. CALL TO ORDER

Frank Mesiah called the meeting to order at 9:30A.M.

II. RECEIVE AND FILE AUGUST 14, 2012 MINUTES

Moved by Frank Mesiah to receive and file the Buildings and Grounds Committee minutes of August 14, 2012 as presented.

III. UPDATE – PENDING CAPITAL INITIATIVES / PROJECTS

Central Sterilization Renovations

- SPD is looking to replace their existing sterilization conveyors for new compact units which reportedly shall improve efficiencies and gain valuable square footage within the Decontamination Suite. This gained square footage is being viewed as the new home for relocated SPD functions from the 1st floor OR Suite. An applicable A/E service quote is being solicited accordingly.

GI Lab Renovations

- Administration is considering renovations to the GI Suite involving the creation of a new GI Lab, an introductory meeting has been scheduled for next week during which a general overview of the intended project will be shared, which shall be followed by the solicitation of a related A/E service proposal.

Dental Residency Expansion / Oral Surgery Relocation

- Dental department seeking additional treatment rooms as their number of residents has jumped. Current plan is to pursue opportunities of renovating the former Eye Clinic space into a new (3) Operatory Oral Surgery Suite. This shall allow for the relocation of Oral Surgery unit and general Dental suite expansion in place. Architectural services secured, project to be an in-house managed and renovated project.

ERIE COUNTY MEDICAL CENTER CORPORATION

Access Road Water Main

- It is the DOT's intention to re-bid the bridge project under the traditional design-bid-build approach as their experiment with design-build proved to be over the established budget. They plan re-bid the same repair scope next spring again which shall include our desired water main repair work.

Immuno Clinic Relocation

- Final schematic plan has been established, CON documents have been prepared. Administration intends to present project to the Board during the October Meeting. Multiple grant avenues are being explored. Floor Plan distributed at the meeting for the general information of all.

Canopy & Lobby Construction Project – Conceptual Level Discussion

- In an effort to be proactive the existing Site & Parking Reconstruction Project is constructing the foundation for a future canopy & lobby reconstruction effort. This will minimize future disruption and assist in reducing future project costs. Conceptual plans distributed at meeting. Currently envisioned project is in the neighborhood of \$5 million.

Radiology Redesign – Conceptual Level Discussion

- Project stakeholders are analyzing forecasted service line needs verses the estimated return of investment. This initiative involves several Radiology related relocation & reconfiguration concepts, which shall lead to a larger conceptual Master Plan. Involved services currently include multiple components of the current Radiology department (aka Phase 2), the 1st Floor MRI concept, and Nuclear Medicine & Urology Space Swap, along with potential others. This planning effort remains conceptual in nature.

Transitional Care Unit @ 6 Zone 2

- Based on complications resulting from DOH's latest CON contingency requirements an alternate approach and schedule had to be developed on the run, while in the bid phase. Contractor Bids are due a week from tomorrow 10/18/12. Work planned to begin November 1st (+/-) and be complete by March 1st (+/-).
- This bid shall include two bid individual bid alternates, one for the construction of a Lab Department Break Room and the second the construction of an Emergency Department Break

Behavioral Health COE Project (HEAL21)

- CON Documents have been forwarded to DASNY, with whom ECMCC has contracted with relative to expedited document review on behalf of the NYSDOH. This arrangement being fairly new requires additional dollars for review processing. This approach guarantees review within (6) weeks, which is a necessity if ECMC is to keep pace with aggressive HEAL deadlines.
- Start on the new CPEP Building is expected to begin in January with related project tower zone renovations beginning later in the 1st quarter of 2013. Full completion planned for July 2014. HEAL invoicing deadline is February 2014.

ERIE COUNTY MEDICAL CENTER CORPORATION

- Conceptual Renderings distributed at the meeting for the general information of all.

Operating Room Expansion @ Renal Center MOB Space

- After (6) full months of submission ECMCC is expecting DOH comment on our March CON project application. Additional detail forthcoming. The project includes (2) complete operating rooms, (2) shelled operating rooms and an Ambulatory Surgery Suite @ the 1st floor level of the Renal Center MOB space.

MOB Fit-Out @ Renal Center Bldg / Floors 2 & 3

- Return on investment analysis is the final precursor to CON application submission, which is expected shortly. The planned occupants include a) 2nd flr - Head & Neck (incl/Drs. Bellis & Linfield), Oncology, & Dr. Sperry; b) 3rd flr - Cardio-thoracic, Cardiology, Department of Medicine (AMS/GIM/Endoscopy), & Urology Private Practice. 2nd flr level being hospital functions and 3rd flr being tenant occupancies.

Financial Counseling / Gift Shop Project

- Applicable architectural Contract is under legal review for this potential future project which includes the relocation of the Financial Counseling function and Medicaid Services from the ground floor to a full renovated former hemophilia suite on the first floor, and the temporary relocation of the gift shop while the Gift Shop proper is fully renovated and expanded.

Signage & Wayfinding Project

- Bidding documents for the interior signage bid package, including SNF project, Hospital 10th floor, TCU and long term unit pricing is planned to be out to bid early next week (week of 10/15/12).
- The development of a new Site Signage bid package has begun, working toward a late fall issuance.

IV. UPDATE – IN PROGRESS CAPITAL INTIATIVES / PROJECTS

Site & Parking Reconstruction Project

- **Site Reconstruction** – reconstruction of Lots C&D complete, Lot B to be complete later this month. Lot A reconstruction to follow. Full project completion expected by mid – late November, approximately one month ahead of schedule.
- **All-Pro Parking Management**
 - ECMCC to review/negotiate current needs while we complete the balance of the reconstruction effort:
 - 1) It would appear that management of the ramp will continue to be an interim need until internal operational plans can be developed and implemented (January +/-)
 - 2) There appears to be interest in continuing the Valet services, at least on a trial basis once the permanent site layout under use, ie through the winter.

ERIE COUNTY MEDICAL CENTER CORPORATION

- 3) Paid Parking Lot Management – Lots A, B, C, & D being our paid parking lots may or may not require interim management services. Currently our permanent revenue collection system is planned to be commissioned mid-late November. If un-managed this would leave 175+/- spaces open / free for approximately one month. This is an ongoing discussion.

Parking Facility Coordination & Planning – There is an on-going weekly coordination effort which is intended to draft set of utilization rules and regulations applicable to the new parking facilities. These shall lead to our intended game plan as far as self managing the full parking system, both staff and revenue generating lots.

CPEP Fast Track Initiative

Joint OMH/DOH pre-occupancy inspection held on 09/18/12 with a few resulting follow-up req for correction post occupancy which began 09/24/12. Changes expected to be complete by en October.

CPEP EOB Unit @ 4 Zone 3

Joint OMH/DOH pre-occupancy inspection held on 08/27/12, with a few resulting follow-up request for correction prior to occupancy. Corrections completed and unit was open for business on 09/12/12.

Skilled Nursing Facility

All trades in full swing, “A” wing “punch-listing” in progress, final cleaning to begin this week, completion remains on target for February 1st.

Chilled Water Plant Improvements

Phase 2 for the project in progress with the balance of existing cooling towers demolished removed, re-roofing work to begin next week, full project completion planned for spring.

Security Camera & Access Control Systems

Our Security Camera / Access Control Head-End System, “Pro-Watch”, a Honeywell product, was installed last week. This program shall serve as the support foundation to the newer security systems that are being purchased as part of the varying capital building projects as well as the intended Campus wide security enhancement initiative. The intent going forward to ensure compatibility of varying systems.

V. ADJOURNMENT

Moved by Frank Mesiah to adjourn the Board of Directors Building and Grounds Committee meeting at 10:25 a.m.

Next Building & Grounds meeting – December 11, 2012 at 9:30 a.m.
Staff Dining Room.

Minutes from the



Finance Committee

BOARD OF DIRECTORS
MINUTES OF THE FINANCE COMMITTEE MEETING
SEPTEMBER 24, 2012

ECMCC BOARD OF DIRECTORS CONFERENCE ROOM

VOTING BOARD MEMBERS
PRESENT OR ATTENDING BY
CONFERENCE TELEPHONE:

MICHAEL A. SEAMAN
RICHARD F. BROX
DOUGLAS H. BAKER

THOMAS P. MALECKI, CPA

VOTING BOARD MEMBERS
EXCUSED:

ANTHONY M. IACONO
DIETRICH JEHLE, MD

ALSO PRESENT:

JODY LOMEQ
MARK R. BARABAS
MICHAEL SAMMARCO
ANTHONY J. COLUCCI, III

RICHARD CLELAND
JOHN EICHNER
PAUL HUEFNER

NON-VOTING MEMBERS
EXCUSED:

RONALD KRAWIEC

I. CALL TO ORDER

The meeting was called to order at 8:05 A.M., by Michael A. Seaman, Chair.

II. RECEIVE AND FILE MINUTES

Motion was made and accepted to approve the minutes of the Finance Committee meeting of August 21, 2012.

III. AUGUST, 2012 FINANCIAL STATEMENT REVIEW

Michael Sammarco provided a summary of the financial results for August, 2012, which addressed volume, income statement activity and key financial indicators.

Total discharges were under budget by 12 for the month of August. Year-to-date discharges were over budget by 151 and 667 over the prior year, or 6.6%. Acute discharges were under budget by 74 for the month, under budget by 119 year-to-date, and 333 over the prior year, or 4.6%.

Observation cases were 154 for the month, and the average daily census was 359. The acute average daily census was 213, compared to a budget of 206. Average length of stay was 6.6 for August, compared to a budget of 6.0 and 7.0 the prior year. Non-Medicare case mix was 2.37 for the month compared to a budget of 2.30, and Medicare case mix was 1.75, compared to a budget of 1.81.

Inpatient surgical cases were 12 over budget for the month, 16 over budget year-to-date and 274 over the prior year. Outpatient surgical cases were under budget by 67 for the month, under budget by 469 year-to-date, and 198 less than the prior year or -3.8%.

Emergency Department visits were under budget for the month by 1,480, and 1,995 over the prior year.

Hospital FTEs were 2,449 for the month, compared to a budget of 2,502. Home FTEs were 300 for the month, compared to a budget of 307.

The Hospital had an operating surplus of \$1 million, compared to a budgeted surplus of \$1.3 million and a surplus of \$1.2 million the prior year. Net patient service revenue was \$1.3 million over budget and \$3.7 million over the prior year due to favorable non-Medicare case mix. The Home had an operating loss of \$600,000 for the month, which was primarily due to decreased patient days.

The consolidated, year-to-date operating loss was \$4.4 million compared to a budgeted loss of \$2.2 million and a prior year loss of \$7.1 million. Days operating cash on-hand was 25.3. Days in accounts receivable were 42.3, compared to a budget of 40.0.

IV. 2013 OPERATING BUDGET:

Mr. Sammarco distributed a draft of the 2013 Proposed Operating Budget to the committee.

After a detailed review and discussion, the Finance Committee recommended that the Board of Directors approve the 2013 operating budget. Motion was made and seconded.

V. ADJOURNMENT:

The meeting was adjourned at 9:35 a.m. by Michael Seaman, Chair.



ECMCC Management Team



Chief Executive Officer

ERIE COUNTY MEDICAL CENTER CORPORATION

**REPORT TO THE BOARD OF DIRECTORS
JODY L. LOMELO, CHIEF EXECUTIVE OFFICER
OCTOBER 30, 2012**

Hope everyone is doing well and we appreciate the commitment the Board of Directors makes in helping to serve the patients of ECMC and our community.

HOSPITAL OPERATIONS/ACTIVITY

The hospital continues to be extremely busy and we have seen volume increases in many of the areas throughout the hospital. As we discussed last month during the budget session, we have been enjoying years of continued growth in areas such as inpatient surgeries, admissions and acute discharges. As you can see in our financial report for this month, our statistics look good and our numbers look especially good relative to the time of the year. With that being said, we are in a perpetual state of change and need to navigate through the changes in healthcare and healthcare delivery.

TRANSFORMING FOR THE FUTURE

The care delivery system is clearly evolving to new models that emphasize care coordination across settings, integrating delivery systems and implementing partnerships. Providers need to focus on clinical outcomes as well as adjusting to utilization patterns for broader episodes of care. We will continue to transform our organization and strategically place it in the best position to serve the patients of this region in the future.

The Executive Management team and I have been working closely with the Executive Committee of the Board to prepare a strategic retreat before year end. The goal of this retreat is to develop a strategic plan that will be the roadmap for ECMC for the foreseeable future (5-10 years). As we reflect over the past five years, we have had a “high batting percentage” on the strategic plan that was developed back then. We acknowledged our challenges and developed plans around them. For example, four plus years ago, we were tasked with further collaboration with Kaleida Health, developing a primary care strategy and securing a stable relationship with the NYS Department of Health, the County of Erie and the University of Buffalo. It is important for us to not only review and acknowledge the past, but keep a keen and focused eye on the future.

We continue to drive the transformation that must occur in order for us to continue the programs and services that have brought ECMC to where it is today. For example, we will continue to be steadfast and focused on our mission but must also be thoughtful and respectful to financial circumstances that the hospital may find itself in.

COUNTY OF ERIE TRANSACTION

In late 2009, ECMCC entered into a Settlement Agreement with the County of Erie in an effort to resolve issues that were outstanding between us that existed at that time. Among other things, the 2009 Settlement Agreement resolved annual funding for ECMCC, the transfer of land between the County and ECMCC, certain capital contributions by the County (for the new LTC facility currently under construction), creation of an EOS credit to smooth out excessive IGT payments, and the appointment process for board members at ECMCC. Despite our best efforts at resolving all issues, a couple issues have developed since 2009 that required further attention and negotiation.

Earlier this month, I am happy to report, ECMCC and the County executed the First Amendment to the 2009 Settlement Agreement to resolve the issues that remained. This First Amendment acknowledged that the County has been paying substantial money for continuing workers compensation expenses incurred as a result of claims by former ECMC Healthcare Network employees. The First Amendment also acknowledged that ECMCC has been paying substantial money and incurring expenses for retiree health care (GASB 45). The parties agreed to resolve these issues in a manner that impacts them minimally. ECMCC will create an additional \$28 million in the EOS credit that was first used in the 2009 Settlement Agreement. The County, on the other hand, will agree to repay ECMCC \$2.0 million per year commencing in 2015. Like most legal documents, there are more details that are involved and we will be prepared to answer your questions as you consider the approval of this agreement at the October 30, 2012 board meeting.

Once again, I would like to thank the Board of Directors for their vision and willingness to collaborate in a manner in which ECMC, the County of Erie, and the community benefit.

BEHAVIORAL HEALTH

We are currently awaiting word from the NYS Department of Health on our CON (Certificate of Need) application for our Behavioral Health Center of Excellence. We are working very closely with our partners at Kaleida to integrate the programs. Rich Cleland and his team have done a wonderful job with the patients and the management of the Behavioral Health service line here at ECMC.

ECMC is assisting Kaleida with the management of their program. This includes expanding Horizon Health's role in management of both programs under a consolidated model. A consolidated management model will allow a unified foundation and assure that both programs continue to improve and strengthen as they integrate under ECMC.

MEANINGFUL USE

Congratulations to all involved especially Leslie Feidt and her team, physician leadership, and ancillary departments for successfully attesting to Stage 1 of Meaningful Use. ECMC will receive \$3.4 million funding for successfully meeting this objective by year end. My sincere appreciation to all involved who helped get this done. Organizational focus has been initiated to support the strategic goal of successfully attesting to Stage 2 Meaningful Use by October 2013. Projects include computer physician order entry within patient areas, electronic medication reconciliation, e-prescribing and the roll out of the patient portal.

REVENUE AND EXPENSES

We continue to be challenged by both revenue and expenses as we see future reimbursement rates going down while expenses continue to trend higher. As we have discussed on numerous occasions, we will continue to have an eye towards growth and will continue to recruit and retain physicians and service lines as we have done over the past five years. We are always looking to work toward effectively decreasing our expenses and becoming more efficient. We may have to consolidate and become more efficient in order for us to grow. Again, the Board will deliberate those strategic directions at the Board Retreat.

LONG TERM CARE UPDATE

At tonight's Board meeting the new name of the facility will be announced. I would like to thank all those involved including our residents, staff members, Board members and others who participated in the naming of the facility. We are on time for an opening in February 2013. I encourage all to visit the facility prior to the opening; there is a tremendous amount of excitement around this building and the development of the Long Term Care Center.

We look forward to welcoming the employees as well as the residents to the ECMC Health Campus in 2013.

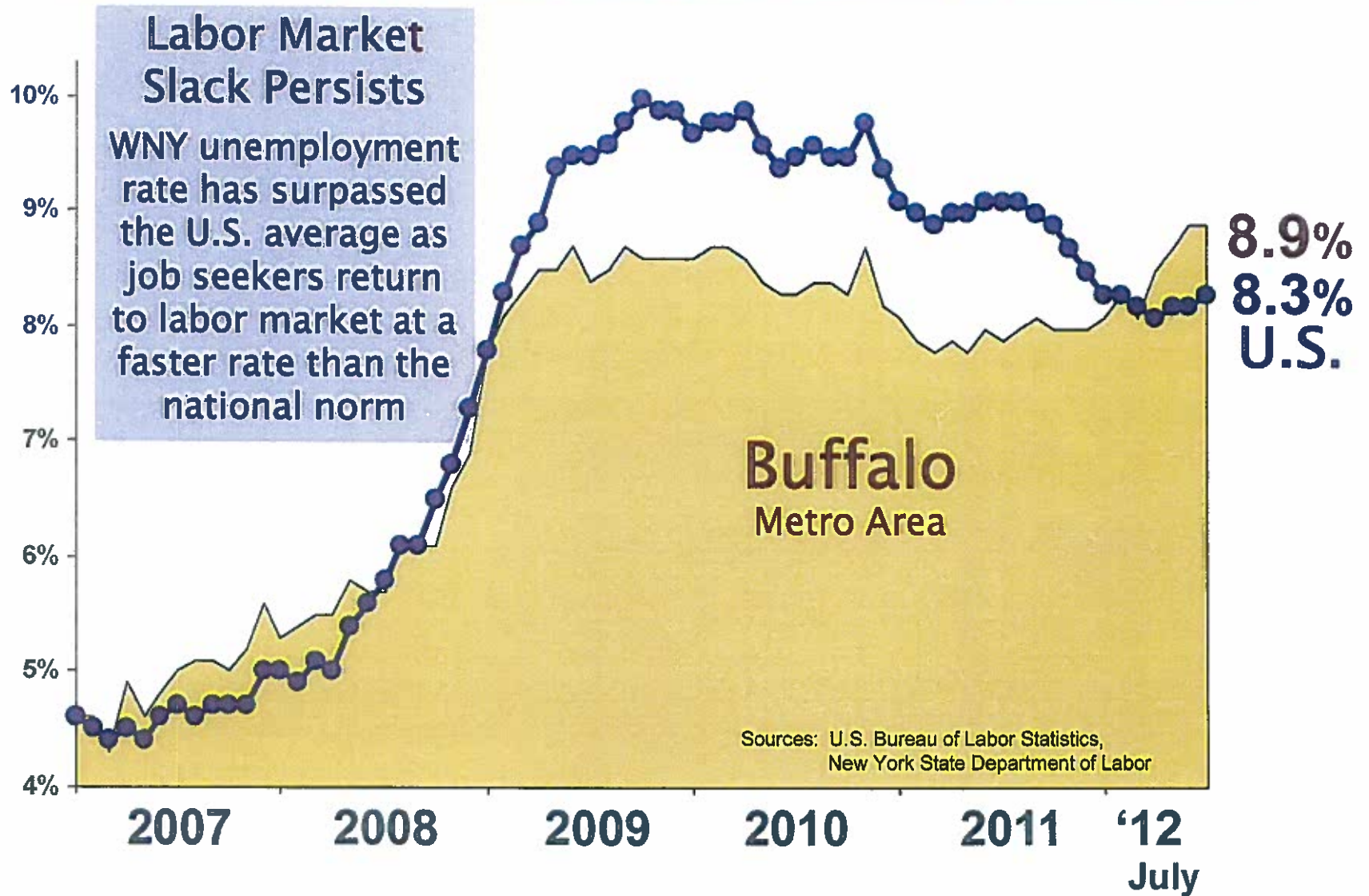
PATIENT EXPERIENCE

Months ago, the Patient Experience committee came to me regarding a number of initiatives to positively impact the patient experience. The number one “ask” was for new and free TV’s in all patient rooms. I am pleased to announce that beginning in late October we will be replacing all old TV’s with brand new flat screen TV’s in every room. Russell Salvatore of *Russell’s Steaks, Chops & More* generously donated \$194,000 to make this a reality. We thank Russell for his generosity and will be recognizing him in the coming weeks.

In closing, I appreciate your support, guidance and wisdom as we continue to grow and transform our organization.

Jody L. Lomeo

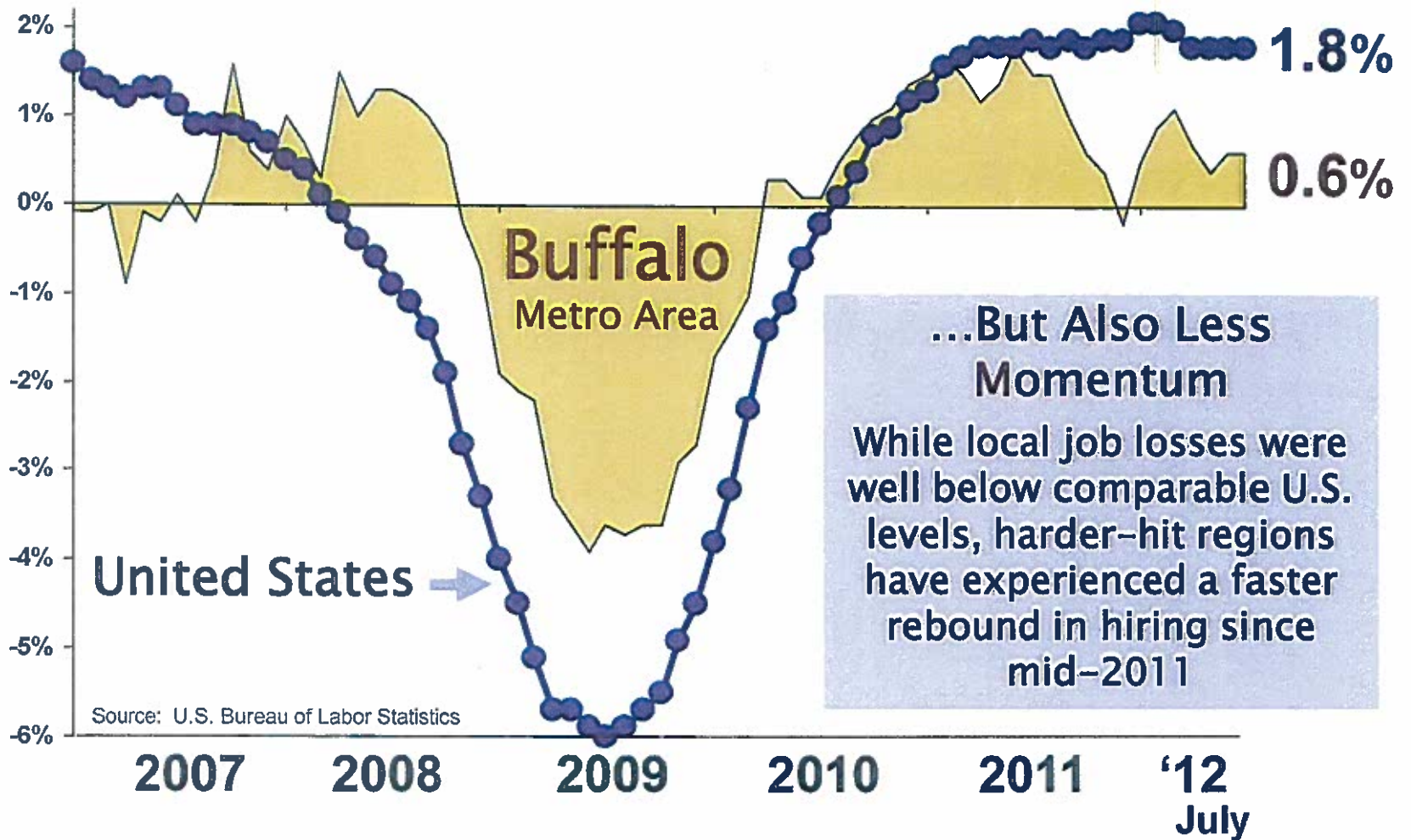
Seasonally Adjusted U.S. and Buffalo Area Unemployment Rate



Year-Over-Year Percentage Change

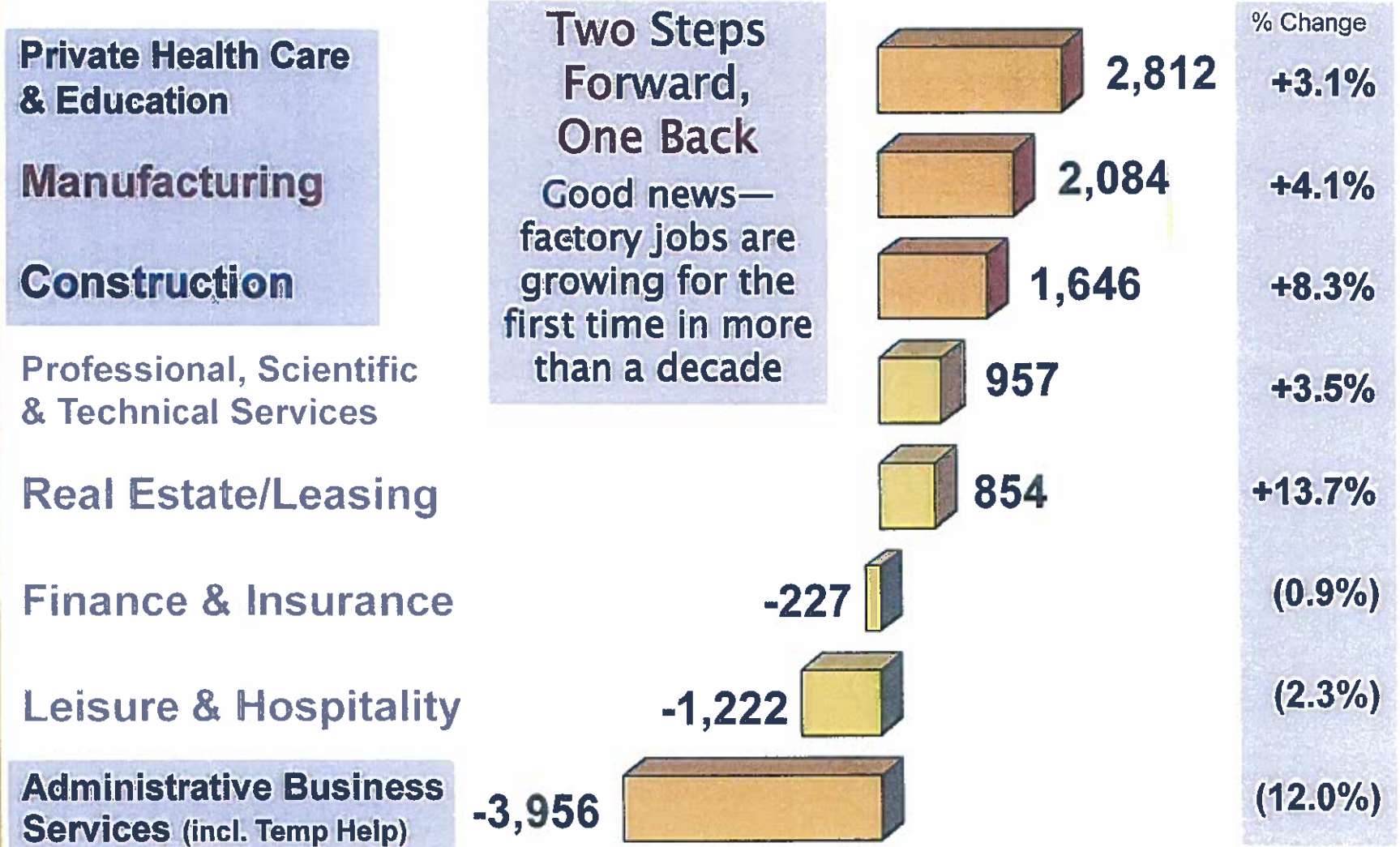
Private Sector Employment Growth

Buffalo-Niagara Falls Metro Area vs. U.S.



Year-Over-Year Absolute Change

Buffalo Area Job Gain/Loss – July 2012 YTD



Source: U.S. Bureau of Labor Statistics

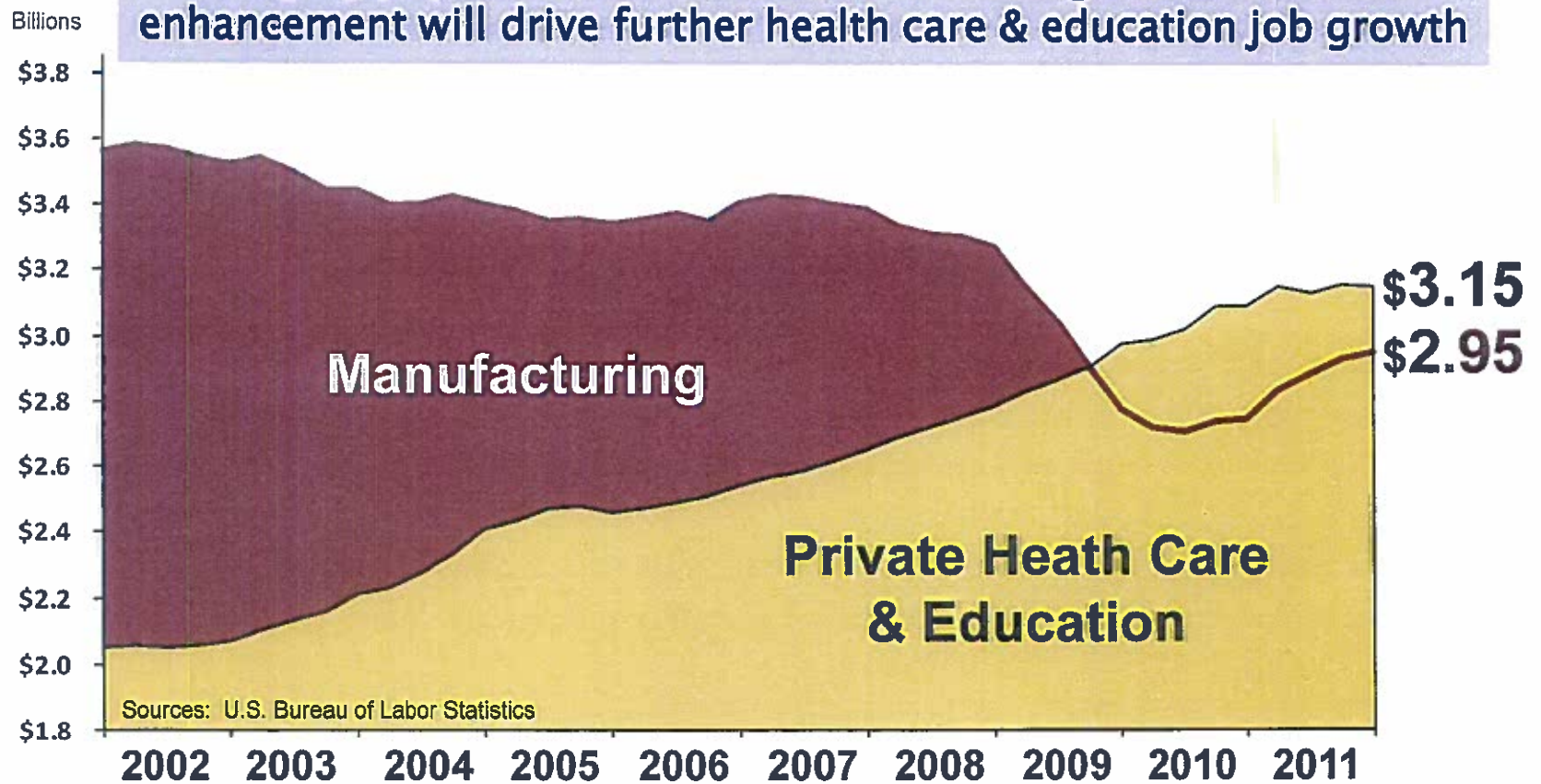
4-Quarter Running Total

Buffalo Metro Area Payroll Income

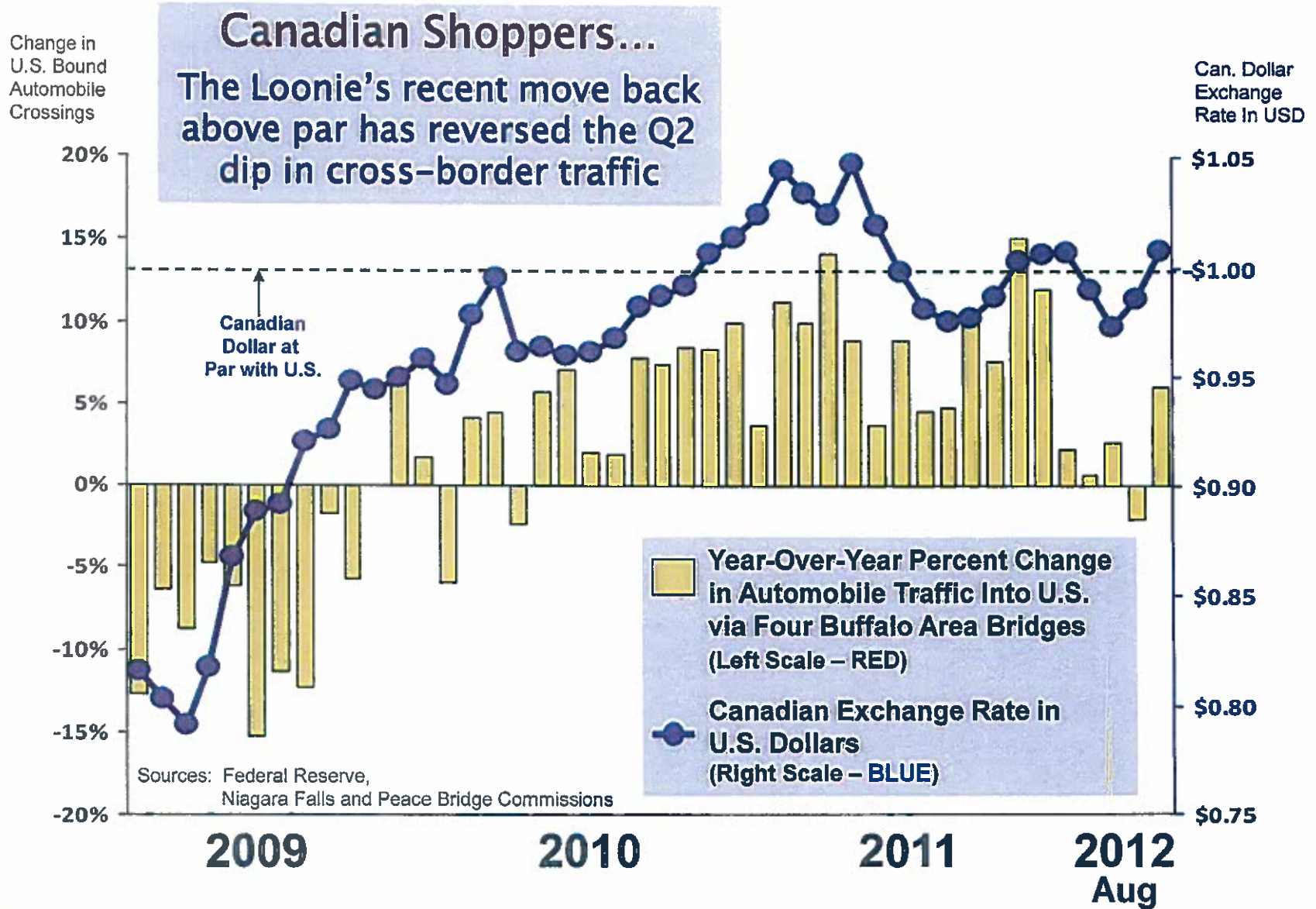
Private Health Care & Education vs. Manufacturing

“Eds & Meds”—A New Economic Leader

An aging population and demand for lifelong workforce skills enhancement will drive further health care & education job growth



Buffalo Area International Bridge Traffic Trends

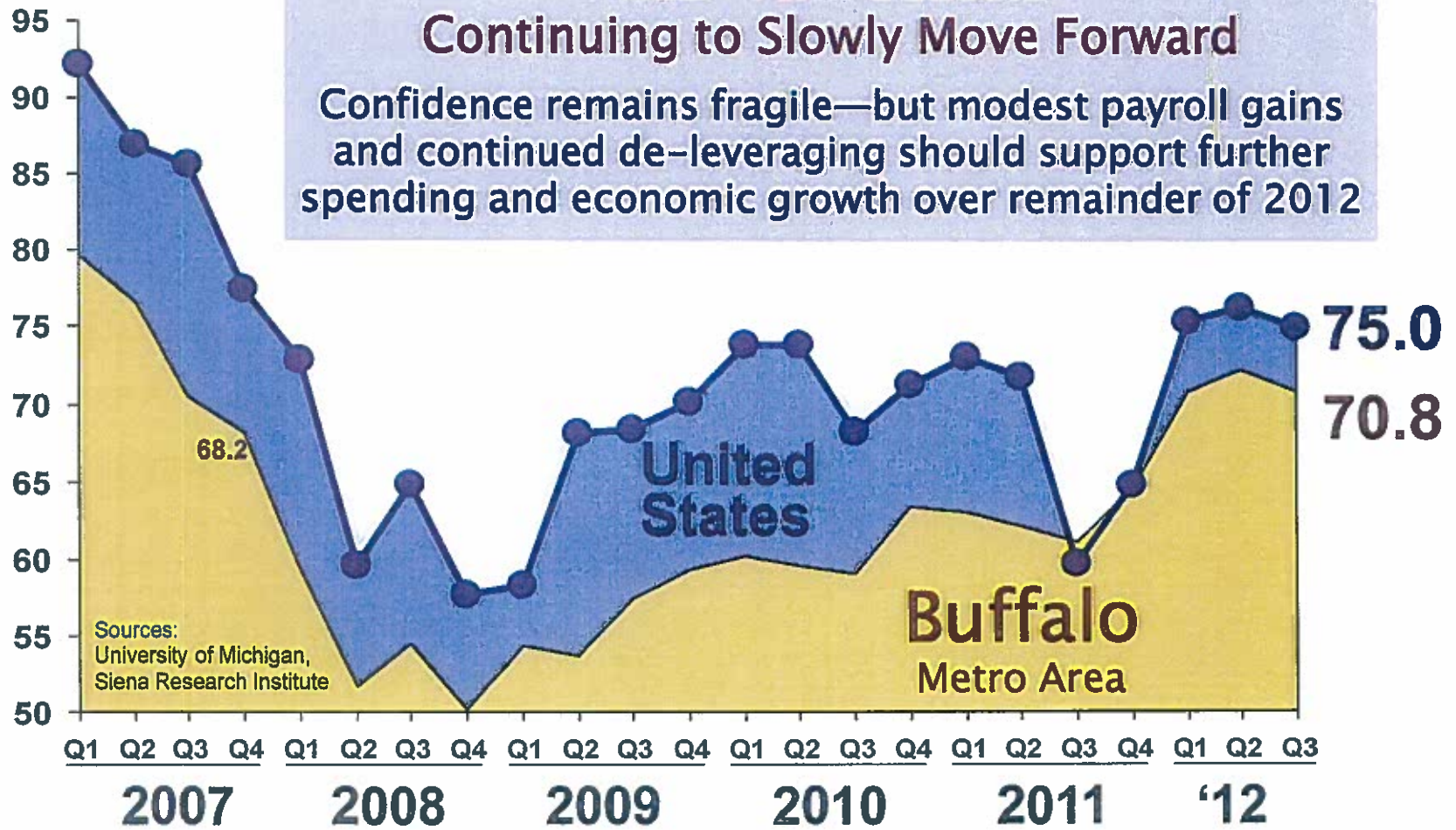


Consumer Confidence

Buffalo Metro Area vs. United States

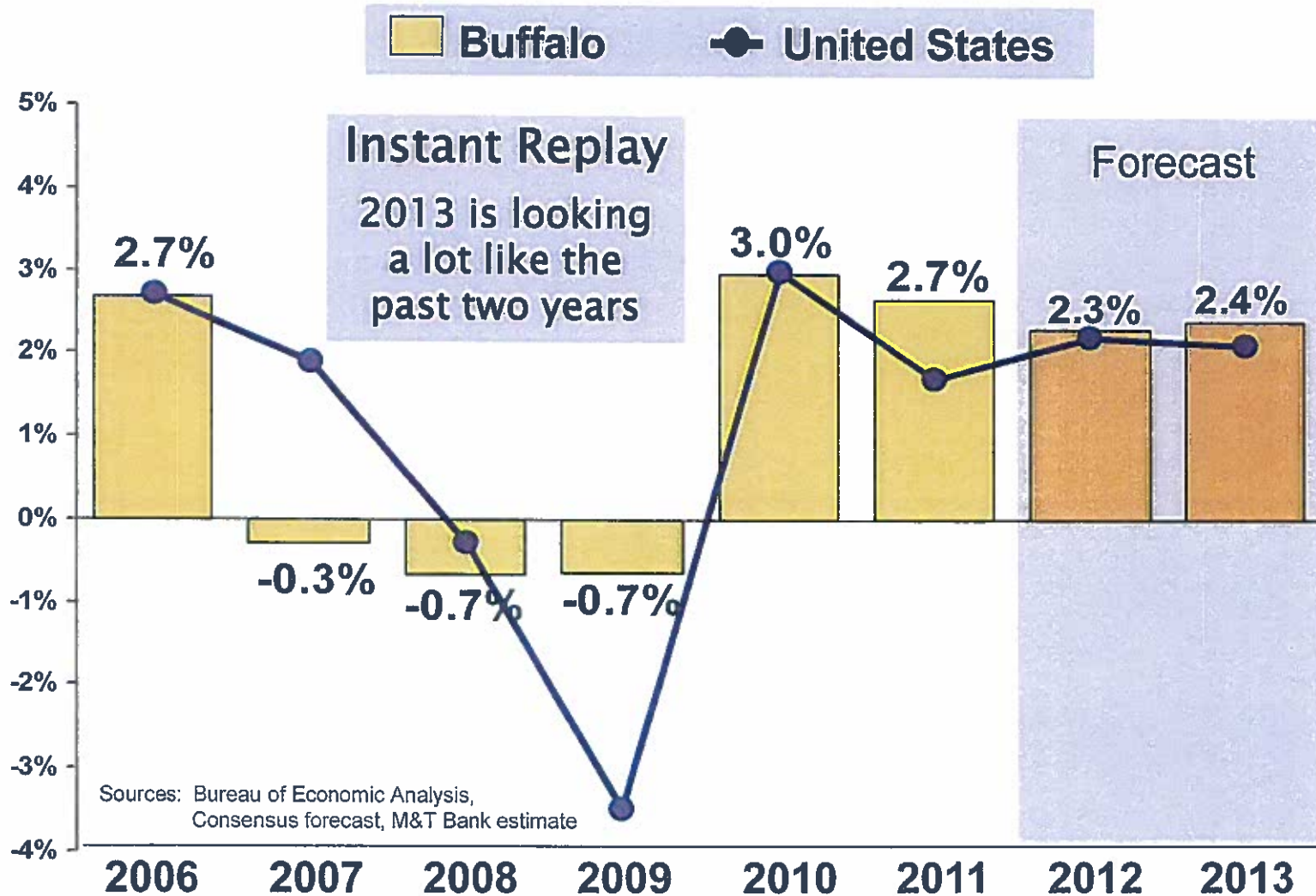
Index: 1996 Q1 = 100

Near-Term Outlook:
Continuing to Slowly Move Forward
 Confidence remains fragile—but modest payroll gains and continued de-leveraging should support further spending and economic growth over remainder of 2012



Sources:
 University of Michigan,
 Siena Research Institute

Inflation-Adjusted Year-Over-Year Percentage Change Buffalo Area Real GDP Growth Forecast





President & Chief Operating Officer

ERIE COUNTY MEDICAL CENTER CORPORATION

**REPORT TO THE BOARD OF DIRECTORS
MARK C. BARABAS, PRESIDENT AND CHIEF OPERATING OFFICER
OCTOBER 30, 2012**

PARKING UPDATE

I have enclosed a number of renderings in order to depict what the parking project will look like when it will soon be completed. One rendering shows the surface lots directly in front of the hospital and the new hospital drive lanes in main entrance. The second rendering is a site plan which indicates all of our parking facilities and the re-naming of parking lots.

B Lot opened in front of the hospital last week and we are currently completing work on A Lot. Both A Lot and the drive lanes to our main entrance will be done by the end of the year.

CARDIOVASCULAR SURGERY CONSOLIDATION

We have made slow but sure progress implementing actions that will build the base for the consolidation of this product line with the GVI. Our perfusion staff will be exiting ECMC via retirement or going to work for Kaleida. We will arrange service coverage from Kaleida to provide this important service to ECMC patients.

NYSERDA ENERGY GRANT 1.4M

Our new state-of-the-art chillers for the central cooling plant and multiple energy conservation measures designed into the new nursing home uniquely qualified ECMC to obtain this grant. See attachment. We received our first payment this month. We expect to reduce our cost of electricity by over 600K annually.



Clark Patterson Lee
DESIGN PROFESSIONALS



KIDENEV ARCHITECTS

200 John James Audubon Parkway
Buffalo, New York 14228
716-636-9700 Fax: 716-636-9783

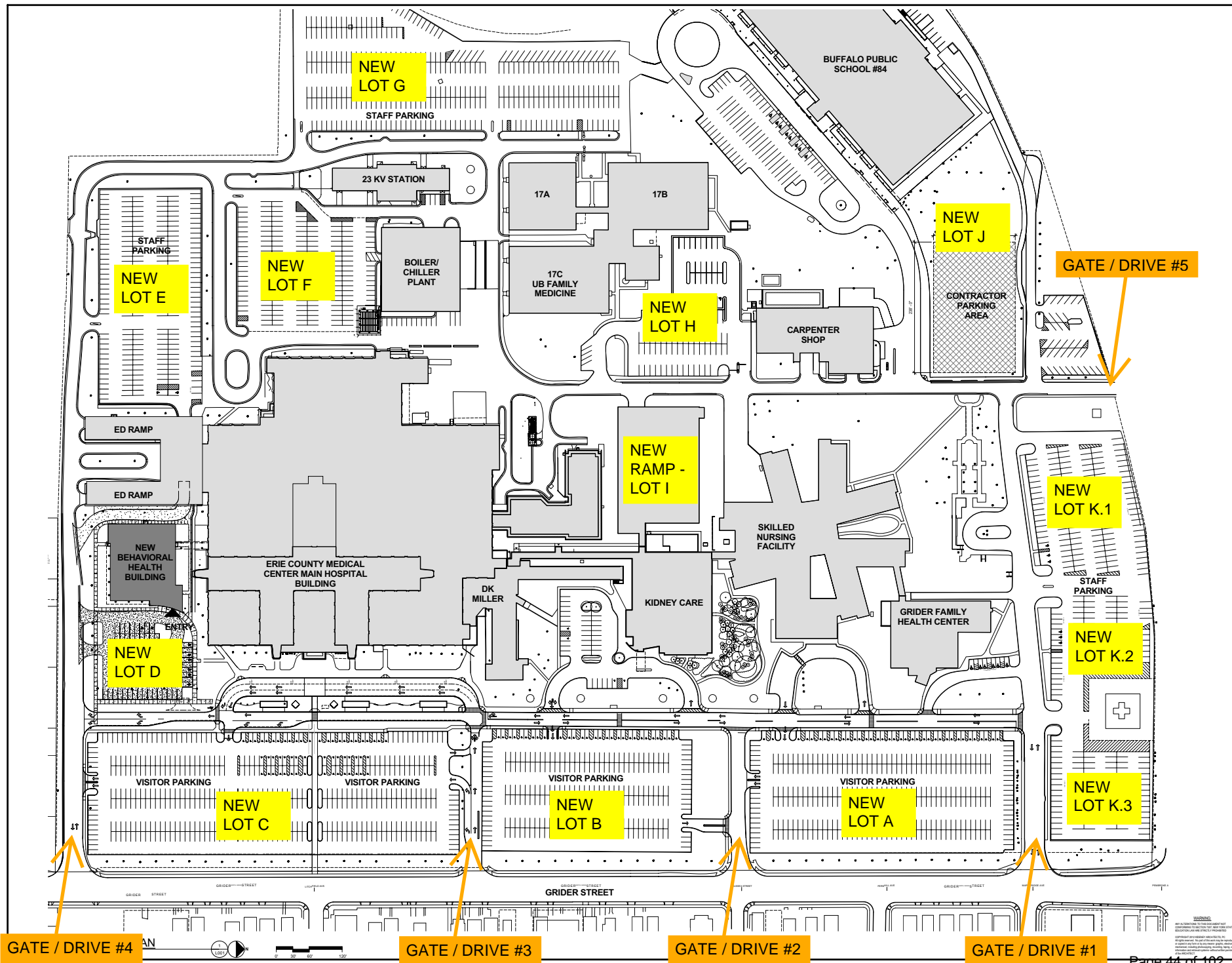
ARCHITECTS, PLANNERS
INTERIOR & LANDSCAPE DESIGN

ECMC
ERIE COUNTY MEDICAL CENTER CORPORATION
40 GRIDER STREET BUFFALO, NEW YORK 14203
REGIONAL BEHAVIORAL HEALTH CENTER FOR
EXCELLENCE CONSOLIDATION PROJECT

SITE LOGISTICS PLAN

DATE	11/11/12
BY	BS/M/M/O
REVISION	
NO.	DATE
1	09/28/12

L001



WARNING: THIS PLAN IS FOR INFORMATIONAL PURPOSES ONLY. IT IS NOT TO BE USED FOR CONSTRUCTION. THE USER OF THIS PLAN SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND REGULATORY APPROVALS. THE USER OF THIS PLAN SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND REGULATORY APPROVALS.

For Immediate Release:

Contact:

Dayle Zatlin, NYSERDA
518-862-1090 x3359
dez@nyserda.org

TWEET: NYSERDA funding projected to help Erie County Medical Center reduce electricity costs by \$680,000 annually

NYSERDA Announces \$1.4 Million in Energy Efficiency Funding for Erie County Medical Center

Projects are expected to cut electricity costs by \$680,000 annually

The New York State Energy Research and Development Authority (NYSERDA) announced today that the Erie County Medical Center was awarded \$1.4 million to support two energy efficiency projects that are projected to cut electricity costs by roughly \$680,000 annually.

One project is for upgrades to the central cooling plant at the Medical Center, including chiller and cooling tower replacements. Total local investment is approximately \$6 million. NYSERDA is providing almost \$1.2 million for the upgrades as well as cost-sharing for a feasibility study, conducted by M/E Engineering P.C., which helped the Medical Center optimize its energy efficiency investments. This project is estimated to save the Medical Center more than 5 million kilowatt hours (kWh) of electricity annually, enough to power more than 720 average-sized homes for a year.

The second project includes measures to save energy at the Medical Center's planned Long-Term Care Facility, a 300,000-square-foot, five-story building to be constructed in Buffalo that will include patient rooms, eating and leisure areas, and professional and administrative areas. The NYSERDA incentive is \$220,000. The measures planned for the new building will help it reduce energy costs by more than \$250,000 annually and decrease electricity consumption by more than 1.5 million kilowatt hours, enough to power more than 200 homes a year.

QUOTE FROM ERIE COUNTY MEDICAL CENTER

"These projects demonstrate the wide range of programs available from NYSERDA to enable hospitals to put more resources into patient care as they reduce energy costs," said Francis J. Murray Jr., President and CEO of NYSERDA. "Under Governor Cuomo's leadership, support for the Erie County Medical Center projects is part of a larger effort to improve the efficiency and profitability of this critical economic sector of New York State's economy."

Kenneth J. Swan, Manager of Commissioning and LEED Services at M/E Engineering P.C., said, "NYSERDA's support for these projects allows ECMC to install equipment that is purchased initially at a premium cost compared to conventional equipment, but will generate significant operational and maintenance savings for years to come."

The central cooling plant upgrades provide a state-of-the-art chiller plant that not only serves the existing Medical Center, but also the new construction at the campus. The chilled water distribution system

upgrades will optimize the operation of the plant, according to Swan, varying the flow of chilled water being pumped based on seasonal temperature, humidity conditions and internal building loads.

Key energy conservation measures incorporated into the Long-Term Care Facility include energy efficient lighting systems, a variable air volume kitchen exhaust system, high efficiency valance heating and cooling systems, premium efficiency motors and variable frequency drives on circulating pumps and fans, and demand controlled ventilation for densely occupied areas. NYSERDA also provided incentives for ENERGY STAR® rated refrigeration and kitchen equipment, including ranges, steamers and ovens.

Funding for the central cooling plant upgrade and Long-Term Care Facility energy efficiency projects is from NYSERDA's FlexTech, Existing Facilities and New Construction programs.

FlexTech offers a wide range of flexible, cost-shared technical services to help businesses operating in New York State make intelligent energy decisions. A dedicated team of engineers, technology experts, and energy consultants works with customers' design teams to create a customized assessment that identifies specific opportunities for reducing energy consumption and costs.

The Existing Facilities Program offers a portfolio of incentive opportunities to offset the costs of energy improvements in existing commercial and institutional facilities across New York State. It works with customers to implement a comprehensive strategy to realize verified energy savings through an integrated approach to cost-effective energy efficiency measures.

The New Construction Program provides technical support to design teams and financial incentives to building owners involved in the construction of new or substantially renovated structures in New York State. It is a first-come, first-served program available to commercial, institutional and industrial sector customers of certain utilities. New Construction Program incentives are paid out upon project completion. The intent of the program is not only to improve energy efficiency and green building practices, but to effect a permanent transformation in the way buildings are designed and constructed throughout the state.

NYSERDA, a public benefit corporation, offers objective information and analysis, innovative programs, technical expertise, and funding to help New Yorkers increase energy efficiency, save money, use renewable energy, and reduce their reliance on fossil fuels. NYSERDA professionals work to protect our environment and create clean-energy jobs. NYSERDA has been developing partnerships to advance innovative energy solutions in New York since 1975.

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Chief Financial Officer



The Culture of Care

Internal Financial Reports
For the month ended September 30, 2012

Prepared by ECMCC Finance

Erie County Medical Center Corporation

Balance Sheet September 30, 2012 and December 31, 2011

(Dollars in Thousands)

	<u>September 30, 2012</u>	<u>Audited December 31, 2011</u>	<u>Change from Prior Year End</u>
ASSETS			
Current assets:			
Cash and cash equivalents	\$ 36,443	\$ 38,222	\$ (1,779)
Investments	14,364	46,306	(31,942)
Patient receivables, net	44,100	39,217	4,883
Prepaid expenses, inventories and other receivables	30,901	57,500	(26,599)
Total Current Assets	<u>125,808</u>	<u>181,245</u>	<u>(55,437)</u>
Assets Whose Use is Limited:			
Designated under self-insurance programs	89,323	79,426	9,897
Designated by Board	25,000	25,000	0
Restricted under debt agreements	44,914	93,412	(48,498)
Restricted	30,423	23,354	7,069
	<u>189,660</u>	<u>221,192</u>	<u>(31,532)</u>
Property and equipment, net	235,669	163,015	72,654
Deferred financing costs	3,130	3,233	(103)
Other assets	3,441	1,873	1,568
Total Assets	<u>\$ 557,708</u>	<u>\$ 570,558</u>	<u>\$ (12,850)</u>
LIABILITIES AND NET ASSETS			
Current Liabilities:			
Current portion of long-term debt	\$ 6,461	\$ 4,249	\$ 2,212
Accounts payable	32,727	39,138	(6,411)
Accrued salaries and benefits	16,230	17,908	(1,678)
Other accrued expenses	36,014	59,398	(23,384)
Estimated third party payer settlements	27,222	28,211	(989)
Total Current Liabilities	<u>118,654</u>	<u>148,904</u>	<u>(30,250)</u>
Long-term debt	183,953	187,290	(3,337)
Estimated self-insurance reserves	54,269	47,700	6,569
Other liabilities	98,781	88,566	10,215
Total Liabilities	<u>455,657</u>	<u>472,460</u>	<u>(16,803)</u>
Net Assets			
Unrestricted net assets	91,201	87,248	3,953
Restricted net assets	10,850	10,850	0
Total Net Assets	<u>102,051</u>	<u>98,098</u>	<u>3,953</u>
Total Liabilities and Net Assets	<u>\$ 557,708</u>	<u>\$ 570,558</u>	<u>\$ (12,850)</u>



Erie County Medical Center Corporation

Statement of Operations

For the month ended September 30, 2012

(Dollars in Thousands)

	Actual	Budget	Variance	Prior Year
Operating Revenue:				
Net Patient Revenue	\$ 30,900	\$ 34,350	\$ (3,450)	\$ 30,201
Less: Provision for bad debts	(1,921)	(2,026)	105	(1,871)
Adjusted net patient revenue	28,979	32,324	(3,345)	28,330
Disproportionate Share/IGT Revenue	5,413	4,702	711	5,734
Other Revenue	2,716	2,701	15	2,114
Total Operating Revenue	37,108	39,727	(2,619)	36,178
Operating Expenses:				
Salaries / Wages / Contract Labor	13,114	13,313	199	12,361
Employee Benefits	8,480	8,717	237	8,422
Physician Fees	4,298	4,102	(196)	4,223
Purchased Services	2,618	2,655	37	2,724
Supplies	4,865	5,547	682	4,429
Other Expenses	912	693	(219)	864
Utilities	577	723	146	658
Insurance	591	537	(54)	597
Depreciation & Amortization	1,446	1,467	21	1,363
Interest	433	440	7	442
Total Operating Expenses	37,334	38,194	860	36,083
Income (Loss) from Operations	(226)	1,533	(1,759)	95
Non-operating gains (losses):				
Interest and Dividends	501	-	501	275
Unrealized Gains/(Losses) on Investments	548	172	376	(4,352)
Non-operating Gains(Losses), net	1,049	172	877	(4,077)
Excess of (Deficiency) of Revenue Over Expenses	\$ 823	\$ 1,705	\$ (882)	\$ (3,982)



Erie County Medical Center Corporation

Statement of Operations

For the nine months ended September 30, 2012

(Dollars in Thousands)

	Actual	Budget	Variance	Prior Year
Operating Revenue:				
Net Patient Revenue	\$ 292,288	\$ 294,127	\$ (1,839)	\$ 272,698
Less: Provision for bad debts	(17,287)	(18,235)	948	(16,718)
Adjusted net patient revenue	275,001	275,892	(891)	255,980
Disproportionate Share/IGT Revenue	43,028	42,317	711	40,325
Other Revenue	17,157	20,812	(3,655)	22,228
Total Operating Revenue	335,186	339,021	(3,835)	318,533
Operating Expenses:				
Salaries / Wages / Contract Labor	117,266	118,503	1,237	113,148
Employee Benefits	78,989	77,861	(1,128)	76,169
Physician Fees	38,320	37,132	(1,188)	36,113
Purchased Services	24,492	24,202	(290)	23,427
Supplies	48,428	47,748	(680)	43,473
Other Expenses	6,091	6,229	138	6,622
Utilities	4,442	6,049	1,607	5,803
Insurance	4,856	4,829	(27)	5,380
Depreciation & Amortization	13,027	13,207	180	11,396
Interest	3,954	3,956	2	4,017
Total Operating Expenses	339,865	339,716	(149)	325,548
Income (Loss) from Operations	(4,679)	(695)	(3,984)	(7,015)
Non-operating Gains (Losses)				
Interest and Dividends	3,107	-	3,107	2,701
Unrealized Gains/(Losses) on Investments	6,193	1,546	4,647	(4,843)
Non Operating Gains (Losses), net	9,300	1,546	7,754	(2,142)
Excess of (Deficiency) of Revenue Over Expenses	\$ 4,621	\$ 851	\$ 3,770	\$ (10,168)



Erie County Medical Center Corporation

<p>Statement of Changes in Net Assets For the month and nine months ended September 30, 2012</p>

(Dollars in Thousands)

	Month	Year-to-Date
<u>UNRESTRICTED NET ASSETS</u>		
Excess (Deficiency) of Revenue Over Expenses	\$ 823	\$ 4,621
Other Transfers, Net	(93)	(668)
Contributions for Capital Acquisitions	-	-
Net Assets Released from Restrictions for Capital Acquisition	-	-
	730	3,953
<u>TEMPORARILY RESTRICTED NET ASSETS</u>		
Contributions, Bequests, and Grants	-	-
Net Assets Released from Restrictions for Operations	-	-
Net Assets Released from Restrictions for Capital Acquisition	-	-
	-	-
Change in Temporarily Restricted Net Assets	-	-
Change in Total Net Assets	730	3,953
Net Assets, Beginning of Period	101,321	98,098
NET ASSETS, End of Period	\$ 102,051	\$ 102,051



Erie County Medical Center Corporation

Statement of Cash Flows

For the month and nine months ended September 30, 2012

(Dollars in Thousands)

	Month	Year-to-Date
<u>CASH FLOWS FROM OPERATING ACTIVITIES</u>		
Change in net assets	\$ 730	\$ 3,953
Adjustments to Reconcile Changes in Net Assets to Net Cash Provided by (Used in) Operating Activities:		
Depreciation and amortization	1,446	13,027
Provision for bad debt expense	1,921	17,287
Net Change in unrealized (gains) losses on Investments	(548)	(6,193)
Transfer to component unit - Grider Initiative, Inc.	93	668
Capital contribution to/from Erie County	-	-
<u>Changes in Operating Assets and Liabilities:</u>		
Patient receivables	(691)	(22,170)
Prepaid expenses, inventories and other receivables	20,964	26,599
Accounts payable	(4,685)	(6,411)
Accrued salaries and benefits	498	(1,678)
Estimated third party payer settlements	155	(989)
Other accrued expenses	179	(23,384)
Self Insurance reserves	1,178	6,569
Other liabilities	1,135	10,215
Net Cash Provided by (Used in) Operating Activities	22,375	17,493
<u>CASH FLOWS FROM INVESTING ACTIVITIES</u>		
Additions to Property and Equipment, net		
Campus expansion	(4,669)	(75,674)
Routine capital	(1,034)	(9,904)
Decrease (increase) in assets whose use is limited	2,220	31,532
Purchases (sales) of investments, net	966	38,135
Investment in component unit - Grider Initiative, Inc.	(93)	(668)
Change in other assets	650	(1,568)
Net Cash Provided by (Used in) Investing Activities	(1,960)	(18,147)
<u>CASH FLOWS FROM FINANCING ACTIVITIES</u>		
Principal payments on long-term debt	(45)	(1,125)
Capital contribution to/from Erie County	-	-
Net Cash Provided by (Used in) Financing Activities	(45)	(1,125)
Increase (Decrease) in Cash and Cash Equivalents	20,370	(1,779)
Cash and Cash Equivalents, Beginning of Period	16,073	38,222
Cash and Cash Equivalents, End of Period	\$ 36,443	\$ 36,443



Erie County Medjcal Center Corporation

Key Statistics

Period Ended September 30, 2012

Current Period				Year to Date			
Actual	Budget	% to Budget	Prior Year	Actual	Budget	% to Budget	Prior Year
888	1,023	-13.2%	913	8,452	8,704	-2.9%	8,142
121	89	36.0%	88	1,160	938	23.7%	921
28	32	-12.5%	30	242	276	-12.3%	280
222	201	10.4%	202	1,857	1,737	6.9%	1,746
45	60	-25.0%	40	347	351	-1.1%	269
1,304	1,405	-7.2%	1,273	12,058	12,006	0.4%	11,358
5,999	6,120	-2.0%	5,883	53,266	52,066	2.3%	52,784
382	376	1.6%	330	3,714	3,934	-5.6%	3,214
355	601	-40.9%	480	4,433	5,169	-14.2%	5,439
2,483	2,735	-9.2%	2,808	23,869	23,641	1.0%	23,709
953	1,525	-37.5%	739	7,547	8,864	-14.9%	6,426
10,172	11,357	-10.4%	10,240	92,829	93,674	-0.9%	91,572
200	204	-2.0%	196	194	190	2.3%	193
13	13	1.6%	11	14	14	-5.6%	12
12	20	-40.9%	16	16	19	-14.2%	20
83	91	-9.2%	94	87	86	1.0%	87
32	51	-37.5%	25	28	32	-14.9%	24
339	379	-10.4%	341	339	342	-0.9%	335
6.8	6.0	12.9%	6.4	6.3	6.0	5.4%	6.5
3.2	4.2	-25.3%	3.8	3.2	4.2	-23.7%	3.5
12.7	18.8	-32.5%	16.0	18.3	18.7	-2.2%	19.4
11.2	13.6	-17.8%	13.9	12.9	13.6	-5.6%	13.6
21.2	25.4	-16.7%	18.5	21.7	25.3	-13.9%	23.9
7.8	8.1	-3.5%	8.0	7.7	7.8	-1.3%	8.1
4,035	3,481	15.9%	3,986	36,759	33,268	10.5%	35,975
135	116	15.9%	133	134	121	10.5%	132
61.6%	68.8%	-10.4%	62.1%	62.7%	62.2%	0.8%	61.0%
77.1%	90.6%	-14.9%	83.5%	82.4%	81.8%	0.8%	77.8%
80.3%	90.6%	-11.3%	85.1%	84.0%	81.8%	2.8%	81.2%
1.85	1.96	-5.9%	1.91	1.75	1.90	-8.1%	1.86
2.37	2.29	3.8%	2.23	2.18	2.19	-0.5%	2.14
149	137	8.8%	117	1,237	1,283	-3.6%	1,090
436	468	-6.8%	412	3,880	3,896	-0.4%	3,582
611	719	-15.0%	644	5,625	6,202	-9.3%	5,856
27,900	29,956	-6.9%	27,387	262,824	273,483	-3.9%	255,039
5,372	5,850	-8.2%	5,393	48,668	50,625	-3.9%	46,694
41.3	40.0	3.3%	45.9	38.2	40.0	-4.6%	45.9
6.4%	6.0%	6.3%	6.4%	6.1%	6.4%	-4.0%	6.4%
2,441	2,492	-2.1%	2,375	2,405	2,423	-0.7%	2,387
2.99	3.12	-4.2%	3.08	3.07	3.16	-2.7%	3.14
\$ 12,057	\$ 13,403	-10.0%	\$ 12,512	\$ 12,798	\$ 12,866	-0.5%	\$ 12,428
\$ 14,877	\$ 15,296	-2.7%	\$ 15,288	\$ 15,204	\$ 15,330	-0.8%	\$ 15,300
8,834	9,486	-6.9%	12,036	90,882	92,595	-1.8%	120,596
294	316	-6.9%	401	332	338	-1.8%	442
297	315	-5.8%	387	322	326	-1.1%	401
6.0	5.9	1.2%	5.9	4.9	4.8	0.7%	4.6

Erie County Home:





**Sr. Vice President of
Operations
- Richard Cleland -**

ERIE COUNTY MEDICAL CENTER CORPORATION

REPORT TO THE BOARD OF DIRECTORS
RICHARD C. CLELAND, MPA, FACHE, NHA
SENIOR VICE PRESIDENT OPERATIONS
SEPTEMBER 2012

LONG TERM CARE-ERIE COUNTY HOME/ECMC SNF:

Construction of the new nursing home is going very well. We are looking at an end of December 2012 completion with a “tentative” move in date by February 1, 2013;

The Long Term Care Steering Committee is overseeing, planning and carrying out:

- Remaining downsizing initiative (currently we are down to 289 beds at the Erie County Home and total bed census of 424);
- The new care delivery model (person-centered care);
- Operational components (labor, new positions, policy & procedures etc.);
- The move of 390 patients into the new facility;
- Impact negotiation session (AFSCME, CSEA, NYSNA) follow-up items;
- Appropriate exit (clear out and clean up) of the EC Home;
- Implementation of EMR and integration of the nursing home on ECMC Campus;
- FFE & technology initiatives;

The LTC Facility Naming Committee has made a recommendation for a new name. This is currently going through both DOH and legal review before it is given the approval. We should have this by next month;

Anne Moretti, consultant has completed several team building sessions on cultural merge (bringing both the EC Home & SNF into the new LTC facility). An all day long leadership session is planned for October 26, 2012;

BEHAVIORAL HEALTH (PSYCHIATRY, CHEMICAL DEPENDENCY, CPEP, CD OUTPATIENT CLINIC):

The Behavioral Health Steering Committee has continued to meet monthly and bring about great improvement to the overall programs and services that we provide. We completed our annual OMH CPEP survey in July. The Statement of Deficiencies was received and the survey was successful. We are definitely headed in the right direction;

The CPEP Fast Track Triage was opened September 27, 2012. A “ribbon cutting” ceremony was conducted and well attended;

The relocation of the EOB beds to the 4th floor and the Fast Track Triage will add about 4,500 square feet to CPEP (almost doubling the current size);

Great Lakes Health “Center of Excellence in Behavioral Health” HEAL-21 project’s Certificate of Need (CON), was submitted on August 3, 2012. Currently this CON is under review by both OMH and DOH. We are optimistic that both regulatory agencies will be able to approve in December. Both clinical and operational teams from ECMCC and Kaleida continue to meet weekly and work through various planning and scheduling components to insure that we have a successful venture;

ERIE COUNTY MEDICAL CENTER CORPORATION

ECMCC is currently assisting Buffalo General Medical Center (BGMC) with management of their behavioral health program. We are utilizing an extension of our Horizon Health management agreement and providing both interim management and specialty support. This will continue as we consolidate and integrate service and programs here on ECMCC campus;

The chemical dependency outpatient clinics are in process of implementing recommendations outlined in the Redesign Committee's report. This is including modifying all patient admission, registration and billing systems. This modification includes converting to an electronic system similar to the hospital. This will increase productivity and reduce inefficient processes. Volumes continue to incrementally increase and financial performance improve. Both NEC and DTC are operating with positive contribution margins (through June 30, 2012);

REHABILITATION SERVICES:

Inpatient rehab census continues to operate at an ADC of 34. This is the highest ADC for this unit in years and a direct result of Dr. Livecchi's appointment to Rehabilitation Medicine Chief of Service;

HYPERBARIC/WOUND CENTER (HWC):

Healogic (Management Company) are planning on holding a Hyperbaric/Wound Symposium in November. See the attached communicative publication;

Healogic has appointed Gigi Chen as director of the center. Gigi comes to ECMCC with a vast amount of executive experience and includes previous position of director of the United Memorial hyperbaric and wound center;

TRANSITIONAL CARE UNIT (TCU):

Molly Shea, RN has been named as Director of Nursing (Unit Manager) for the TCU;

TCU Steering Committee developed and will be meeting twice monthly to insure TCU is up and operational by end of December;

Implex Partners consultants have been retained to help ECMCC put finishing touches on the TCU. ECMCC has an agreement which will require a 6-8 month engagement. This assistance will insure that the TCU is fully operational and ready to open in March 2013 (modified date-originally January);

FOOD AND NUTRITIONAL SERVICES:

Morrison has submitted proposal to extend current agreement (expires in 2014). This proposal will include up to \$2 million dollars of capital investment from Morrison into ECMC operations (cafeteria and food preparation areas). We are currently reviewing proposal and to insure that this will meet ECMC's needs. The proposal calls for a (5) year extension with a (3) year extension.

Wound Care Symposium:



A Multidisciplinary Approach
to Wound Healing Presented by
Erie County Medical Center /
ECMC Lifeline Foundation

Saturday, November 3, 2012
ECMC 3rd Floor Auditorium
462 Grider Street • Buffalo, NY 14215
www.ecmc.edu

Symposium Objectives are to:

- Educate learners in current protocols to enhance treatment and management of chronic wounds including: diabetic ulcers, vascular and arterial ulcers, burns, infectious disease, pressure ulcers, hyperbaric medicine, and evidence-based medicine.
- Provide participants with up-to-date, evidence-based information regarding conditions and suggested pain management treatment therapies for chronic ulcers. These include the use of skin substitutes, on-/off-loading, arterial and vascular intervention, hyperbaric oxygen therapy, antibiotic use, specialized product and dressing use, and the importance of diagnostic testing.
- Provide skills to plan, identify, select, and employ more effective wound care management strategies.
- Teach participants a comprehensive approach to analyzing the contributing factors and consequences of delayed wound treatment, and to address the issues and options which will generate more inclusive and complete treatment.

Symposium Credit

This program has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for CME (ACCME) through joint sponsorship with the University at Buffalo School of Medicine and Biomedical Sciences and the ECMC Lifeline Foundation.

The University at Buffalo is accredited by the ACCME to sponsor CME for physicians.

The UB School of Medicine & Biomedical Sciences designates this live activity for a maximum of 5.25 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credits commensurate with the extent of their participation in the activity.

Symposium Presenters



Sorja Lichtenstein, MD



James K. Lukas, MD



David Davidson, DPM



Mathew Antalek, DO



Michael Chopko, MD



Raphael Blochle, MD



John Hurley, DPM



Lynn Kordasiewicz, ARNP, NP



For more information and to register online, click the link below!



**Sr. Vice President of
Operations
- Ronald Krawiec -**

Erie County Medical Center Corporation
Report to the Board of Directors
Ronald J. Krawiec, Senior Vice President of Operations
October 30, 2012

PHARMACEUTICAL SERVICES – RANDY GERWITZ

Drug recalls and shortages: The Department of Pharmaceutical Services is able to report that we were not among the hospitals impacted by the recent issues with contaminated drugs from New England Compounding Center. Due to the tragic deaths associated with the tainted product, all compounding facilities are coming under increased scrutiny, including our primary supplier Ameridose. Pending a formal survey process Ameridose has voluntarily suspended production and distribution of all products. The majority of products ECMC acquires from Ameridose are driven by ongoing shortages or supply disruptions. This temporary interruption in service will be a significant challenge. A meeting with the Chiefs of Service has been scheduled to discuss mitigation strategies.

Expansion of Clinical Services: The DPS is pleased to announce that clinical pharmacy services are now offered to the Cardiothoracic Unit. Natalie O’Gorman will be the Clinical Pharmacy Specialist providing this service, in addition to the services she provides to the Medical Intensive Care Unit. The DPS will also be expanding clinical services to 6 days per week. The Director, Clinical Coordinator, Clinical Specialists, Pharmacy Resident and a staff pharmacist who completed our collaborative residency program last year will rotate through Saturday coverage. This program will begin the first weekend in November.

Investigational Drug Service: The DPS has a long standing history of supporting research related to both new medications and the expanded use of existing medications. Pharmacy currently supports several active trials associated with Transplant, Cardiology and Infectious Diseases and anticipates expansion into the area of oncology.

TRANSPLANTATION & KIDNEY CARE CENTER – JOHN HENRY

DIALYSIS

MIQS (electronic medical record) implementation in outpatient dialysis is now complete as of October 1st. With the support of a multidisciplinary team lead by the Project Coordinator, Bonnie Gifford, and physician champion, Dr. Panesar, the “go-live” was smooth. We now have a state of the art electronic medical record system that will allow us to optimize patient care and communication as well as our billing for dialysis services.

The Home Dialysis Programs are ramping up and continues to be on target. The Peritoneal Dialysis Program has a goal of eight patients to be enrolled by year-end. As of Mid-October we are at five patients with three more ready to commence training in the next few weeks. The Home Hemodialysis program is nearly ready for formal launch awaiting a Department of Health inspection for final approval of the program.

TRANSPLANTATION

Through September there have been 57 transplants completed (17 living donor, 38 deceased donor and 2 pancreas). The number of deceased donors continues to be of concern for the transplant center and is off projected Organ Procurement Organization (OPO) targets by nearly 50%. We continue to implement changes internally and in closer collaboration with the OPO leadership to focus attention on this issue.

The research arm of the transplant center has also entered a new phase with four significant studies starting over the next three months. Three of these are with de novo patients and will include both inpatient and outpatient components. The fourth study is outpatient based in regards to drug conversion. This is a significant required step for our new Center of Excellence for Transplantation & Kidney Care.

AMBULATORY SERVICES – PAUL MUENZNER

Centralized appointment scheduling is currently in place at the following clinics: ENT, Podiatry, Grider Family Health, Neurosurgery, and Pulmonology. On November 1, 2012 the four sub-specialty clinics within IMC clinic will go live on centralized scheduling (Coumadin, Endocrinology, Rheumatology, and Renal). On December 1, 2013 the Cleve-Hill Clinic will go live. The goal is to reduce the number of dropped calls, pre-register all patients to improve patient flow, obtain referrals and authorizations in a consistent fashion and to reduce the phone burden at the point of service.

LABORATORY – JOSEPH KABACINSKI

The Lab implemented autoverification of certain Lab results in Chemistry and Hematology on October 15. This is a labor savings activity reduces manual effort, improves turn-around time and will speed result reporting.

Laboratory testing activity continues to grow in 2012. Billed procedures have increased and we expect to exceed 1.4 million tests in 2012. These increases are attributed to the transplant program, activity at the Behavioral Health inpatient and outpatient locations, and various other clinical demands. We are also discussing additional outreach test opportunities with several potential new customers. Despite the increase in our workload, the Lab is continuing efforts to reduce costs of Lab testing and increase productivity. We are currently validating a new assay for immunosuppressant drug levels prescribed for post-transplant patients.

A successful UNYTS Blood Drive was held on Thursday, October 4. This blood drive proved very successful with 64 units of blood collected. The next UNYTS blood drive will be held on Thursday, December 6. Dates for UNYTS blood drives in 2013 are on the calendar.

ENVIRONMENTAL SERVICES – JUAN SANTIAGO

The Implementation of monthly cleanliness rounds in all areas of the hospital has started in October. The rounds include a detailed walkthrough and inspection involving the area manager, SVP of Operations, AVP of Support and Hospital Services and Senior Environmental Services Supervisor. This is in addition to EOC inspections and daily monitoring by EVS supervisors. The new program should provide a means to develop consistency throughout the institution, provide education to the staff and assure continued improvement in the cleanliness of our facility.

On November 1st adenosine triphosphate hygiene monitoring and testing will begin in patient rooms to assist our infection control efforts. The testing is conducted by supervisors in the EVS department. ATP bioluminescence provides a rapid and quantifiable measurement of organic residues on a surface and provides a sensitive method to objectively measure surface hygiene and reduce the risk of cross contamination. Results will be reported to the EOC and Infection Control committees.

A project team has been assembled to address cleaning of facility vents and lighting fixtures. This team consists of housekeeping and plant operations staff. Often times surface cleaning is not sufficient and cleaning can be enhanced when plant operations removes hardware or disassembles systems to provide for a more thorough cleaning.



Chief Medical Officer

ERIE COUNTY MEDICAL CENTER CORPORATION
REPORT TO MEDICAL EXECUTIVE COMMITTEE
BRIAN M. MURRAY, MD, CHIEF MEDICAL OFFICER
OCTOBER 2012

UNIVERSITY AFFAIRS

PROFESSIONAL STEERING COMMITTEE

Dean Cain presented his State of the School address on Friday, October 19th, 2012. Topics covered included the new agreement with NY State that provides financial support for the new medical school and an improved financial model which allows UB to retain more of its income, administrative restructuring, plans for the new Medical School and recent recruitment achievements.

UB has also announced upcoming opportunities for faculty to meet with President Tripathi and Provost Zukoski

Faculty Meetings with President Tripathi and Provost Zukoski. **Clinical Faculty are invited to the meeting on November 16, 2012, 8:30-10:00 a.m., in the 5th floor conference room of the CTRC Building, 875 Ellicott Street.** Please RSVP by November 14 (Clinical) to Debbie Kelsch (dlkelsch@buffalo.edu / 829-2775) if you plan to attend.

MEDICAL STAFF AFFAIRS

See separate report by Sue Ksiazek for full details.

CLINICAL ISSUES

UTILIZATION REVIEW	July	August	September	vs. 2011 YTD
Discharges	1004	989	885	up 3.8%
Observation	133	162	156	down 11.7%
LOS	5.8	6.4	6.2	down 1.3%
CMI	2.14	2.18	2.29	up 0.3
Surgical Cases	849	942	856	up 0.3%
Readmissions (30d)	11.3%	12.4%		

Volumes were soft. Bright spots include chemical dependency, detox and psychiatry discharges and lower ALC days.

For the second consecutive month a long-stay discharge (this time 827 days) pushed acute ALOS over 7.

Surgical volume and ED/CPEP visits lower than expected; however, CPEP admissions strong.

PALLIATIVE CARE SERVICE

We are very pleased to advise you that Hospice and Palliative Care services at ECMC will now be provided through Hospice Buffalo. Referrals may be made to the service via their call number which is attached and instruction is located on the "Consult Page" under Hospice/Palliative care.

The service can provide both referral to Hospice care and Palliative consults provided by Ms. Helen Doemland, PA and Dr. Katie Grimm.

MEANINGFUL USE STAGE 1 COMPLETE

I am pleased to announce that Erie County Medical Center Corp. has successfully attested for Stage 1 of Meaningful Use. This attestation will allow ECMC to collect a significant amount of money available under the HITECH act. Our reporting period to CMS was 6/24/12 - 9/24/12 during which we collected data on CPOE, active medications and allergies, as well as several other data elements, and tested immunization and summary of care interfaces to outside organizations. This has been a long road and I want to extend my sincere gratitude to everyone who helped make this possible. I look forward to working with all of you on Stage 2 over the next year. Thank you again!

“Ghost Surgeries”

The *Chicago Tribune* recently examined lawsuits and complaints filed against hospitals over "ghost surgeries" in which a prominent physician promised to perform a procedure but instead delegated it to a colleague or resident.

The *Tribune* notes that unexpected physician changes can occur for legitimate reasons, such as medical emergencies.

However, some patients allege that they have been misled or ill informed about the circumstances of their care. Moreover, some of them blame poor outcomes on the unexpected switch to a less experienced surgeon.

The *Tribune* details several examples of "ghost surgeries" that resulted in lawsuits or patient complications, including:

- Denyse Richter decided to undergo an elective surgery that would cure her cardiac arrhythmia. She selected a triple board-certified cardiologist who allegedly agreed to conduct the procedure himself. However, because of

scheduling and another medical appointment that ran long, the procedure was performed by the cardiologist's associate, a less experienced surgeon. Richter was not notified of the change and says she would not have let the associate perform the surgery.

- An orthopedic surgeon in 2004 filed a lawsuit against a physician group and a Chicago-based hospital for illegally billing Medicare for surgeries that unsupervised medical residents had performed.
- Mary Ann Bart says a Chicago-based urologist verbally and contractually promised to perform her kidney-stone removal surgery, but he allegedly left the procedure to his urology fellows. Bart had to be resuscitated twice during the surgery due to complications.

According to the **American College of Surgeons'** guidelines, it is unethical to mislead patients about the identity of the physician conducting an operation.

However, it also asserts that a "surgeon may delegate part of the operation to associates or residents under his or her personal direction." The guidelines add patients should be made aware if a resident will take part in a surgery under a physician's supervision.

Joanne Conroy, chief health care officer for the **Association of American Medical Colleges**, notes that efforts to ensure informed consent have improved significantly over the years. "We have been much more granular about talking about [student] involvement [in patient care] and talking to patients about their presence," she says.

Advocates encourage patients to carefully review consent forms with enough time to ask questions about who will be involved in the procedure (Shelton, [Chicago Tribune](#), 9/23).



Senior Vice President of Nursing

ERIE COUNTY MEDICAL CENTER CORPORATION

Report to the Board of Directors
Karen Ziemianski, RN, MS
Acting Director of Nursing
Assistant Director of Nursing, Medical/Surgical

October, 2012

March of Dimes Nurse of the Year Award

Danita Edwards, RN, a staff nurse on 12 zone 3, was the winner of the March Of Dimes “Rising Star” Award. Danita was chosen out of 102 candidates nominated, and received her award On September 21st at a ceremony at the Rochester Riverside Radisson. Danita is a graduate of the UB School of Nursing. Karen Ziemianski and Sonja Melvin, Unit Manager of 12 zone 3, attended the gala in support of Danita.

Victorian Luncheon & Tea

Nursing staff members Karen Ziemianski, Sonja Melvin and Pamela Riley attended a Victorian Luncheon & Tea at the Hotel Lafayette on September 22, 2012. The event was co-sponsored by ECMC, and featured New York Senator Ruth Hassell-Thompson as the guest speaker.

Preventing and Managing Crisis Situations

ECMC will participate in a “Train the Trainer” Program sponsored by the Office of Mental Health, Bureau of Education and Workforce Development, from October 29 through November 2, 2012. The topic will be “Preventing and Managing Crisis Situations”, and the curriculum is designed for facilities like ours that treat people with mental illness in an inpatient setting. Topics to be covered will be awareness, understanding, prevention of verbal/non-verbal de-escalation, physical protective and restrictive techniques, follow-up and agency planning, improving outcomes and creating a person centered treatment culture. Upon completion, participants will be qualified to conduct this training for other staff members at ECMC. The participants are:

- Connie Alston, LPN - 9 zone 2
- Stentelle Bell, RN - Emergency Department
- Charles Degaugh, LPN - 4 zone 4
- Joseph Stanton, MHW - 11 zones 1 & 3
- Nat Burghezi, LPN - 4 zone 2
- Corey Reigle, RN - MICU
- Petra Hall, RN - 4 zone 1
- Melissa Montileone, RN - 7 zone 1
- Denise Ammerman, SW - Behavioral Health

Nursing Convocation

The 19th Annual Nursing Convocation was held on Thursday, October 4th at the University of Buffalo Student Union on the North Campus. Acting Director of Nursing, Karen Ziemanski, was the keynote speaker, and presented 12 zone 3's video on the topic of "Transforming Care at the Bedside". The presentation was well-received.

Hispanic Heritage Celebration

On Thursday, October 11th, Buffalo City Hall hosted a Hispanic Heritage Month Celebration with the theme of "Saluting Hispanics in the Arts". ECMC participated with a table display on the topic of Diabetes and Stroke, with an emphasis on the various cultures. ECMC's booth was attended by Stroke Program Coordinator Paula Quesinberry, Community Health Educator Rita Hubbard-Robinson, and Diabetes Education Case Manager Andrew Grzeskowiak. Both English and Spanish literature was distributed.

D'Youville College Tour

On October 13, 2012, Nursing's Cheryl Nicosia and Peggy Cramer had the pleasure of giving a tour of ECMC to 34 Registered Nurse Alumni from D'Youville College. Many of the RNs had completed their clinical rotations at either E.J. Meyer or at ECMC while they were students at D'Youville.

ABCDE Bundle

Over the past several years more and more evidence has come to light on how to best manage patients with complex, acute illnesses. For patients to move safely through our systems there must be a collaboration and alignment of people, processes and technology. One such approach adopted by our Critical Care Unit is the ABCDE Bundle, an approach to manage acutely-ill patients using the following components:

- ABC - Awakening and Breathing Trial Coordination*
- D - Delirium Assessment and Management*
- E - Early Exercise and Progressive Mobility*

This innovative program was highlighted in the September issue of the Critical Care Newsletter, which is authored by Surgery Case Manager, Cheryl Nicosia.

A progress update on the program will be forthcoming in a future report.

Lifeline Foundation Nursing Certification Support Program

Due to the generous support of The Lifeline Foundation, registered nurses at ECMC can receive full reimbursement for successfully obtaining certification through the passing of a certification exam. Registered nurses can obtain a copy of the Criteria for Participation and a reimbursement application from their unit manager, or by contacting the Nursing Education Department.

Women's Health Radio Program

Karen Beckman, RN, Emergency Department Nurse and Sexual Assault Nurse Examiner (SANE) was the guest on Dr. Catherine Collins Women's Health Radio Program on October 17th. Karen spoke about the care and services provided at ECMC for victims of sexual assault.



Chief Information Officer



HEALTH INFORMATION SYSTEM/TECHNOLOGY

October 2012

The Health Information Systems/Technology department has completed or is currently working on the following projects.

ARRA Meaningful Use - Inpatient and Outpatient Report Card. Successfully attested to Inpatient Meaningful Use Stage 1. We have confirmed Medicare reimbursement of 1.8 million dollars. Monitoring status of payment and expect receiving payment in 4-6 weeks. Anticipate similar incentive payment for Medicaid.

Several projects have been initiated in support of the MU Stage 2 goal of October 2013. Projects include direct involvement with physicians and clinicians. A Physician workgroup and Nursing Champion has been identified. Focus projects include Computer Physician Order Entry and electronic Medication Reconciliation initiatives. Re-design of the pharmacy; radiology order entry dictionaries are in progress in addition to determine process to manage the physician order sets.

Outpatient MU Stage 1 attestation for Clevehill and Grider Health Family Practices are in the final stages with an expectation to attest on 10/31/2012.

Allscripts Ambulatory Clinic Electronic Medical Record. The interdisciplinary team have agreed to an April 2013 go live for the Internal Medicine Clinic and the four sub-specialties. Focus on interface development; system upgrade strategies and staffing are underway. In addition with the announcement of funding to support PCMH initiatives in the Clevehill Family Practices and Internal Medicine, a development of a requirements and system design is required.

Operational Improvements. To ensure successful operations for bedside medication verification, it is necessary for nursing staff to have the functional computer devices. With the aging fleet of mobile computer devices, it has been challenging for Biomed and IT to provide adequate support to these devices. Due to this, ECMC has engaged a third party resource to assist with the support. In addition, 30 additional devices have been purchased.

Working with Nursing, we are finalizing the roll out of providing all nursing staff with email access. This project required significant resources to upgrade ECMC email platform in addition to coordinating roll out of email addresses. Project is scheduled to close by the end of October,



Sr. Vice President of Marketing & Planning

Marketing and Development Report
Submitted by Thomas Quatroche, Jr., Ph.D.
Sr. Vice President of Marketing, Planning and Business Development
October 30, 2012

Marketing

Bills “Official Healthcare Provide” sponsorship being leveraged for branding efforts
New media campaign around Bill’s partnership launched
Focusing on existing medical leadership
Further marketing efforts for Regional Center of Excellence in Transplantation and Kidney Care underway

Planning and Business Development

Operation room expansion CON filed and continued questions answered
Coordinating planning for Great Lakes Health Strategic and Community Planning Committee meetings
Working with Professional Steering Committee
Managing CON processes
Developing primary care and specialty strategy and have had multiple confidentiality agreements signed
Dr. Howard Sperry’s practice has incrementally increased in patient numbers and ancillary business has had significant referrals
Two large Southtown primary care practices underway and seeing approximately 300 patients per week
In discussions with large specialty and primary care practices looking to affiliate with ECMC
Two new orthopedic surgeons and one breast surgeon started

Media Report

- **Buffalo Business First. Buffalo General files to cut, transfer patient beds.** In a move related to a joint behavioral health center, Buffalo General Medical Center has filed plans with the state to transfer 48 psychiatric beds to Erie County Medical Center.
- **The Buffalo News: Member of ECMC honored as a Black Achiever in Industry.** Dr. Rev. James A. Lewis, III, director of pastoral care at ECMC, is honored.
- **New York Nurse: Thirteen Members Appointed to Leadership Academy.** On September 12, 2012, Rebecca Lippner, BSN, Erie County Medical Center was appointed to the Tier 3 Graduate program the 2012-2013 Leadership Academy Program.
- **The Buffalo News: Several honors presented during Run for Heroes.** Lifesaving medical and law enforcement professionals were honored over the weekend during the 2012 Run for Heroes in Delaware Park, sponsored by Erie County Medical Center and the ECMC Lifeline Foundation.
- **Niagara Gazette; The Niagara Index: Niagara Falls goes pink for big Pinktober event.** Hard Rock Café, the Buffalo Bills, ECMC, KISS 98.5, the American Cancer Society and the Canadian Cancer Society all came together to raise money and awareness for the fight against breast health.
- **NBC Nightly News: Inspired by son, ECMC doctor heads to Afghanistan.** When ECMC orthopedic surgeon Dr. Lawrence Bone heard that the Army had a great need for surgeons, he made the decision to put himself in harm’s way to help men like his son who was injured in Iraq.
- **The Buffalo News: Mobile Mammography Unit plans visits to housing units.** The Erie County Medical Center Mobile Mammography Unit will visit several Buffalo Municipal Housing Authorities properties and other sites for testing.
- **WIVB-TV, Channel 4: Hit and run survivor runs her first 5K.** Amy Stewart, a young woman who was struck by a car talks the great care she received at ECMC.

Community and Government Relations

Lifeline Foundation Mobile Mammography Unit screening patients and has 1,500 women being screened and scheduled to be screened

Meetings held with various community groups regarding mobile mammography unit and events scheduled

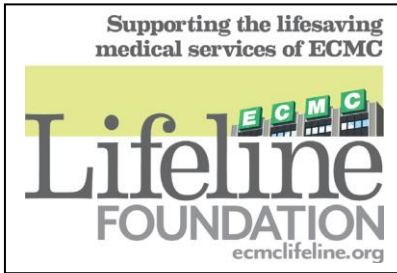
Several tours held with community leaders and potential donors

Continuing to work with other PBC hospitals on legislation and advocacy efforts

Developing strategy around NYS Medicaid waiver



Executive Director, ECMC Lifeline Foundation



ECMC Lifeline Foundation Report For ECMCC Board of Directors October 30, 2012

Submitted by
Susan M. Gonzalez, Executive Director

Grant Initiatives

- Lifeline Foundation continues to collaborate with various hospital departments to apply for grants to assist with securing goods and services not currently funded through the hospital budget. Applications completed/awarded since last meeting include:

NYS DOT - grant for wheelchair accessible van - pending
Patrick Lee Foundation for Behavioral Health - \$3,000,000 letter of intent stage
Wound Care Symposium sponsorships - **\$16,250 to date**
Renaissance Foundation – Mobile Mammography Bus - \$10,000 pending
Low Reed Spinal Cord Injury Fund – Zonco Mobile Arm Valet - \$2,000 pending

Event News

- **SAVE THE DATE – ECMC Springfest Gala 2013 – Exciting entertainment announcement coming soon - May 11, 2013 Buffalo Niagara Convention Center**
- **ECMC Heroes 5K Run & Healthwalk**
361 Participants – up 30%
Net proceeds \$21,808 - up 52%
- **Mobile Mammography Unit**
During the weekend of 10/19-21 the mobile mammography unit took part in the NFL/Buffalo Bills “Billieve” Weekend to support Breast Cancer at Ralph Wilson Stadium and at the “Living Pink Ribbon” event that spanned the Rainbow Bridge in Niagara Falls.
- **Mike Billoni “Celebration of Life” Fundraiser - \$7195 raised for the ECMC Trauma Unit**

ECMC Employee Giving Campaign/United Way Campaign

- Our ECMC Employee Giving Campaign will take a new form this year with an exciting, incentive based 24 hour ECMC Giving Mob Kick-off! Join the fun, donate and receive chances for great prizes while giving back to the ECMC Community. See how when everyone gives a little – it can add up to a lot of support for the Hospital, its employees and the patients served. Forms will be available November 1st.
- For those of you who make your Lifeline annual fund gift through United Way payroll deduction and donor designate your contribution to Lifeline I want to provide you with Lifeline’s agency number for your use. **Please note our designation number is #657387. You may write this number or our agency name “ECMC Lifeline Foundation” on your form.**
- Thank you for your consideration.

Foundation Business

- The ECMC Lifeline Foundation announced open nominations for membership consideration to its Board of Directors. Nominations will remain open through November 15th and may be sent to the Foundation office in Room G-1.

NEW BUSINESS

OLD BUSINESS



Medical-Dental Executive Committee

**MEDICAL EXECUTIVE COMMITTEE MEETING
MONDAY, SEPTEMBER 24, 2012 AT 11:30 A.M.**

Attendance (Voting Members):

D. Amsterdam, PhD	N. Ebling, DO	R. Schuder, MD
Y. Bakhai, MD	W. Flynn, MD	P. Stegemann, MD
W. Belles, MD	C. Gogan, MD	J. Woytash, MD
G. Bennett, MD	R. Hall, MD, DDS, PhD	R. Makdissi, MD
A. Chauncey, PA	J. Izzo, MD	
S. Cloud, DO	J. Kowalski, MD	
H. Davis, MD	K. Malik, MD	
R. Desai, MD	M. Manka, MD	
T. DeZastro, MD	K. Prankoff, MD	
S. Downing, MD	J. Reidy, MD	

Attendance (Non-Voting Members):

B. Murray, MD	R. Gerwitz	
J. Fudyma, MD	A. Victor-Lazarus, RN	
J. Lomeo	R. Krawiec	
M. Barabas	R. Cleland	
K. Ziemianski, RN	S. Gonzalez	
S. Ksiazek	K. Bruno, RN	

Excused:

A. Arroyo, MD	R. Venuto, MD	
M. Azadfard, MD		
N. Dashkoff, MD		
R. Ferguson, MD		
M. LiVecchi, MD		
T. Loree, MD		

Absent:

J. Lukan, MD		

I. CALL TO ORDER

- A. Dr. Joseph Kowalski, President-Elect, called the meeting to order at 11:40 a.m.

II. MEDICAL STAFF PRESIDENT’S REPORT – J. Kowalski, MD

- A. The Seriously Delinquent Records report was included as part of Dr. Kowalski’s report. Numbers have improved but are still very high. Please direct your staff to complete reports timely.

III. UNIVERSITY REPORT – Dean Cain, MD

- A. No report this month. See Chief Medical Officer for University updates.

IV. CEO/COO/CFO BRIEFING

A. CEO REPORT

- a. **BUDGET REPORT** – Mr. Lomeo advised that the ECMC budget must be submitted by the end of September for 2013. The budget has been completed and approved by the Finance Committee and will be submitted to the Board of Directors for final approval at September 25, 2012 meeting. Mr. Lomeo provided some detail on the budget highlighting some modest FTE increases in nursing, Information Technology and other smaller departments. Some volumes are expected to increase with the addition of new physicians on staff. Mr. Lomeo advised that further strategic planning will provide future vision for the organization.

B. PRESIDENT’S REPORT – Mark Barabas, President and COO

- a. **VOLUMES** – During the high census periods, Karen Ziemianski did an outstanding job with opening and closing overflow units as needed.
- b. **BEHAVIORAL HEALTH** – CON is being revised with Kaleida and Department of Health.
- c. **PARKING** – Construction continues and should be completed by November.
- d. **CARDIOVASCULAR MEETINGS WITH KALEIDA** – Meetings are on-going and productive. Dr. Downing provided a detailed update of progress advising that patients’ care will begin to be transitioned to the new GVI shortly.
- e. **MARCH OF DIMES RISING STAR AWARDED** – ECMC nominee was selected for this award through the University. It is the first time an ECMC candidate has been selected. Congratulations were offered to the department.

C. FINANCIAL REPORT – Jody Lomeo, CEO

- a. **VOLUMES/FINANCIAL REPORT** – \$1.2 million operation surplus was realized in August 2013. The hospital was very busy over the summer and a formal surge plan is being devised to improve processes in busier months going forward. The Erie County Home realized about a \$600,000 loss in August. Meaningful Use dollars should improve the bottom line to a potential break even for 2012.

VI. CHIEF MEDICAL OFFICER REPORT – B. Murray, M.D.

A. UNIVERSITY AFFAIRS

Richard J. Quigg, Jr., MD has accepted UB’s offer to be the inaugural Arthur M. Morris Chair in Nephrology and the next Chief of the Division of Nephrology. Dr. Quigg received his undergraduate and medical degrees from Boston University. He completed his medical residency at SUNY-Stony Brook and research and clinical fellowships in nephrology at the Boston University Medical Center. He was a research instructor in medicine at Boston University for one year, then he spent six years as an assistant professor at the Medical College of Virginia. He moved to the University of Chicago in 1994 as an associate professor, and he was promoted to professor in 2001. He was the Chief of the Section of Nephrology there from 1999-2009, and he was the Director of the University of Chicago Functional Genomics Facility from 2000-2010.

Dr. Quigg is nationally and internationally renowned for his research into glomerular diseases. His research interests include the role of the complement system in glomerular disease, lupus nephritis, and diabetic nephropathy.

I would also like to acknowledge Dr. Rocco Venuto’s leadership of the division over the past 21 years, with expanding clinical programs in chronic kidney disease, dialysis, and transplantation; continued full accreditation of the fellowship training program; and active clinical research programs.

B. PROFESSIONAL STEERING COMMITTEE

The PSC met on Monday, September 10th. A verbal update was provided.

C. MEDICAL STAFF AFFAIRS/MEDICAL DIRECTORS’ OFFICE

Dr. Murray welcomed Dr. Arthur Orlick to his first MEC meeting in his new role as Associate Medical Director. He will be providing much needed support to the Medical Director’s office.

D. CLINICAL ISSUES

UTILIZATION REVIEW	June	July	August vs. 2011 YTD
Discharges	892	1006	993 up 4.6%
Observation	135	138	154 down 10.6%
LOS	6.0	6.2	6.4 down 2.5%
CMI	1.85	2.14	2.18 unchanged
Surgical Cases	793	849	942 up 1.0%
Readmissions (30d)	12.2%	11.3%	

E. EHR standards get tougher under finalized meaningful use stage 2

The Centers for Medicare & Medicaid Services finalized its requirements for stage 2 of the EHR incentive program in an Aug. 23 regulation. The final rule mandates that doctors meet a larger number of core objectives — and stricter guidelines for some of those objectives already in place — during the next part of the three-stage program. Physicians also must adopt and demonstrate meaningful use of EHR systems by Oct. 1, 2014, or be assessed a 1% penalty from Medicare.

Stage 2 of the federal electronic health record initiative will include 17 core measures and six additional “menu” objectives, from which a physician would choose at least three. Doctors must use their EHR systems to meet requirements for at least 20 measures, including all 17 in the core set.

1. CORE SET

- Use computerized physician order entry (more than 60% medication, 30% lab and 30% radiology orders)
 - Prescribe permissible drugs electronically (more than 50%)
 - Record patient demographics (more than 80%)
 - Record and chart changes in vital signs (more than 80%)
 - Record smoking status (more than 80%)
 - Use clinical decision support (at least five interventions)
 - Incorporate clinical lab results into EHR (more than 55%)
 - Generate lists of patients by specific conditions (at least one list)
 - Identify patients who need reminders for preventive or follow-up care (more than 10%)
 - Provide at least half of patients with access to health information (more than 5% use access)
 - Provide clinical summaries for patients within one business day (more than 50%)
 - Identify patient-specific education resources (more than 10%)
 - Communicate with patients on relevant health information (more than 5%)
 - Perform medication reconciliation during care transitions (more than 50%)
 - Send summaries of care during referrals (more than 50%)
 - Submit electronic data to immunization registries (ongoing submissions during reporting period)
 - Protect EHR information

2. Menu set

- Access imaging results through EHR (more than 10%)
- Record patient family health histories (more than 20%)
- Record electronic notes (more than 30%)
- Submit electronic syndromic surveillance data to public health registries (ongoing submissions)
- Identify and report cancer cases to a public health registry (ongoing submissions)
- Identify and report noncancer cases to a specialized registry (ongoing submissions)

Source: Stage 2 Meaningful Use Final Rule, Centers for Medicare & Medicaid Services, Aug. 23 (ofr.gov/OFRUpload/OFRData/2012-21050_PI.pdf)

3. Parkland Hospital System Fined For Patient Safety, Care Issues.

The Texas Department of State Health Services has fined Parkland Health & Hospital System \$1 million for patient safety and quality-of-care deficiencies.. The settlement is said to be "the largest of its kind," and the piece noted that "the state investigation led to a federal investigation that has put Parkland's Medicare and Medicaid funding in jeopardy.

Some specific findings included an improper amputation of a patient's leg, inappropriate restraint and seclusion of a psychiatric patient who subsequently died, and a patient starting a fire in a psychiatric emergency department. Others included a patient carrying a loaded revolver in the emergency department and a medical resident pulling the teeth from the wrong side of the mouth of a patient whose teeth were damaged beyond repair in a traffic accident.

4. MedPAC Reviews Potential Changes to Hospital Readmission Reduction Program

The Medicare Payment Advisory Commission last week reviewed potential future refinements to the hospital readmissions reduction program, which starts October 1. Commissioners said they support the program but that several refinements could be made, such as controlling for the socioeconomic status of the patients a hospital treats and more adequately excluding unrelated and planned readmissions. The initial average magnitude of the penalty is 0.3 percent of operating payments. Each hospital's risk is limited in fiscal year 2013 because its total penalty is capped at 1 percent of inpatient base operating payments. MedPAC said over the longer term, some aspects of the policy may need to be revised. "Doing so could require revising the measure of readmissions, the method for determining excess readmissions, and the formula for computing penalties for hospitals with excess readmissions."

VII. ASSOCIATE MEDICAL DIRECTOR REPORT – John Fudyma, MD

- A. **VALUE BASED PURCHASING** – Dr. Fudyma provided a copy of the September 2012 edition of the CMO newsletter highlighting improved physician communication.
- B. **SCHWARTZ ROUNDS** – The first session of the Schwartz Center Rounds is this Wednesday, September 26, 2012 at noon. All are encouraged to attend.

VIII. DIRECTOR OF PHYSICIAN QUALITY AND ED. – S. Ksiazek

- A. **APPROVAL OF METRICS FOR OPPE/FPPE** – The metrics were presented as part of Ms. Ksiazek’s report. After presentation, a motion was made to receive the metrics as presented.

MOTION UNANIMOUSLY APPROVED.

IX. LIFELINE FOUNDATION – Susan Gonzalez

- A. Written report received and filed. Sue encouraged everyone to attend the **5K Heroes Walk and Run at Delaware Park on Saturday, September 29, 2012**. Heroes to be recognized this year is Kevin Hearston from the Buffalo Fire Department, Paramedic from Rural Metro, Buffalo Police Department, ECMC Police and Buffalo Swat Team for their service on June 13, 2012, Madonna Lasko, Trauma Nurse and Dr. Michael Manka, ED Chief of Service.

X. CONSENT CALENDAR

	MEETING MINUTES/MOTIONS	ACTION ITEMS
A.	MINUTES OF THE Previous MEC Meeting: August 27, 2012	Received and Filed
B.	CREDENTIALS COMMITTEE: Minutes of September 4, 2012	Received and Filed
	- Resignations	Reviewed and Approved
	- Appointments	Reviewed and Approved
	- Reappointments	Reviewed and Approved
	- Dual Reappointment Applications	Reviewed and Approved
	- Provisional to Permanent Appointments	Reviewed and Approved
1.	HIM Committee Meeting: - Minutes of August 23, 2012	Received and Filed
	1. Authorization for Administration of Anesthesia and for Performance of Transplant Surgery	Reviewed and Approved
	2. Physician Admission Order Form	Reviewed and Approved
	3. Deep Vein Thrombosis Prophylaxis Physician Screen & Intervention Guide	Reviewed and Approved
	4. Criteria for Inpatient Therapy Referral (Informational Form)	Reviewed and Approved
	5. Single Treatment Hemodialysis Order Set	Reviewed and Approved
		Reviewed and Approved
C.	UTILIZATION REVIEW COMMITTEE – Minutes of August 15, 2012	Received and Filed
D.	TRANSFUSION COMMITTEE – Minutes of July 19, 2012	Received and Filed

X. CONSENT CALENDAR

- A. **MOTION:** Approve all items presented in the consent calendar for review and approval.

MOTION UNANIMOUSLY APPROVED.

XI. NOMINATING COMMITTEE – David Ellis, MD

A. Report received and filed from Chair Dr. David Ellis. Nominations were respectfully received without opposition and no further nominations were heard.

1. At-Large Seats Slate Received as follows: (Vote for 4)

- Michael Chopko, MD
- Ravi Desai, MD
- Nancy Ebling, MD
- Mandip Panesar, MD

2. Officers by Ascension:

President: Richard Hall, MD, DDS, PhD
President-Elect: Samuel Cloud, DO
Treasurer: Timothy DeZastro, MD

3. Allied Health Professional, Voting, 2 Year Term (Vote for 1)

Andrew Stansberry, RPA-C

MOTION to accept the report as submitted. The nominations for MEC Officers and At-Large Members will be presented at the **Medical Staff Meeting on October 24, 2012** for vote. **MOTION UNANIMOUSLY APPROVED.**

Professional Steering Committee Nominations (Vote for 3) –

Yogesh Bakhai, MD
Joseph Kowalski, MD
Neil Dashkoff
Gregory Bennett, MD

Voting for this slate will occur at the **October 22, 2012 Medical Executive Committee** meeting.

XII. OLD BUSINESS

A. NONE

XIII. NEW BUSINESS

A. NONE

XIV. ADJOURNMENT

There being no further business, a motion was made to adjourn to Executive Session, seconded and unanimously approved to adjourn the regular session of the Medical Executive Committee meeting at 12:10 p.m.

Respectfully submitted,



Timothy DeZastro, M.D., Secretary
ECMCC, Medical/Dental Staff

Reading Material



**From the
Chief Executive Officer**

From the Business First

[:http://www.bizjournals.com/buffalo/news/2012/10/17/buff-gen-files-to-cut-transfer.html](http://www.bizjournals.com/buffalo/news/2012/10/17/buff-gen-files-to-cut-transfer.html)

Buff Gen files to cut, transfer patient beds

Business First by Tracey Drury, Buffalo Business First Reporter

Date: Wednesday, October 17, 2012, 10:33am EDT



Tracey Drury

Buffalo Business First Reporter- *Business First*

Email

In a move related to a joint behavioral health center, **Buffalo General Medical Center** has filed plans with the state to transfer 48 psychiatric beds to **Erie County Medical Center**.

Buffalo General, part of Kaleida Health, has asked the state Department of Health for approval to consolidate adult behavioral health services under the ECMC umbrella. A total of 91 inpatient beds will be impacted, with 48 beds transferred, and 43 beds decertified. Another 16 beds were previously converted to intensive care unit beds under a previous application.

Other services impacted by the move include adult outpatient behavioral health and chemical dependency services at 1010 Main St., which will also transfer to ECMC as well as the Buffalo General extension clinic in Lancaster.

The consolidations are part of a plan to build a \$25 million behavioral health center on ECMC's Grider Street campus, a 36,350-square-foot Regional Behavioral Health Center of Excellence for WNY that will include a comprehensive psychiatric emergency program (CPEP) and an outpatient behavioral health facility.

A goal of the project is to eliminate duplicative capacity and gain operational efficiencies, while providing lower cost care and improving outcomes for patients.

Both ECMC and Kaleida Health operate under the Great Lakes Health umbrella. The behavioral health center, expected to be completed by February 2014, is the third joint initiative the two organizations on which the two have collaborated.

Pending state approvals, Buffalo General's operating certificate will no longer have any inpatient psychiatric beds, nor chemical dependence and outpatient rehabilitation. Certified outpatient mental health services will remain on the operating certificate, however, with child psychiatry services remaining at 1028 Main St. on the Buffalo General campus.

Tracey Drury covers health/medical, nonprofits and insurance

Thirty honored as Black Achievers in Industry

Updated: October 16, 2012, 02:43 PM Published: October 16, 2012, 08:32 AM

Thirty people were honored at the annual Black Achievers in Industry Awards dinner recently in Adam's Mark Hotel.

It was the 40th year for the event, which provides an opportunity for business, civic and religious organization to recognize individuals who have made significant contributions in career and community endeavors.

The 2012 honorees are:

- Jonathan Abrams, an information management analyst for HSBC Bank USA, began at the bank 21 years ago as a telephone customer service representative. While working full time and advancing into management positions, he earned an accelerated master's of business administration degree from Medaille College and has earned several honors for his work, including HSBC Bank USA's CEO Award.

- Ina Rebecca Doss-Chapman, the founder of the Western New York Health Information Network, worked for more than 30 years in cancer care locally. Now she serves as a consultant for preventive care and illnesses that affect African-Americans and minority communities around the world. The wife of Minister Michael Chapman, pastor of St. John Baptist Church, she also is partner with her husband in The Blessed of The Lord Ministry, a production company that produces religious plays, concerts and other events.

- Stacey M. Cheatom, an assistant vice president in the Alternative Banking Department at M&T Bank, manages the bank's online applications for deposits, loans and credit cards. In 2010, she became a founding member and the first WNY chapter president of the bank's African-American Resource Group. She has involved the group in Buffalo's annual Juneteenth Festival and coordinated the bank's first Black History Month events this year.

- Dr. Johnnie Q. Edwards, at age 81, is one of the area's senior pastors. Founder of the Upper Room Church of God in Christ in 1958, he has served in various district and national offices for the church and has helped many pastors and missionaries in their ministries. Honored several years ago when a street was named for him, he currently is first administrative assistant to COGIC's bishop of the New York Central Jurisdiction.

- Myrna L. Eldridge, a systems analyst and programmer for KeyBank for 19 years, is active in her community in many ways. She leads a team of volunteers for KeyBank's Neighbors Make the Difference Day every spring and is an active member of the Street Synergy Community Association, which is dedicated to improving Buffalo's University District. For more than 10 years, she also has served as a member and treasurer of the Rounds Avenue Association, a block club-based community organization.

- Yolanda M. Fields began her banking career in 2000 and is a commercial loan administrator and banking officer at First Niagara Bank with a passion for volunteer work. Within the bank, she's chairwoman of First Niagara's Employee Volunteer Council in the Western New York region and manages the council's efforts throughout the company. She also has been a team captain for Brush Up Buffalo for the past six years, is a volunteer coordinator for Garden Walk Buffalo and coordinates First Niagara's Adopt-a-Family program with St. Luke's Mission of Mercy and other agencies.

- Betty Pitts-Foster, with her late husband, Frederick Foster, started the Buffalo Track & Field Classic, a track meet for children ages 5 to 18, and has helped keep it alive since his death in 2009. Retired after 25 years with the state Office of Vocational and Educational Services for Individuals with Disabilities, she has moved to the professional level as an artist and is now with the Buffalo Arts Studio.

- Wayne J. Galloway, a 25-year employee of Belmont Housing Resources, has brought more than 250 projects from feasibility studies to completion since his promotion to rehabilitation specialist in 1994. A graduate of Bowie State College in Maryland, he began with Belmont as an inspector, making sure that rental properties met federal standards.

- Latisa "Lisa" Hall-Brown earned an associate's degree in nursing from Erie Community College and, encouraged by her mother, went on to receive a bachelor's degree in nursing from Roberts Wesleyan College. After nine years as a nursing assistant at Millard Fillmore Hospital, she became a registered nurse and joined the staff at Buffalo Psychiatric Center. Currently supervisor of the center's clinic, she also is in charge of several other programs.

- Jennifer L. Hamilton, a senior department administrator at Roswell Park Cancer Institute, has

had a long and varied career in health care. Beginning as a secretary at Buffalo General Hospital, she advanced to supervisor of ambulatory services, manager of patient access and office supervisor. After completing bachelor's and master's degrees with honors at Medaille College, she went on to serve as assistant administrator at Buffalo's Northwest Community Health Care Center and a manager at Niagara Falls Memorial Medical Center before joining Roswell Park.

- Kevin T. Harris Sr., who joined the Buffalo Fire Department in 1985, earned an award for reviving a fire victim and is certified as an emergency medical technician and a CPR instructor. He served for two years as an assistant fire alarm dispatcher and became a lieutenant in 2009. Currently, he is the department's planning officer assigned to Fire Headquarters.
- Christine Herring, a public safety records specialist for the Niagara Frontier Transportation Authority police, maintains all of the department's arrest and incident records, as well as its payroll, and acts as liaison between the department and the courts. NFTA Police Chief George Gast describes her as "indispensable." She earned a degree in human services from Empire State College in 2010.
- Timothy R. Hogues was elected to the Erie County Legislature last November, representing the 1st District in Buffalo. A graduate of the University at Buffalo with a degree in business administration, he is vice president of Investors Committed to Excellence, which assists potential homeowners, and received his license in May to become a minister at Elim Christian Fellowship.
- Dr. Frances Ilozue, who just completed the fifth year of her practice at Rapha Family Medicine, 2200 Main St., is a native of Nigeria who completed her medical studies in St. Petersburg, Russia. Before coming to Buffalo, she held positions in Enugu and Lagos in Nigeria. An active member at Bethesda World Harvest International Church, she advises young adults interested in health care careers and gives health tips monthly on the church's radio show on WUFO.
- Eric Johnson is an up-and-coming entrepreneur who discovered a new opportunity while trying to solve a business problem. Purchasing several properties for extra income about 10 years ago, he was dismayed by the high cost of trash removal and bought his own dump truck, intending to sell it when cleanup was finished. Realizing he could use bigger trucks to dispose of more trash at a lower price, he founded Big Trash Removal, left his factory job and has been working full time for his own company since 2006.
- Talisa King, program manager for the Willie Hutch Jones Educational & Sports Program for more than five years, has worked with youth as an advocate and mentor in many ways. In her previous position with CAO of Erie County, she created daily programs for youth and was liaison with the Buffalo schools for home instruction. She also is a youth detention worker for Erie County, an adviser for families with behavioral and substance abuse problems, and a certified foster parent.
- Veronica Leverette, who was honored by Kaleida Health in 2007 with the Outstanding Staff Nurse Award and named a "Nurse of Distinction," has worked in various nursing specialties, including oncology, gynecology and hospice. A nursing graduate of D'Youville College and currently a medical surgical nurse with Kaleida, she was recognized for her mentoring work in an article in The Buffalo News and last year appeared on the cover of Nurses Network magazine.
- Rev. Dr. James A. Lewis III, director of pastoral care at Erie County Medical Center, is unafraid to reach out to those suffering from addictions, AIDS or the difficulties of life. Recently, he made the major move of leaving the African Methodist Episcopal Conference to form the new Miracle Missions Full Gospel Church at 406 Sycamore St.
- Esinash Mangena, who has been with Univera Healthcare for 13 years, is key to maintaining the company's workflow as a lead project analyst. She also is co-chairwoman of the Women & Empowerment Network, an employee resource group, leads its meetings and oversees its event programming.
- Tara N. McCarter, who holds bachelor's and master's degrees from Medaille College, has worked in various staff positions with the Buffalo Board of Education for the past 14 years and is active in Elim Christian Fellowship Church. The niece of City Judge E. Jeannette Ogden, she plans to earn a doctorate in management from the University at Buffalo.
- Robin L. Moody-Loggans, a project manager for the construction company LPCiminelli, has played a role in many parts of the \$1 billion Buffalo school reconstruction project. She has overseen the renovation of several schools, including the former B.U.I.L.D. Academy, where she once was a student. Currently, she is working on the renovation of the Dr. Charles Drew Science Magnet School. In 2000, she had the honor of being the first bride to be married in St. Martin De Porres Church – another project she had overseen.
- Dr. Melissa Neal grew up in Plano, Texas, earned her bachelor's degree in biology in three years at Washington University, earned her medical degree in Pennsylvania and studied to become an ophthalmologist in Michigan. After practicing for three years in Cleveland, she now offers eye care and minimally invasive cosmetic surgery at Twenty 20 Eye Care & Aesthetic Medicine.
- Robert Otis, a member of the staff at the Hyatt Regency Buffalo for 25 years, has been nominated for the hotel's associate of the month award every year and was honored as Associate of the Year in 1997. A steward, he works mostly behind the scenes, where his devotion to excellence inspires his co-workers.
- Gary Ransom, a banquet setup supervisor at Adam's Mark Hotel, credits his wife, Keionna, with

helping him escape the lure of the streets and follow a positive path. The father of six children, ages 1 to 16, he attended Bryant & Stratton Business Institute and earned a welding certificate from Quality Inspection Service. He and his family attend Mount Olive Baptist Church.

- Douglas R. Ruffin Jr., who has worked in local radio and television for almost 20 years, currently is master control operator at WUTV and WNYO-TV. He is the owner of Urban Legacy Filmworks, an independent multimedia company, and is the host and producer of his own show on WUFO 1080 AM, "The Neo Soul Movement." He also is president of the B.U.I.L.D. Academy Alumni Association and is the curator of the Community Images Multimedia Traveling Exhibit, which will be celebrating its 10th anniversary next year.

- Rayshad D. Russell, who's just 27, has shown exceptional drive since he was a scholar-athlete at Bennett High School. A job at a service station led to a position at an auto parts chain store, where he racked up top sales as assistant store manager. Earning a degree in business from Erie Community College, he became a teller at Citizens Bank and quickly rose to become Jefferson Avenue branch manager, where he also is a sales leader. Currently pursuing a degree in management at Medaille College, he is on the dean's list. Also an accomplished musician, he teaches students at Stepping Stone Charter School how to play an African drum, the jembe.

- David Clarence Scott, the diversity program manager at Roswell Park Cancer Institute, was told he was "not college material" by his high school guidance counselor. He went on to become a National Dean's List student at Potsdam State College and was also selected to study abroad in Sweden. Teaching and working in human relations after college, he also has earned a master's degree in human resource development.

- Rev. Betty Pierce-Williams, assistant pastor at Elim Christian Fellowship, acknowledged her call to the ministry in 1984 while she was serving as a supply sergeant in the Air Force. Licensed to preach in the African Methodist Episcopal Church the following year, she has been a campus minister at the University at Buffalo and lecturer at UB's Educational Opportunity Center. Ordained in 1998, she now serves as dean of the Sound of the Genuine Biblical Institute, which prepares candidates for the ministry, and has completed course work toward a master of divinity degree at Northeastern Seminary.

- Tonja M. Williams was named principal of Futures Academy School 37 a year ago and has worked tirelessly to introduce new programs, establish outside partnerships and improve academic achievement. Previously she was a counselor at all grade levels in the Buffalo Public Schools and was director of the district's guidance and counseling department. A graduate of Medaille College, she earned her doctorate in educational leadership from St. John Fisher College.

- Dennis A. Wilson Jr. graduated at the top of his class at Riverside High School and played Division I basketball at Canisius College. Now a high school history teacher and basketball coach in the Buffalo Public Schools, in 2001 he founded King of Spades Graphics, one of the area's top urban design companies, and last year became co-owner of The Oakk Room Restaurant in Buffalo.

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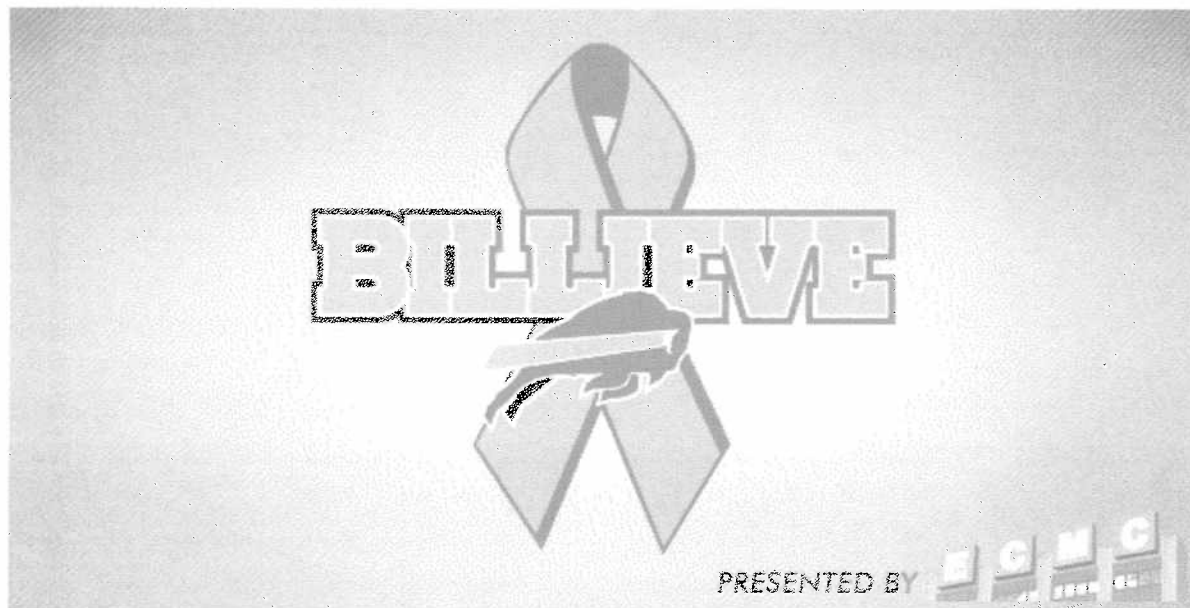


Show your support and BILLIEVE

Posted Oct 19, 2012



Hannah Buehler
Journalist
[@HannahBills](#)



Throughout the month of October, we have watched our Bills players and coaches proudly wear pink to show their support for Breast Cancer Awareness Month. On Friday October 19th, our community will come together as one to honor breast cancer awareness, as the Bills host the seventh annual BILLIEVE event sponsored by E.C.M.C.

Fred Jackson, Ryan Fitzpatrick, and Mario Williams are among the many Bills players who will be attending the BILLIEVE event, gathering in Niagara Falls to fight breast cancer.

“Breast Cancer awareness is an issue that the Buffalo Bills continue to pay great attention to, and the Billie campaign is a sure way in which we can help combat the dangers of this disease head-on,” Mary Owen, Buffalo Bills Executive Vice President of Strategic Planning, said. “It is our hope that through this initiative, we are able to engage our fan base in a memorable way to raise awareness and help save lives.”

Starting at 6:30 PM, Niagara Falls will be illuminated pink, and Bills players will help in forming the International PINKTOBER living ribbon of supporters across the Rainbow Bridge. American and Canadian participants will meet in the middle of the bridge, linking together as one.

Breast cancer is a disease that hits home with many individuals. Rose Ann Ross was diagnosed with Breast cancer 11 years ago. She has been an active member of the American Cancer Society, and believes that she has been given a voice to speak about the issue to the masses.

Over her 11 cancer free years, she has worked to raise over \$120,000 for the American Cancer Society to help in the fight against breast cancer. This will be Rose's first year attending the Buffalo Bills BILLIEVE event and she couldn't be more excited for the support that will take place Friday night.

"I feel a lot of excitement about the fact that the American Cancer Society has such a great opportunity to partner with the Bills, and that two countries are coming together to honor survivors and people that are suffering with this disease," said Ross. The excitement and the amount of people that will be attending is wonderful."

Supporters will have the opportunity to receive information about how to prevent breast cancer, and the proper screening processes and detection methods that help save lives. The ECMC Lifeline Foundation Mammography Bus, which features two digital mammography machines, will be parked on Old Falls Street, USA for people to visit and receive information on early diagnosis and treatment.

"Breast cancer is something that really hits home for my family," said Alissa Chandler, wife of Bills tight end **Scott Chandler**. "Having my mother as a survivor, I believe it is important to support breast cancer awareness and to stress the importance of early detection. If my mother wouldn't have found her tumor during early detection screenings she may not be here today, and for that I am ever grateful."

"Whether you are faced with breast cancer or you've never been faced with it, it's not a matter of that. You never know what can happen in your life. Just by people showing support is so beneficial. Come out, help, and show your support."

Following the living ribbon ceremony, supporters will be welcomed to the Hard Rock Café, Niagara Falls USA for a free outdoor concert beginning at 7:30 PM. At 8:30 PM, National Recording Artist Belinda Carlisle will take the stage performing for a free outdoor concert.

To be a part of this unforgettable evening, click **here** and reserve your spot on the Rainbow Bridge for the living ribbon ceremony. One hundred percent of the proceeds raised will benefit the American Cancer Society, and help save lives in the fight against breast cancer.

"Each time we host an event, we are coming together to save someone's life," said Ross. "Early detection can save your life and I'm living proof of that."

URL: <http://www.buffalobills.com/news/article-1/Show-your-support-and-BILLIEVE/080ffb8f-e45e-4c03-894e-3d179498a937>

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Thirteen Members Appointed to Leadership Academy

At the September 12, 2012 NYSNA Board of Directors meeting, thirteen NYSNA members were appointed to the 2012-2013 Leadership Academy Program.

The eight members appointed to the Tier 2 Fellows Program are:

- Nancy D'Leema, BSN, Lincoln Medical & Mental Health Center
 - Carol Mureen Johnson, PhD, RN, Bellevue Hospital Center
 - Stacey Johnson, MSN, HHH – Choices Health Plan, LLC
 - Lisa Ma, BSN, Bellevue Hospital Center
 - Catherine Narcavage-Bradley, MSN, Upstate University Hospital at Community General
 - Suzanne Pavel, MSN, St. Lukes-Roosevelt Hospital Center
 - Nadine Phillips-Patterson, MSN, Bellevue Hospital Center
 - Suzette Williams, MSN, Kings County Hospital Center
- The five members appointed to the Tier 3 Graduate Program are:
- Kagenr Gayle, BSN, New York Presbyterian Hospital, NYC
 - Gwendolyn Lancaster, EDD, RN, St. Lukes-Roosevelt Hospital Center
 - Rebecca Lippner, BSN, Erie County Medical Center
 - Janet Mackey, MS, RN, Coney Island Hospital
 - Christine Malmgreen, MSN, Hudson Valley Hospital Center

For more than a decade, the Leadership Academy Fellows Program has prepared NYSNA members to assume positions of influence within their professional association. Viewed as the “passageway into distinction of nursing leadership,” many graduates of the program have served on the NYSNA Board of Directors, the ANA House of Delegates, executive committees of local bargaining units, the Delegate Assembly, council offices, and district nurses associations’ boards and committees.

Tiers to success

Leadership Academy consists of three distinct tiers of participation, carefully designed to assist members in their personal and professional growth and cultivate the leadership qualities necessary to assuming positions of influence within their association.

Tier 1 consists of five modules that all members are encouraged to access on the NSYNA website. These modules provide a mini-study and overview of NYSNA, and can help orient new association members, or encourage those members who may be considering leadership roles, but are not yet ready to commit to applying to Leadership Academy.

After completing Tier 1, participants may apply for Tier 2, the Fellows Program, which is a year-long learning experience involving on-site lectures, webinars and independent study. Fellows have the opportunity to attend Lobby Day, Convention, and other meetings and workshops that will en-

hance their leadership skills and give them in-depth knowledge about their nurses association. Fellows receive one-on-one guidance from assigned mentors and are expected to complete a project during the course of the year.

After successful completion of Tiers 1 and 2, Graduate Fellows may apply for Tier 3, the “Graduate Program” which also includes attendance at workshops in advanced leadership topics and events that further enhance and develop leadership skills.

A key factor in the success of the Leadership Academy program is its mentoring component. Leadership Tier 2 Fellows are assigned a mentor throughout their studies to guide them as they assume a leadership role. “The Leadership Academy is an excellent opportunity to increase and enhance the leadership skills already ingrained in the professional nurse,” said Renée Geesedi, Coordinator of Nursing Education and ANCC accreditation at NYSNA. “Today’s members are tomorrow’s leaders of NYSNA,” she said, “and this program helps prepare nurses to assume those leadership roles.”

If you would like more information about the Leadership Academy please contact Betsy Heitly or Lynn McNall at 518-782-9400 ext 282.

-- ERIN SILK

Monday October 22, 2012

[The Buffalo News.com \(/\)](http://TheBuffaloNews.com/)

City & Region

Several honors presented during Run for Heroes

News Staff

Updated: October 1, 2012, 11:48 PM Published: October 1, 2012, 11:48 PM

Lifesaving medical and law enforcement professionals were honored over the weekend during the 2012 Run for Heroes in Delaware Park, sponsored by Erie County Medical Center and the ECMC Lifeline Foundation.

The Buffalo Police Department, the Buffalo Police SWAT Team and the ECMC Police Department were cited for their work following a shooting death at ECMC in June.

Buffalo Firefighter Kevin Hairson of Ladder 14 was honored for saving a man trapped in burning building Jan. 15.

Justin Janiga, an emergency medical technician with Rural/Metro Medical Services, was cited for his decision to pursue a medical career.

Dr. Michael Manka, chief of service in ECMC's emergency department, was honored for devoting his career to emergency medicine.

Madonna Lakso, a registered nurse in ECMC's Trauma Intensive Care Unit for more than 20 years, was cited for her career as a critical care nurse.

News Staff

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October 20, 2012

Niagara Falls goes pink for big Pinktober event **(**

Niagara Falls is bathed in pink during the Pinktober ceremony where Americans and Canadians joined pink ribbons on the Rainbow Bridge to fight breast cancer.



Kelli Cravey of the American Cancer Society speaks on the Rainbow Bridge during the Pinktober Living Ribbon ceremony.



Buffalo Bill Kyle Williams signs a hat for Linda Pollard, of Missouri at the Hard Rock Cafe during the American Cancer Society Pinktober Living Ribbon ceremony.

[gazette.com/local/x1200641223/Niagara-Falls-goes-pink-for-big-Pinktober-event](http://niagara-gazette.com/local/x1200641223/Niagara-Falls-goes-pink-for-big-Pinktober-event)

Staff Reports

Niagara Gazette (<http://niagara-gazette.com>)

NIAGARA FALLS — Hard Rock Cafe Niagara Falls added a pop of pink Friday in honor of the 13th annual Pinktober breast cancer awareness campaign, hosting the third annual International PINKTOBER Living Ribbon and free outdoor concert featuring Belinda Carlisle.

Hard Rock Cafe, the Buffalo Bills, ECMC, KISS 98.5, the American Cancer Society and the Canadian Cancer Society all came together to raise money and awareness for the fight against breast cancer.

The Hard Rock Cafe also partnered with the Buffalo Bills and their “Billieve” breast cancer awareness campaign.

The event benefitted the American Cancer and Canadian Cancer Societies. The American Cancer Society saves lives by helping people stay well by preventing cancer or detecting it early. The Canadian Cancer Society is a national, community based organization of volunteers who mission is the eradication of cancer and the enhancement of the quality of life for people living with cancer.

New! Share what you're watching & see what your friends are viewing What's this?



Nightly News | Aired on September 20, 2012

Inspired by son, 64-year-old heads to Afghanistan

When orthopedic surgeon Dr. Lawrence Bone heard the Army had a great need for surgeons, he made the decision to put himself in harm's way to help men like his son, who was injured in Iraq. NBC's Rehema Ellis reports.

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Wednesday September 19, 2012
The Buffalo News.com

City & Region

Mobile Mammography Unit plans visits to housing sites

News Staff

Updated: September 18, 2012, 01:23 AM Published: September 18, 2012, 06:00 AM

The Erie County Medical Center Mobile Mammography Unit will visit several Buffalo Municipal Housing Authority properties and other sites for testing.

The unit is a joint project of the ECMC Lifeline Foundation, the Buffalo Sabres Alumni and First Niagara Bank Financial Group. It was introduced in July with the goal of testing inner-city and rural women who may not otherwise have access to breast cancer screening services.

A doctor's prescription for a mammogram and appointments are required. Women may call (855) Go-4-PINK or (855) 464-7465.

Women who do not have a primary care physician may obtain information on how to get a prescription at the mobile unit or through the toll-free number.

The unit will hold following sessions:

- 9:30 a.m. and 5 p.m. today at Frederick Douglas Towers, Clinton Street and Jefferson Avenue.
- 9:30 a.m. to 5 p.m. Sept. 27 Commodore Perry Homes, Seneca Street and Michigan Avenue.

News Staff

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Hit and run survivor runs her first 5K

Updated: Sunday, 07 Oct 2012, 7:01 PM EDT
Published : Sunday, 07 Oct 2012, 6:38 PM EDT

- Anthony Congi
- Posted by: Liz Reiman

Today's walk and 5-K served as a major milestone for several people, including a young woman whose story we've been following for several years now.

News 4's Anthony Congi brings us an update on Amy Stewart's triumph over a life-changing accident.

About 3 and a half years ago, running a race was probably the furthest thing from Amy Stewart's mind.

In March of 2009, Stewart, a former soccer star at Daemen College and a then graduate student at UB, was crossing Main Street near the Daemen campus when she and a friend were struck by a hit and run driver.

Friends rallied around Stewart, hosting events like this prayer service, while the grand island woman languished in a coma at ECMC.

Two months later, a miracle; Stewart was released from the hospital.

While it was amazing she made it out alive, Stewart suffered a traumatic brain injury. Since then, life itself has been a struggle for both her and her family.

Amy Stewart says, "Once I was released from ECMC, I spent 9 months in therapy there. I've been continuing my therapy once they released me. I've been working with a trainer at the Buffalo Athletic Club to get myself back where I was."

Stewart was joined by fellow survivors of traumatic brain injuries and community members Sunday morning at the Erie Basin Marina for the HeadWay of Western New York's 5K. The non-profit organization supports and advocates those with brain injuries and other disabilities. The event, was mainly about awareness of the constant struggles those with brain injuries face on a daily basis.

"Life has been a very uphill battle. Just trying to do certain things, it's hard for me. Always working at things to make progress; nothing's ever come easy anymore," Stewart says.

Sadly, many of those who took part had similar stories.

Kelly Lynch who has survived a car accident too, says, "I was in a very death defying car accident. I died and ECMC's trauma center put me back together. This is a blessing. I am so glad to be out here. I have butterflies, I have butterflies in my stomach."

That's what made this race so special for Stewart. It was the first athletic feat for the former soccer defender since her injury.

Annamarie Stewart says, "This has definitely been one of her goals. When you're faced with the severity like Amy was where she wasn't even expected to survive, to be here at this point today is nothing short of miraculous."

With the help, and coaching from her sister-in-law, Amy crossed the finish line triumphing over tragedy.

"Megan and I were talking about how they fitted me for a wheel chair and here I am running. You have to keep on pushing through and have to believe that you can do it because I always thought that I would be able to run again and now I'm running," says Stewart.

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