# MINUTES OF THE REGULAR MEETING OF THE BOARD OF DIRECTORS TUESDAY, MARCH 22, 2016

STAFF DINING ROOM

**Voting Board Members** 

Present:

Kevin M. Hogan, Esq. Bishop Michael Badger Douglas H. Baker

Ronald Chapin

Kevin Cichocki, D.C. Jonathan Dandes

Kathleen Grimm, M.D.

Sharon L. Hanson Michael Hoffert Anthony Iacono

Thomas P. Malecki, CPA

Frank Mesiah

Michael A. Seaman

Voting Board Member

Excused:

Ronald Bennett

Darby Fishkin

Non-Voting Board

Representatives Present:

Thomas Quatroche Ph.D.

James Lawicki

William Pauly

Kevin Pranikoff, M.D.

Also Present:

A.J. Colucci, III, Esq. Peter Cutler Kelley Finucane Stephen Gary Susan Gonzalez Al Hammonds

Jarrod Johnson

Liise Kayler, M.D. Chris Koenig

Susan Ksiazek Charlene Ludlow Phyllis Murawski

Jim Turner

Karen Ziemianski

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#### I. CALL TO ORDER

Chair Sharon L. Hanson called the meeting to order at 4:30 P.M.

Sharon L. Hanson welcomed William A. Pauly as ECMC's newest board member, and Peter Cutler, Vice President of Communications & External Affairs.

#### II. APPROVAL OF MINUTES OF FEBRUARY 23, 2016 REGULAR BOARD MEETING.

Moved by Anthony Iacono and seconded by Kathleen Grimm, M.D.

Motion approved unanimously

#### III. ACTION ITEMS

A. Approval of March 3, 2016 Medical-Dental Staff Appointments and Re-Appointments.

Moved by Kevin Cichocki, D.C. and seconded by Anthony Iacono.

Motion approved unanimously.

### IV. BOARD PRESENTATION: TRANSPLANT

## LIISE KAYLER, MD AND PHYLLIS MURAWSKI

Dr. Liise Kayler and Phyllis Murawski provided an overview of the changes that have occurred in transplant and plans for continued progress.

- There have been changes in physician leadership, nephrology, surgical, and staffing reorganization and an increase in frontline staffing.
- Significant transplant growth was experienced in 2015 with a projection for 2016 of 115 transplants.
- Beginning in April, in collaboration with Children's Hospital, ECMC will begin pediatric transplants.
- Patients will have easier access for transplantation.
- Laparoscopic techniques available.
- ECMC, PCP availability for donors without insurance.
- Simple and timely work-up.
- Continue to improve safety and quality.
- Continued outreach and marketing efforts through commercials, articles, updated website, and new patient information brochures.

#### V. BOARD COMMITTEE REPORTS

All reports except that of the Performance Improvement Committee are received and filed in the March 22, 2016 Board book.

#### VI. REPORTS OF CORPORATION'S MANAGEMENT

President & Chief Executive Officer: Thomas J. Quatroche, Ph.D.

#### Quality

- ECMC received the 2016 Women's Choice Award for Patient Safety. This national award identifying the country's best healthcare institutions based on robust criteria considers female patient satisfaction and clinical excellence.
- o Transitional Care Unit (TCU) had a successful survey.
- o ECMC had a joint commission visit for our Detox program. The exit interview was very complimentary of the services that ECMC provides.
- o ECMC conducting a Culture of Safety survey to get feedback from staff about safety in the care environment.

# • Patient Experience

- Patient Experience continues to be our focus with regular rounding by the Executive Leadership team.
- o An "app" for point of care rounding will be launched in the near future to inventory our rounding efforts
- o Increased focus on training which includes Behavioral Health Empathy Training, crisis management training as well as team building and respect in the workforce.

#### Culture

- o Nurse recruiting going very well. There is an increase in new Nurse Graduates making ECMC their top choice in employment.
- Community Outreach Recruitment Program to facilitate the application process and make more accessible for candidates in the community.
- o "Team Building" and "Respect in the Workplace" sessions are being scheduled for April for revenue cycle and outpatient dialysis.
- o Starting a leadership and patient experience training at Terrace View.

## Operations

- Cohorting patients 80%.
- Grand opening of the new Orthopedic Center on April 7<sup>th</sup>.
- o All staff hired for opening of 16<sup>th</sup> surgical suite.
- o NYS electronic prescription mandate has started and is prepared for it.
- o Supplemental waiver and capital funding for DSRIP.

# Chief Financial Officer: Stephen Gary

A summary of the financial results through February 29, 2016 and a Quarterly Financial Statement and projected statement of Yearly Cash Flows are attached in the Board Book for review.

Chief Medical Officer: Brian Murray, MD

- Chief Cummings presented an update on security programs throughout ECMC campuses.
  - Visitor management included limiting public access to three locations to improve ability to control entry. The Badge Pass program allows staff to determine if a visitor has legitimate purpose to be on the campus and identifies any restrictions related to the visitor.
  - Video surveillance expansion includes the installation of over 400 cameras with improved tracking.
  - o A new control room is expected to be installed in the coming year.
- Dr. Brandwein-Gensler, Chief of Services, Pathology, provided an update on the pathology department at ECMC. She has a deep expertise in Head and Neck pathology and has authored publications on the matter including the 8<sup>th</sup> ACC Staging Manual.
  - Dr. Brandwein-Gensler reviewed the state of the department, which reveals a need for improvement. Vision for ECMC includes improved facilities and processes to include better turnaround time and increased intraoperative consultation.
  - o Improvements already realized include much needed microscopic equipment, slide video conferencing grossing bays, an additional physician assistant and added fellow in Head and Neck pathology.
  - o Quarterly ACS meetings led by Dr. Saurin Popat.
  - O Leslie Feidt, Chief Information Officer, provided an update on the many IT functions at ECMC. 2015 process improvements include a desktop management strategy, provider communication and community outreach, data security enhancement, continue progression to a fully electronic medical record and 2016 IT quality assurance and performance improvement plan.
  - o Sandra Cutrona, Interim Director of Health Information Management provided an update on several areas within the department. Delinquent Chart rates were presented and have improved to 19% in 2016 from 30% in 2015.

#### VI. RECESS TO EXECUTIVE SESSION - MATTERS MADE CONFIDENTIAL BY LAW

Moved by Michael Seaman and seconded by Kevin Cichocki, D.C. to enter into Executive Session at 5:10 P.M. to consider matters made confidential by law, including certain compliance-related matters, strategic investments and business plans.

Motion approved unanimously

#### VII. RECONVENE IN OPEN SESSION

Moved by Frank Mesiah and seconded by Michael Seaman to reconvene in Open Session at 5:30 P.M. No action was taken by the Board in Executive Session.

Motion approved unanimously.

# VIII. ADJOURNMENT

Moved by Bishop Michael Badger and seconded by Douglas H. Baker to adjourn the Board of Directors meeting at 5:35P.M.

Douglas H. Baker Corporation Secretary

Jh W. Bah

# CREDENTIALS COMMITTEE MEETING

#### **Committee Members Present:**

Yogesh Bakhai, MD, Interim Chair Brian Murray, MD
Mark LiVecchi, DMD MD MBA Mandip Panesar, MD
Jonathan Marshall, DO Susan Ksiazek, RPh

#### **Medical-Dental Staff Office and Administrative Members Present:**

Tara Boone, Medical-Dental Staff Services Coordinator

Judith Fenski, Credentialing Specialist Kerry Lock, Credentialing Specialist

Riley Reiford, Medical-Dental Staff Office Systems Coordinator

#### **Committee Members Excused:**

Richard Hall, MD, DDS, PhD Erik Jensen, MD Richard Skomra, MD

# CALL TO ORDER

The meeting was called to order at 3:02 PM by Dr. Bakhai. The proceedings from the previous meeting of February 4, 2016 were reviewed and accepted with no changes.

# **ADMINISTRATIVE**

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

- A. Deceased none
- B. Applications Withdrawn none
- C. Application Processing Cessation none
- D. Automatic Processing Conclusion (inactive applications > 180 days from date of signature) none
- E. Resignations -

Albert, S. Jane, FNP Internal Medicine 02/25/2016

James Miller, PA Internal Medicine 02/16/2016

Kamoh, Amandip, DDS Oral & Maxillofacial Surgery 03/01/2016 Lynch, Lisa, PSYNP Psychiatry 02/03/2016

FOR INFORMATION

# CHANGE IN STAFF CATEGORY

None

# **DEPARTMENT CHANGE OR ADDITION**

Smith, Kirsten, WHNP Allied Health Professional

Withdrawing Internal Medicine privilege (see below)

# CHANGE OR ADDITION OF COLLABORATING/SUPERVISING ATTENDING

None

ERIE COUNTY MEDICAL CENTER CORPORATION
MINUTES OF BOARD OF DIRECTORS REGULAR MEETING
OF TUESDAY, MARCH 22, 2016

# PRIVILEGE ADDITION/REVISION, RECOMMENDED - COMMENTS AS INDICATED

#### **Dentistry**

Balon, Jennifer, DDS Active

- ADMITTING PRIVILEGES Ambulatory Surgery/Non-ICU Beds only

Kapral, Elizabeth, DDS Active

- ADMITTING PRIVILEGES Ambulatory Surgery/Non-ICU Beds only

\*FPPE waived – this is an administrative (dental residency accreditation) vs. clinical privilege

FOR OVERALL ACTION

#### PRIVILEGE WITHDRAWAL

**Internal Medicine** 

Smith, Kirsten, WHNP Allied Health Professional

-Anoscopy

Per clinic administrator, anoscopy currently not offered in the Immunodeficiency Clinic

**Pathology** 

Higgs, Donald, MD Active

-Ophthalmic Pathology

FOR OVERALL ACTION

## APPOINTMENT APPLICATIONS, RECOMMENDED—COMMENTS AS INDICATED

A. Initial Appointment Review (7)

**Internal Medicine/Hospitalist Service** 

Asiedu, Stephen, MD Active-*Locum* 

Laskowski, Stephen, DO Active-*Locum* 

**Orthopaedic Surgery** 

Carrel, Jeffrey, DPM Active

Goldstein, Kenneth, DPM Active

Radiology/Teleradiology

Khanna, Arati, MD Active

Kommana, Harisha, MD Active

Patterson, Stacey, MD Active

FOR OVERALL ACTION

**B.** Dual Appointments (0)

# REAPPOINTMENT APPLICATIONS, RECOMMENDED – COMMENTS AS INDICATED

#### C. Reappointment Review (20)

**Dermatology** 

Helm, Thomas, MD Active

**Emergency Medicine** 

Krolczyk, Steven, PA Allied Health Professional

Supervising Physician: Dr. Manka

Manka, Michael, MD Active

**Family Medicine** 

Hennessy, Kevin, ANP Allied Health Professional

Collaborating Physician: Dr. Evans

**Internal Medicine** 

Braunscheidel, Denise, NP Allied Health Professional

Collaborating Physician: Dr. Zizzi Jr.

Corbelli, Richard, MD Active

Dauer, Patricia, FNP Allied Health Professional

Collaborating Physician: Dr. Lawler

Orlick, Arthur, MD Active

Panesar, Mandip, MD Active

Rich, Ellen, MD Active

Scrocco, Mary, FNP Allied Health Professional

Collaborating Physician: Dr. Gatewood

Neurosurgery

Guterman, Lee, MD Active

**Obstetrics and Gynecology** 

Smith, Kirsten, WHNP Allied Health Professional

Collaborating Physician: Dr. Dolensek

**Orthopaedic Surgery** 

Orlowski, Mark, PA Allied Health Professional

Supervising Physician: Dr. Callahan

**Plastic & Reconstructive Surgery** 

Lindfield, Vivian, MD Active

**Psychiatry & Behavioral Medicine** 

Bakhai, Yogesh, MD Active

Gokhale, Vinayak, MD Active

Marshall, Dori, MD Active

**Rehabilitation Medicine** 

Birzon, Lawrence, DC Allied Health Professional

Keenan, Lisa, PhD Allied Health Professional

D. Dual Reappointments (1)

Skalyo, Cynthia, ANP Allied Health Professional

Internal Medicine

Collaborating Physician: Dr. Sidhu

Family Medicine

Collaborating Physician: Dr. Evans

FOR OVERALL ACTION

### PROVISIONAL APPOINTMENT REVIEW, RECOMMENDED

The following members of the Provisional Staff from the previous year period are presented for movement to the Permanent Staff on the date indicated.

#### March 2016 Provisional to Permanent Staff

**Provisional Period Expires** 

(These initial appointments were presented at the March 2015 MEC)

Anesthesiology

Childress-Teng, Shelley, CRNA Allied Health Professional 03/24/2016

**Emergency Medicine** 

Cohen, Elizabeth, MS PA-C Allied Health Professional 03/24/2016

Supervising MD: Dietrich Jehle, MD

**Family Medicine** 

DiStefano, Mary, MS ANP Allied Health Professional 03/24/2016

Collaborating MD: Stephen Evans, MD

McVey, JoAnne, MSN NP Allied Health Professional 03/24/2016

Collaborating MD: Mohammad Ghazi, MD

**Internal Medicine** 

Farrell, Megan, MD Active Staff 03/24/2016

Luczkiewicz, Debra, L., MD Active Staff 03/24/2016

**Orthopaedic Surgery - Podiatry** 

LaCivita, Michael, D., DPM Active Staff 03/24/2016

**Psychiatry** 

Canzoneri, Joan, NP Allied Health Professional 03/24/2016

Collaborating MD: Victoria Brooks, MD

**Psychiatry - Psychologist** 

Leidenfrost, Corey, Mark, PhD Allied Health Professional 03/24/2016

The future May 2016 Provisional to Permanent Staff list will be compiled for Chief of Service review and endorsement.

FOR OVERALL ACTION

# AUTOMATIC CONCLUSION, Reappointment Expiration, SECOND NOTICE

**Internal Medicine** 

Banas, Michael, MD Courtesy, Refer and Follow Forte, Kenton, MD Active

Hashmi, Yahya, MD Courtesy, Refer and Follow Steinagle, Gordon, DO Courtesy, Refer and Follow

Vaqar, Sarosh, MD Active

**Ophthalmology** 

Armenia, Donald, MD

Surgery

Dobson, Judy, FNP

Courtesy, Refer and Follow

Allied Health Professional

Reappointment Expiration Date: May 31,

FOR INFORMATION

# AUTOMATIC CONCLUSION- REAPPOINTMENT EXPIRATION, FINAL NOTICE

None

#### **OLD BUSINESS**

#### On-line re-appointment application – Status report

- R. Reiford provided an update on the progress made since last report. KH and ECMC continue to meet on a weekly basis to refine the process and liaison with IntelliCred to optimize the functionality of the software. There have been some unanticipated systems limitations and glitches that need work. In order to deliver the best quality service to our credentialed customers, this will delay the implementation date to the 3<sup>rd</sup> quarter of 2016.
- T. Boone reported that the ECMC and KH MDSO teams are working together each month to align upcoming re-appointment dates for practitioners on staff at both facilities in anticipation of the on-line process and the simultaneous re-appointment for both facilities. Although there will be the need to complete each facility privilege form, the re-appointment application itself will only need to be completed once.

#### **Expireables**

There continue to be systems issues with the IntelliCred software. As it puts both organizations at risk, IntelliSoft is being pressed for a solution. The committee was reminded of the regulatory and accreditation requirement that primary source verification be completed BEFORE the expiration of a license, DEA.

#### IM Form

Removal of volume requirements (highlighted) as agreed when AHP forms amended to "suggested volumes"

# LEVEL II PRIVILEGES

#### Chief of Service action:

PROCEDURAL PRIVILEGES			Recommend		If Yes, indicate
	Init/Reap	Physician			any requirements;
	Volume	Request			If No, provide
			YES	NO	details. See p. 7
General internists may provide consultations to other medical and surgical specialists according to their training, experience and current privileges. Such consultations include, but are not limited to preoperative evaluation of surgical patients and differential diagnoses of medical problems.					
NG Tube Insertion with Guide Wire					
Thoracentesis					
Tracheostomy Tube Replacement					
Arthrocentesis					
Lumbar Puncture					
Paracentesis					

#### **Temporary Privileges**

Refer to the attached tracker of Urgent and Temporary Privilege issuance and expiration.

FOR OVERALL ACTION

#### NEW BUSINESS

#### **Dues/Fee Structure**

=One of the limitations of the IntelliCred on-line application software is the inability to imbed a link for credit card payment. The only solution is to direct the practitioner to another site. As the intent is to make the process as much of one stop shopping as possible, S. Ksiazek asked the Credentials Committee to endorse to the officers of the Medical-Dental Staff the elimination of the fee at re-appointment and apportion that amount (\$100) with \$50 increase to the annual dues. The committee unanimously endorsed the recommendation.

=The committee was referred to the list of seven practitioners out of the twenty-eight scheduled for re-appointment this month, who failed to submit the paperwork despite 3 paper mailings (the last sent certified return receipt) and numerous emails and telephone calls. One local hospital fines the applicant \$250 if the re-appointment packet is not received by the due date. As the ECMC Medical-Dental Staff Office devotes an inordinate amount of time to the follow up of delinquent applications, S. Ksiazek suggested the committee consider the same. The committee unanimously endorsed the recommendation, which too, will be taken to the ECMC medical-dental staff officers and subsequently to the Medical Executive Committee.

#### **Risk Management - Liability Insurance**

Written guidance for the COIs of employed medical-dental staff is anticipated for the April Credentials meeting per the Risk Management Department.

#### Re-appointment Form

Most practitioners do not submit CME, nor do they fill in the space allocated to the number of hours completed:

EITHER INDICATE THE NUMBER OF CME HOURS EARNED \_\_\_\_\_\_ OR LIST ALL CME ACTIVITY ON A SEPARATE ATTACHMENT

ECMC policy is self-attestation with the potential for an audit. The Medical-Dental Staff Office requests the committee recommend removing the space for CE hours, as it is not required per policy and it suggests an omission that could present an issue at audit or survey. The committee endorsed removing the line as described and replacing with a reminder that the signature at the end of the application attests to the required CE being completed:

NOTE: YOUR SIGNATURE AT THE END OF THIS APPLICATION SERVES AS ATTESTATION OF THE COMPLETION OF THE REQUIRED CONTINUING EDUCATION DESIGNATED ABOVE.

FOR OVERALL ACTION

### **OPEN ISSUES**

The MDSO continues to work with the hospitalist group to obtain DOJ COC statements from all providers.

FOR INFORMATION

### **OTHER BUSINESS**

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

# **<u>FPPE</u>** (Focused Professional Practice Evaluation) (6)

Update: the MDSO has reached out to hospitalist group to offer support given the volume.

Dermatology (1 MD with UB/ECMC Residency record on file in department records)

Orthopaedic Surgery (1 PA newly requested privileges)

Psychiatry (2 MD's newly requested privileges and 1 NP newly requested privileges)

Teleradiology (1 MD All off reads verified by an on-site radiologist)

# **OPPE** (Ongoing Professional Practice Evaluation)

Ophthalmology- 1 OB/GYN- 1 Lab- 1 Dermatology- 4 Chemical Dependency- 9 Anesthesia- 25

**FOR** 

#### **INFORMATION**

### ADJOURNMENT

With no other business, a motion to adjourn was received and carried with adjournment at 3:40 PM.

Respectfully submitted,

Makha

Yogesh Bakhai, MD

Interim Chairman, Credentials Committee

Att.