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.
  - Transitional Care Unit (TCU) had a successful survey.
  - ECMC had a joint commission visit for our Detox program. The exit interview was very complimentary of the services that ECMC provides.
  - 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.
  - An “app” for point of care rounding will be launched in the near future to inventory our rounding efforts.
  - Increased focus on training which includes Behavioral Health Empathy Training, crisis management training as well as team building and respect in the workforce.

- Culture
  - 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.
  - “Team Building” and “Respect in the Workplace” sessions are being scheduled for April for revenue cycle and outpatient dialysis.
  - Starting a leadership and patient experience training at Terrace View.

- Operations
  - Cohorting patients – 80%.
  - Grand opening of the new Orthopedic Center on April 7th.
  - All staff hired for opening of 16th surgical suite.
  - NYS electronic prescription mandate has started and is prepared for it.
  - 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.
  - 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 6th 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.
  - 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.
  - Quarterly ACS meetings led by Dr. Saurin Popat.
  - 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.
  - 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 5:35 P.M.

Douglas H. Baker
Corporation Secretary
CREDSLALS COMMITTEE MEETING

Committee Members Present:
Yogesh Bakhai, MD, Interim Chair  
Mark LiVecchi, DMD MD MBA  
Jonathan Marshall, DO  
Brian Murray, MD  
Mandip Panesar, MD  
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  
   James Miller, PA  
   Kamoh, Amandip, DDS  
   Lynch, Lisa, PSYNP  
   Internal Medicine  
   Internal Medicine  
   Oral & Maxillofacial Surgery  
   Psychiatry  
   02/25/2016  
   02/16/2016  
   03/01/2016  
   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
PRIVILEGE ADDITION/REVISION, RECOMMENDED – COMMENTS AS INDICATED

**Dentistry**
Balon, Jennifer, DDS  
- ADMITTING PRIVILEGES Ambulatory Surgery/Non-ICU Beds only  
Kapral, Elizabeth, DDS  
- 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  
- Anoscopy

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

**Pathology**
Higgs, Donald, MD  
- Ophthalmic Pathology

FOR OVERALL ACTION

APPOINTMENT APPLICATIONS, RECOMMENDED– COMMENTS AS INDICATED

A. Initial Appointment Review (7)
**Internal Medicine/Hospitalist Service**
Asiedu, Stephen, MD  
Laskowski, Stephen, DO  
**Orthopaedic Surgery**
Carrel, Jeffrey, DPM  
Goldstein, Kenneth, DPM

**Radiology/Teleradiology**
Khanna, Arati, MD  
Kommana, Harisha, MD  
Patterson, Stacey, MD

FOR OVERALL ACTION

B. Dual Appointments (0)

FOR OVERALL ACTION

REAPPOINTMENT APPLICATIONS, RECOMMENDED – COMMENTS AS INDICATED

C. Reappointment Review (20)
**Dermatology**
Helm, Thomas, MD  
**Emergency Medicine**
Krolczyk, Steven, PA  
**Supervising Physician: Dr. Manka**
Manka, Michael, MD  
**Family Medicine**
Hennessy, Kevin, ANP  
**Collaborating Physician: Dr. Evans**

**Internal Medicine**
Braunscheidel, Denise, NP  
**Collaborating Physician: Dr. Zizzi Jr.**
Corbelli, Richard, MD  
Dauer, Patricia, FNP  
**Collaborating Physician: Dr. Lawler**
Orlick, Arthur, MD

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

(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
Erie County Medical Center Corporation

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

<table>
<thead>
<tr>
<th>Internal Medicine</th>
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<tbody>
<tr>
<td>Banas, Michael, MD</td>
<td>Courtesy, Refer and Follow</td>
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<tr>
<td>Forte, Kenton, MD</td>
<td>Active</td>
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<tr>
<td>Hashmi, Yahya, MD</td>
<td>Courtesy, Refer and Follow</td>
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<tr>
<td>Steinagle, Gordon, DO</td>
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<tr>
<td>Vaqar, Sarosh, MD</td>
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<tr>
<th>Ophthalmology</th>
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<tbody>
<tr>
<td>Armenia, Donald, MD</td>
<td>Courtesy, Refer and Follow</td>
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</table>

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<tr>
<th>Surgery</th>
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<tbody>
<tr>
<td>Dobson, Judy, FNP</td>
<td>Allied Health Professional</td>
</tr>
</tbody>
</table>

Reappointment Expiration Date: May 31, 2016

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 3rd 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

<table>
<thead>
<tr>
<th>PROCEDURAL PRIVILEGES</th>
<th>Init/Reap Volume</th>
<th>Physician Request</th>
<th>Recommend</th>
<th>If Yes, indicate any requirements; if No, provide details. See p. 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
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<td>NG Tube Insertion with Guide Wire</td>
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<td>Thoracentesis</td>
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<td>Tracheostomy Tube Replacement</td>
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<tr>
<td>Paracentesis</td>
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Temporary Privileges
Refer to the attached tracker of Urgent and Temporary Privilege issuance and expiration.

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.

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:

**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)

**FPPE (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,

Yogesh Bakhai, MD
Interim Chairman, Credentials Committee
Att.