

MINUTES OF THE REGULAR MEETING
OF THE BOARD OF DIRECTORS
TUESDAY, JANUARY 26, 2016
STAFF DINING ROOM

Voting Board Members Present:	Bishop Michael Badger Douglas H. Baker Ronald Bennett Ronald Chapin Kevin E. Cichocki, D.C. Jonathan Dandes Darby Fishkin	Kathleen Grimm, M.D. Sharon L. Hanson Michael Hoffert Kevin M. Hogan, Esq Anthony Iacono Thomas P. Malecki, CPA Michael A. Seaman
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Non-Voting Board Representatives Present:	James Lawicki Kevin Prantikoff, M.D.	Thomas Quatroche
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Also Present:	Stephanie Blair, RN Donna Brown Joseph Cirillo Samuel Cloud, D.O. A.J. Colucci, III, Esq. Janique Curry Jim Dolina Leslie Feidt Kelley Finucane Stephen Gary Susan Gonzalez	Al Hammonds Julia Culkin-Jacobia Jarrod Johnson Chris Koenig Susan Ksiazek Charlene Ludlow Nadine Mund Brian Murray Benjamin Stanford RN James Turner Stephen Watson Karen Ziemianski
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I. CALL TO ORDER

Chair, Sharon L. Hanson called the meeting to order at 5:05 P.M.

II. APPROVAL OF MINUTES OF DECEMBER 15, 2015 REGULAR BOARD MEETING.

Moved by Jonathan Dandes and seconded by Kevin Hogan.

Motion approved unanimously.

III. ACTION ITEMS

A. Approval of Appointments/Reappointments Chief of Service and Associate Chief of Service.

Moved by Jonathan Dandes and seconded by Anthony Iacono.

Motion Approved Unanimously.

B. Approval of January 7, 2016 Medical/Dental Staff Appointments/Re-Appointments.

Moved by Michael Hoffert and seconded by Anthony Iacono.

Motion Approved Unanimously.

IV. BOARD COMMITTEE REPORTS

All reports except that of the Performance Improvement Committee are received and filed in the January 26, 2016 Board book.

V. REPORTS FROM STANDING COMMITTEES:

A. Quality Improvement: Brian Murray, M.D.

- Jeffrey Jordan, MD, Director of the Hyperbaric Chamber Service provided an overview of wound care and hyperbaric medicine at ECMC. Primary focus is clinic efficiency with reduced patient wait times, reduced overtime, and improved staff morale.
- The Department of Rehabilitation Medicine has experienced growth in both inpatient and outpatient areas. Commission of Accreditation of Rehabilitation Facilities (CARF) was achieved.
- Patient Experience has shown remarkable improvement. Survey results will continue to be monitored and improvement initiatives will be closely monitored to evaluate results. Support and monitoring of departmental projects and initiatives will continue.
- Behavioral Health under the direction of Michael Cummings, M.D. presented on improvement initiatives currently underway. The coming year will focus on improving the safety of the environment for the Behavioral Health patient.

B. Chief Financial Officer: Stephen Gary

A summary of the financial results through December 31, 2015 and a Quarterly Financial Statement and projected statement of Yearly Cash Flows are attached in the Board Book for review.

VI. RECESS TO EXECUTIVE SESSION – MATTERS MADE CONFIDENTIAL BY LAW

Moved by Kevin Cichocki, D.C. and seconded by Anthony Iacono to enter into Executive Session at 5:25 p.m. to consider matters made confidential by law, including certain personnel-related matters, strategic investments, and business plans.

Motion approved unanimously.

VII. RECONVENE IN OPEN SESSION

Moved by Michael Seaman and seconded by Michael Hoffert to reconvene in Open Session at 6:55p.m. No action was taken in Executive Session.

Motion approved unanimously

ACTION ITEMS:

A. Resolution Appointing Thomas J. Quatroche, Jr. as President and CEO.

Moved by Michael Seaman and seconded by Jonathan Dandes.

Motion Approved Unanimously.

B. Resolution Authorizing the Corporation to conduct a national search for Qualified Candidates to Serve as Chief Operating Officer.

Moved by Anthony Iacono and seconded by Michael Hoffert.

Motion Approved Unanimously.

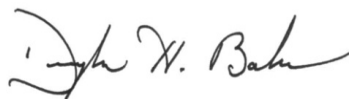
C. Resolution Extending the Period of Board Certification for Two Physicians.

Moved by Jonathan Dandes and seconded by Kevin Cichocki, D.C.

Motion Approved Unanimously.

VIII. ADJOURNMENT

Moved by Anthony Iacono and seconded by Kevin Cichocki, D.C. to adjourn the Board of Directors meeting at 7:00 p.m.



Douglas H. Baker
Corporation Secretary

CMO Memorandum

To: BOARD OF DIRECTORS

CC: MEDICAL EXECUTIVE COMMITTEE

From: BRIAN M. MURRAY, MD, CMO

Date: January 25, 2016

Re: APPOINTMENTS/REAPPOINTMENTS CHIEF OF SERVICE AND ASSOCIATE CHIEF OF SERVICE
APPOINTMENT OF CHIEF OF SERVICE AND ASSOCIATE CHIEF OF SERVICE

Each Chief of Service shall be and remain physician members in good standing of the Active Staff, shall have demonstrated ability in at least one of the clinical areas covered by the department, and shall be willing and able to faithfully discharge the functions of his/her office. Each Chief of Service shall be certified by an appropriate specialty board, or affirmatively establish comparable competence through the credentialing process.

1. **Appointment:** Each Chief of Service and Associate Chief of Service shall be appointed by the Board for a one to three (1-3) year term.

2. **Term of Office:** The Chief of Service and Associate Chief of Service shall serve the appointment term defined by the Board and be eligible to succeed himself.

3. **Removal:** Removal of a Chief of Service from office may be made by the Board acting upon its own recommendation or a petition signed by fifty percent (50%) of the Active department members with ratification by the Medical Executive Committee and the Board as outlined in Section 4.1.6 for Removal of Medical Staff Officers within the Medical/Dental Staff Bylaws.

4. **Vacancy:** Upon a vacancy in the office of Chief of Service, the Associate or Assistant Director, or division chief of the department shall become Chief of Service or other such practitioner named by the Board until a successor is named by the Board.

The following physician members are currently members in good standing of our Active Medical/Dental Staff and are being recommended for the position of Chief of Service within their departments:

DEPARTMENT NAME TERM APPT REVIEW DATE

Anesthesiology Erik Jensen, MD 3 YRS JUN 2014 DEC 2018

Cardiothoracic Surgery Mark Jajkowski, MD 3 YRS JAN 2014 DEC 2016

Dentistry Maureen Sullivan-Nasca, DDS 3 YRS JAN 2014 DEC 2018

Dermatology Animesh Sinha, MD 1 YR JUL 2014 DEC 2016

Emergency Medicine Michael Manka, MD 3 YRS JAN 2013 DEC 2016

Family Medicine Andrea Manyon, MD 3 YRS NOV 2014 DEC 2018

Internal Medicine Joseph Izzo, Jr., MD 3 YRS JAN 2013 DEC 2016

Laboratory Medicine Daniel Amsterdam, PhD 3 YRS JAN 2013 DEC 2016

Neurology Richard Ferguson, MD 3 YRS JAN 2013 DEC 2016

Neurosurgery Gregory Castiglia, MD 1 YR JAN 2015 DEC 2016

Obstetrics & Gynecology Vanessa Barnabei, MD 3 YRS JAN 2013 DEC 2016

Ophthalmology James Reidy, MD 3 YRS JAN 2013 DEC 2016

Oral & Maxillofacial Surgery Richard Hall, DDS, PhD, MD 3 YRS JAN 2013 DEC 2016

Orthopaedic Surgery Philip Stegemann, MD 3 YRS JAN 2013 DEC 2016

Otolaryngology William Belles, MD 3 YRS JAN 2013 DEC 2016

Pathology Margaret Brandwein-Gensler, MD 1 YR MAY 2015 DEC 2016

Plastics & Reconstructive

Surgery

Thom Loree, MD 3 YRS JAN 2013 DEC 2016

Jan 2016, Rev.

DEPARTMENT NAME TERM APPT REVIEW DATE

Psychiatry Yogesh Bakhai, MD 3 YRS JAN 2013 DEC 2016

Radiology Jonathan Marshall, DO 1 YR AUG 2015 DEC 2016

Rehabilitation Medicine

Mark LiVecchi, MD 3 YRS JAN 2013 DEC 2016

Surgery William Flynn, MD 3 YRS JAN 2013 DEC 2016

Urology Kevin Pranikoff, MD 3 YRS JAN 2014 DEC 2016

The following physician members are currently members in good standing of our Active Medical/Dental Staff and are being recommended for the position of ASSOCIATE Chief of Service within their departments:

DEPARTMENT NAME TERM APPT

Anesthesia Scott Plotkin, MD 1 BY CHIEF OF SERVICE

Chemical Dependency Mohammadreza Azadfard, MD 1 BY CHIEF OF SERVICE

Emergency Services Jennifer Pugh, MD 1 BY CHIEF OF SERVICE

Internal Medicine Sergio Anillo, MD 1 BY CHIEF OF SERVICE

Internal Medicine Vacant 1 BY CHIEF OF SERVICE

Internal Medicine, Specialty Med. Rocco Venuto, MD 1 BY CHIEF OF SERVICE

Neurosurgery Vacant BY CHIEF OF SERVICE

Psychiatry Dori Marshall, MD 1 BY CHIEF OF SERVICE

Radiology Keyur Shah, MD 1 BY CHIEF OF SERVICE

(Bold depicts new appointments)

CREDENTIALS COMMITTEE MEETING
January 7, 2016

Committee Members Present:

Yogesh D. Bakhai, MD
Mark LiVecchi, DMD MD MBA
Richard E. Hall, DDS PhD MD FACS
Susan Ksiazek, RPh, Director of Medical Staff Quality and Education
Brian M. Murray, MD (ex-officio)
Mandip Panesar, MS MD

Medical-Dental Staff Office and Administrative Members Present:

Tara Boone, Medical-Dental Staff Services Coordinator
Judith Fenski, Credentialing Specialist
Riley Reiford, Medical-Dental Staff Office Systems Coordinator
Kerry Lock, Credentialing Specialist

CALL TO ORDER

The meeting was called to order at 3 PM by Susan Ksiazek. The proceedings from the previous meeting of December 1, 2015 were reviewed and accepted with one update. Per the Chief of Service for the department of Psychiatry, the resignation in good standing for Dr. Marcelle Mostert has been processed and so is final. The physician has the option of applying for membership and privileges if she should desire to return to the staff.

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 –

Family Medicine

Valenti, Sherri, ANP 11/20/2015

Collaborating Physician: Stephen J. Evans, MD

Internal Medicine

Agro, Chanda, FNP 01/22/2016

Collaborating Physician: Wajdy Hailoo, MD

Antalek, Matthew, DO 12/15/2015

Hare, Katie, PA-C 09/01/2015

Supervising Physician: Riffat Sadiq, MD

Radiology

Lieberman, Jeffrey, MD 12/28/2015

S'Doia, Samuel, MD 12/23/2015

FOR INFORMATION

CHANGE IN STAFF CATEGORY

Internal Medicine/Hospitalist

Ebling, Nancy, DO *Active to Courtesy Refer and Follow*
Kothari, Nirmal, MD *Active to Courtesy Refer and Follow*
Parikh, Neil, MD *Active to Courtesy Refer and Follow*

Internal Medicine/Palliative Care

Romanowski, Roslyn, MD *Active to Courtesy Refer and Follow*

Obstetrics and Gynecology

Swenson, Krista, MD *Active to Courtesy Refer and Follow*

Urology

Sufrin, Gerald, MD *Active to Courtesy Refer and Follow*

**FOR OVERALL
ACTION**

DEPARTMENT CHANGE or ADDITION

Thoracic/Cardiovascular Surgery

Bell-Thomson, John, MD Add Department of Surgery

Family Medicine

Kieliszek, Karen, DNP Add Department of Internal Medicine
FPPE to be coordinated

**FOR OVERALL
ACTION**

**CHANGE OR ADDITION OF COLLABORATING/SUPERVISING
ATTENDING**

Internal Medicine

Kieliszek, Karen, DNP
Collaborating Physician: Howard Sperry, MD

**FOR
INFORMATION**

PRIVILEGE ADDITION/REVISION, recommended – comments as indicated

Internal Medicine

Venuto, Lisa, PA-C Allied Health Professional

Supervising Physician: James Farry, MD

-Hemodialysis Management Orders

-Peritoneal Dialysis Orders

**Waive FPPE-New privileges a function of further delineation of privilege form, not new activity*

Radiology

Jonathan Marshall, DO

- TIPS

**New procedure, no other privileged provider in house. FPPE satisfied with external source verification of volume and competency.*

Thoracic/Cardiovascular Surgery

Gambino, Robert, PA-C*

-Maintenance of Open Airway in Non-intubated, Unconscious Patient with Ventilation by a Bag
or Mask

-Chest Tube Placement

**No/low volume practitioner- on staff for CT coverage. Clinical competency for requested privileges attested to by supervising physician*

FOR OVERALL ACTION

PRIVILEGE WITHDRAWAL

Thoracic/Cardiovascular Surgery

Gambino, Robert, PA-C

-Tracheal/bronchial aspiration via flexible bronchoscopy on intubates patients in the ICU setting

Zynda, Marcella, ANP

-Peripheral Vein Cutdown

FOR OVERALL ACTION

APPOINTMENT APPLICATIONS, recommended– comments as indicated

Initial Appointment Review (13)

Internal Medicine/Hospitalists

Ahmed, Shaikh, MD

Active-**Locum**

Albert, S. Jane, FNP

Allied Health Professional- **Locum**

Collaborating Physician: Muhammad Achakzai, MD

Ankomah-Vabi, Mercedes, FNP

Allied Health Professional- **FT**

Collaborating Physician: Shaun Bath, MD

Masood, Qazi, MD

Active-**Locum**

Rashed, Abdulqwai, MD

Active- **IC**

Singh, Braj, MD

Active-**Locum**

Orthopaedic Surgery

Castonguay, Andrea, PA-C

Allied Health Professional

Supervising Physician: William Wind, MD

McKenney, Matthew, PA-C

Allied Health Professional

Supervising Physician: Geoffrey Bernas, MD

Radiology/Teleradiology

Awwad, Reem, MD

Active

Davis, Steven, MD

Active

Dunst, Diane, MD

Active

Paydar, Amir, MD

Active

Rehabilitation Medicine/Chiropractic

Illes- Rector, Jennifer, DC

Allied Health Professional

FOR OVERALL ACTION

Dual Appointments (0)

REAPPOINTMENT APPLICATIONS, recommended – comments as indicated

B. Reappointment Review (32)

Anesthesiology

Jensen, Erik, MD	Active
Nice, Kimberly, CRNA	Allied Health Professional
Plotkin, Scott, MD	Active
Sacks, Andrew, MD	Active
Sands, Robert, MD	Active
Schuder, Robert, MD	Active
Dentistry	
Frustino, Jennifer, DDS	Active
Emergency Medicine	
Cloud, Samuel, DO	Active
Family Medicine	
Binis, Karen, ANP	Allied Health Professional
<i>Collaborating Physician: Stephen Evans, MD</i>	
Blondell, Richard, MD	Active
Dreyer, Janet, ANP	Allied Health Professional
<i>Collaborating Physician: Stephen Evans, MD</i>	
Seib, Beverly, ANP	Allied Health Professional
<i>Collaborating Physician: Stephen Evans, MD</i>	
Internal Medicine	
Dashkoff, Neil, MD	Active
Gundroo, Aijaz, MD	Active
Hom, Jennie, MD	Active
Kim, Chee Hoon, MD	Active
Lee, Claudia, MD	Courtesy, Refer & Follow
Valencourt, Janice, ANP	Allied Health Professional
<i>Collaborating Physician: Riffat Sadiq, MD</i>	
Venuto, Lisa, PA	Allied Health Professional
<i>Supervising Physician: James Farry, MD</i>	
Laboratory Medicine	
Amsterdam, Daniel, PhD	Active
Orthopaedic Surgery	
Grant, Michael, MD	Courtesy, Refer & Follow
Otolaryngology	
Belles, William, MD	Active
Psychiatry & Behavioral Medicine	
Dubovsky, Steven, MD	Active
Fisher, Mark, MD	Active
Nagra, Balwant, MD	Active
Schaeffer, Rebecca, MD	Active
Radiology	
Ciabattoni, Steven, MD	Active
Rehabilitation Medicine	
Grande, Stephen, DC	Allied Health Professional
Welch, Mary, MD	Active
Surgery	
McCallion, Eamon, PA-C	Allied Health Professional
<i>Supervising Physician: James Lukan, MD</i>	

Thoracic/Cardiovascular Surgery

Gambino, Robert, PA-C

Allied Health Professional

Supervising Physician/First Assist: Ashraf Hashmat, MD

Zynda, Marcella, ANP

Allied Health Professional

Collaborating Physician: Mark Jajkowski, MD

FOR OVERALL ACTION

Dual Reappointments (0)

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.

JANUARY 2016 Provisional to Permanent Staff **Provisional Period Expires**

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

Family Medicine

Schmidt, Jessica, PA-C Allied Health Professional 01/27/2016

Supervising Physician: Antonia Redhead, MD

Internal Medicine

Chubineh, Saman, Bahram, MD Active Staff 01/27/2016

Gbadamosi, Fatai, Adesina, MD Active Staff 01/27/2016

Wanser, Nicole, M., NP Allied Health Professional 01/27/2016

Collaborating Physician: Riffat Sadiq, MD

Neurosurgery

Guzzetta, Lindsay, M., PA-C Allied Health Professional 01/27/2016

Supervising Physician: Gregory Castiglia, MD

Oral and Maxillofacial Surgery

Rifkind, Jacob, Bernard, DDS MD Active Staff 01/27/2016

Psychiatry

Frank, Tawny, Ann, MD Active Staff 01/27/2016

Rehabilitation Medicine

Tague, Dara, Etel, ANP Allied Health Professional 01/27/2016

Collaborating Physician: Mark Livecchi, MD

The future March 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

None

AUTOMATIC CONCLUSION- Reappointment Expiration, FINAL NOTICE

Internal Medicine

Bender, Cindrea, MD Active Staff 01/31/2016

Knight, Timothy, PA-C Allied Health Professional 01/31/2016

Cheryl Rejewski, ANP Allied Health Professional 01/31/2016

Stansberry, Andrew, PA-C Allied Health Professional 01/31/2016

Reappointment Expiration Date: as indicated above
Planned Credentials Committee Meeting: January 5, 2016
Planned MEC Action date: January 25, 2016
Planned Board of Directors Action Date: January 26, 2016

FOR OVERALL ACTION

OLD BUSINESS

Quality Control

Routine quality control checks within the Medical-Dental Staff Office identified a practitioner within the Oral MaxilloFacial Surgery Department, appointed to the ECMC Medical-Dental Staff in December of 2011, and did not achieve board certification within the time frame of 4 years specified within the bylaws.

The department Chief of Service provided additional detail to the committee, along with his recommendation that a 4 year extension to obtain board certification be requested of the Medical Executive Committee. This will be extracted from the Credentials Committee minutes for discussion at the January MEC meeting.

It was also noted that this practitioner has no volume at ECMC, but his continued membership is warranted to provide clinical coverage to his partner, an active member of the ECMC medical-dental staff. This shall be noted in the practitioner’s PPE file.

Psychiatry Privilege Form

The committee reviewed the changes proposed by the Credentials Chair (in red) with Chief of Service. The consensus changes are denoted in blue.

DEPARTMENT OF PSYCHIATRY

Clinical Privilege Delineation Form

LEVEL II (CORE) PRIVILEGES

Must show appropriate training or certified internally

- | | | | |
|--------------------------|--------------------------|--|--|
| <input type="checkbox"/> | <input type="checkbox"/> | ECT | * |
| <input type="checkbox"/> | <input type="checkbox"/> | Biofeedback | * See department criteria for these three procedures, page 5 |
| <input type="checkbox"/> | <input type="checkbox"/> | Hypnosis | * |
| <input type="checkbox"/> | <input type="checkbox"/> | Suboxone treatment | |
| <input type="checkbox"/> | <input type="checkbox"/> | Methodone maintenance treatment | |
| <input type="checkbox"/> | <input type="checkbox"/> | Management of complex substance dependence and withdrawal, intoxication | |
| <input type="checkbox"/> | <input type="checkbox"/> | Psychological testing, e.g. IQ/Personality/Neuropsych | |

Medical-Dental Staff Office use: _____ “X” Designation on DEA certificate verified: Date
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CREREDENTIALING CRITERIA FOR ECT THERAPY

1. ECMCC Psychiatric staff privileges to include a valid New York State license and Board eligibility in Psychiatry. **Redundant not needed; DELETE**
2. Documented ECT training during Psychiatric Residency and/or completion of an ECT credentialing course. **Not often provided; MAINTAIN AND ENFORCE**
3. Documentation of ten (10) supervised ECT procedures at ECMCC. (The supervision will be done by a psychiatrist previously ECT privileged at ECMCC. The supervision will include assessment of patient selection and follow-up care.) **Could be retained; MAINTAIN**
4. Participation in ECT-related morbidity and mortality conferences when indicated. **Not enforced or provided; DELETE**

RE-CREDENTIALING CRITERIA FOR ECT THERAPY

1. Reapplication for ECT privileges every two years. **Not logical; DELETE**
2. At least twenty (20) ECT procedures performed within the two years prior to repriviliging at ECMCC. **? Sufficient ECMC total volume?**
Info not submitted; MAINTAIN
3. Ten (10) dedicated CME hours to ECT-related topics within the two years preceding repriviliging. **CME by self attestation on application; DELETE**

CREREDENTIALING CRITERIA (applies to Family Medicine as well) FOR CHEMICAL DEPENDENCE / SUBSTANCE WITHDRAWAL PRIVILEGES

Committee suggests deleting all three

1. ECMCC Department of Psychiatry staff privileges to include a valid New York State license. **Redundant; DELETE**
2. Documented Substance Withdrawal and Chemical Dependence training during Psychiatric residency and/or completion of equivalent Basic or Advanced Substance Abuse Management training. **DELETE**
3. Participation in Chemical Dependence - related peer review conferences. **DELETE**
Criterion 1 is redundant; number 2 is often considered a core training element and not enforced or encouraged at department review; number 3 is cited as covered within the CME attestation in the application process.

The proposed deletions were also reviewed with the Chief of Chemical Dependency for Family Medicine, and with agreement, will be removed from the Family Medicine form as well.

CREREDENTIALING CRITERIA FOR HYPNOTHERAPY

Committee suggest dropping the privilege offering or revising criteria

Policy:

Credentialing Criteria for Hypnotherapy

1. Training in hypnosis (either offered by APA or other organization); **MAINTAIN**
2. Performed hypnosis under supervision on ten different patients; **DELETE**
3. Participation in peer review expected; **DELETE**

CREDENTIALING CRITERIA FOR BIOFEEDBACK

Committee suggest dropping the privilege offering or revising criteria

Policy:

Credentialing Criteria for Biofeedback

1. Formal training in peripheral biofeedback and neurofeedback (approved by APA or similar organization); **MAINTAIN**
2. Performed at least five procedures on different patients; **DELETE**
3. Candidate is expected to participate in peer review for biofeedback; **DELETE**

On-line re-appointment application – Status report

The committee was given an update of the progress made on this initiative since last report. The on-line re-appointment application was tested by one KH physician, who provided comprehensive feedback on the need to make the product more user friendly to navigate. These recommendations were sent to the working group to address. Once revisions are made, the product will be tested by additional KH and ECMC physicians.

The committee also reviewed the proposed harmonization of the KH and ECMC self disclosure pages of the application. Consensus was achieved on all but the substance abuse question. Susan Ksiazek will communicate back to KH suggested verbiage to strengthen the scope of screening for both illegal drug and alcohol abuse. Once the final draft is completed, they will be reviewed by the organizations' respective legal counsels.

Temporary Privileges

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

**FOR OVERALL
ACTION**

NEW BUSINESS

Administrative

The committee addressed the retirement of the Credentials Chair effective December 2015. Until a new chair is named, Susan Ksiazek will take on additional administrative duties for the committee and Dr. Yogesh Bakhai has volunteered to serve as Interim Chair. We continue to recruit for additional committee members, with the new hospitalist group foreseeing the potential ability to designate a member by the summer. Dr. Richard Hall has volunteered to assist Susan Ksiazek with our Joint Commission readiness and survey this summer.

In order to ensure regular administrative physician attendance at the Credentials Committee meetings, the schedule will be amended for 2016 to the first Thursday of the month. Susan Ksiazek expressed appreciation for the assistance and support offered by the entire Credentials Committee during this transition.

The committee reviewed the newest Associate Chief of Service appointments:
Dr. Dori Marshall, - Psychiatry

Dr. Jennifer Pugh, - Emergency Medicine

Dr. K. Shah - Radiology

and confirmed for the Medical-Dental Staff Office that if there are time sensitive privileging/appointment documents and the chief of service is not available, the associate chief does have the authority to sign on behalf of the department. Every attempt should be made to have credentialing documents signed by the Chief of Service.

Board Certification

The committee was informed of a practitioner whose board certification has expired. The Chief of Service had been notified to assist with a plan of remediation.

It was determined by the committee that the Chief of Service will request on behalf of the practitioner a one time four year grace period from the Medical Executive Committee as defined in the Bylaws:

....In the event that the appointee has failed to achieve board certification as outlined in Section 2.2.1.6 of these medical-dental staff bylaws or has failed to maintain such board certification, the appointee will be granted a onetime 4 year grace period to remediate. The appointee will be notified of such in writing by the Chair of the Credentials Committee and the President of the Medical-Dental Staff....

Expireables

Susan Ksiazek reviewed for the committee issues with the credentialing software identified by the Medical-Dental Staff Office that led to expireable documents not being flagged as the due date approached, thus impairing the ability of the Medical-Dental Staff Office to perform its due diligence.

With the assistance of our new IT resource, the expireable reports have been corrected with the vendor. The Medical-Dental Staff Office will resume its past practice of notifying the Chief of Service, CMO, and for midlevels, the collaborating/supervising physician, 7 days before the expiration of key expireables such as license, DEA and liability insurance. Discretion will be exercised for notification regarding other expireables if contact with the individual provider is not sufficient to result in timely remediation.

OPMC Notification

The committee discussed the recent OPMC Consent Order involving a member of the Medical-Dental Staff. The Chief of Service has been in contact with the practitioner and has requested that the practitioner notify the Chief Medical Officer as defined in the Bylaws. As well, the Chief of Service is asked to provide to the committee the plan for meeting the monitoring requirements as defined in the consent order.

The applicable sections of the Bylaws and Credentials Procedures were reviewed. The committee recommended that the Chief of Service address the matter in the Executive session of the January medical Executive Committee meeting.

Risk Management - Liability Insurance

The ECMC Risk Manager has advised that she will no longer be signing off on all COI's. The Medical -Dental Staff Office will need to alert her if any physician policy that does not contain the minimum limits or varies from the standard.

Ann Victor Lazarus attended the meeting to review the proposed revised process for employed practitioner COIs. A question was raised regarding addresses on non-employed practitioner COIs. Given the complexity and changing rules, the Credentials Committee requested that the guidance of Risk Management be submitted in writing for reference.

Copies of Privileges from other Affiliations

The committee entertained a recent question from a Chief of Service regarding the potentials of collecting privileges at other institutions in a new applicant packet. The committee concurred that this is not a standard of practice in the credentialing industry and the return on investment would be minimal.

The committee recommended that ECMC continue the practice of:

- 1) Using education, training and experience listed in application to help determine scope of privileges
- 2) Having the Chiefs of service exercise the latitude defined in policy to interview applicants
- 3) When there is a question, ask the applicant to supply copies of privileges held at other affiliations

Anesthesiology Privilege Form

At the request of the Chief of Service, the physician Anesthesiology forms will be amended to delineate a separate form for those exclusively engaged in Pain Management and to delete TEE and ICU privileges from the current form. These recommendations are included in the minutes for consideration by the Medical Executive Committee and approval of the Board of Directors.

Family Request

The committee was informed of a family request for Acupuncture for brain stimulation of a ventilator dependent head injury patient. As ECMC does not provide these services, the notification of the Department of Health and plan to address under compassionate care were discussed by the committee. The matter is being coordinated through the offices of the Chief Medical and Patient Safety Officers and Risk Management.

**FOR OVERALL
ACTION**

OPEN ISSUES

- FPPE for new surgery privileges – received. No volume to date; FPPE must remain open.
- Pediatric Hemodialysis Policies and Procedures – remove from agenda upon receipt of ECMC Hemodialysis Medical Director
- Case Volumes on Physician Forms – no update
- Follow up on hospitalist midlevel ICU training – in progress; continue tracking
- Follow up on hospitalist physician DEA with address outside of NY; unclear if MD will be continuing with ECMC
- Letters re: outstanding dues 2015
 - ➔ Received remediation in only 3/8 letters thus far. Due date: 02/02/2016.

**FOR
INFORMATION**

OTHER BUSINESS

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

FPPE (Focused Professional Practice Evaluation)

Internal Medicine (3 MD's with UB/ECMC residency records on file in clinical department, 1 PA satisfied with submission of required cases, 2 NP's privileges are considered core, 1 NP resigned before FPPE could be conducted.)

Radiology (1 MD with UB/ECMC residency records on file in clinical department)

Surgery (1 MD for newly requested privileges)

Teleradiology (2 MD's All off reads verified by an on-site radiologist)

OPPE (Ongoing Professional Practice Evaluation)

2014 Update from the PSO:

Anesthesia- 25

Cardiothoracic Surgery- 14

Dentistry- 14

Emergency Medicine- 33

Family Medicine- 30

Internal Medicine- 189

Laboratory Medicine- 2

Neurology- 9

Neurosurgery- 12

Obstetrics and Gynecology- 9

Ophthalmology- 7

Oral & Maxillofacial Surgery- 21

Orthopaedic Surgery- 42

Otolaryngology- 1

Plastic & Reconstructive Surgery- 6

Psychiatry and Behavioral Medicine- 35

Rehabilitation Medicine- 20

Radiology- 70

Surgery- 42

Urology- 11

2015 Departmental OPPEs, including Low/No volume practitioners and AHPs are in process


FOR

INFORMATION

ADJOURNMENT

With no other business, a motion to adjourn was received and carried with adjournment at 4:50 PM.

Respectfully submitted,



Yogesh Bakhai, MD
Interim Chairman, Credentials Committee

Att.