

ERIE COUNTY MEDICAL CENTER CORPORATION

MINUTES OF THE REGULAR MEETING  
OF THE BOARD OF DIRECTORS

TUESDAY, APRIL 26, 2016

STAFF DINING ROOM

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Voting Board Members Present:	Bishop Michael Badger Douglas H. Baker Ronald Chapin Kevin Cichocki, D.C. Darby Fishkin	Kathleen Grimm, M.D. Sharon L. Hanson Michael Hoffert Thomas P. Malecki, CPA Michael A. Seaman
Voting Board Member Excused:	Ronald Bennett Jonathan Dandes Kevin Hogan	Anthony Iacono Frank Mesiah
Non-Voting Board Representatives Present:	Thomas Quatroche Ph.D. James Lawicki	Kevin Pranikoff, M.D.
Also Present:	Anthony Billittier, M.D. Donna Brown A.J. Colucci, III, Esq. Peter Cutler Leslie Feidt Kelley Finucane Stephen Gary Susan Gonzalez Al Hammonds Julia Jacobia	Jarrold Johnson Susan Ksiazek Michelle Mercer Nadine Mund Brian Murray, M.D. Jennifer Scharf Lorne Steinhart 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.

**II. APPROVAL OF MINUTES OF MARCH 22, 2016 REGULAR MEETING OF THE BOARD OF DIRECTORS.**

Moved by Michael Seaman and seconded by Kevin Cichocki, D.C.

**Motion approved unanimously**

**APPROVAL OF MINUTES OF MARCH 29, 2016 SPECIAL MEETING OF THE BOARD OF DIRECTORS**

Moved by Kevin Cichocki, D.C. and seconded by Michael Hoffert.

**Motion approved unanimously**

**III. BOARD PRESENTATION: PLANT OPERATIONS**

**DOUGLAS FLYNN, ASSOCIATE DIRECTOR**

Doug Flynn provided a comprehensive update on all capital projects currently underway and planned for the future. Mr. Flynn entertained questions from the board members concerning timing, cost and planning.

**BOARD PRESENTATION: MILLENNIUM COLLABORATIVE CARE/DSRIP**

**AL HAMMONDS, EXECUTIVE DIRECTOR**

Al Hammonds provided a DSRIP “year one” report to the ECMC Board of Directors.

Top accomplishments include:

- Millennium Collaborative Care awarded \$243 million
- Created project charters and project work plans
- Successfully submitted all Q1 work streams and project plans for NYS DSRIP
- Developed Enterprise DSRIP Technology Roadmap
- Earned first successful “achievement values” (AVs) from Q2 patient engagement and quarterly reporting submissions
- Implemented SharePoint collaboration system for Millennium project management and governance structures
- Earned second successful AVs from Q3 patient engagement and quarterly reporting submissions; recorded highest total of AVs earned by any PPS (205 out of 206 possible)
- ECMC/Millennium awarded \$90 million supplemental funding
- Capital funding announced; Millennium partners receive \$15 million
- Signed contract with Cerner for HealtheIntent, a population health solution

Millennium Collaborative Care is currently working on several community outreach programs including “Community Conversations” supported by Millennium’s community engagement team.

Ms. Hanson suggested that Al Hammonds put together a summary document for the Board of Directors to reference regarding DSRIP.

**IV. ACTION ITEMS**

A. Approval of the Millennium Collaborative Care Budget

Moved by Kevin Cichocki, D.C. and seconded by Michael Hoffert.

**Motion approved unanimously.**

B. Appointment of the FOIL Records and Appeals Officers.

Moved by Michael Seaman and seconded by Kevin Cichocki, D.C.

**Motion approved unanimously.**

C. Approval of the Board of Directors Public Funds Certified Resolution

Moved by Kevin Cichocki and seconded by Michael Hoffert.

**Motion approved unanimously.**

D. Approval of April 4, 2016 Medical/Dental Staff Appointments/Re-Appointments

Moved by Michael Hoffert and seconded by Kevin Cichocki, D.C.

**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

- Leapfrog score released; ECMC received a B, which is a very good score.
- Received the Women's Choice Award Excellence in Patient Safety.
- Terrace View had its annual survey; received reaccreditation, and received very few findings.
- The TCU was surveyed by CMS and NYSDOH with favorable outcomes
- OMH Is currently surveying and ECMCC has received early feedback that improvements from past surveys have been implemented and are working.
- Patient Detox (Opioid Program) was surveyed by the Joint Commission, received accreditation, and was told by the surveyor that it was one of the best programs he has seen in the country.
- In the process of additional mock surveys to identify areas where we need to improve, in preparation for an additional visit by JCOHA. Later this year.

Patient Experience

- Patient Experience scores continue to rise.
- Working with IT to develop an Intranet Patient Experience Resource tab.
- Patient Experience Week – April 25-29.
- Improvement in Medicaid Transport
- Working with unit managers to lead quarterly lunch-n-learns with nursing teams.

Culture

- Focus groups with teammates to improve our culture.
- May Events:
  - Patient Experience Week
  - Mental Health Week
  - Trauma Awareness Month
  - EMS Week
  - Nurses Week
  - Long Term Care Week
- Food Trucks for employees working the off-shift, which has been a huge success.

Operations

- Orthopedic Clinic Grand Opening in April
- ECMC has once again exceeded the 30% Minority and Women-owned Business Enterprise goal. ECMCC achieved an MWBE spend of 30.28% or \$4,613,451
- Food Service - Morrison Healthcare Services is reorganizing and restructuring its operations.
- Updates to the Smith Auditorium are being underwritten by the ECMC Foundation.
- Developing plans for summer surges in volume to better care for our patients and provide them with the best patient experience.
- Cardiology plan – Buffalo Cardiology is disbanding and ECMCC expects a smooth transition to a new service.

Chief Financial Officer: Stephen Gary

A summary of the financial results through March 31, 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 provided a summary of the presentations at a recent Quality Improvement Committee meeting.

Anesthesia Services – Erik Jensen, MD:

- Dr. Erik Jensen provided an overview of the ASA (American Society of Anesthesiologists) and its axis of severity of illness. It is a simple, but powerful system that is subjective and is being used more and more as a global measure of patient overall acuity.

Orthopedic Services – Philip Stegemann, MD:

- Dr. Philip Stegemann provided an update of the services and performance within the department.
- Average monthly discharges are increasing.
- Orthopaedic surgical site infection rates for 2015 show an impressively low rate with very high volumes.
- New orthopedic clinic renovation was completed in April
- All programs and quality rates will be carefully monitored as volumes continue to increase.
- QAPI plan will be reviewed and monitored to ensure desired results are achieved.

Pharmacy Services – Randy Gerwitz:

- Randy Gerwitz provided an overview of their QAPI plans for 2016.

Chemical Dependency – Reza Azadfard, MD:

- Dr. Azadfard, Medical Director of the Chemical Dependency Program provided an overview of the 2015 Withdrawal and Stabilization Services as well as 2016 goals.
- In 2015, 1,672 patients were admitted to detox. This is a 78% patient increase from the total admissions in 2014.
- Process improvement goals for 2015 in Detox included continuing work on increasing the return rate of patient satisfaction surveys from patients.
- All measures will continue to be monitored closely to ensure safety events are reduced and patient success and satisfaction are increased.

Emergency Services – Michael Manka, MD:

- Dr. Manka, Chief of Service, provided an update, noting a steady increase in volume over a ten (10) year period ( 50,000 in 2006; nearly 70,000 in 2015). The first two months of 2016 continue to show an increase in volume.
- Patient satisfaction scores showing an improvement in doctors, nurses, and overall satisfaction in the department.
- Opiate epidemic is a challenge. ECMC was the first hospital to provide a Narcan take home kit for patients who come in with an overdose.
- Chemical dependency counselors offer all opiate overdose patients an evaluation although about 90% of heroin overdose patients do not want to stay for detox services.

**VII. 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 5:50 P.M. to consider matters made confidential by law, including certain compliance-related matters, strategic investments, and business plans.

**Motion approved unanimously**

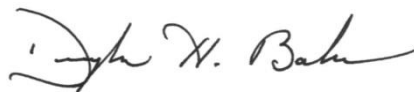
**VIII. RECONVENE IN OPEN SESSION**

Moved by Bishop Michael Badger and seconded by Michael Seaman to reconvene in Open Session at 6:45 P.M. No action was taken by the Board in Executive Session.

**Motion approved unanimously.**

**IX. ADJOURNMENT**

Moved by Michael Seaman and seconded by Michael Hoffert to adjourn the Board of Directors meeting at 6:45 P.M.



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Douglas H. Baker  
Corporation Secretary

**Resolution of the Board of Directors Approving MCC Budget**

Approved April 26, 2016

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WHEREAS, Erie County Medical Center Corporation (the "Corporation") is the lead applicant of the Millennium Collaborative Care ("MCC") Performing Provider System ("PPS") established under New York State's Delivery System Reform Incentive Payment ("DSRIP") program; and

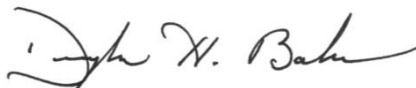
WHEREAS, the Corporation has engaged Millennium PPS Management, LLC, as a central services organization to provide project management, administrative services, and staffing services with respect to MCC PPS pursuant to a Governance Agreement effective September 30, 2015; and

WHEREAS, in accordance with Section 5.2 of the Governance Agreement, the Corporation must approve all MCC PPS annual capital and operating budgets; and

WHEREAS, the MCC Finance Committee has prepared and the MCC Board of Managers has approved MCC's attached budget for DSRIP year two through DSRIP year five (2016-2020), and now seeks the Corporation's approval of the budget.

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

1. Based upon the recommendation of the MCC Finance Committee and Board of Managers, the Corporation hereby ratifies and approves the attached budget.
2. The Corporation and MCC are authorized to do all things necessary and appropriate to implement this resolution.
3. This resolution shall take effect immediately.



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Douglas H. Baker  
Corporation Secretary

**A Resolution of the Board of Directors Replacing the  
FOIL Records and Appeal Officers**

Approved April 26, 2016

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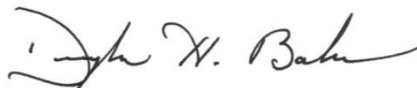
WHEREAS, pursuant to Public Officers Law Section 87, Erie County Medical Center Corporation (the "Corporation") is required to "promulgate uniform rules and regulations" regarding Freedom of Information Law ("FOIL") records access, including "the persons from whom such records may be obtained"; and

WHEREAS, the Corporation wishes to designate a new FOIL Records Access Officer and a new FOIL Appeals Officer to serve as the designated contacts for those seeking records access from the Corporation; and

WHEREAS, the Corporation wishes to designate the General Counsel of the Corporation as the FOIL Records Access Officer.

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

1. The Corporation approves the appointment of the Senior Vice President of Operations of the Corporation as the FOIL Records Access officer.
2. The Corporation approves the appointment of the Chief Financial Officer of the Corporation as the FOIL Appeals officer.
3. The Corporation is authorized to do all other things necessary and appropriate, including revision of the Corporation's FOIL Guidelines, to effectuate this resolution.
4. This resolution shall take effect immediately.



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Douglas H. Baker  
Corporation Secretary



# ERIE COUNTY MEDICAL CENTER CORPORATION

I certify that Depositor named above has duly authorized the opening of a deposit account pursuant to the agreement on M&T Bank's Commercial Deposit Account Opening Request, and that I am duly authorized to act on behalf of Depositor; that Depositor is:

- ☐ an agency or department of the United States,
- ☐ an agency, division or department of the State of \_\_\_\_\_,
- ☐ a State of \_\_\_\_\_ local government entity (county, town, village),
- ☐ a school district,
- ☐ a fire district, or
- ☒ other Public Benefit Corporation

duly organized and validly existing under the laws of the State of New York; and, if applicable, that the resolutions set forth below or provided separately to M&T Bank have been duly adopted by the Board of Depositor, at a meeting duly called and held on 2016; that each of such resolutions is in full force and effect and none has been rescinded, revoked, or modified; and that none of such resolutions nor any action pursuant thereto will violate any law, rule, regulation, charter, by-law or agreement by which Depositor is governed, constituted or bound.

RESOLVED, that:

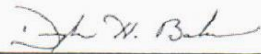
1. Manufacturers and Traders Trust Company ("M&T Bank"), a New York banking corporation, is hereby designated a depository for this entity (the "Depositor") and the officers or employees named herein or on a Rider hereto are hereby authorized to open one or more deposit accounts from time to time (each an "Account") on behalf of Depositor.
2. M&T Bank may purchase, give credit for, cash, accept, certify and pay from funds on deposit in the Account, without inquiry, all items signed, drawn, accepted or endorsed on behalf of Depositor, whether under a title, the words "Authorized Signature" or otherwise, with the actual or purported facsimile signature of any one of the officials whose names, capacities and specimen signatures appear above or on a Rider hereto, or his or her successor in office (each an "Authorized Signer"), regardless of the circumstances under which the signature shall have become affixed so long as the signature is the actual signature of an Authorized Signer or resembles the facsimile signature of an Authorized Signer previously certified to M&T Bank. Depositor shall indemnify M&T Bank against all claims, damages, liabilities, costs and expenses (including, but not limited to, attorneys' fees and disbursements) incurred by M&T Bank in connection with honoring any signature of any Authorized Signer (including any facsimile signature that resembles the facsimile signature of an Authorized Signer previously certified to M&T Bank) or any refusal to honor the signature of any person who is not an Authorized Signer. Depositor acknowledges and agrees that any requirement of Depositor that any item or other instrument for the payment of money signed, drawn, accepted or endorsed on behalf of Depositor bear the signature of more than one Authorized Signer is solely an internal requirement of Depositor and imposes no duty of enforcement on M&T Bank.
3. Any Authorized Signer may, on behalf of Depositor, transact with and through M&T Bank all such business as he or she deems advisable upon such terms as he or she deems proper, including, but not limited to, obtaining an undertaking and pledge of collateral for uninsured balances in the Account, entering into custodial agreements concerning such collateral, obtaining such loans and other extensions of credit as may be consistent with applicable law, discounting, selling, assigning, delivering and negotiating items, guaranteeing the obligations of others pursuant to applicable law, applying for letters of credit, electronic funds transfers, capital markets products, automated clearing house ("ACH") payments, cash management, trust and investment products and any other services or transactions, and, in compliance with all applicable law and procedures, pledging, hypothecating, assigning, mortgaging, encumbering, granting security interests in and otherwise creating liens upon Depositor's property, whether real or personal, tangible or intangible ("Property"), as security for loans and other extensions of credit, and in connection with any such transaction of business do all acts or other things as he or she shall deem proper including, but not limited to, signing, drawing, accepting, executing and delivering items, guarantees, assignments, pledges, hypothecations, receipts, waivers, releases and other instruments, agreements and documents, making and receiving delivery of Property, accepting, receiving, withdrawing and waiving demands and notices and incurring and paying liabilities, costs and expenses.
4. In the event an Authorized Signer acting on behalf of Depositor shall apply to or contract with M&T Bank for any electronic funds transfer service that M&T Bank may make available to Depositor, including, but not limited to, any service that contemplates M&T Bank's execution of payment orders initiated by Depositor for the wire or ACH transfer of funds to or from an Account of Depositor, such Authorized Signer shall be empowered on behalf of Depositor to designate one or more persons (who may, but need not be, Authorized Signers), each of whom, acting alone, shall be authorized on behalf of Depositor to transmit payment orders to M&T Bank for the transfer of funds to or from Depositor's Account.
5. Each person identified as an Authorized Signer, and each person or persons designated by an Authorized Signer to act on behalf of Depositor (who may, but need not be, Authorized Signers), shall have the power and authority to transact business and bind Depositor through electronic medium (e.g., the Internet) and M&T Bank may rely on any of the following to the same extent as the actual signature and proof of identity of each such person to bind Depositor: any electronic signature or digital signature, under applicable law, of such person; any identifier issued by M&T Bank, its affiliates or any other party (e.g., Personal Identification Number associated with ATM or other card or any access device) to such person; or any other criteria that M&T Bank may reasonably rely on which may serve as an indicator of authentication for such person.

I further certify that each person whose name appears above or on a Rider hereto opposite an office has been duly elected or appointed to and now holds such office of Depositor; that each other person whose name thus appears is acting for Depositor in the capacity opposite such other person's name; and that each signature on this certification or a Rider hereto is a true specimen of the signature of the person whose signature it purports to be.

April 26, 2016

Date

x

  
Authorized Signature

Secretary, ECMCC BOD

Title

Original - Account Services; Copy - Branch

FA-049B (3/14)

## CREDENTIALS COMMITTEE MEETING

### Committee Members Present:

Yogesh Bakhai, MD, Chair

Mark LiVecchi, DMD MD MBA

Richard Skomra, CRNA

Brian Murray, 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

Jonathan Marshall, DO

Mandip Panesar, MD

## CALL TO ORDER

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

Congratulations and thank you to Dr. Yogesh Bakhai for stepping forward to serve as the Chair of the Credentials Committee.

## 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 – Glen Gresham, MD  
Former Medical Director at ECMC, opened the first spinal cord injury unit at ECMC
- B. Applications Withdrawn –
  - Aristy, David, MD Internal Medicine/Hospitalist 03/30/2016
  - Patel, Alpen, MD Internal Medicine/Hospitalist 03/02/2016
- C. Application Processing Cessation – none
- D. Automatic Processing Conclusion – (inactive applications > 180 days from date of signature) - none
  - Nels, James, DO Internal Medicine 03/01/2016
- E. Resignations –
  - Goldman, Scott, DMD Dentistry 04/07/2016
  - Conroy, Elizabeth, MD Dermatology 04/01/2016
  - Ciesla, Tera, PA-C Emergency Medicine 03/30/2016
  - Pecyne, Madelyn, PA-C Emergency Medicine 12/31/2015

# ERIE COUNTY MEDICAL CENTER CORPORATION

Gorsline, Leah, PA-C	Family Medicine	03/05/2016
Harding, Elizabeth, MD	Family Medicine	03/23/2016
Choudhry, Ghulam, PA-C	Internal Medicine/Hospitalist	03/02/2016
Cunningham, Elizabeth, PA-C	Internal Medicine/Hospitalist	03/02/2016
Kuhadia, Nitesh, MD	Internal Medicine	03/24/2016
Parikh, Neil, MD	Internal Medicine/Hospitalist	03/30/2016
Pfalzgraf, Laura, PA-C	Internal Medicine/Hospitalist	03/14/2016
Reinoso, Cynthia, PA-C	Internal Medicine/Hospitalist	03/02/2016
Rzepkowski, Neal, MD	Internal Medicine	04/01/2016
Beatty, Chad, DDS, MD	Oral Maxillofacial Surgery	03/09/2016
Pataki, Agnes, MD	Psychiatry & Behavioral Medicine	04/01/2016
Dexter, Elisabeth, MD	Thoracic/Cardiovascular Surgery	03/17/2016

**FOR INFORMATION**

## **CHANGE IN STAFF CATEGORY**

None

## **DEPARTMENT CHANGE or ADDITION**

Dobson, Judy, FNP	Not renewing Thoracic/Cardiovascular privileges at re-appointment
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## **CHANGE OR ADDITION OF COLLABORATING/SUPERVISING ATTENDING**

### **Emergency Medicine**

Cohen, Elizabeth, PA-C

*Changing from Dietrich Jehle, MD to Kerry Hlubik, MD*

### **Internal Medicine**

Dobson, Judy, FNP

*Changing from Dr. Joseph Zizzi Jr. to Jai Wadhwani, MD*

## **PRIVILEGE ADDITION/REVISION, recommended – comments as indicated**

### **Surgery**

Dryjski, Maciej, MD

General Thoracic Surgery

- Tube (closed) thoracostomy-emergency

Extremities

- Open AV access, Tunneled Catheter Placement

**FOR OVERALL ACTION**

## **PRIVILEGE WITHDRAWAL**

### **Internal Medicine**

Tauro, Colin, MD

Active

- Medical Intensive Care

-

FOR

INFORMATION

**APPOINTMENT APPLICATIONS, recommended – comments as indicated**

**A. Initial Appointment Review (16)**

**Anesthesiology**

Baker, Lori, CRNA

Allied Health Professional

Pensero, Ali, CRNA

Allied Health Professional

DeSouza, Anthony, NP

Allied Health Professional

*Collaborating Physician: Shawn Cantie, MD*

**Family Medicine**

Glasgow, Patrick, MD

Active

**Internal Medicine**

Miori, Daniel, PA-C

Allied Health Professional

*Supervising Physician: Bruce Troen, MD*

Musielak, Pia, PA-C

Allied Health Professional

*Supervising Physician: Arthur Orlick, MD*

**Internal Medicine/Hospitalist**

Lam, Pang, MD

Active

Mann, Kuldeep, ANP

Allied Health Professional

*Collaborating Physician: Muhammad Achakzai, MD*

Pettle, Theodore, MD

Active

Samuel, Sandeep, MD

Active

So, Jenny, MD

Active

Song, Seon, MD

Active

**Rehabilitation and Medicine**

Singh, Amrit, MD

Active

**Surgery**

Lahrs, Barbara, NP

Allied Health Professional

*Collaborating Physician: Liise Kayler, MD*

Savo, Anthony, MD

Active

Zynda, Elizabeth, ANP

Allied Health Professional

*Collaborating Physician: Liise Kayler, MD*

**FOR OVERALL ACTION**

**B. Dual Appointments (0)**

**REAPPOINTMENT APPLICATIONS, recommended – comments as indicated**

**C. Reappointment Review (35)**

**Anesthesia**

Horesh, Fayelyn, CRNA

Allied Health Professional

**Dermatology**

Kalb, Robert, MD

Active

**Emergency Medicine**

Busse, Donald, PA

Allied Health Professional

*Supervising Physician: Joseph Bart, MD*

**Family Medicine**

ERIE COUNTY MEDICAL CENTER CORPORATION

Buslovich, Steven, MD	Active
<b>Internal Medicine (contingent on COS sign off; out of the country until next week)</b>	
Chaskes, Michael, MD	Courtesy, Refer & Follow
Tauro, Colin, MD	Active
Vaqar, Sarosh, MD	Active
Steinagle, Gordon, DO	Courtesy, Refer & Follow
<b>Neurology</b>	
Block, Sandra, MD	Active
<b>Oral &amp; Maxillofacial</b>	
Donnarumma, Glen, DDS	Associate
Flihan, Donald, DDS, MD	Courtesy, Refer & Follow
Frawley, Thomas, DDS	Associate
<b>Orthopaedic Surgery</b>	
Anain, Joseph, DPM	Active
Baetzhold, Karen, PA	Allied Health Professional
<i>Supervising Physician/First Assist: Paul Paterson, MD</i>	
Bisson, Leslie, MD	Active
Cappuccino, Andrew, MD	Associate
Jordan, Kelly, PA	Allied Health Professional
<i>Supervising Physician: Leslie Bisson, MD</i>	
Marzo, John, MD	Courtesy, Refer & Follow
McGrath, Timothy, MD	Active
Mutty, Christopher, MD	Active
Paterson, Paul, MD	Active
Reed, Kory, MD	Active
Repicci, John, MD	Associate
Stoeckl, Andrew, MD	Active
Wind, William, MD	Active
<b>Psychiatry &amp; Behavioral Medicine</b>	
Kothari, Khyati, MD	Courtesy, Refer & Follow
<b>Radiology</b>	
Dann, Phoebe, MD	Active
<b>Rehabilitation Medicine</b>	
Guzinski, Peter, DC	Allied Health Professional
<b>Surgery</b>	
Bhangoo, Kulwant, MD	Associate
Dryjski, Maciej, MD	Active
Harris, Linda, MD	Active
Hassett, James, MD	Active
Miller, Paula, PA	Allied Health Professional
<i>Supervising Physician/First Assist: Michael Pell, MD</i>	
<b>Thoracic/Cardiovascular Surgery</b>	
Ashraf, M. Hashmat, MD	Associate
<b>Urology</b>	
DeBerry, John, MD	Active

**D. Dual Reappointments (1)**

**Dobson, Judy, FNP**

Allied Health Professional

Internal Medicine

*Collaborating Physician: Jai Wadhwani, MD*

Surgery

*Collaborating Physician: Sunil Patel, 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.

**April 2016 Provisional to Permanent Staff**

**Provisional Period Expires**

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

**Emergency Medicine**

Jason Borton, MD

Active Staff

04/28/2016

**Family Medicine**

Elizabeth Leiser, ANP

Allied Health Professional

04/28/2016

*Collaborating MD: Stephen Evans, MD*

**Internal Medicine**

Michael D. Maloney, PA-C Allied Health Professional

04/28/2016

*Supervising Physician: Shaun S. Bath, MD*

**Radiology/Teleradiology**

Aspan Ohson, MD

Active Staff

04/28/2016

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

**FOR OVERALL ACTION**

***AUTOMATIC CONCLUSION, Reappointment Expiration, FIRST NOTICE***

**Dentistry**

Capuana, Joseph, DDS

Courtesy, Refer and Follow

*Reappointment Expiration Date: June,*

*30, 2016*

***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

**Ophthalmology**

Armenia, Donald, MD

Courtesy, Refer and Follow

*Reappointment Expiration Date: May 31, 2016*

***AUTOMATIC CONCLUSION- Reappointment Expiration, FINAL NOTICE***

**None**

*Planned Credentials Committee Meeting: April 7, 2016*

*Planned MEC Action date: April 25, 2016*



## **OLD BUSINESS**

### **OFFICE OPERATIONS**

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

Steady progress continues to be made, with staff training being conducted while we work with the software vendor on enhancements to make the product more user friendly and efficient.

#### **Provisional to Permanent Memos**

S. Ksiazek detailed the revised process for the committee.

#### **Highlighting no/low volume on re-appointment summaries**

S. Ksiazek detailed the continued efforts of the Medical-Dental Staff Office to provide as much detail as available to the Chiefs of Service for re-appointment review.

#### **Revision in the Dues notices to prompt for more timely payment**

At last meeting, the Medical-Dental Staff Officer asked for the committee's support for improved efficiencies through decreased clerical mailings of dues notices. Drafts of the revised first and second dues notices were circulated to the committee and unanimously endorsed.

#### **Dues and Fees Structure**

S. Ksiazek reported that the comparative dues and fee structures reviewed at last month's Credentials meeting were presented to the officers of the medical-dental staff at their March meeting. The officers opined that the dues structure should await evaluation until the budget projections are developed. The officers did endorse the concept of rolling re-appointment fee into the as well as a financial penalty for not submitting re-appointment paperwork when due. The officers determined that any action on dues and fee structure will be presented to the Medical Executive Committee as a package, to go into effect in 2017.

#### **Volume**

S. Ksiazek detailed the continued volume challenges in the Medical-Dental Staff Office, for new appointments and temporary privileges. The percentage of temporary privilege requests with initial appointment packets is increasing. The committee discussed exploring the option of expedited credentialing, but given the excellent turnaround time of the Medical-Dental Staff Office and the time frame of temporary privilege requests, this option may not best suit the current needs of the clinical departments. Dialogue regarding accreditation agency standards and meeting patient needs ensued. It was agreed that a review of temporary privileges at the Medical Executive Committee level by the Credentials Chair would be appropriate.

#### **Risk Management**

No report. A list of employed members of the medical-dental staff to be sent to MDSO monthly to reconcile.

### **CME REQUIREMENT**

S. Ksiazek presented the comparison of the current ECMC and KH CME requirements. The committee endorsed the alignment of the two. S. Ksiazek will reach out to KH to discuss and report back to the committee next month.

### **HBO THERAPY PRIVILEGES**

The new WCC vendor has again expressed interest in revising the credentialing criteria for Hyperbaric Oxygen Therapy. The specifics have been requested and upon receipt, will be referred to the Surgery Chief of Service and the Credentials Committee for review and endorsement.

## TEMPORARY PRIVILEGES

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

**FOR OVERALL ACTION**

## NEW BUSINESS

### Downstream Customer Request

As more practitioner specific data becomes available, the ability to drill down further by practice type has been requested. An example would be the ability to compare Academic vs. Private services within a clinical department. There is currently an unused field in the credentialing software that could be used to assist with this request. S. Ksiazek suggested that this be reviewed at the April Chiefs of Service meeting; the committee concurred.

### Credentials Criteria Clarification

#### DEEP SEDATION CREDENTIALING CRITERIA FOR EMERGENCY MEDICINE

##### (Board Certified / Board Eligible Physicians)

A standardized form will be utilized (The Sedation Record) for patient assessment prior to sedation, for physiologic monitoring during sedation and appropriate recovery and patient assessment after sedation.

**-The practitioner must read the ECMCC policy on Deep Sedation included in the hospital Rules and Regulations.**

-Primary credentialing criteria for the use of Deep Sedation by physicians within the Department of Emergency Medicine has been determined. These shall include Board Certification / Board Eligibility in Emergency Medicine and privileges in emergency airway management, i.e. rapid sequence induction / intubation. The Credentials Committee endorsed approval of the criteria for Emergency Department physicians.

**Adopted Medical Executive Committee 8/27/2007, 9/23/2013**

Committee Recommendation: Remove the highlighted statement from ED privilege form; endorsed by ED Chief of Service.

### Technical Amendment to the Bylaws

The statement regarding the duration of temporary privileges which has historically been detailed in the Credentials Manual and is codified in the Joint Commission standards is prudent to be in the Medical-Dental Staff Bylaws as per the unanimous vote of the MEC on 3/28/2016. The motion reads as follows: "Technical amendment authorizing the copying of a statement which has historically resided in the Credentials Manual to also be housed in the bylaws proper as the last sentence of Section 4.7 of Article IV: "Temporary Privileges may not be granted for longer than 120 days in a 12 month period."

The above referenced technical amendment will be communicated to the Medical-Dental Staff and Board of Directors and follow the adoption process as defined in the Medical-Dental Staff Bylaws.

### Family Medicine Candidate

A flagged application was reviewed by the Committee. Further dialogue with the Chief of Service was deemed warranted.

### Privilege Forms

#### A. Neurology Form

The Credentials Committee endorsed the addition of Lumbar Puncture as a delineated privilege:

#### 9. Lumbar Puncture

S. Ksiazek has invited the Chief of Service to partner with the Medical-Dental Staff Office to revise the form in a core/cluster format, and consider harmonizing our form with KH under the GLH



collaboration. The current ECMC and KH forms were forwarded to the Chief of Service for review and evaluation.

**B. CRNA Form**

Correction made to the header on page 3 Level II privileges:

**These functions can be performed ONLY with the anesthesiologist physically present in the operating room at the time the activity is performed.**

**C. Internal Medicine Generalist Form**

The committee endorsed removing the selection and approval boxes for the Level I Core privileges, as the definition of these privileges is that they are “core” for all who have completed an accredited residency.

LEVEL I CORE PRIVILEGES	
NON-PROCEDURAL	
Privileges include complete history and physical exam, including breast, rectal and pelvic exam; diagnosis, treatment plan, care and management of patients with medical diseases including outpatient and inpatient consultations, office, clinic and hospital visits, patient counseling, pain management, and like skills included in any Internal Medicine training program curriculum.	Successful completion of an accredited residency.
PROCEDURAL	
All internists are expected to be competent to perform the following basic procedures after the successful completion of an accredited Internal Medicine residency program: arterial puncture, femoral vein puncture, intradermal skin test, IM injections, NG tube insertion without guide wire, pap smear with wet mount, EKG, peripheral IV lines, subcutaneous injection, suture placement, suture removal, urinary catheterization (male and female), gastric lavage.	Successful completion of an accredited residency.

This change is consistent with the “core” listing on the cover page of the modular forms completed by the Internal Medicine physician specialists. The Medical-Dental Staff Office is working with the credentialing software vendor on a quality control check to ensure these core privileges are contained in each physician electronic profile.

**FOR OVERALL**

**ACTION**

**OPEN ISSUES**

- =The hospitalist group has not yet remediated all DOJ COCs for existing practitioners
  - ➔ The Chief Medical Officer and MDSO will continue to address this
- =Revision of Orthopaedic Surgery form to harmonize with KH is back on the active work list with the Chief of Service
- =Membership category not printing on appt/reappt letters – MDSO working with IC to correct
  - ➔ Until a systems correction can be implemented, the MDSO will continue to highlight the membership category in the dues grid that prints at the bottom of the letters
- =The MDSO confirmed with the monitor the process for incorporating the required documentation of an OPMC action plan into the practitioner’s PPE file

**FOR INFORMATION**

## ***OTHER BUSINESS***

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

#### **FPPE (Focused Professional Practice Evaluation) (5)**

Family Medicine (1 MD Newly requested privileges)  
Orthopaedic Surgery (2 MD's Newly requested privileges)  
Surgery (1 MD privileges satisfied with training)  
Urology (1 MD Newly requested privileges)

The committee was updated on the amount of time spent by the MDSO following up on open FPPEs. The MDSO will run department specific reports and engage the assistance of the Chief Medical Officer and Chiefs of Service to bring outstanding FPPEs to successful closure.

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

No report from the PSO this month

**FOR INFORMATION**

## ***ADJOURNMENT***

With no other business, a motion to adjourn was received and carried with adjournment at 4:05 PM.

Respectfully submitted,



Yogesh Bakhai, MD  
Chairman, Credentials Committee

Att.