midland memorial hospital



Medical Staff Services are the foundation of a solid, well governed medical staff that prides themselves in providing

Midland Memorial Hospital and its customers with the highest quality of patient care possible.

## Have You Taken The Pickle Pledge?

"I will turn every complaint into either a blessing

or a constructive suggestion."

By taking the pickle pledge, I am promising myself that I will no longer waste my time and energy on blaming, complaining, and gossiping, nor will I commiserate with those who steal my energy with their blaming, complaining, and gossiping.

www.joetye.com



Volume 2, Number 11

Medical Staff Leadership

**Chief of Staff** 

John Dorman, MD

**Chief of Staff Elect** 

Sari Nabulsi, MD

Past Chief of Staff Larry Wilson, MD

**Department Chairs** 

Steven Rea, MD

Medical Services

Larry Oliver, MD

Surgical Services Jeffrey Durgin, MD

**Hospital-Based Services** 

# **Introducing Our New Practitioners**

#### November 2014

Asif A. Ansari, MD—Internal Medicine/Nephrology Thomas Cook, MD—Plastic Surgery Victoria Dorr, MD—Internal Medicine/Hospitalist Heather Fuentes, MD—Anesthesia/Heart Institute Lee Moore, MD—Obstetrics & Gynecology Keith Gist, CRNA—Nurse Anesthetist Anna Gotardo, MD—Family Medicine Bindu Nair, MD—Ambulatory/Urgent Care Michael Makii, MD—Obstetrics & Gynecology Jon Rosenthal, MD—Emergency Medicine Noyoze Urhoghide, MD—Ambulatory/Urgent Care Venus Skeen, ACAGNP—Nurse Practitioner/Infectious Disease

# **Continuing Medical Education**

No CME for November 2014

## EBOLA UPDATE DISCUSSION

Midland College - Carrasco Room, Monday, November 10, 2014, 5:30p to 6:30p

Midland Memorial Hospital, along with city, county, and state officials are hosting a panel discussion for healthcare workers regarding the Ebola virus and its impact on the Permian Basin. Information will be shared on the latest updates regarding the outbreak, CDC recommendations and how local healthcare and emergency management officials are preparing.

# Preparing for ICD-10—Physician Education Opportunity

Please go to the MMH website—www.midland-memorial.com, under 'For Physicians', Preparing for ICD-10, for information on ICD-10 training through 3M. Notify Rebecca Pontaski, Medical Staff Manager if you would like a login.

## **Medical Staff Services Reminders**

- On the new Midland Memorial Hospital webpage, under 'Find a Physician' is a listing of all physicians on staff. Please review your information for accuracy and notify the medical staff office of any changes.
- Texas Electronic Registrar (TER) Death Registration System—Since 2007, state law requires that all cause-of-death information and medical certifications to the DSHS be submitted electronically. Physicians who do not sign death certificates in a timely fashion face a \$500 fine per violation from the TMB.
- It is peak season for students and others who want to come in and observe practitioner work. Anyone who will be observing a practitioner needs to complete and provide some information before they are able to do so. Please contact the medical staff office at 432-221-4629 for this information and process.

#### **In Addition**

If you would like to submit information for future newsletters, please email the information to Rebecca Pontaski at rebecca.pontaski@midland-memorial.com.

Rebecca Pontaski, MHA, CPMSM, CPCS, RHIT Medical Staff Services Manager 432-221-1625 Alma K. Martinez, RHIT Medical Staff Services Coordinator 432-221-1510 Esther Griego Medical Staff Assistant 432-221-4629

Medical Staff Office Fax 432-221-4253

CME Hotline 432-221-1635

# midland memorial hospital **Medical Staff**

## **New Information**

Forward Thinking: Physicians, Nurses and Staff at Midland Memorial Hospital Making a Difference

A couple of years ago the American College of Surgeons (ACS) recognized that the status quo would not cut it going forward. They understood that our patients, payers and particularly CMS wanted to see results and guality service to reimburse for health care as we move forward. The Accountable Care Act, with all its problems, is meant in part, to move the needle in that direction as well. What the ACS introduced was National Surgical Quality Improvement Program (NSQIP), a quality improvement process. Though at the time voluntary, Dr. Shelton Viney and Midland Surgical Associates embraced this process and have shown remarkable success with the efforts. Midland Memorial Hospital is one of 26 hospitals in Texas embracing the ACS NSQIP program.

Dr. Viney explains NSQIP originated from a VA program in 1991. The ACS adopted it in 2001 and in 2011 developed a different NSQIP participation option based on hospital needs. Dr. Viney embraced this recognizing that

unless you measure what you are doing, it is only opinion. Most of us have the opinion that we provide excellent care; when you measure things the lens changes. Over the past two years Dr. Viney and his team, with the help of resources from Midland Memorial Hospital, have made changes based on what they have found with the metrics they have chosen. As a result, they have proactively improved the quality of care delivered to the surgical patients at MMH.

Examples of best practice changes are seen in post-operative care. Earlier removal of Foley catheters has reduced the frequency of complicating UTIs. Early removal of NG tubes, earlier oral intake and earlier ambulation has shortened LOS and improved out comes for colon surgery patients. All these changes came from looking at metrics, seeing where care was below bench marks and looking at what others do to improve care. There are frequently studies to review and best practice guidelines that can be introduced. The first step is recognizing what we thought was fine is sometimes not as good as we thought. As Dr. Viney has said, if we don't challenge ourselves and turn over rocks, we don't know where we can improve.

Dr. Catalasan in the Critical Care unit has been making changes in the management of critical care patients with the goal of improving quality of care with best practice approaches. Dr. Power and the Total Joint service have likewise recognized they can improve care and decrease costs by standardizing processes, simplifying and standardizing equipment and other changes based on best practices.

Standardizing our processes and decreasing variation in care will improve the quality of care delivered and decrease the cost of the delivered care while improving the experience for our patients. That's all three arms of the triple aim. We can and must expand on the successes of the innovative thinkers at MMH. MMH is committed to helping.

Dr. Viney would not have had the success with NSQIP without the help of his Anesthesia colleagues. Mike Kahler RN, BSN, CNOR, helped manage and delivered the metrics allowing for benchmarking and reviewing the quality of care. Quality Management, Respiratory Therapy, Dietary, Infection Control, Preoperative, Recovery, surgical floor nurses, Pathology and others have a place at the table when figuring out how to deliver higher quality care. The success of these programs is dependent on the multidisciplinary teams at MMH coming together with a common goal.

Thanks to all the team members that have improved the quality of care in surgery, critical care and orthopedics. I am looking forward to seeing this continue to grow and expand with the help of all the MMH team as we pursue the triple aim of improved quality of care while reducing the costs and improving the patient experience.

## Quick Guide to H&P Guidelines Per CMS 2014 Requirements

- Must be on chart before surgery.
- H&P has to be written within 30 days of procedure. •
- H&P Update is needed if H&P was started at any time before patient was admitted to hospital. Update is still needed even if the H&P is . signed the morning of surgery.
- NP and PA can do H&P and Update, but both have to be signed by MD before procedure.
- Any and all H&Ps, and Updates, must be dated, timed, and signed.
- Updates may be under the title of Progress Notes.
- For emergencies, no H&P required preop, however a short description of planned procedure must be in ProgressNote prior to procedure. ٠
- If the patient comes from the ER, the ER MDs assessment can be used as the H&P. •
- For inpatients, there must be an initial H&P within 24 hours of admission, with daily progress notes, and with a note that indicates the pa-• tient is having surgery. No update is needed.
- The initial H&P can be written by a medical doctor.
- Dentists cannot write the H&P. It must be written by a medical doctor. .
- H&P must be written by MD/DO/NP/PA that has privileges to work in the hospital.



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Save the Date!

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December 18, 2014—Annual Medical Staff Meeting—More information to follow.

## Rules and Regulations Information—Delinquent Medical Records

Delinquent or deficient medical records may be waived for absences from the community or sickness provided a request for waiver is made prior to or during the absence and the practitioner was not suspended for record deficiency at the time the waiver was requested. Practitioner must notify Medical Staff Services and/or Medical records of absences from deferment of records.

## Attention Physicians—Urgent Need!

Spok, formally Amcom software is coming to Midland Memorial Hospital. This new system will provide operators with the information needed to process calls using their computers, with just a few keystrokes. Operators can quickly and accurately look up staff and launch code calls, as well as message and page to individuals, groups, and roles. When personnel and schedule information is inaccurate or not readily accessible, critical messages can go to the wrong person or to the wrong place—an office phone instead of a smartphone. At best, this is inefficient. At worst, this may be life threatening if communications do not go through, as in the case of hospital paging.

So we are asking for your help. Please provide your contact information including cell phone, pager, email address, office address, fax, and <u>how you would like to be contacted</u> by the Midland Memorial Hospital Communication Department (operators). Please notify Terri Tryson either by email at terri.tryson@midland-memorial.com or by phone at 221-1676 by <u>11/15/14.</u>

For More Information

Terri Tryson, Communications Supervisor

# 432-221-1676

National Medical Staff Services Awareness Week—November 2 to November 8 Thank you Midland Memorial Hospital for helping us celebrate this week!

Your Medical Staff Services Professionals at Midland Memorial Hospital

Rebecca Pontaski, Manager Alma Martinez, Medical Staff Coordinator Esther Griego, Medical Staff Assistant Elizabeth Ruiz, Temporary Medical Staff Assistant

