

CGH MEDICAL CENTER
Physician Services Council
Meeting Minutes
July 10, 2019

Call to order

Dr. Matthew Cutter called to order the meeting of the Physician Services Council at 7:03 a.m. in the fourth floor board room of CGH Medical Center.

The following members were present: Dr. Mir Alikhan, Dr. John Hahn, Dr. Eric Kuhns, Dr. Thomas McGlone, Dr. Vincent Racanelli, Dr. Eric Riley, Shane Brown, Concha Sitter, and Jordanna Devine. Others present were: Dr. William Bird, Randy Davis, and Dena Wheeler.

Approval of Minutes

The minutes of the previous meeting of May 15 were unanimously approved.

Unfinished business

A. Recruitment update

Dr. Mills and Dr. Chaplin (Anesthesiology) will start July 31. An offer will likely be offered soon to a CRNA who recently visited. References are being completed on Dr. O'Holleran (General Surgery), and it is likely an offer will follow. The recent visit by a Pulmonology nurse practitioner went well. Kimberly Teats-Garrison, PA-C joined Dr. Wolf in Morrison last week and started seeing patients this week.

New business

A. Clinic operations

Randy explained if the Med Module (NextGen) crashes, there is nothing the EMR staff can do. There is a known bug that that will not be fixed until the next upgrade. The Med Actions template is still available to be used during this down time, if necessary. Training for Med Module is done.

Because the number of LPN applicants is limited, many positions have been opened as LPN/RN positions. There are currently nine open positions.

There are three full-time Training & Data Integrity coordinators who meet with Randy weekly. They are making good strides.

B. CMO updates

Effective 1/1/20, CMS will implement the Appropriate Use Criteria Program which requires the use of a Clinical Decision Support Mechanism to determine if certain procedures (CT, Pet, MR, Nuclear studies) are appropriate. HIM is working to create a drop down in Cerner.

Handwashing compliance has slightly decreased.

Dr. Bird asked for feedback about referrals. Referring providers should copy the specialist (if the specific physician is known) in the patient note at the time of referral so the specialist sees the plan/reason for referral. Council members feel this is more of a problem only when imaging is involved.

The new Respiratory Therapy Director mentioned COPD patients referred to Pulmonary Rehab require pulmonary function testing to qualify. This diagnosis should be faxed to the PCP on discharge, explaining the PFT requirement.

C. Clinic space planning

Shane showed proposed floorplans for remodeling of the Rheumatology area, which includes increasing the infusion area to four bays. He hopes to take this to the Finance Committee for approval in September. He also shared preliminary plans for the Cardiology department (second floor), redesigned to add a pacemaker room and space for EP providers. There is no timeline yet on that project. Neurology (third floor) will move to the open shell space west of the current space. The current Neurology space will become Primary Care – Dr. Racanelli and 2 nurse practitioners, and two additional providers. Dr. Kuhns will stay in his current space, and connect to the new Primary Care area. There will be a centralized reception area for Primary Care, and a separate reception area for Surgery and Urology.

Adjournment

The meeting adjourned at 7:36 a.m. into closed session.

MOTION:

A motion was made by Dr. McGlone, seconded by Dr. Hahn, and unanimously approved TO MOVE TO CLOSED SESSION TO DISCUSS APPOINTMENT, EMPLOYMENT, COMPENSATION, DISCIPLINE, PERFORMANCE, OR DISMISSAL OF A SPECIFIC EMPLOYEE OR LEGAL COUNSEL FOR THE PUBLIC BODY.

After discussion, Physician Services Council came out of closed session and adjourned at 7:56 a.m.

Minutes submitted by: Dena Wheeler, Physician Services Assistant

Minutes approved by: Matthew Cutter, O.D.