



**Greenwich Hospital
Oncology Staff Meeting
Bendheim Cancer Center
Date: September 2017
Time: 0800 and 1300**

Place: Infusion Area at 0800 and Oncology Administration at 1300

Agenda item	Presenter	Discussion	Outcome/ Follow Up	Responsible Party
Introductions and announcements	Irene Piazza	<p>Congratulations to Kate Grabiec for the Daisy Award.</p> <p>Mandatory Influenza Vaccination for employees must be done by 12/1/17 Request for exemption deadline is September 30, 2017.</p> <p>Teddy Bear Clinic is Sunday October 1, 2007 11am – 4pm. Please volunteer to help Beth Malvino who is our coordinator this year.</p> <p>Dosi-Fuser disposable pump is in use for 5FU infusions. Please keep track of issues/infusions that complete early. Spill kits are given to each patient at the first treatment.</p> <p>Rituxan Hycela (Rituximab and Hyaluronidase) subcutaneous injection has been approved for adult patients who tolerate their first IV infusion. In-service on Tuesday 10/10/17 at 1pm on MedOnc and Infusion at 2pm.</p> <p>United Way employee campaign will kick-off on 10/20/17. Thank you to our team captains Yasmine, Asia and Chris.</p>		



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		<p>Joan Elder is now FT in Smilow.</p> <p>Recruiting for Oncology Navigator position (formerly known as Breast Navigator).</p> <p>On October 1st there will be mandatory update of ICD10 codes per CMS guidelines. Existing treatment and infusion plans may require assignment of new codes.</p>		
		<p>Medication and Patient scanning audits monthly by Pharmacy.</p> <p>Make sure PTO days are covered. Reminder text or email to confirm date as time gets closer. Thank you to Nancy and Kate for keeping the staff schedules.</p>		
Performance Reviews		<p>Performance Reviews time. Education Sessions will be scheduled next week on the updated review tool using the Standards of Behavior.</p> <ul style="list-style-type: none"> • PPD and Healthstream are done • Self-evaluation needs to be done prior to our meeting • RN's need one peer review form completed. 		



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Service Excellence Press Ganey	Targets: 96.5 Threshold 97.9 Target 98.8 Stretch	<ul style="list-style-type: none"> ✓ July 94.7 (n =17) ✓ August 96.3 (n=19) ✓ September 95.4 (n=16) 		
Standards of Professional Behavior Accountability		<p>Accountability – Be responsible and take action</p> <ul style="list-style-type: none"> • Own your work and follow up on commitments. • Explain what you are doing and why. • Present a professional image • Acknowledge when wrong, apologize and take action. 		
Service Excellence	Leadership Forum	<ul style="list-style-type: none"> • Patient Satisfaction – Spike Lipschutz, M.D., SVP, Medical Services & CQO <p>In the absence of Christine Beechner, VP Patient & Guest Relations, Spike Lipschutz M.D., SVP, Medical Services & CQO, presented the patient satisfaction scores for the month of August 2017. Ambulatory surgery scored 95.8 in August; up from 95.0 in July. The Emergency Department experienced an increase from 89.7 in in July to 90.6 in August. Inpatient dropped 1.9 to 89.1 an increase to 91.0 and Outpatient showed an increase of 0.7 over July to 96.2.</p>		



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		<p>Dr. Lipschutz presented the year-to-date PIP goals for patient satisfaction. HCAHPS is at max at 81.1; Ambulatory Surgery remained at midpoint at 95.7; Emergency Department is slightly above midpoint at 90.2 and Outpatient Services is at max at 95.7. Dr. Lipschutz announced that the focus for the Standards of Professional Behavior for September is Accountability – Be responsible and take action.</p> <p>Dr. Lipschutz announced that the next Quality Awards will be on November 1, 2017. Please send any stories for consideration to Christine Beechner. The Standards of Professional Behavior Leader Discussion Guide #2 will be available at the end of September.</p>		
Joint Commission Update		<ol style="list-style-type: none"> 1. Marc Kosak congratulated the Lab for the positive results of a Cap Survey on August 25, 2017. 2. Sue Migliardi announced that The Joint Commission awarded Greenwich Hospital full accreditation on August 10, 2017. 3. DPH arrived Monday 9/25/17 for a full licensure survey. Closing conference call on Thursday 9/28/17. <p>****Consent continue to be audited.</p>		



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Financial Reporting Efficiency		<ul style="list-style-type: none"> Finance Update – Diane Saul, Manager, Budget & Financial Planning, YNHHS <p>Diane Saul, Manager, Budget & Financial Planning, YNHHS, presented the financial results for the month ended July 31, 2017. Days cash on hand is at 242. Inpatient cases were down compared to budget by 23 cases for the month of July 2017 and down 485 cases year to date. But compared to this time last year actual for the month of July 2017 is +69 cases and year-to-date +27 cases Overall the Hospital's total outpatient business was down (8.3%) against budget for the month ended July 31, 2017 and down (6.1%) year-to-date. Total net patient revenue was over budget by \$223K for the month ended July 31, 2017. The operating gain was \$2.5M as compared to a budget of \$883K. The operating margin was at 7.4% compared to a budget of 2.6%. Net gain was \$3.8M compared to a budget of \$1.0M. Year-to-date outpatient net patient revenue is under budget by (\$6.3M). Year-to-date operating margin is at 2.2% compared to a budget of 2.1%. Year-to-date net gain is over budget at 4.1%.</p>		
Departmental Operations Review		<ul style="list-style-type: none"> Q3 2017 PIP Objectives – Norman G. Roth, President & CEO <p>Norman G. Roth presented the Q3 2017 PIP objectives projected results. In the area of Patient Safety & Quality</p>		



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		<p>the Hospital earned a score of 25%. In the area of Patient Experience/Satisfaction HCAPS was below target, Ambulatory and the Emergency Department were at target, and Outpatient was at max achieving a score of 15.5%. In the area of Employee Engagement the Hospital was above max for Engagement Survey Participation. The Know Your Numbers participation is to be determined. The Hospital achieved a score of 12.5% in this area. In the area of Financials the Hospital is below threshold through the third quarter and would achieve a score of 0 for Q3 2017.</p>		
		<ul style="list-style-type: none"> • Good Catch Awards – Norman G. Roth, Stephen Jones, M.D., Chief Safety Officer, Margaret Towers, Director Risk Management <p>Mr. Roth and Stephen Jones, M.D., presented the “Good Catch Award” for July 2017. A “Good Catch” is an action taken by our staff that prevents an error or possible harm from reaching a patient. Greenwich Hospital along with Connecticut Hospital Association is engaging in processes and actions to become High Reliability Organizations. HRO’s are organizations that function in hazardous, fast-paced and highly complex technological systems that function essentially error free for long periods of time.</p>		



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		For July 2017, the winner was Lily Santos, Senior Technologist, Laboratory.		
		<ul style="list-style-type: none"> • Compensation & Benefits Preview – Michael Dimenstein, VP, System Compensation & Benefits, Lisa Arneth, Director of Compensation, YNHHS and Melissa Turner, SVP, HR <p>Melissa Turner introduced Lisa Arneth, Director of Compensation, YNHHS to present the FY2018 Compensation & Benefits Program. Ms. Arneth began by explaining that compensation and benefits are part of the total rewards program employees are offered at YNHHS. Other rewards include: tuition reimbursement; employee wellness; performance incentive plan; retirement plan; and special achievement award. Ms. Arneth outlined the FY2018 Compensation Program for YNHHS employees. The compensation program includes merit increases of up to 4%; PIP payout of up to 3%; and special achievement awards of up to 2% and is dependent upon certain criteria being met. Ms. Arneth explained that the YNHHS Values and Standards of Professional Behavior will be integrated into employees' performance reviews to replace "success factors". The Personal Fact Sheet was introduced as a new tool to show employees their compensation package</p>		



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		<p>on a single sheet. Michael Dimenstein, VP, System Compensation & Benefits, previewed the medical benefits highlights for 2018. Premium contributions medical, dental and vision will remain the same in 2018 as they are currently. Deductibles and coinsurances for services billed by any hospital in the Yale New Haven Health System will be eliminated. Open enrollment begins on October 30, 2017. Benefits and enrollment information packets will be sent to employees homes this year. Benefit fairs will be scheduled in November; dates to be announced. Full details will be presented at the October Leadership Forum.</p>		
		<ul style="list-style-type: none"> • Clinical Spotlight – Total Joint Replacement Program, Peggy Lennon, Program Director, Annie Nardi, Coordinator <p>Peggy Lennon, Program Director introduced Annie Nardi, Coordinator, and the Total Joint Replacement Program at Greenwich Hospital. The program was awarded The Joint Commission's Gold Seal in 2012. The program continues to achieve clinical excellence and patient satisfaction. In FY2012 there were 427 cases at the Hospital. By FY2016 the program was up to 605 cases and in FY2017 to date there have already been 609 cases. Ms. Lennon introduced Annie Nardi, Program Coordinator. Ms. Nardi presented the mission statement and reviewed the objectives of the program. The Program's goals are: (1)</p>		



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		<p>provide highly skilled, multidisciplinary care in a safe, patient-centered setting; (2) provide patients and their caregivers continuous education from pre-surgery classes to inpatient instruction, and throughout the recovery phase; (3) provide effective pain management options to help every patient maximize their level of function; (4) promote healing with holistic services that treat the mind, body and spirit. For FY2017 the mix is 54% knee or 331 cases and 46% hip or 278 cases. Patient mix by patient age, gender and residence were reviewed. Ms. Nardi compared the length of stay in FY2016 to FY2017 year-to-date for hip and knee replacements. In both cases, the length of stay was reduced for both knee and hip replacements. The discharge disposition for knee replacement and hip replacement showed a decrease of discharges to a skilled nursing facility and an increase of discharges to home from FY2016 to FY2017 year-to-date. Ms. Nardi concluded by presented the strengths and areas of opportunity for the program.</p>		
		<ul style="list-style-type: none"> • Diversity & Inclusion System Strategy – Lisette Martinez, Chief Diversity Officer <p>Lisette Martinez, Chief Diversity Officer, presented the plan for building a system-wide diversity & inclusion strategy. Ms. Martinez presented the vision and the four strategic</p>		



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		<p>areas of the holistic plan. The four areas, marketing & community engagement; workforce development, patient experience; and supplier diversity were defined and the plan for each discussed. Ms. Martinez also presented the team who will be working on the objectives for each of the four areas. The diversity and inclusion metrics were discussed. Ms. Martinez concluded with a list of educational, consulting and coaching tools offered at the system, delivery network and department unit levels.</p>		
<p>Introductions/ Announcements</p>		<ol style="list-style-type: none"> 1. Jennifer Pascucci introduced Luis Rodriguez, Tess Cournoyer and Joe Esposito of Food Services. 2. Jennifer PASCUCCI announced the online Cafeteria Consumer Preference survey for all hospital employees to complete. The survey will be open until Friday, September 8, 2017. 3. Norman Roth announced the 1st Annual Service Excellence Seminar to be held on November 13, 2017 in the Noble Conference Center. The guest speaker will be Allison Massari. The Seminar is supported by the Frank A. Corvino Scholarship Fund for Service Excellence. 4. Stephanie Dunn-Ashley announced the Greenwich Hospital Gala will be held on Saturday, October 21, 2017. The Gala will benefit Oncology Services and will honor Phil McWhorter, MD. Email invitations will be 		



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		<p>going out next week and by US mail the following week.</p> <ol style="list-style-type: none"> 5. Masequa Pina reminded Leadership about the rules regarding accessing PHI on Epic. 6. Kathy Minarik announced the United Way Kickoff Campaign will begin on October 30, 2017 through December 8, 2017. 7. Magaly Olivero announced that the Teddy Bear Clinic will be held on Sunday, October 1, 2017 from 12:00pm - 3:00pm. Leadership is encouraged to attend. 8. Kathy Carley-Spanier announced that September is Men's Prostate Health Month. Free prostate screening will begin on September 7, 2017 in the Noble Conference Center with blood draw and then a screening with a urologist Tuesday and Thursday of next week. 		
Open discussion		<p>Nancy Scofield and Marybeth Lantz McFadden shared that they have noticed an increase in patient wait times and delays in patients arriving to the infusion area. Nancy and Marybeth also shared that the large number of phone calls coming in from the front desk to alert infusion that their patient is ready is distracting to the infusion nurses. In order to maintain safe practice, the nursing staff need to be focused on chemo administration, dose calculations and patient assessments. Messages from the front desk are often not picked up in a timely manner and other calls are missed. Marybeth felt (and</p>	<p>Marybeth and Nancy will gather data on call volume and share with Kristina Capretti.</p>	<p>Scofield, Lantz, McFadden, Capretti</p>



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		other staff agreed) that phone calls about patient status are not the best method for this particular type of communication. Nancy suggested working with Epic to determine a means to utilize the patient schedule for updates on patient status.		

Respectfully submitted,

Irene Piazza

Attendees: I. Piazza, RN, DNP, AOCNS; K. Capretti, RN, MSN, OCN, ANP-BC; N. Scofield, RN, OCN; M. Vanderhorn, RN, BSN, OCN; A. McPherson, RN, BSN, OCN; M. Lantz McFadden, RN, OCN; L. Carbino, RN, BSN, OCN; J. Melendez, RN, BSN, OCN; S. Cavagnaro, RN, BSN, OCN