

Date: November 2017 Time: 0800 and 1300

Agenda item	Presenter	Discussion	Outcome/ Follow Up	Responsible Party
Introductions and announcements	Irene Piazza	Congratulations to Kathy Mattei on passing her OCN exam. Quality Award Nominees for December:		
announcements		Alena Garcia, Jocelyn Walls and Emily Kopas		
		Please forward any cards/letters from patients or families to Irene.		
		Holiday Party Friday December 1st at The Ginger Man 5pm		
		Mandatory Influenza Vaccination for employees must be done by 12/1/17		
		United Way employee campaign will kick-off on 10/20/17. Thank you to our team captains Yasmine, Asia and Chris.		
		Recruiting for Oncology Navigator positon (formerly known as Breast Navigator).	5	
		ACoS Survey scheduled on Wednesday May 16, 2018 for oncology program and breast program.		



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		Paxman Scalp Cooling – December trial start.		
		Radiation Therapy has developed education flyers for patient upon completion of therapy. They have developed information for women post treatment support, post breast treatment Support and men Post treatment support. Mini-Bag shortage and conversion to IVP including antibiotics, and iron. Change in process for retrieval of blood products inpatient. Unsafe injection practice information in the Nurse Advice ERR newsletter. Compliance and Ethics Newsletter on gifts, gratuities ad business courtesies policy is posted as well. Tree of Light Monday December 4 th at 5pm in Noble. Posted the Staff Education Calendar for December 2017		



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Service Excellence – Press Ganey / HCAHPS Patient Satisfaction Leadership Forum	Recommended by HR that 2 weeks of PTO be maintained in each employee's bank. Remember that short term disability is effective after 2 weeks of PTO is used. Medication and Patient scanning audits monthly by Pharmacy 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. • Patient Satisfaction – Spike Lipschutz, MD, SVP Medical Services & CQO, reported on the patient satisfaction scores for the month of October 2017. Scores for the month of October were down in all four areas of measure. Ambulatory surgery scored 95.0, the Emergency Department scored 89.3, Inpatient Services scored 89.7 and Outpatient Services scored 96.0. Dr. Lipschutz presented a list of resources for the Standards of Professional Behavior available on the intranet to assist leaders and employees through the performance review process.		



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		The next Quality Awards will be on December 6, 2017. Please send any stories for consideration to Christine Beechner. Allison Missari will be the guest speaker at the First Annual Service Excellence Seminar on November 13 2017 in the Noble Conference Center.	3,	
Service Excellence Press Ganey	Targets: 96.5 Threshold 97.9 Target 98.8 Stretch	 ✓ August 96.1 (n=19) ✓ September 96.1 (n=18) ✓ October 97.6 (n=28) 		
Quality, The Joint Commision, Safety		 Pat Basciano announced that beginning today, all pediatric patients who come into the pediatric clinic wi be given ID bands. Dr. Chuck Seelig announced that the Hospital's 4 graduate residents took the ABIM Certification exam and all for passed. The graduates are now certified in internal medicine. Peggy Lennon announced that Dr. Ash Kahl received the Cutting Edge Award at the Westchester County Business Journal's Doctors of Distinction Awards on October 24, 2017. Eileen Curry announced that Dr. Wainwright presente at the Undersea and Hyperbaric Medical Society Northeast Chapter regional meeting in Harrisburg, PA Dr. Wainwright presented the President's Address and 	d	



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5.	"The Role of the Medical Director in a Wound Care and Hyperbaric Center".	<u> </u>	
	Pat Basciano announced that the hospital is 100%		
6.	compliant on giving Hepatitis B shots to all newborns. Mr. Roth congratulated the pharmacy on a job well done in making available Hepatitis A shots during the most recent incident at an area restaurant. In total, the		
7.	Hospital administered 160 vaccines. Dr. Seelig announced that Drs. Steven Smith, Michael Bianco (a former resident), Mrinalini Modak and Omair Sheikh attended the National Hi-Value Practice		
	Academic Alliance Conference in Baltimore. Dr. Smith presented on reducing unnecessary imaging in the evaluation of syncope and Drs. Modak and Sheikh are resident leaders on Hi-Value Project, "Reducing Unnecessary C-Dff Testing".		
8.	Anna Cerra announced that in October Judy Badia and Priscilla Sterne presented on the Hospital's falls program at the National Magnet Conference in	i l	
9.	Marc Kosak congratulated Ralph Sgambato and the		
10	D. Mr. Kosak also congratulated Michael Wolpensinger and his team on National Healthcare Facilities Week; Dr. Michael Franco, Gabby Sandaire and team on		
		Houston, TX. 9. Marc Kosak congratulated Ralph Sgambato and the imaging team on a successful survey by the DEEP. 10. Mr. Kosak also congratulated Michael Wolpensinger and his team on National Healthcare Facilities Week;	Houston, TX. 9. Marc Kosak congratulated Ralph Sgambato and the imaging team on a successful survey by the DEEP. 10. Mr. Kosak also congratulated Michael Wolpensinger and his team on National Healthcare Facilities Week; Dr. Michael Franco, Gabby Sandaire and team on Respiratory Care Week and Mark Larobina and his



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		11. Mr. Roth presented the video from the Greenwich Hospital Gala.		
Financial Reporting Efficiency		Finance Review – Eugene Colucci, CFO Eugene Colucci, CFO presented a brief overview of the FY2017 projected margins and FY2018 operating budget targets. The FY2017 draft results show an operating margin of 3.3% compared to a budget of 2.0%. The FY2018 operating margin is 4.0%. Net gain for FY2017 is projected at 5.5% as compared to a budget of 2.4%. Net gain for FY2018 budget is 4.5%. FY2017 revenue was \$383.8M, compared to a budget of \$394.3. The FY2018 revenue budget was presented. Mr. Colucci commented that patient volumes for FY2018 are expected to remain flat. The capital budget for FY2018 is \$28M net of the tenant fit out allowance and funds from Yale New Haven Hospital for the fit out of space that Yale New Haven Hospital will occupy. Mr. Colucci presented the impact of the Connecticut hospital tax changes on Greenwich Hospital. For the State's FY ending 6/30/2018 Greenwich Hospital would pay \$26.7M net taxes. This represents a net increase (after distribution) of \$8.1M which is not		



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Departmental Operations Review		 budgeted. In this current version of the State hospital tax, Greenwich Hospital is the only hospital who will pay more in net taxes. Mr. Colucci commented that depending upon how the State hospital tax is approved, the FY2018 Hospital budget may have to be adjusted to accommodate the increase in taxes. Good Catch Awards – Norman G. Roth, President & CEO and Stephen Jones, M.D., Chief Safety Officer Norman Roth and Stephen Jones, M.D., presented the "Good Catch Award" for September 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. For September 2017, the winner was Sara Condori RN, Surgical Unit. Clinical Spotlight – Christopher Davison, M.D., Medical Director, ED 		



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		Christopher Davison, M.D., Medical Director, Emergency Department presented an overview of the Emergency Department. Dr. Davison reported that the Emergency Department has approximately 40,000 visits per year with 18% arriving by ambulance, 25% are under the age of 18 and 24% are admitted for further care. The Emergency Department employs 14 full-time, board certified emergency Department employs 14 full-time, board certified emergency physicians, 5 full-time physician assistants, 40 nurses and 27 emergency department techs. Dr. Davison presented at overview of the recent emergency department renovation. The renovation culminated with a ribbon cutting on January 25, 2017. The Quality Care awards received by the Emergency Department are MI Alert, Sepsis Alert and Stroke Alert. The Emergency Department achieved Runne Up at this year's Joseph A. Zaccagnino Conference with a project titled, "Improving Door to CT Times for Stroke Patients Using EMS Pre-Notification" and the Stroke Recognition: Gold Plus Award by US News and World Report. Dr. Davison reviewed the department's daily huddle, nurse call-back RN and simulation programs. The addition of the pediatric emergency medicine physician service, directed by Dr. Karen Santucci, was presented. This new service will provide coverage by pediatric emergency physicians from 4pm – 8am in the emergency department. Dr. Davison concluded by presenting the service excellence statistics and corporate objectives for FY2017.	n	



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		 FY2018 Corporate Compliance Work Plan – MaseQua Pina, Associate Compliance Officer, System Audits MaseQua Pina, Associate Compliance Officer, System Audits, presented the Office of Privacy & Corporate Compliance FY2018 Work Plan. Ms. Pina presented the YNHHS Strategic Framework for FYs 2018 – 2020. The goal is to support the five strategic dimensions in the framework. The FY2018 YNHHS Compliance & OIS Strategic Work plan was presented. Ms. Pina gave an overview of the work plan for each of the five strategic dimensions. The FY2018 Revenue Compliance Audit Plan was also presented. Ms. Pina reviewed the audit areas for Greenwich Hospital. Ms. Pina announced the first edition of the monthly Compliance Newsletter was emailed to all staff on November 1, 2017. Ms. Pina concluded by presenting the "Faces of Compliance" noting that Tim Lennon, Sr. Compliance Specialist, has accepted a position outside the Yale New Haven Health System and wished him well, Infor Update – Michael Krahn, Finance Lead, Infor Project Michael Krahn, Finance Lead, Infor Project presented an update on the project. Mr. Krahn reviewed the project's 		



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Introductions/ Announcements		guiding principles. The two completed foundational changes: chart of account cleanup and standardization process and system-wide cost center cleanup and standardization were reviewed. Mr. Krahn also discussed the changes in cost centers and cost center reporting. Ongoing Infor financial initiatives were presented. Mr. Krahn discussed the importance of Infor's implementation committees and meeting schedules and the Integration Adoption Team (IAT). Mr. Krahl emphasized the importanc of each department having representation on the IAT in preparing for a successful go-live on July 1, 2018. Next steps and integrated testing were discussed. Training for the Infor system will be primarily through online learning and quick start guides. Registration training begins in March 2018 and will begin in May 2018. Super users will be identified in early 2018 and trained in April – May, 2018. 1. Stephanie Dunn-Ashley announced a lecture on lower back pain management in the Noble Conference Center on November 30, 2017 at 12:30pm – 2:00pm. The lecture is part of the Women's Healthcare Lecture Series. 2. Mr. Roth presented the final PIP results for FY2017. The Hospital reached 98% of its goals making the payout 2.94% out of a possible 3%. The PIP payout will be in the form of a direct deposit on December 7, 2017.		



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		3. Sue Brown, EVP, Operations and Patient Care Services announced her retirement from Greenwich Hospital effective February 2, 2017.		
Open discussion		Oncology unit based council is collecting for patient to be recipients of Holiday Baskets.	Data attached	
		Nancy, Marybeth and Kristina presented data on call volume from the front desk to infusion nurses. Nancy and Marybeth	and Kristina t	
		worked with reception staff to collect data on the number of calls placed to infusion to alert them that a patient was ready for their infusion appointment. Length of call time was	.	
		collected. After review of the data, it was determined that time spent on phone from front desk to back treatment area		
		was approximately 65.3 minutes over a two-week period. A total of 134 calls were placed ranging from 10 seconds to 60 seconds. The data also confirmed that many calls were being		
		missed resulting in additional calls being made by the reception staff. Messages left for nursing by the reception		



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		staff were also not picked up in a timely manner thus increasing patient wait times. Discussion ensued about having a column added to the patient schedule so that patients could be pre-assigned to their infusion nurse. All providers could then easily view the nurse caring for their patient. Colored dot system can then be used		
		to indicate patient status (i.e. yellow=ready for MA, green=ready for MD, red=MD visit in progress, black=MD visit completed, blue=ready for infusion).		

Respectfully submitted, Irene Piazza



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