

NewYork-Presbyterian

FORUM

News and Information for the Alumni of NewYork-Presbyterian Hospital Spring 2011



We Put Patients First:
Our Commitment to
Quality and Patient Safety



Top Ranked Hospital in New York.
Ten Years Running.

We Put Patients First: Our Commitment to Quality and Patient Safety



(From top) Drs. Eliot Lazar,
Herbert Pardes, and Steven Corwin

"During the past two decades, there has been a shift to a greater recognition of the role everybody in the hospital plays in the delivery of care to the patient," says Herbert Pardes, MD, President and CEO of NewYork-Presbyterian Hospital and Health-care System. "Physicians are part of a team that is well coordinated, integrated, effective, and responsive to the patient's and family's needs. We have developed and implemented a quality and safety infrastructure that reaches into every department."

"In an era of health reform, we face the challenge of having to reduce costs while providing care more efficiently, while remaining focused on our commitment to patients and families," says **Steven J. Corwin, MD**, Executive Vice President and Chief Operating Officer, NewYork-Presbyterian Hospital. "We continue to pursue strategies that will transform the patient experience through innovative programs in quality and patient safety, as well as the use of information technology."

NewYork-Presbyterian is committed to providing the highest quality and safest patient care to our patients. In January 2011, Hospital leadership, including administration, physicians, nurses, and other clinicians, gathered in midtown Manhattan for our annual kick-off event themed *"We Put Patients First... ALWAYS."* This includes delivering the best clinical care, focusing on every patient interaction, and adhering to the highest standard of quality and patient safety. We have made significant progress in quality and patient safety, undertaking numerous initiatives across the continuum of care. These initiatives include areas such as medication safety, communication/culture of safety, surgical and procedural safety, infection prevention and control, outcomes/efficiency, and environmental health and safety.

"Effective communication among caregivers is critical to the success of our efforts," says **Eliot J. Lazar, MD, MBA**, Senior Vice President and Chief Quality and Patient Safety Officer, NewYork-Presbyterian Hospital. "We have implemented a number of initiatives around this, including a patient hand-off approach known as SBAR where the clinicians review the **S**ituation, **B**ackground, **A**ssessment, and **R**ecommendations for the patient before transferring care to a new provider."

Another initiative around communication has led us to

eliminate errors when caregivers are distracted from the important work they are doing. We have implemented a "Zone of Silence" on our inpatient units that minimizes interruptions when staff are performing important tasks such as medication administration. The "zone" can either be a physical barrier or an indication through signage that a person should not be disturbed. Many of these ideas have come directly from our employees who have identified opportunities for improvement. "We had a few units that were already trying different ways of signaling to people around them so they would not be distracted during the preparation or administration of medications," says **Karen A. Scott, MD, MPH**, Vice President, Quality and Patient Safety.

Another major priority is reducing central line infections. NewYork-Presbyterian has instituted a number of interventions, including checklists and central line kits, standardizing the process for optimal infection control Hospital-wide. Increased efforts on implementing practices to reduce infections related to urinary catheters and ventilator-associated pneumonias are also underway, with goals relating to implementing best practices and meeting specific targets.

2010 also saw positive results from the launch of the Hospital-wide Rapid Response Team (RRT), which showed a 25 percent reduction in the number of events occurring outside of the ICUs on both campuses. Patients, family members, and staff are now empowered to call the RRT when they suspect that a change in the condition of a patient has occurred. The team is able to assess the patient and provide interventions before any further decompensation takes place. "As much as I really believed in the RRTs and thought they made a lot of sense," says Dr. Scott, "it was still stunning to see the data. We're able to respond to the patients



(From left) Helping to lead NewYork-Presbyterian's quality and safety efforts are Brian Regan, Wilhelmina Manzano, Aurelia Boyer, and Dr. Karen Scott

earlier so that a major cardiac event is avoided or we're transferring them to the ICU if that's where they need to be. RRTs are now part of the Hospital's culture."

Over the last few years, the organization has been focusing on the importance of hand hygiene as a basic technique for infection control. Compliance rates now range from 93 to 99 percent – up from the lower 60th percentile when we started. The incidence of pressure ulcers and falls, important indicators of nursing quality, are lower than the national averages.

The Department of Nursing has developed a structure to monitor clinical indicators, which are reported on an integrated scorecard across all inpatient sites. "Data are used for tracking and trending performance and monitoring results of implemented performance improvement strategies," says **Wilhelmina M. Manzano, MA, RN, NEA-BC**, Senior Vice President and Chief Nursing Officer, NewYork-Presbyterian Hospital and Healthcare System. "National databases allow us to compare or benchmark patient outcomes and staffing patterns at the unit and Hospital-wide level with other facilities of the same bed size."

In addition, Ms. Manzano notes, "front-line, staff-driven performance improvement initiatives and staff-led committees, with support from leadership, can be very effective in improving the quality, patient-centeredness and efficiency of the Hospital. Last year, the Department of Nursing established the nursing fellowship in quality and patient safety. The fellowship provides the staff with an opportunity to gain an in-depth understanding of national and organizational quality and patient safety initiatives. They will serve as a resource and mentors to other staff and participate in many of the unit-based quality projects."

Many of our key quality and patient safety initiatives are driven by the availability of actionable data. Advanced clinical analytics increasingly inform decisions at both the patient and the population level. "Our goal is to use all of our information technology to help achieve the best clinical outcomes, as well as to provide care more efficiently," says **Aurelia G. Boyer, RN, MBA**, Senior Vice President and Chief Information Officer, NewYork-Presbyterian Hospital. "We have already begun to use

real-time information to manage both the care of individual diabetes patients, as well as a cohort of diabetes patients. Similarly, we are able to use real-time data to manage the care of individual patients with infections, and track and manage infections on an entire inpatient unit."

One such example of an information technology initiative to improve the care for our patients is the use of AMALGA, a clinical analytics tool developed by Microsoft that allows clinicians to extract clinical metrics in real time from multiple patient records, facilitating the examination of trends in groups of similar patients. For example, NewYork-Presbyterian clinicians were able to investigate factors they believed to be contributing to the development of postoperative sternal wounds following cardiac surgery. By examining patient metrics in aggregate, cardiac surgeons were able to identify predictive risks and create a protocol to successfully reduce this serious surgical complication. "Through data analysis of patterns, trends, and comparison to internal and external benchmarks, the Hospital is able to identify areas of concern and opportunities for performance improvement," adds **Brian K. Regan, PhD**, Vice President, Quality and Patient Safety. "We will continue to leverage all of our clinical information systems and health information technology to support these efforts."

All of the quality and patient safety initiatives are directly related to our core mission of ***We Put Patients First***. Our commitment to care is driven by achieving the highest level of quality and patient safety for our patients. The advancements that we have made in the past few years have created a framework that will help us to ensure a consistent level of care for all our patients. "When I think back to my time in medical school, one didn't question when someone got a central line infection or why a patient was back in the Hospital so soon," notes Dr. Scott. "I think much of the quality improvement and safety work over the last few years has changed the way we think about hospital-acquired infections, re-admission rates, and the inevitability that a hospitalized patient will get a DVT. We're all learning that it's really important to continue to try to improve patient outcomes."

Housestaff Quality Council Leads the Physician Movement

Last November, the Accreditation Council for Graduate Medical Education (ACGME) presented the 2011 David C. Leach, MD, Award to the Housestaff Quality Council at NewYork-Presbyterian/Weill Cornell for innovative contributions to graduate medical education. The national honor was well-deserved. Not only does the Housestaff Quality Council enhance NewYork-Presbyterian's residency programs, it has taken the lead in many efforts to improve the quality and safety of clinical care.

Gregory S. Kerr, MD, MBA, Director of Cardiac Anesthesia at NewYork-Presbyterian/Weill Cornell, conceived the idea of forming a council to improve communication with housestaff as it relates to patient safety priorities. With Dr. Kerr's oversight, the involvement and dedication of then residents Peter M. Fleischut, MD, and Adam S. Evans, MD, and the enthusiastic support of senior Hospital administration, the Housestaff Quality Council was launched in April 2008. Its remarkable success led to the formation of a Hospital-wide Housestaff Quality Council comprised of members who are ardent supporters and architects of some of the Hospital's most successful quality and patient safety efforts.

The overarching goals of the Housestaff Quality Council (HQC) are to:

- decrease and/or minimize adverse events
- facilitate dissemination of information to peers
- assist in compliance with Hospital policies and procedures
- establish relationships between large housestaff groups, administrators, nurses, and key physicians
- measure outcomes and determine best practices.

The HQC is comprised of one to two members from each of the Hospital's residency programs, as well as representatives from senior administration, and physician and nursing leaders. The Council meets monthly and has already accrued a number of accomplishments in its short history. One such project focused on the potential for medical errors around the potency and dosing of Dilaudid versus morphine. To obtain a full understanding of practitioner prescribing patterns for Dilaudid, the HQC examined the computerized physician order entry system, developing a multimodal approach to address the use of Dilaudid with interventions that included:

- computerized physician order entry dosage changes
- patient safety alert issued to housestaff
- written communication with housestaff
- creation and distribution of an opioid conversion card.

The successful Dilaudid campaign resulted in a 50 percent reduction in doses of 0.8 mg to 2 mg.

The HQC is now focused on addressing patient pain scores; clinical "triggers" for contacting attending staff about changes in patient status; continuing to improve central venous catheter

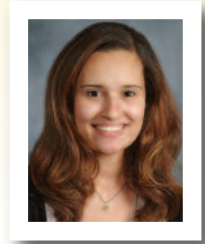
2010-2011

HOUSESTAFF QUALITY COUNCIL LEADERSHIP

NewYork-Presbyterian/Weill Cornell

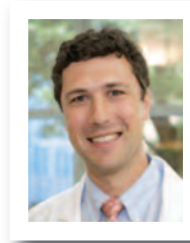


*William C. Nugent, MD, MBA
Department of Surgery
Chair, Housestaff
Quality Council*



*Samantha Brenner, MD, MPH
Department of Medicine
Vice Chair, Housestaff
Quality Council*

NewYork-Presbyterian/Columbia



*Charles Jobin, MD
Department of Orthopedic Surgery
Co-Chair, Housestaff
Quality Council*

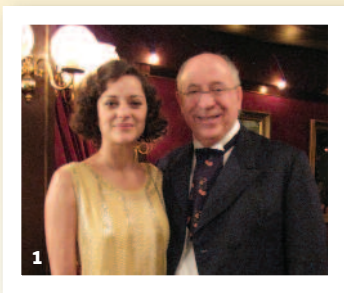


*Laura Kent, MD
Department of Psychiatry
Co-Chair, Housestaff
Quality Council*

safety; streamlining "time to MRI" for stat MRIs; protecting confidential patient information in the setting of increasing use of electronic media; and improving the phlebotomy process overnight in the Hospital. They have also adopted a bi-campus position statement on the use of social media.

"More and more, residents want to get involved, more administrators want to come to the meetings, and more people are searching for HQC input on how to do things better," says Dr. Kerr. "There are some 800 house officers at NewYork-Presbyterian Hospital, and we want every single resident to feel they can make a valuable contribution to quality and patient safety efforts and can speak up on behalf of their patients to make needed improvements."

NEWS AND NOTES



1 Ken Edelson with Marion Cotillard

2 With Woody Allen in 2010

3 With Woody Allen in 1986



1970s

Kenneth L. Edelson, MD, FAACS 1978 *Residency, Dermatology, New York-Hospital-Cornell Medical Center* Dr. Edelson was recently promoted to Assistant Clinical Professor of Dermatology, The Mount Sinai School of Medicine, and Attending Physician, The Mount Sinai Hospital. Wearing his other hat as an actor, this past summer Dr. Edelson appeared in the latest Woody Allen film, *Midnight in Paris*, with Marion Cotillard and Owen Wilson. This completes his 14th Woody Allen film since 1990!

1980s

Howard J. Birenbaum, MD 1983 *Residency, Pediatrics, and Fellowship, Neonatal-Perinatal Medicine, New York Hospital-Cornell Medical Center* Dr. Birenbaum, who directs a 30-bed Level III-B Neonatal Intensive Care Unit at Greater Baltimore Medical Center, was recently named a "Top Doc" in Neonatal Perinatal Medicine in *Baltimore Magazine*. "I will be celebrating my 35th wedding anniversary to Debbie in June. We have three grandchildren with one on the way."

1990s



Michele David, MD, MPH, MBA, FACP 1991 *Residency, Internal Medicine, New York-Presbyterian Hospital* Dr. David is Director of Community Health Programs at Boston University National Center for Excellence in Women's Health and Co-Director,

Haitian Health Institute at Boston Medical Center. In 2010, she received the prestigious William A. Hinton Award recognizing her many years of activism, commitment to public health, and tireless efforts to eliminate health inequities. Dr. David was also selected as one of the artists to have a quilt exhibited in the *Audubon in Cloth* by the Ohio Valley Art League. To read more about Dr. David's artwork visit <http://www.creole-creations.com/>



2000s

Guillermo Quetell, MD, FACS 2002 *Residency, Plastic Surgery, New York-Presbyterian Hospital* In November 2010, Dr. Quetell was appointed Chief of the Plastic Surgery Division at Community General Hospital in Syracuse, New York.

Shahla Siddiqui, MD 2002 *Fellowship, Critical Care Medicine, New York-Presbyterian/Columbia* Dr. Siddiqui practices in anesthesia and critical care at the Aga Khan University in Pakistan. She will be moving to Singapore soon with her husband and two boys. "We are very excited! Miss New York a lot, especially in the holiday season."



SOCIETY OF THE ALUMNI MEETING HELD

On Tuesday, November 16, 2010, the New York-Presbyterian/Columbia Society of the Alumni honored two distinguished alumni: Dr. Welton Gersony, the Alexander S. Nadas Professor of Pediatrics and former Chief of Pediatric Cardiology, and Dr. Mieczyslaw (Mike) Finster, Professor Emeritus of Anesthesiology and Obstetrics & Gynecology, at its annual alumni dinner. Featured guest speaker Dr. Edward Miller, Dean of the Medical Faculty and Chief Executive Officer of Johns Hopkins Medicine, and former Chairman of Anesthesiology at New York-Presbyterian/Columbia, spoke to an audience of more than 140 guests.

The Society of the Alumni provides many opportunities to stay connected to friends, mentors, and current and former colleagues, and is launching an online alumni directory in January to facilitate communication even further. To learn more about the Society, please contact the Development Office at (212) 342-0954.

The New York-Presbyterian Society of the Alumni Executive Committee joins in celebrating the 2010 honorees. Top row, left to right: Michael Kazim, MD, George M. Lazarus, MD, Chun K. Yip, MD, James M. McKiernan, MD; Bottom row, left to right: Katarina Eisinger, MD, Joseph Haddad, Jr., MD, Gail S. Williams, MD, Mieczyslaw (Mike) Finster, MD (Honoree), Welton M. Gersony, MD (Honoree), and Joshua E. Hyman, MD



EXPANDED ROLE FOR DR. RICHARD LIEBOWITZ



Richard S. Liebowitz, MD, MHSc, Vice President of Medical Affairs, has assumed an expanded role as Associate Chief Medical Officer of New York-Presbyterian Hospital. Dr. Liebowitz will continue to direct, plan, and coordinate the Hospital's medical staff activities, including medical affairs and graduate medical education. Additionally, he will work closely with the Chief Medical Officers to assist in managing service lines, developing clinical programs, and recruiting physicians.

Dr. Liebowitz joined New York-Presbyterian Hospital as Vice President of Medical Affairs in 2006. During his tenure, he has worked closely and successfully with the Medical Board and other physicians in providing leadership for graduate medical education, physician training, privileging, and credentialing, and managing Hospital/physician relationships.

"I look forward to maintaining the high level of quality care we currently provide to all our patients," says Dr. Liebowitz. "I also would like to help identify and recruit the next generation of clinical leaders."

A graduate of Rutgers Medical School and the Internal Medicine program at University of Massachusetts, Dr. Liebowitz has also served as the Medical Director of Strategic Initiatives and Network Business Development at Duke University, and in various roles, including Medical Director and Director of Education at the University of Arizona College of Medicine.

Office of Medical Affairs

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Top Ranked Hospital in New York.
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SIGN UP FOR CME

Continuing Medical Education (CME) activities are provided through **Columbia University College of Physicians and Surgeons:** (212) 305-3334 and **Weill Cornell Medical College:** (212) 746-2631. Both institutions are accredited by the Accreditation Council for Continuing Medical Education (ACCME) to authorize and issue CME credit. For all upcoming educational events through NewYork-Presbyterian Hospital visit www.nyp.org/pro.

Advanced Endoscopic Skull Base and Pituitary Surgery – Hands on Symposium

Dates: June 10-11, 2011
Location: Weill Cornell Medical College, Uris Auditorium
1300 York Avenue (at 69th Street), New York
For more information and registration, contact Jessica Grajales at (212) 585-6800 or jeg9059@nyp.org

8th New York Symposium on Neurological Emergencies and Neurocritical Care

Date: June 14-17, 2011
Location: New York Academy of Medicine
1216 Fifth Avenue (at 103rd Street), New York
For more information and registration, call (212) 305-3334 or visit <http://nyneurosymposium.columbia.edu/>

2nd Annual New York Fetal Cardiovascular Medicine Conference, Fetal Heart Failure: Diagnosis and Management

Dates: June 25, 2011
Location: Vivian and Seymour Milstein Family Heart Center
173 Ft. Washington Avenue, New York
For more information and registration, call (212) 305-3334 or go to: columbiacme.org

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PROFESSIONAL RESOURCES

NewYork-Presbyterian Alumni Website—nyp.org/alumni

The Alumni Association website is a valuable resource for the more than 10,000 physicians who have trained at NewYork-Presbyterian.

Physician Career Initiative—nypsystem.org/physicians

The Physician Career Initiative alerts residents, fellows, and alumni trained at NewYork-Presbyterian and NewYork-Presbyterian Healthcare System hospitals to potential employment opportunities within System-affiliated hospitals and regional physician practices. To register, go to www.nypsystem.org/physicians. You will receive e-mail announcements of available positions that match your criteria and career requirements.

Educational Programs—nyp.org/pro

- Webcasts
- Medical Presentations
- CME Activities
- Newsletters

For more information about campus-specific Alumni Associations, contact:

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