

Medical Staff News

Newsletter for the Medical Staff of Bridgeport Hospital | November 2021

Yale
NewHaven
Health
Bridgeport
Hospital

From the desk of the CMO

Colleagues,

We closed out fiscal year 2021 with a declining population of patients with COVID-19 disease. The beds, however, continue to remain full and our emergency departments and urgent care centers are as busy as ever.

Bridgeport Hospital begins the year with new clinical leadership. Dr. Karen Gibbs, Chair of Surgery, joined us from Northwell Health on Sept. 1. We welcome Dr. Peter Morgan to chair our department of Psychiatry. Dr. Morgan comes to us from Lawrence + Memorial Hospital where he also chaired the department of Psychiatry. BH named Dr. Hamid Mojibian as the interim chair of Radiology. In addition, Dr. Richard Bercik is the interim chair of Obstetrics and Gynecology. National searches are underway for chairs of Radiology and Obstetrics/Gynecology.

The fiscal 2022 budget is a growth budget. We are excited about our new leadership and new physicians increasing the depth and breadth of our care. That said, we are challenged by capacity. Patients regularly board in overflow beds and in the emergency departments. Postoperative patients remain in PACU's awaiting discharges. Both Bridgeport and Milford Campuses are full. As many of you know, every day a patient remains hospitalized after clinically ready for discharge presents risk for the patient. We must improve our efficiency.

Yale New Haven Health identified decreasing length of stay as a top priority for this year. The health system has made investments in technology and in people and there is a team focused on length of stay. We have new, live dashboards tracking length of stay, patients ready for discharge, barriers to discharge, predicted discharges by floor and more. (See link for Integrated Leadership Dashboard in this issue.). Here at BH, Dr. Monique Misra, executive director of Hospitalist Services, and Bill Sotire, RN, patient service manager Podium 3, lead our length of stay team and are

coordinating with the system. We also have Dr. Kristin Sikorski, associate director of Hospitalist Services, as our daily lead on reducing excess days, rounding and intervening to assist with discharges. We will hire more hospitalists, social workers and care coordinators. Length of stay will be a daily focus for all of us.

Welcome to our new leadership. We look forward to working with you as we continue grow, expanding our scope of care, and overcoming the challenges we face.

Vic

CMO, SVP Medical Affairs, Bridgeport Hospital

Get your flu vaccination - deadline Dec. 1

The YNHHS mandatory flu vaccination program is underway. The medical staff at each health system hospital, including physicians affiliated through Northeast Medical Group and Yale Medicine must receive their vaccination by Wednesday, Dec. 1, 2021.

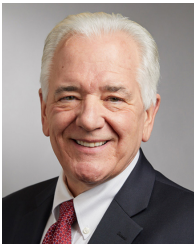
Members of the medical staff can receive the flu vaccine, free of charge, by appointment at multiple locations across the health system. YNHHS-employed members of the medical staff should schedule a vaccination appointment by logging into Infor and choosing Flu Consent/Vaccination in the Employee Health Widget. Medical staff not employed by YNHHS can sign up via [open scheduler](#) using Microsoft Edge, Google Chrome or Mozilla Firefox.

In addition to the YNHHS on-site locations, medical staff may also obtain their flu shot from their primary care provider (PCP); a participating pharmacy in the CVS Caremark vaccination network, which includes CVS and Walgreens; or from a CVS Minute Clinic and provide their documentation by uploading it to ESS or emailing it to fluinfo@ynhh.org.

Welcome to new Bridgeport Hospital clinical leaders



This month, BH welcomes **Peter Morgan, MD, PhD**, as the new chair of the department of Psychiatry. After graduating from Yale University in 1992, Dr. Morgan received his PhD and medical degree from Mount Sinai School of Medicine. Dr. Morgan comes to us from Lawrence + Memorial Hospital where he served as chair of Psychiatry.



On Nov. 1, **Richard Bercik, MD**, began his role as interim chair of Obstetrics and Gynecology. Dr. Bercik brings over 35 years of clinical and administrative experience, most recently serving as director of Urogynecology and associate professor, Clinical Obstetrics, Gynecology and Reproductive Sciences and of Urology, Yale School of Medicine. Prior to joining Yale, Dr. Bercik served on the faculty of NYU School of Medicine. After completing medical school at the University of Medicine and Dentistry of New Jersey, he trained in Obstetrics and Gynecology at NYU and Bellevue Hospital.



Also this month, **Hamid Mojibian, MD**, was appointed interim chair of Radiology. Dr. Mojibian was most recently director of cardiac CT/MR Imaging for Yale Medicine's Department of Radiology & Biomedical Imaging where he was part of a team that performed cardiac imaging studies to detect heart problems. He also performed minimally invasive interventional cardiac procedures such as thrombectomy to remove pulmonary embolisms.

Check out the Integrated Leadership Dashboard for up-to-date information

Check out the YNHHS Integrated Leadership Dashboard each day for up-to-date real time information including on inpatient and ICU census, number of COVID-19 patients, vaccination statistics, as well as information on numbers of readmissions, hospital acquired infections and more. The ILD can also be found at <http://ild/#/>.

BH represented on the new Advanced Practice Executive Council

As YNHHS recognizes the importance of advanced practice providers (APP), Beth Beckman, DNS, RN, chief nursing executive and Tom Balcezak, MD, chief clinical officer, recently announced the formation of the Advanced Practice Executive Council (APEC). APEC will build upon the success of the Nursing Executive Council (NEC) and Physician Executive Council (PEC).

The APEC is a system-wide council committed to inclusive innovation, excellence in APP practice and leadership. Their mission includes advancing YNHHS strategic objectives, with the vision to create a diverse and inclusive APP community that is innovative, inspiring and inquisitive.

Chief nursing officers and chief medical officers from across the health system selected the members of APEC, who represent the advanced practice professions in our system. **Claribel Agosto, PA**, and **Alison Robb, PA**, represent Bridgeport Hospital on the APEC. In addition to physician assistants, advanced practice professions represented on the APEC include nurse practitioners, certified nurse midwives and certified registered nurse anesthetists.

APEC has begun working on a strategy for enhancing advanced practice across our health system. If you have any questions or suggestions for the APEC, write to APEC@ynhh.org.

Stroke, Bariatric programs reaccredited

Bridgeport Hospital's stroke program has been reaccredited for an additional three years by The Joint Commission. Surveyors recently visited the hospital to verify that it is following strict national protocols. They praised the hospital and its staff for its skill and knowledge of stroke care.

BH's Bariatric Surgery program was also recently reaccredited after a comprehensive review by the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP). The surveyors noted, "Bridgeport Hospital is a standout bariatric program."

The Care Signature - Qs and As

An interview with Deborah Rhodes, MD, vice president of Care Signature and associate chief medical officer, Yale New Haven Health, and internist, General Internal Medicine division, Yale School of Medicine.

What is a Care Signature?

Yale New Haven Health's Care Signature is its recognizable stamp of the highest-quality care delivered by every caregiver in our health system at every site, every day. It is our pledge to patients that no matter where they enter our doors and who delivers their care, they will receive our collective best practice.

I saw many elements of Care Signature when I arrived here shortly after YNHHS' first COVID admission. I observed groups with representation from all of the health system's delivery networks meeting daily to review the evolving COVID evidence, share resources, streamline processes and reach and communicate consensus on how best to care for COVID patients.

Why is a Care Signature important?

Every patient's outcome depends upon a collection of many different clinical decisions and processes implemented by many different care providers. There is an enormous amount of variation in these decisions and processes. Some variation is necessary to provide individualized care that meets each patient's unique needs. But variation can be harmful if it leads to inefficiencies, excess costs or unsafe decisions. Standardizing the things that can and should be standardized is just as important in medicine as it is in other environments where lives are at stake – like the airline industry, which was among the first to embrace this.

How does having a Care Signature help healthcare professionals?

Medical advances happen so quickly, no clinician can absorb and recall all the knowledge necessary to make the many complex decisions involved in patient care. So we have to build a system – our Care Signature – to support the safest, most current processes. That system still embraces the judgment and experience of individual patients and clinicians. Our Care Signature must be built by and for our own care providers to harness our unique resources, processes and expertise.

What are Care Signature pathways?

Care Signature pathways are like the GPS for clinical navigation – they guide our clinicians and their patients

safely and efficiently from diagnosis to treatment to monitoring. Pathways provide all clinicians – from those in training to seasoned experts – all the resources they need, when they're needed, right in Epic. Care Signature pathways can improve the quality and safety of care, promote patient education and equity, reduce unnecessary tests and consults (which saves time, money and the environment) and save clinicians time.

What is an example of a Care Signature pathway?

The ICU Clinical Consensus Group has developed multiple Care Signature pathways to guide care for patients requiring mechanical ventilation. The group is comprised of physicians from different specialties, advanced practice providers, pharmacists, nurses, rehab services and respiratory therapists. They identified 15 steps involved in caring for mechanically ventilated patients, but found considerable variation in these steps across YNHHS. The group developed consensus statements on best practice for each of the care steps, which covered pain management, choice of sedative, ventilator settings and other aspects of care. The consensus statements were incorporated into the Care Signature pathway to guide care providers' orders and management going forward.

How have these ICU Care Signature pathways improved care?

Since going live in Epic a few months ago, the pathways have been used more than 600 times across YNHHS ICUs. Results include a 29 percent reduction in average sedation exposure and a 21 percent increase in the type of ventilation designed to protect the lungs. Both of these can help to reduce patients' time on the ventilator and improve their outcomes.

How are Care Signature pathways developed?

Each pathway begins by convening a Clinical Consensus Group with experts from every relevant specialty and service. This group includes members from every relevant site, including all YNHHS delivery networks with provider groups, such as NEMG, Yale Medicine and the Community Medical Group. The consensus group reviews all the medical evidence and guidelines for a particular condition, then maps each step in care. Mapping shows areas where we do not have consensus throughout the health system. To create the pathway, the consensus group builds evidence and consensus into each care step, adds whatever resources are needed to complete each step and works with Information Technology Services to incorporate the pathway into Epic.

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Who is involved in developing Care Signature pathways?

We have a team of clinicians who are incredibly skilled at building these pathways and an army of experts who have generously given their time and expertise. We have built more than 100 pathways in about 10 months with input from more than 700 experts across YNHHS. We hope to engage everyone involved in patient care across the health system in identifying opportunities to promote Care Signature through pathway development and clinical redesign.

What role do non-clinical employees play in ensuring a consistent Care Signature?

Care Signature is about much more than pathways. Each of us has an important contribution to make to the patients who entrust us with their care. The health system's current advertising campaign focuses on how YNHHS does things "... with the greatest of care." Care Signature helps to define what that 'greatest of care' is, so we can build it into everything we do for every patient.

Health System expands visitation guidelines:

Beginning this month, Yale New Haven Health expanded adult inpatient visitation system-wide. As of Nov. 1:

- Visiting hours expanded to 10 am – 8 pm daily
- Two visitors are allowed per adult inpatient per day
- One visitor, per day, is allowed for COVID positive patients

Visitation for COVID positive patients is limited to one visitor per patient, per day and the visitors must show proof of being fully vaccinated to front desk staff. Visitors must also don full PPE (gown, gloves, eye protection, and a non-fit-tested respirator) during the visit.

Exceptions for patients with disabilities and patients at imminent end of life are unchanged. Patients with disabilities are allowed a support person at all times.

Bridgeport Hospital Primary Care Center receives \$250,000 grant

BH's Primary Care Center (PCC) was recently awarded a \$250,000 grant from the Elizabeth Pfriem Foundation that will be used to fund preventative cancer screenings and the hiring of additional staff to support this work. The PCC cares for over 5,000 medically vulnerable patients each year.

Please donate to YNHHS' second virtual food drive

Food insecurity has always been a problem for people in our communities, but the economic impact of the COVID-19 pandemic has meant that even more people can't afford enough food to feed themselves and their families.

In response, YNHHS is holding its second online food drive, at <https://www.ynhhs.org/givehealthy>, now through Jan. 15, 2022. Employees and medical staff are invited to donate food to hunger-relief organizations in the communities where they live and/or work.

Last year's first GiveHealthy drive collected over 22,500 pounds of food for local hunger-relief organizations. The drive again will be conducted through #GiveHealthy, an organization that provides an online platform for hunger-relief organizations to set up "registries" listing items they need. YNHHS employees, departments and medical staff members can support one or more hunger-relief organizations in communities YNHHS serves.

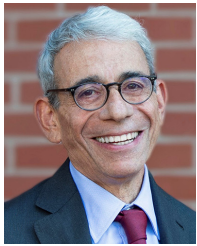
Visit <https://www.ynhhs.org/givehealthy> and choose the items you wish to purchase for a particular organization. Because the food will ship from suppliers directly to hunger-relief organizations, you will be able to purchase healthy food items, including fresh produce.

YNHHS' drive was developed and organized through a system-wide collaboration among Community Health Improvement, Community and Government Relations, Diversity, Equity and Inclusion, Human Resources, Marketing and Communications, NEMG and Food and Nutrition. For more information, visit YNHHS' GiveHealthy site, or contact Augusta Mueller, augusta.mueller@ynhh.org or 203-688-3862.

Telehealth Symposium Nov. 30

All employees are invited to the second annual Telehealth Symposium on Tuesday, Nov. 30, from 1 - 5 pm via Zoom. Keynote speakers Bruce Leff, MD, professor of Medicine, Johns Hopkins University, and Joseph Kvedar, president, American Telemedicine Association, will discuss important topics with panelists from across Yale New Haven Health. Topics will include inpatient telehealth, ambulatory telehealth, technology and current legislation and reimbursement. Visit ynhh.org/events and search for "Telehealth Symposium" to register.

Newsmakers



Eric P. Winer, MD, was named director of Yale Cancer Center and physician-in-chief of Smilow Cancer Hospital at Yale New Haven, effective February 1, 2022. Dr. Winer is currently the Thompson Chair in Breast Cancer Research, chief clinical development officer, and

senior vice president for medical affairs at Dana-Farber Cancer Institute and professor of medicine at Harvard Medical School.

After graduating from Yale College in 1978, Dr. Winer received his MD from Yale School of Medicine and completed training in internal medicine, serving as chief resident at YNHH. He completed fellowship training in hematology/oncology at Duke University School of Medicine and served on the Duke faculty from 1989 to 1997, before joining Dana-Farber and Brigham and Women's Hospital.

In his new roles, Dr. Winer will recruit and support clinicians and scientists to build on the strong programs in place and enhance collaborations between laboratory and clinical investigators. His goals are to promote paradigm-changing discovery and to build an unparalleled clinical program that offers seamless, multidisciplinary care and clinical trials to all patients, eliminating disparities in access, care, and outcomes.

View video of Greg Buller, MD, discussing vaccine in community lecture

Gregory Buller, MD, associate chief medical officer and chair of Medicine at Bridgeport Hospital, discussed "Vaccines from A to Z" during a virtual lecture presented in cooperation with the Westport Center for Senior Activities recently. Dr. Buller spoke about how chronic conditions become more common as people age and their immune system slows down. He also discussed how vaccines are immunity boosters that help prevent serious diseases at any age.

"Vaccines are not only for kids or teens," Dr. Buller said. "If you're older, you're at a higher risk for certain vaccine-preventable diseases."

Dr. Buller discussed vaccines people may need, when to get them, and why they're critical for keeping you and your loved ones healthy.

A recording of the program is available via a link on the Bridgeport Hospital intranet.

Physician leaders named safety officers



Christian Pettker, MD, (left) and **Jonathan Siner, MD**, have been named chief patient safety officer and associate chief safety officer, respectively, for YNHHS. Drs. Pettker and Siner will be the

medical leadership responsible for overseeing patient safety programs across the health system, aiming to take high reliability, error prevention, and harm reduction to the next level.

Dr. Pettker served as chief of obstetrics for YNHH since 2014 and was named associate chief quality officer in January 2019. He has led various quality and safety initiatives such as the YNHH Significant Event Review Committee (SERC), the mortality improvement project, chaperone policy implementation, the surgical site infection reduction performance improvement team and most recently the COVID-19 Call Center as well as the COVID-19 testing and vaccine enterprises.

Dr. Siner, having served as the clinical section chief for Pulmonary, Critical Care and Sleep Medicine since 2018, recently completed his term as director of the Medical ICU at YNHH. Through his roles as chair of the System ICU Committee and medical director of YNHHS Tele-ICU programs, Dr. Siner has successfully developed crucial data analytics and decision-support tools to facilitate quality and safety improvements in the intensive care units across the health system.

What is wellness?

A message from the Chief Wellness Officer

"Wellness." The word is everywhere these days. Some people have it. Many people don't (we ARE still in a pandemic, after all). And most people still hear the word and immediately think of yoga and meditation. What do people really mean when they talk about "wellness"?

Wellness can be defined in many different ways, and that is part of what leads to this confusion. Most definitions include a component of good health or wholeness that results from an active, intentional practice. While we can all agree that burnout isn't wellness, it's important to remember that

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wellness isn't only the absence of burnout. In the realm of physician and advanced practitioner wellness, the emerging paradigm is to promote wellness as a focus on "professional fulfillment." Because professional fulfillment is affected by a blend of both individual and organizational factors and their interaction, an organizational wellness strategy needs to incorporate efforts to enhance all of those factors. These individual and organizational factors, and their interactions, are well illustrated in the professional fulfillment model developed by Stanford in 2016 (see chart at right). Each of the three components interact with each other: a workplace that is efficient, gives us more time to spend on things that build our personal resilience like relationships, but having more personal resilience, such as hope and gratitude, also gives us the energy to spend on making our workplace more efficient.

In the spring of 2020, in recognition of the severe stresses of the pandemic in addition to already existing challenges in health care, Yale New Haven Health launched its initial organizational approach to wellness and professional fulfillment. This approach included the development of a system committee called WELD (Wellness, Engagement and Leadership Development) and the establishment of wellness leads at our delivery networks. In July 2020, my previous wellness work, which developed as a natural extension of my palliative care specialty, was formalized in my role as Bridgeport Hospital's inaugural chief wellness officer.

So, what does a chief wellness officer do? It's certainly not leading yoga and meditation. I'm not that flexible! As an inaugural position, the chief wellness officer role will continue to evolve. The principal focus, however, will always be to enhance a work culture in which people can thrive and flourish, and to support programs which address our culture, workplace efficiency, and/or individual wellbeing. By focusing on the organizational factors highlighted by the Stanford model, we can help align existing programs with the goal of professional fulfillment. This model can also help us understand that much of what impacts professional fulfillment isn't necessarily labeled a "wellness program." For example, the Building Against Burnout series helps clinicians learn how to invest some time upfront to streamline Epic usage to create a more efficient work process in the long run. Many of these wellness efforts are already in process and development by skilled leaders across the system. As the Bridgeport Hospital chief wellness officer, I work with our leaders to help communicate these efforts and align them with existing needs to bring increased professional fulfillment to all of us.

While there is much to be done, I am grateful to be part of the team working to bring joy back into the professional lives of the colleagues I admire and respect so much.

With gratitude,
Kristin Edwards, MD, Chief Wellness Officer

The Stanford Model of Professional Fulfillment™



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Newsletter submissions

Deadline for submission of content for the December 2021 issue of *Medical Staff News* is Friday, Nov. 26. Please submit items for consideration to Alison Tighe at alison.tighe@ynhh.org or Myra Stanley at myra.stanley@ynhh.org.