# **Medical Staff News**

Newsletter for the Medical Staff of Bridgeport Hospital | February 2020

### Yale NewHaven Health Bridgeport Hospital

### From the desk of the CMO

I'd like to open my final message as Bridgeport Hospital interim chief medical officer with gratitude - to you. It has been an honor to get to know you and work closely with you during my 16 years at Bridgeport Hospital. Above all, I deeply value the trusting relationships we have built over the years. The partnership between my team and the medical staff officers, medical executive committee and all those they represent has been very meaningful as well as impactful.

We have so much to be proud of. We are a much larger, more diverse medical staff, having grown in primary care as well as specialties. Our intersection with Yale New Haven Hospital's medical staff is now very significant, and within the past year alone, we have been joined by more than 100 new medical staff members who had practiced at the former Milford Hospital. Despite this, or perhaps in part because of this, at last measurement, Bridgeport Hospital's medical staff alignment with the hospital was in the top 25 percent nationally.

As of March 1, I'll have moved over to a role in Northeast Medical Group as the vice president of Wellness and Engagement (see announcement details on page two). My expectation is to continue to work closely with you in this role - indeed, you are the reason the role exists. My number isn't changing - it's 203-293-5982. Please call me any time.

#### Ryan O'Connell, MD, Interim Chief Medical Officer

### **Hot Topics**

The next Hot Topics breakfast will be on Monday, April 13, where the speakers will be Lisa Stump, chief information officer, YNHHS and Yale School of Medicine and Allen Hsiao, MD, chief medical information officer, Yale School of Medicine and YNHH.

### YNHHS educates public about the coronavirus

News of the coronavirus, called the 2019 Novel Coronavirus or COVID-19, has prompted concern about risk of transmission in the United States. Although influenza viruses and coronaviruses have similar symptoms, the risk of catching the flu in the U.S. remains far greater.

The COVID-19 is associated with mild-to-severe respiratory illness with fever and cough. Healthcare associated spread of COVID-19 has been identified. Medical staff have been advised that patients who may be at risk for COVID-19 infection must be identified upon presentation to allow rapid isolation and use of proper personal protective equipment.

- 1. All patients presenting for care at any location must be screened to determine:
  - a. If the patient has a fever or signs/symptoms of a lower respiratory tract illness (e.g., cough or shortness of breath) AND has traveled within China during the 14 days before the onset of their respiratory illness.
  - b. If the patient has a fever or signs/symptoms of a lower respiratory tract illness (e.g., cough or shortness of breath) AND has had close contact to another person with confirmed COVID-19 infection within 14 days of onset of their respiratory illness.
- 2. In Emergency Department triage and Ambulatory care registration locations, the Epic Travel Screen must be used.
- 3. YNHHS Information Technology Services is updating the Epic Travel Screen and further enhancements are expected.

Yale New Haven Health has taken steps to remind the public that the health system's walk-in/urgent care centers offer convenient, professional medical attention for non-life threatening conditions including the flu and common cold and that the Video Care OnDemand service provides video access to clinicians for minor medical concerns.

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In addition, Rick Martinello, MD, YNHHS medical director, Infection Prevention has provided general overview information via video, accessible to the general public at www.ynhhs.org. Medical staff and employees may find the most up-to-date information, documents and resources in the COVID-19 Toolkit, on the intranet Infection Prevention departmental site at http://dept.ynhh.org/infectionprevention as well as on the CDC website at www.CDC.gov.

### Medical Staff leadership changes

In a recent memo to hospital and medical staff leadership, Bridgeport Hospital President Anne Diamond announced that Ryan O'Connell, MD, will be leaving his role as interim chief medical officer and moving to a new position as the vice president, Wellness and Engagement, at Northeast Medical Group. In this new role reporting to Prathibha Varkey, MBBS, CEO and president, Dr. O'Connell will be working as a strategic partner with NEMG medical leadership on several key initiatives including wellness, hospitalist patient engagement, and medical education. He will begin at NEMG on March 1.

While the search for a permanent chief medical officer is underway, CMO duties will be shared among the current associate chief medical officers, Greg Buller, MD, Victor Morris, MD, and Rockman Ferrigno, MD.

### **Newsletter submissions**

Deadline for submission of content for the March 2020 issue of *Medical Staff News* is Monday, March 2. Please submit items for consideration to Victor Morris, MD, at victor.morris@ynhh.org, 203-453-0361 or Myra Stanley, Yale New Haven Health at 203-688-1531 or myra.stanley@ynhh.org.

# U.S. News & World Report voting now underway

U.S. News & World Report, working with Doximity, has opened voting for the news magazine's annual "Best Hospitals" issue. All board-certified physicians within each of the applicable specialties surveyed (i.e., Cancer, Cardiology/CT Surgery, Diabetes/Endocrinology, ENT, Gastroenterology/GI Surgery, Geriatrics, Gynecology, Nephrology, Neurology/Neurosurgery, Ophthalmology, Orthopedics, Psychiatry, Pulmonology, Rehabilitation, Rheumatology and Urology) should have received a request to vote in the U.S. News reputation ranking either via email or as a prompt when logging in to Doximity.

Please take this opportunity to make your voice heard about the exceptional care that is provided across Yale New Haven Health. Our system hospitals and ambulatory practices are home to exceptional physicians who continually advance medicine through safe, high quality and compassionate care provided to our patients. We believe that the reputation of the entire health system would be greatly enhanced if Yale New Haven Hospital is voted onto the Honor Roll. One barrier to this historically has been the reputational score which is determined by your vote. We would urge you to consider this as you cast your vote during the voting period. Thank you for your participation.

### Caregivers honored by patients

The Bridgeport Hospital Foundation announced the following clinical staff members were recognized by patients in January with a gift to the Honor Your Caregiver program: Michele Attard, LMT; Marina Blagodatny, MD, CMD; Bridgeport Hospital Progressive Care Unit (WT8) Staff; Laurie Champagne, RN; Lee Goldstein, MD; Dalina Muharemovic, RN; Colleen Reilly (two gifts in her honor); Brenda Renzulli, APRN.

#### Newsmakers



Kevin Billingsley, MD, has been named chief medical officer, Smilow Cancer Hospital and Yale Cancer Center. In this role, Dr. Billingsley will oversee clinical cancer care across Smilow, YCC and the Smilow Cancer Care Centers, as well as clinical program development for cancer services throughout Yale New Haven Health.



LeeAnn Miller, PharmD, has been named vice president and chief pharmacy officer, Yale New Haven Health Corporate Pharmacy Services. She joined YNHH in 1998 as a clinical pharmacist in the Surgical Intensive Care Unit and has held various leadership positions, serving most recently as executive director and associate chief pharmacy officer of YNHHS Corporate Pharmacy Services.

# Growing popularity of telehealth is changing healthcare delivery



Dr. Werdmann, (second from left) with Heather Pollock, RN, Laurie Finta, clinical systems engineer, Technology Services and Jenna Gaillard, telehealth trainer.

Telehealth continues to be an area of ongoing growth with new programs being developed throughout our health system. At Bridgeport Hospital, Rockman Ferrigno, MD, chief, Emergency Medicine, championed the implementation of a pilot using telehealth to assess how to get patients who arrive in the Emergency Department with lower-acuity issues seen more efficiently.

For this pilot, identified patients are asked if they would like to have an immediate telehealth video visit with a provider or wait longer for a face-to-face visit. For many of these cases, a video visit offers a fast and convenient option for the patient to get the care and attention they need. Michael Werdmann, MD, the clinical champion for the pilot, served as the remote ED physician. The patient sits in a designated telehealth room, where Dr. Werdmann connects with them via our telehealth platform, or In-Touch Cart. Once the consult is complete, the patient receives their after-visit summary.

Kenneth Forte, data management specialist, Justin Cahill, MD, and Keri Bill, RN, assistant nurse manager, also participated in the go-live planning and implementation, helping to ensure the success of the pilot and the future of the project.

Telehealth programs offer improved access to our clinicians, while providing expedited services to our patients. If interested in more information about telehealth at YNHHS, please contact the Yale Medicine/YNHHS Telehealth team telehealth@ynhh.org or ymtelehealth@yale.edu.

## Medical Staff Executive Committee January 13, 2020

**Ryan O'Connell, MD, for Anne Diamond, president:** Increased expenses associated with the Milford integration was the cause of a thin 0.5 percent operating margin for November. There was a lot of overtime associated with preparation for The Joint Commission. Discharges ahead of last year were slightly below budget. In general, budgeting was very aggressive for the current fiscal year. Length of stay was close to budget. Observations, which includes ED observations, were well ahead of budget. Surgeries were on target. ED visits were slightly off, though well ahead of last year. Outpatient visits were ahead, mostly due to lab. The average daily census at MC of approximately 30 is far better than last year.

**Ryan O'Connell, MD, interim chief medical officer:** The Physician Leadership Summit will be held at Tashua Knolls, with speaker Darrel Harris on "Leading through Change." The MD Summit is tentatively scheduled for May 6. The Physician of the Year award will be announced, and there will be a speaker from the Cleveland Clinic who is an expert on physician leadership. The code for accessing free Yale CME is BPT20.

There was an extended discussion of do's and don'ts regarding accessing electronic medical records if one is not involved in a patient's care. One is allowed to look at one's own record. But as a general rule, do not access records of family members without written permission to do so.

Sheikh Hoq, MD, interim vice president, Performance and Risk Management: Pneumonia readmissions are steady at 14-15 percent, team is working on a plan to drive these down further. The first quarter saw a jump in central line infections. Opioid stewardship is working well. PE/DVT is gratifyingly much lower. There was discussion that there has been deterioration in the hospice service, now on the radar of administration.

**Pamela Scagliarini, executive vice president and COO:** Discharges at acute care hospitals across the state have slightly decreased over the past four years. Surgery, Women's Health and Heart Center have dropped 1-3 percent, but Psychiatry has increased by 5 percent. These trends are true for BH and area hospitals as well, with BH showing the smallest decrease of -2.8 percent, and (St. Vincent's) the largest drop of -13.5 percent. YNHH, BH and GH all showed similar decreases, but L+M and Westerly saw significant increases, due to System investments. Compared to (St. Vincent's), BH leads in all outpatient services except MRI. All ED volumes in the area decreased except BH, which has an 8.7 percent increase. Smilow has shown exceptional growth.

### **OR** low temp project completed

The Operating Room Low Temp project, a \$5.3 million air handler infrastructure upgrade to provide super cooling capacity to three Bridgeport Hospital operating rooms, was recently completed. Construction on the project began in the OR mechanical floor in early 2019. The ORs were shut down on specific weekends while the new equipment was connected, balanced and brought into service and most of the air handling equipment replaced. The new air handler will provide super cooled air while maintaining the coderequired air changes and humidity levels for the three designated operation rooms.

# Allergy module changes implemented in Epic

Two important changes were recently added in the Epic allergy module which requires users to be more specific about allergy documentation. In the past, the reaction documentation for a patient's allergy or intolerance was not a required field in Epic. Using "other" and "unknown" options for allergen documentation, when the actual offending agent is a choice in Epic, limits the ability to use clinical decision support tools to enhance patient safety and therefore puts patients at risk.

Epic users should limit the use of "other" and "unknown" allergen fields and document the allergic reaction description for every allergen entered.

"Reactions" is now a mandatory field when entering a new allergy, or editing an existing allergy. The "comments" field will also be mandatory when entering a reaction of "other." Users entering allergen documentation of "other" or "unknown allergen-immunotherapy adverse reaction" will encounter a high-risk advisory message. The user should select from the specific allergens available in Epic.

Pharmacy and Food and Nutrition staff will continue to monitor when "other" is selected to determine if there are items that should be added as selections.

#### New Physicians



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