

YAHP Dinner Meeting
March 19, 2014
Bridgeport Hospital

MEETING MINUTES

In attendance:

Yale University

Tracy Crosby
Steve Huot, MD, PhD
Silvio Inzucchi, MD
Mark Siegel, MD

Bridgeport Hospital

Vivian Argento, MD
Greg Buller, MD
Adiba Geeti, MD
Sheikh Hoq, MD
Karen Hutchinson, MD
Michael Ivy, MD
David Kaufman, MD
David Lobo, MD
Caroline Loeser, MD
Sachin Majumdar, MD
Craig McPherson, MD
Monique Misra, MD
Ryan O'Connell, MD
Dallas Reed, MD
Elsa Riccio
Linda Rodrigues
Michael Smith, MD
Armand Wolff, MD
Stuart Zarich, MD

Danbury Hospital

Michael Schiffman, MD
Pat Tietjen, MD

Greenwich Hospital

Cara Giacomo
Chuck Seelig, MD

Griffin Hospital

Kenneth Dobuler, MD
Pia Dogbey, MD
Seema D'Souza, MD
Lionel Lim, MD
Haq Nawaz, MD
Aanu Sihota, MD

Norwalk Hospital

Mark Kulaga, MD
Jason Orlinick, MD, PhD

St. Mary's Hospital

Shawnette Alston, MD
Craig Moskowitz, MD
Roland Njoh, MD
Jason Ouellette, MD
Mira Rho, MD

VA Connecticut

--

Waterbury Hospital

Steve Aronin, MD
Steve Holt, MD

Yale-New Haven Hospital

Karen McCausland

YNHH Saint Raphael Campus

Ernie Moritz, MD

Dr. Gregory Buller, in his first YAHP event since becoming Chair of Medicine at Bridgeport Hospital, began the meeting with a welcome. He then shared with the group the announcement that Dr. Jason Ouellette has become the Chair of Medicine at St. Mary's Hospital. Dr. Ouellette is, of course, a very familiar face at YAHP meetings, having been first

Meeting Minutes, *cont'd*

the Associate Program Director and, currently, the Program Director at St. Mary's. Dr. Buller then introduced Dr. Silvio Inzucchi, YAHP Director, who brought the group's attention to the Annual Retreat scheduled for next Friday, March 28, at the Brooklawn Country Club in Fairfield. He reviewed the agenda, which was available at the tables, and sees this year's theme (*Connecticut's Changing Hospital Landscape and Its Impact on Residency Training*) as a way to open discussion to all the changes occurring around at our institutions. He reminded everyone that Program Coordinators were again invited to attend the Retreat, and he encouraged all to let Tracy Crosby, YAHP Coordinator, know by Wednesday of any additional people who would like to come.

Dr. Buller then made mention that Bridgeport Hospital's Chief Medical Office (CMO), Dr. Michael Ivy, was present at the Dinner Meeting, and he hoped other Affiliates would encourage their CMO's to attend future meetings.

Apropos to that statement, Dr. Patricia Tietjen, Chair of Medicine at Danbury Hospital, announced that she will be the CMO of Danbury as of April 1, and will be conducting the search for a new Chair (a position she will maintain until her replacement is found.) She was also happy to announce that they have selected a new Program Director for their Primary Care track, as Dr. Dino Messina has left Connecticut to become Program Director at a Brown affiliated hospital. Dr. William Delaney will be taking on the role, and, although absent this evening, he will be at the Retreat next week.

Dr. Mark Kulaga, Program Director at Norwalk Hospital, followed by reporting the announced retirement of Dr. Eric Mazur, former Chair of Medicine and current CMO, this coming June. Consequently, Dr. Lew Berman, current Chair of Medicine, will become CMO, so they are also conducting a search for new Chair. During this time, Dr. Jason Orlinick has been named Interim Chair. Additionally, the residency program has a new Associate Program Director for the Ambulatory site: Dr. Cynthia Feher will start this June.

Dr. Steve Huot, Vice Chair of Education and Academic Affairs at Yale, commented on the 2014 Match and SOAP (Supplemental Offer and Acceptance Program). Some discussion ensued regarding numbers of Categorical applicants actually increasing over the past several years. Griffin reported recently receiving approval from the ACGME to add 1 Categorical slot to each PGY level.

Immediately following dinner, Dr. Buller introduced Dr. Karen Hutchinson, DIO of Bridgeport, and her presentation on their recent 'CLER' visit by the ACGME. Dr. Hutchinson explained that, in addition to her impressions of the visit, she had also asked Dr. Ryan O'Connell, Quality Office of the hospital, and Dr. Dallas Reed, senior resident in the Ob/Gyn program, to add their experiences to the joint presentation.

After an extensive and very well detailed description of the *before, during, and after* of the CLER visit, Dr. Hutchinson provided her impressions of the overall experience. First, the ACGME reviewers tend not to deviate from their prescribed schedule. They were also very concerned that the CEO was available and was committed to GME. The reviewers also seemed genuinely interested in *helping* the GME Office, rather than assiduously unearthing

Meeting Minutes, cont'd

any problems. There was, however, little to no discussion of any of the information they gathered. The residents echoed this – that if a presented scenario resulted in a lengthy discussion, the site visitors would re-focus the group and move on to the next item. They were also more interested in a broader range of participants than historically seen in ‘traditional’ site visits: senior management, leaders in quality and risk management, etc.

Some of the ‘lessons learned’ that Dr. Hutchinson encouraged the group to incorporate (if they don’t already):

- talk to trainees about patient safety and quality improvement
- have trainees participate in *Root Cause Analysis* (RCA) of events
- ensure trainees know how to anonymously report concerns about safety
- engage GMEC and trainees in institutional efforts to improve systems of care
- establish policies on transitions of care, and ensure trainees can repeat those policies
- confirm supervision and chain of command policies are understood by trainees and can be easily discussed
- effective and meaningful oversight of duty hours
- have GME community educate faculty & trainees in principles of professionalism, including accurate reporting of events, and veracity in scholarly pursuits

While the CLER visit is a means for the ACGME to provide feedback and gather baseline information for institutions, they will act immediately upon witnessing any egregious events or violations of ACGME requirements. Dr. Hutchinson also cautioned the group to alert the nursing staff of the visit, and the very likely possibility of nighttime ‘walk-arounds’.

Dr. O’Connell added his perspectives that the visit was very scripted, with a lot of questions about error reporting – including questions about what percentage of reporting comes from residents.

Dr. Reed reported that in the end, the residents wanted to know how well they did, and wanted to get more involved as a result of the CLER visit. The focus of the visitors was patient safety, rather than “life as a resident”. There were more questions along the lines of, “How do you know about any patient safety initiatives taking place at your hospital? How are you as a resident taking part? How do you report incidents, and to whom? Show us.”

Some discussion followed, and Dr. Buller brought the meeting to close at 8:40 PM.

The Annual Retreat is next Friday, March 28.

Griffin Hospital will host the next Dinner Meeting on Wednesday, May 21.