Collaboration Councils Update

Dr. Aycan Turkmen, M.D, Doctors Council 2nd Vice-President, System-wide Collaboration Council (SWCC) Co-Chair and doctor from Coney Island Hospital, and NYC Health + Hospitals Chief Medical Officer, Dr. Ross Wilson, M.D convened the third meeting of our SWCC at Gouverneur Health.

The SWCC is the oversight body that sets the direction for the Facility-based Collaboration Councils (FBCC), the goal of which is to significantly improve our patients’ experience and our doctors’ engagement.

With excellent attendance at the SWCC meeting, most of the two hours was spent in small group discussion in which frontline leaders from Doctors Council SEIU and executives from each of our facilities exchanged ideas about how to establish successful FBCCs which will have their first meeting this month. It is through each FBCC that the processes will be put in place to enable measureable progress in jointly overseen facility based improvement initiatives.

Dr. Wilson made clear what it will take for success: “Our goal is to improve our patients’ experience. Success will depend on how the management and the frontline staff in each of our facilities jointly establish strategy and processes for effectiveness. Improved outcomes are dependent on that process.”

The next meeting of the SWCC is on February 24th at which time we will look forward to reports on the first meetings of out FBCC’s.

The FBCCs are NOT a place for grievances or other contractual matters.

Interest based dialogue and consensus decision-making will be expected.

Improvement initiatives will be developed consistent with both Vision 2020 and the parties’ joint commitment to increased doctor empowerment and engagement.

System-wide, facility-wide, and departmental data will be shared with the FBCCs to guide the discussion towards selection of improvement initiatives.

Integration of the IHI Model of Improvement and use of the IHI Open School on-line courses to assist our efforts.

The establishment of joint leadership of these meetings.

The creation of a safe environment for all discussion and expression of ideas.

The FBCCs are NOT a place for grievances or other contractual matters.

We are off to a strong start in this important work. While each FBCC will establish their own dialogue reflective of local conditions and culture, the SWCC has some unified expectations from the FBCC’s which include:

Doctors Meet to Discuss Bellevue CEO Replacement

In early February, on behalf of Doctors Council members, Dr. Peter Catapano, Andra Fertig and Caralee Caplan-Shaw and Kevin Collins, Doctors Council Executive Director met with Dr. Ross Wilson, CMD of NYC Health and Hospitals, Salvatore J. Russo, Senior Vice President and General Counsel, Matthew Campese Senior Director of Labor Relations, and Dr. Nathan Link, CMD of Bellevue to discuss the hiring of a new Bellevue CEO. The meeting comes after many Bellevue doctors signed a petition asking that doctors have a voice in the recruitment of a new CEO following Steven Alexander’s retirement after 30 years.

Dr. Catapano reported that the petition received an overwhelming positive response because doctors wanted a search process that was inclusive and transparent. He went on to say that Bellevue doctors would like to see a CEO who shared values similar to that of frontline clinicians.

Dr. Fertig highlighted the important role that a new CEO should play in educating and communicating with doctors regarding the multiple challenges facing Health + Hospitals such as funding shortages, Outcome-based payment reform (DSRIP) and internal re-organization of service lines.

Dr. Caralee Caplan Shaw stressed that any new CEO should be committed to the joint work between Doctors Council members and Health + Hospitals administration in the new Collaboration Councils which seek to improve doctor engagement, patient experience, and overall improved quality. In response, Sal Russo said that Dr. Ram Raju and the search committee are looking for a CEO that could lead Bellevue’s efforts in improving the patient experience, increasing the level of quality care, growing Bellevue’s market share and enhancing employee engagement.

Dr. Wilson stated NYC Health + Hospitals had set a target date of announcing a new CEO by the end of February. He also stated that besides Doctors Council members, the search committee already had input from nursing, finance, and union representatives.

“I am happy that we had a meeting with NYC Health and Hospitals senior leadership. We had a good cross-section of doctors, and our comments were well-received and discussed without resistance.” Dr. Peter Catapano said.
Doctors Council Bellevue Financial Planning Forum A Success

On Wednesday, February 3rd, over forty doctors met in the Saul Farber Auditorium at Bellevue to listen to a Doctors Council financial planning presentation by Stacey Braun Associates.

The presentation, a financial planning 101 and resulting questions and discussion, ranged over a number of topics, from planning for children’s college costs to projecting the cost of retirement.

Evaluations completed immediately after the event were universal in noting the value of this discussion, and appreciation for the low-key, fact-based presentation by Stacey Braun.

Suggestions were proffered for improvement for future presentations, from more “case studies” of typical doctors at different stages of their careers with different priorities, to more focused sessions on one or two topics covered in the overview.

The event was held in response to a survey of Bellevue doctors earlier in the year conducted by Doctors Council that identified receiving unbiased, factual financial planning information as as a need that Doctors Council could help doctors meet.

In the same vein, Doctors Council will hold a pension discussion with NYCERS on February 25 at the Doctors Council office, and will conduct a session on typical legal issues doctors deal with in April.

Doctors Unite — from a recent posting on Doctors Council’s blog, Hippocratic Musings

In a January 9 New York Times article reporter Noam Schreiber talks to the newly organized doctors at PeaceHealth in Oregon. In the article, Dr. Rajeev Alexander, one of the PeaceHealth hospitalists, gets to the heart of the issue on why employed doctors need an independent voice.

Dr. Alexander and his colleagues discuss a central issue—professional judgment.

"Dr. Alexander and his colleagues say they are in favor of efficiency gains. It’s the particular way the hospital has interpreted this mandate that has left them feeling demoralized.

If you talk to them for long enough, you get the distinct feeling it is not just their jobs that hang in the balance, but the loss of something much less tangible — the ability of doctors everywhere to exercise their professional judgment."

In short, as Dr. Brittany Ellison says, “We’re trained to be leaders, but they treat us like assembly line workers.” Perhaps the biggest surprise for the hospital system where the doctors organized is its refusal to believe that money was not their key issue. According to the Times the doctors “preferred to work less and make less to avoid burnout, which was bad for them and worse for patients."

At which point the administration responded that money was always the issue, according to several people in the room. (The hospital declined to comment.)

This cynicism coming from hospital management is sad but not surprising.Increasingly doctors are viewed by hospitals as cogs whose only concern is money. We are glad the doctors formed a union to protect their patients and the profession.

Hippocratic Musings™ The New York Times

a Professional Practice blog for frontline doctors

"The opportunity to sit down and think about considerations for financial planning was very helpful. It’s hard to find time for that."
— Dr. James Cho, Internal Medicine

Financial Crisis Looming at Health + Hospitals?

Doctors Council Bellevue Financial Planning Forum A Success

As has been reported in numerous press accounts, Health + Hospitals continues to face major challenges in budget and financing. As part of the Mayor’s 2016-17 budget, Health + Hospitals will receive a $337 million infusion of cash from the City to close an expected $1.7 billion budget gap, which comes on top of $700 million already allocated to Health + Hospitals by the City.

This news also comes on the heels of a recent state comptroller’s report that said the corporation’s deficit is expected to double to nearly $2 billion within the next three years.

In addition, as was reported in a Feb 2 story in Politico NY, Mayor DeBlasio has tapped the health care consultants Manatt Health to work with H+H to look to see if Health + Hospitals, which serves primarily Medicaid patients, can benefit from state reforms and national trends even as looming federal cuts threaten to make matters worse.

Manatt had already signed a multi-million dollar contract with been H+H for consulting services related to DSRIP program design and implementation.

The article goes on to describe the essential challenges facing H+H, and is worth quoting at length:

‘That explains why NYU Langone took over Brooklyn’s Lutheran Medical Center and its network of Federally Qualified Health Centers and why Northwell Health (formerly North Shore-LIJ) partnered with Maimonides in Brooklyn, and why Mount Sinai recently announced a cardiology practice on Staten Island.’

The article notes that ‘De Blasio and Raju can’t be as nimble as their counterparts who run private hospitals, and it would be politically challenging to close one of the corporation’s 11 hospitals so the administration must find other ways to grow revenues or trim expenses.’

Health + Hospitals’ strategy: ‘…to grow his [Raju’s] way out of financial trouble by improving patient service so that more people use his system.’

Raju wants to see 2 million patients by 2020, up from 1.4 million in 2015, and to double the number of people enrolled in MetroPlus, the insurance arm of Health + Hospitals.

Raju also wants to promote his clinics and health centers so he can better manage patients before they need expensive acute care for which the corporation often does not receive full reimbursement.

‘Raju is restructuring his leadership team to better focus the system on ambulatory care and long-term care.’