

The Scope

A Newsletter for Medical Professionals

September 27, 2017

“There is one consolation in being sick; and that is the possibility that you may recover to a better state than you were ever in before.”

- Henry David Thoreau

The Scope appreciates the enthusiastic response of readers contributing quotes. Please submit a favorite you'd like to share with others by emailing [The Scope](#).

[A Compact Between Maine Medical Center and Its Medical Staff](#)

Peer Support

for the MMC Medical Staff

PeertoPeer@mmc.org

Physician leader: Christine Irish, MD

Confidential * One-on-One * Peer Support

Dear Members of the Maine Medical Center Medical Staff,

Despite the unseasonable heat, autumn is here and October is coming -- time to enjoy apple picking, brilliant foliage, cool nights and pumpkins. Oh, and yes, it's [time to get your flu shot](#). Considering we are moving into FY18, the lead piece features [MMC's FY18 Annual Implementation Plan](#). Your Medical Executive Committee and multiple medical staff members had key roles shaping this plan which you will see is organized into the quadruple aim. Look closely at the objectives and know that we will regularly feature how medical staff is contributing and driving work on these objectives. Please tell us how you, your practice and teams are connecting and delivering on these objectives.

This newsletter is *your* newsletter and a forum for you all to share, inform and connect across the medical staff. We want to hear from and about the staff. At the same time, we

want to inform staff who practice far and wide about happenings at the hospital. This issue of The Scope includes hospital information on: flu shots, [discontinuation of VRE screening](#), [Epic Upgrades](#), the [Masters Facility Plan](#) (for the new building) and a synopsis of [The Joint Commission's summer visit](#). As always, we celebrate and share updates on Academic Promotions, well-being programs ([Brown Bag Series](#)), medical staff [publications](#) and [upcoming events](#), including a wellness conference.

You will not want to miss the **Medical Staff Dinner and Awards on October 11, 5:30 p.m. on the East Tower Terrace. Medical Staff Awards start at 6 p.m.** The fall dinner on the East Tower Pavilion is a time to enjoy good company, good food and celebrate the medical staff. It is a time to connect with colleagues who work hard on so many facets of our mission – clinical care, teaching, research, quality improvement, faculty development, in addition to public health and advocacy.

See you at the dinner,



A handwritten signature in black ink that reads "Joel Botler MD".

Joel Botler, M.D.
Chief Medical Officer



A handwritten signature in black ink that reads "Lisa Almeder".

Lisa Almeder, M.D.
Medical Staff President

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MMC Rolls Out FY18 AIP

Maine Medical Center is presenting a strategic roadmap, the 2018 Annual Implementation Plan (AIP) this week. Numerous inputs, public health and other data helped to inform the strategy while broadly representative stakeholders including members of the Medical Executive Committee and many Medical Staff members across the organization contributed to the plan.

The AIP concentrates our efforts on priorities reflecting the quadruple aim – Care Team Well Being, Healthy Communities, Affordable Care and Patient Centered Care.

[You can review the new AIP here](#), and all colleagues will receive a copy mailed to their homes, as well. Please take a look at our shared goals and discuss with your teams ways you can help MMC move forward in these important areas.

STRATEGIC PRIORITIES



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Protecting Yourself and Your Patients Against the Flu

Flu season is coming to Maine early, and early vaccination for staff is strongly recommended. Immunization helps protect patients, especially those who are most vulnerable.

Medical staff must complete one of the following by December 1:

1. [Get vaccinated at MMC](#)
2. [Show proof of vaccination outside MMC](#)
3. Submit a [vaccine declination waiver](#) to Employee Health

Medical Staff can obtain their free flu vaccination either through embedded staff in clinical areas, during the October Flu Blitz on Bramhall's P1A, or through traveling clinics at off-site locations.

[See the Flu Blitz schedule here.](#)

Questions? fluvaccine@mmc.org or MedStaff@mmc.org

[See more information about the flu from the CDC.](#)

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Reminder - Discontinuing Routine Screening and Isolation for VRE

By Joel Botler, M.D., Chief Medical Officer and Marjorie Wiggins, D.N.P., M.B.A., R.N., FAAN, NEA-BC, Chief Nursing Officer

After thorough deliberation and with input from members of the hospital infection prevention and patient safety teams, we have made the decision to discontinue routine screening and isolation for vancomycin-resistant enterococci (VRE). This change is effective now and impacts all patients at MMC.

This decision was made after reviewing the published scientific evidence, learning about similar initiatives at comparable hospitals and weighing the impact of isolation on patients, families and staff against the potential benefit of these debatable practices. We also examined the human and material costs of routine screening and isolation as well as consequent constraints on patient flow through the hospital.

We will monitor clinical VRE infections closely over the next several months to make sure this change in practice does not lead to an increase in clinically important VRE infections. If there is an increase in clinically important VRE infections, we will reinstitute routine screening and isolation for VRE. During this time, all hospital personnel must adhere strictly to standard precautions and observe strict hand hygiene. Particular caution must be exercised when caring for immunocompromised patients and those with open wounds or diarrhea.

This decision does not impact current practices for MRSA, C. difficile or other communicable or antimicrobial-resistant infections.

[Please review these FAQs for additional information.](#)

Thank you.

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Master Facilities Plan Update – Next Steps

By Al Green, MHSA, P.M.P., Director of System Planning and Regulatory Compliance

The Master Facility Plan continues to progress. We received a preliminary recommendation for approval from the state. The next step is a review by the DHHS Commissioner. We expect a final decision before the end of the year.

We have submitted our final Institutional Development Plan (IDP) to the City of Portland. The IDP outlines MMC's need, plans and anticipated impacts. MMC presented the IDP to the City of Portland Planning Board on Tuesday, September 26, at Portland City Hall. Any support for this plan would be appreciated. For more information about how to support the project, contact Al Green at agreen@mmc.org or 662-3689. Support from City of Portland residents will have the biggest impact.

MMC is at a mid-point in the equipment planning process. Contributions from the Medical Staff and clinical stakeholders are essential. If you have received an invite to an MFP-Equipment Planning meeting, please do all that you can to attend or send a proxy.

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MMC BioBank Receives Accreditation From College Of American Pathologists

By Anne Breggia, Ph.D., Biobank Director

The MMC BioBank has received accreditation from the College of American Pathologists (CAP) based on results of a recent on-site inspection. CAP has been considered the gold standard in laboratory accreditation for over 50 years. The MMC BioBank is one of only 54 biorepositories nationwide to receive CAP accreditation.

“CAP accreditation demonstrates to the scientific community that the MMC BioBank protocols follow the highest standards in obtaining high quality annotated biospecimens that are essential to reproducible research results. This distinction demonstrates the dedication and commitment of the BioBank staff to the research and patient-care missions of MMC,” says Anne C. Breggia, Ph.D., BioBank Director.

The BioBank inventory has more than 100,000 biospecimens collected primarily from cancer and inflammatory disease surgeries and obtained with patient informed consent. These samples serve as a vital resource to MMC clinicians and scientists involved in the clinical and translational research that lead to new therapies and improved patient outcomes. More information about the MMC BioBank can be found at mmcri.org.

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The Joint Commission Summary Report

By Julia Dalphin, HACP, Director, Regulatory Affairs

The Joint Commission (TJC) conducted two triennial surveys over the week of July 10th, 2017. A team comprised of eight surveyors –physicians, nurses and an engineer-- surveyed both Maine Medical Center and McGeachey Hall’s partial day program.

The 2017 Joint Commission Survey for the Hospital Accreditation Program assessed

compliance to the elements of performance within the Chapters of the Comprehensive Accreditation Manual for Hospitals. Thus, the institution was “scored” by element of performance and will “achieve” accreditation by compliance to standards.

The Hospital Accreditation Program at MMC includes: MMC and MMP ambulatory sites, MMC surgical centers and procedure suites, and the MMC acute medical care facility. During the accreditation survey week, the surveyors made eighty-nine observations indicating that Maine Medical Center did not meet thirty-nine Standards of The Joint Commission.

A finding of noncompliance to an element of performance is identified as a Requirement for Improvement (RFI). Each RFI is plotted on the Survey Analysis for Evaluating Risk (SAFER) matrix according to likelihood the noncompliance could cause harm to a patient, a staff member or a visitor, and the scope at which the noncompliance is observed. Combined, these characteristics identify a risk level for each RFI, which in turn will determine the level of required post-survey follow up.

Each of fifty-seven RFIs is identified in the SAFER matrix by chapter, standard and element of performance. Thirty-one of the fifty-seven RFIs are condition-level findings. The fifty-seven corrective action plans are to be electronically submitted to The Joint Commission prior to September 30th, 2017.

The Joint Commission conducted a follow-up survey Hospital Accreditation Program survey on August 18th, 2017. This survey was prompted by and focused on the condition-level findings. This survey revealed no new findings of non-compliance and The Joint Commission accepted that corrective actions were taken on all thirty-one condition level findings identified in the July survey.

[Read The Joint Commission Summary Report.](#)

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Epic Upgrade

By Donna Lee Morong, IS, Provider Integration

On October 21, SeHR will be upgraded to Epic version 2015. There are several new features that will enhance a physician’s workflow and productivity. New functionality includes:

- A provider checklist that reviews the status of required documentation for admission, daily rounds and discharge.
- The ability to perform problem-oriented documentation with the note pinned to the sidebar in the rounding navigator.
- The way the date and time of service appear in the note editor, chart review and in reports has been updated. The fields are labeled *Date of Service* and *Time of*

- Service* to clearly indicate the time of service and not the time the note was started.
- The ability to edit and copy forward your existing note attestations.

Since the majority of enhancements are intuitive, no formal classroom training will be required. However, eLearns should be completed by each physician before the go-live in October. The eLearns will be available in early October using your Epic dashboard reports.

[See instructions for accessing the dashboard.](#)

If your department prefers not to do the eLearns, please contact [Donna Morong](#) to schedule a presentation for your department. This presentation satisfies the inpatient eLearn requirements.

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Brown Bag Series for Med Staff, Residents and Fellows

The MMC Medical Staff Peer Support Program proudly offers the Brown Bag Series to help enhance existing relationships, forge new bonds and promote a culture of support for the MMC community, with new topics presented each month. Light refreshments are offered, but feel free to bring your own meal.

I Don't Remember This Being So Difficult

Acknowledging and developing strategies for our changing cognitive and physical abilities

Speaker: Stuart Abramson, M.D.

Friday, October 27

Noon - 1 p.m.

Dana Classroom 7

Examples:

- I can't seem to learn this new EMR
- I can't handle night call anymore
- I no longer remember the details of the recent case
- I run out of steam at the end of a long day/week

Objectives:

- To understand how our changing physical and cognitive abilities can influence our wellness at work
- To recognize some of the potential changes over time or with illness or injury
- To develop and share strategies to overcome developing hurdles

Message In a Bottle: What I Would Teach My Younger Self if I Had the Chance?

Speaker: Christina H. Vietor, D.O., and Kathryn M. Brouillette, M.D.

Friday, November 17 (*please note date correction*)

Noon - 1 p.m.

Dana Center 1

Take Heart: Cultivating Gratitude To Enhance Resiliency

Speaker: Alison M. Samitt, M.D.

Wednesday, December 20

Noon - 1 p.m.

East Tower 2 and 3

RSVP to MedStaff@mmc.org, indicating the date(s) of the session, your name, preferred email address and phone number.

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Publications

MacVane CZ, Fix ML, Strout TD, Zimmerman KD, Bloch RB, Hein CL. [Congratulations, You're Pregnant! Now About Your Shifts . . . : The State of Maternity Leave Attitudes and Culture in EM.](#) West J Emerg Med. 2017 Aug;18(5):800-810.

Oxburgh L, Rosen CJ. [New Insights into Fuel Choices of Nephron Progenitor Cells.](#) J Am Soc Nephrol. 2017 Sep 5.

Horowitz MC, Berry R, Holtrup B, Sebo Z, Nelson T, Fretz JA, Lindskog D, Kaplan JL, Ables G, Rodeheffer MS, **Rosen CJ.** [Bone marrow adipocytes.](#) Adipocyte. 2017 Aug 24:1-12.

Smith-Dupont KB, Wagner CE, Witten J, **Conroy K**, Rudoltz H, Pagidas K, Snegovskikh V, House M, Ribbeck K. [Probing the potential of mucus permeability to signify preterm birth risk.](#) Sci Rep. 2017 Sep 4;7(1):10302

Gupte M, Lal H, Ahmad F, **Sawyer DB**, Hill MF. [Chronic Neuregulin-1B Treatment Mitigates the Progression of Post-Myocardial Infarction Heart Failure in the Setting of Type 1 Diabetes Mellitus by Suppressing Myocardial Apoptosis, Fibrosis and Key Oxidant-Producing Enzymes.](#) J Card Fail. 2017 Sep 4.

Chaudhry W, Cohen MC. [Cardiac Screening in the Noncardiac Surgery Patient.](#) Surg Clin North Am. 2017 Aug;97(4):717-732.

Camaj A, Zahuranec DB, Paone G, Benedetti BR, Behr WD, Zimmerman MA, Zhang M, **Kramer RS**, Penn J, Theurer PF, Paugh TA, Engoren M, DeLucia A 3rd, Prager RL, Likosky DS;

Michigan Society of Thoracic and Cardiovascular Surgeons Quality Collaborative.
[Organizational Contributors to the Variation in Red Blood Cell Transfusion Practices in Cardiac Surgery: Survey Results From the State of Michigan](#). Anesth Analg. 2017 Sep;125(3):975-980.

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Calendar

2017 Med Staff Dinners – *Date change*

- October 11, East Tower Patio

Dinners begin at 5:30 and run until about 7 p.m.

Maine Medical Center Medical Executive Committee Meeting Schedule 2017

- October 20
- November 17
- December 15

All meetings are held from Noon - 2 p.m. in the Dana Center Boardroom. Lunch is served.

Wellness Conference: “Caring for Ourselves as We Care for Others”

Wednesday Oct 25

8 a.m. - noon

[Please review more details and register via this link.](#)

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Story Ideas?

Your participation is essential to making The Scope a dynamic and sustainable publication. Please submit articles of 250-300 words to thescope@mmc.org. Include practitioner’s byline with title and appropriate contact for further information. We publish two times each month.

For past copies of The Scope go to: <http://www.mmc.org/newsletter-for-medical-professionals>

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Medical Staff Value, Mission, and Vision Statements

Value Statement

The Medical Staff of Maine Medical Center values both individuality and collaboration. We will continually pursue higher value health care. We embrace a culture of curiosity and life-long learning. We are partners with Maine Medical Center, and we mirror its values of compassion, service, integrity, respect, and stewardship.

Mission Statement

The Mission of the Medical Staff of Maine Medical Center is to provide affordable, high-quality health care to our community. We teach future health care providers and develop innovative ways to improve the health of our community. In partnership with the Medical Center, we proudly accept our responsibility as one of Maine's leaders in patient care, education, and research.

Vision Statement

The Medical Staff of Maine Medical Center will be the driving force within Maine Medical Center leading the way to making Maine the healthiest state in the nation.

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Maine Medical Center
MaineHealth

centered around you

www.mmc.org

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