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Our lives are dedicated to yours

OFFICE OF THE CHIEF OF STAFF NEWSLETTER

THE LEGACY CONTINUES

Dear colleagues,

Over the past few months and since I assumed the role of the Medical Center Director and Chief Medical Officer, I have contemplated on how to align the medical, clinical, and operational priorities with the established vision and mission of our institution. Although this has been a challenge given the complexity of healthcare in our organization and the multitude of processes inherent in its functions, I have taken to task many initiatives and also engaged in pursuing others which have been rolled on by my predecessor Dr. Adnan Taher.



It is my intention to continue leading the necessary cultural change and spearhead our colleagues' acceptance of transparent performance improvement metrics and of working in partnership with our constituencies, including all departments, services, leadership, and staff. Alignment and integration will continue to be our driving force

in reaching our goals and our 2020 Vision. Investment in current medical leadership and nurturing future leaders and managers is yet another indispensable ingredient to ensure sustainable quality care amidst a competitive environment.

With the imminent acquisition of EPIC, it is essential to establish effective communication and alliance with the Chief Medical Information Officer Dr. Ghassan Hamadeh and the AUBHealth team to identify the necessary resources and institute the proper medical informatics which will be critically important in our clinical operations. We have been striving to enhance our documentation within patient medical records, but one must be optimistic that such procurement will ultimately eliminate such an issue and will culminate in an effective Electronic Health Record (EHR).

Patient-centered care is yet another strategic initiative - mandated by the Executive Vice President for Medicine and Global Strategy and the Raja N. Khuri Dean of the Faculty of Medicine Dr. Mohamed H. Sayegh - that will be our top priority over the coming months in line with the implementation of the Patient Experience Project (PEP). A working group has been established to advance and promote the coordination and progression of care in a holistic environment with optimal and maximal utilization of resources across the Medical Center.

The commissioning of the new Halim and Aida Daniele Academic and Clinical Center (ACC) will also be a major challenge with respect to resources and implementation of workflow, processes, and procedures.

These are but a few of the strategic projects that we intend to do together. The journey is no longer a luxury but a necessity for our future success. All of us should actively participate in these projects to realize our strategic vision and move forward in a sustainable and cumulative manner.

Dr. Hassan El Solh

Medical Center Director and Chief Medical Officer

AUBMC RETREAT

On September 17, 2016, AUBMC held a retreat at Al-Bustan Hotel between 9:00 am and 12:30 pm. The main purpose of it was to discuss the AUBMC Strategic Plan 2016 – 2020 in light of the 2020 Vision. In attendance were members of the executive management team and several key stakeholders from the Medical Center.

In view of the national and regional competition, increasing demand for services, escalating healthcare costs, staffing challenges, and the unparalleled advances in technology, five Strategic Priorities (SP) were identified and deliberated upon during this retreat. A corresponding project was generated under each. The SPs included:

SP1: Develop World Class Healthcare Services

Project: Care Re-design

- Goals of the project are:
- 1. Deliver integrated patient-centered care
- 2. Improve patient experience
- 3. Introduce new services/programs
- 4. Integrate research and clinical care

SP2: Improve Patient Flow and Increase Capacity

Project: Capacity Management and Utilization Goals of the project are:

- 1. Enhance patient flow and throughput
- 2. Improve utilization of clinical space
- 3. Coordinate expansions
- 4. Promote outreach services

SP3: Improve Efficiency and Decision-Making

Project: Process Re-engineering

Goals of the project are:

- 1. Automate the processes: equipment and medication
- 2. Decide upon support processes
- 3. Acquire a health information system

SP4: Enhance Staff Development, Recruitment, and Retention

Project: Human Capital Management Goals of the project are:

- 1. Improve staff development
- 2. Improve staffing productivity, plans, and performance

SP5: Financial Performance

- Project: Financial Sustainability and Affordability Goals of the project are:
- 1. Enhance revenues
- 2. Control prices (costing)
- 3. Manage expenses

Several presentations were given during the retreat to address all concerns, challenges, and future plans. In addition to the already appointed working groups, new working groups will soon be on board to follow up on the implementation of these goals in the very near future and ensure that all Medical Center stakeholders are acquainted with the necessary details related to this ambitious strategic plan. The ownership of all is a key factor to the successful implementation.





MULTIDISCIPLINARY PRACTICE MODEL - A PRIORITY!

With the increasing medical complexity and rapidly expanding knowledge, collaboration among clinicians has become a priority. It not only ensures patient-focused care and nurtures clinical excellence but also breeds innovation by fostering interaction and the exchange of ideas, in addition to emboldening new therapies and non-traditional modalities of treatment.

Some of us may be more capable than others in a specific area, but none alone is as capable as all of us. The multidisciplinary model of practice has become foundational in most elite institutions worldwide.

Advocating group medicine, William Mayo defined it as "non-financial arrangement except for minor details, but rather a scientific cooperation for the welfare of the sick".

"Some of us may be more capable than others in a specific area, but none alone is as capable as all of us."

We must strive to embrace and adapt a culture-sensitive model of team approach to the care of our patients. A carefully structured group practice model represents a big leap and a unique opportunity to connect the tremendous talent which exists in the institution. Working in such an environment, our faculty members can better promote our service mission and preserve our academic progress.

PATIENT EXPERIENCE - A STRATEGIC AUBMC PRIORITY

In addition to the dramatic innovations in technology and the tremendous advances in knowledge and skills, what matters most in today's health delivery must remain our respect for and attention to our patients' concerns, medical needs, cultural preferences, and psychological sensitivities. Addressing these elements requires elaborate and delicate communication among the patient, family, nurse, treating physician, and healthcare consultants.

Care coordination has become foundational to the healthcare reform goals of improving the quality of care via the efficient and effective use of resources. Consequently, patient-centered and coordinated care should be at the core of what we do and should in itself be our measure for distinction.

AUBMC leadership has always been and will continue to be committed to sustained quality, efficiency, and excellence of clinical outcome, coupled with satisfaction in every aspect of patient experience. The foundation for its endeavor includes the longstanding values, mission, and strive for clinical excellence. The framework that overshadows the care system implemented at AUBMC consists of major elements, including behavior, hospital services, professionalism, and streamline processes. Working together, we can achieve our goals.



DID YOU KNOW?

- Physicians from related specialties can proctor each other for the purpose of upholding high quality standards of patient care. This may be applied when competency assessment is required for an initially appointed Medical Staff member upon her/his provisional three-month appointment (e.g. An anesthesiologist can proctor a surgeon, and a pediatric infectious disease specialist can proctor a general pediatrician).
- The Medial Staff Office processes all requests for temporary privileges submitted to the Office of the Chief of Staff to ensure that all requirements within the policy are met.
- All newly-appointed Medial Staff members at AUBMC pass through a systematic vetting process where their training and expertise are verified with the external medical institutions (Primary Source Verification).
- Several categories of AUBMC staff (e.g. nurses, pharmacists, and house staff) have access to our hospital information system (http://his.aub.edu.lb) where they can view the approved privileges of all AUBMC Medical Staff.

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Send us your feedback: costaff@aub.edu.lb Phone: 00961 1 350000 ext. 5995 http://his.aub.edu.lb