

Empowering Physicians

Doctors at a Connecticut Hospital Collaborate with Administrators to Reach Common Goals

A committed and fully engaged medical staff is the lifeblood of any hospital. Yet, in today's stressful health care climate, no hospital can take its medical staff for granted. Significant time and effort are needed to forge a culture that fosters strong partnerships between the medical staff and the hospital's administration.

At Saint Francis Hospital and Medical Center in Hartford, Conn., doctors and administrators strive to collaborate to achieve common goals, the result of a joint effort begun four years ago when a survey of the medical staff revealed an aging physician population at the hospital. In addition, national data indicated few medical school graduates are choosing primary care medicine. Hospital leaders realized they needed to strengthen the infrastructure to support recruiting efforts. This necessitated adding physician recruitment and physician liaison personnel and integrating them with human resources and medical staff leadership. A program involving income guarantees was developed to motivate new physicians to join existing practices and affiliate with Saint Francis.

Whereas, previously, contact between hospital administrators and physicians had been limited, the new efforts resulted in a stronger partnership. As new people were added to the hospital's staff, they met with private physicians in their offices to address their needs. Individual strategies were developed.

The new processes and programs gave doctors at Saint Francis a sense of empowerment and strengthened their commitment to work with administrators to meet the hospital's mission, which declares its commitment "to health and healing through excellence, compassionate care and reverence for the spirituality of each person." Among the hospital's core values is a commit-

ment on the part of leadership to encourage "initiative, creativity, learning and research" within the culture of the clinical community. Meeting this commitment requires ongoing elevation of standards in recruitment, training and education of the medical staff.

INCREASING PARTICIPATION

Once largely relegated to spectator roles, physicians now sit on the board of directors, holding three of 33 board seats, and participate in key board committees in robust and diverse ways. A revision of the board's bylaws allows the president of the medical staff to be a voting member of the board. Previously, the president had served ex-officio.

Notable among committees with active physician participation is quality/medical affairs, which includes the president of the medical staff among its members. This committee deals with quality and patient safety issues, credentialing of physicians, and revision of the medical staff's bylaws. This revision, now underway, involves 30 physicians serving on three task forces and working with a consultant.

The president of the medical staff, an orthopedic surgeon, and a cardiovascular surgeon have participated in plotting the vision and strategic direction of the hospital as members of the strategic planning committee. An orthopedic surgeon serves on the finance committee, joining in deliberations related to the institution's financial health.

BUILDING TRUST

The president and CEO at Saint Francis (the author) encourages an open-door policy with physicians to foster upfront, candid discussions about improving the institution. These conversations are not always smooth or easy. Physicians, after all, represent diverse and often competing approaches to addressing the hospital's needs. Despite inevitable differences of opinions, both parties work to ensure that these conversations are productive.



BY CHRISTOPHER M. DADLEZ

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VOICES

If you look at what's happening in many of our places, we now have physicians on our boards. We turn to them for advice. We're not always going to agree, but the principles are there to drive us, to show us the way.

—Sr. Mary Roch Rocklage, RSM

Sponsor Liaison,
Sisters of Mercy Health System,
Chesterfield, Mo.

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Photo by Saint Francis Hospital and Medical Center



From left, Richard Harrison-Atlas, MD; Rolf Knoll, MD; Rose Stamillio, RN, director of medical management, Saint Francis Physician-Hospital Organization; Malcolm Galen, MD; and Jess Kupec, president and chief executive officer, Saint Francis Physician-Hospital Organization. Physicians, nurses and administrators gather regularly to discuss various matters at the Hartford, Conn.-based hospital.

For example, discussions between administrators and physicians recently led to the recruitment of four local orthopedic surgeons whose vision was central to establishment of the Connecticut Joint Replacement Institute at Saint Francis, which includes 11 physicians. Physicians were actively involved in the creation and design of this “hospital within a hospital,” which now has dedicated operating rooms and nursing units for joint replacement patients. The physicians have performed about 2,500 joint replacement procedures in 11 months.

This initiative garnered significant resources at its introduction, such as operating room block times, patient floor redesigns and dedicated recruitments. Although it was a challenge to effectively communicate the benefits of this effort to the entire hospital community, the administration at Saint Francis strives to be accessible to all viewpoints and open to recommended alterations.

RECRUITING AND MARKETING PHYSICIANS

Physician recruitment is continuous and extensive at Saint Francis. Led by the chief medical officer, a recruitment committee evaluates the hospital’s needs for specialists and primary care practitioners (both hospital-employed and private practice) and matches them with available applicants. The hospital employs a full-time physician recruiter (see interview, pp. 28-29). This recruiter and her support staff direct all important searches, and rarely engage an outside search firm.

The recruiter serves on the recruitment committee, which also includes the chief medical officer and the hospital’s vice president for network management. As a result of ongoing advertisements in professional journals, the recruiter receives numerous *curriculum vitae* from physicians seeking to relocate to the area. These are distributed to those private practitioners and office managers seeking to add staff.

These recruitment efforts have been quite successful. Since beginning the physician recruitment program in the 2006 fiscal year, 140 new and replacement physicians have been added to the staff: 51 primary care practitioners (internal medicine, family medicine, pediatrics, obstetrics/gynecology); 32 medical specialists; 27 surgical specialists; and 30 in such ancillary specialties as emergency medicine, anesthesiology, radiology and pathology.

When new physicians come on board, a multifaceted introduction program begins. This program, administered by the physician liaison, ensures that incoming doctors are broadly introduced to peers and community residents. These efforts inform the medical staff of new members, encourage the building of relationships and development of referral patterns, and also introduce the expertise of incoming physicians to the community at large.

Some of the highlights of the hospital’s 13-point marketing program for each physician include:

- A news release for newspapers with an accompanying color photograph, and an advertisement in *The Hartford Courant* and select community newspapers.
- Announcements in the hospital’s consumer magazine, employee newsletter, and medical staff newsletter
- Announcements on the hospital’s “music on hold” telephone system
- Postcards to the 600 members of the medical staff and bulletin board announcements
- A new physician profile page and news release on the hospital’s website, www.stfranciscare.com
- Optional participation and promotion of physician involvement in the “Dessert with the Doctors” program or public speaking opportunities

CREATING A PHYSICIAN-HOSPITAL ORGANIZATION

Another important component of the relationship between physicians and hospital administration is

VOICES

I want to see that [physicians] have a commitment to our values, which includes that special attention to the poor and vulnerable. We want them to be willing to partner with us and to take care of some of those poor and uninsured.

—Cynthia Tauog
Vice President,
Community Health/Senior
Services,
St. John Health,
Warren, Mich.

the Saint Francis Physician Hospital Organization. Founded in 1993, this is one of roughly 750 such organizations in the country, a relatively small number in the context of hospitals and health systems nationwide. Saint Francis owns 50 percent of its physician hospital organization; the other half is owned by member physicians. A physician hospital organization includes hospitals and physicians contracting with one or more HMOs, insurance plans, or directly with employers to provide health care services.

When initially formed, the Saint Francis Physician Hospital Organization focused on managed care contracting and shared financial risk. During its 15-year history, however, the organization has extended its focus to include improved quality and efficiency of health care services provided by its members.

Ten physicians and five administrators sit on the physician hospital organization's board of directors. Under their leadership, the organization's mission is to maintain a cohesive network of providers with a common goal of aligning the clinical and economic interests of its customers (physicians, hospital, patients, payers and employers) with a focus on continuous quality improvement, improved patient outcomes and the efficient management of resources. The physician hospital organization has implemented programs, systems, policies and procedures that increase the provision of cost-effective, quality care. This arrangement offers members a full complement of value-added services, including medical management, network management and information technology.

As a result of changes in the Stark Law and Internal Revenue Service regulations, Saint Francis was an early investor in electronic medical record system and practice management software that individual physician offices may acquire at reduced cost. The goal is to offer its physicians a common practice management system, which is integrated and interfaced with a common electronic medical record system. Shared patient data is a critical component of providing quality care, improving patient outcomes and efficiently managing resources.

INVESTING IN ACCESS CENTERS

In the past year, two new access centers have opened in key suburban markets, adding to 14 Saint Francis centers throughout the service area that have been developed during the past decade. These 16 medical office centers provide an opportunity for hospital physicians to establish

satellite offices in these communities and allow hospital officials to meet the ambulatory service needs of our patients in outlying communities in a more accessible and convenient fashion. They also help the hospital promote patient-provider relationships in these communities.

Another example of the high level of cooperation that exists between the medical staff and the hospital is the Saint Francis GI Endoscopy, L.L.C., which is scheduled to open in November. This joint venture developed in partnership with 12 physicians, who own 51 percent of the practice. It will offer colonoscopy and endoscopy procedures in a convenient suburban location. The partnership will result in a high-quality ambulatory care center that leverages both the expertise of the physicians and hospital administrators in creating a patient-centered environment.

CONCLUSION

The sense of empowerment that administrators at Saint Francis seek to give to physicians is critical to the success of the hospital's mission. This stems from the basic value that the hospital administration places on the role of physicians, who know their voices will be heard in their meetings and in conversations with the president and CEO. Clearly, physicians are essential to the success of Saint Francis. ■

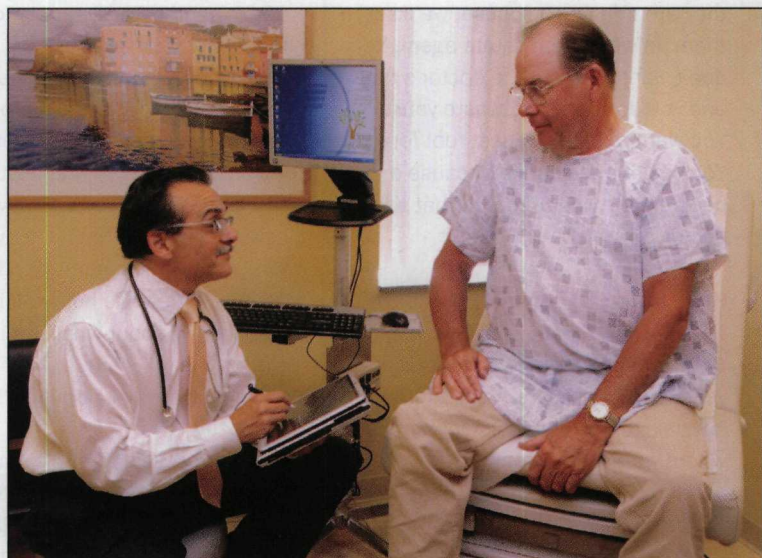


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I talk to a lot of the physicians, and I have been pretty impressed by how engaged they are and how much they know about the mission and the vision and how much they care about the patient, the whole patient.

—Kathleen Sanford, RN
Senior Vice President and
Chief Nursing Officer,
Catholic Health Initiatives,
Denver



From left, physician Gilberto Ramirez, MD, examines patient Alan Gowdy at the hospital's Saint Francis Care at Enfield, a new facility in suburban Hartford.

Photo by Saint Francis Hospital and Medical Center