President of the Professional/Medical Staff REPORT

Michele Del Vicario, MD, FACC, FRCP (C)

Well, I’m coming to the end of my tenure. A lot of changes have occurred in the past two years. Leadership changes, survival of EPIC roll out, restructure of the South Bay community, Joint Commission survey accreditation with superb results. We worked on the Cardiovascular Campaign, Physician Campaign, and hopefully also a generous philanthropic endeavor for our ministry. We continually address our market position in our Affordable Care Act era along with providing the best patient care experience. Our medical staff leaders are committed to embark into a patient safety-centric culture (High Reliability Organization) in the next three years. But throughout this journey, we are unscathed and thriving beyond expectations. We have received many accolades and awards that recognizes Providence Little Company of Mary Medical Center Torrance as one of the most outstanding hospitals in the nation. Those are listed on the side of this newsletter and recently we have attained the Becker Top 100 Hospital and Leapfrog “A” designation (the only hospital in Southern California Providence Health System).

I appreciate the support that I have received from administration, medical staff, caregivers, and of course our exceptional Medical Staff Services. Without the support of everyone, this job would have been immensely difficult. It has been my honor to have served! I would like to wish continuing success with future prosperity to all and to our Thomas Lowe, MD, 2016-2017 President of the Medical Staff. Under Dr. Lowe’s leadership, our hospital will continue to move forward and to new heights!

Wishing your family and friends health and happiness in the New Year.

Happy Holidays!

Michele Del Vicario, MD
THE HEALING POWER OF CONVERSATION

The Institute for Human Caring Conducts Preceptor Training for Using the Serious Illness Conversation Guide

Ira Byock, MD - Executive Director and Chief Medical Officer of the Providence Institute for Human Caring

“I have lung cancer;” the patient said from his hospital bed. “It’s spread. I’m getting treatment for it, and we’re going to beat it.”

The patient didn’t respond to an initial round of chemotherapy and was on second-line treatment. Hospitalized with acute shortness of breath, work-up at the time revealed pneumonia and progression of the disease. The prognosis: less than one year.

But Bob Tully, a volunteer actor, convincingly played the role of a seriously ill patient in denial.

“This is just another stage in our fight to get rid of this and get back to our normal lives,” he said.

The Providence Institute for Human Caring recently trained 18 top palliative caregivers from Southern California and Seattle ministries how to assist other clinicians on having effective conversations with seriously ill patients— including those resistant to hard truths about their medical condition.

This intensive course at the Providence Simulation Program in Torrance, Calif., will help clinicians use the Serious Illness Conversation Guide (SICG) as a communication tool in their own hospitals and offices. Derived from evidence-based best practices, the SICG is an advanced communication intervention that supports clinicians in generating a personalized care plan for patients living with serious illness.

These new “preceptors” will assist clinical colleagues in using the SICG and a corresponding EPIC charting tool to facilitate more, earlier, and better goals of care conversations with patients.

The clinicians who participated in this eight-hour preceptor course overwhelmingly gave the training high marks. They recognize that conversations of this nature are key to good patient care, yet are not generally taught in medical schools. Being able to practice with “standardized patients” and among colleagues who can give helpful feedback and support is invaluable.

While doctors may worry that frank conversations with seriously ill patients may cause harm, Dr. Brian Madden, MD, of Providence Saint John’s Health Center, in Santa Monica, Calif., observed, “When executed well, the conversation … can be empowering and reassuring, and give control back to the patient.”

“We have an obligation to provide the best care possible, and being able to have a serious illness conversation done well is as important as not botching a surgery because the surgeon operating really wasn’t comfortable (or properly trained) to do that procedure,” Dr. Madden added. Research indicates this type of palliative care can improve the satisfaction among seriously ill patients, while reducing unwanted, aggressive treatments, as well as costs.1

The daylong, peer-learning preceptor program was part of the Institute’s whole person care initiative, a two-year exemplar pilot program launched in September at three ministries in Southern California.

This advanced communication training is one component of whole person care that will be implemented system-wide under the auspices of the Institute. The initiative comes at a time when patients confront increasing challenges related to aging, chronic illness, and how they manage, pay for, and define the quality of their care.

While the U.S. health system is among the best in the world at diagnosing and treating diseases, it’s demonstrably deficient in meeting the needs of patients and families going through serious illness. The Institute for Human Caring seeks to remedy this, and in the process transform health care.

NEW IRS 501r REQUIREMENT

The Internal Revenue Service (IRS) has imposed new requirements for all non-profit hospitals effective January 1st, 2016. One of the new requirements that affects community providers is the requirement for hospitals to publish and maintain a listing of all providers or provider groups who are privileged to provide services at or for the hospital and indicate their participation or non-participation in the hospital's Financial Assistance Policy.

• To participate in the hospital’s charity policy means that the provider or provider group is willing to discount their services (charges) at the same level as the hospital charity discount, for services provided in conjunction with a hospital service. Services provided in private practice, that are not related to hospital services are excluded from this agreement.

• To not participate means the provider or provider group may not offer charity discounts, or may offer charity discounts that are different from the hospital’s.

By communication to your office, we have asked for your preference to participate or not participate. For additional information, please call Medical Staff Services at 310.303.6700 and they will facsimile transmit or e-mail the coverage agreement and FAQ sheet.

DOCUMENTATION OF CENTRAL LINE NECESSITY

CDPH requires daily assessment and documentation of line necessity by a licensed care giver (defined as a person with the authority to order insertion or discontinuation of a central line). Please be mindful of this requirement when you do your charting.

This activity is separate from inspection of the line insertion site which is a routine part of daily nursing care.

Providence Little Company of Mary Medical Center Torrance
POLICIES AND PROCEDURES

GENERAL P&Ps
Medical/Professional/AHP Staff Fund(s) Handling Policy (new: Southern California Region)  
The Initial Application Process (new)  
Scope of Service: Clinical Decision Observation Unit (CODU)

HEALTH EDUCATION P&Ps
Periodic Review (review only - no changes)  
Honoraria  
Commitment  
Enduring  
Publicity

INFECTION & BLOOD P&Ps
Employee Food & Drink in Patient Care Areas (revised)  
Handling of Patient’s Food from Home (revised)  
Interim Life Safety measures (revised)  
Reprocessing of Single Use Equipment (Regional Policy)  
IP Program Plan, Evaluation of Effectiveness, Risk Assessment and Prioritization, Strategies to Minimize, reduce, Eliminate Risk of Infection (revised)  
Sharps Container Disposal (revised)  
Temperature and Humidity in the O.R. (revised)

MEDICAL RECORD TASK FORCE P&Ps
Suspension for Delinquent Medical Records (revision: include missing clause and “strike-out” of a comment)

MEDICINE DEPARTMENT P&Ps
Scope of Service: Progressice Care Unit (PCU) (revision: addition of Phase II)  
Heart Express (revision)

OBSTETRICS AND GYNECOLOGY P&Ps
Perinatal loss (new)  
Antepartum Testing (new - Southern California Region)

ONCOLOGY P&Ps
Patient Safety Evaluation System Policy (new)  
Cancer Program - Cancer Registry (periodic review)  
Survivorship Care Plan Policy (periodic review)

PHARMACY & THERAPEUTICS P&Ps
Clinical Diabetics: fluid Restrictions (revision: reflect changes with EPIC and to reflect nursing responsi bility for fluids)  
Medication Black Box Warning (Southern California Region)  
Range Orders and Multiple Pain Meds - Post EPIC (Southern California region)  
Security and Storage of Drugs (revision: updated)

PHYSICIAN EXCELLENCE COUNCIL P&Ps
Periodic review (review only - no changes)  
Focused Professional Practice Evaluation  
Ongoing Professional Practice Evaluation

POST ACUTE CARE P&Ps
Admission Criteria for Transitional Care beds  
Bowel and Bladder Management Program

RN/MD INTERDISCIPLINARY PRACTICE P&Ps
Periodic Review (review only - no changes)  
Standardized Procedures for Medical Functions in the Emergency Department and Course Completion report

SURGERY DEPARTMENT P&Ps
Temperature and Humidity in Procedural Areas (revision: in accordance with Joint Commission standards, temperature in each procedural area will be observed prior to the first procedure of the day)
Welcome Medical Staff...

Diana ALBIDRES, NP
Emergency Medicine

Larry CABRAL
Orthopedic Surgical Scrub Tech

Melissa CAMOUSE, DO
Dermatology

Disaya CHAVALITDHAMRONG, MD
Gastroenterology

Beverly CHEN, MD
Gastroenterology

Kimberly CHEONG, MD
Pediatrics

George EMERSON, MD
Neonatology

Diana GILKER, NP
Emergency Medicine

Melody GRIMMETT, NP
Emergency Medicine

Jamal HASAN, MD
Neonatology

David HOANG, DO
Family Medicine

Thomas JACOB, MD
Pediatrics

Jay JOO, MD
Pediatrics

Sheena KAMRA, MD
Pediatrics

Jeffrey KIM, MD
Neurology

Jessica KLUG, NP
Emergency Medicine

Erin MELLANO, MD
Obstetrics & Gynecology

Bryan MITTON, MD
Pediatrics

Melissa MUNSELL, MD
Gastroenterology

Carilyn SPARKS, MD
Obstetrics & Gynecology

Ben TSENG, MD
Neurology

Phillip WILLIAMS, MD
Orthopedic Surgery

Sue YIE, MD
Palliative Care

FAREWELLS

Lynne Armstrong, NP (Emergency Medicine)
Michael Bantiff, MD (Orthopedic Surgery)
Roseanne Berto (Perfusionist)
Charlton Byun, MD (Teleradiology)
Matthew Cavagnaro, MD (Orthopedic Surgery)
Drew Cheng, MD (Anesthesiology)
Tracy Chien, MD (Neurology)
Marc Cohen, MD (Emergency Medicine)
Gary Douteth, MD (General Surgery)
Matthew Fishman, MD (Orthopedic Surgery)
Stanley Golden, MD (Internal Medicine)

Murali Kadri, MD (Neonatology)
Dong Kim, MD (Teleradiology)
Weidong King, MD (Neurology)
Claudia Kwon, MD (Pediatric Neurology)
Franz Lamey, MD (Orthopedic Surgery)
Michael Marziale (OrthoScrub Tech)
John Moe, MD, PhD (Internal Medicine)
Gregory Pinkowski, MD (Orthopedic Surgery)
Patrick Popi, MD (Emergency Medicine)
Priti Pun, DO (Neonatology)
Mark Sando, MD (Orthopedic Surgery)

Natalie Sidhu, MD (Pediatric Emergency Med)
Brian Schub, MD (Orthopedic Surgery)
Susan Sobczak-Hof, DO (Neonatology)
Michael Stanton, MD (Orthopedic Surgery)
Fernando Thedepali, MD (Internal Medicine)
Dusty Tunnell (OrthoScrub Tech)
Clifford Wang, MD (Emergency Medicine)
Tyler Welch, MD (Orthopedic Surgery)
Lowry Webb, PhD (Clinical Psychology)
Ioannis Zouzas, MD (Orthopedic Surgery)
Gene Hawkins, MD (Family Medicine)
THANK YOU TO OUR PHYSICIANS

231 (79.66%) OF THE 290 SELECTED PHYSICIANS PARTICIPATED IN THE

2015 PHYSICIAN ENGAGEMENT SURVEY

CONGRATULATIONS
TO OUR PHYSICIAN SURVEY RAFFLE WINNERS

Luis Abrishamian, MD (Emergency Medicine)  David Lu, MD (Obstetrics-Gynecology)
Amazon Gift Card                    Macy’s Gift Card

Rashaan Ali-Jones, MD (General Surgery)  Michelle Charfen, MD (Emergency Medicine)
Penzey Spice Box                      Macy’s Gift Card

Sherry Sonka-Maarek, MD (Phy Med/Rehab)
$200 Terranea Gift Card

SYMPTOMS OF PHYSICIAN BURNOUT

Holiday stressors are right around the corner. Family & friend obligations compete even more than usual with the seasonal demands of your role as a physician. Managing the increased stress of the holidays is critical to your wellbeing, your family’s wellbeing, & your patients’ wellbeing. Please be keenly mindful of your own vulnerability during the holidays. Research shows that physicians are just as vulnerable to holiday blues as the general population. Exhaustion and tensions with family members & friends can lead to excessive stress and substance use which can lead to medical & personal errors. Be deliberate about managing your mood & health during the holidays.

Dr. Vivian Credidio is a clinical psychologist contracted by the MEC & the administration, to meet the counseling needs of physicians. Please contact Dr. Credidio for support and guidance. She is available to meet in person at her private practice office in Manhattan Beach, or at your office, or by phone. Confidentiality is safeguarded. Fees are covered by the MEC & the administration, hence no need for concern about insurance or electronic trail. Know that you can reach out to Dr. Credidio for any concerns or questions. For easy access, please enter her contact information in your cell directory:

Dr. Vivian Credidio
310-621-6619

Providence Little Company of Mary Medical Center Torrance
Venerable Mary Potter
Foundress, Sisters of Little Company of Mary

Mary Potter was born on November 22, 1847 in Bermondsey, London, England. Her compassion for the sick and dying and her vision would change the lives of tens of thousands of people around the world. As a young woman, Mary Potter seriously considered marriage and was in fact engaged for a time. She eventually broke off the engagement so that she could devote her life to prayer and good works. In December of 1868, at the age of 21, the Sisters of Mercy accepted Mary Potter as a postulant. However, within the year, Mary became ill and had to return home. During this first of many confinements, she asked other women to join with her in a ministry of care for the sick and dying.

The Sisters of the Little Company of Mary were founded on July 2, 1877. Their name and mission were inspired by Mary, the mother of Jesus, and the little company of faithful followers who remained with her at the foot of the cross on Calvary offering Jesus and Mary their compassionate presence.

In November 1919, President Wilson proclaimed November 11 as the first commemoration of Armistice Day with the following words: "To us in America, the reflections of Armistice Day will be filled with solemn pride in the heroism of those who died in the country’s service and with gratitude for the victory, both because of the thing from which it has freed us and because of the opportunity it has given America to show her sympathy with peace and justice in the councils of the nations…"

Thank you
to our Veteran Physicians!
### December 2015

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**FINAL:** September 9, 2015 – **Highlighted meetings are CME programs** and all meetings held in Center of Health Education.

### January 2016

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<td>12:30p- Medicine Dept</td>
<td>7:00a-Cardiac Surgery Conference 12:30 -Institutional Rev. 5:30p-Statement of Concern 6:00p-Medical Executive</td>
<td>7:15a-Breast Cancer Conference 7:45a-Cancer Conference 12:30p-Critical Care</td>
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<td>7:00a–Anesthesia Dept. 12:30 pm- New Medical Staff Orientation</td>
<td>7:00a-Cardiac Surgery Conference 7:00a-Physician Well 12:30p-Comprehensive Stroke Conference 12:30p-Pharmacy &amp; Therapeutics Committee 12:30p-Oncology Dept. 12:30p-Cardiology QR</td>
<td>7:15a-Breast Cancer Conference 7:45a-Cancer Conference 12:30p-Surgical Case Presentations</td>
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<td>7:00a–Endovascular Committee 12:30p-Utilization Review</td>
<td>7:00a-Cardiac Surgery Conference 12:30p - Emergency Dept.</td>
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<td>7:00a–Surgery Quality Review 12:30 pm- General Professional Staff</td>
<td>7:00a-Cardiac Surgery Conference 12:30p-Cardiology Subsection 12:30 pm –RNIMC Interdisciplinary Meeting</td>
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**FINAL - 10/19/2015--** please note that all meetings held in Center of Health Education – **Highlighted are the CME.** Category I approved meetings – see back for description and all meetings are subject to change. As of October 2015 - Pharmacy and Therapeutics Committee moved to 2nd Tuesday of the month.