

Minutes

Joint Conference Committee

Board of Governors

University of Minnesota Hospitals and Clinics

November 18, 1975

Present: Albert Hanser, Chairman
Edward Ciriacy, M.D.
Marie Manthey
Al Michael, M.D.
Rubin Ruiz
Paul Winchell, M.D.
John Westerman

Absent: Joseph Buckley, M.D.
John Delaney, M.D.
Eugene Gedgudas, M.D.
Michael Paparella, M.D.

Staff: Robert Baker
Johnelle Foley

Guests: A. Deinard, M.D.
Beverly Dorsey, R.N.
R. Risch, M.D.
Gregory Hart
Rosemary Husa, R.N.
Karen Reigstad, R.N.
Jan Schindler

The seventh meeting of the Joint Conference Committee of the Board of Governors was called to order by Albert Hanser, Chairman, at 6:00 p.m., in the East Wing of the Campus Club.

The minutes of the last meeting were received by the Committee.

I. Credentials Committee Report

Dr. Winchell stated that the Credentials Committee recommended the attached list of applicants to the Medical Staff. He reported that the Credentials Committee had examined all pertinent information concerning the applicants professional competence and qualifications and that the applicants and their privileges had been approved by the Medical Staff-Hospital Council.

In response to a question from Chairman Hanser concerning the Joint Commission's recommendation of a reappraisal of Medical Staff appointments every three years, Dr. Winchell stated that the Credentials Committee was examining methodologies to handle this process.

On a motion made by Dr. Winchell and seconded by Ms. Manthey, the appointments to the Medical Staff were approved by the Joint Conference Committee.

II. Patient Relations Department Status Report

Mr. Baker reminded the Committee of a report presented to them in September by Ms. Kathy Countryman, Director of the Patient Relations Department. At that time it was pointed out that the Volunteer Patient Representative Program had been discontinued due to a lack of staff to address the patient concerns which volunteer patient representatives would uncover. Mr. Baker reported that existing budget funds had been reallocated to permit the approval of the additional positions requested for this department. The additional staff will be secured by early next year and the Patient Representative Program will be reactivated.

III. Medical Audit Presentation

Ms. Rosemary Husa introduced the Well-Child Ambulatory Care Audit to the Committee. She explained that the audit followed the recommended Joint Commission methodology for medical audits with modifications to accommodate an ambulatory care situation. She mentioned that the audit was a retrospective review of one year of visits of children from birth to six months of age.

Ms. Karen Reigstad described the Well-Child Clinic as a primary care program located in the Pediatric Clinic. She told of the type of care which was provided in the clinic and how the audit was started over a year ago to discover how that care could be improved. It was decided then that the audit would be a joint venture of the Medical and Nursing staffs.

Dr. Deinard, a member of the criteria revision committee, and Dr. Fisch, a member of the audit team, discussed the findings of the audit. Although it was felt that quality care was being provided in the clinic, documentation of this care was found to be insufficient. As a result of the audit, a child care history form has been developed to reduce the time involved in documentation. Dr. Ciriacy complimented the audit group on systematizing their care to allow for the efficient use of physicians' time by appropriately utilizing forms and other members of the health care team such as nurse practitioners.

Mr. Ruiz asked about public acceptance of nurse practitioner types. Dr. Winchell commented that acceptance of these individuals will increase with education of the public as to their skills. Dr. Ciriacy added that the key to this education must be a clear identification of the system of accountability within the health care team.

In conclusion it was pointed out that this was a landmark audit in that it studied a well situation, was conducted in an ambulatory care setting, and was a joint effort by the Medical and Nursing staffs.

IV. Bed Allocation Review

Dr. Michael, the Chairman of the Bed Allocation Committee, began his review of the committee's role by describing some of the trends experienced at University Hospitals. He mentioned that while admissions per year had increased over the years, average length of stay had decreased from approximately 15 to 10 days. He stated that the hospital now has 788 beds with a fairly stable occupancy rate of 72%. Beds, he commented, were allocated to services with disease type and case severity as primary factors in determining patient placement.

Dr. Michael explained that the Bed Allocation Committee was aware of the increasing costs of health care. Thus, they see their role as an effort to allocate beds efficiently to meet the needs of patients for service and the needs of students for educational settings. He explained that one process developed to increase the

efficient use of beds was the establishment of a policy which stated that 50% of the vacant beds on any service would be opened for off-service admissions, thus eliminating waiting periods for patient admissions and providing the system with more flexibility.

Mr. Baker distributed to the Committee copies of the 1974-75 Statistical Report and a survey of census by service.

Ms. Manthey asked if this discussion of bed allocation was due to a problem in the process. Mr. Baker explained that it was initiated partially due to a Facilities Committee inquiry as to why beds could not be cut back to accommodate storage and patient and visitor comfort. He further explained that unrestricted adult beds frequently experienced over 95% occupancy. Dr. Michael added that consideration of the future development of new innovative programs was impossible due to the lack of space in the present facility. He explained that the institution was unable to keep up with the progress of medical care because the facility does not allow for expansion to accommodate new programs. He concluded that the Bed Allocation Committee was working to most efficiently and effectively provide quality services within the limitations of the facility. Dr. Ciriacy pointed out that the Medical Staff as a whole has made great progress in working together toward institutional goals.

IV. Other

Mr. Hart commented that labor negotiations with AFSCME were progressing slowly.

Dr. Winchell mentioned that Cook County Hospitals House Staff strike had recently ended. He added that although possible, the University Hospitals' House Staff did not have a history of actively organizing.

Chairman Hanser commented on the fact that due to a recent court decision, the University of Minnesota was no longer protected by Sovereign Immunity. Mr. Baker

explained that this would become effective August 1, 1976, and that in the interim University Hospitals would be investigating various mechanisms to provide liability coverage for the hospital.

There being no further business, Chairman Hanser adjourned the meeting at 7:00 p.m.

Respectfully submitted,

Johnelle Foley

Johnelle Foley
Secretary

Minutes

Joint Conference Committee

Board of Governors

University of Minnesota Hospitals & Clinics

October 21, 1975

Present: Albert Hanser, Chairman
Edward Ciriacy, M.D.
Eugene Gedgaudas, M.D.
Al Michael, M.D.
Michael Paparella, M.D.
Rubin Ruiz
John Delaney, M.D.
Paul Winchell, M.D.
John Westerman

Absent: Joseph Buckley, M.D.
Marie Manthey

Staff: Robert Baker
Michael McKee
Johnelle Foley

Guests: Jan Schindler
Gregory Hart
Theodore Thompson, M.D.
John Reynolds, M.D.
Steve Carlton

The sixth meeting of the Joint Conference Committee of the Board of Governors was called to order by Albert Hanser, Chairman, at 5:45 p.m., in the West Wing of the Campus Club. The minutes of the last meeting were received by the Committee.

I. Credentials Committee Report

Dr. Winchell stated that the Credentials Committee recommended the acceptance of the attached list of new applicants to the Medical Staff. He reported that the Credentials Committee had examined all pertinent information concerning the applicants professional competence and qualifications and that the applicants had been approved by the Medical Staff-Hospital Council.

On a motion made and seconded, the new appointments to the Medical Staff were approved by the Joint Conference Committee.

II. Medical Audit Presentation

Ms. Jan Schindler introduced Dr. John Reynolds to the Committee members and explained that Dr. Reynolds would provide the Committee with a summarization of the Neonatal Respiratory Distress Syndrome Audit.

Dr. Reynolds' cited the need to document severity test scores and respiratory therapy records in patients' medical records as significant findings of this audit. He commented on the uniqueness of University Hospitals' Neonatal Intensive Care Unit in terms of the type of patients it serves, that is, the severity of the cases which come to the Unit and the great distances from which they come. Dr. Reynolds also mentioned that consideration was being given to changing the type of respiratory ventilators used in the treatment of neonatal respiratory distress. He concluded by stating that he viewed the medical audit as beneficial in indicating variables which could be more closely controlled to minimize complications in this area.

The audit as presented was accepted by the Joint Conference Committee.

III. Review of Joint Commission on Accreditation of Hospitals Survey

Mr. McKee explained the Joint Commission survey process to the Committee, pointing out that the standards upon which the Commission's recommendations are based are those standards established by hospital departments themselves, and thus, the surveyors function as consultants. He mentioned that a formal written report of the site visit would be sent to the hospital in 3 or 4 weeks and that his comments on the survey were based on the summation conference held on the last day of the visit.

Mr. McKee listed the various findings of the survey team and in doing so highlighted certain themes which were noted in a majority of the hospitals' departments.

Documentation of continuing education, policies, rules and regulations, and procedures was one such theme. The role of the departments in the hospitals' infection control program was another. Comments on insufficient space and storage were prevalent, as were comments on inadequacies of environmental safety controls. Areas which were commended for their excellence included the Joint Medical Staff -Nursing Audits and the Social Service Department.

Mr. McKee concluded that other than structural problems, there were no serious or life-threatening concerns raised and that accreditation is expected.

IV. Other

Dr. Gedgaudas announced that the Medical School would be visited in the coming week for its accreditation. He explained that this is a process which takes place every seven years.

Mr. Baker informed the Committee that its next meeting would include a report on the Residential Care-Child Psychiatry Unit, an examination of the bed allocation procedure at University Hospitals, and an explanation of the utilization review process.

There being no further business, Mr. Hanser adjourned the meeting at 7:25 p.m.

Respectfully submitted,



Johnelle Foley
Secretary

REQUESTS FOR MEDICAL STAFF APPOINTMENT & PRIVILEGES

| | <u>CATEGORY</u> |
|--|-----------------|
| <u>LABORATORY MEDICINE & PATHOLOGY</u> | |
| Bernard E. Statland | Attending |
| Norman B. Ratliff, Jr. | Attending |
| <u>INTERNAL MEDICINE</u> | |
| Malcolm N. Blumenthal | Clinical |
| William B. Ogden | Clinical |
| <u>NEUROLOGY</u> | |
| Robert J. Gumnit | Attending |
| Assa Mayersdorf | Attending |
| <u>OTOLARYNGOLOGY</u> | |
| Robert H. Maisel | Attending |
| <u>PEDIATRICS</u> | |
| Jon I. Scheinman | Attending |
| <u>PSYCHIATRY</u> | |
| Michael K. Popkin | Attending |
| <u>RADIOLOGY</u> | |
| Charles G. Jacoby | Attending |
| <u>SURGERY</u> | |
| Melvin P. Bubrick | Attending |

REQUEST FOR CHANGE IN STAFF CATEGORY

| <u>OBSTETRICS & GYNECOLOGY</u> | <u>FROM</u> | <u>TO</u> |
|------------------------------------|-------------|-----------|
| Leon L. Adcock | Clinical | Attending |

Minutes

Joint Conference Committee

Board of Governors

University of Minnesota Hospitals and Clinics

September 16, 1975

Present: Albert Hanser, Chairman
Joseph Buckley, M.D.
Eugene Gedgudas, M.D.
Marie Manthey
Al Michael, M.D.
Rubin Ruiz
John Delaney, M.D.
John Westerman

Absent: Edward Ciriacy, M.D.
Michael Paparella, M.D.
Paul Winchell, M.D.

Staff: Robert Baker
Michael McKee
Dick Pierson
Johnelle Foley

Guests: Kathy Countryman
Al Dees
Charles Drage, M.D.
Gregory Hart
Richard Kronenberg, M.D.
Sue Campion, R.N.

The fifth meeting of the Joint Conference Committee of the Board of Governors was called to order by Albert Hanser, Chairman, at 5:50 p.m., in the West Wing of the Campus Club. The minutes of the last meeting were received by the Committee.

I. Credentials Committee

Dr. Buckley reported that the Credentials Committee had received and reviewed the recommendations for re-appointment from the clinical chief of each service. He also reported that the Credentials Committee had examined all pertinent information provided to them concerning new applicant's professional competence and qualifications. Therefore, with the approval

of the Medical Staff-Hospital Council, the Credentials Committee recommended the following medical staff members for reappointment to the medical staff through June 30, 1976 and new applicants for appointment to the University of Minnesota Hospitals' medical staff. (Lists attached).

On a motion by Dr. Gedgaudas and seconded, the recommended re-appointments and new appointments to the medical staff were approved by the Joint Conference Committee.

II. Disaster Drill

Dr. Drage described the disaster drill which took place at the hospital on the evening of August 25th, commenting that generally the drill went very well. Mr. Hanser, who was in attendance at the drill, cited various problem areas which were noted at the critique immediately following the drill. Mr. McKee assured the Committee that elements of the disaster plan were being re-worked to resolve those problem areas which were revealed in the drill.

III. Medical Audit

As required by the Joint Commission on Accreditation of Hospitals, Dr. Kronenberg presented the Cystic Fibrosis medical audit to the Joint Conference Committee, as the first of 12 audits to be reviewed. Dr. Kronenberg provided the Committee with an overview of the audit, and pointed out major results such as the establishment of a documented protocol for the care of patients with cystic fibrosis and the hiring of a nurse clinician to educate the nursing staff to this protocol have resulted from the audit. He cited admissions of patients for reasons of education as a major point of concern with which the audit committee dealt and concluded that it was their feeling that exceptions to established criteria indicated considerable thought and examination process.

Following discussion concerning the follow-up elements of the medical audit, Mr. Hanser's motion was seconded and passed to accept the cystic fibrosis medical audit.

IV. Patient Rights

Dr. Delaney provided the Committee with a history of the Patient Rights Program at University Hospitals, explaining that the hospital had developed a document of rights and responsibilities 2 months prior to the enactment of state law which required that hospitals provide their patients with a copy of the state's established rights.

Kathy Countryman, Director of Patient Relations Department, distributed copies of the patient rights brochure to the committee. She explained that the impact of the brochure was difficult to measure as the law was receiving publicity and patient representatives were initiated at close to the same time as the initial distribution of the brochure. It was suggested that in the future the brochure be distributed to out-patients as well as in-patients.

Ms. Countryman then provided the Committee with a description of the patient representative program, supplying members with documentation of the program's history, annual report, and summary of activities. Discussion then followed questioning the discontinuance of the volunteer portion of the program based on the inability to fill the one position requested. Ms. Countryman explained that the volunteer program was losing credibility based on inability to respond to patient needs without additional staff. Mr. Westerman went on to explain that over 300 new positions were requested for this year and that to accommodate an appropriate rate increase, once basic budget needs were met, priorities had to be set as to which personnel requests could be met.

Mr. Baker added that hopefully within the next two months low priority programs could be identified and phased out to allow for the reconsideration of position requests. Mr. Baker concluded that he would report back to the Committee on this matter in two months.

V. Other Business

Mr. Baker reported that the results of the hospitals labor election of September 9th and 10th indicated an overwhelming victory for the American Federation of State, County and Municipal Employees over Teamster representation or hospital management. He indicated that contract negotiations with AFSCME would probably commence the first week in October.

Mr. McKee announced that the Joint Commission on the Accreditation of Hospitals will be coming to University Hospitals for a site visit on October 15th, 16th, and 17th. Mr. McKee highlighted some of the major areas which the JCAH will be examining and explained that the site visit process was also an educational and informative experience. The condition of the physical facility was cited as the potential area of greatest concern to the hospital surveyors.

Mr. Baker announced that planning was underway to establish a childrens' psychiatric residential treatment facility in conjunction with Abbott Hospital. An Abbott nurse's dormitory is being considered for housing of the facility. Mr. Baker went on to explain that this program is being developed concurrently with the trend in Psychiatry toward out-patient treatment.

There being no further business, Mr. Hanser adjourned the meeting at 6:55 p.m.

Respectfully submitted,
Johnelle Foley
Johnelle Foley
Secretary

Minutes
Joint Conference Committee
Board of Governors
University of Minnesota Hospitals & Clinics
August 19, 1975

Present: Albert Hanser, Chairman
Joseph Buckley, M.D.
Marie Manthey
Al Michael, M.D.
Paul Winchell, M.D.
Rubin Ruiz
John Delaney, M.D.
John Westerman

Absent: Edward Ciriacy, M.D.
Eugene Gedgaudas, M.D.

Staff: Robert Baker
Michael McKee
Dick Pierson
Johnelle Foley

Guests: Jan Schindler
Al Dees
Dana Ramish
Bob Emmett

The fourth meeting of the Joint Conference Committee of the Board of Governors was called to order by Albert Hanser, Chairman, at 5:15 p.m., in the West Wing of the Campus Club. The minutes of the last meeting were received by the Committee.

I. Credentials Committee

Mr. Baker and Dr. Winchell reported that because they did not reach a quorum, the Credentials Committee had no business to report for approval. They did mention that reappointments were complete, that a number of applicants were given temporary appointments, and that new appointments would be postponed for one month.

II. Joint Commission on Accreditation of Hospitals

Mr. McKee described the JCAH survey questionnaire document to the members of the committee and encouraged them to examine its contents personally at the end of the meeting. He explained that the document was sent to hospitals prior to the JCAH survey so that the survey team could have basic knowledge of the hospital and its departments before their visit.

Mr. McKee stated that the document was completed and mailed to the JCAH on July 1st and that a site-visit is expected in mid-October. A 45 day notice will be provided by the Commission of its visit dates.

In response to questions, Mr. McKee informed the Committee that the results of the last survey showed weaknesses in the areas of governance and mechanisms for quality assurance. He promised to supply the Committee with the written results of the Commission's last survey. He also indicated that the major concerns of this years JCAH survey were expected to be sub-specialty organization and compliance with the regulations of the Occupational Safety & Health Act.

III. Disaster Drill

Mr. McKee mentioned that there will be a surprise evening disaster drill in the near future and that committee members will be informed of the date a few days prior to the drill so that if they wish, they may attend.

Mr. McKee reported that a mock communications drill was held recently and that there was a 90-95% positive response on phone calls to the medical staff. By cutting down the community co-ordinating list of calls to be made, it was felt that a bottle-neck which was found in the system could be alleviated.

Discussion was also held on the educating of physicians to the disaster plan, the designation of University Hospitals as a regional emergency referral center, the accessibility of the ambulance entrance and parking and the planned beeper communications systems. Mr. McKee concluded that he was most encouraged by the commitment and interest of individuals throughout the hospital in the Disaster Committee's work.

IV. Medical Audit

Ms. Janet Schindler, Program Coordinator, Quality Assurance Program, provided the committee with an in-depth presentation on the process of medical audit. With the assistance of slides, Ms. Schindler took the committee through the history and background of medical audit, the medical audit cycle, and the organization of the medical audit program as it was developed for University Hospitals.

The Committee reviewed an audit of cystic fibrosis and Ms. Schindler explained how the results of the audit were utilized by the particular department involved, its physicians and nurses. Ms. Schindler also explained the differences between utilization review, a concurrent practice, and medical audit, a retrospective review.

Ms. Schindler informed the committee that according to JCAH requirements, 12 audit summaries must be reviewed by the governing board before the up-coming site visit. It was decided by the members that medical audit review could be a function of the Joint Conference Committee and that perhaps the review of 3 or 4 audits would be sufficient at this time, considering the newness of the committee.

In relation to this, Mr. Westerman mentioned that the Foundation for Health Care Evaluation, an off-shoot of the Hennepin County Medical Society, which has been assigned as the conditional PSRO for the metropolitan area, does not feel University Hospitals is supportive of its efforts because we have not contributed a \$20,000 annual assessment to support ancillary programs of the Foundation. It was explained that the medical staff did not feel that it was reasonable for patients to be affected by this monetary request. Mention was also made of the fact that several other hospitals, although their assessments were much less, were similarly holding back. It was further explained to the committee that although they were not contributing to the Foundation, University Hospitals was still supportive of the Foundation and in compliance by following the regulations of the JCAH. Mr. Hanser concluded the discussion by stating that the committee appreciated being made aware of the situation and that he would personally

investigate the matter further. At the completion of this discussion, Ms. Schindler distributed copies of the Program Manual for University Hospitals and requested the committee to review this in light of the up-coming audit reviews which they will be doing.

V. Other Business

Mr. Baker announced that the Clinical Chiefs have decided to provide full medical services to Vietnamese refugees free of charge and accept as compensation the level of financing available from third parties. The service is being provided as a supplement to existing community services and will utilize translators if necessary.

Mr. Dees of the Admissions Department informed the committee that there were 1,959 admissions in July which is the greatest number of admissions since July of 1972.

Mr. Hanser inquired as to malpractice suits brought against University Hospitals' physicians. Dr. Winchell explained that the medical staff deals with these suits through St. Paul Companies which provides their malpractice coverage and counsel.

Mr. Westerman mentioned that developments were progressing in securing corporate counsel for the Board of Governors.

Mr. Baker concluded that the Patient's Rights brochure for University Hospitals and Clinics would be introduced and explained at the next meeting of the Joint Conference Committee.

Mr. Hanser adjourned the meeting at 7:15 p.m.

Respectfully submitted,


Johnelle Foley
Secretary

Minutes

Joint Conference Committee

Board of Governors

University of Minnesota Hospitals and Clinics

May 15, 1975

Present: Joseph Buckley, M.D., Albert Hanser, Chairman, Marie Manthey, Al Michael, M.D., John Westerman, Paul Winchell, M.D.

Absent: Edward Ciriacy, M.D., John Delaney, M.D., Eugene Gedgudas, M.D., Michael Paparella, M.D.

Staff: Robert Baker, Paul Rader

Guest: James House, M.D.

The second meeting of the Joint Conference Committee of the Board of Governors was called to order by Ms. Manthey at 6:45 p.m., in Room 405 of the Campus Club. The minutes of the last meeting were received by the Committee members. Dr. Buckley moved that the minutes be approved. The motion was seconded and was passed without dissent.

I. Bylaws Motion Approval - Mr. Robert Baker

A summary of previous Board of Governors' action in regard to the Bylaws was provided. No formal action had been taken by the Board at its last session. A statement concerning adoption was given to the Committee members and a request was made to formally move that the Board approve the Bylaws at the May 21, 1975 meeting. After brief discussion, the Committee voted to approve such a motion.

II. Joint Commission on Accreditation of Hospitals - Mr. Robert Baker

It was stated that a responsibility of the Joint Conference Committee is to review the accreditation process, and to assist in accreditation. Another duty is to oversee disaster planning, a matter which will be considered at a future Committee meeting.

A brief history of the JCAH was provided and its basic principles and purposes were explained. A copy of the most recent JCAH report to University Hospitals and Clinics was given to the members, and this document was reviewed. It was observed that most of the recommendations made by the JCAH have been followed and that the remaining ones are being implemented. The recommendations and corresponding compliance actions were explained. It was said that the Special Care Unit recommendations are being carried out. University Hospitals will be able to inform the JCAH that all of the points have been satisfied.

The JCAH presently refers to our hospital as a model due to our significant efforts to improve Board and Medical Staff governance and implement a strong medical audit program.

III. Medical Staff-Hospital Council Election Process - Dr. Paul Winchell

In accordance with the Medical Staff Bylaws, the Medical Staff -Hospital Council recently appointed a Nominating Committee to nominate candidates for election to the Medical Staff-Hospital Council. The election is scheduled for June with the new members taking office on July 1, 1975.

IV. Credentials Committee Report - Dr. James House

Dr. House reported that all members of the Medical Staff are being processed under the intent of the Bylaws. Those physicians being considered will have their names submitted in a group in June. There still remain some matters of interdepartmental privileges to be established. The Credentials Committee will serve as a facilitator of the policies regarding privileges.

Finally, the Credentials Committee recommended the following six applicants for membership on the active medical staff:

| <u>Dentistry</u> | <u>Radiology</u> | <u>Surgery</u> |
|---|--------------------------------------|---------------------|
| Joseph P. Lindner, Jr. Paul R. Morgan Bruce L. Pilstrom | Kenneth B. Cram Leroy A. Forstrom | M. Michael Eisenber |

V. Amendments to the Utilization Review Plan - Mr. Robert Baker

The Utilization Review Plan was sent to the State Board of Health. This body said that, if 2 minor changes were made, the Plan would be accepted. Formal action of the Board of Governors is needed.

The meeting of the Joint Conference Committee adjourned at 7:40 p.m.

Respectfully submitted,


Paul Rader, Secretary

Minutes

Joint Conference Committee

Board of Governors

University of Minnesota Hospitals and Clinics

April 15, 1975

Present: Albert Hanser, Chairman, Joseph Buckley, Edward Ciriacy, John Delaney, Eugene Gedgudas, Marie Manthey, Ruben Ruiz, Michael Paparella, John Westerman, Paul Winchell, Robert Baker

Absent: Al Michael

Guests: Richard Pierson, Staff, Jan Schindler, Staff, Edward Seljeskog, M.D., Chairman, Utilization Review Committee

I. Introduction

Chairman Hanser called the Committee to order at 5:25 p.m. He then reviewed the fundamental purposes of the Joint Conference Committee.

II. Review of Committee Charge

Mr. Baker summarized the Committee's charge and reviewed the section of the University of Minnesota Hospitals and Clinics Board of Governors Bylaws which addresses the Committee. He observed that the Joint Conference Committee is the vehicle through which the Board of Governors endorses medical staff activities. Mr. Baker also discussed matters of Accreditation and Disaster Planning.

In addition, the University Hospitals and Clinic's agreement with the Metropolitan Health Board under conditions of the Certificate of Need for the B-C Building was explained.

III. Credentials Committee Report

The provisions of the Bylaws in regard to Medical Staff appointments were reviewed. A copy of the Credentials Committee report was included in the Committee notebook. Dr. Winchell moved that the report and recommendations of the Credentials Committee be approved. The motion was seconded by Dr. Paparella. Questions were raised concerning renewal of staff appointments and reviewal of privileges. The motion passed without dissenting vote.

IV. Utilization Review Plan

Dr. Seljeskog explained the history of the Utilization Review Committee. He said that it had been directed originally toward review of length of stay for Medicare and Medicaid patients. In October of 1973, Public Law 92-603, the so-called PSRO Law was passed. This covered all governmentally subsidized patients and called for accountability by hospitals. The review mechanism called for by the PSRO procedure is outlined in the material which was distributed to the Committee members.

Dr. Seljeskog stated that the Foundation for Health Care Evaluation in Minneapolis has been appointed provisionally as the PSRO representative for the area in which University Hospitals and Clinics are located.

Three relevant components of the PSRO process were discussed.

1. Utilization Review, which encompasses consideration of length of stay and extended duration review.
2. Admissions Review.
3. Audit. This factor is fully explained in the materials which were distributed. In actuality, it looks at quality of care. This is in contrast to Utilization Review and Admissions Review, which examine quantity of care. Audit is a retrospective function. Utilization Review and Admission Review fall under the domain of the Utilization Review Committee, while Audit is a responsibility of the Medical Audit/Medical Records Committee.

Dr. Seljeskog explained the steps involved in the program. The particulars of the plan are specified in the materials provided. It was said that an attempt is made to have physicians review cases which are not of their specialty.

The plan requires the full approval of the Board of Governors to be ratified. PSRO expects institutions to be in operation with Utilization Review by 1976. It was stated that records of the audit are kept, together with documentation of the progress, actions and disposition of each case.

Questions were raised about the actions which are taken in regard to offending physicians. The law requires that a file be maintained on each physician.

One of the criteria for admission will be that the patient has need for skilled nursing care. It is also stipulated that some diagnostic tests must be done in a hospital.

It was moved by Ms. Manthey that the report of the Utilization Review Committee be adopted. The motion was seconded by Dr. Gedgaudas, and passed without dissenting vote.

Dr. Paparella moved that the meeting of the Joint Conference Committee be adjourned. Ms. Manthey seconded the motion. The meeting was adjourned at 6:45 p.m.

Respectfully Submitted,



Paul Rader