



*Sutter Medical Center,  
Sacramento*

A Sutter Health Affiliate

# SMCS Physician

## Message from Tom Gagen, CEO

February 2010

### Physician Survey Results Show Improvement in Overall Satisfaction

The results of the annual physician satisfaction survey have arrived, showing improvements in several measures and an overall rating in the 60th percentile compared with similar hospitals – an 8 percent increase from last year. This survey, given to all physicians in the Sutter Health system every year, is one tool that helps Sutter continually improve the health care experience of our patients and the practice environment for our physicians. It measures physician views of the quality of the department, services and attributes of Sutter Medical Center, Sacramento, and identifies things that are working well along with areas needing improvement.

As in previous years, we partnered with Press Ganey, the health care industry's leading independent vendor of satisfaction measurement and improvement services, to conduct the survey between September and November 2009. We had a 41 percent return rate – it was 44 percent last year – and I want to extend a sincere thank-you to all who completed the survey.

The survey results fall into four different dimensions of physician satisfaction: perceived quality of patient care, ease of practice, relationships with hospital administration and overall physician satisfaction. In 2009, we improved in three of the four areas over our 2008 scores, which are shown in parentheses.

Dimensions of SMCS Physician Satisfaction: Percentile Rank			
Hospital Size Benchmark 500 + beds			
Quality Patient Care	Ease of Practice	Relation with Leadership	Overall Satisfaction
76 <sup>th</sup> (62 <sup>nd</sup> )	60 <sup>th</sup> (41 <sup>st</sup> )	64 <sup>th</sup> (73 <sup>rd</sup> )	60 <sup>th</sup> (52 <sup>nd</sup> )

In 2009, the areas that received the highest scores in terms of percentile rank were:

- Overall Rating of Anesthesiology (94th)
- Timeliness of Follow-Through on Written Orders (80th)
- Ease of Admitting Patients (80th)
- Response: Nursing Staff Leader (80th)
- Staff's Concern for Patients (78th)
- Staff Reports Patients' Conditions (78th)
- Information Re: Strategic Plan (77th)

However, while much of the survey showed improvements in 2009 over 2008, there were some questions that showed marked decreases. They include (with percentile ranks in parentheses):

- Access to Medical Equipment (32nd)
- Confidence in Hospital Administration (37th)
- Up-to-Date Medical Equipment (23rd)
- Overall Rating Hospitalist (33rd)
- Overall Satisfaction with IT (16th)

Based on the survey results, our leadership is currently developing action plans to improve at every level. In next month's SMCS Physician, we will let you know of these plans. We promise that we will work even harder in 2010 to improve SMCS for our doctors and, most importantly, for our patients.

### SMCS Welcomes New Medical Staff Members

**David M. Cooper, M.D.**

7501 Hospital Drive  
Suite 203  
Sacramento, CA 95823  
(916) 681-1130  
Specialty: Pediatrics

**Eunice J. Lee, M.D.**

77 Cadillac Drive, Suite 200  
Sacramento, CA 95825  
(916) 561-5911  
Specialty: Pediatrics

**Janelle L. McGough, D.O.**

Specialty: Emergency Medicine

**Roy B. Rubin, M.D.**

3315 Watt Ave.  
Sacramento, CA 95821  
(916) 481-6800  
Specialty: Anesthesiology

**Sara Sepehrdad, M.D.**

2516 Stockton Blvd.  
Sacramento, CA 95817  
(916) 734-8118  
Specialty: Pediatric, Nephrology

**Cindy Y. Thygeson, M.D.**

1111 Exposition Blvd.  
Building 700, Suite 102  
Sacramento, CA 95815  
(916) 580-5769  
Specialty: Psychiatry,  
Child/Adolescent

**Mark A. Warford, D.P.M.**

4136 Pennsylvania Ave.  
Fair Oaks, CA 95628  
(916) 548-0218  
Specialty: Surgery, Podiatry

**Kenneth C. Wong, D.D.S.**

6514 Lonetree Blvd., Suite 100  
Rocklin, CA 95765  
(916) 797-2700  
Specialty: Surgery, Oral Maxillofacial

### SHSSR Gears Up for In-Hospital Radiology Services

On April 1, Sutter Health Sacramento Sierra Region will be providing in-hospital radiological services at its acute-care facilities, including both Sutter General and Sutter Memorial hospitals. SHSSR is committed to providing excellent coverage and quality in radiology, and the transition will appear seamless to patients and their families.

Hiring all of the regular staff will take many months and will include a minimum of 21 dedicated radiologists representing all core subspecialty areas. On April 1, we will provide a combination of regular on-site radiologists, interim radiology staffing and teleradiology coverage, making sure we have an adequate number and quality of radiologists to care for patients. We continue to work through our established process for reviewing and approving the radiologists for interim staffing. New credentialing applications are being completed every day, and we are encouraging the various medical staff committees to meet weekly to complete their reviews.

The regular staffing credentialing process is progressing well. Sutter Medical Group has extended offers to and received acceptances from six of our required 21 radiologists. They include new Chief of the SMG Division of Medical Imaging Patrick Browning, M.D., who also specializes in body imaging.

"I am very confident in the quality of this group of radiologists and in the quality service we will be able to provide on April 1 and beyond," said Tom Gagen, CEO of SMCS.

In addition, the medical staff is invited to comment on the quality aspects of an exclusive arrangement for radiology services in the Sacramento Sierra Region. Please note the benefits, if any, that have been gained by operating the radiology service on an exclusive basis, as well as the impact on the quality of patient care if the SMCS continues or discontinues an exclusive arrangement for radiology services or other comments related to the quality of care associated with an exclusive radiology provider.

Please send these comments to the Medical Staff Office c/o Kristine Wakefield (WakefiK@sutterhealth.org) or call (916) 454-6955. Comments received by March 15, 2010 will be shared with the Medical Staff Executive Committee.

### Dr. Koenig Receives Golden Stethoscope Award

During a Jan. 22 presentation, Jane O'Green Koenig, M.D., was honored with the 2009 Golden Stethoscope Award, the highest honor bestowed upon a member of the Sierra Sacramento Valley Medical Society.

Dr. Koenig, a nephrologist and transplant immunologist and physiologist, served as medical director of the Sutter Dialysis Unit and was co-director of the Sutter Heart Transplant Program upon its inception in 1987. In addition, she played integral roles in the launching of several Sacramento-region transplant programs, including renal, hepatic and pancreas transplantations.

## 2010 Brings Increased Focus on Patient Satisfaction, Quality and Length of Stay

**By Cecilia M. Hernandez, M.D.**  
*SMCS Director of Medical Affairs*

The year 2009 brought improvements in patient satisfaction within the Emergency Department. Although I am thrilled with that, there are areas that still need attention. Before exploring those, let's take time to appreciate the improvements made in our Emergency Department. Some of you may already be aware of the increased burden our emergency physicians and nurses experienced in 2009. Nevertheless, I would like to take this opportunity to highlight the challenges they faced and the exemplary way they chose to respond.

First, with the economic downturn, 2009 brought an increase in patients who had lost their health insurance coverage. The consequence of this change was that several patients presenting to the Emergency Department no longer had any means to pay for the services they received. Furthermore, with the loss of their health insurance, these folks were no longer able to access primary care services to manage their chronic conditions, resulting in an increase in exacerbations of chronic conditions.

The next challenge faced by the Emergency Department staff was the closure of the county clinics followed by a sequential reduction in the mental health services provided by the county. Within the first six months of 2009, the volume of visits to the ED increased by 15-20 percent and stayed at that level throughout the year. Furthermore, the increased volume of patients coupled with the loss of overall revenue to emergency physicians created a perfect storm of worsening working conditions coupled with decreased revenues.

One would think that under these circumstances, patient satisfaction would also be negatively affected. But, contrary to what one might expect, the Emergency Department actually improved patient satisfaction scores in 2009 from the 34<sup>th</sup> percentile at the end of 2008 to the 57<sup>th</sup> percentile in the 4<sup>th</sup> quarter of 2009, achieving our goal of being over the 50<sup>th</sup> percentile. Talk about thriving in the face of adversity. Congratulations to the physicians and nurses in our Emergency Department for a job well done! Your effort has not gone unnoticed and thousands of patients have received excellent care at your hands in one of the worst years in recent history for health care in Sacramento County.

The work before us in 2010 is further defined by the challenges described above. The same challenges confronted by the Emergency Department are being faced by our physicians and nurses delivering inpatient services. Faced with sicker patients at increased volumes, these folks are challenged to manage these patients with increased efficacy and increased efficiency. Our overall and ICU mortality still is not where it needs to be. Overall acute mortality remained unchanged at 1.1, meaning that 10 percent of floor care patients that were not expected to die did, in fact, die. Furthermore, we had a 10 percent increase in the number of ICU patients dying who were not expected to die. This is simply not acceptable. We are redoubling our efforts to turn this around. Research into this problem demonstrates, among many things, failures to rescue, to plan and/or to communicate specifically with respect to sepsis patients. Look for increased attention on education and implementation of best practices in the identification and early goal directed therapy of sepsis patients.

Next month, I'll go into more detail around the changes we are making to improve overall length of stay. Stay tuned!