



**November/December 2007
Volume 7, Issue 6**

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**May 8 & 9 , 2008
Biennial Conference
Village-By-The-Sea, Wells, ME**

**The remainder of the 2008
Educational Meeting Schedule
Will be announced in the January
Newsletter**

THE LIGHTHOUSE

**The official publication of the Maine Association Medical
Staff Services, published by and for the MeAMSS
membership**

President's Message

By Cheryl Schilke, CPMSM

It is hard to believe two months have passed since the last President's message. The days are just flying by. Things are busy at work but when aren't they? I took a week in October to go to the Big Apple for the 31st NAMSS Conference. The keynote speakers were great. Some of the educational sessions were better than others. My fellow travelers and I will be hitting some of the high points at the November 16 meeting at CMMC. But the highlight for me was the city itself. The hotel was right on Times Square in the theater district. Every moment I could spare, I was out exploring New York. I saw two Broadway shows and had a great time. Next year - Milwaukee.

MSSP week is November. 4-10. This is an excellent opportunity to toot your own horn and let people know just what it is that you do. MSSPs protect the patient by ensuring the direct care providers are who they say they are and are competent to provide patient care services. Each and every one of you is an unrecognized hero and I am proud to be associated with such caring, competent, professional individuals.

If I don't see you in Lewiston, have a happy holiday!

***Congratulations to Jamie Jenkins maiden name Mark!
Wedding bells rang on September 29 for Jamie and her long-
time companion. We wish you a lifetime of happiness
together.***



My Trip to the NAMSS Conference
By Julie Plummer, CPCS, The Aroostook Medical Center

The best word to describe my experience at NAMSS is AWESOME! This was the first time I attended a NAMSS conference and I was very impressed. The conference was a three-day event, with two days of pre-conference sessions. The welcome reception was filled with delicious hors d'oeuvres, vendors handing out complimentary gifts (my favorite being an apple-shaped pen), and a wonderful opportunity to socialize with medical staff services professionals from all across the country. The sessions covered hot topics like assessing clinical competence, credentialing low/no volume providers, negligent credentialing, CVOs, Physician Health Programs, Joint Commission, NCQA, and many others. One of my favorite sessions was a keynote session, "Get what you want with what you've got." Christine Cashen's refreshing and humorous presentation expressed innovative ideas on how to reduce stress, handle conflicts and invigorate yourself. I also very much enjoyed the presentation of our very own MeAMSS president, Cheryl Shilke, on how to run a successful CVO - she did a wonderful job, as always! To close the conference, attendees were given the opportunity to attend a three-hour dinner cruise around the island of Manhattan.

The location of the conference couldn't have been better. The conference was held at the New York Marriott Marquis, right in the heart of Times Square. This 48-floor hotel had beautiful high-speed glass elevators; six restaurants and lounges (including NYC's only rooftop rotating restaurant); and luxurious rooms with fabulous views (my room overlooked Times Square). One of the most enjoyable things I did while in NYC was simply sitting on the couch in my hotel room, looking out the window at Times Square. It was a hundred times better than watching reality TV!

Not only was this my first NAMSS conference, but it was also my first visit to the Big Apple. What an amazing city! It was such an emotion-packed experience for me. I was amazed at how exciting a Broadway Show can be; how heartbroken you feel when you see a homeless person sleeping on the street with only a piece of cardboard for a blanket; how truly breathtaking the views of the city are; how terrifying the flashbacks of 9/11 can be when you glance up at the tall buildings and think back of that day; how thrilling it is plunging 48 stories in a high-speed glass elevator; how exciting a possible star sightings can be (although the only star we spotted was the "naked cowboy", who was playing his guitar and posing for pictures in nothing but a pair of tightie whities and a cowboy hat); how frightening a NYC cab ride is (we swerved in and out of traffic at 50+ mph, fighting to squeeze into the tightest spaces, not only sharing the road with other cars, but with buses, bicycles, rickshaws, horse-drawn carriages, and pedestrians as well); and, last but not least, how proud I was to conquer my fear of flying! Although I researched NYC quite a bit while preparing for my trip (plus my many years of watching Seinfeld episodes), I was still in awe of the city the entire time I was there.

There are a few people I would like to recognize from the trip. Joyce Allen from TAMC wins the "theater guru award" for seeing three Broadway shows during our four-day trip. Mary Gifford from EMMC wins the "physical fitness award" for traveling by foot everywhere she went. Bonnie Wilson from Acadia wins the "sightseeing award." You name it, she did it (you may have even seen her on the Today Show). I also spotted Pat O'Connor, Cindy Hutchison from Pen Bay, Jan Quattrucci from Maine General, and heard that Anne Corliss from EMMC attended the pre-conference sessions.

Although I was very hesitant to go on this trip in the beginning (especially to leave my two young children for four whole days), I am very thrilled that I took advantage of this opportunity. What a wonderful experience it was, both professionally and personally, and what a perfect (and much needed) out-of-the-office getaway! I highly recommend attending a NAMSS conference to everyone! A final note to all who attended the conference - don't forget the secret missions! ☺

NEWS FROM NCCPA

We wanted to take this opportunity to let you know that effective immediately the National Commission on Certification of Physician Assistants (NCCPA) is changing one of its processes, and that change may affect you.

In our very technology savvy world, the risk of fraudulent usage of paper documentation is increasing. To help safeguard the integrity and security of NCCPA's certification credential, the only nationally recognized credential for PAs, NCCPA is eliminating the paper certificates it has issued to PAs every two years when they complete the certification maintenance process.

This change is aimed at curtailing the practice of submitting photocopies of the certificate as valid proof of certification. The only valid proof of certification is primary source verification through the NCCPA, which allows NCCPA to check the PA's certification status at the exact point the information is being requested.

To ensure that all stakeholders have the most accurate and up-to-date information on PAs, we encourage you to use the Verify PA-C tool on our Web site [ww.nccpa.net](http://www.nccpa.net) (<http://www.nccpa.net/>). This tool allows you, as a credentialing or licensing body, to obtain the primary source certification information that you need with just a few clicks. The tool also provides you the flexibility to print the Web screen, request an e-mailed PDF file or a mailed letter. Don't have time? PAs can access the same information online, and NCCPA has provided the flexibility for them to submit the information directly to you via an e-mail or a letter by simply entering the appropriate contact information for you.

Thank you for your support. If you have any questions about this change or need additional information about the certification and certification maintenance requirements, please visit our Web site at www.nccpa.net (<http://www.nccpa.net/>) or e-mail us your questions at [Nccpa@nccpa.net](mailto:nccpa@nccpa.net) (<mailto:nccpa@nccpa.net>).

Sincerely,

Janet J. Lathrop, MBA
NCCPA President/CEO

People on the Move

Tammera Race, who has served as our MeAMSS Librarian, has a new position in the Circulation Department at the University of Maine in Presque Isle. Tammera has been working on her Master's Degree in Library and Information Science and will receive her degree in February. Congratulations Tammera and good luck in your new position! Linda Menard will be assuming the MeAMSS Librarian duties.

Pat O'Connor accepted a consulting assignment and began November 5. Pat will be working at Lawrence & Memorial Hospital in New London, Connecticut. She expects to be on the job for two to three months.

AHP reappraisal should be similar to medical staff reappointment

The reappraisal process for independent AHPs should be similar to that used for physicians appointed to the medical staff. They should complete a reapplication form, updating any information provided in the original application (e.g., whether the AHP has been named in any malpractice suits, changes in licensure status, malpractice insurance coverage, etc.).

Likewise, the hospital should obtain evaluations from physicians and hospital supervisors who are familiar with the AHP's performance, as these individuals can provide firsthand information regarding the AHP's performance as they have had an opportunity to closely observe the AHP at work.

For example, an operating-room technician would need to receive evaluations from an operating-room manager, circulating nurse, anesthesiologist, or other individual who is frequently in the operating room. A head nurse may evaluate the general and specific performance of an RN conducting rounds for his or her employer. This evaluation should be done much in the same way as a hospital conducts performance appraisals for its employees.

This tip comes from Ready, Set, Credential!: Questions, Games, and Other Strategies to Train Your Staff, by Nancy C. Lian, CPCS, CPMSM,

Horty Springer Sept 07



Save the Date!

May 8 & 9, 2008

***MeAMSS Biennial Conference
-Village-By-Sea, Wells, Maine
Further details to follow***

Post survey advice: Take advantage of the opportunity to clarify (overturn) RFIs

In the period of time following your Joint Commission (JC) (formerly JCAHO) survey, be certain to take full advantage of your opportunity to clarify some or all of the requirements for improvement (RFI) noted in your final JC survey report. A clarification is really your attempt to refute, reverse, overturn, or diminish RFI findings (i.e., reduce an RFI to a supplemental finding).

If you are facing an adverse decision of conditional accreditation (CON) or preliminary denial of accreditation (PDA), you most certainly want to carefully analyze each finding to identify those RFI for which clarifying evidence will reverse one or more findings, thus bringing your total number of

findings below the threshold for CON or PDA. In these circumstances, clarifications need to be submitted over your secure extranet site within 10 business days of the final report being posted to the extranet. In our considerable experience assisting clients facing an adverse decision, we have been very successful overturning RFIs in numbers sufficient to move the client to a more favorable accreditation status (e.g., from PDA to conditional or from conditional to accredited). We swoop in with SWAT team-like speed, efficiency, and effectiveness to assist you in investigating the facts that gave rise to the finding while building a case, through data collection or other evidence, to prove that the organization was actually in compliance with the cited standard(s) during the survey.

But what should you do if your hospital's JC triennial survey results in a decision of full accreditation with seven or eight RFIs and a handful of supplemental findings? Rest on your laurels? Concede defeat on those RFIs? Not according to Darlene Christianson, executive director of accreditation and certification services at JC. Instead, you should also seek to clarify these RFIs early in your 45-day evidence of standards compliance (ESC) or measure of success (MOS) period to arrive at the most accurate assessment of your organization's compliance with JC standards. Speaking at the annual JC Executive Briefings conference two weeks ago in Chicago, Christianson urged the audience to, at a minimum, perform post-survey audits on all RFIs involving C elements of performance (EP) and submit the results as a clarification if it was able to demonstrate 90% compliance or better. (Additionally, in some cases 80%-89% compliance will reduce an RFI to a supplemental finding.)

The A and B EP findings also lend themselves to clarification and reversal. In fact, Greeley consultants have had great success helping dozens of clients reverse C EPs through audit, and A and B EP findings through carefully crafted arguments that demonstrate the organization's full compliance with the applicable standard. The numbers can be quite startling. We've had success moving a hospital in PDA with 21 RFIs to full accreditation with nine RFIs. Or consider the hospital that achieved full accreditation with nine RFIs having their RFI count reduced to two RFIs.

Everyone understands why the client in adverse action would want to fight for their lives and clarify findings, but why would a hospital that achieved full accreditation want to rock the boat and submit RFI clarifications? According to Christianson, beginning in 2008 the number of RFIs you have during any triennial survey will influence (increase) your priority focus process (PFP) point total, and this along with other data will make it more likely that your next survey will fall sooner than later in your 18-39 month window for when your next survey will be scheduled. And why go through the exercise of creating an ESC or MOS in which you identify how you fixed a process that was not broken in the first place? Doing so is a waste of precious time and resource and often results in tampering with (and increasing the error rate of) an otherwise well-functioning process.

So regardless of whether your JC survey results in a decision of full accreditation or adverse action, I suggest that you give us a call to ask for advice about how to clarify RFIs. Joint Commission rules dictate how clarifications are to be submitted and The Greeley Company consultants have the tools, know-how, and skills you'll need to submit successful clarifications. And remember, if you are a JCR client your Continuous Survey Readiness (CSR) consultant is barred by the JC conflict of interest firewall from assisting you with post survey clarifications. For more information, please call Stacey Koch, director of client relations, at 888/749-3054.

From Accreditation Monthly Sept 14 07

John Rosing, MHA, FACHE

Practice Director, Accreditation and Regulatory Compliance/The Greeley Company

Why should I search the OIG Web site?

Submitted by Kim Pelletier

The Office of Inspector General (OIG) maintains a Web site that includes a database of individuals and entities excluded from federal programs, including Medicare and Medicaid. This database is available free of charge to anyone, including the public, at <http://exclusions.oig.hhs.gov>. Federal patients can only be treated by healthcare organizations approved (i.e. not excluded) by the OIG, according to corporate compliance requirements. A healthcare organization can be fined up to \$10,000 for each service billed by an excluded provider. In addition, no Medicare or Medicaid payment(s) will be made to a facility for services provided by an excluded party. Although most physicians sign a consent form stating that they have not been sanctioned or excluded from a state or federal program, they do not always provide information concerning sanctions or exclusions that occur after appointment.

Federal law states that any entity or individual who is responsible for a sanctioned entity or individual also may be subject to "permissive" exclusion if the entity or individual knows of the actions leading to the sanction and does not exclude that individual from performing services. This "permissive" exclusion allows the agency to use its discretion in deciding whether to impose an exclusion from participating in the federal programs. In addition, it is possible to download cumulative reports and import them into databases or spreadsheet software.

Ask the Expert section of the Credentialing and Privileging Advisor of September 14, 2007

***Celebrate Yourself!
NAMSS Week
November 4-11, 2007***



Take some time this week to blow your own horn! Tell people what you do and how important it is. Remember that credentialing is the first line in patient safety!

FROM THE EDITOR

Thanksgiving is just around the corner,, so LET'S TALK TURKEY!



***The year has turned its circle
The seasons come and go
The harvest all is gathered in
And chilly north winds blow
Orchards have shared their treasures
The fields their yellow grain
So open wide the doorway
Thanksgiving's here again!***

Old Rhyme

Thanksgiving – a time we gather with family and friends to give thanks for the lives we share and to enjoy the bounty of the harvest. The feasting becomes the focus after gratitude is expressed and thanks are given. Are you playing host or hostess this year? If so, you may find this Turkey Q&A helpful.

What size turkey should I get?

According to the USDA, assume one pound (fresh or frozen) per person. Assume 1.5 to 1 pounds per person if you want leftovers.

When should I buy my fresh turkey?

One to two days before you plan to cook it. Do not buy pre-stuffed fresh turkey. If these turkeys are not handled properly during preparation, harmful bacteria in the stuffing can multiply very quickly.

When and how should I thaw my frozen turkey?

In the refrigerator - Allow 24 hours for every 4-5 pounds of turkey. Example: a 12 pound turkey should be thawed for approximately three days. Or, in cold water – allow 30 minutes per pound. Keep the turkey wrapped in its original plastic and make sure that no water can seep in. Change the water every 30 minutes.

At what temperature should I cook my turkey?

The oven should be no lower than 325 degrees.

How long should I cook it?

Approximate roasting times for turkey at 325

Size		Cooking Time
8-12lbs	Unstuffed	2 ¾ - 3 hours
	Stuffed	3-3 ½ hours
12-14 lbs	Unstuffed.....	3- ¾ hours
	Stuffed	3 ½ - 4 hours
13-18 lbs	Unstuffed	3 ¾ = 4 ¼ hours
	Stuffed	4 -4 ¼ hours
8-20 lbs	Unstuffed	4 ¼ - 4 ½ hours
	Stuffed	4 ¼ 0 4 ¾ hours
20-24 lbs	Unstuffed	4 ½ - 5 hours
	Stuffed	4 ¾ - 5 1/3 hours



Cranberry Citrus Relish

- 3 cups sugar*
- 4 12 oz bags cranberries*
- 2 vanilla beans split lengthwise and scraped*
- 1 orange zested and juiced*
- 1/8 teaspoon sea salt*
- 1/4 teaspoon ground black pepper*
- 3 teaspoons Dijon mustard*

Combine sugar, vanilla beans and 1 1/2 cups water in a medium saucepan and bring to a simmer. Add juice, cranberries, salt and black pepper. Simmer until cranberries begin to pop and become tender, 3 to 5 minutes. Remove from heat and stir in mustard. Chill until ready to serve. The sauce can be made up to 2 days ahead of time. Just before serving, gnash with freshly grated orange zest.

An O'Connor family favorite!

The turkey is ready when it reaches an internal temperature of 165 degrees. Check the temperature by inserting a meat thermometer in the inner-most part of the turkey. Some people may prefer to cook their turkey longer – that is a matter of preference. Let the cooked turkey sit for about 20 minutes, allowing the juices to settle and ensuring optimal flavor.

Now remember that Thanksgiving is a time to enjoy family and friends so be sure to plan your schedule to include time for relaxation and good conversation.



Happy Thanksgiving

*Pat O'Connor
Newsletter Editor*



**The next newsletter will be published in January 2008.
On behalf of the MeAMSS Board of Directors,
we wish you and yours
a happy and joyful holiday season.**

*The nicest thing about December
Is telling our friends that we care and remember.*

2007 MeAMSS Board

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HELPFUL WEBSITES

- <http://www.mainedental.org/>
- <https://profiles.ama-assn.org/amaprofiles/>
- https://www.do-online.org/index.cfm?PageID=cme_guidereqs
- <http://www.maine.gov/sos/cec/rules/10/chaps10.htm>
- <http://www.royalcollege.ca/>
- <http://www.state.me.us/pfr/olr/>
- <http://www.archives.gov/locations/index.html>
- <http://www.archives.gov/st-louis/military-personnel/letter>
- <http://www.nccpa.net/>
- namss.org
- docboard.org
- msleader.com
- msspnext.com
- qualityforum.org
- credentialinfo.com
- www.aana.com
- jointcommission.org
- <https://www.nursys.com/Common.asp?pt=LICENSEVERIFICATION>
- <http://www.maine.gov/boardofnursing>

Thanks to all who contributed items for this newsletter.

2008 Lighthouse Publishing Schedule

Issue	Deadline for Articles	Available on Website
January/February	December 28, 2007	January 11
March/April	February 29, 2008	March 14
May/June	April 25, 2008	May 9
July/August	June 27	July 11
September/October	August 29, 2008	September 12
November/December	October 31	November 14

**Remember – this is YOUR newsletter and the content reflects your input
 Those submitting articles will be eligible for a drawing for a free 2009
 membership**

