

# Professional Staff News

News and information for the professional staff of  
Children's Hospitals and Clinics of Minnesota



Professional Staff News is e-mailed monthly to the professional staff of Children's of Minnesota.

November 2007

## Notes from Peter Dehnel, MD, Chief of Staff

'Tis the season for giving  
(and supporting)....plan  
to attend the Children's  
Hospital Association  
"Winter Wonderland"  
Ball on Nov. 17

As dedicated health care professionals, we are committed to providing great care for our patients and their families. A good portion of that care depends on our individual efforts, a willingness to go "the extra mile," gaining knowledge, and seeking to give exceptional customer/patient service. We are concerned about the outcomes our patients experience and work extremely hard to do our part to make them positive.

Great care is also dependent on top-quality facilities, departments, and programs, and all the individuals who work within them. Some of these are funded through hospital operations, but many of them receive part of their financial support through fundraising and donations directed to those areas. We, as professional staff members, have a great opportunity to increase our level of financial support of programs directly and indirectly associated with Children's, and it will directly influence the care our families receive.

The Children's Hospital Association (CHA) is one important example of an organization that supports the work of the hospital. CHA has contributed more than \$14.5 million for outreach programs, the clinic, and for families of children at risk. It is because of the support of the Professional Staff, corporate giving, and individual contributions from the community that CHA has been able to pledge \$500,000 to support numerous programs at Children's of Minnesota this year.

Your attendance, as a member of Children's professional staff, at CHA's annual holiday ball on Nov. 17 is a very visible sign of support for this organization. I encourage everyone to attend. For more information or to request an invitation, please call the CHA ball hotline at (651) 220-6644.

Please contact me at (612) 813-8098 or [peter.dehnel@childrensmn.org](mailto:peter.dehnel@childrensmn.org) if you have any questions, comments, or suggestions for involvement.



Delivering Next Generation Care

## Notes from Phillip M. Kibort, MD, Vice President of Medical Affairs and Chief Medical Officer

### Survey of professional staff

Hopefully, many of you are aware that we survey the professional staff monthly through a random, rolling survey. Each month, 1/24th of the professional staff is randomly chosen to receive the survey. Our goal is to contact all members within a two-year timeframe. We appreciate and are fortunate to have about a 21 percent return on our surveys. During the last six months, overall results within the “very satisfied” survey category include:

- increases from 68 to 70 percent in the quality of the subspecialists.
- increases in overall quality in general from 59 to 63 percent.
- increases in overall quality of nursing from 57 to 60 percent.

Availability of subspecialists, which moved from 66 to 50 percent, is one area where we saw a decrease.

### Children with vascular anomalies will receive specialized treatment at Children’s

I’m happy to announce that effective Nov. 27, Children’s will offer a vascular anomalies center. The co-medical directors will be **Stephen Nelson, MD**, as the medical director, and **James Sidman, MD**, as the surgical director. It will be located at Children’s – Minneapolis in our hem/onc clinic area, with referrals to collaborating specialists as needed. Consultations will be available Monday through Friday. A multi-disciplinary team providing both medical and surgical treatment options will be available.

### James C. Perry, MD, to join Children’s Heart Clinic and Children’s of Minnesota cardiovascular cornerstone program

**James Perry, MD**, will join the Children’s Heart Clinic to co-direct with **Kirsten Dummer, MD**, the new Minnesota Adult Congenital Cardiac Program and continue his work in pediatric and congenital electrophysiology and pacing with **David Burton, MD**.

A native of New York, Perry received his bachelor’s degree in biology from Princeton University and his medical degree with distinction in research from the University of Rochester. After completing his pediatric residency at Children’s Hospital of Philadelphia, he did his fellowship in pediatric cardiology and electrophysiology at Texas Children’s Hospital in Houston. Perry remained at TCH as director of electrophysiology until 1993, when he joined the pediatric cardiology group at Children’s Hospital in San Diego. He helped start the first adult congenital heart program in the region in 2000. He was director of the cardiology division there until 2004, when he accepted a position as professor of pediatrics and chief of pediatric cardiology at Yale University School of Medicine. While at Yale, he helped start the successful Yale-New Haven Adult Congenital Heart Program.

He is past president of the International Pediatric and Congenital Electrophysiology Society; a fellow of the American College of Cardiology, the American Academy of Pediatrics, and the Heart Rhythm Society; and serves on the Board of Directors of CARE foundation. He also serves on the editorial boards and reviews for many professional journals. He is a clinical professor of pediatrics at the University of Minnesota Medical School.

Special interest includes a focus on arrhythmia management in the growing adult congenital heart population.

## Haun named medical director of PICU, Children's – St. Paul Campus

I am pleased to announce that **Steven Haun**, MD, a member of Children's Respiratory and Critical Care Specialists will become the new medical director of Children's pediatric intensive care on the St. Paul campus Nov. 1. Haun replaces his partner, **Judy Zier**, MD, who has been a wonderful director for the past few years. Haun has committed to working on all aspects of quality, service, resources, growth, and improvement of efficiencies. Please give him your best wishes and congratulations on his new position.

## The future of pediatrics

Many of us are concerned about the future viability of our specialty, whether pediatrics or pediatric subspecialties. One challenge is being able to convey to payers, the community, and even each other that the quality of the work we do is important and in the long run beneficial to the health of children. Before we can tout, promote, or even demand that children get access to our care, we need to be able to show that there is value to it.

Recently the Rand Corporation and Seattle Children's Hospital Research Institute published a new study in the *New England Journal of Medicine*. The study followed the experience of more than 1,500 children in 12 metropolitan areas (and these were white, middle-class children with health insurance).

The results are sobering:

1. Only 19% of seriously ill infants with fevers had the right lab tests done.
2. Only 44% of children with asthma were on the right medications.
3. Only 38% of infants were screened for anemia in their first two years of life.

These results are also probably rose-colored in light of the fact that no low-income or ethnically diverse youngsters were part of the study.

While adults seem to get the right amount of care 55% of the time (McGlynn *NEJM* 2003), it seems children get appropriate care even less often. The Seattle-Rand study showed that children only get the appropriate care for fevers 63% of the time, and for attention deficit disorder only 53% of the time. The proper preventive care, which is the bread and butter of pediatric practice, is only appropriate in 41% of checkups.

Elizabeth McGlynn, associate director of Rand Health Corporation, articulated the concern this way: "It is unconscionable that we spend \$2 trillion a year on health care, more than any nation in the world, and get these kind of results."

Perhaps part of the problem stems from insurance companies' pressure on physicians to see more patients in less time. But I'm not sure that in the old days (when time pressures were not as significant) that it was any better. If it was, I think patterns would have been in place. Maybe one variable is that pediatric residency training focuses on caring for very sick hospitalized children rather than basic preventive care. What is more frightening to me is perhaps the retail idea may have better outcomes if they claim to follow evidence-based care.

I think the bottom line is this: We all must strive to measure and document the value of the work we do. If we don't, others may very well declare we're not worth as much as we think we are.

Do you have a story to share about the care you're providing in the outpatient or inpatient environment? If so, I'd like to hear from you. Please contact me to let me know what you are doing in your fields, (612) 813-6165, (651) 220-6165, [phil.kibort@childrensmn.org](mailto:phil.kibort@childrensmn.org).

## Call for next generation care examples

## Programs and Services

### Children's offers Web resource to promote positive child health public policies

Children's Office of Child Health Policy recently launched a child health policy and advocacy Web page. The Web page will serve as a resource for people interested in promoting public policies that advance the health of children.

To view the page, visit [www.childrensmn.org](http://www.childrensmn.org) and click on the link "Be the Voice for Children" on the bottom right-hand side of the page. The Web page will have up-to-date information on current news, legislative information, and action alerts for those interested in working with Children's of Minnesota to "Be the Voice for Children."

Professional staff, employees, and families are encouraged to visit the Web page to learn more about how Children's is working to positively influence federal, state, and local public policy decisions related to children's health and well-being and how to get involved.

The Office of Child Health Policy works with departments throughout Children's, patients and their families, health care professionals, community groups, and government officials. The Office is nonpartisan and offers child health policy expertise and serves as a resource for elected officials.

To share a legislative idea or if questions, contact **Mary Braddock**, MD, director of child health policy, [mary.braddock@childrensmn.org](mailto:mary.braddock@childrensmn.org), or **Rachel Gustafson**, legislative policy/government affairs lead, [rachel.gustafson@childrensmn.org](mailto:rachel.gustafson@childrensmn.org).

### Children's Physician Referral line enhanced

Beginning Dec. 3, callers to Children's Physician Referral will be greeted with "Children's Physician Access." This new name represents enhanced service to professional staff members and referring physicians throughout the region. Dedicated customer service representatives will serve as the hub of information for physicians and will facilitate physician requests from beginning to end.

Three ways physicians can access Children's

- (612) 343-2121, Twin Cities metro area
- 5-2121, calling from inside a Children's facility
- (866) 755-2121, toll-free

Expanded service

- physician connections and consultations
- referral and connection for clinic appointments
- navigation through Children's system for admissions
- general information and internal connections

Watch your mail and next month's *Professional Staff News* for more information.

### Physician-owned safety testing and documentation needed

The biomed department asks for assistance from the professional staff to continue to ensure a safe environment of care. Please provide the following documentation for physician-owned devices used within Children's (reference Children's policies and procedures 927.00 and 927.08):

- a list of non-hospital-owned devices and equipment (manufacturer model and serial number).
- a copy of routine preventative maintenance and safety compliance forms.

E-mail this information to [amanda.debates@childrensmn.org](mailto:amanda.debates@childrensmn.org) or fax it to (612) 813-8345. For more information, contact John Hendricks, department manager, (612) 813-6383, or [john.hendricks@childrensmn.org](mailto:john.hendricks@childrensmn.org).

## Upcoming Events

### Westgate Pediatrics Ethics Forum 2007

Nov. 16, 2007, noon to 4 p.m.  
Children's – Minneapolis Campus

### Children's Professional Staff Annual Meeting

Dec 5, 2007

### Second Annual Pediatric Emergency Medicine Conference

Feb. 29, 2008, 7:30 a.m. to 5 p.m.  
Minnesota History Center,  
St. Paul.

### Pediatric Surgery Conference

May 2, 2008, 7:30 a.m. to 5 p.m.  
Minnesota History Center,  
St. Paul.

### Annual Spring Pediatric Update

May 8, 2008  
John Nassef Medical Center  
Children's - St. Paul campus

## Awards and Accolades

**Michael B. Ainslie, MD**, was re-elected by the Minnesota Medical Association (MMA) to serve a three-year term representing the West Metro District on the MMA Board of Trustees.

**John R. Balfanz, MD**, received the Minnesota Medical Association's President's Award at its 154th Annual Meeting in September.

**Blanton Bessinger, MD**, received the highest honor bestowed on a colleague by the Minnesota Medical Association (MMA) for his outstanding contributions to medicine and the MMA.

**Robert Couser, MD; Mark Mammel, MD, et al.**: "Growth and neurodevelopmental outcomes after early low-dose hydrocortisone treatment in extremely low birth weight infants," *Pediatrics* (Vol. 120, No. 1, July 2007, pps. 40-48).

**Timothy Culbert, MD, and Maura Fitzgerald, RN, CNS, MS**, presented at "Pangea 2007: Conference for the Future of Pediatric Wellness," the only national, annual academic conference exploring the safe, evidence-based use of complementary/alternative therapies specific to pediatric populations. Children's co-sponsored the conference, held in San Francisco, Calif.

**Mary Erickson, RN, CNP**, won first prize for her poster "Peds Division IV Process Improvement Project," presented at the Association of Vascular Access (AVA) national conference, Phoenix, Ariz.

**David L. Estrin, MD**, was re-elected by the Minnesota Medical Association (MMA) to serve a two-year term as alternate delegate to the MMA House of Delegates.

**Stefan J. Friedrichsdorf, MD**, presented "Managing Acute and Chronic Pain in Children," at Pediatric Grand Rounds, Methodist Hospital, St. Louis Park.

**Carolyn McKay, MD**, was re-elected by the Minnesota Medical Association (MMA) to serve as secretary-treasurer. She is the current chair of the MMA Committee on Administration and Finance.

**Lynda Richtsmeier-Cyr, PhD, LP et. al.**, presented "Mind-body Skills for Office Pediatricians," at the American Academy of Pediatrics National Conference and Exhibition, San Francisco, Calif.

**Susan Schloff, MD**, is the new president of the Minnesota Academy of Ophthalmology.

#### Chief of Staff, 2007-2008

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