SUNY Hospital Governance

Academic Medical Centers and Hospitals Committee
March 18, 2013
In fulfilling [its] mission, the state university shall exercise care to develop and maintain a balance of its human and physical resources that … strengthens its educational and research programs in the health sciences through the provision of high quality general comprehensive and specialty health care, broadly accessible at reasonable cost, in its hospitals, clinics and related programs and through networks and joint and cooperative relationships with other health care providers and institutions, including those on a regional basis.
Governance Requirements

- Hospital Governance is subject to requirements imposed by ALL:
  - SUNY
  - Medicare Conditions of Participation
  - New York Department of Health
  - Hospital Accreditation

- All require Governing Body, Administration and Medical Staff Leadership
Board of Trustees is responsible for:

• The over-all central administration, supervision and coordination of state-operated institutions …

• The establishment of health and medical centers …

• The promotion of and participation in inter-institutional arrangements among independent and public institutions of higher education and health care facilities and providers and other health-related organizations on a geographical or topical basis to encourage responsible and cost effective use of facilities and academic and health care resources for the enhancement and enrichment of educational experiences and opportunities and promoting high quality health care services in support of the state university’s educational mission.

*NY Education Law §355.1*
The Board of Trustees has established the Academic Medical Centers and Hospitals Committee to review and make recommendations:

- Excellence in Medical Education
- Hospital and clinical structure, governance and operations issues relating to funding and finances
- Management and operation of the clinical practice plans
- Fulfillment of quality assurance obligations
- Clinical affiliations with outside institutions and organizations
Campus Presidents

- Board of Trustees appoints the campus Presidents and defines their duties.

- Campus Presidents report to Trustees and are responsible to the Chancellor and the BOT for, and shall administer, the college, for which he or she serves, and shall promote its development and effectiveness.
Campus President appoints Hospital Administration: chief executive officer, chief financial officer, chief medical officer, chief nursing executive

Medical Staff is self-governed by law, subject to campus specific medical staff bylaws, approved by the medical staff and the campus president

Campus Presidents present information to the Academic Medical Centers and Hospitals Committee
Governning Body is Campus President (1957 resolution):

The University's Hospitals shall be established by the State University Board of Trustees as part of each Medical Center and operated in accordance with policies and regulations promulgated by said Board with the advice and recommendations of the Council on the Medical Centers. They shall be under the supervision of the Presidents of the respective Medical Centers who shall be directly responsible for their operation to the President of the State University.
Governing Body - legally responsible for the conduct of the hospital; Allows for a single governing body over a multiple hospital system but requires a medical staff member to be included*; Governing Body has oversight of:

- Chief Executive Officer
- Medical Staff
- Care of Patients
- Institutional Plan and Budget

Chief Executive Officer - responsible for managing the hospital

Medical Staff – accountable to the Governing Body for quality of care

- All are responsible and accountable for Quality Assessment and Performance Improvement Program

Source: CFR 482.12
*Subject to reconsideration by CMS
Hospitals are required to have a governing body legally responsible for directing the operation of the hospital in accordance with its mission.

Governmental organizations must provide written notice to DOH of their designated governing bodies and legal authority to establish designation.

Governing bodies must continuously revise practices, policies and procedures for ongoing evaluation of services and identify, assess and resolve problems.

CEO of Hospital is directly responsible to Governing Body for hospital management.

10 NYCRR §405.2(b)(1).
Hospital Accreditation

- The Joint Commission
  - **Downstate**: Gold Seal of Approval; ACS National Surgical Quality Improvement Program; Gold Plus Get with the Guidelines - Stroke
  - **Stony Brook**: Gold Seal of Approval; Medal of Honor for Organ Donation; Gold Get with the Guidelines – Heart Failure; ACS National Surgical Quality Improvement Program

- DNV National Integrated Accreditation for Healthcare Organizations
  - **Upstate**: Accredited; Primary Stroke Center Certification
Accreditation Standards

- The governing body is ultimately accountable for the safety and quality of care, treatment, and services.
  - The governing body provides for the resources needed to maintain safe, quality care, treatment, and services.

- A chief executive manages the hospital.
  - The CEO provides for information and support systems, recruitment and retention of staff and physical and financial assets

- The organized medical staff is accountable to the governing body.
- Campus President has ultimate responsibility for providing resources to support safe and high quality health care services

- At Stony Brook, the president is supported by a quality assurance review board, established by the Board of Trustees

- At Upstate, the president has an internal advisory committee and has proposed establishing an advisory board that includes community members

- At Downstate, the president is asking for more support
Questions?

What next?