

INTERVIEWS

11/27/73

w/ John Rogers, Planning Coordinator, St. Vincent

Joint Planning Council -

St. V. Advisory Bd. Pres. is Chm. of this Council
Mr. Conrad Bogusz is St. V. Director of Planning
Mr. John Rogers works under him as Planning Coordinator

Coordinating Committees

Restoration & Maintenance (preventative)
Ambulatory Care
Acute Inpatient Care
Nursing & Allied Health
Medical Education & Research
Spiritual Emphasis
-Pastoral Care
-Sister Visitor
-Friendly Home Visitation
Non-Medical Services (laundry, etc.)

Task Forces

Dentistry (only hospital w/ dental residency)
General Surgery & Surgical Specialties
Obstetrics & Gynecology
Pediatrics
Psychiatry
Internal Medicine & Medical Specialties
General Practice
Physical Medicine & Rehabilitation
Anesthesiology
Pathology
Radiology

The Joint Planning Council was defined as an organized continuing program directed toward significant community involvement in planning hospital services.

PSRO

(Professional Standards Review Organization
(Physicians Service Review Organization
*To be implemented by 1/1/74 (Federal law) in hospitals and extended care institutions (Medicare & Medicaid patients only?) St. V's has a pilot program on this begun in September 1973.

Cost-containment-utilization program for government. Law now calls for local control. Area criteria - 300 min-2,500 max physicians. First Toledo director has resigned because of conflicts re local, state or Federal control.

*This is a peer review thing

*All cases (inpatient and outpatient) reviewed and results computerized - a quality-care check that works both ways - for example, if patient kept for extra day, doctor has to defend his decision - if patient sent home day early, enquiries are also made (so patient is protected).

*PSRO studies & research done at Ohio State U.

*St. V's pilot program in PSRO in conjunction with OSU and Ohio State Medical Assoc. and Medical Advances Institute (MAI) Columbus, Ohio.

Two HMO (Health Maintenance Org.) models - group practice.

*Centralized (known as Kaizer) - physicians on salary - AMA against government controls and not strong for preventative medicine.

*San Joaquin - physicians stay in office and maintain solo practice - only change is method of financing.

11/30/73

Telephone interview w/ Conrad Bogusz, St.V. Director of Planning

St. V. last year treated approx. 105,000 outpatients and 25,000 inpatients.

Diagnostic & Treatment Center

- 99% of those treated medically indigent
- preventive medicine practiced here

immunizations

Head Start -

family groups

- some doctors on salary, some volunteer (Dr. Millis, Ortho., for example, sees both private and indigents.)

Walk-in Clinic

- 85-90% medically indigent

St. V makes 1-3% profit a year which is plowed directly back into increasing services. If profit is cut, a hospital cannot progress and there will be no innovativeness.

Ohio Hospital Association

- arranges seminars (resource group) for example, recently arranged a seminar for St. V on construction management
- voluntary - not all Ohio hospitals belong, but all Toledo hospitals do.
- keeps member hospitals aware of legislature pending affecting them and also keeps legislators and governor posted on how hospitals feel (a sort of lobby group)

JCHA (Joint Commission on Hospital Accreditation)

- each hospital checked every other year
- 43 regulations
- accredits hospitals

Medical Advances Institute, Columbus, Ohio

Ohio is only state which doesn't have a licensing procedure.

Example: nuclear equipment inspection

Gov. Gilligan has a Certification of Need and Licensing Bill pending.

Hospitals have been discriminated against and financially hurt by different legislature...new cost-of-living guidelines. Who absorbs increase in food costs for example? The government has not exercised control over hospital suppliers, but does control hospital room rates.

St. Vincent Emergency Room & Walk-in Clinic

- instructions on wall in three languages
- triage nurse
- Sister Visitor (1) - liaison between patient & hospital
 - on duty during peak hours 7-10 am
 - 5-9 pm

St. Vincent follow-up programs:

- Continuing Care Nursing Unit (home care follow-up)
 - *3 people work in liaison w/ Community Nursing Service
 - *Blue Cross is paying for this program
 - *540 people cared for last year
- Friendly Home visitation
 - *two Sisters
 - *program 2 years old

St. V has pressure from third-party insurers who do not want to pick up the cost of these programs.

St. V has twelve Social Workers

Mr. Bogusz sees as the biggest need in our health delivery system

- Home Health Aids
 - * expanded Mobilemeals, maybe utilizing a catering service - there's a long waiting list for Mobilemeals
 - * aftercare - not just nursing care, but CARE
 - visits and conversation to alleviate loneliness

Hospitals which receive financing under the Hill-Burton Act are required to give 10% free care. St. V received 2-1/2 million dollars in 1963 under the Hill-Burton Act to replace old hospitals. About the same time, they also received \$125,000 gift from O-I and \$150,000 from L-O-F.

Concerned Citizens for Mental Health did a survey in our community which might be helpful to us.

12/7/73

Interview w/ Ned Skeldon, Tech.Asst.to Pres., MCOT

19-county triangle served by MCOT

Total capital investment, 15 million dollars from the State of Ohio;
5 million dollars from federal government, as of now.

Operating money, 20 million dollars a year

- 10 million dollars from Ohio
- 10 million dollars from patient fees
foundation grants
contributions from individuals
100-200 thousand dollars per
year from County Commissioners
- 1/3 goes to the hospital (borrowed from college funds)

Maumee Valley Hospital was 270 beds when taken over by MCOT - now 120-bed hospital. Half of the rooms were eliminated to make space for teaching. Because the hospital is still coping with the image of "county hospital", they are not getting the wide range of health problems needed for a teaching facility; and so MCOT has contracts with St. Vincent, Toledo Hospital and Mercy (in the interim) so that MCOT students may take advantage of their diversity.

Full occupancy of W. Campus is planned for the Fall of 1977, where the new Health Science Building is now partially in use; the new Library and Administration Building under construction; new 260-bed hospital to be built. There are plans for a Pediatric Hospital to be constructed between the present E. Campus and Larc Lane School.

Ned Skeldon suggested we talk to Mr. Hanna of the Welfare Department, Howard Cook and Legislators Dick Wittenberg and Barney Quilter. Task Force people, M/M John Hayward, John Savage and Howard Collier.

Urs Hoffman,
Reporter