A Message from John Kepros, M.D.,
Chief of Medical Staff:

The Kitchen is Closed!
Most Physicians have a relatively high level of emotional intelligence and therefore understand that effective communication may take several forms or styles depending on the circumstances.

For example, direct communication may be best for specific, detailed instructions to a team with a complex task.

Indirect communication may be preferred in situations where more tact is needed or if the risk of conflict is high as in the following example.

Like with many families, we make an effort to eat together in the evenings. Recently, however, it seemed that a few hours after we were finished and the kitchen had been cleaned, the snacking began.

The problem was not that the snacks were consumed in lieu of what was prepared earlier, nor even the time of day they were consumed – but the aftermath of paper plates, Tina’s burrito wrappers, boxes of Spicy Cheez-Its, Kraft Macaroni and Cheese packets and boxes, Ramen noodle pouches, Kraft Singles cheese wrappers, empty tubs of Garden Fresh Screamin’ Hot salsa, and not empty bags of now stale Tostitos Scoops tortilla chips identified by my wife the next morning. [After proofreading, my wife added salsa and tortilla chip crumbs that dripped on the floor and couch cushions, silverware, popcorn bags, and a reference to a “frat house”.

Despite directly communicating her concerns about this nocturnal foraging, the behavior continued until she cast down a proclamation that after 8 p.m. “The kitchen is closed!”

Of course the late night snacking continued, but now there was an incentive to hide the evidence which ultimately accomplished the primary objective which was to keep the kitchen clean.

This might be seen as an example of combining direct and indirect communication.

I have also found that the use of analogy, particularly from examples in popular culture, makes it easier to connect with students and residents I have only known for a short time and who are likely to be of a younger generation.

I have never been much of television viewer probably because of the demands of my education and profession but after intense pressure from my trauma rounding team I tentatively agreed to consider the HBO fantasy drama television series Game of Thrones, based on George R.R. Martin’s A Song of Fire and Ice. I had to binge 64 hours to catch up.

Those of you who know me know I don’t typically develop a casual interest in things. I am intensely focused on details and abhor loose ends. I learned all about the Starks, the Lannisters, and the other families south of The Wall. I studied the maps of Westeros and Essos and analyzed how the lesser known characters were connected. I became a Thronie.

I should note that even in the fictional series, beheadings (among other amputations) and violence were not effective communication strategies either.
I celebrated my accomplishment by buying a bottle of Game of Thrones branded ale to have with dinner. And, even though the kitchen was officially closed, I also enjoyed an afterhours treat consisting of an entire tub of salsa with chips and a plate full of gummy worms from the candy jar.

That night I had a nightmare that I was in a real-life Game of Thrones. Even after waking up and realizing it was just a dream, I would quickly reenter the fictional world just where I left off after falling asleep again. It was not pleasant.

Maybe “The kitchen is closed!” for a reason.

Follow the Chief of Medical Staff on Twitter!
Chief of Medical Staff John Kepros, M.D., has a Twitter feed to promote and share Medical Staff-related events, news and information. It is a fast and easy way to stay connected using social media.
Are you on Twitter? Follow @KeprosSparrow.

Sparrow New Physicians Network on Facebook
The Sparrow New Physicians Network (SNPN), a group for new Physicians (and their spouses) at Sparrow Health System to facilitate communication, professional networking, share experiences, and coordinate fun events, now has a group page on Facebook. This group is intended for Physicians who have been on the Sparrow Medical staff for less than five years or who have completed training within the past 10 years. Founded in 2016, SNPN is organized by the Sparrow Guiding Coalition of Physicians and is generously supported by the Sparrow Foundation.

Past editions of the Sparrow Med Staff Newsletters
This edition of the Sparrow Medical Staff Newsletter and past editions are available online through the Intranet here (when you are on the Sparrow Network), or on our website here.

Publishing Physicians

e-Prescribing in the Acute Care Setting: Determining the Educational and Motivational Needs of Healthcare Providers.
Villasenor S; Walker T; Fetters L; McCoy M.

Timing of palliative care team referrals for inpatients receiving rapid response services: A retrospective pilot study in a US hospital.
Williams M; Cardona-Morrell M; Stevens P; Bey J; Smith Glasgow ME.
Request from the Sparrow Health Sciences Library

Wondering why you see your colleagues’ citations, but not seeing your publications listed?
It may be that you are not including Sparrow Health System as an affiliated institution when you submit your manuscripts. Since 2014, the National Library of Medicine PubMed database allows for multiple institutional affiliations. The opportunity exists for you to include those multiple affiliations and provide recognition for the support that Sparrow Health System provides.

Include Sparrow Health System as an affiliated institution when Sparrow is your primary employment, your data is derived from EPIC, your case studies or research is derived from Sparrow Patient interactions, you have used Sparrow resources/services, or when funding originates from Sparrow. The literature indicates a “strong, positive causal effect of research funding on knowledge production.” * Your publications will inspire others!
Michael Simmons, Medical Librarian, Sparrow Health System

*(PloS One. 2015; 10(9)e0138176)*

Full-text of the articles are available through title links above (please note: a connection to the Sparrow Network may be required to access the full-text), or by request from the Sparrow Medical Library. You may also reach them via medical.library@sparrow.org or 364.5660 (option 1). If you have been recently published and do not see your article listed, please contact Michael Simmons at michael.simmons@sparrow.org or 364.5656.

**Physicians in the News**

**Sparrow Heritage Project**
The newly formed Sparrow Heritage Committee is looking to preserve, to protect, and to promote our legacy of compassionate care with visual displays of our history. These will be showcased throughout the hospital and into the community of which we serve. Every department has a treasure of information from its beginnings to the current day point of care. We are looking for items, photos, and lead people to accomplish this ongoing task. Please share your Sparrow pride and the enthusiasm of your department with us through Heritageproject@sparrow.org.

**Medical News**

**Chief of Staff Elect(ions)**
Do you see yourself as a leader? Do you want to make a change? Consider the Chief of Staff Elect position. We are taking nominations. The election will be in early December. Please contact Melinda Rapelje at melinda.rapelje@sparrow.org to submit your name.

**Speak Up Red Clarity Card and communications initiative**
Sparrow is implementing a Speak Up communications training program and Red Clarity Card tool to reinforce the system’s expectations of - and support for - Caregivers in speaking up for safety.

Through Sparrow’s Code of Conduct, Caregivers are empowered to get a person’s attention, express concern, make a request to stop the unsafe action and propose a solution.

The Red Clarity Card, a tool used previously in the St. Lawrence ED and Sparrow Lansing Mother Baby Unit, will be implemented throughout the health system. By flashing the Red Clarity Card, a Caregiver can “stop-the-line” when they have a safety concern and begin a conversation by stating, “I need clarity.” This provides a clear and consistent approach across Caregiver roles and worksite locations. See the attached Physician Briefing for how to get your card, expectations, and timeline.

**Mayo Clinic Care Network**

As a Sparrow Doctor, how can I access Mayo Clinic Network resources for my Patient’s care?

- **eConsults.** Doctors can connect electronically with Mayo Clinic specialists and subspecialists to ask questions about a Patient’s care. To begin an eConsult, go to the eConsult ambulatory order in EPIC or page the eConsult Coordinator at 517.360.8232.

- **Consults for Inpatients.** NEW! A Physician to Physician conversation regarding a Patient’s care and treatment recommendations is available to you. Page eConsult Coordinator at 517.360.8232. This consult service for inpatients is a pilot program, and is very unique to Sparrow, and we are very interested in feedback around its utility. Please discuss your satisfaction with the consult with the eConsult Coordinator at 517.360.8232.
• **AskMayoExpert.** This point-of-care tool gives providers access to Mayo-vetted information, including disease management protocols, care guidelines, treatment recommendations and reference materials. The information is available on desktop computers or mobile devices 24/7 ([askmayoexpert.mayoclinic.org](http://askmayoexpert.mayoclinic.org)). These materials are designed to show you and your Patient what care pathway the particular problem would receive at Mayo.

For any questions please page Sparrow eConsult Coordinator at 517.360.8232.

For the practicing Sparrow Physician, there are also a number of educational resources, as well as access to multidisciplinary consultations such as tumor boards for various conditions that you may be treating. For a complete review of these resources, please access the Mayo Clinic Network Link on [Sparrow.org/MCCNTools](http://Sparrow.org/MCCNTools).

**Mayo Clinic Care Network IBD eBoard**

Mayo Clinic Care Network is offering a new eBoard for its members, Inflammatory Bowel Disease (IBD).

Mayo Clinic Care Network member providers caring for Patients with IBD will have access to Mayo Clinic IBD eBoard. Similar to the current offering of eTumor Board conferences, IBD eBoard is a multidisciplinary educational discussion via live video conference, offering informal advice regarding suitable diagnostic tests and treatment options for complex inflammatory bowel disease cases. The IBD eBoard will be held the second and fourth Thursdays of each month from 8-9 a.m. in conference Room B in the Cancer Center.

In addition to the live conferences, video archives will be available. Each archived IBD eBoard will be posted within 24 hours of each conference and available for one week on the Mayo Clinic Care Network site.

The eBoard is open to all care network members. The target audience may include Physicians as well as APP’s caring for Patients with IBD.

If you have any questions regarding how to participate or submit cases for review, please page the Mayo Services Coordinator at 517.360.8232 to assist you.

**Dates to Know**

**Upcoming Quarterly Medical Staff Meetings**

5:30 p.m. hors d’oeuvres | 6:00 p.m. dinner | 6:30 p.m. meeting

University Club of MSU, Heritage Room

Tuesday, Sept. 5, 2017 | Special Invite to Michigan State University Physicians

Wednesday, Dec. 6, 2017 | Recognition of New/Past Physicians, Election for Chief of Staff Elect

**Dystonia Symposium 2017**

**Date:** Friday, Sept. 8, 2017 | 7:30 a.m. to 5 p.m.

**Location:** The James B. Henry Center for Executive Development

**Target Audience:** Primary and specialty care Physicians, residents, Dystonia Patients and families

**Cost to attend:** participation in this educational event is **FREE**, but you MUST REGISTER to attend.

**To Register, go to:**

Physicians: [www.dystonia-foundation.org/msudystonia](http://www.dystonia-foundation.org/msudystonia)

Patients: [www.dystonia-foundation.org/patientforum](http://www.dystonia-foundation.org/patientforum)
What is Dystonia: Dystonia is characterized by persistent or intermittent muscle contractions causing abnormal, often repetitive, movements, postures, or both. The movements are usually patterned and twisting, and may at times resemble a tremor. The disorder causes varying degrees of disability and pain, from mild to severe. There is not yet a cure, but multiple treatment options exist and scientists around the world are actively pursuing research toward new therapies.

For more information & agenda: Click here

Welcome New Physicians

New Medical Staff
Keenan Bora, M.D., Department of Emergency Medicine
Morgan Daul, D.O., Department of Family Medicine
Oluwaseun Davies, M.D., Department of Internal Medicine/Critical Care
Laurie Dixon, M.D., Department of Emergency Medicine
Matthew Griffin, D.O., Department of Internal Medicine, CIMA
John Hawkins, D.O., Department of Internal Medicine/MSU-PMR
Daniel Keyes, M.D., Department of Emergency Medicine
Nabil Khoury, M.D., Department of Emergency Medicine
Jordan Klein, D.O., Department of Pediatrics, SMG Pediatric Hospitalist
Daniel McGillicuddy, M.D., Department of Emergency Medicine
Kevin Nguyen, D.O., Department of Anesthesia, Physician Anesthesia Service
Matthew W. Ralls, M.D., Surgery/General Surgery, Sparrow Pediatric Subspecialty Clinic
Stefanie Simmons, M.D., Department of Emergency Medicine
Karena Wu, M.D., Department of Pediatrics, U of M Pediatric Cardiology
Speak Up

Red Clarity Card and communications initiative
Aug. 28, 2017

Background
- Sparrow is committed to being recognized as a national leader in quality and Patient experience. To achieve that goal, a safe environment must be created and maintained for both Patients and Caregivers.
- Caregivers are expected to speak up immediately if they see something that may endanger the safety of a Patient or fellow Caregiver - yet many are apprehensive about doing so in certain situations. We must assure Caregivers that Sparrow Leaders “have your back.”

Key messages
- Sparrow is implementing a Speak Up communications training program and leader toolkit to reinforce the system’s expectations of - and support for - Caregivers in speaking up for safety.
- Through Sparrow’s Code of Conduct, Caregivers are empowered to get a person’s attention, express concern, make a request to stop the unsafe action and propose a solution.
- The Red Clarity Card, a tool used previously in the St. Lawrence ED and Sparrow Lansing Mother Baby Unit, will be implemented throughout the health system.
- By flashing the Red Clarity Card, a Caregiver can “stop-the-line” when they have a safety concern and begin a conversation by stating, “I need clarity.” This provides a clear and consistent approach across Caregiver roles and worksite locations.
- Caregivers should use the chain of command and report to a direct supervisor immediately, report the concern to Risk Management if the practice continues, and know how to file an incident report in RL Solutions.
- If the issue continues, Risk Management has someone on-call 24/7. To reach Risk Management, call the hospital operator at 364.1000.
- Retaliation against a Caregiver who speaks up to protect the safety of others will not be tolerated.
- All Caregivers are equal members of the Sparrow Patient Safety team. If you see an unsafe practice, speak up. You have the right, and responsibility, to do so.

Timeline
- Sept. 11 to Nov. 30
  - All Caregivers required to attend a learning session in their department, begin wearing a Red Clarity Card, and learn the process of how safety incidents should be reported
  - You may pick up a Red Clarity Card at the Physician Communications Center or the Medical Staff Services office.

Questions?
Contact Jeff Kay, Safety Officer and Director of Accreditation, Safety, Emergency Management & Infection Prevention, at 517.364.5219 or jeffrey.kay@sparrow.org.