

Committee	Function	Day / Time	Location	Chairperson(s)
Cancer Committee	<p>The Cancer Committee is a standing committee of Phelps Hospital Northwell Health that assists the Board in overseeing and ensuring the quality of cancer care from prevention through hospice and end-of-life care or survivorship and quality of life. The Committee oversee issues not limited to goal setting, planning, initiating, implementing, evaluating, and improving all cancer-related activities.</p> <p>The Cancer Committee review and provide recommendations regarding the provision of comprehensive and appropriate diagnostic and therapeutic services to patients with cancer consistent with the resources available to the Hospital.</p>	twice monthly, varies	Boardroom	Angela Adjetey Appiah ext. 1612 and Dr. Avraham Merav ext. 2333
Care Leaders Meeting	Review patient comments, identify areas of improvement. Solve patient related service issues	Every Wednesday 8 AM - 8:45 AM	Family Medicine Conference Room MSB 4th floor	Dan Blum - chair; Phyllis VonderHeide operating chair
Clinical Informatics Council (CIC)	The goal of the committee is to provide a forum where clinical staff members bring issues/requests/problems to be discussed as they relate to our computerized documentation system or related non-Meditech systems. New developments in documentation and associated workflow are presented by I.T. members for discussion and acceptance within the group. (Attendance typically by managers, supervisors, directors)	Every other month, starting in February, second Tues at 11am	Board Room	Liz Casey Ext. 3031
CME Committee	Plans Journal Club and Grand Rounds.	ad hoc - approximately 3 times / yr	TBD	Louis Buzzeo (914-332-9100), Shantie Harkisoon (x5355), Julia Miller (x5350)

CNO Advisory Council	Shared Governance is based on the belief that healthcare professionals who work closely with patients are in the best position to make clinical practice and patient care decisions. Clinical nurses participate in decision-making, establish standards of practice, promote a culture of safety and impact patient outcomes. Mary McDermott, MSN, RN, ANP, NEA-BC, SVP/CNO serves as a nursing advocate in leading nursing practice and patient care while ensuring that nursing's mission, vision, values and strategic plan are aligned with the organization's priorities to improve the organization's performance. The CNO Advisory Council, empowers clinical professional nurses to represent their department peers in providing counsel to the SVP/ CNO regarding topics pertinent to the practice of nursing and unit operations.	Monthly, 3rd Wednesday of the month from 3p- 5p	Family Medicine Residence	Mary McDermott, 3500. Co-Chair – Judy Dillworth, 3509 (Contact person, Judy Dillworth, 3509)
Core Measures Review Team	Reviews results of, and validates core measure studies, recommends and implements improved processes. Has become devoted largely to inpatient psychiatry measures, due to retirement of many other chart abstracted measures, and morphing of value based purchasing into more patient "outcome" measures	Monthly, 2 nd Thursday, 10 AM	MSB 545	Bill Reifer, ex. 3314
Department Head Forum	Department heads (DHs) are invited to participate in a monthly meeting that will provide communication and information related to the organization. The forum will provide a platform for DHs to collaborate, share experiences and identify issues common to many DHs. Issues brought forth during the meeting will be communicated to the senior leadership team as needed (by invitation).	Monthly, third Tuesday, from 2P-3 P	Boardroom	Tim Wages ext. 3752 Paula Keenan ext. 3385
Discharge Group, Ad Hoc	Multidisciplinary group whose goal is to analyze and make recommendations to Patient Flow Team around earlier discharge time goals	Monthly, time being reconsidered		William Reifer... transitioning to Kerry Kelly
Donor Nurse Advocate	Donor Nurse advocates support their professional colleagues to consider all patients / clients as potential donors. They provide education and support in reporting, working with each family, documentation, and connecting with LiveOnNY resources and staff with the goal of increasing donations. The group facilitates two major activities per year; one in April for Donor Awareness Month and one in October for Enrollment Day.	Quarterly, small group meetings	Vary	Anne Marie Treanor, ext. 3500

Emergency Preparedness	The goal is to support and assist in the development of the hospital Emergency Preparedness Activities. Members discuss hazards and risks raised by the organization, risk mitigation activities, preparedness efforts and recovery planning. Among other activities, the committee is responsible for the adoption of the annual Hazard Vulnerability Analysis and the Emergency Operations Plan.	Periodic, as needed.	Boardroom	Jeff Meade, chair, ext. 3679 Mindy Brugger, contact person, ext. 3678
Employee Incident Committee (EIC)	Team members discuss employee incidents, explore causes and solutions, and identify current risks.	4th Thursday every other month 10-11:30	Boardroom	Debra Lafaro ext.3159
Engagement Team - Employee / Physician	The "ET" mission is to create an environment that values and supports employee / physician engagement and recognition through the development of internal programs and events for employees / physicians in an effort to foster commitment, organizational success and job satisfaction	Every other Wednesday at 2 PM	Boardroom	Andrea Hodges ext. 3960
Ethics Committee	Provides and promotes education and consultation on ethical decision-making issues which arise in the course of patient care within the hospital and any of its affiliated services.	Quarterly, 1st Tuesday, 8 am - 9 am (March, June, September, December)	Boardroom (varies)	Dr. Tobe Banc, ex. 1000
Executive Compliance Committee	The function of the Committee is to discuss specific and general compliance/privacy issues at Phelps with hospital Leadership and develop appropriate multi-Departmental responses.	Every other month, 2nd Monday, 11 am - 12 pm, (Feb, Apr, Jun, Aug, Oct, Dec)	MSB 545	Eric Sandhusen, chair (516) 465-3007
Executive Nursing Council	This is a forum for Nursing Directors / Assistant Directors to discuss strategic initiatives and come to consensus on decisions that impact patient care services and work environment. It is also a vehicle to disseminate and share information.	Twice monthly, varies	Atrium	Mary McDermott, (contact Rosendy Rodriguez, ext. 3502).
Fall Prevention Committee	The goal of the committee is to decrease the rate of falls, falls with injury and risk for falls. Team members analyze falls which have occurred and explore options to prevent future falls.	monthly, 4th Friday, 11 am - 12pm	MSB 545	Paula Keenan ext. 3385
HIM Committee (Forms Committee)	HIM Committee - new / revised forms are reviewed and approved/denied through the HIM Committee as necessary; this is a great forum as it is multidisciplinary.	Monthly, third Monday from 9-10am	Atrium	Dr. Faltz Donna Pepe, ext. 3059

HUC Council	Health Unit Coordinators bi-monthly meeting to discuss issues. Information is provided related to upgrades in our IT systems, process changes and general issues pertaining to the HUC role.	Every other month, 4th Tuesday, 2:30P - 3:30P	WWCR	Melissa Kerrigan, ext. 3550
Infection Prevention Control Committee (Hospital)	The Infection Prevention and Control committee is responsible for assuring that the infection prevention and control program manages surveillance, prevention and control of infections in accordance with regulations, laws and professional practice standards.	Monthly, 4th Wednesday @ 2 PM	Family Medicine Conference Room	Alex Xelas ext. 3645 / Dr. Michael Miller ext. 762-2276
Joint Commission Meeting	Multidisciplinary meeting to prepare for next TJC survey	Every Monday, 12 - 1 PM	Family Medicine Residence Conference Room, 4th floor MSB	Denise Podell, ext. 3336
Joint Commission- National Patient Safety Goals Chapter	Reviews policy, organizational performance and needs related to compliance with the National Patient Safety Goals... Note: numerous cancellations and no-shows over last 6 months... needs re-commitment in light of recent issues with patient identification	Monthly 2 nd Friday, 2 PM	MSB	William Reifer, ext. 3314
Joint Commission- PI Chapter	Reviews policy, organizational performance and needs related to organizational PI standards Note: numerous cancellations and no-shows over last 6 months... needs re-commitment in light of recent issues with patient identification	Semi –Monthly, schedule changing		William Reifer, ext. 3314
LDI Team	The Leadership Development Team is responsible to identify the learning needs of the management team, identify learning solutions, and develop and / or facilitate the meeting of those needs.	Monthly- 3 rd Thursday- 1pm – 2 pm	WWCR	Nancy Fox, ext. 3167

LGBTQ Committee	Phelps LGBTQ (Lesbian, Gay, Bisexual, Transgender, Queer / Questioning) committee serves as a resource to enhance workforce engagement and promote LGBT awareness through education and development activities that foster a safe and inclusive environment at Phelps. This committee works to sustain national recognition for Phelps Hospital and Northwell Health as LGBT leaders, enabling our patients and their families, our employees, and community partners to feel valued and treated with dignity and respect.	varies - meetings scheduled as needed	varies	Dr. Robbins Gottlock ext. 1002
Management Meeting	The management meeting is a method of communication between hospital leaders and directors / managers / supervisors. Information shared includes such topics as budget, quality, pt. experience, and organizational development.	Monthly, second Thursday, from 2p-3p	Auditorium	Dan Blum (contact Alice Layne, ext. 1006)
Medication Safety	An interdisciplinary committee made up of nurses, pharmacists, risk management and quality improvement professionals working together to promote the highest standards of safe and effective medication use.	Monthly, 3rd Wednesday, 2 pm - 3 pm	MSB 545	Rebecca O'Brien, ext. 3575
New Knowledge and Innovation Council	Shared Governance Council- Facilitate and act as a conduit for information sharing related to best practices, research, and advances in technology and innovation to guide conscientious integration of evidence-based practice (EBP) and research into clinical and operational patient care and nursing practice.	Monthly, 3rd Wednesday of the month from 9am - 11 am	Family Medicine Residence	Judy Kennedy, (works nights), jkennedy8@northwell.edu; Catherine McCarthy, ext. 3538
Nursing Credentials Committee	The Nursing Credentials Committee is a representative unit based group of professional registered nurses who will direct the implementation of the professional nurse career ladder. The functions of the committee are to support/guide the professional nurse in their advancement on the career ladder, provide education to develop staff understanding of the purpose and objectives of the committee and the peer review process, review RN applications for advancement through the levels of the clinical track of the career ladder, make recommendations to the applicant and unit director based on the criteria for advancement and evaluate the effectiveness of the committee. The committee is intended to recognize and promote clinical excellence, innovation and leadership through clinical advancement.	Monthly, 2nd Monday, 2pm-3pm	WWCR	Karen Barger, ICU nights, ext. 3575

Nursing Infection Control	Nursing based issues are discussed related to infection prevention. Infection prevention champions from designated areas communicate best practices to their peers.	Every other month, 1st Tuesday of even months 11 AM - 12 PM	WWCR	Alex Xelas ext. 3645
Nursing Leadership Council	The Nursing Leadership Council (NLC) shall be a representative group of professional registered nurses who will direct process standards for Nursing Services that support the philosophy of nursing and promote clinical objectives of the department. Members shall be in nursing leadership roles.	Monthly, 4th Wednesday, 9 am - 10:30 am	Family Medicine Residence	Margaret Santos, ext. 3569 and Doreen Wall, ext. 3368
Nursing Standards of Care	Reviews and develops evidence based policies, guidelines and protocols to standardize nursing care and assist all staff in quality patient care. The committee promotes professional development and participation of RN's by involvement and education of their peers.	Monthly, the 2nd Wednesday of the month from 11:00 am -12:00 n	MSB- Room 545	Carolynn Young, ext. 3384
Pain Management	An interdisciplinary committee focused on issues related to effective pain management in our patient population.	Monthly, 2nd Thursday, 7:15 am - 8:15 am	MSB 225	Carolynn Young, ext. 3384 and Cheryl Burke, ext. 3397
Patient Advisory Group	Brings together former patients (at this point a small group of current volunteers and auxiliaries) to help us see our services through the eyes of the patient	5 times yearly		Leader- William Reifer, ext. 3314
Patient Education	Team members identify patient education needs and develop or obtain materials to meet needs; review education materials provided to the committee; and ensure all patient education meets health literacy guidelines.	Monthly on 2nd Mon 1 PM	MSF- 235	Lena Lulaj, 2 Center, ext. 3550 and Jennifer Eisenberg, Phelps Cancer Institute Infusion Center ext. 1650
Patient Flow	Mission is to improve the flow of the patient throughout their hospital stay from the time they enter the ED through discharge from the hospital.	Monday 1 PM	Boardroom (varies)	Eileen Egan ext. 3335

Pharmacy & Therapeutics	The Pharmacy and Therapeutics Committee shall be responsible for the development and surveillance of all medication utilization policies and practices within the hospital in order to promote rational medication therapy, assure optimum clinical outcomes and patient safety to minimize the occurrence of medication errors and suspected drug events. The Committee shall develop and monitor policies regarding the evaluation, selection, procurement, storage, distribution, utilization, safety procedures and outcomes related to medications in the institution. The Pharmacy and Therapeutics Committee (P&T) is a multidisciplinary committee comprised of physicians, nurses, pharmacists, quality management, and other appropriate healthcare professionals. The Committee's recommendations are reported to the Medical Board for final approval.	Monthly, 2nd Wednesday, 8am- 9am	WWCR	Brian McGrinder, ext. 3302 Dr. Floyd Byfield, ext. 5420
PI Team for Medication Safety	Multidisciplinary team that uses group experience to identify means to build a safer, quality driven medication system that leads the health care provider to appropriate paths of treatment and diminishes opportunities for error.	Monthly, 1st Wednesday, 1 pm - 2 pm	MSB 225	Nancy Fox, ext. 3167
PICG / QRC	Medical and Administrative Staff Leadership committee to provide review and oversight of Organization's Quality Program	Monthly, 4th Wednesday, 7:30 am- 8:30 am	Boardroom	William Reifer, ext. 3314, co chair Mark Russakoff, co-chair
Pressure Ulcer Reduction	Clinical nurses from units with pressure injuries (PI's) attend to represent their floor. Monthly hospital acquired pressure injuries (HAPI's), wound products, PI staging, and issues related to performing quality care for prevention of PI's are discussed. Nursing and Respiratory department heads are invited to participate in this monthly meeting.	Monthly, second Tuesday 2:00-3:00	WWCR or MSB 545 as available	Debbie Reynolds,
Professional Practice & Development	Facilitates the continuing development of nursing practice in the nursing department and acts as the decentralized decision making body for nurses. The Professional Practice and Development Council (PPD) provides advice to the nurse leadership relative to the practice of nursing and nursing operations.	Monthly, 3rd Wednesday of the month from 11 am - 1 pm	MSB room 410; Family Medicine Residence Conference Room (FMCR)	Carolynn Young, ext. 3384
QREC (Quality Review Executive Committee)	Executive Steering Committee to the PICG. Reviews minutes of medical department meetings, literature, reports, etc. for determining agenda of PICG and referring items to other committees as necessary.	Monthly, 2 nd Wednesday, 4 PM,	MSB 235	William Reifer, Mark Russakoff, co-chairs

Quality & Safety	Clinical nurses participate in decision-making, establish standards of practice, promote a culture of safety and impact patient outcomes.	Monthly, 3rd Wednesday of the month from 1 pm - 3 pm	Family Medicine Residence	Carol Daley, ext. 3377
Quality Assurance Committee of the Board	Quality oversight committee for the board of directors. Provides oversight and prioritizes hospital Quality Program including: quality, mission, goals and objectives.	Monthly, 2 nd Monday	Family Residency Conf Rm	Chairs: Dr. Banc, and Board Members Pat Armstrong and Fred Mascia
Readmission Reduction	Multidisciplinary provides analysis and recommendations and action planning around complex factors that might lead to reducing risks of patient readmissions	Monthly, 3 rd Wed. 1 PM	MSB 545	William Reifer, ext. 3314, co chair Mark Russakoff, co-chair
Restraints	The purpose of the Restraint Committee is to assist clinical care staff with adhering to Phelps internal policies and procedures that have been developed and implemented to protect patients from harming themselves, other patients, and staff.	Monthly, second Friday, 11:00am – 12:00pm	Atrium Conference Room	Helen Renck, ext. 3506
Safe Patient Handling	Multidisciplinary group the goal of which is to decrease risk for patient handling incidents. Members review and analyze incidents and identify opportunities for improvement.	Monthly- 3 rd Wednesday, 1pm – 2 pm	WWCR	Marilynn Maniscalco, ext. 3386
Safety Committee	The goal is to minimize safety risks. Members discuss occupational and environmental safety risks and actual incidents, monitor activity results, and discuss solutions regarding the hospital's physical environment.	4th Thursday every other Month 10 AM to 12 PM	Boardroom	Jeff Meade, chair, ext. 3679 Mindy Brugger, contact person, ext. 3678
Schwartz Planning Rounds	This committee plans future Schwartz Center Rounds including topics, possible panelists, and logistical details when necessary. Schwartz Rounds supports a multidisciplinary forum where staff can discuss the emotional, spiritual and social issues that arise in caring for patients.	Monthly, 3rd Wednesday, 2 pm - 3 pm.	MSB 235	Carole Johannsen
Sepsis Committee	Clinical PI Team reviews results of NY and CMS sepsis studies and recommends and implements improvement plans	Monthly, time being reconsidered		William Reifer, ext. 3314 Dr. Faltz
Specialty Care	Critical care areas (5S, ICU, ED) discuss critical care practice initiatives, review and approve policies/protocols and to review/analyze and discuss Quality Indicators: HAI's, APACHE IV data, Code Blue data, Rapid Response Team data. All Code Blue reports and discussion are brought to the Specialty Care committee.	Monthly, 1st Thursday, 8 am - 9am	Boardroom	Carol Daley, ext. 3377 Dr. John Depetrillo

Staff Advisory Council	The staff advisory council is responsible to consider the tenets of C.A.R.E., and explore effective strategies to implement those tenets in each department.	Monthly- 3rd Thursday- 2 pm- 3pm	Boardroom	Phyllis VonderHeide, ext. 3168
Stroke Task Force	Multidisciplinary, Medical Board, The Stroke Center Task Force is the organizational and oversight committee for the Stroke Center. Its role is to: -Evaluate the hospital's multidisciplinary patient care services in relationship to stroke care -Review quality data and other information relevant to the provision of care for stroke patients. -Ensure that new information, including new treatments, stroke center designation updates and best practices are integrated into the stroke program. -Review at least annually stroke center protocols, documentation, organization and recommend changes, updates or improvements. Data from the stroke registry and performance improvement indicators will be used when appropriate. -Approve, disseminate and evaluate care paths, forms, patient education materials and other documentation relating to stroke care.	Every other month, 1st Wednesday, from 9am - 10am	Boardroom	Elaine Gardner, ext. 3493
Surgical Services	Surgical Services Committee provides communication, collaboration and problem solving related to Perioperative area. The meeting provides a platform for physicians, nursing leadership and Administration to discuss issues effecting the service.	Monthly, 3rd Tuesday, 7:30 am - 8:30 am	Atrium	Dr. Har Chi Lau and Dr. Matthew Cullen
Tech Council	The goal of the committee is to provide a forum to improve communication for technicians to learn about changes, verbalize needs and address issues.	Every other month (Jan, Mar, May, Jul, Sept, Nov), 4th Thursday, 2 pm - 3 pm	Boardroom	Marilynn Maniscalco, ext. 3386 Kathleen Pappas, ext. 3169
Transfusion Committee	New York State Section 58-2.16(b) of 10 NYCRR. The Committee is responsible for reviewing transfusion practices, evaluating adverse transfusion events and monitoring the blood supply.	Every other month, 3 rd Tuesday (Jan, Mar, May, Sept, Nov).	Lab Conference Room	Dr. Ali Tamsen/ Cynthia Pettus Blood Bank Supervisor.

Utilization Review	The Utilization Review Committee is mandated by CMS as a condition of participation. The URC reviews medical necessity of admissions, the appropriateness of the setting, the medical necessity of extended stays and the medical necessity of professional services. The goal is to improve efficiencies and hold down costs of hospital care.	Every other month, 1 st Tuesday, 12 n - 1pm	Family Medicine residence Conference Room	Drs. Kalra and Vivek
Value Analysis	The goal of the committee is to support interdisciplinary decision making for new products. Members evaluate new product safety, usability, financial impact and /or savings, set up trials for recommended items, and develop training and implementation plans.	Monthly, 3 rd Tuesday, 11:00 a – 12 n	Boardroom	Glenn Delau, ext. 3227