



A physician group serving Alameda Health System

BOB SAVIO, M.D. OUR NEW PRESIDENT

Johara Chapman, MD, leaving OakCare

Dear OakCare colleagues,

I will be leaving OakCare/AHS December 15th of this year.

You will be in excellent hands, as our OakCare Board voted last week to appoint Bob Savio to take my seat on the board and finish out my term as OakCare president, which lasts until August 2017.

Very happily, Bob accepted our request in his usual thoughtful and humble way.

As I'm sure all of you know, Bob has served AHS and OakCare in many capacities for a long time, whether as pediatric chief, OakCare board and executive committee member, or most recently as an invaluable member of our ongoing OakCare/AHS contract negotiation team.

I anticipate a seamless transition and know his experience, warmth, and devotion to both OakCare and the patients we serve will make him a fantastic president!

MCH is also transitioning



Johara Chapman, M.D.

to a wonderful set of leaders.

Sophie Shabel will be stepping up as our interim Chair, pending the outcome of a replacement search. Denise Tukenmez will take over Sophie's current role as OB chief, in addition to continuing on as our Chair of the MCH QRC. Both are amazing leaders: respected, warm, fair, smart, clinically excellent, and able to see and hear all sides of complex issues. I couldn't be leaving the department in



Bob Savio, M.D.

better hands!

As for me, I seem to have a ten-year itch that sneaks up on me in my career. Whether this transition will be a permanent retirement from work or just a break where I figure out what comes next remains to be seen.

I'm 99% sure about the retirement from clinical practice, but I have loved the collaboration, quality improvement, guiding, and mentoring aspects of my job in my

seven years as MCH Chair, so maybe something else in that realm will come my way.

Meanwhile I have scheduled scuba diving lessons in Maui and look forward to having time to explore the world's oceans and their imperiled inhabitants.

I hope you'll indulge me in a little reminiscence.

The changes I have seen in my ten years here are, well, I'm not sure there's an accurate word to describe them without sounding over the top!

There have been leaps in growth, amazing advances in improving care to our community, and new technology that sometimes makes life so much easier, but at other times has us scared to death that it will cause us to make a mistake or bring a screen between us and our patients in ways that don't feel good.

AHS leadership has almost completely turned over, sometimes multiple times in the last 10 years.

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Johara Chapman leaving OakCare

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That turnover is a normal and healthy part of medical leadership, but still can leave us feeling a bit unstable as strategies and priorities shift and change.

It has been a great pleasure to watch OakCare mature as an organization. While I heard it described as a bit “ingrown” in years past, there is now fantastic leadership coming from all parts of our group — new folks and long timers, all departments are well represented. There is complete transparency

throughout the organization.

Peter Hohl has been, and continues to be, a great leader, keeping all of our needs in mind and guiding us with the healthcare business expertise most of us don't have. We are very privileged to have him as our CEO!

Many people on the board and executive committee have expressed that those meetings can be the high-lights of their weeks.

We work together, solve problems thoughtfully, creatively and hopefully always fairly.

I encourage all of you to stop by sometime and participate in or watch a board or executive committee meeting. OakCare is only as strong as its members — we need all of you to make your voices heard, participate in your organization, and help guide it to a strong future.

Through all the ups and downs, what I have never seen change is the passion with which OakCare physicians serve our community. It makes me very proud to have joined you in that practice and to have had the privilege of doing what I could as president to support you to do what you are so very good at!

The change we have seen will only accelerate — some

changes will be great, some not so great. Regardless of the form change takes, or how the powers that be slice and dice the organization of the East Bay health care scene, the need of our community for your love and excellent medical care won't ever change.

I thank you all for the honor of serving as your president and look forward to continuing our work for the next couple months and maintaining friendships well beyond that.

Please don't hesitate to reach out to me any time. Whatever comes next, part of my heart will always be here with you!

Warmly, Johara



**OAKCARE
MEDICAL
GROUP**

Board of Directors

Rachel Baden, MD, IM
Caitlin Bailey, MD, ED
Donna Carey, MD, Peds
Johara Chapman, MD, OBGYN
Colin Feeney, MD, IM
Tom Frohlich, MD, IM
David Hoffman, MD, Peds
Nick Nelson, MD, IM
Lasha Pierce, MD, OBGYN
Steve Sackrin, MD, IM
Barry Simon, MD, ED
Eric Snoey, MD, ED
Beth Stewart, MD, IM
Cord Valentine, MD, OBGYN

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OakCare shareholder survey results

As an input for the Board of Directors off-site planning meeting in August, OakCare Shareholders were surveyed to find out what they liked about OakCare and what they thought could be improved. Here is a summary of what OakCare Shareholders had to say:

Do Shareholders feel supported by OakCare? How?

- Overwhelmingly shareholders replied yes, they felt supported.
- How: advocacy, fair compensation, AHS negotiations, administrative and HR support, good parties.

What value does OakCare bring to Shareholders?

- Increased cohesiveness across areas, group organization, physician centered, strong physician voice, benefits, excellent administration, advocacy with AHS, size/leverage.

What should OakCare make sure they continue doing?

- Interactions between departments, good contract negotiating, help AHS improve its financial health, paying (paychecks) on time, assistance with hiring and grants, broaden business base for security, maintain an independent medical group.

What additional services should OakCare provide?

- More flexibility with CME/business expenses, wellness activities, more administrative assistants for Medicine, financial planning consultation, more SANs to cover for vacation, become AHP for AHS, expand services to make us stronger, align with AHS strategic goals, integration of clinical scheduling and time off in payroll system, more robust HR Department (onboarding).

What can OakCare improve?

- More communication/better dissemination of information/sharing information from leadership/Board, improve our ability to generate income via billing.

OakCare's most important attribute?

- Fair benefits, advocacy for physicians, physician-led and run, trustworthy, Oakcare physician networking, negotiating contracts, HR, being physician-led/professionally administered/mission-driven, inclusive in decision making, independence from AHS, size and scale (leverage), responsiveness and individual attention, fair and reasonable leaders, reliable.

NEW FACES

PHYSICIANS

John Hayward, MD, Palliative Care Physician, Internal Medicine, June 1, 2016.

Alejandro Diaz, MD, Primary Care Physician, Internal Medicine, July 1, 2016.

Eliza Hagen, MD, Physician, Neurology/Director, Critical Care EEG Monitoring and Epilepsy Program, Internal Medicine, July 1, 2016.

Lilavati Indulkar, MD, Hospitalist, Internal Medicine, July 1, 2016.

Ana Liang, MD, Physician, Pediatrics, July 1, 2016.

Scott Lynch, MD, Hospitalist, Internal Medicine, July 1, 2016.

Nathalie Medeiros, MD, Physician, Pediatrics, July 1, 2016.

Neha Gupta, MD, Primary Care Physician, Internal Medicine, August 1, 2016.

Joyce Wang, MD, Physician/Ultrasound Fellowship, ED, August 1, 2016.

Edwin Dietrich, MD, Physician/Ultrasound Fellowship, ER, August 1, 2016.

Emma Shak, MD, Primary Care Physician, Internal Medicine, September 1, 2016.

Jenny Cohen, MD, Primary Care Physician, Internal Medicine, September 1, 2016.

Kerry-Ann Kelly, MD, Physician, OBGYN, October 1, 2016.

ADMINISTRATION

John Stevens, COO/Assistant Director, Levitt Center, March 1, 2016.

Nga Myndee Tran, Residency Program Administrator, Internal Medicine, June 7, 2016.

Kaitlin Ellis, Research Coordinator, Internal Medicine, June 16, 2016.

Allison Bakamjian, Research Associate, Internal Medicine, July 11, 2016.

William Stewart, Clinical Research Coordinator, Levitt Center, August 25, 2016.



The award-winning HRC team.

HRC team wins Exemplary Health Partner Award

Nick Nelson, MD, Department of Medicine physician and Medical Director of the Human Rights Clinic (“HRC”) at Highland Hospital, announced the HRC team had been awarded the Exemplary Health Partner Award earlier this year by the International Refugee Committee (IRC).

The award letter stated: “Highland Hospital has shown great commitment to the vulnerable population we serve, and for this, you have earned the deep gratitude and admiration of all of us at the IRC. By honoring the hospital, we would give our guests a concrete example of the community partnerships that underpin the IRC’s mission. Simply put, we believe you will inspire others to follow your lead.”

The Human Rights Clinic was founded in 2001 to provide preferential access to trauma-informed care for victims of torture and other human rights abuses seeking refuge in the United States and living in Alameda county.

The HRC provides primary-care services to traumatized refugees and asylum-seekers, and conducts forensic evaluations of asylum-seekers to document physical and psychological evidence of torture and other human-rights violations.

Since 2012 clinicians working through HRC have evaluated more than 100 patients. Of those whose outcomes are known, all have been granted asylum, giving them an opportunity to start anew in a safe place supported by social services and receiving excellent medical care from AHS.

Congratulations to the entire HRC team:

Nick Nelson, MD; Emily Tatel, NP; Ogbai Hagos, Interpreter; Suzanne Portnoy, NP; Alejandro Diaz, MD; Sasha Best, PsyD; Hideki Scherb and Sonia Randhawa, Behavioral Health Psychology doctoral candidates; Lisa Cooper, MSW; Violet Perez and Pariss Sykes, Eligibility Clerks; Charlet Run, Medical Assistant.

And, thanks to the leadership of the Primary Care Division and the Department of Medicine for supporting their work.

OakCare/AHS contract negotiations update

OakCare’s professional services agreement with Alameda Health System expired June 30, 2016. The two organizations decided to sign an amendment extending the term of the contract until March 31, 2017, because both organizations believe it vital for the new CMO

of AHS, Dr. Ghassan Jamaledine, to participate in negotiations, given the size and complexity of the contract.

Contract discussions have resumed with fact-gathering meetings between AHS and OakCare Department and Division leaders. The goal of these meetings is to understand how each

area functions, what their needs and challenges are, and to determine how the changing healthcare environment impacts the level and types of services OakCare needs to be providing.

Both organizations are committed to having a new contract completed and in place by March 31, 2017.

OakCare annual holiday party December 8

OakCare's annual holiday party will be held Thursday, December 8, at Yoshi's in Jack London Square.

Scheduled to play is the Mike Stern Band, featuring Dave Wecki, Bob Fransechini and Tom Kennedy.

We look forward to sharing some holiday cheer with everyone in the OakCare family.



OakCare Quality Committee Initiative

Improving Lactation Service Utilization and Guideline Adherence

The American Academy of Pediatrics and the World Health Organization recommend exclusive breastfeeding for the first six months of life, followed by continued breastfeeding along with complimentary foods thereafter until at least one to two years of age.

Emergency Department visits and inpatient admissions for lactating women can pose enormous stress, putting the mother and her child at risk for discontinuation of breastfeeding before it is recommended and before the mother intends.

Highland Hospital is well equipped with International Board Certified Lactation Consultants (IBCLCs) who not only provide "wrap-around" breastfeeding support in the Women's Clinic, Labor and Delivery Unit, Post-Partum Unit, Intensive Care Nursery, and Pediatric Clinic, but also collaborate with the teams caring for lactating women throughout the hospital to protect and support breastfeeding in cases of maternal illness or injury.

The OakCare Quality Committee, led by Nada Novakovich Rhode, MLP, is working on a project to improve Highland Hospital Lactation Service utilization and adherence to guidelines related to the administration of contrast media in breastfeeding women.

The project includes both educational and systems interventions.

The team administered a survey to assess knowledge and educate Emergency Medicine (EM) and Internal Medicine (IM) providers on lactation services available at Highland Hospital and American College of Radiology (ACR) guidelines for administration of contrast media to breastfeeding women.

The survey also assesses provider knowledge and educates providers on how to access lactation services, where best to find information on drug safety during lactation, how to obtain breast pump machines and accompanying parts required for machine use, and how to instruct a woman to pump when separated from her exclusively breastfeeding infant.

Additional educational interventions

include posting ACR guidelines in the Emergency Department (ED) provider charting room and posting a flyer summarizing ACR guidelines and the lactation pager number in the ED staff restrooms.

Lactation Resource Guides have also been posted in Wellsoft for EM providers and AgileMD for IM providers.

By striving to protect breastfeeding during compromised maternal health, Highland Hospital providers will uphold the Alameda Health System vision of being recognized as a world-class patient- and family-centered system of care that promotes wellness, eliminates disparities, and optimizes the health of our diverse communities.

Open Enrollment 2017

Open enrollment will begin November 14 and end December 9 for 2017. There will be two open enrollment meetings to choose from for those who would like to meet personally with our brokers and human resources to have their questions answered. Both meetings will be on November 30 – from 10 a.m. – 1 p.m. and from 1:30 – 3:30 p.m.

Physicians can stop by for either session and stay as long or as little as they wish. The meetings will be held in the Acute Tower dining room on the second floor.

Tamika Walker, Senior HR Generalist, will be distributing full details of the open enrollment process in the coming weeks. twalker@oakcaremedical.com; 510-645-1179.