List of Open HOA Committee Spots

(Last Updated 8/27/25)

Pharmacy and Therapeutics Committee (P & T), 3rd Tuesday of the month from 12-1:30 pm

The Pharmacy and Therapeutics Committee will consider issues of quality, medication safety and cost for (1) U of M Hospitals inpatient use, and (2) use in UMHHC outpatient pharmacies and ambulatory clinics. The committee makes its decisions without regard to research or educational support provided to individuals or to the institution by the pharmaceutical industry. The Committee, through the Department of Pharmacy Services, is responsible for the development and implementation of all drug use policies and practices including safety issues related to drug ordering, dispensing and administration. The committee will address issues of drug usage coordination and collaboration among appropriate UMHHC programs required to assure quality services across the continuum of care.

Chais: Dr. David Irani, Dr. Karin Durant

Cerebral Death Determination Committee, Once per Year, Neurology HO Invited

Medical Staff Bylaws - ECCA Sub-Committee - (a) Develop and publish guidelines and operational rules which are dependent upon the current scientific criteria for the determination of cerebral death and which shall conform to the laws of the state of Michigan.

- (b) Oversee the education, regarding the guidelines, of consultant neurologists, electroencephalographers or neurosurgeons who will be making cerebral death determinations.
- (c) Monitor the use of cerebral death guidelines through periodic audit.

Chair: Dr. Douglas Gelb

Clinical Radiation Safety Committee, Quarterly, 2nd Monday of Month 2pm-4pm

Senior Management Team - The use of X-ray equipment and radioisotopes in medicine has grown vastly over the years. As a result, managing the complexities of such things as dosimeter monitoring of faculty and staff, minimizing patient exposure; properly acquiring and registering devices; and providing consistent education, training and use authorization outside the traditional areas such as Radiology and Radiation Oncology has become more challenging. UMHHC has established the Radiation Safety Committee to provide institutional oversight of radiation-related activities in the clinical environment, ensure compliance with regulatory agencies and enhance patient and staff safety.

Chair Dr. Ella Kazerooni, Debbie DeNapoli

Health Records Standing Committee, 2nd Wednesday of month, 12-12:50pm

Medical Staff Bylaws - ECCA Sub-Committee -

- (a) Develop and oversee institutional policies for the medical record paper and electronic.
- (b) Identify, review and approve policies related to medical information and medical record management.
- (c) Provide input and recommendations regarding the strategic direction for the ongoing management and development of the UMHS/UMHHC electronic health record.
- (d) Review and make recommendations regarding incremental electronic medical record selection, functionality, operations, and enhancements.
- (e) Develop and oversee processes for medical record reviews.
- (f) Develop and oversee deficiency monitoring processes and make recommendations for improvements and/or enhancements.
- (g) Develop and/or advise the organization on opportunities and practices to support efficient and effective capture and documentation of clinical information.
- (h) Provide input to UMHHC and UMHS leadership regarding medical record/EHR needs within the UMHS.
- (i) Develop/implement policies for education and training of physicians, house officers and SPPs on medical record documentation.
- (j) Oversee, review and approve all paper forms and electronic formats used to document or capture patient information for the medical record.
- (k) Recommend and support strategies for integration of electronic medical record systems and universal access to all information necessary for safe and effective patient care

Chairs: Dr. Rishi Bakshi, Ruth Lutes

Utilization Management Committee, 3rd Friday of even months 8:30-10AM

Medical Staff Bylaws - ECCA Sub-Committee - The Utilization Management Committee (UM Committee) is a committee of the Medical Staff and operates under the authority of the ECCA. It provides oversight to the utilization review functions including medical necessity of admissions, length of stay, underutilization, over-utilization, appropriate scheduling, and use of the medical center's resources. Professional services such as drugs and biologicals will be reviewed as needed or requested. The committee reviews and makes recommendations for improvements in cost reduction, decrease in denials, decrease in readmissions, capacity management and patient flow issues, and improved patient experience. The committee will escalate items as necessary to appropriate leadership groups, including but not limited to the ECCA, Clinical Leadership Team (CLT), Compliance Office, and OGC.

Chair: Dr. Sweta Singh

Infection Control Committee, 3rd Monday of Month, 12pm-1:30pm

"Medical Staff Bylaws - ECCA Sub-Committee - (a) Review the mechanisms and parameters of a nosocomial

infection control program including surveillance criteria, infection definitions and criteria of acceptance, and epidemiological follow-up.

- (b) Review UMHHC's infection control measures including isolation requirements, aseptic procedures, disinfection and sterilization procedures, etc.
- (c) Review mechanisms for obtaining and distributing information to the Medical Staff concerning antibiotic susceptibility of laboratory isolates.
- (d) Review elements of the employee health program which impacts infection control policy and procedures.
- (e) Report actual or suspected infections.
- (f) Initiate culture and sensitivity testing.
- (g) Institute appropriate isolation procedures.
- (h) Institute emergency infection control measures and quality assurance studies to define a suspected or apparent problem when indicated, which are within accepted guidelines for the given situation, and worked through, where possible, with the appropriate Members and Administration.
- (i) Institute corrective actions as appropriate.
- (j) Provide epidemiologic follow-up on all quality assurance studies to identify improvement areas.
- (k) As needed, coordinate with public health agencies."

Chair: Dr. Laraine Washer