

# ON THE RECORD

A WEEKLY Q&A WITH RUTHERFORD'S MOST INFLUENTIAL



DNJ PHOTOS BY AARON THOMPSON

Dr. Andy Brown is the Vice President of Medical Affairs at Middle Tennessee Medical Center.

## Ready for MTMC move

### North sees improvement in staff, service

BY SAM STOCKARD  
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In less than six months, Middle Tennessee Medical Center will leave its longtime home on North Highland Avenue for a modern facility on Medical Center Parkway.

Dr. Andy Brown, MTMC vice president of medical affairs, sat down recently with The Daily News Journal to discuss the hospital's status as it prepares for transition.

**Q:** The hospital has grown quite a bit over the last 10 years. What would you say is the biggest change the medical staff has experienced in that time?

**Brown:** The last 10 years, I think the major change would be the growth of the medical staff. We continue to add new physicians every year. By the time we complete our credentialing process this summer, we'll probably be up over 400 physicians on the medical staff, which is a significant increase from the staff we had 10 to 15 years ago.

I also think that the addition of new services, the physicians we're bringing to Murfreesboro, we are able to provide services locally that previously patients had to go to Nashville to receive those services.

**Q:** MTMC at one time was considered more of a community-type hospital. Now, it's being seen as more of

#### Dr. Andy Brown

**Who:** Middle Tennessee Medical Center vice president of medical affairs and retired pediatrician

**Background:** Raised in Murfreesboro

**Education:** Reeves-Rogers, Central High School Class of 1969; MTSU bachelor of science degree with major in chemistry and minor in biology, 1973; master's 1975; University of Tennessee Medical School, 1978

**Career:** Residency at Bethesda Naval

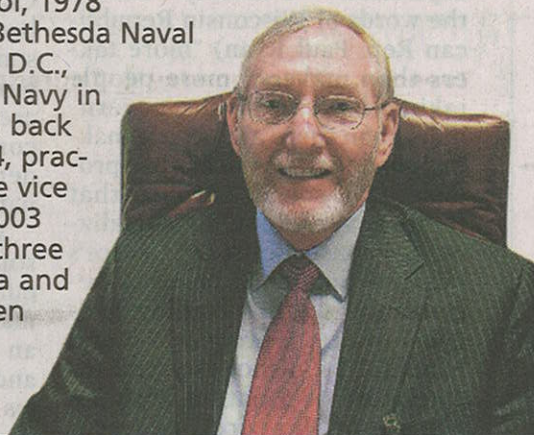
Hospital in Washington, D.C., three years of service in Navy in Jacksonville, Fla.; moved back to Murfreesboro in 1984, practiced pediatrics, full-time vice president of MTMC in 2003

**Family:** Wife, Karen; three daughters, Sally, Rebecca and Rachel; five grandchildren

**Church:** First United

Methodist

**Age:** 59



es enabled it to make that transition.

**Brown:** I think the addition of cardiology services. We are now able to do interventional cardiology in Murfreesboro where previously we had very limited capabilities for that. It's been a tremendous asset. We've strengthened our program in a lot of the sub-specialties. We've entered into agreements with some of our orthopedic surgeons, which allows us to keep most of our orthopedic cases in Murfreesboro. We're working with our general surgeons to strengthen our relationships there. From a sub-specialty standpoint, a good example would be Dr. Matt Garrett with our joint replacement program. He did a fellowship in total joint replacement and now working with the other orthopedists locally, we have a very

**Q:** Do you still see situations where people say "I'm not going to MTMC. I'm going to St. Thomas or Baptist" because they feel more comfortable or feel those might have a better reputation?

**Brown:** As a physician and as a hospital administrator, I want patients to feel comfortable with the care they receive, but we now see that much less than we did 10 or 15 years ago. I think people are beginning to realize that MTMC is becoming a regional medical center and that many of the services they previously received in Nashville can be provided in Murfreesboro.

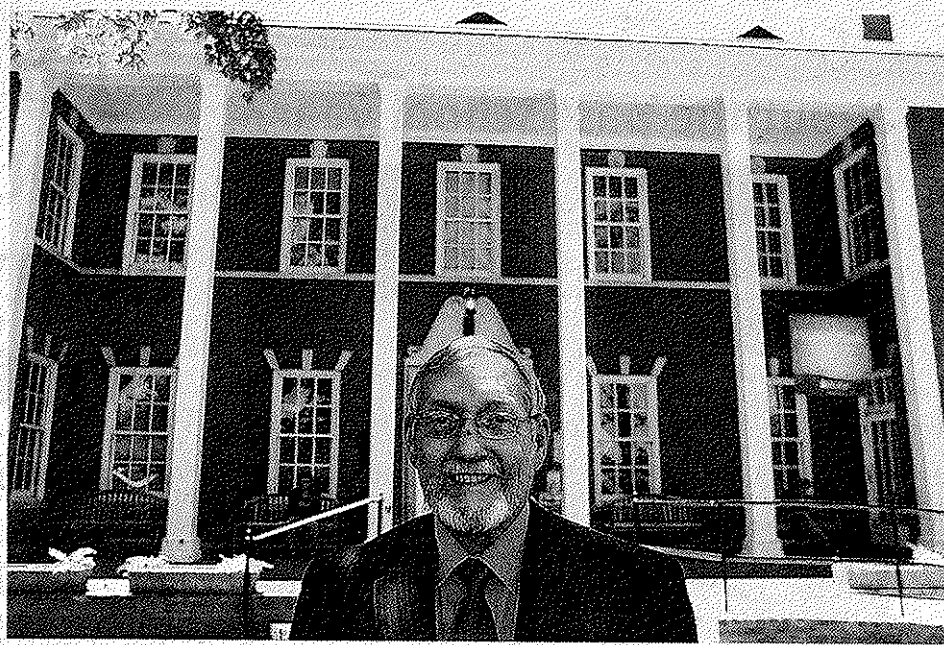
**Q:** What will be the primary difference when the staff moves to the new hospital in October?

**Brown:** The primary difference, obviously, will be the physical plant. Parts of this hospital were built in 1927. Other additions occurred in the '50s, '60s and '70s, and some additions as late as the mid-1990s. We're dealing with an old and sometimes less than desirable physical plant, but I think what patients may not be able to see quite as clearly as the physical plant are the changes in processes that we're trying to make. We're working very hard to become more efficient as a hospital. We're employing a lot of the technology that's used in industry to eliminate waste from our system and make patients more safe while they're in the hospital.

**Q:** Do you think the move to the hospital will give the hospital more instant credibility, too, in the eyes of patients?

**Brown:** I think the fact that it is a new facility and the building has been engineered, designed to be very efficient as far as patient and visitor flow will make it much easier for families to be hospitalized at MTMC. Again, I think that in addition to the physical facility, we're trying to change the way we do processes to also assist in that flow process.

**Q:** Vanderbilt hospital



AARON THOMPSON/DNJ

**Dr. Andy Brown stands in front of the soon to be vacant Medical Center off Bell Street.**

is generally regarded as one of the top hospitals in the country, especially as far as physicians being the best in their field. What's MTMC doing to develop its reputation for excellence as far as physicians?

**Brown:** We have an excellent medical staff. The medical staff at MTMC is relatively young, highly trained. We require that all of our physicians on the medical staff be either board-certified or have just completed their training and be what we call board-eligible and that they must become board-certified within five years of joining our medical staff. So all of our physicians who come on the medical staff are highly trained. ...

We are focusing on the development of the quality of the services we give at MTMC. We're a part of St. Thomas Health Services and a part of Ascension Health, which is the largest Catholic health care organization in the United States, and over the last seven years, Ascension has placed great emphasis on the quality of the services we deliver. We monitor the quality in several different areas, and at this point in time, MTMC in those quality measures, ranks better than the average Ascension hospital and Ascension hospitals overall rank better than the average hospitals across the nation. So the way we're trying to differentiate MTMC and St. Thomas

hospitals is developing the quality of the services we deliver.

I'll give you a couple of examples of that. Our wound care program recently received an award as one of the top wound care programs in the country. We have a team of individuals who start IVs in place central lines in the hospital. They've done such an outstanding job that MTMC was selected by the company that manufactures these central lines as one of seven sites across the United States to bring other individuals to learn how to place these lines. And when you think that we're only one of seven hospitals in the country that they're going to use as a teaching site, that's a

compliment to the individuals that are working with that program.

And then about a month ago, the Tennessee Hospital Association took video at MTMC talking about how we've been able to decrease our ventilator-associated pneumonias and central line infections in our critical care areas, and they will use that as a teaching video for other hospitals across Tennessee as an example of how you can improve patient safety and quality of care.

**Q:** As a retired pediatrician, do you think there are enough pediatricians in Murfreesboro to serve the growing population?

**Brown:** Murfreesboro's population has grown very rapidly in the years since I moved back to Murfreesboro. The beauty of that situation is the growth of the population has allowed us to recruit new physicians, new specialties, and really the physicians in Murfreesboro have very busy practices, so I think to a large extent, we still need more physicians in almost every specialty.

**Q:** What is MTMC's position on the federal health care reform law. I interviewed CEO Gordon Ferguson a few months back, and it was still in the works at the time. Where does the hospital stand on that now?

**Brown:** We're still trying to get more information on all aspects of the health care reform bill. It's a very complicated bill. A lot of the provisions in that bill do not take effect for three to four years, and I think we'll continue to see revisions of the bill. I think what takes effect four years from now will not necessarily be what was passed in recent legislation.

**Q:** So right now you'd don't have any idea what impact it will have on treatment?

**Brown:** Obviously, providing health care for all individuals in the United States is our mission. We provide care to all of those in need regardless of their ethnic or financial situation. I think the fact that the health care reform bill is trying to provide care to those who are without insurance or are under-insured goes very much hand in hand with the mission of this hospital and our system.

**Q:** Will the hospital change emergency room policies as a result of the new law.

**Brown:** No. We will continue to see all individuals who come to our hospital. But I really think that the health care reform bill will strengthen the ability of individuals to have insurance and have access to health care. And if individuals have access to health care and other needs, they would not need to use the emergency room as their pri-

mary means for receiving health.

**Q:** You all set aside a good chunk of money each care for charitable cases. Do you see that decreasing with this new law taking effect?

**Brown:** If all residents of the U.S. have some type of health insurance, then obviously the charity care might decrease, but I think there will always be individuals who struggle to be able to pay for their health care, and I think it's going to be interesting to see how that insurance coverage actually develops. It's going to be difficult for the government, both federal and state, to fund a program where individuals have total coverage, and I think there's going to be individual responsibility from a financial standpoint for health care. They may not have to pay all of it, but there will be co-payments and areas patients will be responsible for, and that's where we may be able to assist in the future.

**Q:** Do you see situations where people will be fined for not getting insurance?

**Brown:** That is one of the mandates of the health care reform package, that people avail themselves of insurance plans that are provided either privately or through the government. I hope we don't reach a situation where we fine individuals, but that's a possibility.

**Q:** Do you have anything else to add?

**Brown:** It's a very exciting time to be in Murfreesboro, be a part of Middle Tennessee Medical Center. As you mentioned, MTMC has provided a lot of good service over the years to our community, but I think we are in a transition phase. With our new hospital campus, I think we will be moving from a community hospital to a regional medical center. I think the quality of physicians and the quality of care they can provide is outstanding and will only improve. I think the quality of our nursing associate staff is outstanding. We've got a lot of nurses in this hospital who have been here 30 or 40 years, but we also have a large number of nurses who have just joined Middle Tennessee Medical Center and bring a lot of youth and energy that will help us develop our new hospital campus.

And I think an advantage of MTMC right now is the leadership. Gordon Ferguson is an outstanding CEO. Michael Bratton is an outstanding chief nursing officer, and I think as we move to the new hospital, that leadership, the enthusiasm of our associates, the quality of our medical staff will help individuals feel that Murfreesboro is the place they want to receive medical care.

- Sam Stockard, 615-278-5165

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Kelly King (Community Relations) will give tours on Saturday, May 22nd, during the hours of 1pm-4pm. Additional days for personal tours available upon request.

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