MINUTES
Meeting of January 30, 2002

PRESENT: Chair S. Janson, P. Loomer, M. Lynch, S. Soifer

ABSENT: D. Debas, B. Dong, S. Kayser, H. Rugo, N. Stotts

GUESTS: J. Kane, Chair, Committee on Committees; Michael Thomas, Associate Director for Strategic Development, Medical Center

Chair Susan Janson called the regular meeting of the Clinical Affairs Committee to order on January 30, 2002 at 9:10 a.m. in Room S 30. A quorum was present.

Minutes
The minutes of October 31 and November 28, 2001 were approved.

Chair’s Report

San Francisco General Hospital: The $450,000 cut to the SFGH budget has not been restored. This cut was an external cut that came from the City of San Francisco. Chair Janson has ensured that the lines of communication between the Committee and Phil Hopewell, Associate Dean for SFGH, remain open in the event that Dr. Hopewell seeks the Committee’s assistance on issues relating to this budget cut.

Nurse Practitioners at Ambulatory Care Center: As recorded in the Committee’s October 2001 minutes, the Department of Medicine reduced the number of nurse practitioners at the Ambulatory Care Center last year. There are no current plans to increase the number of nurse practitioners in the General Medicine Clinics. Chair Janson is proposing the use of nurse practitioner faculty for primary care delivery, especially because there is a current shortage of primary care providers available for UCSF faculty and staff who want to receive their care on this campus.

Medical Center Strategic Development Presentation/M. Thomas
Mike Thomas, Associate Director for Strategic Development at the Medical Center presented a draft strategic plan to the Committee. The strategic planning process began in June 2001 and is considering the entire clinical enterprise. The process has included all the chairs of clinical departments and many others from the School of Medicine. The steering committee members are:
Five task forces have been set up as offshoots of the primary committee: competitive positioning, revenue optimization, efficiency/expense optimization, service orientation and work force.

They have completed two phases of the planning process – assessing critical success factors and determining quantifiable goals. They are now in phase 3, which is determining which strategies to pursue to achieve those goals. The relevant time horizon for the strategic plan is 3-5 years. The main driver in the short term is changing the financial position of the Medical Center. The long-term goals are driven by the need to replace the hospital. The Medical Center needs to improve its financial status and overall stability in order to generate the debt capacity necessary to build a new hospital.

In addition to improving the financial performance of the Medical Center, other key goals of the strategic plan include creating additional capacity for growth of programs, advancing the position of the UCSF Children’s Hospital, improving core operating systems to enable faculty and staff to practice more efficiently, enhancing the level of customer service, and improving recruitment and retention of faculty and staff.

The Committee provided feedback to M. Thomas on the draft plan. They emphasized the need to stay focused on the academic mission in any strategic plan for the Medical Center, as the ability to project the image of an institution engaged in first class medicine in large part depends on the ability of faculty to be innovative and creative in research and clinical teaching. Moreover, the image of first class medical care is key to bringing in the market growth the strategic plan appears to seek. The Committee also pointed out the need to better market the breakthrough research and top-notch programs being done on this campus and how that makes UCSF doctors a better choice for care. The committee members also emphasized to Mr. Thomas that the academic contributions of the Schools of Nursing, Pharmacy, and Dentistry also serve to enhance the position and fame of the Medical Center.

In addition, the Committee strongly recommended that there be structured, meaningful and ongoing dialogue between the Medical Center and the faculty. The Committee noted that UCSF seems to be losing clinical and tenure-track faculty frequently because of extraordinary inefficiencies, and that regular interface with outpatient clinical faculty will add significant value to the Medical Center and the planning process.

Old Business
Covered in Chair’s report.

New Business
None.

The meeting was adjourned at 10:30 a.m. The next meeting of the Committee, scheduled for February 27, 2002 is canceled due to scheduling conflicts with a number of members. A new date will be set for early March.

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