Clinical Affairs Committee
Max Meng, MD, Chair

MINUTES
Wednesday, October 26, 2011

PRESENT: Max Meng (Chair), Barbara Burgel, Geraldine Collins-Bride, Teresa De Marco, Ruth Goldstein, Andrew Gross, Mehran Hossaini, Jeff Meadows, Phil Rosenthal

ABSENT: Betty Dong, John Feiner, Miguel Hernandez-Pampaloni, Steven Polevoi, Hope Rugo

GUEST: Seth Bokser, Member, Physicians’ Advisory Group, APeX Rollout Committee and Doug Berman, Deputy Director, ITS

The Clinical Affairs Committee (CAC) was called to order by Chair Meng on October 26, 2011 at 4:40 p.m. in room U-506. A quorum was present. Introductions were made.

Approval of Minutes from September 21, 2011 Meeting
The minutes were approved with a change to attendance.

Chair’s Report
Chair Meng went over the Finance Report given by Associate Vice Chancellor, Finance Eric Vermillion at the Academic Senate Leadership Retreat in September 2011.

Chair Meng also went over the status of the UCSF Senate Membership Task Force. The materials are currently with Legal Affairs to insure that the campus can proceed with having Adjunct and Health Sciences Clinical faculty at the Associate level or higher become part of the Academic Senate.

Separately, CAC Member Collins-McBride said she had a SF-based patient who is now with the San Francisco Health Plan (a SF-specific Medicare plan). The patient was told by UCSF that it isn’t taking any new SF Health Plan patients; however, because this particular patient was a pre-existing UCSF-patient, she could still have appointments scheduled. This question will be raised to Margaret Martin when she visits the Clinical Affairs Committee in November 2011.

Members raised the impending issue of the Health Accountability Plan. This is currently being addressed by upper-level administration and management, such that its implementation at UCSF won’t run the Medical Center or campus into the ground. It is still in the exploratory stage.

APeX Rollout & Its Impact on the Research Initiative – Seth Bokser, Member, Physician’s Advisory Group, APeX Rollout Committee and Doug Berman, Deputy Director, ITS
Seth Bokser went over the APeX rollout scheduling. Accomplished in waves, they have completed Waves 1 and 2. Wave 3 will be starting November 16 with another wave rolling out in 2012. For full information, please see the attached PowerPoint.
The UCSF MyChart—which will allow patients to view upcoming/past visits, test results, request appointments, medication refills, and message non-urgent requests to providers—currently has 8,806 patients (as of 10.24.11). This is nearly a 5,000 increase in patient volume since July 2011.

This mobile platform will allow providers to connect via iPad/iPhone. There is currently a pilot project with twenty providers which is ongoing through December 2011. It is not enabling Dictation at UCSF.

**Ongoing APeX Ambulatory Training**
Faculty are being encouraged to use Dragon for dictation purposes. There are currently 400 users of this system. There are three hours of classroom training support. The Medical Center pays for software licensing, set-up, maintenance of voice-profile, and training. Departments pay for microphones.

Separately, there are ongoing APeX trainings in “Lunch & Learns”. These weekly lunches/conference calls focus on specific topics, such as ePrescribing.

There are also “Ambulatory 300” in-classroom brush-up trainings available. Providers can sign-up for them at the [https://learningcenter.ucsfmedicalcenter.org](https://learningcenter.ucsfmedicalcenter.org)

**APeX and Research**
Doug Berman, Deputy Director, ITS provided an overview for how the implementation of APeX will impact the other research-related databases pre-existing at UCSF.

APeX is not intended to duplicate or complicate any such system. A campuswide survey was conducted for SOM that revealed 197 systems. Of those, with the implementation of APeX:

1. Eleven duplicate systems were removed
2. Thirteen were added
3. For those systems that were replaced by APeX, an implementation team will work with faculty and staff to convert. Most systems will be absorbed in some way by APeX.

CAC members asked about how to differentiate data that is strictly clinical vs. data that would be included in the clinical survey data. Vice Chair Rosenthal also asked about how to blind-out the patients’ names if they’re included in such a survey? Doug Berman said that latter is still being developed and will be handled.

The APeX Research team is exploring compliance with the policies of the Clinical & Translational Science Institute, Institutional Review Board, Committee on Human Research and other such UCSF policies, and will continue to do so in years to come.

All the data will be fed into the Integrated Data Repository (IDR) and MyResearch. Since nearly all UC campuses (except Irvine) are now using APeX, there is a new program being developed to integrate research throughout the UC system. This initiative (UC Rex) will allow researchers from one campus to query information from across the different campuses.

**Reports from the Schools**
**Medicine**
The Faculty Council examined the relationship between the VAMC and the UCSF Medical Center. It also heard a presentation on the proposed changes to the APM 670 and its impact day-to-day on faculty.

**Nursing**
The School is examining cross-campus coursework such that it’s not duplicating efforts. The Dean is also exploring creating a Nursing-led evening practice in the Ambulatory Care division. A business model is being developed with David Morgan, Executive Director, Ambulatory Services, UCSF Medical Center, and SON Dean Vlahov.
Dentistry
No representative present.

Pharmacy
No representative present.

Old Business
None.

New Business
None.

Chair Meng adjourned the meeting at 6:00p.m.

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