



Committee on Clinical Affairs

Annual Report 2002-2003

Scott Soifer, M.D.
Chair

The Clinical Affairs Committee (CAC) met seven times over the course of the 2002-2003 academic year. The Committee focused much of its work on four issues: planning for the move of various practices to Mt. Zion, information technology including the computerized physician order entry system, ways of improving faculty input into planning processes that impact clinicians, and the impact of the reduction in residency hours. Committee activities included the following:

- Ongoing dialogue with the UCSF Medical Center Administration, including reports on planning and budget
- Discussion of the Physician Services Agreement
- Discussion of Clinical Information Systems, including Computerized Physician Order Entry systems
- Discussion of the impact on UCSF of federally mandated reductions in work hours for residents

Dialogue with Medical Center Administration on Budget and Planning Issues

Strategic Development Plan for Mt. Zion

Continuing last year's dialogue between the Committee and UCSF Medical Center administration, late in 2002, Chair Soifer met with Mike Thomas, Associate Director for Strategic Development at the UCSF Medical Center, regarding the status of the plan for expansion of services at Mt. Zion. Mr. Thomas also made a presentation to the Committee at its February 26, 2003 meeting on strategic planning issues relating to Mt. Zion. M. Thomas distributed and reviewed with the Committee a draft Strategic Plan (Draft Plan). ([Appendix 1](#)) The plan was to organize clinical programs and support systems to enable most of the cancer surgical practices to move to Mt. Zion in phases. One goal of the relocation is to allow practices to grow. Topics covered in the presentation included a discussion of which practices would be moving, increasing ancillary services at Mt. Zion, the preoperative program and nursing staff needs, and the need to generate increased revenue from operations to subsidize losses attributable to Medi-Cal patients.

The Committee raised the issue of parking problems at Mt. Zion. The total number of parking spaces at Mt. Zion is being assessed, and it is anticipated that the demand for



parking will continue to grow. The Committee discussed several other issues and suggestions with M. Thomas, including:

- The concern that faculty has not been sufficiently consulted for input into the planning for Mt. Zion. M. Thomas indicated that his Office met with department chairs in developing the plan.
- The concern that some departments are already under-staffed, and that moving to Mt. Zion could make this problem worse.
- The use of space at other facilities, such as CPMC or St. Mary's, as an alternative for providing care to lower-paying patients.
- The possibility of a commitment for funding for faculty members to share the workload.
- The possibility of free parking for faculty as an incentive.

The Committee has worked on ways of identifying faculty needs, and sharing that information with the UCSF Medical Center, with the goal of helping to ensure success for the planned relocation of certain clinical practices to Mt. Zion. The Committee worked with M. Thomas and Mark Laret, Chief Executive Officer of the UCSF Medical Center to devise a mechanism to request clinical faculty for ongoing input.

Medical Center Budget Issues

The Committee had on-going discussions regarding the status of the Medical Center budget with UCSF Medical Center CEO and Committee member Mark Laret. While the Medical Center achieved a record census in some months, CEO Laret indicated that cost increases in many areas, including health insurance, drug, and blood unit costs, as well as costs associated with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the reduction in resident hours, and the Mt. Zion relocation project could potentially affect profitability if revenue does not substantially increase.

Issues Relating to Quality of Service

The Committee discussed with M. Laret issues of concern relating to the quality of service at UCSF Outpatient Clinics and hospitals. Concerns raised included: long patient waiting times for some services, high rate at which patient appointments are canceled by Medical Center faculty and staff, staffing and infrastructure issues, interdisciplinary practice and patient groups, permanent nursing staff shortages at UCSF and the suggestion that patient waiting times might be reduced by initiating pre-registration for patients.

Discussion of Clinical Practice Organization/Physician Services Agreement

Neal Cohen, Assistant Dean, School of Medicine, made a presentation to the Committee regarding the Physician Services Agreement connected with the Clinical Practice Organization, which included an overview of the UCSF Medical Group and the UCSF



Medical Center relationship with the Brown and Toland Medical Group. The Committee raised the following concerns:

- Brown and Toland's compensation rates for UCSF physicians are not consistent with the compensation rates for other managed care programs. N. Cohen explained that three members of the Brown and Toland board of directors are from UCSF, which has the potential to lead to an improvement of this situation, although the challenges of reduced reimbursement for managed care will remain a problem for all departments. If compensation for managed care does not improve, UCSF will have to determine if it is appropriate to continue to participate in managed care programs. Any change will have to take into account the ability to care for UCSF staff and faculty.
- The impact on UCSF Clinical faculty of low compensation rates from medical groups as it relates to the unique role of UCSF in providing medical services to the community
- Concern about the impact on UC's ability to provide treatment for non-paying overflow patients
- Ability to provide treatment to referrals from private physicians in the Bay Area.
- Increased transparency and/or better understanding of contract negotiations and processes in order to allow more input from UCSF department chairs and faculty.

The Committee was advised that the development of a new funds flow model between the departments and the Medical Center is underway. The new model will be developed to ensure that goals of departments and the Medical Center are aligned and that the funds flow allows departments to assist the Medical Center in fulfilling its strategic goals.

Discussion of Clinical Information Systems, including Computerized Physician Order Entry

The Committee invited Larry Lotenero, Chief Information Officer at the UCSF Medical Center, to give a presentation relating to the planned implementation of an electronic medical records system (EMR) and a Computerized Physician Order Entry system (CPOE). Some of the issues addressed included:

- The version of the IDX system which has been selected, and an implementation schedule;
- Faculty concerns about CPOE, including order entry time and procedures, charting, work distribution, practice management, increased faculty overload and time management;
- Cost of the system including implementation, addition of new staff, and potential benefits;
- The need for faculty input including in-patient, out-patient and nursing perspectives, and converting the School of Pharmacy to a new system;
- Use by the Emergency Department of new wireless equipment for triage;
- Formation of an ITS Committee and CIS Committees



The Committee raised additional concerns about CPOE at UCSF, including the potential that CPOE could increase the time needed to enter information. It was noted that an updated computerized system was implemented at the VA with considerable success. Order entry time increased at the outset, but the increase was eliminated over time. The Committee also discussed a process for identifying faculty who would be interested in serving on clinical information system advisory teams. The Committee will work with the Divisional Committee on Committees to identify appropriate faculty for this appointment.

Discussion of the Impact on UCSF of Federally Mandated Reductions in Work Hours for Residents

Government-mandated reductions in the number of hours Residents may work went into effect in July 2003. Departments have responded to this issue in a variety of ways. The Committee sought information from the Office of Graduate Medical Education (GME) about plans for implementing changes in residents' hours. Specifically, the Committee was concerned about increasing workloads for clinical faculty at UCSF as a result of the mandated reductions in hours, and sent a letter to Dr. Susan Wall, Senior Associate Dean, Graduate Medical Education expressing its concerns. ([Appendix 2](#))

Issues for the 2001-02 Academic Year

Suggested new or continuing topics for next year:

- Continue dialogue with UCSF Medical Center administration, regarding mechanisms for faculty input on the Mt. Zion relocation project
- Monitor status of impact on faculty related to practice relocation to Mt. Zion
- Identify and implement mechanism for increasing faculty input into the decision-making process for all clinical operations.
- Create mechanisms to increase representation of concerns from all Schools.
- Develop and implement protocols for regular coordination with Committee on Academic Planning & Budget (APB) on matters related to the Medical Center planning and budget process, including regular presentations by the Medical Center's Chief Financial Officer
- Follow-up on the new funds flow model between the departments and the Medical Center
- Follow-up on faculty participation on clinical information system teams
- Follow-up on the impact of reduced working hours for residents

Respectfully submitted,

Committee on Clinical Affairs

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APPENDICES

- [Appendix 1](#): Draft Mount Zion Cancer Surgery Relocation (2/03)
- [Appendix 2](#): Letter from Clinical Affairs Committee to Dr. Susan Wall Regarding the Impact of Reduction in Residency Hours on Clinical Faculty (3/31/03)