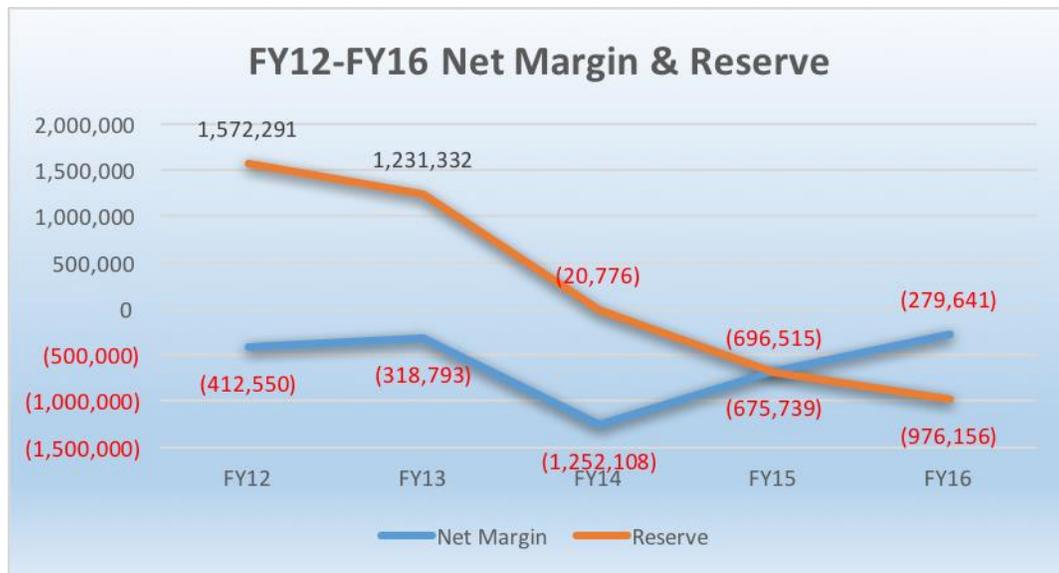


Annual report – OB-GYN FY16

Overview: 2015-16 has seen additional transition in the Department of OB-GYN, with both progress and challenges. We have made great progress towards financial sustainability this year; although we will finish the year in deficit, it is considerably smaller than last year and break-even is in sight. Although financial sustainability may not seem the most inspirational goal, it is critical to our ability to create the academic programs that were our inspiration for pursuing a career in academic medicine. I would like to thank each and every one of you for your contributions to the Department’s financial improvement.

Clinical revenue remains the main source of departmental support. We ended FY16 with \$18.2M in charges and \$7.0M in collections, representing a collection rate of about 38%. Charges and collections are down 10.1% and 9.6% respectively from FY15, reflecting the transition in faculty, but salary costs were down as well, given the smaller number of faculty; hence our improved net margin. We saw additional reductions in collections due to the dissolution of the department’s relationship with NM Sonographics. As we rebuild our outreach program and recruit new faculty, we anticipate clinical revenue to improve. We will finish FY16 at a deficit of approximately \$280,000. We are still making efforts to collect monies owed related to Outreach and UH salary agreements. If successful, that additional revenue would put us near break-even. While we did receive additional assistance from the SOM Dean’s office this year, the department is ending the year with great improvement in financial sustainability. Much of this can be attributed to the productive work of faculty in clinic, streamlining staffing through efficiency efforts and attrition, and improved accounting measures on the administrative side.



The blue line shows our ending balance for each fiscal year; a negative amount indicates that we spent more than we earned. The orange line shows our Reserves (1.5 million in FY12) or Positive Earnings Balance has been declining and is now in Deficit (976,156). To reduce the deficit, we must earn more than we spend.

Major overall accomplishments for the year include the recent creation of a stable and functional departmental administrative infrastructure that will assist with determining opportunities for balancing the budget in FY17. Other accomplishments are an improvement in research infrastructure and Divisional support for research with Seligman grants, initiation of a structured systems-focused M&M conference and standardization of prenatal care, and initiation of a Departmental Alumni Society. Major challenges this year include the rapid initiation of UNM Perinatal Outreach and faculty personnel shifts. Personnel shift creates uncertainty and/or demoralization of residents/faculty, which may be reflected in the ACGME survey. This year has also seen faculty uncertainty given the Regents-initiated governance shifts between the HSC and main campus. The planning of the Replacement Hospital and how/where Women's Services fits in, either at the replacement hospital or the BBRP, will be a main objective of the coming year. I have worked to respond to the 360 critiques of last year, having more patience, staying focused on a smaller number of goals and allowing faculty members/divisional leaders autonomy in decision-making and being an effective listener. I appreciate our great OB-GYN team and the efforts of all team members to deliver outstanding patient-centered care.

Below are the progress and challenges we have faced in a number of our Departmental missions. A separate section (Appendix A) outlines the personnel changes—departures, retirements and hires over the last year. Thank you again for your work to serve patients and to fulfill the academic mission of the Department and the institution.

PROGRESS

Administration

- Executive Committee held a retreat this year to focus on group cohesion and how best to support the Department. Two work groups were formed
 - o Clinical transitions – quality initiative to improve hand-offs as residents move through rotations
 - o Faculty satisfaction – Faculty mentoring initiative and work-life balance
- Cross-Divisional Faculty workgroup is developing an Incentive Compensation Plan for the Department
- Created awards program for administrative staff to show appreciation for their work
- Finalizing MOU with Cancer Center to move administrative center to Cancer Center
- Ongoing planning for Children and Women's Service Line with the Department of Pediatrics
- Initial planning for Adult Replacement Hospital and place of Women's Services within the model of an Adult and a Children's Hospital
- Successful dyad formation with new Nurse Administrators on the hospital side in Ambulatory (Gwendy + Dr. Swanson), L&D (Amanda + Dr. Phelan, now Dr. Gordon) and Antepartum/postpartum (Diana/Jeff and Dr. Gordon/Leeman)

- Improvement in Departmental processes: P&T with Dr. Muller's leadership working with Sam our FSR, OPPE/FPPE with Dr. Phelan's leadership working with Cheryl on OPPE/FPPE.
- Participation in the Studer Group efforts to improve physician engagement

Clinical

- Successful prenatal care standardization project, a multi-disciplinary and departmental effort to improve prenatal care
- Development and implementation of nitrous oxide for analgesia in labor and gentle cesarean section for scheduled repeat sections
- Eubank planning–successful cross-Division planning effort
- Improved ability to determine clinical productivity/billing/collections by provider and by Division.
- Initiated our UNM mobile MFM outreach consult/ultrasound unit, a major focus and use of departmental resources
- Stable clinic and delivery volumes, particularly in light of reduced clinical FTE with faculty departures
- Creation of a phone pod in WHC and hire of Gwendy Beer as Unit Director of Ambulatory.
- Apprentice model for attending clinics, with an emphasis on patient-centered care and resident education
- Participation in the Surgical Directions initiatives to improve efficiencies and quality of care in the OR.

Education

- Created successful partnership with reproductive endocrinology and infertility with private practice physicians for resident education
- Strong programs in residency and medical student education. Overhaul of resident retreat/goal setting feedback to residency
- Adopted new format for M&M conference based on systems issues identification and improvement, including Department providers and medical students
- Initiated development of a simulation curriculum including all Divisions, for resident education
- Initiated a “4th year medical student career advisement director” position to assist our interested students in improving their ability to match

Research

- Seligman funds were made available to all Divisions for research through an application process. Faculty were mentored through the process of generating their grant application paperwork and there was a formal administrative review of proposals.
- Several seasoned and junior researchers received mentoring as they submitted grants this year.
- Continued to work in the area of resident research tracking project progress and creating infrastructure.
- Developed a process for reviewing department HRPO submissions.

- Worked with multiple faculty, fellow and residents to generate research ideas and explore funding opportunities.

Quality

- All obstetric providers completed standardized FHRT training
- 100% review of severe maternal morbidity (Transfusion x 4 units, ICU admission)
- OB Triage Rapid Improvement Event – multidisciplinary effort to decrease wait times, improve quality and enhance the patient experience in OB Triage

Community engagement

- Inaugural event establishing the UNM OB-GYN Alumni Society
- Progress in the New Mexico Perinatal Collaborative with involvement of several departmental faculty members – 50K external grant obtained to promote immediate postpartum LARC throughout the state and additional grant monies to improve treatment of neonates with NAS.

CHALLENGES

- Loss of key faculty: Gynecology, MFM, and difficulty in recruiting MFM, Gyn Onc.
- Lack of adequate data analytics and practice management: Improving but remains inadequate
- Lack of a true incentive plan – See above: Departmental committee is working on an incentive plan – shadow and implement FY18
- Need for departmental administrative unit with competence in financial management and clinical practice support – we are fortunate to have newly hired a Department Administrator and high level Accountant
- Need for training, alignment and ongoing accountability of administrative staff – improving
- Need for alignment and engagement of hospital/HSC leadership in supporting department level initiatives
- Resident and faculty critique of the residency program – our ACGME survey this year shows decreased satisfaction with the program, an issue that we will direct attention and resources to.
- MFM fellowship on probation; this is a major area of focus for improvement and resources.

Self-evaluation

My major areas of focus this year have been:

- Faculty recruitment
- Developing/defining administrative leadership roles in the Department
- Launch of the mobile MFM ultrasound unit
- Eubank planning
- Building expertise and infrastructure within the administrative team to optimally support faculty
 - Developing staff into content area experts
 - Creating internal operating processes to streamline operations

- Faculty Hiring
- Promotion and Tenure
- Staff hiring
- Departmental purchasing
- Building an administrative team capable of tackling challenges as they arise.

This year, with a more stable administrative structure and faculty recruitments, I have begun to shift focus from one solely on process towards outcomes. I have aimed to promote faculty in their leadership roles and have worked to be responsive to the 360 feedback last year to reduce the number of goals and see them through to fruition as well as to promote faculty autonomy. I'd like to increase the emphasis on outcomes in the coming year and have developed the goals below. I continue to strive to be collaborative at the institutional level. This has paid off in inter-departmental goodwill and outcomes including improved NICU access and a higher profile for women/children's service line planning and OB-GYN departmental needs.

OB-GYN GOALS for FY17

Chair goals for the department

- Develop a departmental strategic plan
- Continue the excellent progress we've made toward financial sustainability
- Launch a marketing plan for UNM Women's Care
- Open Eubank – UNM Women's Care
- Plan Women's Services in the BBRP/Replacement hospital
- Improve ease of practice in clinic and continue to work on friendly, available patient access
- Create standardized financial reports to share with Division Chiefs and faculty
- Complete incentive plan and use to shadow for the coming year
- Initiate a formalized junior faculty mentoring program
- Improve departmental integrated program on Quality and Safety
- Operationalize the Exec Committee's plans for "Clinical Transitions" and for "Faculty Satisfaction"

Education goals

- **Resident goals**
 - Restructure Intern Orientation to meet all ACGME Level 1 Milestones
 - Implement new Wellness Curriculum with support of Liz Lawrence and study the effect upon rates of burn-out in our residency program
 - Implement new resident evaluation system—myTips report

- Improve curricular content of rotations—especially Labor & Delivery and Gynecology rotations
- Protect Educational time on Friday afternoons by implementing new Pager System
- Implement new Quality and Safety Curriculum with goal of starting project that could report back to residents on “personal practice habits” (ACGME requirement).
- Listen to the concerns of residents and faculty. Establish new pathway for conflict management and resolution.

- **Medical student goals**

- Develop SOPs and rotation templates to ease transition for clerkship coordinators and staff in the future.
- Improve all sub-I's experience and preparation for their rotations, meet with sub-I's during their rotations, especially visiting sub-Is to improve recruitment of visiting sub-Is.
- Work with 4th year Medical Student Director to improve recruiting and assistance to UNM 4th year medical students entering Ob/Gyn.
- Develop a new format for obtaining feedback for medical students during their rotation.
- Timely entering of grades
- For LCME preparation, determine how to document that each student doing one history and physical exam.
- Utilize specialized communication skills for residents and medical students with challenges
- Ensure a high quality educational experience for Phase II students despite a higher number of students per block (18-20)

Research Goals

- Administer Seligman funds, and ensure that projects adhere to regulatory requirements and fulfill specific aims
- Generate at least 3 grant applications for intra or extra mural funding
- Update research website
- Provide guidance to the GME office at UNM on how to mentor residents/fellows in effective research programs
- Maintain current research funding within the Department

Division Goals for FY17

Gynecology

- Create and integrate a Labor and Delivery curriculum.

- Create a formal orientation for the resident Gynecology rotation, including implementation of an updated learning curriculum and formalized feedback sessions.
- Integrate the “myTIPreport” app to allow more immediate feedback for each resident for each clinical session supervised.

Gyn Oncology

- Integrate new faculty member – Dr. Elizabeth Lokich who will start Nov 1, 2015
- Evaluate additional outreach opportunities
- Evaluate opportunities for Pres based relationship with Dr. Karen Finkelstein including a partnership for fellowship training
- Launch Women’s Center Opening - associated with large marketing campaign
- Scientific collaboration for multi-PI ovarian cancer grant

Midwifery

- Restart Centering Pregnancy prenatal groups (at Eubank)
- Identify and make progress on midwifery research project
- Apply for AWHONN grant to support midwifery project

Maternal-Fetal-Medicine

- Recruit at least two additional MFM physicians
- Establish permanent outreach site(s)
- Restore ultrasound unit AIUM accreditation and achieve fetal echo accreditation
- Restore fellowship status with ACGME
- Open Eubank perinatology clinic operation with “medical spa” focus and develop coordination with UNM high risk clinic and ultrasound

Family Planning

- Launch a pilot Reproductive Health ECHO clinic.
- Organize and conduct a division retreat.
- Initiate and supervise the creation of at least 3 SOPs for the division.
- Create specific administrative processes for the division of family planning.

Urogynecology

- Transition fully to dynamic documentation with standardized templates
- Assure accurate billing and documentation practices within the Division to be compliant with ICD-10 regulations
- Ensure uniformity of care across clinical sites and that clinic templates are uniformly used across sites
- Update clinic questionnaires and handouts
- Review the four posted SOPs and write 3 additional SOPs
- Continue to expand surgical cases at SRMC to 200/year