

**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS**

**Meeting of the Health System Board
for the University of Virginia
Health System**

December 8, 2022

HEALTH SYSTEM BOARD

Thursday, December 8, 2022

8:30 a.m. – 12:15 p.m.

Pavilion Ballroom, Boar's Head Resort

Committee Members:

Babur B. Lateef, M.D., Chair
Robert M. Blue
Whittington W. Clement
Stephen P. Long, M.D.

James B. Murray Jr.
James V. Reyes
Douglas D. Wetmore
Arturo P. Saavedra, M.D., Faculty
Consulting Member

Public Members:

Kenneth B. Botsford, M.D., Vice Chair
William G. Crutchfield Jr.
Steven Danziger

Victoria D. Harker
Thomas A. Scully

Ex Officio Members:

James E. Ryan
Ian B. Baucom
Marianne Baernholdt
Jennifer Wagner Davis

Wendy M. Horton, Pharm.D.
K. Craig Kent, M.D.
Melina R. Kibbe, M.D.
Margaret C. Tracci, M.D.

AGENDA

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V. CLOSED SESSION

- Discussion of proprietary, business-related information about the operations of the Medical Center, the School of Medicine, and the School of Nursing, where disclosure at this time would adversely affect the competitive position of the Medical Center, the School of Medicine, or the School of Nursing, specifically:
 - Strategic personnel recruitment and retention, financial, investment, facility needs, market considerations, growth initiatives, partnerships, and other resource considerations and efforts in light of market and regulatory changes for the Health System and expected impact for FY 2023, all of which further the strategic initiatives of the Medical Center, the School of Medicine, and the School of Nursing and include employee performance and other proprietary metrics;
 - Confidential information and data related to the adequacy and quality of professional services, competency, and qualifications for professional staff privileges, and patient safety in clinical care, to improve patient care for the Medical Center;
 - Consultation with legal counsel regarding compliance with relevant federal and state legal requirements and legislative and accreditation standards, all of which will involve proprietary business information and evaluation of the performance of specific personnel.
 - The relevant exemptions to the Virginia Freedom of Information Act authorizing the discussion and consultation described above are provided for in Sections 2.2-3711(A)(1), (6), (8), and (22) of the Code of Virginia. The meeting of the Health System Board is further privileged under Section 8.01-581.17 of the Code of Virginia.

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**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY**

BOARD MEETING: December 8, 2022

COMMITTEE: Health System Board

AGENDA ITEM: I.A. Opening Remarks from the Chair

ACTION REQUIRED: None

BACKGROUND: The Committee Chair, Dr. Lateef, will welcome new board members and guests and provide opening remarks.

**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY**

BOARD MEETING: December 8, 2022

COMMITTEE: Health System Board

AGENDA ITEM: I.B. Opening Remarks from the Executive Vice President for Health Affairs

ACTION REQUIRED: None

BACKGROUND: On February 1, 2020, Dr. Kent became the Executive Vice President for Health Affairs. Dr. Kent has held several leadership positions, including chief of the combined Division of Vascular Surgery at Columbia and Cornell, chair of the Department of Surgery at the University of Wisconsin, and most recently, Dean of the College of Medicine at The Ohio State University. His background includes substantial experience in growing clinical, research, and educational programs as well as health system management. He is a member of the National Academy of Medicine.

DISCUSSION: The Executive Vice President for Health Affairs will provide opening remarks.

**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY**

BOARD MEETING: December 8, 2022

COMMITTEE: Health System Board

AGENDA ITEM: I.C. Leadership Academy

ACTION REQUIRED: None

BACKGROUND: C. Michael Valentine, MD, MACC, is a general cardiologist and professor of medicine at UVA who has been caring for patients in Central Virginia for more than 30 years. He specializes in cardiac electrophysiology or the heart's electrical activity, cardiac catheterization and intervention, arrhythmias, and implantable cardiac devices.

A past-president of the American College of Cardiology, Dr. Valentine is a dedicated educator and enjoys teaching the non-clinical competencies needed to provide well-rounded, comprehensive care. Also, he has a particular interest in leadership development, clinical quality, and service line management.

Dr. Valentine grew up in Georgia and received his undergraduate degree from the University of Georgia in Athens, Georgia, before attending medical school at UVA. He did his residency and fellowship training in cardiovascular disease at Emory University in Atlanta but was eager to return to Central Virginia. He moved to Lynchburg in 1990 to be part of a growing private practice, where he remained until he joined the team at UVA in 2020.

DISCUSSION: Dr. Valentine will provide a report on UVA Health's new leadership academy, which is one of the initiatives identified in the UVA Health Strategic Plan.

**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY**

BOARD MEETING: December 8, 2022

COMMITTEE: Health System Board

AGENDA ITEM: I.D. Graduate Medical Education Report

ACTION REQUIRED: None

BACKGROUND: At the University of Virginia Medical Center (UVAMC), Graduate Medical Education (GME) encompasses a wide range of post-graduate training in health care fields. Although most of this training occurs in specialty programs that further the knowledge and expertise of physicians, UVAMC also provides residency and fellowship training in dentistry, pharmacy, chaplaincy, medical physics, clinical chemistry, laboratory genetics, clinical psychology, and physical therapy. GME at UVAMC remains highly regarded and matching into our programs is very competitive. It is part of UVAMC’s mission and strategy to train professionals who serve as key components of the healthcare workforce and will become its leaders in the future. It is UVAMC’s duty to educate them to provide safe, high quality patient care, to recognize and attempt to address healthcare disparities, and to encourage them to carry their skills, and a sense of professionalism and humanism, with them beyond their residencies and fellowships.

At UVAMC, oversight of our GME programs is performed by the Designated Institutional Official (DIO) and Associate Dean of GME, in conjunction with the institution’s GME Committee (GMEC), an advisory committee to the Clinical Staff Executive Committee. Dr. Susan E. Kirk has been the DIO and chair of the GMEC at UVA since April 2006. She also holds a joint appointment as an Associate Professor in Medicine and Obstetrics and Gynecology. She is a graduate of Douglass College and Rutgers Medical School. She completed her internship and residency, and was chief resident in Internal Medicine, at the University of North Carolina Chapel Hill. At the University of Virginia, she completed a fellowship and is currently board certified in the subspecialty of Endocrinology and Metabolism. Dr. Kirk served as a member of the Institutional Review Committee (IRC) of the Accreditation Council for Graduate Medical Education (ACGME) from 2013-2020, including as its chair for her final three years. In September, she was honored by the ACGME with the Parker Palmer Courage to Lead award, given annually to DIOs who have demonstrated excellence at their sponsoring institution. Dr. Kirk is assisted in her role by a staff of five members of the Graduate Medical Education Office, led by Director Diane Farineau, MS, and by Dr. Bradley Kesser, who serves in the role of Associate DIO and Assistant Dean for Graduate Medical Education.

The GMEC meets monthly to review and approve all aspects of GME and is comprised of the DIO (Chair), Associate DIO, representative physician program directors, the Chief Quality Officer or her designee, GME administrators, and four peer-selected

residents, who also serve as the Housestaff Council Co-presidents or co-chairs of the Housestaff Council for Diversity and Inclusion. Additional voting members include a non-physician program director, and the chairs of its subcommittees, which include Education, Policy, Stipends and Benefits, Clinical and Educational Work Hours Oversight (also known as 'Duty Hours') and Annual Oversight (accreditation). The GMEC also provides an annual report to the Clinical Staff Executive Committee. An important activity is its annual auditing of each program with an Annual Program Review. Programs that are found to be underperforming undergo a Special Review. During the past 12 months, leadership conducted Special Reviews of ten programs: Anesthesiology, Anesthesiology Critical Care, Emergency Medicine, Micrographic Surgery Dermatologic Oncology, Neonatology, Nephrology, Obstetrics and Gynecology, Pathology, Psychiatry, and Rheumatology. The most common reason for underperformance was a negative trend on the ACGME's annual anonymous survey (Figure 1 – Appendix A).

The 2021-22 academic year meant a return to mostly normal operations for all of training programs, except for recruitment, which remained largely virtual. During the past year, UVAMC sponsored 820 residents and fellows in 118 active specialty and sub-specialty training programs. All programs remain in good standing with continued or initial accreditation status, except for Micrographic Surgery Dermatologic Oncology which has a status of Initial Accreditation with Warning. No programs are on Probation. These include programs accredited by the ACGME, additional fellowships that are non-accredited or accredited by other than the ACGME; one American Dental Association-accredited Dentistry program; and seven paramedical programs in Chaplaincy, Clinical Chemistry and Laboratory Medicine, Laboratory Genetics and Genomics, Clinical Psychology, Pharmacy, Therapeutic Medical Physics, and Physical Therapy.

DISCUSSION:

Accreditation Status

ACGME-Accredited Training Programs

Accreditation of individual GME programs and the institution is provided largely by the ACGME. The following provides a summary of accreditation actions:

1. The institution remains fully accredited and has no citations, areas for improvement or concerning trends. Its first institutional self-study was submitted in September 2021 and its next accreditation visit is expected in September 2023. Our last Clinical Learning Environment Review (CLER) site visit was carried out in October 2019.
2. All residency and fellowship programs as well as the institution, are reviewed yearly by the ACGME through a peer-review process carried out by 26 specialty-specific national Review Committees. The Review Committees focus on the following elements for training programs:
 - Resident performance, including board pass rate
 - Faculty development and scholarly activity
 - Documented program improvement

- Adherence to requirements such as clinical and educational work hours
- Achievement of competency milestones
- Compliance as documented by Resident and Faculty Anonymous Survey results

All programs received a Letter of Notification from their Review Committee early in 2022. A summary of accreditation decisions includes the following:

- 78 programs have Continued Accreditation
- None has Continued with Warning
- None has Probation
- One program has voluntarily withdrawn as a planned sunseting of the program (Plastic Surgery- Independent)
- Three programs have Initial accreditation (Interventional Radiology- Integrated; Interventional Radiology – Independent; and Pediatric Radiology)
- One program has Initial accreditation with Warning (see below)

Citations for programs with Continued Accreditation are summarized here and detailed in Table 1:

- 65 programs (79.3%) have zero citations and zero concerning trends
- Nine programs (11.0%) have zero citations, but one or more concerning trends
- Two programs (2.4%) have a new or extended citations, but no concerning trends
- Six programs (7.3%) have new or extended citations and one or more concerning trends
- The most frequent citation given was violations of the clinical and educational work hour rules including 80-hourper week, maximum duty period length, and one in seven days free.

Of the programs with Initial Accreditation:

- Two programs have no citations, but one or more concerning trends
- One program has a citation, but no concerning trends

Micrographic Surgery Dermatologic Oncology has Initial Accreditation with Warning. They are scheduled to have a site visit in January 2023. Most of their citations are administrative in nature, including how the program’s curriculum is arranged or how evaluations are performed. Corrective action has been taken for all citations.

Annual ACGME Anonymous Survey of Residents and Faculty

Each year the ACGME anonymously surveys all residents and fellows in accredited programs as well as their core faculty. The surveys are used to validate the mandatory

information that programs and institutions annually submit to the ACGME. Any variances generally lead to an audit by the ACGME and may impact a program's accreditation status.

Internally, the Annual Oversight Committee of the GMEC closely monitors both the aggregated and individual program results of UVA's trainees and faculty. Review of our year-over-year institutional performance demonstrated little change compared to previous years as the institution remains above the national mean (see Figures 1 (Appendix A) and 2 (Appendix B) for resident and faculty data, respectively), however, individual program results were more variable. Those with negative trends underwent a Special Review by the GMEC and action plans and monitoring have been implemented.

National Match

Twenty-three residency programs, offering 164 positions in 32 different tracks, participated in the 2022 Residency Match. Of special note, all but two programs obtained one or more of their top 20 ranked applicants. Furthermore, 32 (20%) of the matched applicants were graduates of UVA School of Medicine, and an additional 15 (9%) were from other Commonwealth of Virginia medical schools. Thanks to a concerted effort by the programs, our Housestaff Council for Diversity and Inclusion, and GME to recruit Under-Represented Minority (URM) applicants, UVA had a notable increase in matched URM students this year (18.9% compared to 16.5% in 2021). Our residency programs were very attractive to medical schools around the country, matching students from 30 states, and Puerto Rico. Eight international medical graduates were matched from Bahrain, Bolivia, Italy, Lebanon, Russia, Saint Maarten, Saint Kitts, and Nevis.

Finance

The total direct budget for GME programs for fiscal year 2022 was \$63,601,583. Funds to support this program came primarily from Medicare, Medicaid, and other government agencies (such as the NIH or branches of the military) industry sources, as well as UVAMC.

In addition to continuing to fund programs to support educational endeavors such as the Master Educators Award, UVAMC increased stipends and benefits for all graduate medical trainees in 2021 by 2.0%, based on data from the AAMC annual survey of Teaching Hospitals. Stipends range from \$58,305 for a PGY-1 trainee to \$77,175 for a PGY-8 trainee. Fringe benefits were set at 26.65%. These are at or above the 50th percentile compared to institutions nationally.

UVAMC remains over the Center for Medicare and Medicaid Services cap by 137.12 (Direct) or 39.05 (Indirect) positions. UVAMC filed a change with CMS to become a rural referral center which allowed us to increase our IME Cap by 30%.

Institutional Self Study (AIR) Action Plans and Monitoring

In anticipation of the ACGME accreditation site visit in 2023, leadership continues to closely monitor the progress made toward the Aims that were identified during the Institutional Self-Study in 2021:

1. **Academic Development**: UVAMC has concentrated on the professional development of our Program Directors and Associate Program Directors during the past 12 months, with workshops designed to ensure their success as leaders of their residency and fellowship programs. More recently, these sessions have been extended to the Core Faculty of the programs, and plan to next target development activities for the Program Coordinator group.
2. **Diversity, Equity, and Inclusion**: As measured by our Match statistics, UVAMC continues to attract a more diverse pool of applicants, and successfully recruit them, to UVA. Specific activities in this area included the 5th Annual Trainee Diversity and Inclusion Symposium, which attracts residents, fellows, and junior faculty from around the country to explore topics related to their success. After a two-year hiatus, UVAMC plans to hold a Second Look weekend in February 2023 that will allow applicants unable to visit UVA and Charlottesville an opportunity for in-person exploration of our Health System. Finally, UVAMC launched the inaugural URiM (Underrepresented in Medicine) Leadership Program for 4th Year medical students. In addition to providing scholarships to cover the costs of travel and housing, this multi-week program was offered to four cohorts of students to expose them to leaders and leadership activities around UVA. Early survey results suggest this was a highly effective program to enhance the profile of our programs.
3. **Community Relations**: UVAMC is in the early stages of planning a second Summit of Residents, Nurses, and Advanced Practice Providers. Building on the success of our first Summit in 2021, this one-day event will provide team-building exercises that will increase the cohesiveness of the various members of our patient care teams. Additional opportunities exist for building relationships in the greater Charlottesville and Albemarle County region. One step in this direction was made by the Housestaff Council for Diversity and Inclusion who partnered with the Boys and Girls Club of Charlottesville to expose elementary school-aged children to dissection and basic surgical skills.
4. **Strategy**: Dr. Kirk, co-chaired the Health System's Education Group for its Strategic Planning process. Opportunities remain, however, for the GME Community to be more involved in leadership decisions in the Medical Center, School of Medicine, and Health System.
5. **Innovation**: Of the five aims, this one has generated the least activity. Leadership is grateful to the group of residents who submitted and won a Spark award, used to ensure that lactating mothers have access to computers while pumping breast milk. As the final months before the site visit approach, GME leadership will explore how to solicit and implement innovative ideas in education, patient care and research.

GME Trainee Achievements

UVAMC's residents and fellows make up a substantial part of the Health System's workforce, and are involved in all aspects of patient care, as well as teaching and research. Here are just a few of their notable activities at the local, state, and national level from the past year:

Emergency Medicine: The program created a new elective experience for residents in Eldoret, Kenya at Moi University to work with local physicians and patients.

General Surgery: Multiple residents in this program were lauded nationally for their achievements and leadership, including Bernadette Goudreau who was given the Jameson L Chassin Professionalism Award by the American College of Surgeons, Mark Fleming who won the Nery Harrison Wilson Humanism in Medicine Award; Rick Vavolizza who was appointed to the Latino Surgical Society Board of Directors and who serves as Co-director of the podcast, 'Inside the Operating Room' which highlights Hispanic surgeons from around the country; Katherine Marsh who was named to the ACGME's Board of Directors.

Thoracic Surgery: Ray Strobel received multiple honors, including Society of Thoracic Surgeons Key Contact of Year Award and the 2023 J Maxwell Chamberlain Award for Perioperative/Critical Care Excellence in Research.

Pediatrics: Thomas Casto was chosen for an All-University Teaching award.

Family Practice: Noopur Doshi was awarded First Place honors at the Virginia Association of Family Practice Scholarly Symposium.

Pathology: Residents joined the Student National Medical Association to host a workshop for URiM undergraduates interested in healthcare careers.

Physical Medicine and Rehabilitation: Emily Hilaker earned the Rob Gotlin Community Leadership Award from the American Osteopathic College of Physical Medicine and Rehabilitation; Chris Chrzan was awarded a "Best of Meeting" distinction for an abstract presented at the American Society of Regional Anesthesia and Pain Medicine.

Orthopaedic Surgery: Several recent graduates were named to leading positions, including Victor Anciano as the team physician for the University of Louisville and MaCalus Hogan as the chair of Orthopaedic Surgery at UPMC.

Diagnostic and Interventional Radiology: Sukhi Grewal and Rabia Idrees led the 'Near Peer' mentoring program for female medical students interested in a career in Radiology.

Summary

GME at UVAMC occurs in a robust training environment with the strong support of all elements of the Health System. Graduates leave UVAMC with the skills and competence to practice independently and succeed in every type of health care setting. Many of them go on to become leaders in academic medicine. As health care continues to evolve in response to the pandemic and other external forces, the GME community and our programs will need to thrive and grow to proudly continue this outcome.

Table 1 - 2022 ACGME Citations: Program Specific Summary

I. Oversight	
<ul style="list-style-type: none"> A. Sponsoring Institution B. Participating Sites C. Recruitment D. Resources E. Other Learners and Other Care Providers 	No programs had citations in these areas.
II. Personnel	
<ul style="list-style-type: none"> A. Program Director B. Faculty C. Program Coordinator D. Other Program Personnel 	The following programs had one or more citations in these areas: <ul style="list-style-type: none"> • Interventional Radiology-Independent • Thoracic Surgery-Integrated • Otolaryngology-Head and Neck Surgery [2]
III. Resident Appointments	
<ul style="list-style-type: none"> A. Eligibility Requirements B. Number of Residents C. Resident Transfers 	No programs had citations in these areas.
IV. Educational Program	
<ul style="list-style-type: none"> A. Curriculum Components B. ACGME Competencies C. Curriculum Organization and Resident Experiences D. Scholarship 	The following programs had one or more citations in these areas: <ul style="list-style-type: none"> • Interventional Radiology-Independent • Micrographic Surgery and Dermatologic Oncology(MSDO) [5]
V. Evaluation	
<ul style="list-style-type: none"> A. Resident Evaluation B. Faculty Evaluation C. Program Evaluation and Improvement 	The following programs had one or more citations in these areas: <ul style="list-style-type: none"> • Addiction Medicine • MSDO [4] • Obstetrics and Gynecology • Pediatric Radiology • Child and Adolescent Psychiatry
VI. The Learning and Working Environment	
<ul style="list-style-type: none"> A. Patient Safety, Quality Improvement, Supervision, and Accountability B. Professionalism C. Well-being D. Fatigue Mitigation E. Clinical Responsibilities, Teamwork, and Transition of Care F. Clinical Experience and Education 	The following programs had one or more citations in these areas: <ul style="list-style-type: none"> • MSDO [5] • Addiction Medicine • Obstetrics and Gynecology [2] • Otolaryngology-Head and Neck Surgery • Interventional Radiology-Integrated • Otolaryngology-Head and Neck Surgery • General Surgery [2]

**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY**

<u>BOARD MEETING:</u>	December 8, 2022
<u>COMMITTEE:</u>	Health System Board
<u>AGENDA ITEM:</u>	II. Medical Center Report (Written Report)
<u>ACTION REQUIRED:</u>	None

BACKGROUND: Wendy Horton became Medical Center CEO in November 2020. She came from The Ohio State University Wexner Medical Center, where she served as Chief Administrative Officer. Prior to Ohio State, Ms. Horton served in several different leadership roles at University of Wisconsin Health, including Vice President of Operations.

DISCUSSION:

People

- The Medical Center continues strengthen culture and reimagine nursing structure to support professional practice model through leading with HEART (Hiring; Engagement; Alignment & Accountability; Retention; Team).
- Developed six Mentor Programs to help nurses advance their careers:
 - RN to BSN
 - Supports ADN and Diploma nurses interested or enrolled in a BSN program while working as a nurse
 - Topics include: Stress management, confidence building, finding value in the journey, and strategies to be successful
 - Clinician 1 Transition to Practice
 - Supports new graduate nurses at their 8th month of hire (approx.) as they move into their second year of nursing
 - Topics include: Professional development, work/life balance, tough conversations, resilience, navigating schedules, and finding their voice.
 - Night Shift Clinician Leader
 - Supports night shift nurses to grow in their leadership skills and involvement in Shared Governance
 - Topics include: Professional development, work/life balance, engagement, career ladder advancement assessment, and networking with other formal and informal leaders.
 - Formal Nurse Leaders
 - Provides Assistant Nurse Managers and Nurse Managers peer support as a new UVA formal leader

- Topics include: Increasing confidence in strategic planning, team engagement, professional networking, leader wellbeing, and finance/budgets
 - Advanced Practice Providers
 - Provides opportunity to build relationships with peers and experience support as APPs grow in their practice and professional role.
 - Topics include: Professional networking, resilience, professional confidence, and work/life balance
 - Coming soon - Experienced Clinical Nurses
 - Supports experienced nurses to network with colleagues and leverage resources to meet their professional goals as a UVA Nurse
 - Topics include: Goal setting, wellbeing, nursing research, advocacy and inclusion, leading change and quality metrics
- Recognition events this quarter included the UTeam member of the month breakfast.
- The 2022 annual retraining cycle concluded in October.
- November 5th we hosted the 2022 fall back event for the evening shifts.
- Holiday meals and end of year celebration planning are underway.
- A number of UVAH team members are participating in leadership development programs this quarter:
 - The 6th cohort of Learning to Lead kicked off with 23 participants, and 214 UVAH participants to date
 - Tools to Lead's latest cohort kicked off with 24 UVAH participants
 - Dare to Lead was delivered to 17 charge nurses, 30 in population health, and 32 UVA Health team members in the open course program
- New team member orientation returned to in-person in September for the Medical Center. The rest of UVA Health is slated to return starting in January.
- The system-wide team member engagement survey concluded in November. Data and post-survey action planning will take place in Q1 2023.
- "Earn While you Learn" program continues with the October cohort. The next cohort starts in February 2022.
- We continue to evaluate work life balance and belonging for our teams and provide resources like Wisdom & Wellbeing and FEAP.

Quality and Safety

- The Total Joint Replacement Program, knee and hip, had a successful initial survey for Advanced Total Joint Certification from The Joint Commission.
- The Emily Couric Clinical Cancer Center completed a successful reaccreditation survey from The Commission on Cancer, a Quality Program of the American College of Surgeons.
- The Cellular Therapy and Stem Cell Transplant Program had a successful reaccreditation survey from the Foundation for the Accreditation of Cellular Therapy (FACT).

- The Education Resource Center Outpatient Pharmacy had a successful inspection of the new dispensing robot and the overall pharmacy from the Virginia Board of Pharmacy.
- The Battle Building Pharmacy, 4th and 5th floors, had a successful inspection of the Controlled Substance Registrations by the Virginia Board of Pharmacy.
- Implementation of Patient Safety Risk Rounds have a significant positive impact on reducing the incidence of Catheter Associated Urinary Tract Infections (CAUTI) and Central Line Associated Blood Stream Infections (CLABSI) house-wide and particularly on units previously experiencing the highest rates.
- Integrated Interdisciplinary Rounding - designed to optimize discharge planning and support clinical care decisions - is now providing unit level data on key leading measures to optimize patients' length of stay.

Patient Experience

- Inpatient experience as defined by the overall hospital rating of 9s and 10s for first-quarter FY2023 is 74.2% (72nd percentile), below FY2022 of 73.7% (78th percentile), and below the target of 78.0%.
- Outpatient clinic patient experience as defined by the overall question "likelihood of recommending your practice to others" for first-quarter FY2023 reflects a score of 95.4% (72nd percentile). Scores have remained flat and are below target of 96.2% and slightly below FY2022 of 95.5% (71st percentile).
- Emergency Department patient experience as defined by the overall rating of care for first-quarter FY2023 is 77.3% (35th percentile), below FY2022 of 79.5% (36th percentile), and below target of 80.8%.

Improvement Efforts:

- The Patient Experience Office examined the relationships between key drivers and the likelihood of a positive overall rating. By understanding which aspects of the patient's care influence their overall rating, we identified that staff-worked together is a common key driver. Efforts are underway to demonstrate teamwork among the staff (physicians, nurses, and other team members).
- The Emergency Department implemented Rapid Medical Evaluation (RME) and continues to work on throughput and volume management and enhancing communication with waiting room patients.
- Inpatient nursing leaders are focusing on purposeful leader rounding to resolve patient issues quickly and use rounding data to drive improvement efforts.

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<u>BOARD MEETING:</u>	December 8, 2022
<u>COMMITTEE:</u>	Health System Board
<u>AGENDA ITEM:</u>	III. School of Medicine Report (Written Report)
<u>ACTION REQUIRED:</u>	None

BACKGROUND: Melina R. Kibbe, M.D., became Dean of the School of Medicine on September 15, 2021. A member of the National Academy of Medicine, Dr. Kibbe is the editor of the *Journal of the American Medical Association (JAMA) Surgery*, a respected clinician, funded investigator, and highly recognized educator. Before coming to UVA, she was Chair of the Department of Surgery at the University of North Carolina.

DISCUSSION:

People

- The School of Medicine recently published the first Annual Report in over 21 years. The report was delivered to UVA School of Medicine Alumni, donors, employees, and other medical schools across the country.
- The School of Medicine is nearing completion of a nationwide search for the Senior Associate Dean (SAD) for Research. The SAD for Research fills an integral leadership role on the Dean’s Cabinet and is an important change agent as the School and University seek to expand research infrastructure and efforts at UVA.
- Faculty departures during the 1st Quarter of FY23 remain low. For the first quarter of the fiscal year, new hires outpaced departures 4:1 and departures are below last fiscal year’s departure rate over the same period.
- The School of Medicine remains in a growth phase. As of October 2022, the School of Medicine had 125 clinical faculty and 15 research faculty openings posted in Workday.
- Dean Kibbe delivered her annual State of the School Address on November 10 as prescribed in the School of Medicine Bylaws.

Departments

- The 29 Departments and six centers completed their Department Annual Reviews in October and established their FY23 Annual Goals.
- The School of Medicine announced the selection of Shayne Peirce-Cottler, PhD, as the new Chair of the Department of Biomedical Engineering. Dr. Peirce-Cottler assumed her role on September 15, 2022. She is a renowned professor who served as the Director of the UVA Biomedical Engineering Graduate Program prior to assuming her role as Chair of the Department.

- The School of Medicine announced the selection of Scott T. Hollenbeck, MD as the new Chair of the Department of Plastic and Maxillofacial Surgery. Dr. Hollenbeck will assumed his role on November 28, 2022. He comes to UVA from Duke University where he served as the Vice Chief of Research for the Division of Plastic, Maxillofacial, and Oral Surgery.
- The School of Medicine announced the selection of Mariano A. Garcia-Blanco, MD, PhD, as the new Chair of the Department of Microbiology, Immunology and Cancer Biology. Dr. Garcia-Blanco will assume his role on January 1, 2023. He comes to UVA from the University of Texas Medical Branch where he serves as the Chair of the Department of Biochemistry and Molecular Biology.
- UVA School of Medicine continues to execute strategic leadership searches. These include Chair searches for the following Departments: 1) Emergency Medicine, 2) Molecular Physiology and Biological Physics, 3) Radiology, and 4) Pediatrics.

Clinical

- The State of Virginia started a newborn screening for Spinal Muscular Atrophy and the first newborn in the state to screen positive was recently treated in the Pediatric Neuromuscular Clinic in the Child Development & Rehabilitation Center at UVA Children's Hospital. The newborn received life-saving gene therapy at the UVA Children's infusion center.
- A UVA Health multidisciplinary team launched a new, comprehensive program for patients with chronic thromboembolic pulmonary hypertension (CTEPH). Experts from pulmonology, cardiology, cardiothoracic surgery, nuclear medicine, radiology, vascular science, hematology, anesthesiology, critical care, and more met for more than two years and developed best practices and protocols that shaped the current CTEPH program at UVA Health. The first patient was treated in August 2022.
- UVA Health Cancer Center is joining more than 50 other top cancer organizations in calling to increase access to and use of low-dose computed tomography (CT) scans for Americans at high risk for lung cancer. The new effort aligns with and supports the national Cancer Moonshot initiative, which aims to reduce cancer deaths by 50% over the next 25 years.

Research

- Joshua Li, MD, PhD, and Li Jin, PhD, associate professors of orthopaedic surgery, received a five-year NIH R01 grant from NIAMS with \$2.3M in funding. The focus of their study is to decipher macrophage phenotype and function in disc herniation and associated back and leg pain.
- UVA Cancer Center researcher Kristen Nagle, PhD and her colleagues have developed an algorithm that will improve cancer care by quickly and easily identifying patients who will benefit from powerful cancer drugs called kinase inhibitors. The algorithm may have other diagnostic benefits for patients as well.
- Researchers at the University of Virginia School of Medicine and the UVA Biocomplexity Institute have been selected to help establish a national pathogen genomics surveillance

network to better identify, respond to and prevent future infectious disease outbreaks and pandemics. Together with the Virginia Division of Consolidated Laboratory Services, Virginia Department of Health and Virginia Commonwealth University, the UVA researchers are establishing a Virginia-based center in the national Pathogen Genomics Centers of Excellence Network. The Virginia center is one of just five in the nation chosen by the U.S. Centers for Disease Control and Prevention.

Education

- The Senior Associate Dean for Education continues to prepare for the March 2023 Liaison Committee on Medical Education Accreditation visit.
- In the November 2022 issue of *Academic Medicine*, School of Medicine educators, including Meg Keeley, MD as first author, described the structure and outcomes of the University of Virginia Entrustable Professional Activity program. The program assesses medical students in authentic workplace-based settings, on development of activities and skills that an intern should be able to perform on day one with indirect supervision. To date, over 72,500 student assessments have been performed by residents, fellows, and faculty across all phases of the curriculum.
- The 45th Annual Bowman Scholars were awarded on October 15, 2022 to honor five UVA fourth-year medical students: Ashley Bolte, Anthony DeNovio, Rohan Karanth, Emily Larkin and Maggie Selesky. These students were selected in recognition of their clinical excellence during the clerkship portion of the curriculum. They also exemplify the qualities of integrity and uncompromising strength of character, enthusiasm for acquisition of skills to provide the best possible patient care and compassion for the ill.

Diversity, Equity, and Inclusion

- Members of the Housestaff Council for Diversity and Inclusion (HCDI) and faculty in the Departments of Plastic Surgery, General Surgery, Anesthesiology hosted the inaugural Surgery and Anesthesia Day Camp at UVA's Education Resource Center and Medical School Simulation Lab on October 27, 2022. Activities included ice breakers, lectures, resident panels, and hands-on simulations-to enhance the students' interest in the sciences and ultimately healthcare.
- The Housestaff Council sponsored the 5th annual Trainee Diversity and Inclusion Conference on November 12, 2022. The theme was "Excellence in Action: Lifting as We Climb" and featured a keynote address by Bonnie Mason, MD, the American College of Surgeons Medical Director of DEI. Attendees also heard from two panels of UVA faculty and one panel of community members in this conference that focused on career development, mentoring and balancing resident and faculty wellness.
- Family Medicine Associate Professor Catherine Casey, MD, completed an extensive process to become a certified member of the World Professional Association for Transgender Health. This organization promotes evidence-based care, education, research, public policy, and respect in transgender health. She is the only WPATH certified physician in the Commonwealth of Virginia.

**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY**

<u>BOARD MEETING:</u>	December 8, 2022
<u>COMMITTEE:</u>	Health System Board
<u>AGENDA ITEM:</u>	IV. School of Nursing Report (Written Report)
<u>ACTION REQUIRED:</u>	None

BACKGROUND: Marianne Baernholdt, PhD, MPH, RN, FAAN — the Sadie Heath Cabaniss Professor of Nursing — is a leading scholar of care quality and safety with an emphasis on healthcare in rural and global environments and has dedicated the expanse of her award-winning nursing career to teaching and mentoring students and junior faculty. Dean Baernholdt was a founding director of UNC Chapel Hill’s Pan American Health Organization/W.H.O. Collaborating Center in Quality and Safety Education in Nursing and Midwifery and founder and director of VCU School of Nursing’s Langston Center for Quality, Safety, and Innovation. During her first tenure at UVA School of Nursing (2005-2014), she directed the Rural and Global Healthcare Center and led its Global Initiatives. A former U.S. representative for the International Council of Nurses’ steering group for rural and remote nursing who earned degrees from the University of Pennsylvania, Columbia, Pace, and the Bispebjerg School of Nursing in her native Denmark, Dean Baernholdt became UVA’s seventh nursing dean August 1, 2022.

DISCUSSION:

Academics and Strategic Planning

The School’s BSN program was ranked No. 10 by U.S. News & World Report’s Best Colleges Guide 2023.

The RN to BSN program was ranked the nation’s No. 4 online RN to BSN program by RNtoBSN.org.

With the School of Medicine, the School of Nursing earned a Higher Education Excellence in Diversity (HEED) Award for 2022 from Insight into Diversity magazine, which will be officially announced later this fall.

The School has begun its work to develop a new strategic plan—its first since 2007/2008—based on UVA’s Great and Good plan, UVA Health’s One Future Together plan, and deeply informed by the School’s existing Inclusion, Diversity, and Excellence Achievement (IDEA) initiative strategic plan. Several well-attended strategic planning meetings of faculty, staff, and administrators took place in early November facilitated by UVA’s Center for Organizational Excellence. The findings from these meetings will inform the plan, which is expected to be in place by spring 2023.

The School launched a campaign to attract new talent and emerging nurse scientists through the creation of several new post-doctoral fellowships, including a unique option where postdoctoral fellows are automatically offered an assistant professorship.

Research and Faculty Recognition

Associate professor Jessica Keim-Malpass was inducted as a Fellow of the American Academy of Nursing at an Oct. 29 ceremony in Washington, D.C. She is the School's 35th Academy Fellow and its 52nd national academies fellow among active and emeriti faculty.

Associate professor Katrina Debnam earned two research awards—a \$440K and a \$431K NIMHD R21 grants—to study the relationship experiences of Black girls and women exposed to violence so caregivers can better support them.

Associate professor Ishan Williams is part of a team of scientists who earned a \$5.9M NIH Bridge2AI grant for their work, “Patient-focused collaborative hospital repository uniting standards for equitable AI.”

Associate professor Emma Mitchell earned a \$1.2M NIH Fogarty grant—“Remote resilience: Novel applications of Health in Nicaragua’s cancer control program”—funding that will enable her to continue development, testing, and deployment of her culturally-tailored approach to cervical cancer screening, treatment, and follow-up along Nicaragua’s Caribbean coast where mortality from this largely preventable disease is high.

Assistant professor Vickie Southall was celebrated by the Virginia Nurses Association with its 2022 Public Health Nurse Award. Several other faculty were honored by the VNA as award finalists as well, including Beth Epstein, Kathryn Reid, and Elizabeth Taliaferro-Jones.

Bjoring Center director Dominique Tobbell authored a new book, *Dr. Nurse*, about the history of professional nursing and the rise of doctoral programs like the DNP and PhD, which comes out Dec. 17.

Professors Julie Haizlip and Natalie May and their work on mattering was featured in *Scientific American* and as part of a Lifetime Learning podcast.

Student Honors

The School's annual White Coat, Recognition, and Pinning ceremony October 29 gathered hundreds for pins, white coats, and awards, marking students' progression through our programs and the advent of clinical rotations for second years. Later that day, 13 new student inductees took part in a Beta Kappa honor society ceremony.

The School's celebration of UVA Global Week included forums featuring students who studied abroad in Roatan, Honduras, and Kigali, Rwanda, as well as a widely attended

“Accent Day” Nov. 2 that celebrated international fare, cultural engagement, and nursing students who learned English as a second language.

More than 50 students, faculty, and staff from the School attended a “Hoos First Week” luncheon in McLeod Hall celebrating first-generation college attendees.

The Graduate Student Nursing Organization organized two hugely successful American Red Cross blood drives.

DNP student and former school nurse Sherrie Page Guyer penned an op-ed published on *Newsweek.com* titled, “We’re facing a massive nursing shortage. Onsite childcare is the answer.”

Philanthropy and Alumni Affairs

PhD graduate Soojung Ahn earned the Martha N. Hill Early Career Investigator Award at the American Heart Association’s annual conference Nov. 7.

The Bjoring Center for Nursing Historical Inquiry hosted several well-attended forums and events, including an open house and a Boar’s Head luncheon, which gathered 30 alumni to celebrate the history center’s 30th anniversary. A celebratory publication “Object Lessons” also marks this milestone.

The School announced a new \$14M, five-year gift from Joanne and Bill Conway last September focused on supporting students both the CNL and the PhD programs, with a goal of producing more nurses at the bedside and augmenting the number of nursing faculty and nurse scientists.

Two alumni were inducted as Fellows of the American Academy of Nursing in October: CNL and post-master’s graduate Dallas Ducar, a psychiatric mental health nurse practitioner and founder of TransHealth, a clinic that offers gender-affirming care in Northampton, Mass., and Jessica Keim-Malpass, an associate professor at the School of Nursing, an NIH-, NSF-, and iTHRIV-funded scholar, a pediatric nurse practitioner, and a translational nurse scientist. Ducar and Keim-Malpass were celebrated at a joint UVA School of Nursing and UNC School of Nursing event in Washington, D.C. Oct. 27.

Beta Kappa, the School’s Sigma nursing honor society, also marked its 50th year with a celebration Nov. 9 and the installation of a timeline in its Beta Kappa Room in McLeod Hall.

**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY**

BOARD MEETING: December 8, 2022

COMMITTEE: Health System Board

AGENDA ITEM: VI. Health System Consolidated Financials

ACTION REQUIRED: None

BACKGROUND: UVA Health prepares a comprehensive financial package at least monthly and reviews it with the Executive Vice President for Health Affairs and other executive leaders of the University before submitting the report to the Health System Board.

Douglas E. Lischke serves as UVA Health’s Chief Financial Officer. Prior to coming to UVAH, he was the Associate Vice President for Financial Services and Controller for Wake Forest Baptist Medical Center. He is an active Certified Public Accountant and Certified Healthcare Finance Professional with over 25 years of financial management experience.

FINANCE REPORT

Overall, driven by the pandemic and workforce challenges, UVA Health’s operating income is unfavorable to budget for the three months ended September 30, 2022.

	Operating Income			Operating Margin		
	<u>Actual</u>	<u>Budget</u>	<u>Pr Year</u>	<u>Actual</u>	<u>Budget</u>	<u>Pr Year</u>
Medical Center	20.1	18.2	33.1	3.5%	3.3%	6.4%
Community Health	(11.8)	(12.8)	1.5	-9.1%	-10.1%	1.3%
UPG - SOM Clinical	2.6	2.9	8.4	1.9%	2.1%	6.1%
SOM Academic	(6.6)	(1.5)	8.4	-4.9%	-1.0%	6.2%
SON Academic	(0.2)	-	0.8	-3.4%	0.0%	10.9%
Health Sciences Library	(0.0)	(0.0)	(0.4)	-3.8%	-3.8%	-23.9%
Health System Support/Transfers	(12.9)	(11.9)	(10.3)			
UVA Health	(8.8)	(5.1)	41.6	-0.9%	-0.5%	4.7%

UVA Medical Center

Through the first quarter of FY2023, the operating income was \$20.1M, resulting in a 3.5% operating margin and yielding a \$1.9M favorable budget variance. Net revenue results were driven by high inpatient acuity, strong ambulatory volumes, and sustained outpatient pharmacy business. The all payer case mix was 2.41 and exceeded budget by 4.7%. The

operating margin is supported by imaging, dialysis, home health and the timing and management of shared services expenses. The Medical Center generated \$45.8M in cash from operations (EBITDA) after transfers and cash reserves totaled 192 days. Federal loans have been completely repaid in August 2022. Total expenses adjusted for volume and acuity were 2.8% unfavorable to budget, driven by inflation and labor challenges.

Total paid employees, including contracted employees, were 76 over budget. Contract labor is composed primarily of nurse travelers and individuals employed by the School of Medicine and contracted to the Medical Center. The Medical Center utilized 732 nurse travelers.

	<u>FY2023</u>	<u>2023 Budget</u>
Employee FTEs	8,079	8,752
Contract Labor FTEs	862	113
Salary, Wage and Benefit Cost / FTE	\$100,741	\$94,992
Total FTEs	8,940	8,864

UVA Community Health

UVA Community Health was favorable to budget for the three months ended September 30, 2022. Volumes were slightly behind budget but ahead of prior year. Salaries were unfavorable to budget due work force challenges and contract labor. The overall operating loss of \$12M was driven by one-time transition costs associated with moving services from Novant Health to UVA, which were \$15M, in line with budget.

Transitional Care Hospital

The Transitional Care Hospital (TCH) experienced an operating loss of \$1.7M for the fiscal year, which was unfavorable to budget. This is partially driven by the conversion of TCH patients to the MC in late August. The case mix index was 1.39, in-line with budget. No admissions are planned for the remainder of the fiscal year.

UVA Physicians Group

Through the first quarter of FY2023, the Physicians Group (UPG) produced an operating surplus of \$2.6M, which was \$0.3M unfavorable to budget and \$5.8M unfavorable to prior year. Unfavorable results were driven by lower than plan patient volumes, offset by cost savings from lower spending on medical supplies and skilled services. These results include \$9.7M in support towards the Academic Mission.

UVA School of Medicine

Through the first quarter of FY2023, the School of Medicine generated a \$6.6M deficit yielding a \$5.1M unfavorable variance to budget. This is primarily related to unfavorable research activity including a \$2.6M deficit related to event paid, clinical trials, and program income expenditures in excess of billings/collections and a \$5.8M decrease in grant expenditures resulting in a \$2.3M decline in indirect cost recoveries. The backlog at Procurement and the Office of Sponsored Programs, as well as other operational hurdles resulting from the implementation of Workday, are the primary drivers of the unfavorable research variance.

UVA School of Nursing

The School of Nursing has a slightly unfavorable budget variance for the first quarter of FY23. This variance was driven primarily by personnel expenditures such as the one-time merit bonus hitting the budget early in Q1. Graduate tuition revenue has decreased consistent with national trends but was offset by increases in research, gifts, and other operating revenue. Non-personnel spending is typically low for the fall but will pick up during the spring semester (Q3-Q4).

University of Virginia Medical Center
Income Statement
(Dollars in Millions)

Description	Most Recent Three Fiscal Years			Budget/Target
	Sep-20	Sep-21	Sep-22	Sep-22
Net patient revenue	\$445.5	\$620.3	\$688.3	\$651.6
Other revenue	<u>13.9</u>	<u>16.7</u>	<u>18.7</u>	<u>20.3</u>
Total operating revenue	<u>\$459.3</u>	<u>\$637.1</u>	<u>\$707.0</u>	<u>\$671.9</u>
Operating expenses	407.3	558.2	653.6	615.7
Depreciation	30.9	38.8	39.2	40.4
Interest expense	<u>4.4</u>	<u>5.4</u>	<u>5.9</u>	<u>10.3</u>
Total operating expenses	<u>\$442.6</u>	<u>\$602.5</u>	<u>\$698.7</u>	<u>\$666.5</u>
Operating income (loss)	<u>\$16.8</u>	<u>\$34.6</u>	<u>\$8.3</u>	<u>\$5.4</u>
Non-operating income (loss)	<u>\$64.1</u>	<u>\$17.7</u>	<u>(\$37.3)</u>	<u>\$13.2</u>
Net income (loss)	<u>\$80.9</u>	<u>\$52.3</u>	<u>(\$29.0)</u>	<u>\$18.6</u>
Principal payment	\$5.2	\$5.4	\$5.4	\$5.4
*FY22 includes UVACH (acquisition date: 7/1/21)				

Sep-20/21 does not include UVACH.

University of Virginia Medical Center
Balance Sheet
(Dollars in Millions)

Description	Most Recent Three Fiscal Years		
	Sep-20	Sep-21	Sep-22
Assets			
Operating cash and investments	\$258.2	\$295.7	\$338.0
Patient accounts receivables	235.1	367.6	377.5
Property, plant and equipment	1,360.8	1,611.9	1,682.1
Depreciation reserve and other investments	450.2	520.3	412.9
Endowment Funds	710.9	962.8	865.3
Other assets	<u>302.6</u>	<u>642.2</u>	<u>455.6</u>
Total Assets	<u>\$3,317.9</u>	<u>\$4,400.5</u>	<u>\$4,131.4</u>
Liabilities			
Current portion long-term debt	\$21.7	\$22.7	\$36.1
Accounts payable & other liab	120.9	241.1	335.5
Long-term debt	741.2	896.1	865.8
Accrued leave and other LT liab	<u>565.4</u>	<u>645.2</u>	<u>431.3</u>
Total Liabilities	<u>\$1,449.2</u>	<u>\$1,805.1</u>	<u>\$1,668.7</u>
Fund Balance	<u>\$1,868.7</u>	<u>\$2,595.4</u>	<u>\$2,462.7</u>
Total Liabilities & Fund Balance	<u>\$3,317.9</u>	<u>\$4,400.5</u>	<u>\$4,131.4</u>
<i>*FY22 includes UVACH (acquisition date: 7/1/21)</i>	<i>Sep-20/21 does not include UVACH.</i>		

University of Virginia Medical Center
Financial Ratios

Description	Most Recent Three Fiscal Years			Budget/Target
	Sep-20	Sep-21	Sep-22	Sep-22
Operating margin (%)	3.6%	5.4%	1.2%	0.8%
Current ratio (x)	3.5	2.5	1.9	2.0
Days cash on hand (days)	270	213	192	190
Gross accounts receivable (days)	49.2	52.2	44.8	50.0
Annual debt service coverage (x)	12.2	8.9	1.4	3.6
Debt-to-capitalization (%)	30.4%	27.4%	28.0%	34.0%
Capital expense (%)	8.0%	7.3%	6.5%	7.6%

**University of Virginia Medical Center
Operating Statistics**

Description	Most Recent Three Fiscal Years			Budget/Target
	Sep-20	Sep-21	Sep-22	Sep-22
Acute Discharges	6,742	6,584	6,597	7,056
Patient days	49,049	48,866	49,716	49,490
Observation Billed Encounters - MC only	1,424	1,605	1,908	1,363
All Payor CMI Adj Avg Length of Stay - MC only	3.12	3.12	3.19	3.00
OP Billed Encounters	206,223	229,793	227,971	216,575
ER Billed Encounters	9,191	10,778	11,976	10,566
All Payor CMI - MC Only	2.28	2.37	2.41	2.30
Average beds available				
FTE's (including contract labor)	8,474	8,701	8,940	8,864

Operating Statistics exclude UVA Community Health

University of Virginia Medical Center
SUMMARY OF OPERATING STATISTICS AND FINANCIAL PERFORMANCE MEASURES
Fiscal Year to Date September 30, 2022 with Comparative Figures for Prior Fiscal Year

OPERATING STATISTICAL MEASURES									
DISCHARGES and CASE MIX - Year to Date					OTHER INSTITUTIONAL MEASURES - Year to Date				
	Actual	Budget	% Variance	Prior Year		Actual	Budget	% Variance	Prior Year
<u>DISCHARGES</u>					<u>ACUTE INPATIENTS</u>				
Medical Center	6,584	7,014	(6.1%)	6,542	Inpatient Days - MC	49,365	48,397	2.0%	47,750
Transitional Care	13	42	(69.0%)	42	Inpatient Days - CH	13,075	13,315	(1.8%)	13,774
Community Health	3,565	3,666	(2.8%)	3,629	All Payor CMI Adjusted ALOS - MC	3.19	3.00	(6.2%)	3.12
Total Discharges	10,162	10,722	(5.2%)	10,213	All Payor CMI Adjusted ALOS - CH	2.55	2.52	(0.9%)	2.81
Adjusted Discharges - MC	15,913	16,222	(1.9%)	15,569	Average Daily Census - MC	537	526	2.0%	519
Adjusted Discharges - CH	11,397	11,390	0.1%	10,923	Average Daily Census - CH	141	144	(2.1%)	150
Total Adjusted Discharges	25,640	25,901	(1.0%)	25,146	Births - MC	645	526	22.6%	589
<u>CASE MIX INDEX</u>					Births - CH				
All Payor CMI - UVA Hosp & Clinics	2.41	2.30	4.7%	2.37	694	671	3.4%	745	
All Payor CMI - CH	1.44	1.44	0.1%	1.35	<u>SURGICAL CASES</u>				
<u>OUTPATIENT BILLED ENCOUNTERS</u>					UVA Main Hospital Operating Room				
Medical Center	227,971	216,575	5.3%	229,793	Battle	2,926	2,931	(0.2%)	2,878
Community Health	60,535	62,525	(3.2%)	61,013	Monticello Surgery Center	2,036	1,803	12.9%	1,836
Emergency Room - MC	11,976	10,566	13.3%	10,778	Orthopedic Center	7			
Emergency Room - CH	28,330	28,514	(0.6%)	27,412	Community Health	2,678	2,812	(4.8%)	2,808
					Total	12,520	12,793	(2.1%)	12,290
OPERATING FINANCIAL MEASURES									
REVENUES and EXPENSES - Year to Date					OTHER INSTITUTIONAL MEASURES - Year to Date				
	Actual	Budget	% Variance	Prior Year		Actual	Budget	% Variance	Prior Year
(\$s in thousands)					(\$s in thousands)				
<u>NET REVENUES</u>					<u>NET REVENUE BY PAYOR</u>				
Net Patient Service Revenue	\$688,264	\$651,598	5.6%	\$620,339	Medicare	\$196,800	\$183,027	7.5%	\$158,114
Other Operating Revenue	18,739	20,282	(7.6%)	16,743	Medicaid	\$140,423	\$119,427	17.6%	\$132,995
Total	\$707,003	\$671,879	5.2%	\$637,082	Commercial Insurance	\$82,309	\$64,906	26.8%	\$92,315
<u>EXPENSES</u>					Anthem	\$146,312	\$156,104	(6.3%)	\$141,264
Salaries, Wages & Contract Labor	\$325,967	\$288,352	(13.0%)	\$267,007	Aetna	\$53,753	\$52,729	1.9%	\$49,810
Supplies	185,556	175,935	(5.5%)	165,744	Other	\$68,668	\$75,405	(8.9%)	\$45,840
Contracts & Purchased Services	142,078	151,458	6.2%	125,462	Total Paying Patient Revenue	\$688,264	\$651,598	5.6%	\$620,339
Depreciation	39,197	40,410	3.0%	38,836	<u>OTHER</u>				
Interest Expense	5,896	10,316	42.8%	5,428	Collection % of Gross Billings	28.7%	28.1%	2.1%	28.0%
Total	\$698,694	\$666,472	(4.8%)	\$602,476	Days of Revenue in Receivables (Gross)	44.8	50.0	10.5%	52.2
Operating Income	\$8,309	\$5,408	53.7%	\$34,605	CMI Adjusted Cost per Adjusted Discharge	\$13,186	\$12,820	(2.9%)	\$11,975
Operating Margin %	1.2%	0.8%		5.4%	Total FTEs (including Contract Labor)	11,400	10,990	(3.7%)	10,781
					FTEs Per CMI Adjusted Discharge	19.8	19.5	(1.5%)	19.7

University of Virginia Medical Center

SUMMARY OF OPERATING STATISTICS AND FINANCIAL PERFORMANCE MEASURES

Fiscal Year to Date September 30, 2022 with Comparative Figures for Prior Fiscal Year

Assumptions - Operating Statistical Measures

Discharges and Case Mix Assumptions

Discharges include all admissions except normal new borns

TCH cases are those discharged from the TCH, excluding any Medicare interrupted stays

Oberservations are for billed encounters only

Case Mix Index for All Acute Inpatients is All Payor Case Mix Index from Stat Report

Other Institutional Measures Assumptions

Patient Days, ALOS and ADC figures include all patients except normal new borns

Surgical Cases are the number of patients/cases, regardless of the number of procedures performed on that patient

Assumptions - Operating Financial Measures

Revenues and Expenses Assumptions:

Medicaid out of state is included in Medicaid

Medicaid HMOs are included in Medicaid

Physician portion of DSH is included in Other

Non-recurring revenue is included

Other Institutional Measures Assumptions

Collection % of Gross Billings includes appropriations

Days of Revenue in Receivables (Gross) is the BOV definition

Cost per CMI Adjusted Discharge uses All Payor CMI to adjust

**UNIVERSITY OF VIRGINIA
BOARD OF VISITORS AGENDA ITEM SUMMARY**

BOARD MEETING: December 8, 2022

COMMITTEE: Health System Board

AGENDA ITEM: VII. Signatory Authority Delegation for Health Carousel, LLC
d/b/a Passport USA

BACKGROUND: The Board of Visitors is required to approve the execution of any contract where the amount per year is in excess of \$5M.

DISCUSSION: In accordance with Medical Center procurement policy, the contract listed below exceeds \$5M in spend per year, and thus, exceeds the signatory authority of the Executive Vice President for Health Affairs.

- Health Carousel, LLC d/b/a Passport USA for international staffing and workforce planning

The expense for goods and services purchased through this contract is reflected in the Medical Center's Operating Budget.

ACTION REQUIRED: Approval by the Health System Board, the Finance Committee, and by the Board of Visitors

**SIGNATORY AUTHORITY FOR MEDICAL CENTER CONTRACT FOR
INTERNATIONAL STAFFING AND WORKFORCE PLANNING**

RESOLVED, the Board of Visitors authorizes the Executive Vice President and Chief Operating Officer to execute the contract on behalf of the Medical Center with Health Carousel, LLC d/b/a Passport USA for international staffing and workforce planning.

APPENDICES

Figure 1 – Appendix A

2021-2022 ACGME Resident/Fellow Survey - page 1

Survey taken: February 2022 - April 2022

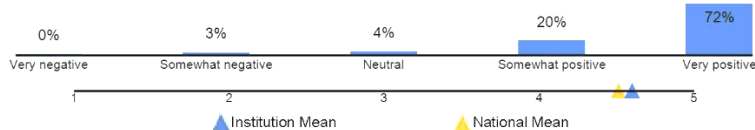
Programs Surveyed 78

510124 University of Virginia Medical Center - Aggregated Program Data

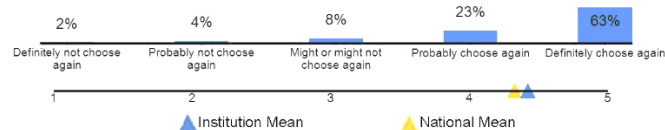
Residents Responded 705 / 737

Response Rate 96%

Residents' overall evaluation of the program



Residents' overall opinion of the program



Resources

Education compromised by non-physician obligations

Impact of other learners on education

Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care

Faculty members discuss cost awareness in patient care decisions

Time to interact with patients

Protected time to participate in structured learning activities

Able to attend personal appointments

Able to access confidential mental health counseling or treatment

Satisfied with safety and health conditions

	% Program Compliant	Program Mean	% National Compliant	National Mean
Education compromised by non-physician obligations	89%	4.5	87%	4.4
Impact of other learners on education	86%	3.6	88%	3.7
Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care	82%	4.2	79%	4.1
Faculty members discuss cost awareness in patient care decisions	95%	3.7	90%	3.6
Time to interact with patients	90%	4.3	88%	4.3
Protected time to participate in structured learning activities	85%	4.3	85%	4.3
Able to attend personal appointments	93%	4.7	91%	4.6
Able to access confidential mental health counseling or treatment	97%	4.9	94%	4.8
Satisfied with safety and health conditions	92%	4.6	87%	4.4

Professionalism

Residents/fellows encouraged to feel comfortable calling supervisor with questions

Faculty members act professionally when teaching

Faculty members act professionally when providing care

Process in place for confidential reporting of unprofessional behavior

Able to raise concerns without fear of intimidation or retaliation

Satisfied with process for dealing confidentially with problems and concerns

Personally experienced abuse, harassment, mistreatment, discrimination, or coercion

Witnessed abuse, harassment, mistreatment, discrimination, or coercion

	% Program Compliant	Program Mean	% National Compliant	National Mean
Residents/fellows encouraged to feel comfortable calling supervisor with questions	92%	4.6	89%	4.5
Faculty members act professionally when teaching	96%	4.7	92%	4.5
Faculty members act professionally when providing care	98%	4.8	96%	4.7
Process in place for confidential reporting of unprofessional behavior	87%	4.5	88%	4.5
Able to raise concerns without fear of intimidation or retaliation	82%	4.2	79%	4.2
Satisfied with process for dealing confidentially with problems and concerns	77%	4.1	75%	4.1
Personally experienced abuse, harassment, mistreatment, discrimination, or coercion	94%	4.7	93%	4.7
Witnessed abuse, harassment, mistreatment, discrimination, or coercion	93%	4.6	92%	4.6

Patient Safety and Teamwork

Information not lost during shift changes, patient transfers, or the hand-over process

Culture reinforces personal responsibility for patient safety

Know how to report patient safety events

Interprofessional teamwork skills modeled or taught

Participate in safety event investigation and analysis

Process to transition patient care and clinical duties when fatigued

	% Program Compliant	Program Mean	% National Compliant	National Mean
Information not lost during shift changes, patient transfers, or the hand-over process	86%	4.2	85%	4.2
Culture reinforces personal responsibility for patient safety	91%	4.5	89%	4.4
Know how to report patient safety events	98%	4.9	96%	4.8
Interprofessional teamwork skills modeled or taught	79%	4.2	78%	4.2
Participate in safety event investigation and analysis	78%	4.1	79%	4.1
Process to transition patient care and clinical duties when fatigued	90%	4.6	89%	4.6

Faculty Teaching and Supervision

Faculty members interested in education

Faculty effectively creates environment of inquiry

Appropriate level of supervision

Appropriate amount of teaching in all clinical and didactic activities

Quality of teaching received in all clinical and didactic activities

Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability

	% Program Compliant	Program Mean	% National Compliant	National Mean
Faculty members interested in education	88%	4.4	84%	4.3
Faculty effectively creates environment of inquiry	88%	4.4	83%	4.3
Appropriate level of supervision	96%	4.8	92%	4.7
Appropriate amount of teaching in all clinical and didactic activities	85%	4.6	81%	4.5
Quality of teaching received in all clinical and didactic activities	99%	4.4	96%	4.2
Extent to which increasing clinical responsibility granted, based on resident's/fellow's training and ability	84%	4.3	82%	4.2

Evaluation

Access to performance evaluations

Opportunity to confidentially evaluate faculty members at least annually

Opportunity to confidentially evaluate program at least annually

Satisfied with faculty members' feedback

	% Program Compliant	Program Mean	% National Compliant	National Mean
Access to performance evaluations	98%	4.9	99%	4.9
Opportunity to confidentially evaluate faculty members at least annually	97%	4.9	98%	4.9
Opportunity to confidentially evaluate program at least annually	95%	4.8	96%	4.8
Satisfied with faculty members' feedback	74%	4.0	75%	4.1

Educational Content

Instruction on minimizing effects of sleep deprivation

Instruction on maintaining physical and emotional well-being

Instruction on scientific inquiry principles

Education in assessing patient goals e.g. end of life care

Opportunities to participate in scholarly activities

Taught about health care disparities

Program instruction in how to recognize the symptoms of and when to seek care regarding:

Fatigue and sleep deprivation

Depression

Burnout

Substance use disorder

	% Program Compliant	Program Mean	% National Compliant	National Mean
Instruction on minimizing effects of sleep deprivation	87%	4.5	85%	4.4
Instruction on maintaining physical and emotional well-being	94%	4.8	94%	4.7
Instruction on scientific inquiry principles	95%	4.8	93%	4.7
Education in assessing patient goals e.g. end of life care	93%	4.7	95%	4.8
Opportunities to participate in scholarly activities	94%	4.8	94%	4.8
Taught about health care disparities	80%	3.6	83%	3.7

87%

Diversity and Inclusion

Preparation for interaction with diverse individuals

Program fosters inclusive work environment

Engagement in program's diverse resident/fellow recruitment/retention efforts

	% Program Compliant	Program Mean	% National Compliant	National Mean
Preparation for interaction with diverse individuals	95%	4.3	95%	4.3
Program fosters inclusive work environment	96%	4.5	97%	4.5
Engagement in program's diverse resident/fellow recruitment/retention efforts	89%	4.0	90%	4.1

Figure 1 – Appendix A

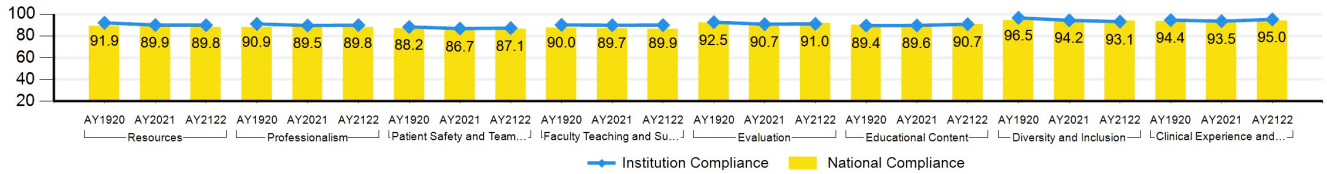
2021-2022 ACGME Resident/Fellow Survey - page 2
 510124 University of Virginia Medical Center - Aggregated Program Data

Survey taken: February 2022 - April 2022

Programs Surveyed 78
 Residents Responded 705 / 737
 Response Rate 96%

Clinical Experience and Education	80-hour week (averaged over a four-week period) Four or more days free in 28 day period Taken in-hospital call more than every third night Less than 14 hours free after 24 hours of work More than 28 consecutive hours work Additional responsibilities after 24 consecutive hours of work Adequately manage patient care within 80 hours Pressured to work more than 80 hours	% Program Compliant	Program Mean	% National Compliant	National Mean
			92%	4.6	91%
		89%	4.6	84%	4.4
		99%	4.9	98%	4.9
		97%	4.9	96%	4.8
		97%	4.8	96%	4.8
		96%	4.8	96%	4.8
		93%	4.6	91%	4.6
		98%	4.9	97%	4.9

Total Percentage of Compliance by Category



Institution Percentage at-a-glance

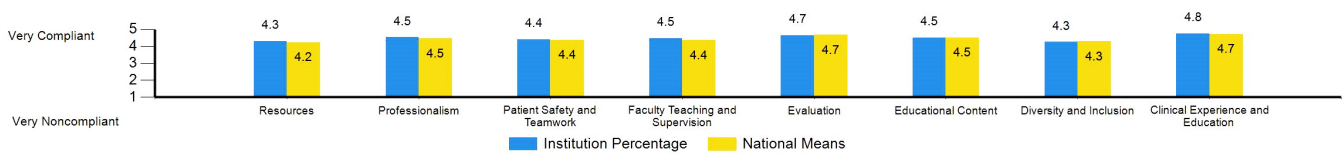
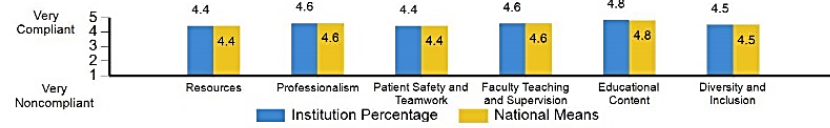
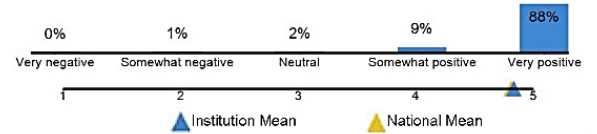


Figure 2 – Appendix B

Institution Percentage at-a-glance



Faculty's overall evaluation of the program



Resources

Satisfied with professional development and education
 Workload exceeded residents/fellows' available time for work

% Program Compliant	Program Mean	% National Compliant	National Mean
97%	4.5	97%	4.5
89%	4.3	89%	4.3

Participated in faculty development and/or scholarly activities to enhance professional skills in:

Education	94%
Quality improvement and patient safety	91%
Fostering your own well-being	90%

Fostering resident/fellow well-being 92%
 Practice-based learning and improvement 92%
 Contributing to an inclusive clinical learning environment 97%

Professionalism

Faculty members act unprofessionally
 Residents/fellows comfortable calling supervisors with questions
 Process for confidential reporting of unprofessional behavior
 Satisfied with process to deal confidentially with problems and concerns
 Personally experienced abuse, harassment, mistreatment, discrimination, or coercion
 Witnessed abuse, harassment, mistreatment, discrimination, or coercion

% Program Compliant	Program Mean	% National Compliant	National Mean
93%	4.5	94%	4.5
96%	4.7	96%	4.7
98%	4.9	98%	4.9
93%	4.6	93%	4.6
95%	4.7	95%	4.7
93%	4.6	95%	4.6

Patient Safety and Teamwork

Information not lost during shift changes, patient transfers, or the hand-over process
 Effective teamwork in patient care
 Interprofessional teamwork skills modeled or taught
 Effectively emphasizes culture of patient safety
 Residents/fellows participate in clinical patient safety investigation and analysis of safety events
 Know how to report patient safety events
 Process to transition patient care and clinical duties when residents/fellows fatigued

% Program Compliant	Program Mean	% National Compliant	National Mean
90%	4.3	90%	4.3
94%	4.6	98%	4.6
88%	4.5	90%	4.5
95%	4.7	96%	4.7
94%	4.8	92%	4.7
100%	5.0	98%	4.9
90%	4.5	89%	4.4

Faculty Teaching and Supervision

Sufficient time to supervise residents/fellows
 Faculty members committed to educating residents/fellows
 Program director effectiveness
 Faculty members satisfied with process for evaluation as educators

% Program Compliant	Program Mean	% National Compliant	National Mean
94%	4.6	94%	4.6
97%	4.8	97%	4.8
93%	4.7	94%	4.7
83%	4.3	83%	4.2

Educational Content

Residents/fellows instructed in cost-effectiveness
 Residents/fellows prepared for unsupervised practice
 Learning environment conducive to education

% Program Compliant	Program Mean	% National Compliant	National Mean
95%	4.8	94%	4.7
98%	4.9	97%	4.8
96%	4.8	96%	4.8

Diversity and Inclusion

Program fosters inclusive work environment (with respect to race, ethnicity, gender, sexual orientation, ability, or religion)
 Engaged by program in efforts to recruit diverse residents/fellows
 Engaged by program in efforts to retain diverse residents/fellows

% Program Compliant	Program Mean	% National Compliant	National Mean
98%	4.6	99%	4.7
95%	4.5	94%	4.4
94%	4.4	93%	4.3

Participated in efforts to recruit diverse:

	% Frequency**
Pre-residency learners, including medical students*	79%
Residents/Fellows*	94%

	% Frequency**
Faculty members*	91%
Other GME staff*	71%

Total Percentage of Compliance by Category

