

The University of Michigan Department of Urology

3875 Taubman Center, 1500 E. Medical Center Drive, SPC 5330, Ann Arbor, Michigan 48109-5330
Academic Office: (734) 232-4943 FAX: (734) 936-8037 www.medicine.umich.edu/dept/urology <http://matulathoughts.org/>



What's New March 17, 2017

Dr. John Stoffel: Reflections on Time as Acting Chair

Urology Department Faculty and Staff

1 Item, 11 Minutes

It's become an annual tradition for the faculty member serving as Acting Chair to share his or her thoughts in the form of a What's New contribution, and today, we have those thoughts from Dr. John Stoffel. Dr. Stoffel has been Acting Chair since the start of 2017 and will end his run in the position when Dr. Bloom returns from sabbatical at the end of March.

I'd like to thank Dr. Stoffel for taking the time to share his experience as Acting Chair with us, as well as his thoughts on the future of the Department. So, without further ado, here's Dr. John Stoffel.

-Eric Anderson

Dr. John Stoffel

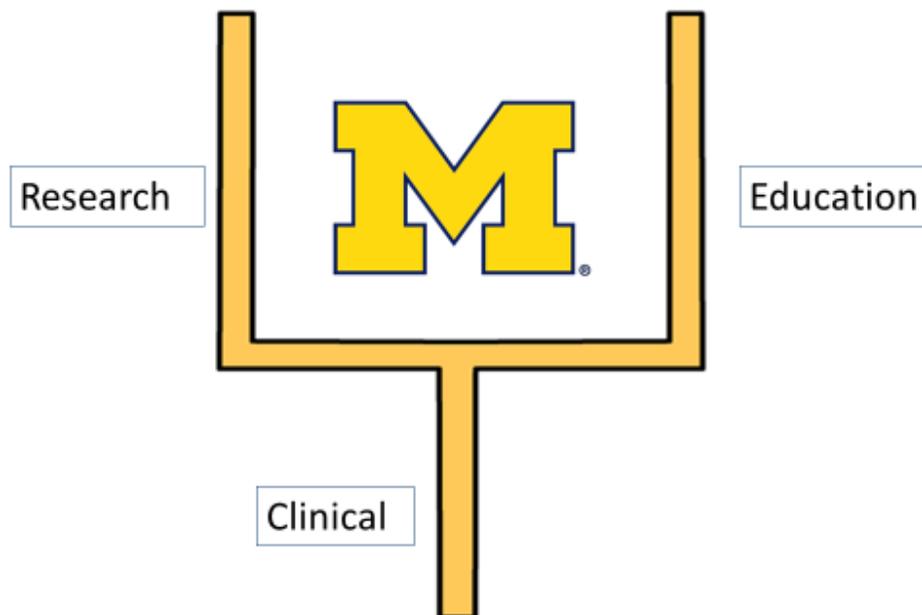
Three months goes by very rapidly! I have been extremely fortunate to have served as Acting Chair in the Department of Urology between January and March. It has been a tremendous experience and I am grateful to Dr. Bloom and the Medical School for the opportunity. I would like to extend a sincere thanks to Sandy Heskett, Malissa Eversole, and Tammie Leckemby for keeping the administrative wheels spinning during my time as acting chair. I would also like to thank the Associate Chairs (Drs. Wei, Hollenbeck, Hafez, Weizer) for their input over the past three months and to all the faculty who stopped by to chat and give opinions about the department. I am even more impressed with the people in our department, if possible, after seeing through a different lens how the department works.

Over the past three months, I have had some time to reflect on what makes this department special and unique. We are a world class department and excel across clinical, research, and educational endeavors. As mentioned above, our people are the department's most valuable resources and great things happen when those people create and embrace a culture of excellence, innovation, collaboration and accountability. Over the next 5 years, the Michigan Medicine Health System will expand and the Department of Urology will need to grow with it. I'd like to share some brief thoughts on how I think that we can collectively grow the department while still supporting our unique culture.

The Goal Post Mission

Academic centers often speak of the tripartite mission (Clinical care, Education, and Research) and depict this mission as a three legged stool with each mission represented as a leg. While I agree with the principle, I think that the stool is not an accurate portrayal of the combined mission because one loses sight of the supporting legs when sitting on top of a stool. Instead, and because this is Michigan, I think of our tripartite mission as an Academic Goal Post:

Department of
Urology



I see Research and Education as aspirational goals for our department. They are highly distinctive missions, reaching upward, and provide direction for our efforts. But both research and education are supported by a solid clinical base which grounds the tripartite mission through a strong commitment to patient care. All parts of the tripartite mission are therefore connected in a way that should be visible in everything that we do. In my

opinion, we are at our best when we are conceptually aiming to reach upwards and be between the goal posts rather than resting on top of a stool.

Mentoring and "The And"

All Urology clinical faculty do some clinical work and something else - research, education, administration, or some of each. Similarly, all research faculty do more than just research and regularly integrate into the fabric of urologic care through translational research, programmatic development, and medical school teaching. It is this "And" that faculty embrace which is a key differentiator for the University of Michigan Department of Urology. Developing the "And" requires not only a departmental commitment to support a collaborative environment, but it also needs mentors who are willing to invest time and effort to develop others. At a senior clinical management meeting in February, Division Chiefs shared mentoring strategies for junior and mid-level faculty. A common theme among divisions included establishing specific mentors for clinical, research, and educational interests. These mentors may be within the division, in a different division, or even be outside of the department or University. Regular meetings with timeline goals were also discussed as effective methods for helping division members find their "And". As the department grows, we will rely even more heavily on developing mentors for our faculty and regular discussions about other innovative mentoring strategies will be even more necessary.

Looking outward

Michigan Medicine is entering a period of expansion and the Department of Urology has been growing to meet this new demand for urologic care. We currently have a clinical presence in several "offsite" ACU's, including Livonia, Brighton, Northville, and Briarwood, and several professional service agreements to staff specialty clinics across Michigan. Within the next two years, Urology will be asked to develop even more "offsite" specialty clinics as more multispecialty ACU's such as West Ann Arbor, Northville 2, and East Ann Arbor continue to open. We will also need to develop outreach plans for the health system's state wide network, which currently include Chelsea hospital, MidMichigan and Metro. However, it is crucial that we continue to support all aspects of our tripartite mission as we expand. As a department, we will need to invest in resources which integrate research and educational needs that fuel "the And" of faculty who staff these important clinics. This will require rethinking physical spaces, offsite resources, and communication systems that will allow us to do all of our work, anywhere in the health system. Maintaining our identity as leaders in all elements of our tripartite mission will let us continue to draw the best students to train in our residency program, recruit and retain new faculty for our department, and serve as the premier tertiary care practice across the region.

Looking inward:

As the department and health system expand, financial pressures will likely increase and challenge our abilities to fund research and education. Regular review of key financial

metrics is therefore critical to preserving our ability to be more than just a clinical practice. For the last year, the department has been using dashboards which help divisions follow clinical access, visits, procedure volume, and index surgical procedures. This helps divisions understand what they are doing and how can this potentially impact educational and research needs. On a departmental level, we have developed a quarterly dashboard which follows patient access, financial margin, patient satisfaction, Lean/Qi projects, and scope of influence. An example of the most recent dashboard is shown below:

M UROLOGY UNIVERSITY OF MICHIGAN HEALTH SYSTEM **Urology Department Dashboard** FY17 through December 2016

Activity (YTD comparison of current year to prior year)			
Metric	FY16	FY17	% Change
New Patient Visits	5,691	6,168	8.4%
Other	13,328	14,309	7.4%
Total Visits	19,017	20,477	7.7%
Total # OR Cases	2,947	3,123	6.0%
Lead Time	82%	79%	-3.7%

Financial			
Metric	FY16	FY17	% Change
Year to Date RVU	78,744	84,352	7.1%
Professional Revenue	\$5,098,430	\$5,527,715	8.4%
Total Revenue	\$10,980,798	\$12,064,618	9.9%
# of Outstanding OR Cases	184	210	14.13%

Satisfaction Metric	FY14		FY15		FY16		% Change	UM Compare	Target
	Value	n	Value	n	Value	n			
Outpatient: Overall Rating of Care	95.5	759	94.2	858	94.1	701	-0.1%	93.6	93
Inpatient Adult: Overall Rating of Care	92.0	769	92.0	119	94.0	216	2.2%	92.6	93
Inpatient Peds: Overall Rating of Care	95.2	21.0	94.2	13	94.7	231	0.5%	93.8	93
Referring Physician (External) (Willingness to continue referring to UMHS)	90.9	55	NA*	0	NA		-	84.0	90
Employee Engagement(Willingness to Recommend)	76.0	48	81.0	74	89.0	99	9.9%	73.0	80
Urology Faculty (Overall Job Satisfaction)	69.6	23	NA*	0	NA		-	68.0	80

Lean/QI Projects	
Metric	
Patient perspective inpatient clinical pathways	Implementation
Adult non-cancer NP access A3	Implementation
OR Capacity A3	Scoping
MiPART Priority Discharge	Implementation
Clinical care coordinator model	Completed

Marketing Metric	FY16		FY17	
	Q3	Q4	Q1	Q2
UofMHealth.org Urology Visits**	6,915	4,804	4,521	2,928
UofMHealth Kidney Stone page visits**	1,642	1,719	561	914
Social Media Engagements	1,491	1,722	4,202	1,208
Articles, Fax Blasts, Press Releases and External Media Story Instances	40	37	32	29
External Site Visits (launched 5/1/15)	59,368	78,309	78,594	60,105

*Survey only conducted every other year

**Estimates based on yearly figures

This information helps the department follow factors which affect departmental finances and gives better visibility on how we can continue to fund all parts of our mission. We will likely develop similar dashboards for research and education to better understand how we can specifically maintain and grow these efforts.

On the Horizon:

The Urology Department has greatly benefited from philanthropic benefactors who have helped fund our efforts over the years. In addition to the many oncologic and health science research programs, examples of programs funded through philanthropy include the Bomalaski Endowed Traveling fellowship for residents interested in pediatric urology and the Lester gift fund which has funded the department's international surgical outreach programs in Ghana and Belize. We are partnering with our new philanthropy officer, Vince Cavataio, to deepen these and other philanthropy relationships with the shared goals of improving the lives of people suffering from urological maladies.

Another departmental goal includes expanding our Diversity, Equity, and Inclusion (DEI) efforts. Recognizing the diversity within the human experience not only expands our ability to deliver care, it also opens doors to innovation and ideas which further advance our field. Efforts that we are starting, such as offering expanded translational services, translated patient information sheets, and transgender education for clinical staff will hopefully continue into larger, more comprehensive DEI programs in research and education.

Thank you for reading this What's New and the opportunity to serve as Acting Chair for the past 3 months. Go Blue.

John