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August 3, 2005

TO: Each Supervisor

FROM: Thomas L. Garthwaite, M.D.
Director and Chief Medical Officer

SUBJECT: **DREW UNIVERSITY'S PROGRESS MEETING DHS REQUIREMENTS AS OUTLINED IN THE MAY 6, 2005 BOARD REPORT**

This report summarizes Drew University's activities to meet Department of Health Services (DHS) requirements, and is provided to your Board in anticipation of the Department's August 16 presentation on options for the future of King/Drew Medical Center.

On May 6, 2005, the Department reported to your Board the set of specific criteria that Drew University had to meet by August 31, 2005. DHS viewed these five criteria as the minimum bar for the Department to begin consideration of a renewal of the Drew University Affiliation Agreement which expires June 30, 2006.

The five requirements were:

1) Appointment of a permanent President and/or Dean of the College of Medicine

On July 1, 2005 Drew University Board of Trustees appointed Thomas Yoshikawa, M.D. to the position of Provost and Chief Operating Officer. Dr. Yoshikawa is also serving as acting President. Dr. Yoshikawa appointed Ronald Edelstein, PhD, as the acting Dean for the College of Medicine. A vigorous search was launched and there are two candidates, both from outside Drew University, who are under consideration. The University anticipates appointing a Dean during the month of August.

2) Completion of a comprehensive evaluation of the organizational structure and administrative leadership of the University, as it pertains to the medical school, and implementation of necessary changes in academic leadership

Beyond the changes noted above, Drew University has restructured its Graduate Medical Education (GME) office and has replaced their Designated Institutional Officer (DIO). Nancy Hanna, M.D., the new DIO, came from the Department of Internal Medicine at Drew University where she was responsible for getting the Internal Medicine Program off Probation and now Fully Accredited with Commendation by the Accreditation Council of Graduate Medical Education (ACGME).

The Board of Trustees has also taken significant steps to evolve its board structure to include individuals with a deep understanding of residency training and medical education. These individuals include:

- Steven Schroeder, M.D., former President of the Robert Woods Johnson Foundation and presently, Distinguished Professor of Health and Health Care, University of California, San Francisco
- Roger Bolger M.D., Former President and Chief Executive Officer, Association of Academic Health Centers, Washington, D.C.
- Thomas Priselac, President and Chief Executive Officer, Cedars-Sinai Health System, which provides extensive residency training programs here in Los Angeles

Other new appointments to the Board include:

- Alejandro Mayorkas, Esq. an attorney with O'Melvany and Myers LLP in Los Angeles
- Richard Veloz, M.P.H., J.D., President and Chief Executive Officer of South Central Family Health Center in Los Angeles

3) Immediate development and implementation of a comprehensive plan to meet all previously identified ACGME deficiencies in preparation for the December 2005 Institutional Review of Training Programs

Drew University has taken three key steps to meet this requirement. First, they have developed an appropriate team of individuals in the organization who see the Institutional Review as the top priority. Dr. Yoshikawa and Dr. Hanna have been in their new roles one month and tremendous improvements have been noted already. Additional staff has been added to the GME office. Also, an outside consultant, Nixon-Peabody, Inc., that specializes in helping academic medical centers meet and exceed ACGME expectations has been retained to provide guidance. The second key step is that the new leadership has completed a thorough review of all the training programs. The University has used this information to map out their ACGME Institutional Review Site Visit Planning efforts, as well as to develop a blueprint for the future of the current residency programs. This document is still under review by the University's Board of Trustees but the Department expects the University to propose a smaller number of residencies. The University is working diligently on their Annual report which is due on August 15. Based on discussions with the University, DHS is hopeful that this report will be completed ahead of schedule. Finally, the University has developed a roadmap that lays out the milestones with timelines that must be accomplished in preparation for the December 2005 ACGME visit.

4) Development and implementation of a program to fill each of the critical clinical department chairs positions which are vacant or held by interim appointment

- Psychiatry – Search completed and an appointment will be made early in August
- Family Medicine – Search completed and negotiations are underway with the final candidate, goal is an appointment in early August
- Neurosciences – The current interim chair has been offered the permanent position and is expected to accept
- Otolaryngology – Chair retired at the end of July 2005, the permanent chair has been offered to a candidate
- Pediatrics – Search committee is active and reviewing candidates
- Surgery – Search committee identified a candidate but contract terms acceptable to all parties could not be negotiated; search continues
- Internal Medicine – Search committee established on appointment of Dr. Yoshikawa to Provost-Chief Operating Officer
- Radiology – Search Committee in the process of being established

5) Compliance with all reporting requirements, both for content completeness and timeliness

Over the past six months, Drew University has made significant improvements with respect to contract compliance. In the fourth quarter of 2004, there were several outstanding reports and deficiencies. In the first quarter there were measurable improvements with only one quarterly report not submitted, but continued issues with timely reporting of ACGME-related communications. During the second quarter of 2005, the University made the major leadership changes outlined above. Since this leadership change, the Department has noted a profound improvement in the frequency and quality of reporting and communications. The Department is pleased to report that Drew University is fully compliant with all required academic reports for the second quarter of 2005, in advance of the August 15 deadline.

Other important actions taken by Drew University beyond the five criteria

Drew University has taken two other very important steps to enhance accountability. First, all faculty are being converted to one year contracts. This allows the Dean's office to actively evaluate each physician's performance on an annual basis and adjust Drew University stipends based on measured performance. The Drew University stipend is no longer a guarantee; it is earned based on meeting and exceeding expectations in clinical care, resident teaching and supervision, and administrative responsibilities. The second major initiative is direct, measurable improvements in resident supervision. The university implemented strict policies that require daily attending notes on all patients as well as co-signatures on call trainee histories and physicals as well as daily notes. Recent independent audits by the Department document significant improvements in documentation of attending supervision.

Summary

Drew University has made very significant strides. The Department sees clear demonstration of new leadership which is open, honest and committed to reform. The Department believes that the University has clearly met four of the five requirements. The Department strongly believes that the

University is on track to meet the requirement for a comprehensive plan to prepare for the ACGME site visit. At this point, the Department is expecting to receive an on time and complete Annual Report, a report on the future of the residency training programs, and the supporting documentation for the King/Drew Medical Center Institutional Review and Site Visit Preparation Timeline. The university is on target to provide all of this information prior to the August 31, 2005 deadline outlined in the May 6 report to your Board. The Department will report full findings to your Board in September.

If you have any questions or need additional information, please let me know.

TLG:bc
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c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors