

April 2015 Vol.16 No.8

DEAN'S MESSAGE: What's On My Mind

hat's on my mind this month is the beginning of Spring, a time for revitalization and to renew a commitment to our ambitious long-term goals set forth in Vision 2020.

During this time of the year, we celebrate Match Day, which was held at every U.S. medical school on March 20th. Match Day is an auspicious occasion when all fourth-year medical students discover where they will be doing their residencies. I am always proud to learn that many of our fourth-year students remain in Maryland, some at the University of Maryland Medical Center (UMMC). Held for the second year at the Hippodrome Theatre, I encourage you to look inside this issue to see highlights of this special ceremony.

It is hard to believe that we are now nearing the end of the second fiscal year of our Vision 2020 plan. We have accomplished much: officially opened the Center for Innovative Biomedical Resources (CIBR); launched the Brain Science Research Consortium Unit; bolstered our clinical programs of excellence; and have two classes of medical students involved in research projects under the Foundations of Research and Critical Thinking course, just a name some examples.

Importantly, I am pleased that we are all working together to further the goals of the research component of Vision 2020, under the umbrella of the Accelerating Innovation and Discovery in Medicine (ACCEL-Med) Initiative.

A major part of ACCEL-Med is our annual "Festival of Science," and the visit from our distinguished panel of external scientific advisors, the Scientific Advisory Council (SAC). I would like to share one of the SAC's comments from the 2014 Festival of Science with you:

"We understand that by 2020, it is your objective to have the UMSOM be among the top-tier of researchintensive medical centers by focusing on 'big science' and, as a consequence, rank in the top 10% of all U.S. medical schools. The SAC heartedly embraces the aspirational goal of the UMSOM to become a leading biomedical research enterprise. The need for such institutions has never been greater, and we believe the school is well positioned as a consequence of its excellent leadership, faculty, resources, and desire to take its place among the top tier."

While the Council's feedback was highly complementary of our programs and progress, they encouraged us to continue to identify, establish and nurture interdisciplinary research projects across the School of Medicine. Because collaboration is a key piece to the success of ACCEL-Med, this edition of the SOMnews highlights a number of faculty partnerships. Under the direction of Terry Rogers, PhD, FACOG, the Executive Director of Research Affairs, these teams are strengthening our entire continuum of research.

I hold biomedical research in such high regard because rigorous basic and translational science lays the foundation for excellent clinical care. Never before has it been so necessary for our healthcare practitioners to stay up-to-date with the advances made in the laboratory. The UMMC would not be the renowned academic hospital that it is today without the breadth and depth of research at the School of Medicine. Our research informs how our clinical faculty approach treating and managing our patients. Providing the highest-quality care is a key goal of our Vision 2020 for clinical care.

Therefore, we have also featured a new Service Excellence Initiative, led by David Schwartz, MD, Director of Clinical Affairs at the School of Medicine, to improve our customer service goals and quality of care. This initiative is focused on fostering greater physician engagement, increasing communication between doctor and patient, and enhancing a better all-around experience for both patients and School of Medicine physicians.

Vision 2020 was established as a means to advance the School of Medicine against a tide of fiscal uncertainty. Although the challenges to academic medicine institutions continue, we, too, will continue to rise to the occasion, bolstered by our faculty members' and students' incredible accomplishments. William Jennings Bryan, one of our country's greatest orators, said that "Destiny is not a matter of chance; it is a matter of choice. It is not a thing to be waited for, it is a thing to be achieved." I am extremely confident that, with everyone working together, we can and will achieve our bold, strategic and, perhaps, audacious, goals.

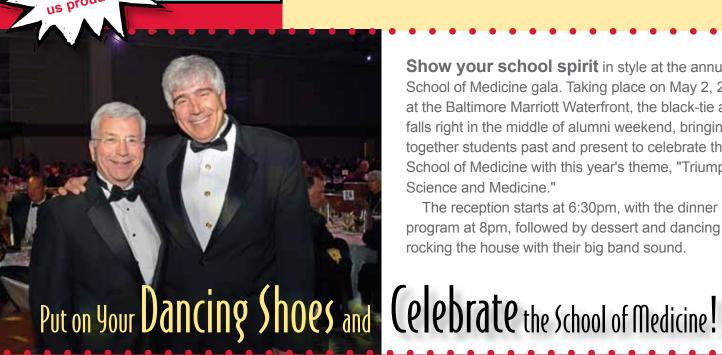
In the relentless pursuit of excellence, I am

Sincerely yours,

E. allest leace

E. Albert Reece, MD, PhD, MBA

Vice President for Medical Affairs, University of Maryland



all obstetrical

cases.

Show your school spirit in style at the annual School of Medicine gala. Taking place on May 2, 2015 at the Baltimore Marriott Waterfront, the black-tie affair falls right in the middle of alumni weekend, bringing together students past and present to celebrate the School of Medicine with this year's theme, "Triumphs in Science and Medicine."

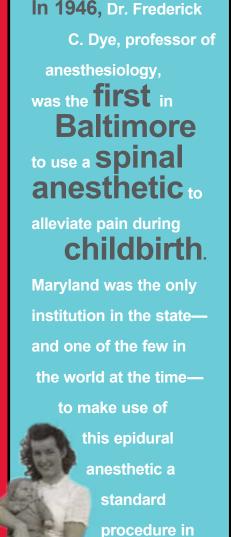
The reception starts at 6:30pm, with the dinner and program at 8pm, followed by dessert and dancing at 9:30. Mood Swings will once again be rocking the house with their big band sound.



Individual tickets are \$200 each. To purchase tickets, please contact Becky Herman, Assistant Director of Special Events, at (410) 706-5057.

SCHOOL OF MEDICINE GALA 2015





Point of Pride

Moving Forward with Vision



Making a TOP PRIORITY:

Patient Care and Service Excellence

WITH THE INCREASING FOCUS in health care on measuring patient experience and satisfaction, one of the clinical care objectives of the Vision 2020 initiative is to make patient-centered, high-quality care a top priority.

To carry out this objective, **E. Albert Reece, MD, PhD, MBA**, Vice President for Medical Affairs, University of Maryland and the John Z. and Akiko K. Bowers Distinguished Professor and Dean, has tasked faculty from the University of Maryland School of Medicine to work with the University of Maryland Faculty Physicians, Inc. (FPI) and University of Maryland Medical Center (UMMC) as part of FPI's ongoing Service Excellence Initiative (SE), with a specific emphasis on improving the overall patient experience.

"Evaluating the patient experience is an interesting endeavor because it involves reviewing the entire process that is involved—from the first call a patient makes to every interaction and encounter they or family members have with faculty and staff," said **David Schwartz**, **MD**, **FACOG**, Director of Clinical Affairs, at the University of Maryland School of Medicine. Dr. Schwartz, who was previously Chairman and Chief of Service of the Department of Obstetrics and Gynecology at Sinai Hospital in Baltimore, was recruited to the SOM to direct the initiative and provide a physician's perspective. In this role, Dr. Schwartz works collaboratively with members of the FPI Service Excellence team to achieve established goals. The other SE team includes Joyce Phillip, Chief Human Resources Officer, Rukiya Wongus, Service Excellence Project Manager, and Karen Lindenmeyer, Director Ambulatory Operations who have devoted a significant amount of time over the past seven years towards moving this initiative forward.

"There is a certain amount of complexity involved in this," he said. "It is not quite as simple as fixing one area. There is a whole process of focusing on the training and development that is currently in place and reviewing and enhancing the various steps in the delivery of care."

Dr. Schwartz described some of the key steps that they have been reviewing. "From the moment the phone is answered, patients start making judgements about their treatment," he said.

The Patient Calls...

- Did someone respond in a pleasant manner?
- > Was I able to get a timely appointment?
- Were issues such as convenience, transportation, and getting time off from work addressed and accommodated where possible?
- > Was I able to receive the information I was seeking?

The Patient Arrives...

Once the patient arrives for the appointment, there are several variables that he/she is considering.

- ➤ Is the office's appearance appealing?
- Was the staff friendly?
- ➤ Was there a long wait?
- > Overall, was my visit an easy or difficult experience?



"Each of these contact points creates an impression, and it is either favorable or unfavorable," said Dr. Schwartz. "It's not only a cosmetic impression, but the flow of care is important."

Starting With Data

The faculty practice SE team brought in Press Ganey, a national research firm that measures patient satisfaction, to provide specific information from other faculty practices and hospitals, both regionally and around the country, about what makes patients happy and

unhappy. Armed with this information, FPI began to develop additional training for physicians and staff, while maintaining quality in the areas where they were already achieving a high level of patient satisfaction.

Dr. Schwartz pointed out that the enhanced training comes at the right time.

"Starting in 2016, every physician will be in a national database where patients can go to see how they perform," Dr. Schwartz says. After 2017, these doctor rankings will determine how much they will be paid by Medicare for their services. "A certain percentage will be at risk of seeing a decline in payment if these performance standards are not achieved."

Pilot Program

Building from this data, the SOM/FPI launched a pilot program to look at certain aspects of patients' experience. These dealt primarily with items related to physician leadership and management, physician-patient communication and improving access.

For leadership and management, the medical directors of practices were presented with performance guidelines and training modules, known as "Oz Principle Accountability Training," focusing on accountability and expectations, as well as helping employees, primarily physicians, improve in these areas.

Communications Training

Next came communications training for the physicians, to enhance their ability to understand how to most effectively interact with patients. Videos presented specific points related to the physician-patient interaction process, with training on critical patient situations.



- How do you open and close a patient encounter?
- How do you break bad news to a patient?
- ➤ How do you communicate when you have to enter electronic data at the same time you are talking to the patient?
- How do you show you are empathetic toward a patient who is having difficulty with a diagnosis?

Developing Solutions to Providing Greater Access to Care

Part of the training was making physicians aware of how important ready access to care was to patients. Patients expressed that it often takes too long to get appointments in many of the practices. Physicians were encouraged to consider how to increase the availability of convenient appointment times.

"We evaluated the challenges here and recommended working closely with the department chairs to apply resources and offer flexibility in reconfiguring schedules for attending physicians in the clinic to cover the timeslots with the highest demand. This has already led to significant improvements in patient satisfaction in this area," Dr. Schwartz said.

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Implementation

This process has yielded some key insights for medical directors and physicians as it relates to the existing training programs as well as those that need to be developed. The School is now working on training a team of trainers to help implement all of these improved processes over the next 12 to 18 months.. "This will be an in-house School of Medicine/FPI training program that will go around systematically," Dr. Schwartz said.

"Ultimately, it will take work, but we are confident that the results will be positive for both patient and provider as we begin to incorporate this system in the coming months," he added. "We have extremely capable faculty, nurses and staff, and the goal for all of us is to have patients feel as comfortable as possible by experiencing excellent service at every step of their engagement with us."

2015

Teaming Up for Grant SUCCESS



COLLABORATION between biomedical research investigators has become increasingly important as the pool of public—and private—funding for research has diminished. Interdisciplinary research teams, especially those that blend clinical and basic science, will have significant advantages when applying for the large federal grants. One of the key priorities for the School of Medicine is fostering joint projects among the diverse groups of researchers at the School and across the

University System of Maryland (USM).

E. Albert Reece, MD, PhD, MBA, Vice President for Medical Affairs, University of Maryland and the John Z. and Akiko K. Bowers Distinguished Professor and Dean, University of Maryland School of Medicine, has encouraged School of Medicine faculty participation in a number of interdisciplinary seed funding programs over the last several years. Although these internal seed grant competitions have benefited the teams with the top proposals, even the runners-up have reaped rewards simply from applying.

Collaboration Across the School of Medicine

In 2013, the School of Medicine created a Dean's Challenge Award competition, which encouraged senior scientists from different departments, centers, institutes and programs to collaborate. The Dean's Challenge Award provided the support needed to generate pilot data for new and ambitious research projects intended to address some of the toughest, "big science" questions in medicine today.

The response from the faculty was incredible. Nineteen interdisciplinary projects were submitted for funding consideration. Beyond the four that could be funded by the Dean's Challenge Award, a number of the other teams (including those described in the sidebar below), have continued their research collaborations and are continuing to pursue the same grant goals.

"The program spurred new partnerships between faculty, many of whom may never have considered collaborating, if not for this opportunity," explained **Terry Rogers, PhD**, Executive Director of the Office of Research Affairs which oversees the School of Medicine grants and contracts portfolio. "We've been pleasantly surprised to see many of them keep working together."

Dr. Rogers has helped several teams find alternate funding sources for pilot projects, and some of the teams have applied for NIH funding.

Collaboration Across the University System

Dr. Rogers' office also helps manage seed grant programs that bring together teams of researchers across the USM. Two key system-wide interdisciplinary funding programs are the UMB-UMBC and UMB-UMCP Seed Grant competitions. These research initiatives were developed with the goal of establishing, enhancing and promoting long-term partnerships between faculty at the University of Maryland, Baltimore (UMB), the University of



The program spurred new partnerships between faculty, many of whom may never have considered collaborating, if not for this opportunity. ~Dr. Terry Rogers

Maryland, Baltimore County (UMBC) and the University of Maryland, College Park (UMCP).

Funded on a yearly basis, all projects must include at least one principal investigator from UMB and UMBC or UMCP, depending on the program. These competitions have netted a significant return on investment over the last several years.

As with the Dean's Challenge Award competition, many teams have applied for UMB-UMBC or UMB-UMCP Seed Grants, but only a few have received support due to limited funds. Additionally, a number of the teams who have not received awards have continued to collaborate, seeking alternate seed funding from foundations or their departments to pursue their NIH grant aspirations.

With the application deadline approaching for this year's UMB-UMCP Seed Grant competition, Dr.

Rogers expects to be working with many more interesting teams in the near future.

Looking Ahead

Over the last year, the School of Medicine's Office of Research Affairs has increased its efforts to bolster interdisciplinary research, outside of special seed grant funding programs. A third mechanism for bringing research teams together is notifying faculty of upcoming Requests for Applications (RFAs) from the NIH.

"If the NIH announces a new big research award, such as a program project grant or cooperative agreement, we send it to all interested parties as soon as possible so that our investigators can be among the first to apply," Dr. Rogers explained.

Among the large grant opportunities currently being pursued by School of Medicine faculty are RFAs for studies on alcohol abuse and birth defects.

"Multi-PI projects are driving growth in research," said Dr. Rogers. "Our faculty are seeing the value in collaborating; they're excited about it; and the projects coming out of these new partnerships are stimulating and interesting."

"I have to give Dr. Reece a great deal of credit for creating the Dean's Challenge Award, which provided the right motivation to have our talented faculty prioritize their time, sit down and discuss how they might work together," he added. "Collaboration is something that the Dean has declared as a primary goal for the School of Medicine, and the Office of Research Affairs is making a major commitment to nurture this vital objective."

Once Formed, Collaborative Research Teams Continue to Work Together...

ACTOSS SOM Departments...

One of the groups not funded by the Dean's Challenge Award has already submitted a major grant proposal to the NIH for their project, "Environmental Modification of Functional Neural Connectivity to Improve Neurodevelopmental Outcomes Among Pre-Term Infants." This research team is composed of both basic and clinical scientists, Alexandre Medina de Jesus, DSci, Associate Professor, Department of Pediatrics; Scott Thompson, PhD, Professor and Chair, Department of Physiology; Rao Gullapalli, PhD, MBA, Professor, Department of Radiation Oncology & Nuclear Medicine; and Cynthia Bearer, MD, PhD, Mary Gray Cobey Professor of Neonatology, Professor of Pediatrics and Director of Pediatric Neonatology.

...and the University System

Among those projects not funded in the most recent UMB-UMBC Seed Grant competition is one led by Jennifer Hopp, MD, Associate Professor, Department of Neurology at the School of Medicine, and Tinoosh Mohsenin, PhD, Assistant Professor of Computer Science and Electrical Engineering at UMBC. However, Dr. Rogers worked with the researchers' departments to get the start-up funding they needed to collect preliminary clinical data for a large federal grant. He expects that their proposal for "Wearable Multimodal System for Monitoring of Epilepsy Patients" will go to the NIH in the near term.





Match Day at the University of Maryland School of Medicine: A Prescription for Anticipation and Emotion

t was a day filled with emotion at Baltimore's historic Hippodrome Theater on March 20, when Match Day was held for the Class of 2015 from the University of Maryland School of Medicine. As the clock struck noon, medical students here and around the country received an envelope telling them where they are going to be doing their residency training in the years to come. The hours before the event were filled with anticipation.

"I'm a little nervous and also very excited," said Nick Phelps, who started medical school at the age of 27 after first pursuing his dream of being a professional musician, touring the U.S. and Europe as a guitarist. But he had another deeply rooted calling. "I have always had a love for medicine. My parents are both physicians, so I grew up around medicine, seeing them work, and both of my siblings are now doctors. I grew up in a medical family, so it's kind of in my blood." Nick was happy with his match to the Baylor University Medical Center in his home state of Texas, where he will continue his training in diagnostic radiology.

"There a good air of anxiety," said Negar Yaghooti, as she prepared to find out where she will spend the next three years as an internal medicine resident. Negar was ecstatic about her match to the University of Southern California, where she will

work in a county hospital treating the underserved. "I am really excited to be in that forefront finally, to be the one to provide that care."

During the ceremony, students came to the stage dancing to the sound of a song they selected for the occasion. It was a joyous event for family and friends, as well as the students. This year, University of Maryland students matched at 60 different hospitals in 26 states. Thirty-five members of the Class of 2015 will stay in the state of Maryland for their residency training.

Nationwide, more than 41,000 U.S. and international students applied for one of the approximately 30,000 first-year residency positions offered in this year's Main Residency Match. Even though more students than ever are enrolling in medical schools, the number of available residency spots remains unchanged, which means the United States is still facing a significant physician shortage, according to the Association of American Medical Colleges (AAMC).

The physician shortage is keenly felt by underserved patients in urban health care settings. That's where Vince Hill plans to practice medicine. Hill matched to Georgetown University Hospital in Washington, DC, where he will specialize in internal medicine and pediatrics. "I am just so glad to have been able to accomplish all this at Maryland. I am glad to have had the

relationships that I have had with faculty and friends here. I am really happy."





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- Science Behind Acupuncture
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Questions? CIMEvents@som.umaryland.edu

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