

**ZSFG CHIEF OF STAFF REPORT**  
**Presented to the JCC-ZSFG on February 22, 2022**  
**February 2022 MEC Meeting**

**CLINICAL SERVICE REPORT:**

Department of Urology Biennial Report – Benjamin Breyer, MD, Chief

1. Mission – The ZSFG Department of Urology is committed to offering the highest quality urologic care, innovative research programs, community engagement and an outstanding education for future leaders in the field.
2. Scope of the Clinical Service
  - a. Service Hours – On-call coverage is offered 24/7/365. OR services are performed three days a week, and clinic hours are available about four days a week.
  - b. ICD Cases- The residents are offered community urology which is not seen in other sites. The top 10 ICD codes include kidney stones, BPH (benign prostatic hypertrophy), urinary symptoms, prostate cancer screening, and treatment of prostate, bladder, and kidney cancer.
  - c. Volume of Visits
    - There were about 3.5 K patient visits in FY20/21 after a significant decline in FY19/20 due to the pandemic. The rebound in volume has been managed with ongoing efforts to improve access.
    - OR Usage- There was also a substantial decline in OR usage during the pandemic, but the volume has been increasing.
  - d. Top 10 Procedures – They include cystoscopy (most common), ureteroscopy, prostate biopsy, bladder tumor surgeries, and multiple stone surgeries.
3. Faculty and Residents
  - a. Faculty
    - Chair of UCSF Urology – Dr. Peter Carroll is the acting Chair while Dr. Raj Pruthi is on leave. Dr. Carroll was previously the Chair of UCSF Urology for 24 years.
    - New Faculty – Drs. David Bayne and Christi Butler (previous residents at ZSFG) have returned to be attending providers at ZSFG.
    - FTE – All faculty has partial appointment which allows offering of specialty care in all sub-disciplines of urology.
  - b. Residents
    - Education - 4 residents per year; six-year program; 50% female and 40% underrepresented in medicine; 25% of educational time spent at ZSFG
    - Rankings – Per Doximity’s 2021-2022 Residency Navigator rankings, UCSF Urology Residency Program ranked second in the nation and first in California/West Coast.
    - Yearly Number of Residents – There were 3 seats annually since the 70s. In 2022, there are 4 seats.
    - Multi-Institutional Collaborative Resident Education – Along with 10 other similar institutions in the county, UCSF led the development of a curriculum in urology by devising a didactic curriculum during the pandemic. There was widespread interest on collective materials.
    - Conferences and Other Programs

- Educational Conferences- These enrich the residents’ experience. They include didactic offerings and hands-on skills labs.
- Wellness and Leadership curriculum – The Leadership Series include didactic lectures, mentor college, and journal clubs. The Wellness Curriculum provides sessions on ergonomics, implicit bias, and others.
- Resident Well-Being – The residents are supported to do social events and retreats for their well-being.
- UReTER (UnderRepresented Trainees Entering Residency) Mentorship Program – This is a successful mentoring program proposed by the residents. It is housed at UCSF and supported by the Department’s educational team. Medical students (across the country) who are underrepresented in medicine/urology are matched with a resident mentor. There are about 100 resident mentors across the country.
- Visiting Scholars Program – Underrepresented medicine students spend a sub-I (sub-internship) and benefit also from mentoring activities.
- New Surgical Training and Simulation Center – The program provides multiple individualized learning stations to allow residents to pursue simulated learning for minimally invasive surgical techniques.

#### 4. Performance Improvement and Patient Safety Initiatives

##### a. Quality Initiatives –

- The structure and attending involvement have significantly changed over the years, leading to improved quality of care.
- M&M, Cancer Review, Trauma Review, various committee work (PIPS, OR, MEC, etc.).
- Daily huddle before cases, along with weekly uroLean quality huddle

##### b. Published projects – (1) opioid use in outpatient surgery environment, (2) patient satisfaction in clinic, and (3) review article highlighting 30 different quality actions of uroLean initiative

##### c. Metrics – On-time starts were analyzed. Also, stewardship of resources were reviewed. One project on this was a study of opened supplies during a case which ended up being unused; a checklist was developed and greatly reduced the amount of wastage.

##### d. Reappointment – Coordination is done with Credentials Committee and others to help improve surgical OPPE process and alignment of metrics with ACGME core competencies.

#### 5. Research

##### a. Portfolio – The Department does not have extensive research portfolio but is very productive with its number of faculty members.

##### b. Funding Sources – The Department ranks first in NIH funding. Funding is also provided by diverse sources.

##### c. Key Projects - Forty papers were published in 2021 that included the following:

- Use of cadaveric models, 3D printing, and computational fluid dynamics to understand the morphology of the distal penis and how it impacts flow characteristics
- Racial distribution of urology workforce
- Bicycle trauma injuries and hospital admissions
- Morbidity and mortality caused by noncompliance with California hospital licensure

#### 6. Financial Report

- a. Physician Salary Rates –The Department is a lean organization with modest reserve of about \$250K. The Department benefitted from the recent increase in affiliation agreement distribution by reaching 75 percentile of MGMA (Medical Group Management Association) median.
- b. Payor Mix and Collections – Though the learning involved in EPIC took some time, the Department is managing well. The pandemic led to a slight negative impact which was similarly experienced by other surgical departments.

## 7. Summary

- a. Strengths- They include the people (mission-driven, dedicated, cohesive group, attending engagement), world-class department, curiosity-driven research, ZSFG highlight residency rotation, and commitment to community.
- b. Challenges- They include service vs education balance, delay in building Cysto Suite, attendings across sites (challenge and strength), and data/direction.
- c. Goals- They include uroLean (efficiency in clinic/OR, patient/provider satisfaction), revenue capture, seeking alignment with hospital priorities, simulation curriculum, and an oncology recruitment.