



December 31, 2020

## NOTICE

The Board of Directors of the Kaweah Delta Health Care District will meet in an open Academic Development Committee meeting at 3:30pm on Wednesday January 6, 2021 in the Kaweah Delta Medical Center – Support Services Building Granite Room (4<sup>th</sup> Floor) 520 West Mineral King Avenue or via GoTo Meeting from Internet link - <https://www.gotomeet.me/CindyMoccio/academicdevelopment>. You can also dial in – [224-501-3412](tel:224-501-3412) / Access Code: 553-617-173.

Due to COVID 19 visitor restrictions to the Medical Center - the disclosable public records related to agendas can be obtained by contacting the Board Clerk at Kaweah Delta Medical Center – Acequia Wing, Executive Offices (Administration Department) {1st floor}, 400 West Mineral King Avenue, Visalia, CA via phone 559-624-2330 and on the Kaweah Delta Health Care District web page <http://www.kaweahdelta.org>.

KAWEAH DELTA HEALTH CARE DISTRICT  
Garth Gipson, Secretary/Treasurer

Cindy Moccio  
Board Clerk, Executive Assistant to CEO

DISTRIBUTION:  
Governing Board  
Legal Counsel  
Executive Team  
Chief of Staff  
<http://www.kaweahdelta.org>

# **KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS ACADEMIC DEVELOPMENT**

Wednesday January 6, 2021

Kaweah Delta Medical Center / Support Services Building  
520 West Mineral King – Granite Room (4<sup>th</sup> floor)

Internet link - <https://www.gotomeet.me/CindyMoccio/academicdevelopment>

You can also dial in – [224-501-3412](tel:224-501-3412) / Access Code: 553-617-173

ATTENDING: Directors: Lynn Havard Mirviss (chair) & Ambar Rodriguez; Gary Herbst, Chief Executive Officer; Lori Winston, M.D., Vice President Medical Education & Designated Institutional Officer; Amy Shaver, Director of GME; James McNulty, Director of Pharmacy Services, S. Oldroyd, DO; Chris Patty, Director of Research, Cindy Moccio, Executive Assistant to CEO & Board Clerk, Recording

## **OPEN MEETING – 3:30PM**

**CALL TO ORDER** – *Lynn Havard Mirviss*

**PUBLIC / MEDICAL STAFF PARTICIPATION** – Members of the public wishing to address the Committee concerning items not on the agenda and within the subject matter jurisdiction of the Committee may step forward and are requested to identify themselves at this time. Members of the public or the medical staff may comment on agenda items after the item has been discussed by the Committee but before a Committee recommendation is decided. In either case, each speaker will be allowed five minutes.

1. **EMERGENCY MEDICINE RESIDENCY ANNUAL PROGRAM REVIEW** – Review of accreditation status, current citations, performance on institutional metrics, and SWOT analysis.

*Lori Winston, M.D., Vice President Medical Education & Designated Institutional Officer*

2. **CALMEDFORCE GRANT** – CalMedForce dedicates voter-approved, state tobacco tax revenues from Proposition 56 to train physicians and help California address its growing physician shortage.

*Lori Winston, M.D., Vice President Medical Education & Designated Institutional Officer*

3. **OFFICE OF RESEARCH ANNUAL UPDATE** – IRB Research Education & Publication.

*Chris Patty, RN, Director of Research*

**ADJOURN** – *Lynn Havard Mirviss*

*In compliance with the Americans with Disabilities Act, if you need special assistance to participate at this meeting, please contact the Board Clerk (559) 624-2330. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to the Kaweah Delta Health Care District Board of Directors meeting.*

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*Mike Olmos – Zone I  
Board Member*

*Lynn Havard Mirviss – Zone II  
Vice President*

*Garth Gipson – Zone III  
Secretary/Treasurer*

*David Francis – Zone IV  
President*

*Ambar Rodriguez – Zone V  
Board Member*

**MISSION:** *Health is our Passion. Excellence is our Focus. Compassion is our Promise.*

# KAWEAH BOARD OF DIRECTORS ACADEMIC DEVELOPMENT COMMITTEE

January 6, 2021



# EMERGENCY MEDICINE - CONTINUED ACCREDITATION JAN 9, 2020

Self Study July 1, 2026

## ZERO CITATIONS!

Commended for substantial compliance with  
ACGME requirements

## Mission:

To educate compassionate, skilled emergency  
physicians who apply evidence-based care &  
advocate for a diverse population. Ready to be  
everyone's doctor, all the time.

# EM PERFORMANCE ON INSTITUTIONAL INDICATORS



Step 3 pass rates



In-training Exam & Boards  
Pass Rates



Faculty Survey

1. Faculty members act unprofessionally - attributed to nonEM faculty physicians



Resident Survey Progress  
Report

1. Able to raise concerns without fear or intimidation, Satisfied with process for dealing with problems and concerns
2. Faculty effectively creates an environment of inquiry
3. Program fosters inclusive work environment, Diverse resident recruitment and retention

# EMERGENCY MEDICINE

Major changes: Started ultrasound fellowship, new Wilderness elective, and shortened OB to 2 wks & added 2 wks of RRT

## Strengths

Strong PD, ED Medical Director, core faculty & structure  
Emphasis on Wellness  
Responsiveness of program based on feedback  
Innovative programs - Street medicine, Wilderness Medicine, Advanced Ultrasound, SIM/ MedEd & US Fellowships

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## Weaknesses

Residents don't value their QIPS curriculum  
Poor outpatient care coordination  
COVID isolation threatens Wellness  
Faculty ability to give feedback

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## Opportunities

Kaweah ATLS (advanced trauma life support)  
Expand education collaboration throughout KDHCD  
Develop an Alumni Association  
Increase Med Student rotations w/ research, US, Street Med  
VCH partnership for recruiting a Peds EM doc

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## Threats

Increasing numbers of new EM residencies across California  
COVID threatens health of frontline staff  
Financial impact: COVID, Medicare cuts & balanced billing legislation  
PD Dr. Herman planning to retire June 2022

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# Annual Report

## 2019–2020

Proposition 56 Tobacco Tax  
\$40 million annual funding to UC  
California for increasing the number  
of primary care and emergency  
physicians trained in California. This  
funding is to sustain, retain, & expand  
GME programs to achieve the goal of  
increasing the number of primary &  
em physicians in Ca based on  
demonstrated workforce needs &  
priorities

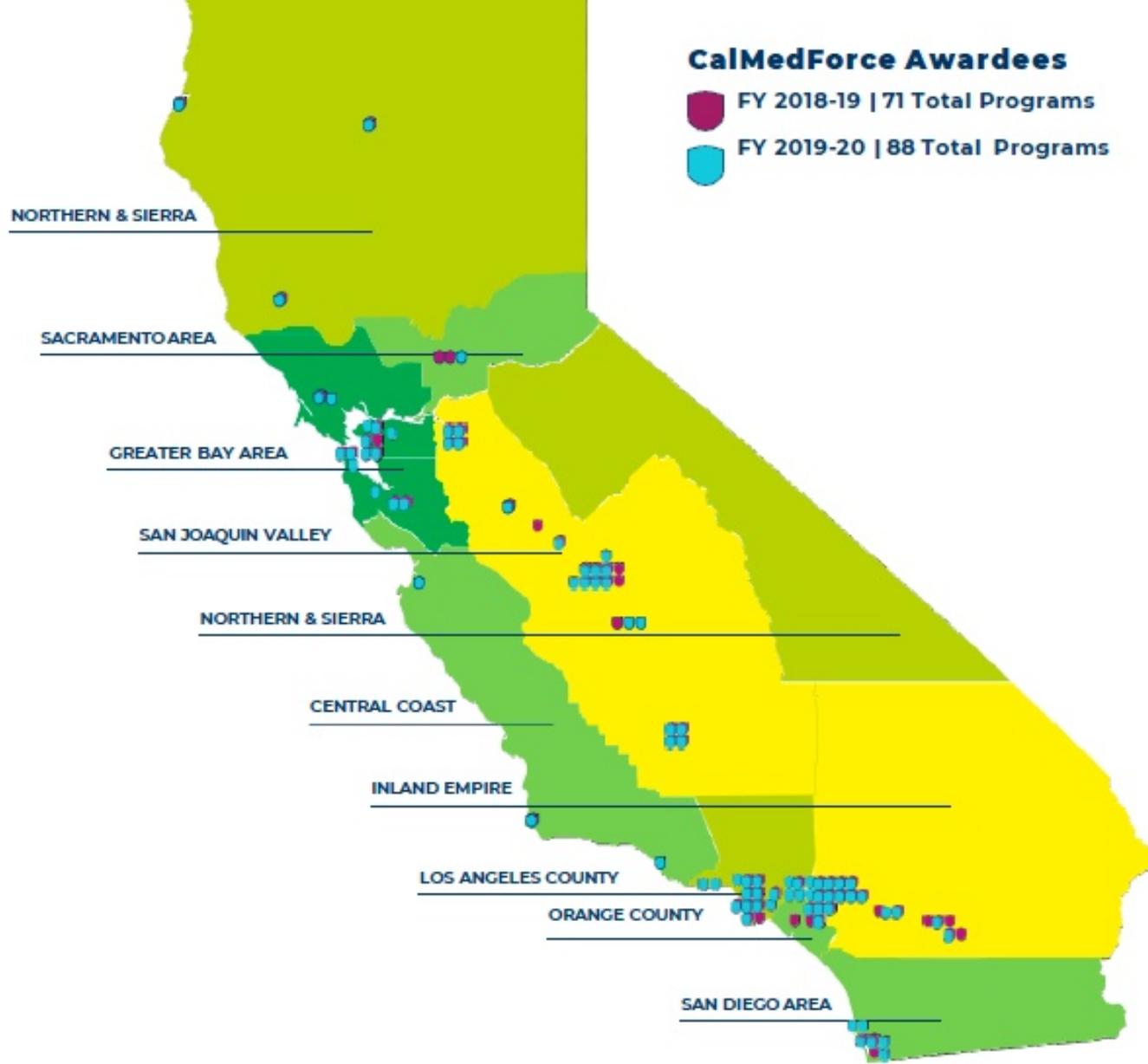
	Applications		Resident Positions		Funds	
	Requested	Awarded	Requested	Awarded	Requested	Awarded
Family Medicine	53	37	244	51	\$41,370,000	\$9,630,000
Internal Medicine	22	17	99	38	\$16,800,000	\$7,110,000
Obstetrics & Gynecology	13	12	55	32	\$11,860,000	\$7,140,000
Pediatrics	13	11	61	43	\$9,795,000	\$7,065,000
Emergency Medicine	15	12	69	34	\$13,535,000	\$7,140,000
<b>Total</b>	<b>116</b>	<b>89</b>	<b>528</b>	<b>198</b>	<b>\$93,360,000</b>	<b>\$38,085,000</b>

### FY 2019-20 Awarded Positions by Type

	New	Existing	Expanding
Family Medicine	22	18	11
Internal Medicine	14	12	12
Obstetrics & Gynecology	3	17	12
Pediatrics	5	30	8
Emergency Medicine	14	12	8
<b>Total</b>	<b>58</b>	<b>89</b>	<b>51</b>

## CalMedForce Awardees

- FY 2018-19 | 71 Total Programs
- FY 2019-20 | 88 Total Programs



## Number of Physicians per 100,000 population by Health Care Region



Recommended supply of primary care physicians is 60-80 per 100,000 population.

<b>Questions</b>	<b>Scoring</b>
<p>Is your training program in a primary care health professional shortage area (HPSA), either a geographic HPSA or automatic facility HPSA, as defined by the federal Health Resources Services Administration (HRSA)? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No If your training program is located in a HPSA area, please provide your primary care HPSA score based on geographic area or automatic facility HPSA score.</p> <p><a href="https://data.hrsa.gov/tools/shortagearea/hpsa-find">https://data.hrsa.gov/tools/shortagearea/hpsa-find</a></p>	<p>2 points total</p> <p>1 point = HPSA (1-12) 1 additional point = high HPSA score (13-25)</p>
<p>Check the following boxes that best describes your program:</p> <p><input checked="" type="checkbox"/> I am a new program that has received ACGME and/or AOA accreditation, but has not yet graduated the first cohort of residents. <input checked="" type="checkbox"/> I am an existing program with the same number of ACGME and/or AOA approved residency positions as the previous academic year.</p>	<p>5 points total*</p> <p>5 = new 3 = expanded 2 = existing</p>

Please provide data on the payor mix for the patient population of your primary ACGME-approved continuity clinic and/or emergency department. If your program is in a primary care specialty and you do not have a primary ACGME-approved continuity clinic then provide data on the patient population at the primary site through which primary care residents rotate.

Points will be awarded based on the percentage of the payer mix that is collectively Medi-Cal, dual eligible, indigent, and uninsured, as follows (see the glossary for definitions):

Up to 20% = 2 point

Up to 40% = 4 points

Up to 60% = 6 points

Up to 80% = 8 points

+80% = 10 points

# KAWEAH CALMEDFORCE AWARDS

- 2018-2019

\$0

- 2019-2020

EM \$150k

FM \$150k

- 2020-2021

EM \$180k

FM \$150k



Questions?



# KDHCD Office of Research Board Academic Subcommittee January 7, 2021

*More than medicine. Life.*

# Welcome to the Office of

- Chris Patty, DNP, ~~Researcher~~ **Researcher**
- Mary Anne Vandegrift, MSN, RN Coordinator
- Karen Bontekoe, MLS Medical Librarian
- Jessica Esteves, Administrative Assistant

[researchoffice@kdhcd.org](mailto:researchoffice@kdhcd.org)

[irb@kdhcd.org](mailto:irb@kdhcd.org)

x5200



# Mission

- **Human Subjects Research *conduct***
- **Research *administration***
  - **Institutional Review Board (IRB)**
- **Research *education and training***
  - **Delivery of GME research curriculum**
  - **Consultation for all KDHCDC investigators**

# KDHCD Mission, Vision and Pillars Alignment

- *Empowerment through education* means that we advance our knowledge of how research
- Our *vision* of “world-classness” requires research and publication

# Research

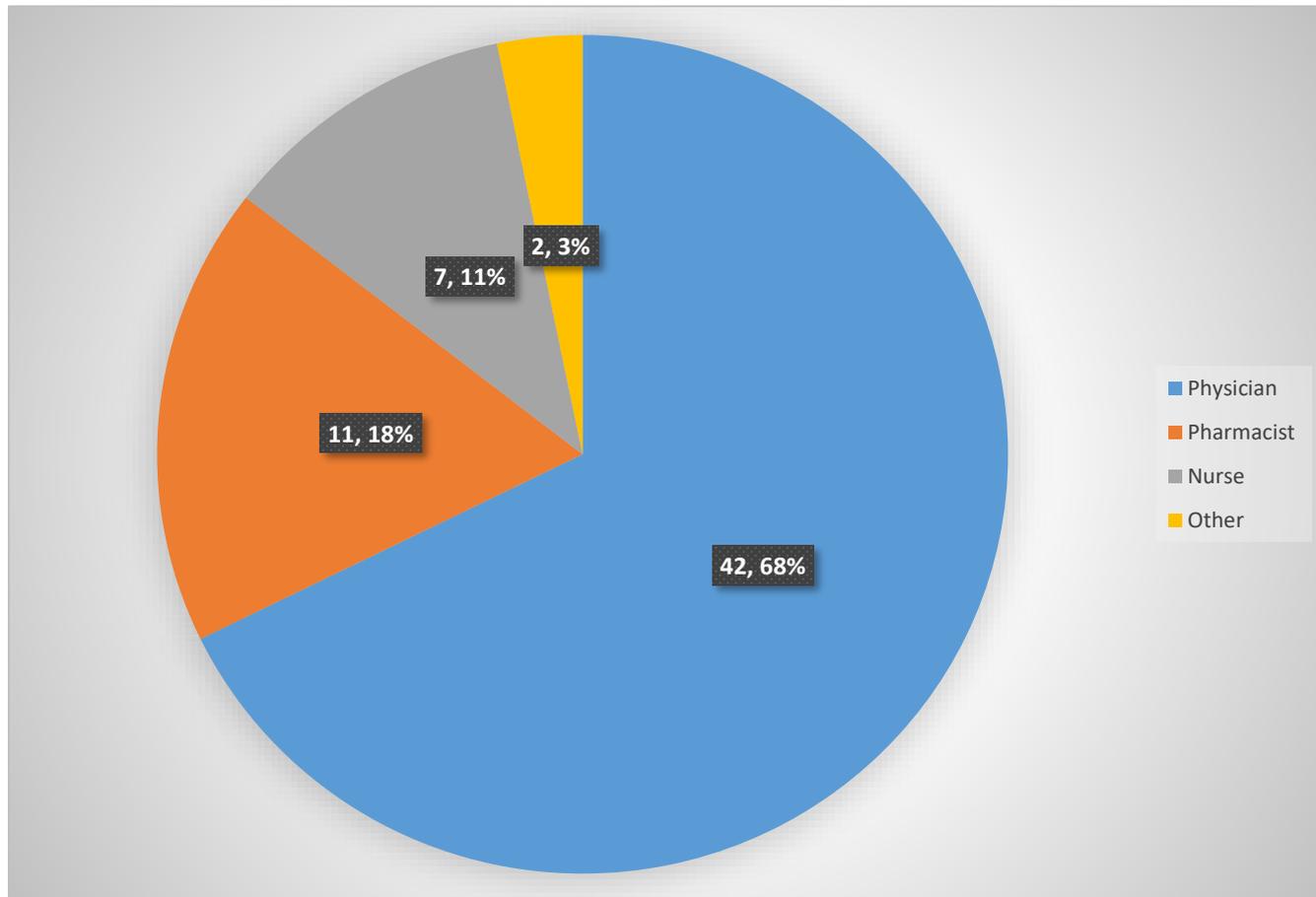
**“An investigation involving interaction with living human beings, their identifiable data or biospecimens”**

**Research is federally regulated**

**HHS/OHRP - 45 CFR Part 46  
FDA – 21 CFR**

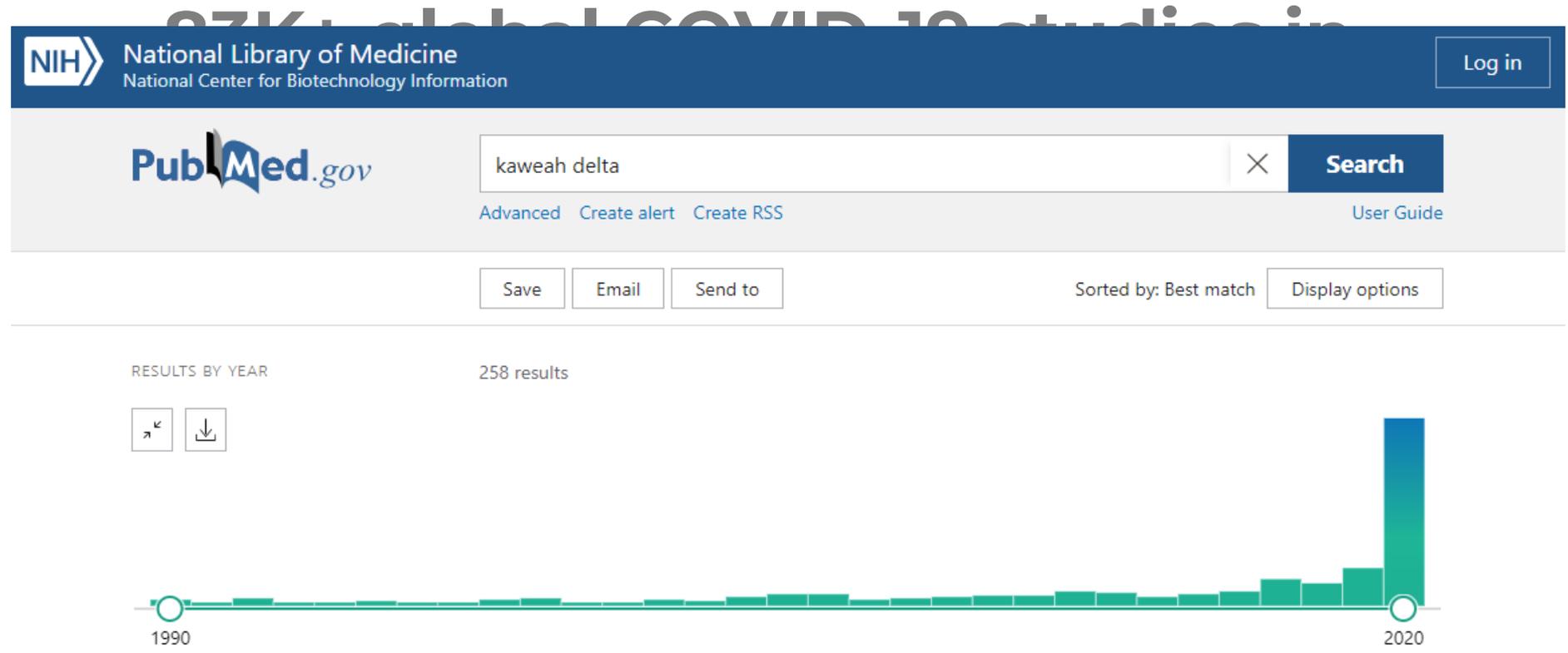
# Conduct

- 62 active research studies
- 34 initiated in 2020 (every 11 days)



# KDHCD Publication Stats

- 258 publications since 1990
- 52% of all KD publications (134) in 2020



# Studies

- **Mayo Clinic multisite COVID-19 plasma study**
- **10-year breast implant complication study**
- **Sleep hygiene in anesthesia resident study**
- **Intimacy in couples with advanced cancer**
- **Front line nursing work practice study**
- **Diagnosing COVID-19 with POCUS**

# Studies

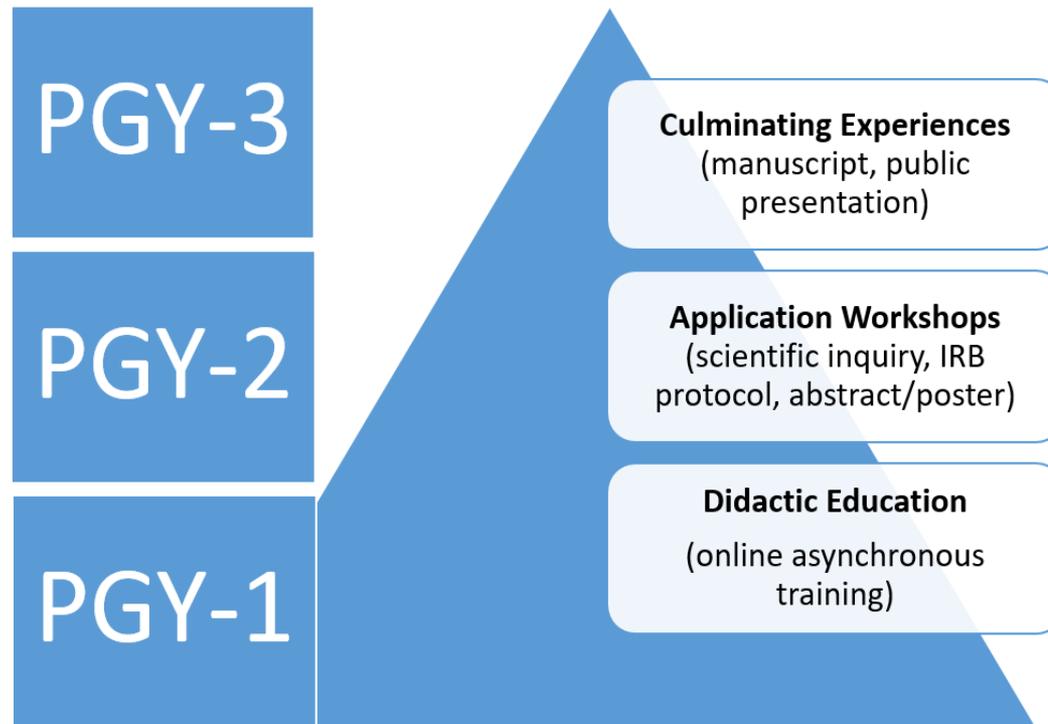
- **Head motion monitoring to diagnose neuropsychiatric disease**
- **Rescue inhaler use in the community**
- **Trauma outcomes in meth positive patients**
- **Importance of mentorship on navigating medical education**
- **Impact of simulation on ED patient experience**

# Research Administration

- **Oversight Institutional Review Board**
  - **No research without IRB approval**
- **The monitoring of research procedures**
- **Maintain our Cayuse Research Portal**

# Education/Training

- **Delivery of GME resident research curriculum**



- **Operation of elective research rotation**

# Education/Training

- **Research consultation for all District investigators**
  - **Research design**
  - **Biostatistics consultation**
  - **IRB protocol preparation**
  - **Data acquisition and analysis**
  - **Manuscript preparation**
  - **Publication and presentation**
  - **Funding**

# OOB SWOT Analysis

## Strengths

Small cohesive team  
Assumed competence  
Significant KD clinical and leadership experience

## Weaknesses

OOB work is sometimes invisible  
Small team for many customers

## Opportunities

Better communication of successes and needs  
Engaging multiple disciplines on projects

## Threats

Budgetary challenges  
Dependence on other departmental resources (investigational pharmacist, grant writing, data management)

# Directions

- **Generate capacity for clinical trials**
  - **Investigator development**
  - **Pharmacy capacity**
  - **Research nursing/assistant capacity**
- **Extend research curriculum to all**
  - **Invite workshop participation**
  - **Integrate research curriculum into pharmacy and nursing residencies**
- **Develop research partnerships**

# Questions?

