

Questions and Answers from State of the Department
4/20/16

1. With current access issues at clinics and concerns of physician burnout, what is being done to improve physician efficiency while preventing burnout?

We are working with UW Health Ambulatory Operations to continually evaluate and reevaluate staffing ratios and roles. There are trials going on at this time using scribes in Orthopedics and Emergency Medicine. This is the “court stenographer” model. We are also considering the extended care team model, but right now there is not only a lack of family physicians, but a lack of MAs. There is also consideration of extending the nurse telephone answering through the night.

2. With clinics struggling with access and difficulty filling physician positions

- **What is the department strategic plan to alleviate this?**
- **Do we have a recruitment strategy?**
- **Have we approached UW Health for help with resources for our clinics/recruitment, etc. as we bottle neck their downstream revenue?**

The strategic plan goal is to become the employer of choice for family physicians in the area by supporting physicians who are happy in their work, work with a robust care team, and have market compensation – several of our task forces are contributing ideas. We are also attempting to draw people to our jobs by advertising in journals and online, recruiting fairs, and recruiting both our new graduates both and others across our state and out of state.

3. Specialty care likely to merge with Unity Point in the near future. What do we know about primary care merging possibilities? Could we be forced to merge?

Meriter UnityPoint primary care relationships are under review now. There is not a movement to merge, although there is a movement to work by the same standards. All relationships with Meriter and UnityPoint are evolving.

4. Are there opportunities for staff to engage in leadership committees within the department?

Opportunities for staff to engage in leadership committees depend on which staff and which leadership committees. If by staff one means non-physicians, there are staff members as part of all task forces, staff involved in Leadership Council and Finance Committee, but not Physician Compensation Committee. Staff make up the administrative teams and are one member of all site dyads.