MIT Medical

In addition to providing medical care on campus and at Lincoln Laboratory, MIT Medical has continued to be involved in maintaining and improving the health and safety of the MIT community as a whole. At MIT Medical, more than 350 individuals provide clinical care, wellness programs, public health services, insurance services, and community support. MIT Medical serves a diverse, 22,000-member population, and its services range from pediatrics to geriatrics—all focused on the needs of the community.

During FY2014, MIT Medical reviewed and revised its strategic focus areas, which are as follows:

- Improving the health of the MIT population
- Improving patient engagement and access to care
- Managing our talent through staff recruitment, retention, assessment, and development
- Supporting the domestic and international health care needs of the global MIT community
- Strengthening and enhancing the value and quality of care provided by MIT Medical and the MIT health plans

In FY2014, MIT Medical's total number of care encounters increased, including face-to-face encounters and telephone communications as well as online communications through our secure patient portal. These changes are consistent with the transitions in health care delivery occurring both locally and nationally.

Our new WellCheck program is expanding to provide health screening for members of the MIT community. In addition to identifying health risks, this innovative program connects individuals needing care with clinicians and provides resources, including health coaching, to help employees reach their wellness goals. Our annual fitness challenge, getfit@mit, continues to grow with increasing participation and caloric combustion.

Flu shot clinics provided efficient and effective immunizations for an increasing number of MIT community members. Working together with colleagues from Facilities, the MIT Police, the Emergency Operations Center (EOC), the Security and Emergency Management Office, the Division of Student Life, MedLinks, MIT-EMS, and the Environment, Health, and Safety Office (EHS), these clinics both demonstrated and provided effective care delivery to a large number of individuals.

Our electronic medical record (EMR) system continues to meet federally defined "meaningful use" requirements under the 2009 Health Information Technology for Economic and Clinical Health (HITECH) Act. These requirements include privacy and security measures and use of the EMR for generating and transmitting prescriptions, checking for drug allergies, recording clinical information about patients, and performing other tasks. Activities are also under way to improve care documentation

in preparation for the ICD-10 (International Classification of Diseases, 10th edition), a major coding system revision that will allow for more precise categorizations of medical diagnoses and services provided.

We continued major infrastructure renovations in FY2014, leading to improvements in patient privacy, workflow, and the general appearance of the building, and completed these renovations with no interruptions in patient care. We are in the process of planning further renovations, which include consideration of the planned East Campus development program.

We filled two major administrative positions during the year. Maureen Johnston was selected as chief of nursing, and Lucy Walsh was named director of finance. Both have moved efficiently and gracefully into their new roles. The demographics of MIT Medical's workforce suggest that there may be more turnover in the next several years. Our talent development program was designed to identify required competencies and to provide current employees with the resources to acquire and enhance skills, a process that will benefit both the individual and MIT Medical. These activities have merged well with MIT's new performance and development review evaluation and goal-setting program.

Several members of the MIT Medical staff regularly work with colleagues in Finance and Human Resources to review health care spending by the Institute. Increasingly, members of MIT Medical participate in the design and administration of health care benefit programs for our students, faculty, staff, and retirees.

Clinical Services

During FY2014, MIT Medical conducted more than 128,000 visits at both campuses, including services for employees of Lincoln Laboratory, Draper Laboratory, and the Whitehead Institute. Of those visits, 5,200 occurred at Lincoln Laboratory. The following table details our clinical visit statistics by patient demographics.

Visits to MIT Medical, FY2014

Patient Population	Number of Visits	
Students, affiliates, and family	59,098	
Faculty, staff, and family	55,474	
Retirees and family	10,129	
Others	4,004	
Total	128,705	

Adult Primary Care Service

Strategic Focus

The Adult Primary Care Medical Service of MIT Medical aims for continuous improvement in providing high-quality, cost-effective, appropriate, and timely access to care. Over the past year, the service provided 32,169 patient visits and cared for 24,704 unique patients, including 6,322 new patients in the 2013 calendar year.

Accomplishments

During FY2014, we achieved the following:

- Increased coordination among Adult Primary Care, Urgent Care, and the
 Community Care Center. We continue to focus on timely access to care and have
 created a system that allows patients who come into Urgent Care to be directly
 triaged into available Adult Primary Care appointments. During a daily morning
 huddle, key nursing, physician, and administrative personnel come up with
 strategies for the most efficient use of that day's available resources.
- Recruited a new physician despite a competitive local market for primary care providers.
- Met national health care reform goals for meaningful use of electronic health records. As a result, we received an additional \$113,680 in incentive funds from Medicare.
- Prepared for the transition to the ICD-10. We completed an audit of all Adult Primary Care providers, assessing compliance with documentation and billing standards and readiness for the mandated transition to ICD-10 documentation and coding by October 2015.
- Continued to improve clinical performance indicators such as mammography and colon cancer screening.

Initiatives

During FY2015, we plan to:

- Continue reviewing elements of care to assess possible racial, ethnic, or gender disparities
- Expand support for international and global MIT programs with a 50% full-time equivalent (FTE) dedicated travel nurse
- Complete training of all Adult Primary Care providers in ICD-10 documentation and coding

Howard M. Heller, MD, MPH Associate Medical Director for Primary Care

Stephanie Shapiro, MD Chief of Adult Primary Care

Community Care Center

Strategic Focus

The Community Care Center (CCC) coordinates medical services and resources at MIT Medical, elsewhere on campus, and in the larger community to make sure patients receive the care they need from hospital to home. Nurse care managers in the CCC help arrange home care services, transportation to medical appointments, outpatient rehabilitation services, and home medical equipment and supplies. When appropriate, "house calls" are made to sick students in their dorm rooms. In addition, the CCC provides on-site care, including infusions, observation, and postprocedure and wound care.

Accomplishments

During FY2014, we achieved the following:

- Gave two evening in-services for MedLinks, MIT's peer health advisory group.
- Attended weekly "dean-on-call" meetings and worked closely with Student Support Services to increase communication related to the care of students who have been recently hospitalized or who have had other health issues requiring medical intervention.
- Helped to plan, manage, and staff campus-wide flu clinics.
- Launched a pilot employee health and wellness program in conjunction with Community Wellness at MIT Medical.
- Made 2,114 unique patient contacts.
- Provided direct on-site care visits to 899 patients.
- Reviewed overnight phone calls from patients by going over reports from FONMED, our overnight phone-triage service. A total of 342 calls were reviewed.
- Made 50 visits to dorms, hospitals, or homes.

Initiatives

In FY2015, we plan to establish a concussion follow-up protocol for students with the director of student health and athletics. Another goal is to streamline the health intake process for newly enrolling MIT students.

Maura Rowley, RN Clinical Coordinator

Maureen Johnston, AGNP-BC, MSN, MBA Chief of Nursing

Dental Service

Strategic Focus

The Dental Service at MIT Medical is committed to the improvement of oral health and hygiene through preventive care, emergency treatment, and maintenance. We work to identify oral disease to improve dental health and overall general health.

Our primary goal is to deliver the highest level of patient-centered care for students, faculty, staff, and their families. Since dental care and medical care are coordinated in one system, patients have the unique opportunity to receive integrated treatment on campus. With current medical studies continuing to link dental care to overall health, we are pleased to offer such comprehensive services at MIT Medical.

Accomplishments

During FY2014, we began a total renovation of the Dental Service area by replacing bulky carts with sleek quartz revolving shelves to ensure that both dentist and dental assistant would have 360-degree access to patients. We also placed monitors and keyboards at the proper ergonomic height for each provider.

Our dentists continued to be active members of the Institute community, supporting MIT's strategic initiatives in health promotion and wellness. Our clinicians participated in preprofessional student advising and the Health and Wellness Fair.

Initiatives

In FY2015, we plan to:

- Maintain revenue generation
- Complete our renovation project, with the Health Insurance Portability and Accountability Act (HIPAA) privacy guidelines in mind, by reconfiguring the cabinetry and installing frosted glass in each patient operatory
- Continue to research state-of-the-art dental technology

Grace M. Collura, DMD Chief

Eye Service

Strategic Focus

MIT Medical's Eye Service strives to provide prompt, courteous, comprehensive eye care of the highest quality to the MIT community. We are a full-service eye care center offering:

- Comprehensive optometric examinations
- Ophthalmologic consultation and treatment
- Co-management of cataract surgery
- Contact lens services
- Eyeglass services (at MIT Optical)

Accomplishments

During FY2014, we achieved the following:

- Upgraded Medflow, our EMR system for eye care, which is part of MIT Medical's larger EMR system. All diagnoses are now identified with both ICD-9 and ICD-10 codes in anticipation of the government mandate requiring ICD-10 coding.
- Transitioned to electronic charges. Paper encounter forms and billing forms are no longer used; all visit charges are now billed electronically.
- Continued to track patients with diabetes and remind them to have annual eye exams. Working in collaboration with the Adult Primary Care Service, we have achieved a compliance rate of 70%, much higher than that of most health care organizations.
- Added new products to our contact lens practice, giving our patients access to the newest innovations. For example, we now have a greater selection of singleuse contact lenses, which have become increasingly popular.
- Continued to experience success at MIT Optical, which is thriving despite fierce competition from both vision care plans and online eyewear sources.

Initiatives

During FY2015, we plan to continue monitoring the rapidly changing landscape for detection and treatment of various eye diseases. When improvements become available, we will expand our practice to include whatever new techniques, knowledge, or equipment will best serve the MIT community.

Robert B. Gross, OD Chief

Lincoln Laboratory/Lexington Facility

Strategic Focus

MIT Medical/Lexington provides a west-suburban site for Lincoln Laboratory employees, MIT Health Plan members and their families, and retirees. Our family practice offers comprehensive primary care for all age groups. Located within a large research and development facility with more than 2,500 employees, the medical facility also focuses on occupational health, employee screening, and care for work-related injuries.

Our full-time team includes a family practice physician, a family practice nurse practitioner, and a practice coordinator/triage nurse who is certified as a breastfeeding counselor. A Mental Health and Counseling Service provider is available for employee assistance and referrals from primary care providers. An occupational specialist provides additional primary care coverage, and we also offer on-site nutrition counseling, phlebotomy, point-of-care laboratory testing, EKG (electrocardiogram), and prescription drug pickup services.

Accomplishments

- Held our largest flu clinic to date, with nearly 3,000 immunizations given. We
 offered free flu shots to all Lincoln Laboratory employees and consultants, as
 well as MIT Traditional Health Plan members. We held clinics on the laboratory's
 main campus, in our health care facility, and at the Haystack and Forbes Road
 facilities. For the first time, we held three flu clinics with evening hours.
- Provided health-related workshops for employees. Our clinicians, in close collaboration with Community Wellness program manager Katherine Barlett, held workshops on topics including sports injuries and pediatric health issues.
- Participated in health-related Lincoln Laboratory administrative committees, including the workplace violence task force. We also took part in tabletop exercises regarding MIT Medical's readiness for and response to significant events. We participated in an active-shooter drill along with Lincoln Laboratory, the Hanscom Air Force Base, the Lexington fire and police departments, and the FBI.
- Served as preceptor for the advanced-practice RN program. We provided a clinical placement and supervision for a graduate student from the Massachusetts General Hospital Institute of Health Professions.
- Completed renovations. We made improvements in the facility's physical appearance, including new floors, newly painted walls, and the addition of artwork.
- Continued to receive high patient-satisfaction scores on Press Ganey surveys.
 Our patients consistently rate our clinical providers and facility above the national average.

In FY2015, we plan to continue providing a high level of primary care to members of the Lincoln Laboratory and MIT communities and to explore options for continued growth. Another goal is to finalize plans for the installment of video-conferencing equipment that will allow our staff to virtually attend meetings with MIT Medical staff in Cambridge.

Toby Walter, RN, MS

Medical and Surgical Specialties

Strategic Focus

The goal of Medical and Surgical Specialties within MIT Medical is to provide convenient, cost-effective, and integrated specialty care for the most common specialty needs of our various patient populations.

Accomplishments

During FY2014, we achieved the following:

- Provided on-site specialty care in the following medical and surgical subspecialties: allergy, dermatology, pulmonary, cardiology, rheumatology, occupational and environmental medicine, endocrinology, sports medicine, infectious diseases, diabetes education, neurology, urology, otolaryngology, ophthalmology, and orthopedics.
- Monitored access to care and patient satisfaction quarterly and remained at or above MIT community standards.
- Maintained relationships with many highly regarded specialists in the Boston area, developing specific written agreements with hospital and ambulatory testing sites to provide expedited access, testing, and reporting for expensive high-tech procedures at reduced costs to our patients and to MIT.
- Recruited a part-time dermatologist to supplement on-site access and to supervise the current nurse practitioner specialist. In addition, we added a third part-time gastroenterologist.

Initiatives

During FY2015, we plan to evaluate newer technologies in EKG recording, audiology, and the use of digital photography and to manage clinical staff transitions in several services.

David V. Diamond, MD Associate Medical Director

Mental Health and Counseling Service

Strategic Focus

The mission of the Mental Health and Counseling Service is to serve the entire Institute community by promoting emotional and personal growth, relieving emotional suffering, and expanding and enhancing personal resilience. We work with students, faculty, and staff in the MIT community to identify, understand, and solve problems and to help transform that understanding into positive action.

Through direct clinical service and active outreach to students, faculty, and staff, we believe that all members of the MIT community can learn to more effectively manage personal problems and situational crises, acquire strategies to cope with academic and personal stress, and increase their knowledge about how to be helpful to other members of our community and direct them to resources for appropriate clinical care.

Students have been our primary clinical and outreach focus for the past 10 years. We work with colleagues in academic departments and Student Life to help students enhance their adjustment to college life and take full advantage of the academic and social opportunities at the Institute. Tragic events on campus sometimes require a broadening of our focus to support and care for the entire community, regardless of role on campus or affiliation with MIT Medical.

Accomplishments

- Responsiveness and breadth of care. We saw more than 20% of MIT students
 during FY2014. This is a larger percentage than most Ivy-plus collaborative
 institutions. We had no wait lists for ongoing clinical care or urgent
 consultations. All intake consultations, treatments, and psychopharmacology
 appointments occurred within one week of initial contact. All clinicians met
 or exceeded expectations for clinical productivity. A 40% increase in walk-in
 visits during the last seven years indicates the increased need for mental health
 services in this population.
- Support and healing interventions. As our community continued to experience the traumatic aftereffects of the Boston Marathon bombings and the tragic loss of students and faculty due to illness, accident, and suicide, our staff responded by providing support and healing interventions to the entire MIT community. Dropin groups were made available for anyone on a daily basis, and staff shifted their schedules so that any person or group needing support could receive it without delay. Our service coordinated efforts and advised academic departments and residences to provide outreach across the campus.
- Developments in student support. In collaboration with colleagues in Student Life, we worked to train graduate resident tutors, resident advisors, faculty, and administrative officers on how to recognize signs of emotional trouble, identify individuals at risk, reduce stigma, and encourage those who need help to seek it.

In FY2015, we plan to:

- Expand and refine responses to campus tragedies to support affected departments, residences, and individuals
- Increase outreach to new faculty and administrative staff about how and when to access our services
- Expand participation in orientation among new academic department heads and new faculty
- Refine the use of a depression screening instrument for all users of our service
- Consider implementing drop-in sessions in residence halls

Alan E. Siegel, EdD Chief

Nursing Service

Strategic Focus

MIT Medical's Nursing Service is committed to serving the Institute community at all stages of the health care continuum. Nursing care is provided by adult and family nurse practitioners (NPs), certified nurse midwives (CNMs), psychiatric clinical nurse specialists (PCNSs), and registered nurses (RNs) in the Community Care Center and in the ambulatory setting.

Accomplishments

We appointed a new chief of nursing in November 2013.

We had notable achievements in areas such as primary care, clinical precepting, and ambulatory nursing, as follows.

Primary Care

NPs provided care for acute and chronic illnesses or injuries, educated patients in health promotion and disease prevention, and worked in collaboration with physicians. In FY2014, Primary Care, Urgent Care, and Pediatrics NPs and RNs provided a total of 18,258 visits.

Four NPs designated as primary care providers, three full-time RNs, and one 0.6-FTE RN provided 15,346 adult Primary Care visits, approximately 30% of all visits in this area.

Specialty and Subspecialty Care

NPs, PCNSs, and CNMs provided consultation, specialty, and subspecialty assessments and care, including group and individual counseling, medical screening and surveillance, sports medicine, obstetrical and gynecologic care, and community outreach.

NPs in Dermatology, Occupational Health, Orthopedics, Mental Health and Counseling, and Obstetrics and Gynecology provided a total of 11,324 patient visits.

CNMs delivered 94 of the 198 babies born to our patients.

Clinical Precepting

NPs and CNMs precepted several advanced-practice graduate nursing students.

Minor Procedure Room

An RN performed or assisted with 191 procedures in the minor procedure room, including minor surgery and pretest screenings. This RN also works with our diabetes educator and nutritionist to coordinate care and education for patients with diabetes.

Ambulatory Nursing

Primary Care triage nurses are certified in anticoagulation and manage the care of approximately 160 patients, continually monitoring and assessing more than 3,000 tests measuring anticoagulation blood levels, intervening to adjust dosage levels as needed, and providing patient education.

NPs provided more than 1,200 travel medicine visits. This work now has been largely transferred to an RN, creating new capacity and access to primary care providers.

Nurses were part of the effort to vaccinate the MIT community against influenza, during which more than 14,000 individuals were vaccinated.

Initiatives

In FY2015, we plan to:

- Further develop the Community Care Center. This entails ensuring that the center is nimble, flexible, population focused, and able to provide timely and appropriate interventions at every stage along the continuum of care.
- Recruit an additional 0.5-FTE dermatology NP, which will greatly improve onsite appointment access.
- Improve access to care by analyzing the ease with which patients access health
 care. Our aim is always to provide the right care, in the right place, at the
 right time.
- Expand nursing roles for RNs to include protocol-based care, working with
 doctors, and using evidence-based algorithms to help patients regulate
 medications to manage conditions such as hypertension. Expanding the RN role
 in this way will improve patient access to care and make more complete use of
 RNs' scope of practice.

Maureen Johnston, MBA, MS, AGNP-BC Chief of Nursing

Obstetrics and Gynecology Service

Strategic Focus

MIT Medical's Obstetrics and Gynecology Service (OB/GYN) is dedicated to providing care to women from late adolescence through menopause. Working in collaboration with Primary Care, Surgery, the Mental Health and Counseling Service, and Community Wellness, we provide well-rounded and closely integrated care.

Our gynecologic services range from comprehensive offerings in birth control to management of menopausal issues. OB/GYN clinicians provide surgical services and collaborate with other laparoscopic and gynecologic oncology specialists. Obstetrical care includes options for midwifery or physician care. We collaborate with maternal fetal medicine specialists and reproductive endocrinologists at Mount Auburn Hospital, Beth Israel Hospital, Brigham and Women's Hospital, and Massachusetts General Hospital to provide high-risk obstetrical care and infertility services.

Accomplishments

This year we had 200 births (including two sets of twins), as compared with 229 births in FY2013 and 189 (including six sets of twins) in FY2012. The overall cesarean section rate (both primary and repeat) remained steady at 17%.

Jill Lamson, NP, received the MIT Medical Infinite Mile Award for Clinical Excellence in June 2014. Also nominated for Infinite Mile Awards were the entire OB/GYN team (Champion of Diversity), Eleashea Passley (Support Staff Excellence), Dr. Annie Liau (Lifetime Contribution), and the OB/GYN support staff team (Collaborative Effort).

As part of our community involvement efforts, we advised and precepted students and residents from local schools and hospitals, educated new MIT students and parents about MIT Medical's OB/GYN offerings, and served on a wide variety of committees at MIT Medical and affiliated hospitals.

We educated clinical providers about new ASCCP (American Society for Colposcopy and Cervical Pathology) guidelines for the management of abnormal cervical cancer screening tests and have been incorporating these guidelines in the treatment of our patients.

Over the past year, we implemented an electronic medical record system for all of our prenatal patients. By May 2014, we had completed the transition from paper charting to sole use of the EMR.

A urogynecologist has been providing consultative services twice a month at MIT Medical, making these referrals more convenient for our patients.

A certified nurse midwife joined our department in February 2014 (replacing another nurse midwife who left the practice). She came to us from the Center for Women at Mount Auburn Hospital and continues to collaborate with her prior coworkers as part of our midwifery service.

In FY2015, we plan to complete the second phase of our prenatal EMR system. We will obtain access for our EMR at Mount Auburn Hospital so that our charts can be seamlessly utilized by the OB/GYN team caring for our patients at the hospital. We also plan to offer customer service training sessions designed to educate our clinical staff and enhance our communication skills.

Chana S. Wasserman, MD Chief

Occupational and Environmental Medicine Service and Employee Health Service

Strategic Focus

The Occupational and Environmental Medicine Service and the Employee Health Service aim to provide the best preventive, consultative, diagnostic, and therapeutic care for work- or environment-related illnesses and injuries that occur at MIT. We work closely with, and consult with, MIT's Environment, Health, and Safety Office; the Security and Emergency Management Office; and the clinical staff of MIT Medical. We continually evolve our program to meet the ever-changing research environments and health needs of our community.

Accomplishments

- Further developed and piloted a health risk assessment program for employees, WellCheck, in conjunction with Community Wellness at MIT Medical and MIT Human Resources
- Continued reporting student injuries and illnesses related to research work as part of our safety monitoring program
- Presented lectures on ergonomic safety, animal allergy, and nanotechnology to employee groups
- Participated in meetings and activities of MIT Medical's biosafety and riskmanagement committees, EHS, MIT's Emergency Operations Center, and the Cambridge Department of Public Health
- Participated in meetings aimed at developing a campus-wide safety committee to support EHS efforts in areas without presidential committee oversight

During FY2015, we plan to:

- Further develop and deploy our WellCheck health risk assessment program at on-campus group events and for all new MIT employees
- Develop further educational and outreach programs for areas in which there is a high risk of injury
- Support investigations and treatment of MIT community members who may be affected by the rapid growth in construction activities on campus during the next five to eight years

David V. Diamond, MD Chief

Jacqueline Sherry, RNP Clinical Coordinator

Pediatrics Service

Strategic Focus

The Pediatrics Service at MIT Medical provides health care for the children of staff and faculty, graduate student families, postdoctoral scholars, and visiting scholars. We offer families a caring and welcoming environment. Our goal is to honor cultural differences and respect diverse types of families while delivering outstanding pediatric health care utilizing the latest technological advancements.

Accomplishments

- Increased the Menactra (meningitis/meningococcal disease) immunization rate to 93% in children older than 11 years of age.
- Performed routine cholesterol screening in 10% of children ages 9 to 11 and others with risk factors.
- Reached a 57% flu immunization rate for high-risk patients.
- Secured funding for a part-time child psychiatrist. Access to mental health care—particularly for children—can be very difficult. Starting in July 2014, a child psychiatrist will be available to our patients one day a week. This is a collaborative effort between MIT and the Cambridge Health Alliance (CHA). The psychiatrist also will be able to provide supervision to the CHA fellow who sees MIT families in Pediatrics once a week. We expect this to help reduce wait times for mental health services, help new families transition to the Cambridge area, and be an invaluable resource to MIT providers and the community.

- Installed an information board in the waiting room. This board updates parents
 on the expected wait times for their visit with the provider. Preliminary patientsatisfaction data suggest that this has improved communication to parents
 regarding delays. We also have adjusted our scheduling to accommodate for
 factors that prevent providers from seeing patients on time.
- Continued renovations to create a warmer and more inviting feel to the service.

Community Outreach

One of our family nurse practitioners (FNPs) was part of a team from MIT Medical that conducted evening educational sessions at Eastgate and Westgate regarding access to children's health care on campus. Another FNP conducted a new parents' support group as a pilot program this spring. Topics included breastfeeding support and emotional issues related to early parenting, particularly as a part of the intense MIT community.

We served as a resource for MIT and other college students interested in health care and for MIT colleagues interested in pediatric research. In addition, we provided health care talks to children and teenagers in the greater Boston area.

We mentored and precepted graduate nurse practitioner students and Harvard Medical School students.

Nursing Staff

Our former full-time nurse practitioner is now a part-time employee (she continues to provide newborn rounding two mornings a week at Mount Auburn Hospital). As a result of this change, we welcomed a second NP in September 2013. With special interests in early parenting, lactation, first-time moms, and families who are new to the area, our new NP supports our goals for the service. Both NPs have been providing us with information on asthma care and flu shots, vitamin D levels, and access to care.

Our RN has expertise in telephone advice, triaging, and childhood immunizations. In the past year, she also has become a resource for advice on travel immunizations. A two-day-a-week per diem nurse assists with immunizations and phone advice. We are considering additional nursing support as well.

Medical Staff

Two new physicians joined the Pediatrics team in 2014. They are energetic, enthusiastic, and compassionate providers. One has provided us with a list of resource books for families and continues to make suggestions to improve the flow of care in the service. The other has taken on the challenge of helping us follow the American Association of Pediatrics' "Bright Futures" guidelines and recommendations while integrating this information into our electronic medical records. A seasoned pediatrician, who has been with us for many years, keeps us up to date on pharmacological issues. Part of this effort has been to make sure that children are given the correct EpiPen in the event of an anaphylactic reaction.

Our chief of pediatrics continues to work with the chief of pediatrics at Harvard University Health Services to maintain good communication and collaboration. They

have held meetings to discuss their work at Mount Auburn Hospital and current practice recommendations and trends in the care of children and adolescents. We also work closely with the chief of neonatology at Mount Auburn Hospital to ensure good care for our newborns and their families.

The MIT Medical Pediatrics team was recognized at the 2014 Infinite Mile Award ceremony in the Collaborative Effort category.

Initiatives

In FY2015, we plan to:

- Continue improving patient wait times and workflow and resolving system issues to ensure patient, provider, and staff satisfaction while being fiscally responsible
- Continue to work collaboratively with members of the MIT community to increase outreach programming
- Integrate pediatric mental health services into the Cambridge practice
- Continue to increase Menactra immunization rates in children older than 11 years of age
- Continue to perform routine cholesterol screening among children ages 9 to 11 and others with risk factors
- Achieve a 100% flu immunization rate for high-risk patients

Jocelyn O. Joseph, MD Chief

Surgical Service

Strategic Focus

In addition to general surgery, the Surgical Service includes surgical specialties in orthopedics, urology, and otolaryngology with weekly, on-site clinics. General surgery clinics are offered Monday through Friday.

We perform minor surgery in MIT Medical's well-equipped minor procedures room. Surgeries requiring more than local anesthesia are performed at Mount Auburn Hospital or at Massachusetts General Hospital.

Accomplishments

The Urology Service increased laparoscopic renal surgery to 50% of total cases. This approach eliminates the necessity for large incisions, reducing postoperative complications.

The chief attended the annual Breast Cancer: New Horizons, Current Controversies conference, which was sponsored by the Harvard Medical School, the Dana-Farber/

Brigham and Women's Cancer Center, and the Massachusetts General Hospital Cancer Center.

Initiatives

In FY2015, we plan to present a review of the breast cancer conference to clinical staff. The presentation will focus on genetic targeting of individual cancers and treatment of early-stage disease, including noninvasive cancer (for example, ductal carcinoma in situ).

Lawrence T. Geoghegan, MD Chief

Urgent Care Service

Strategic Focus

The Urgent Care Service provides care for the MIT community on a walk-in basis from 7 am to 11 pm, 365 days per year.

Accomplishments

- Had 16,575 patient visits, representing a 1% decrease in volume from FY2013.
- Added four new associate medical staff physicians, bringing our total number of associate physicians to 15. These physicians staff evening, weekend, and holiday shifts. Most are attending physicians or senior fellows from Massachusetts General Hospital or Brigham and Women's Hospital with Controlled Risk Insurance Company (CRICO) malpractice coverage that covers their work at MIT. During FY2014, Brian D. Marriott took over as coordinator of the After Hours Service.
- Recruited more family practice nurse practitioners to the nursing per diem staff. These individuals help cover staff vacations and work on weekends and holidays, strengthening our pediatric weekend services.
- Recruited additional triage RNs, expanding our staff on holidays and weekends.
- Continued to work closely with various MIT and MIT Medical departments, including Adult Primary Care, Pediatrics, Mental Health and Counseling, the Community Care Center, Community Wellness at MIT Medical, and the Dean on Call network.
- Introduced changes to integrate Urgent Care into Primary Care. Clinical staff and members of senior management attended a half-day retreat in January 2014 to come up with ways to work more closely with Primary Care and expedite visits for patients waiting to be seen.
- Began to reevaluate workflows based on patient volume, the intensity of care
 each patient requires, and wait times. We have started using a new workflow
 assessment tool to evaluate these data and will periodically review the
 information we obtain.

In FY2015, we plan to continue to provide high-quality, easily accessible urgent care services to members of the MIT community. We will also continue reevaluating workflows, and we will refine our evaluation tool and analyze collected data.

Brian D. Marriott, MD After Hours Service Coordinator

Janis Puibello, MS, FNP-BC Nursing Coordinator

Stephanie Shapiro, MD Chief of Medicine

Administrative Services

Information Systems and Medical Records

Strategic Focus

Information Systems (IS) and Medical Records have two major objectives: using technology that improves care for our patients and providing software solutions that promote effective and streamlined workflows for MIT Medical clinicians and staff.

Accomplishments

- Implemented a new patient portal called FollowMyHealth@MITMedical. This
 collaborative effort between IS and Clinical Services allows patients to post
 medical information to their personal health record as well as communicate
 securely with clinicians, view lab results, and request services. During the past 12
 months, 10,000 MIT Medical patients have signed up for, and used, this tool.
- Enhanced MIT Medical's security and privacy initiatives by implementing a number of tools, including email encryption, a network visibility tool that is monitored 24 hours a day and that alerts IS immediately of potential network or device problems, and a second-generation firewall that protects the entire network.
- Added multiple clinical system software enhancements. In the Radiology Service, we upgraded Picture Archiving and Communication System (PACS) to provide economical storage and convenient access to medical images. We also upgraded the voice recognition system to enable more efficient dictation of medical findings. The OB/GYN Service is now 100% electronic, and paper charts have been eliminated. The Eye Service has replaced paper encounter forms with electronic charging. New data related to student health are being entered directly into electronic medical records, eliminating duplicate data entry.

Plans for FY2015 include ensuring that MIT Medical is in compliance with new federal requirements for the ICD-10 medical diagnosis coding scheme. ICD-10 training of all business office staff coders has been completed, and we are ready to replace the ICD-9's 14,000 diagnostic codes with the 68,000 new ICD-10 codes by the federal compliance date of October 1, 2015. Once the system is implemented, we will audit patient records to evaluate how effectively our clinicians are using the new codes. Based on our findings, we will take appropriate steps to help our clinicians improve their use of the ICD-10 to document patient encounters.

Another goal is to enhance automation of the campus-wide flu clinics. We plan to automate entry of each patient's flu vaccine information directly into the EMR, replacing the inefficient and time-consuming paper-based process.

Shelagh M. Joyce Director

Operations

Strategic Focus

Operations supports the strategic and operational initiatives of MIT Medical, including timely access to care, responsible use of resources, and provision of coordinated and culturally sensitive care.

Accomplishments

Continuing Initiatives

- Administered influenza vaccine to more than 14,000 members of the MIT community through large clinics at the Student Center and daily clinics in E23.
- Completed staff training related to talent development. Using a competency-based model, MIT Medical staff members established goals that use their talents and passions to meet organizational needs. Continual learning at the individual and organizational levels will support progress toward meeting those goals.
- Realized success from internal leadership development programs. Two
 support staff members were promoted to fill managerial vacancies after
 their participation in a program involving competency development, stretch
 assignments, and mentoring.
- Completed an initial long-range space plan. We began the first phase of renovations and associated infrastructure improvements to convert the inpatient kitchen to flexible office space. Equipment and major appliances were "repurposed" to MIT Dining and other campus housing facilities.

Licensing and Accreditation

- Granted reaccreditation of the clinical laboratory by the College of American Pathologists
- Maintained accreditation by the Joint Commission as an ambulatory care center
- Granted annual relicensure of the mammography unit by the Massachusetts
 Department of Public Health and the US Food and Drug Administration with
 no deficiencies

New Initiatives

We engaged staff in identifying areas for improvement through increased reporting of near misses, potential errors, and suggested system enhancements using an online reporting tool.

We implemented changes in workflows and nursing protocols for common illnesses, such as urinary tract infections, to improve timely access to care in Adult Primary Care and Urgent Care through a collaboration between Operations and the Nursing Service.

Initiatives

In FY2015, we plan to:

- Develop a more automated system for documenting flu shot administration in medical records, including scanning bar codes from ID cards and vaccine vials.
- Conduct our third staff survey to assess the workplace environment. We will
 compare the results of this survey to previous results, which will allow us
 to assess the impact of our past efforts to create a welcoming, inclusive, and
 respectful environment. The results also will inform our next steps.
- Create a "WOW wall" on which we will post positive comments, celebrate successes, and provide feedback to staff on patient care and other work accomplishments.
- Expand our program for welcoming new staff to include a discussion of the competencies important for success at MIT as they relate to each person's talents and job.

Deborah Friscino Director

Emergency Preparedness

Strategic Focus

In partnership with Occupational, Environmental, and Employee Health Services at MIT Medical, the department's senior leadership team, and other MIT offices, Emergency Preparedness provides preventive, diagnostic, and consultative approaches to security and disaster preparedness. We help identify and anticipate hazards that could affect

the MIT community by developing emergency response protocols, emergency communication plans, and medical emergency care plans.

Accomplishments

In FY2014, we achieved the following:

- Participated in an interagency active-shooter drill on the Lincoln Laboratory campus.
- Held two large-scale influenza vaccination clinics in conjunction with the Emergency Operations Center, providing approximately 7,000 vaccinations at a pair of six-hour clinics and more than 14,000 total vaccinations during the flu season.
- Worked with the MIT Police and the Security and Emergency Management
 Office to present active-shooter training and interactive scenario drills at MIT
 Medical's monthly staff meetings.
- Made security improvements when needs were identified through our "afteraction review" of FY2013 security-related incidents. These improvements included increased video monitoring, a new ability to quickly lock exterior doors, and creation of response guidelines for each week's administrator on call.
- Participated in EOC planning meetings and activities, including the response to a natural gas leak in September 2013.
- Provided medical support at MIT's annual Commencement exercises.

Initiatives

In FY2015, we plan to:

- Continue to serve in leadership and support roles within EOC
- Collaborate with emergency management personnel in Boston and Cambridge and within several Boston-area colleges and universities through MIT's membership in the Boston Consortium
- Lead the Institute's efforts to minimize the health and operational impacts of seasonal influenza and other health hazards
- Implement an automated system to improve the flu clinic documentation process

David V. Diamond, MD Associate Medical Director

Deborah Friscino Director of Operations

Robert Bright Facilities and Safety Manager

Marketing and Communications

Strategic Focus

The Marketing and Communications team provides the MIT community with timely materials about MIT Medical's clinical services and public health initiatives, community health and wellness programs, the MIT Health Plan, and various clinical and administrative entities within MIT Medical. Our communication channels include websites, social media, brochures, letters, videos, posters, digital signage, and other written and graphic materials.

Accomplishments

In FY2014, we achieved the following:

- Created a video to promote 3D mammography.
- Formed a partnership with CopyTech to display public health messaging across the campus and to present Infinite Display content within MIT Medical.
- Extended digital signage to the pharmacy and Urgent Care waiting areas.
- Enhanced the internal MIT Medical intranet, a major communication vehicle for employees. The upgrade included improving and increasing the volume of content on the site.
- Launched an internal newsletter to enhance communication within MIT Medical.
- Completed a rebranding effort that included the creation of PowerPoint templates, business cards, and stationery.
- Worked with Human Resources to streamline open enrollment messaging to employees in the spirit of "one administration/one voice."
- Helped to craft the MIT Medical strategic plan in close collaboration with the MIT Medical Operations Group. Our efforts included the construction of a website to promote the plan.
- Provided advisory assistance for various projects through the Office of the Executive Vice President and Treasurer's Connect committee.
- Developed a social media strategy that included the launch of MIT Medical's Facebook page and an enhanced Twitter presence.
- Executed a marketing plan to unveil the new patient portal, FollowMyHealth@ MITMedical.

Initiatives

In FY2015, we plan to:

- Launch the new MIT Medical website. This effort, our highest-priority project for FY2015, includes reviewing and redrafting all content.
- Reassess the effectiveness of all printed materials with the goal of refreshing, rebranding, and redesigning materials as necessary.

- Assess and begin a discovery research phase for enhancing and improving our intranet site, InsideE23.
- Refresh, update, and relaunch the Spouses & Partners and MedLinks websites.
- Finalize, publish, and implement the marketing and communications components of the new MIT Medical strategic plan.
- Launch a podcast to address topics of interest to MIT Medical patients.
- Hire and train a new graphic design specialist to improve the visual presence of MIT Medical.
- Improve and enhance the social media footprint of MIT Medical with the goal of making social media a viable communications vehicle.

David Tytell Manager

Finance

Strategic Focus

Finance seeks to support the strategic focus of MIT Medical by delivering cost-effective, patient-focused services with efficiency and a high level of customer service. As a key operational arm of MIT Medical, Finance is charged with budgeting and fiscal management, managing patient financial services, administering the health plan, purchasing, and managing the organization's capital.

Accomplishments

During FY2014, we focused on information enhancements, business process improvements, and changes in business models. We undertook these activities strategically with an eye toward MIT's broad goals and consideration of the impacts of health care reform legislation.

Information Improvements

Finance relies on data to support decisions, to identify and resolve issues, and to monitor business activities. Health care data from disparate sources are not always consistent, requiring manipulation and categorization to generate actionable information. In FY2014, we continued to improve this process, including:

- Enhancements of the quarterly cost reports monitoring the Institute's health care
 costs. These reports track charges throughout the year and changes from the
 prior year and include all medical costs for active employee plans. We expanded
 our focus to include the student insurance plan.
- Implementation of a new database tool. We mapped all data elements and claim data for employee and student plans. Adding this information to the database tool will improve our analytical capabilities.

- Completed the implementation of an electronic charge-capture process. This process streamlines data collection for patient visits, supports billing, and enhances revenue. As of February 2014, all providers, including per diems, were using the electronic charge process.
- Initiated assessment and training for conversion to a new diagnostic coding system. An extensive review of our practice management system and audits of patient records identified gaps in physician coding and identified training needs for the ICD-10. Four coders completed training and received certification.

Business Model Improvements

Because we operate within dynamic regulatory and insurance coverage environments, we often need to evaluate and change our business models, both to comply with new requirements and to leverage newly available advantages. In FY2014, we:

- Coordinated efforts between the billing staff and MIT Accounts Receivable, which reduced bad debt by 50% and resulted in an overall reduction in accounts receivable in the Office of the Vice President for Finance.
- Began processing fee-for-service insurance payments using electronic fund transfer direct deposits to Bank of America. With the expected increase in feefor-service business, we are ready to add other payers such as Harvard Pilgrim Health to the portal, which will improve the efficiency of payment postings.
- Convened a multidisciplinary advisory group to review benefit changes and cost implications of the Affordable Care Act for the MIT Student Extended Insurance Plan and make recommendations to senior leadership.

Initiatives

In FY2015, we plan to continue monitoring the health care landscape, including the evolution of health care reform and the transition to a new, enhanced nationwide medical coding methodology. Our work will focus on MIT's mission and goals, especially MIT's global expansion and how we can best support the changes that may come as a result. Specifically, we will:

- Complete the implementation of the new medical diagnosis coding system, which will require extensive training of clinical staff in preparation for the October 2015 national go-live date
- Continue collaboration with MIT's Benefits Office and the Office of the Vice President for Finance in response to the Affordable Care Act
- Monitor the increasing costs of the student insurance plan as well as possible migration to health care exchanges
- Focus on improving the efficiency and accuracy of transactions submitted to SAP and Student Financial Services

Lucy Walsh Director

Performance Improvement and Risk Management

Strategic Focus

MIT Medical supports clinical excellence with technology and metrics, resulting in care that is patient centered, safe, effective, timely, efficient, and equitable. Performance improvement and risk management activities focus on communication, access to care, and consistency of practice.

Accomplishments

- Care for patients with diabetes. The diabetes workgroup developed a care
 management treatment model that focuses on coordination of care and a
 team approach. We piloted this model in one Adult Primary Care "cluster" in
 February 2014. We will conduct a full evaluation in September, at which time we
 will consider a rollout to all Adult Primary Care clusters.
- Clinical information management. We continued to develop electronic clinical support systems. In addition, we expanded the medication dashboard to include additional high-risk medications that need to be monitored for appropriate prescribing and clinical management.
- CRICO risk appraisal and planning (RAP). We received an 18-month RAP grant
 of \$100,000 in August 2013 from CRICO, our malpractice carrier. This grant
 project is designed to enhance MIT Medical's safety culture. We established
 a project team, completed a pre-intervention staff "culture of safety" survey,
 implemented the initial phase of our patient safety communication and
 marketing plan, and rolled out a new event-reporting system.
- Patient satisfaction. We have identified patients' satisfaction with wait time after arriving for appointment as an area for improvement. The Pediatrics Service piloted posting clinician wait times in the patient waiting area. Preliminary results after three months showed modest improvement on this measure.
- Continuous compliance with Joint Commission standards. MIT Medical will
 be surveyed by the Joint Commission at some point before December 1, 2014.
 Surveyors measure compliance with Joint Commission standards by "tracing"
 the care of patients through observation, clinician and staff interviews,
 and clinical record reviews. Our goal is to be continuously compliant with
 accreditation standards. To that end, we completed an annual self-assessment,
 conducted regular "mock tracers" and facility rounds, and offered regular staff
 training and education.
- Development of a closed-loop system. We are designing closed-loop workflows
 to assure safe and effective patient care. We piloted a patient follow-up
 appointment system to ensure that patients requiring follow-up visits are
 scheduled for the appropriate visit in a timely manner.

In FY2015, we plan to:

- Remain prepared for a Joint Commission survey. MIT Medical is committed to maintaining accreditation compliance and being prepared for an unannounced survey any time before December 1, 2014.
- Continue the development of closed-loop systems for patient follow-up appointments and clinical test results.
- Establish quality metrics. MIT Medical is working with the Medical Management Board to establish metrics that provide a picture of the strengths and opportunities for improvement of our patient care and health care system. These process and outcome measures will provide value to clinicians and administration and will be realistic, actionable, and comparable with those of other organizations. The first set of metrics will be completed by December 31, 2014.

Ruth Fishbein Director

Community Wellness at MIT Medical

Strategic Focus

Community Wellness at MIT Medical contributes to the health of everyone in the MIT community. We help individuals learn about and pursue healthier lifestyles, and we work with groups to build communities and create environments where it is easier to make healthier choices.

Our services are tailored to MIT's fast-paced, high-achieving culture, because a healthier campus supports higher achievement, improves our lives, and may minimize the long-term human and financial burden of chronic illness.

Because we know that more than half of all diseases are associated with potentially preventable health risks, we are addressing the following key wellness priorities identified by the US Department of Health and Human Services and the National Institutes of Health:

- Physical activity
- Good nutrition and weight management
- Tobacco treatment
- Adequate sleep
- Stress management
- Sexual health
- Social connectedness/healthy relationships
- Violence prevention

Accomplishments

Nutrition and Fitness

Participation in getfit@mit, our 12-week team-based winter fitness challenge, reached an all-time high of 3,877 individuals. We responded to user feedback by creating a "find a team/teammate" forum during registration and ended the program with a field day on campus and at Lincoln Laboratory.

We continue to serve as part of the Eating Concerns team at MIT Medical and, along with Mental Health and Counseling, co-lead the "Making Peace with Food and Body Image" support group. For National Eating Disorders Awareness Week, we launched a pilot campaign, "UnHealth Talk," to deal with eating concerns.

MedLinks Peer Advocacy Program

We added 64 new students this year for a total of 150, with at least one MedLink in nearly all of the fraternities, sororities, independent living groups, and dormitories.

In addition, we logged 2,975 interactions during the school year, approximately 15% of them helping people with emotional issues including loneliness, stress, and challenging relationships.

Graduate Student Outreach and Support

We provided wellness content for the monthly Graduate Women's Lunch, delivered onsite programming in graduate residences, and presented workshops for key members of the graduate community and those who support them.

Violence Prevention and Response

We provided training for more than 1,800 students on issues related to sexual assault, dating/domestic violence, and stalking and worked as advisors to the chancellor to address sexual violence on campus.

In addition, we advocated for more than 72 community members and answered 86 hotline calls.

Health Coaching

We continued the small-scale pilot of our health coaching services and provided 61 one-on-one sessions and three eight-week group health coaching classes to a total of 37 graduate students and employees. More than 90% of participants said they would be very, or extremely, likely to recommend our health coaching to a colleague.

We have implemented systems-level processes to broaden the reach of our health coaching services in the coming fiscal year, including the development of our health coaching websites and other promotional materials and identification of a coaching software platform for documenting and tracking coaching participants and outcomes.

Health Education Counseling

We provided 73 health education counseling sessions on sleep hygiene, smoking cessation, stress reduction, and healthful eating.

Campus Health and Wellness

We administered a National College Health Assessment in fall 2013 in partnership with the Division of Student Life.

We provided suicide awareness training to 130 faculty, staff, and students, with 95% of participants demonstrating an increase in their knowledge of suicide prevention.

Effective Use of Technology and Media

Our webpage with wellness downloads—including sleep tips and mindfulness meditation MP3s—garnered 65,720 views, up from 27,422 the previous year.

MIT relaxation media were featured in *Mindful* magazine and cited by the US Navy.

Tobacco Treatment

We expanded our tobacco treatment resources with the "Craving to Quit" mobile app. Subsidized by MIT Medical and offered for free to members of the MIT community, Craving to Quit is a 21-day program based on a successful quit-smoking curriculum developed and tested at Yale University.

Workplace Wellness Programming

We developed and piloted the WellCheck employee biometric screening and nurse health advisor program, accompanied by the Wellness Profile—an aggregate view of health-related indicators for department leaders.

We delivered department-based mindfulness programming to 108 members of the MIT community. In follow-up surveys, participants indicated an increase in perceived productiveness at work, a decrease in distractibility, improved sleep, more energy, better focus, and better decision making.

MIT Spouses & Partners

This group's mission is to support the personal, social, and professional growth of all spouses and partners of MIT community members who relocate to the Boston area. Over the past year, we:

- Engaged over 60 volunteers (working 1,500 hours) in serving more than 700 members through meetings and events for information sharing and networking, weekly gatherings, a highly successful joint community event with the MIT Postdoctoral Association, and a twice-a-year kids' clothing and toy exchange.
- Created two orientation events: a family-friendly campus tour introduced newcomers to campus while showing parents the tricks to navigating MIT with a stroller, and the Learning Fair brought together MIT organizations and local institutions to showcase English-language and other learning opportunities.
- Developed sponsorship relationships with four local educational institutions, which provided discounts for our members.
- Expanded Career Connect, which provides its members with job-search training.
 For example, a new session called "American Cultural Norms in the Workplace" was offered.

In FY2015, we plan to:

- Expand our WellCheck intervention and implement it with up to 2,300 staff members, dependent on funding
- Increase participation in our health coaching program by 50%, dependent on funding
- Partner with the MIT Work-Life Center to offer the Mind the Moment at MIT program to MIT employees
- Work with others at MIT to address issues related to sexual assault response and prevention
- Optimize collaboration with the Division of Student Life in student health promotion, working in partnership with the division's Wellness Implementation Team

Maryanne Kirkbride, MS, MBA, RN Clinical Director

Appointments, Separations from Service, and Promotions, FY2014

Medical and Administrative Staff Appointments

Amanda DeStefano	Social Worker	8/12/13
Vicki Newman	Nurse Practitioner	10/21/13
Maureen Johnston	Chief of Nurses	11/4/13
Amelia Leutz	Registered Nurse	12/2/13
Austin Patrick Egan	Physician	3/10/14
Sharon Casey	Manager, Health Plans	6/9/14

Separations from Service

Chandra Fontair	Registered Nurse	7/3/13
Mary Ellen Rhinehart	Physician	10/18/13
Brian Ash	Physician	11/1/13
Mara Green	Dentist	4/18/14
Janice Guerriero	Registered Nurse	5/16/14

Promotions

Shawn Ferullo	Chief of Student Health	8/1/13
Lucy Walsh	Director of Finance	9/1/13
Rosie Huntress	Executive Program Administration	10/1/13
Gerard Keiley	Medical Administrator	3/1/14
Christina Emerson	Assistant Administrative Coordinator	4/14/14
Alison Sansone	Assistant Administrative Coordinator	4/14/14
Abbie Ferrie-Calkins	Administrative Coordinator	6/15/14

William M. Kettyle, MD Medical Director

Annette Jacobs Executive Director