

MIT Medical

MIT Medical is a multispecialty group practice and community health resource serving the MIT and Lincoln Laboratory communities. Our tradition of caring—meeting MIT’s personal, occupational, and public health needs—has continued for over 100 years. At MIT Medical, more than 350 individuals provide clinical care, wellness programs, public health services, insurance services, and community support. We serve diverse populations that include some 23,000 individuals. Approximately half of our patients are students or student family members. Our clinical services range from pediatrics to geriatrics and focus on the needs of the MIT community. We also offer community-focused support and service programs that enhance the wellness and health of students, faculty, and staff, including families and retirees.

The department’s strategic vision remains steady, but our goals and implementation tactics are adjustable and flexible, allowing us to approach the future with poise and agility.

Our strategic focus areas 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 FY2015, clinical staffing remained relatively stable. We continue to evaluate staffing models and alternative patient-flow patterns to ensure that patients have access to the right care at the right time, in the right venue, with the right clinician.

Increasingly, the Department is playing an important role in developing programs to improve the health, wellness, and safety of our community.

Anticipating and preparing for smooth leadership transitions at the Medical Director and Executive Director positions has been, and will continue to be, an important component of the Department’s activity.

Clinical Services

During FY2015, 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, 5,700 occurred at Lincoln Laboratory. The following table details our clinical visit statistics by patient demographics.

Visits to MIT Medical, FY2015

Patient Population	Number of Visits
Students, affiliates, and family	61,476
Faculty, staff, and family	54,734
Retirees and family	10,206
Others	2,495
Total	128,911

Adult Primary Care Service—Howard M. Heller, MD, MPH, Associate Medical Director for Primary Care, and Stephanie Shapiro, MD, Chief of Adult Primary Care

Strategic Focus

The Adult Primary Care Service aims for continuous improvement in providing high-quality, cost-effective, appropriate, timely, and accessible care. During FY2015, Adult Primary Care provided 30,622 patient visits and completed 103,925 electronic tasks related to patient care.

Accomplishments

During FY2015, we:

- Increased coordination among Adult Primary Care, Urgent Care, Mental Health and Counseling, and the Community Care Center (CCC). Mental Health and Counseling was added to the daily morning huddle of key nursing, physician, and administrative personnel.
- Recruited a new physician despite a competitive local market for primary care providers (PCPs).
- Continued to meet national health care reform goals for “meaningful use” of electronic health records.
- Prepared for the ICD-10 (International Statistical Classification of Diseases and Related Health Problems) **transition**, training all clinical providers in coding for ICD-10, the government-mandated coding system, prior to the official transition on October 1, 2015.

- Developed and implemented nursing protocols for treatment of uncomplicated urinary tract infections, providing more convenient care for patients. These protocols are estimated to save an average of 200 patient visits per year.
- Expanded support for international and global MIT programs by hiring a 50% full time employee (FTE) dedicated travel nurse. We expanded our travel clinic, providing more convenient care for patients and increasing Adult Primary Care capacity by an estimated 850 nurse practitioner (NP)/medical doctor (MD) visits per year.

Initiatives

During FY2016, we plan to:

- Focus on identifying possible racial, ethnic, or gender disparities by using our newly available data management system, DeepSee.
- Test our new patient engagement system by using Twine, a web-based software program, to help with the management of patients with chronic disease.
- Support providers in transition to ICD-10 documentation and coding by auditing charts for compliance with ICD-10 and providing additional education as needed.
- Recruit clinicians by working with Marketing and Communications to identify new avenues for physician recruitment in an increasingly competitive market.

Community Care Center—Maura Rowley, RN, Clinical Coordinator, and Maureen Johnston, AGNP-BC, MSN, MBA, Chief of Nursing

Strategic Focus

The Community Care Center (CCC) coordinates medical services and resources at MIT Medical, elsewhere on campus, and in the larger community to ensure that 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 post-procedure and wound care.

Accomplishments

During FY2015, we:

- 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.

- Gave two on-campus in-services for MedLinks, MIT's peer health advisory group.
- Established a concussion follow-up protocol for students with guidance from the director of student health.
- Delivered a pilot employee health and wellness program in conjunction with Community Wellness at MIT Medical.
- Made 9,581 patient- or care-coordination contacts via telephone.
- Provided direct on-site care visits to 838 patients.
- Reviewed 320 overnight phone calls from patients by following up on reports from FONEMED, our overnight phone-triage service.
- Made 64 visits to patients in dorms, hospitals, or homes.

Initiatives

In FY2016, we plan to:

- Improve data-based management of patients with chronic disease.
- Organize and test a new adult-primary-care team-based care-delivery model.

Dental Service—Grace M. Collura, DMD, Chief

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 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 FY2015, we:

Began a complete renovation of the Dental Service area, incorporating ergonomic principles and introducing the most modern and technologically advanced dental equipment.

Continued our active involvement in the Institute community, supporting MIT's strategic initiatives in health promotion and wellness. Our clinicians participated in pre-professional student advising and in the Health and Wellness Fair.

Initiatives

In FY2016, we plan to:

- Complete the renovation project, including privacy features such as frosted glass and additional doors to comply with Health Insurance Portability and Accountability Act privacy guidelines.
- Continue to research state-of-the-art dental technology.

Eye Service—Robert B. Gross, OD, Chief

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 FY2015, we:

- Upgraded our imaging systems. Our sophisticated imaging devices (Heidelberg Retinal Tomograph and optical coherence tomograph) as well as our retinal camera were upgraded to Windows 7. The new software provides for greater security and functionality, and the new camera has three times the resolution of the old, providing far more detailed retinal photographs.
- Made spectacle prescriptions available on Follow My Health. Prescriptions are immediately available on our web-based patient portal. Patients no longer need to contact us to receive a copy.
- Continued to track patients with diabetes and remind them to have annual eye exams. Working in collaboration with Adult Primary Care, we have achieved a compliance rate of 75%, much higher than what most health care organizations achieve.
- 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 single-use contact lenses, a lens type that is increasingly popular.
- Continued to experience success at MIT Optical, which has thrived despite fierce competition from both vision-care plans and online eyewear sources.

Initiatives

In FY2016, we plan to:

- Renovate the Eye Service, beginning July 31, 2015.
- **Upgrade the Medflow electronic medical record.** Further changes are necessary for compliance with ICD-10.
- **Continue to monitor 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.

Lincoln Laboratory/Lexington Facility—Toby Walters, RN, MS

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. MIT Medical/Lexington provides over 4,000 appointments annually.

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 an occupational medical specialist provides additional primary care coverage. We also provide on-site nutrition counseling, phlebotomy, point-of-care laboratory testing, EKG (electrocardiogram), and prescription drug pick-up.

Accomplishments

During FY2015, we:

- Provided more than 3,000 flu shots to Lincoln Laboratory employees and consultants, as well as MIT Traditional Health Plan members. We held clinics on Lincoln Laboratory's main campus, at the Haystack and Forbes Road facilities, and in our health care facility (including evening sessions).
- Provided health-related workshops for employees. Our clinicians, in close collaboration with the Lincoln Laboratory Community Wellness program manager, held workshops on sports injuries and pediatric health issues.
- Participated in various Lincoln Laboratory committees, including groups focused on health education and workplace violence. We joined tabletop exercises on MIT Medical's readiness for and response to significant events. MIT Medical remains part of Lincoln Laboratory's business continuity plan for emergencies.

- Served as preceptor for the advanced-practice RN program. We provided clinical placement and supervision for a graduate student from the Massachusetts General Hospital Institute of Health Professions.
- Installed videoconferencing equipment to allow virtual meetings with MIT Medical staff in Cambridge.

Initiatives

In FY2016:

- We will continue to provide a high level of care to the Lincoln Laboratory population in the Metro West area.
- We will continue to participate in Lincoln Laboratory committees.
- MIT Medical/Lexington will be a possible site for an effort to provide patients with virtual consults and visits.

Medical and Surgical Specialties—David V. Diamond, MD, Associate Medical Director

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 FY2015, we:

- 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.
- Retired senior clinicians in urology, ENT, and surgery and arranged for continued access to these specialties within MIT Medical and in the community.
- Recruited a full-time dermatology service nurse practitioner (NP).

Initiatives

In FY2016, we plan to:

- Evaluate newer technologies in EKG recording, audiology, and digital photography.
- Manage clinical staff transitions in several services, including gastroenterology and pulmonary.
- Do a comprehensive review of the balance of in-house versus outsourced specialty services.

Mental Health and Counseling Service—Alan E. Siegel, EdD, Chief

Strategic Focus

The mission of the Mental Health and Counseling Service is to serve the entire Institute community to promote emotional and personal growth, relieve emotional suffering, and expand and enhance 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, departments, residences, faculty, and staff, we believe that we can help all members of the MIT community learn to more effectively manage personal problems and situational crises. This includes helping them to acquire knowledge and strategies to cope with academic and personal stress and to assist other members of the community, as well as directing them to the resources for appropriate clinical care.

Students have been our primary clinical and outreach focus for the past 11 years. We work with colleagues in academic departments and the Division of Student Life to help students adjust to college life and take full advantage of academic and social opportunities at the Institute. Tragic events on campus require a broadening of focus to support and care for the entire community, regardless of their role on campus or affiliation with MIT Medical.

Accomplishments

During FY2015, we achieved the following:

- Responsiveness and breadth of care. We saw nearly 21% of MIT students during FY2015. This percentage is larger than what is seen at most Ivy-plus collaborative institutions. Students comprise 81% of the patients whom we have seen. We had no waitlists for urgent consultations. All intake consultations, treatment, or psychopharmacology appointments occurred within one week of initial contact. With student input, we initiated a plan for patients to provide information for an intake consultation online, rather than having to use the telephone. All clinicians met or exceeded expectations for clinical productivity. A 69% increase in undergraduate hospitalizations during the last two years reflects an increase in the acuity of patient problems and more effective outreach programs.

- Support and healing interventions. This year, healing from the traumatic aftereffects of the Boston Marathon bombings was interrupted by the deaths of faculty and students due to illness, accidents, and suicide. The Mental Health and Counseling staff responded with comprehensive “postvention” interventions, initiating or participating in on-site programs in departments and residences. Walk-in hours were expanded at Mental Health and Counseling and in the affected residences. Drop-in 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 faculty and colleagues in the Division of Student Life, we worked to develop helpful interventions that support the community, identify persons at risk, reduce stigma, and encourage those who need help to seek it.

Initiatives

In FY2016, we plan to:

- Work closely with the JED Foundation, the Clinton Foundation, and other initiatives to assess and enhance support options on campus and to develop new suicide-prevention initiatives.
- Develop new student-led peer-support entities.
- Refine the use of depression- and suicide-screening instruments for all persons seen at the service.
- Create a “drop-in” office in the Department of Physics.

Nursing Service—Maureen Johnston, MBA, MS, AGNP-BC

Strategic Focus

MIT Medical’s Nursing Service is committed to serving the Institute community at all stages of the health care continuum. The Nursing team is composed of NPs, registered nurses (RNs), certified nurse midwives (CNMs), psychiatric clinical nurse specialists (PCNSs), and a licensed practical nurse.

Accomplishments

During FY2015:

- We developed a nurse-led travel clinic. This initiative improved the speed in which we serve our patients who need pre-travel screening and assessment.
- We introduced nurse-led protocols. The Nursing team, in collaboration with medical colleagues, drafted protocols and clinical pathways to provide more timely care for patients with urinary tract infections.

Primary Care

- NPs provided care for acute and chronic illnesses, educated patients in health promotion and disease prevention, and worked in collaboration with physicians. In FY2015, the Adult Primary Care, Urgent Care, and Pediatrics NPs and RNs provided a total of 18,327 visits.
- Adult Primary Care staffing: Four NPs are designated as primary care providers (PCPs); three full-time RNs and one 0.6 full time employee RN provided 14,850 Adult Primary Care visits, approximately 30 percent 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, obstetric and gynecologic care, and community outreach.

Clinical Precepting

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

Dermatology

- We recruited a family nurse practitioner (FNP) who completed a fellowship in dermatology.

Minor Procedure Room

- An RN performed or assisted with more than 150 procedures in the minor procedure room. This RN also works with our diabetes educator and nutritionist to coordinate care and education for patients with diabetes.

Initiatives

In FY2016, we plan to:

- Further define the function of the CCC. We will focus on remote care to specific populations, methods to support, manage, and coordinate care transitions, and ways to provide direct nursing care interventions at the bedside.
- Assess patient access to better meet demand. We will look toward improving the ease with which patients access health care. This includes exploring online communication in an effort to respond to patient health needs that do not require direct physical contact.

Obstetrics and Gynecology Service—Chana S. Wasserman, MD, Chief

Strategic Focus

MIT Medical's Obstetrics and Gynecology Service (OB/GYN) provides care to women from late adolescence through menopause. In collaboration with Adult Primary Care, the Surgical Service, the Mental Health and Counseling Service, and Community Wellness at MIT Medical, we provide well-rounded and closely integrated care.

Gynecologic services range from comprehensive offerings in birth control to management of menopausal issues. Clinicians provide surgical services and collaborate with laparoscopic and gynecologic oncology specialists. Obstetric care includes midwifery and physician care. We collaborate with maternal fetal medicine specialists and reproductive endocrinologists at Mount Auburn Hospital, Beth Israel Deaconess Medical Center, Brigham and Women's Hospital, and Massachusetts General Hospital to provide high-risk obstetric care and infertility services.

Accomplishments

During FY2015, we achieved the following:

- Births. This year, we had 212 births (200 in FY2014, 229 in FY2013, 189 in FY2012, and 210 in FY2011).
- Awards. In May, Nicole Napier, RN, received the MIT Medical Commitment to Care Individual Award.
- Community involvement.
 - We advised and precepted students and residents from local schools and hospitals, educated new MIT students and parents about our offerings, and served on a wide variety of committees at MIT Medical and affiliated hospitals.
 - We held a successful pregnancy flu clinic in the fall.
 - We hosted two visitors from American Sino-OB/GYN Pediatrics Services, Shanghai, China, in collaboration with Mount Auburn Hospital.
- Second-phase completion of prenatal electronic medical records. Prenatal records are now directly printed at Mount Auburn Hospital, eliminating the need to send paper charts each trimester. Providers have access to real-time records, improving patient care. This was accomplished through coordination with our Information Systems and Medical Records teams and personalized training of the Mount Auburn staff by our chief.
- Emergency contraception (EC) protocol. Our nurse coordinator developed a nurse-driven EC protocol. A nurse assesses and prescribes EC to patients, decreasing wait times by not requiring an appointment with a clinician. The nurse coordinator trained the triage nurses in Adult Primary Care, increasing EC access for patients. We worked with local pharmacies to have *ella*, an EC pill, available for patients who are unable to fill prescriptions at MIT Medical.

- Postpartum depression screen. In April, using the Edinburgh Postnatal Depression Scale, we implemented a process to screen all postpartum patients for depression and make referrals as needed.
- Auto-fax reports. We arranged to have Diagnostic Ultrasound Associates (our main ultrasound provider) auto-fax patient reports to us daily, helping make patient care more efficient.
- “Meaningful use” compliance. Dr. Annie Liao and Dr. Chana Wasserman have qualified for the first three years of MIT’s “meaningful use” eligibility. Both are on track to qualify for the fourth year.

Initiatives

In FY2016, we plan to:

- Hire and train an OB/GYN triage nurse and medical assistant. A current medical assistant, Ana Rodriguez, will be relocating in July 2015. She has been a dedicated and excellent medical assistant in our department for the past eight years.
- Review and revise all OB/GYN-related TouchWorks note templates to aid compliance with the new note-signing guidelines.

Occupational and Environmental Medicine Service and Employee Health Service—David V. Diamond, MD, Chief, and Jacqueline Sherry, RNP, Clinical Coordinator

Strategic Focus

The Occupational and Environmental Medicine Service and Employee Health Service aim to provide the best preventive, consultative, diagnostic, and therapeutic care for work- or environment-related illnesses and injuries at MIT. We work closely with, and consult with, MIT’s Environment, Health, and Safety Office (EHS), MIT’s Security and Emergency Management Office (SEMO), 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

During FY2015, we achieved the following:

- Further developed a health-risk assessment program for employees, WellCheck, in conjunction with Community Wellness at MIT Medical and MIT Human Resources.
- Presented lectures on ergonomic safety, animal allergy, and nanotechnology to employee groups.
- Established and now chair a campus-wide safety committee to support EHS efforts in areas without presidential committee oversight.

- Worked with EHS to train staff at MIT Medical for an Ebola preparedness plan including:
 - Triage protocol-desk staff training.
 - Donning and doffing of protective clothing for clinicians.
 - Communication strategies.

Initiatives

In FY2016, we plan to:

- Develop updated emergency response protocols for new biological research involving genetic engineering.
- Create an educational rotation with resident physicians from the Harvard School of Public Health.

Pediatrics Service—Jocelyn O. Joseph, MD, Chief

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 to respect diverse types of families while delivering outstanding pediatric health care utilizing the latest technological advancements.

Accomplishments

During FY2015, we:

- Integrated pediatric psychiatrist Debra Kulick into the Pediatrics Service. Kulick sees patients and parents one day a week. She also provides supervision to Cambridge Health Alliance fellows, who see MIT families in Pediatrics once a week.
- Improved our waiting room information board. Survey data suggest that this has improved communication to parents regarding delays.
- Implemented new systems to minimize or eliminate errors in ordering, administering, and documenting immunizations.
- Completed a collaborative project with Beth Israel Deaconess Medical Center and members of the MIT faculty to assess whether parents are able to perform rapid strep testing of their children. Analysis and results of the project are pending.
- Implemented a depression screening tool for all annual well-care visits for patients age 13 and older.
- Continued renovations to the hallways and bulletin boards to create a warmer and more inviting feel.

Community Outreach

- Delivered health care talks to children and teenagers in the greater Boston area.
- Mentored and preceptored graduate NP students and Harvard Medical School students.

Initiatives

In FY2016, we plan to:

- Continue to act as a pilot test site for assessing patient wait times and systems to improve patient, provider, and staff satisfaction.
- Continue to eliminate errors in ordering, administering, and documenting immunizations.
- Continue to improve patient education and care through increased outreach programming, working collaboratively with various members of the MIT community.
- Continue to integrate pediatric mental health services into the Cambridge practice.
- Implement a depression screening tool for postpartum mothers to be administered at the two-month visit.
- Standardize developmental testing for patients at 9, 18, and 24 months.

Surgical Service—David V. Diamond, MD, Chief

Strategic Focus

The Surgical Service at MIT Medical includes general surgery and surgical specialties in orthopedics, urology, and otolaryngology with weekly on-site clinics.

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 Massachusetts General Hospital.

Accomplishments

During FY2015:

- Senior urologist George Reservitz retired after 40 years of service, with James Ku increasing his hours to cover.
- Robert Kiskaddon retired after many years of service, with his colleagues supporting our ear, nose, and throat commitments.
- We eliminated the on-site chief of surgery position and clinic hours after a year-long critical review of trends in general surgical services, including decreased referrals internally, increased subspecialist care offsite, and new capacity for

minor procedures by Adult Primary Care. General surgery beyond minor procedures will be referred to private practices at Mount Auburn Hospital and Massachusetts General Hospital.

Initiatives

In FY2016, we plan to:

- Monitor the impact of redeploying general surgery services to ensure the continuation of expedited access to care and care coordination.
- Review orthopedic staffing and clinical needs.

Urgent Care Service—Brian D. Marriott, MD, Coordinator of After Hours Service; Janis Puibello, MS, FNP-BC, Nursing Coordinator; and Stephanie Shapiro, MD, Chief of Medicine

Strategic Focus

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

Accomplishments

During FY2015, we:

- Had 17,287 patient visits, representing a 2% increase in volume from FY2014.
- Continued ongoing recruitment to maintain adequate staffing of after-hours services with associate physician staff.
- Recruited additional FNPs, strengthening our weekend pediatric services.
- Recruited additional triage RNs, including a full-time RN, to increase our per-diem staff for holidays and weekends.
- Instituted routinely scheduled case conferences for Urgent Care NPs.
- Utilized data-driven practice improvement activities to evaluate patients for suspected thromboembolic disease.
- Coordinated care with all clinic services within MIT Medical. We expanded the daily huddle to include input from Mental Health and Counseling, and we instituted formal weekend sign-out to improve communication with weekend staff.
- Remained fully operational with adequate staffing and services through all Institute snow emergency closings.

Initiatives

In FY2016, we plan to:

- Expand case-based learning sessions to include training on efficient workflows and documentation.
- Continue to evaluate optimal organization and workflows to provide timely, efficient, and appropriate care to the MIT community. We established a working group to investigate whether our current urgent care structure meets the needs of the MIT community.

Administrative Services

Information Systems and Medical Records—Shelagh M. Joyce, Director

Strategic Focus

The Information Systems and Medical Records Service has two major objectives—to utilize technology that improves care for our patients and to provide software solutions that promote effective, safe, and streamlined workflows for MIT Medical clinicians and staff.

Accomplishments

During FY2015, we achieved the following:

- Automation of the campus-wide flu clinics. For the fall 2014 flu clinics, the patient and clinical workflow was fully automated, and 9,200 clinical encounters were loaded into the electronic medical record in real time. This system eliminated the need for hundreds of after-the-fact data-entry hours and allowed us to process patients much faster.
- Multiple clinical system software enhancements.
 - We added the functionality to call patients after seven days to remind them to pick up their prescriptions. This helped reduce the amount of restock work required by pharmacy staff.
 - Many software changes and configurations were completed in preparation for the ICD-10 launch in October 2015.

Initiatives

In FY2016, we plan to:

- Go live with the new federal requirements for ICD-10. We will train all staff in ICD-10 and modify trainings based on the findings of our clinical record audits.
- **Replace our interface engine.** This engine directs the data throughput of 17 clinical and administrative interfaces and sends data to multiple vendor systems internally and externally.

Operations—Deborah Friscino, Director

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

During FY2015, we achieved the following:

Continuing Initiatives

- We automated the documentation of influenza vaccine administration to more than 14,000 members of the MIT community through large clinics at the Student Center and daily clinics in E23.
- We integrated talent development training into new employee orientations. Using a competency-based “TOP” model (Talents, Organization’s needs, Passions), new staff members learned the importance of establishing goals that use their talents and passions to meet organizational needs in ways that are consistent with competencies MIT has identified as important for success. Continual learning at the individual and organizational levels will support progress toward meeting those goals.
- We conducted a third staff survey. Over 99% of staff who responded said they were proud to work at MIT Medical. Responses were overwhelmingly positive, indicating that recently developed programs have been successful in creating a respectful workplace environment.

Licensing and Accreditation

- The clinical laboratory was reaccredited by the College of American Pathologists.
- The Joint Commission reaccredited us as an ambulatory care center.
- The mammography unit received its annual relicensure from the Massachusetts Department of Public Health and the US Food and Drug Administration.

New Initiatives

- We responded to Ebola concerns. With members of MIT’s Emergency Operations Center (EOC), the Department of Public Health, and other key leaders, we identified travelers at risk for exposure to Ebola, and we established and communicated procedures for monitoring and handling this any potential illness on campus.
- We improved immunization documentation processes. Based on input from staff, we identified areas with potential for error, streamlined the process of vaccine administration and documentation, and trained staff in new procedures.

Initiatives

In FY2016, we plan to:

- Welcome a new medical director and redefine MIT Medical’s leadership team. The retirement of both the medical and executive directors in FY2015 provides an opportunity to reconsider the department’s strategic direction as we transition leadership and plan for future retirements, given that a significant number of staff members are over age 55.
- Strengthen customer service to patients, coworkers, and other members of the community. Using our values as a framework, staff are discussing ways to work more collaboratively in providing coordinated care.
- Evaluate access to and systems for medical care. Based on survey results and community input, we look forward to improving the timeliness of direct patient care and finding ways to expand the use of technology in support of “virtual visits.”

Emergency Preparedness—David V. Diamond, MD, Associate Medical Director; Deborah Friscino, Director of Operations; and Robert Bright, Facilities and Safety Manager

Strategic Focus

In partnership with Occupational and Employee Health Services at MIT Medical, MIT Medical’s senior leadership team, EHS, SEMO, 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

During FY2015:

- We implemented an automated system (using bar scanners) to reduce patient check-in time and improve the flu clinic documentation process.
- We conducted two large-scale influenza vaccination clinics in conjunction with the EOC, providing more than 7,000 vaccinations at two six-hour clinics and more than 14,000 total vaccinations during the flu season.
- Dr. Howard Heller developed and led an Ebola preparation team to provide communication on MIT’s Ebola preparation plan and to ensure readiness, proper screening, and effective response to suspected or confirmed Ebola virus disease cases.
- We worked with MIT Police to present active-shooter training and interactive scenario drills at several staff training sessions.
- We provided medical support at Commencement.

- We participated in EOC monthly meetings and provided leadership in the communications, command staff, and operations sections.

Initiatives

In FY2016, we plan to:

- Continue to serve in leadership and support roles within the EOC.
- Collaborate with emergency management personnel in Boston and Cambridge and at 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.

Marketing and Communications—David Tytell, Manager

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

During FY2015, we:

- Launched a new public website, medical.mit.edu.
- Built seven different audience-focused dashboards on the website to provide tailored content to specific audiences within the MIT community.
- Created a video to educate patients about our telephone-based language-translation services.
- Hired and trained a new graphic design specialist to improve the visual presence of communication materials for MIT Medical and MIT Health Plans.
- Built three online health plan quizzes to help patients make better-informed decisions when selecting their health insurance.
- Updated and enhanced the MIT Medical strategic plan website in close collaboration with MIT Medical's Operations Group.
- Provided advisory assistance for various projects through EVP Connect, including the Collaborating for MIT's Future poster session.
- Enhanced our social media presence, growing our Facebook page and building upon our Twitter presence.

- Began to reassess the effectiveness of all printed materials with the goal of refreshing, rebranding, and redesigning materials as necessary.
- Grew our podcast library to nearly two dozen interviews in an effort to continue presenting topics of interest to MIT Medical patients.
- Provided support for the campus-wide Ask for Help mental health campaign, in partnership with the Mental Health and Counseling Service, the academic deans' offices, the chancellor, the faculty, and student groups.

Initiatives

In FY2016, we plan to:

- Continue to reassess the effectiveness of all printed materials and redesign existing pieces as necessary.
- Create new website videos focused on patient services at MIT Medical.
- Publish three additional community dashboards—new employees, parents, and retirees.
- Refresh, update, and relaunch the spouses&partners and MedLinks websites.
- Improve and enhance the social-media footprint of MIT Medical with the goal of making social media a viable communications vehicle.
- Help develop new clinician-recruitment materials to entice the best applicants to apply to MIT Medical.
- Grow our library of content from our “Ask Lucy” web-based patient-focused advice column.
- Develop Mental Health and Counseling materials to increase transparency and debunk myths and misconceptions.

Finance—Lucy Walsh, Director

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 FY2015, we achieved the following:

Information Improvements

- We enhanced the quarterly cost reports that monitor the Institute's health care costs. Reports now drill down into the reasons for cost increases in the employee

and student insurance plans and compare current costs to the prior year. Increased costs are impacted by increased membership, increased utilization, changes in the mix of services, and higher prices.

- We implemented a new database tool. We mapped all data elements and claims data for the employee and student plans. Adding this information to the database tool will improve our analytical capabilities.

Business Process Improvements

- We continued training and planning for the upcoming conversion to a new **diagnostic coding system**. We conducted refresher training on basic coding and documentation requirements in addition to more comprehensive training for ICD-10.
- We enhanced the order page for contact lens payments. The Eye Service now receives a copy, as does the patient, thereby simplifying the process for the patient to print a receipt.

Business Model Improvements

- We transitioned temporary and contract employees to MIT term employee status or limited liability company status as appropriate. As of the start of FY2016, all required transitions were complete and in compliance with federal and state rules.

Initiatives

In FY2016, we plan to:

- Complete the implementation of the new medical-diagnosis coding system. Extensive training of clinical staff is under way in preparation for the October 2015 ICD-10 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 and new benefit designs or products.
- Monitor the increasing costs of the student insurance plan as well as possible migration to the health care exchanges.
- Focus on improving the efficiency and accuracy of transactions submitted to Systems Applications and Products and Student Financial Services as well as the processing of insurance payments from affiliates.

Performance Improvement and Risk Management—Ruth Fishbein, Director

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

During FY2015, we achieved the following:

- Care for patients with diabetes. The diabetes care team treatment program, focusing on the use of a treatment algorithm for consistent and coordinated care, rolled out a team approach across all Adult Primary Care clusters. Components of this multidisciplinary service include patient education, care management, nutrition support, medication management, and clinical medical education. Initial results show improvement on key measures.
- Quality metrics. MIT Medical, working with the Medical Management Board, developed a set of metrics that provides a picture of strengths and opportunities for improving our patient care system.
- CRICO RAP (Risk Appraisal and Plan) grant. An electronic event-reporting system was implemented across the department, with the desired results: a sixfold increase in the number of reports submitted (443 versus 83 in FY2014), increased staff participation across the department, and capacity for substantive data analysis and action.
- Continuous compliance with Joint Commission standards. In October 2014, the Joint Commission granted MIT Medical full accreditation for 36 months. Our goal is to be continuously compliant with accreditation standards. To that end, we continue to conduct regular “mock tracers” and facility rounds and offer staff training and education.
- Rapid cycle improvement. We are bringing together small groups of staff involved in a particular adverse event to meet and flowchart the steps associated with the event, identify root causes, and recommend system improvements. We have completed four projects since May 2015 with implementation of 72% of recommendations; the remaining recommendations will be implemented by August 31, 2015.
- CRICO Office Practice Evaluation. We participated in our malpractice carrier’s Office Practice Evaluation, conducted every three years. Initial surveyor feedback was very positive. A full report with recommendations is expected in the first quarter of FY2016.

Initiatives

Our plans for FY2016 include:

- CRICO RAP grant. We are working to achieve all goals of this project when the grant ends on August 31, 2015. That includes improving adverse event reporting, staff education on patient safety, enhanced communication, and understanding of staff and leadership roles in patient safety.
- Clinical informatics. Identify software to assist in mining our data to evaluate patient outcomes, clinical quality, and treatment effectiveness for population groups.
- Patient satisfaction. MIT Medical will transition to electronic surveying early in FY2016. This will allow us to survey 100% of patient visits and increase the number of responses. We are also exploring the potential to benchmark our results with Harvard University Health Services.
- Mental health patient satisfaction. The Mental Health and Counseling Service, in collaboration with the Office of Institutional Research, will implement a survey to measure patient satisfaction, particularly in the area of access. The pilot begins August 2015.
- Closed-loop system development. We will continue to work on designing closed-loop workflows to ensure safe and effective patient care. For example, we are expanding our outside referral system to include consistent retrieval and clinician notification of outside consultant reports.

Community Wellness at MIT Medical—Maryanne Kirkbride, MS, MBA, RN

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

Because we know that more than half of all diseases are associated with lifestyle and environmental factors, 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

During FY2015, we achieved the following:

getfit@mit

- The number of participants in our 12-week team-based winter fitness challenge reached 3,665.
- We collaborated with the MIT Computer Science and Artificial Intelligence Laboratory to create a getfit@mit app for iPhone users, and 157 participants downloaded it.
- Our getfitters racked up a total of 284,844 minutes shoveling during the winter challenge, in the snowiest winter in Boston's history.

Eating Concerns and Body Image

- We continued to serve as part of the eating concerns team at MIT Medical and, along with Mental Health and Counseling, co-led the support group Making Peace with Food and Body Image.
- For National Eating Disorders Awareness Week, we expanded UnHealth Talk, a public health campaign to address negative self-image, a known risk for eating concerns.
- We provided workshops for all Department of Athletics, Physical Education, and Recreation coaches, for MedLinks, and for undergraduate and graduate students.

MedLinks Peer-Advocacy Program

- MedLinks added 56 new members this year, for a total of 159 volunteers, including at least four in every dormitory and one in more than half of the fraternities, sororities, and independent living groups.
- MedLinks volunteers logged more than 2,000 interactions during the school year.
- Volunteers hosted or provided support for 13 community-wide events and 68 residential events.

Graduate Student Outreach and Support

- We provided wellness content for the monthly Graduate Women's Lunch.
- We delivered on-site programming in graduate residences.

- We presented workshops for key members of the graduate community and those who support them.

Violence Prevention and Response

- We trained more than 2,200 students on issues of sexual assault, dating/domestic violence, and stalking.
- We advocated for more than 110 community members and answered 78 hotline calls.
- We worked as advisors to the chancellor to address sexual violence on campus.
- We created and disseminated, with the help of campus partners, a nationally acclaimed campus climate survey on sexual misconduct.
- We hired four new positions: a prevention and education specialist for graduate students, a peer education program manager, a victim advocate, and a program assistant.
- We saw the most successful Sexual Assault Awareness Month ever, with more than 20 planned events and hundreds of attendees.

Health and Wellness Coaching

- We provided 355 one-on-one health and wellness coaching sessions, more than doubling last year's total.
- We offered six group health and wellness coaching classes.
- We achieved a Net Promotor Score (customer service rating) of 91%.

Campus Health and Wellness

- Suicide-awareness trainees doubled to 260 participants, with 91% of participants reporting an increase in their knowledge of suicide prevention.

Student Stress Reduction and Mindfulness

- We developed a new freshman seminar, Hack Your Mind: Unlock Your Potential, focused on mindfulness, psychology, and neuroscience, with Biological Engineering's Katharina Ribbeck.
- We developed Hack Your Mind, a monthly speaker series on the intersection of mindfulness, technology, and well-being, in collaboration with the Technology and Culture Forum.
- We provided an open, monthly class titled Meditation for Your Well-Being.

Effective Use of Technology and Media

- Our webpage with wellness downloads—including sleep tips and mindfulness meditation MP3s—garnered 96,673 unique page views.

Workplace-wellness programming

- 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.
- We worked with EHS and Human Resources to draft a plan for more strategic collaboration to identify and meet shared goals within the Total Worker Health model.

MIT Spouses & Partners

We completed a successful crowdfunding campaign on the newly launched [MIT Crowdfund platform](#), garnering more than \$3,500 to support Career Connect, the group's job search and career development program.

We increased participation by male spouses in our Career Connect sessions.

We participated in the Collaborating for MIT's Future poster session by presenting our Career Connect program.

We supervised an intern from UMass Boston's sociology master's program, who conducted research about the adaptation experience of MIT spouses through analysis of MIT Institutional Research data, literature review, and qualitative interviews with our members.

Initiatives

In FY2016, we plan to:

- Continue to identify opportunities for employee health promotion within current resource allocations.
- Increase clinician referrals to health and wellness coaching by 25%.
- Work with others at MIT to address issues of sexual assault response and prevention.
- Optimize collaboration with the Division of Student Life in student-health promotion, working in partnership with the Division of Student Life's Wellness Implementation Team.

Maryanne Kirkbride, MS, MBA, RN

Medical and Administrative Staff Appointments

Lauren Gaffney	Graphic Design Specialist	07/16/2014
Samran	Nurse Care Manager	08/25/2014
Sukrungruangsanti		
Hercilia Corona	Psychologist	08/25/2014
Mia Gore	Psychiatrist	09/02/2014
Elizabeth Haftel	Pharmacist	09/02/2014
Claudia Guillen	Triage Nurse	10/01/2014
Maureen Cassidy	Triage Nurse	11/01/2014
Anne Marcoux	Triage Nurse	11/10/2014
Cheryl Arlington	Sr. Optician	02/02/2015
Vienna Rothberg	Program Manager for Peer Education	02/09/2015
Megan Chuhuran	Victim Advocate	03/09/2015
Amanda Hankins	Prevention and Education Specialist	03/09/2015
Nadia Ounis-Skali	Physician	04/27/2015

Separations from Service

Sylvia Mateega	Lead Pharmacist	08/01/2014
Debra Crowley	Triage Nurse	08/10/2014
Lili Gottfried	Psychiatrist	08/31/2014
Lynn Forgues	Triage Nurse	09/30/2015
Annette Jacobs	Executive Director	01/05/2015
Marie Avelino	Nurse Care Manager	01/31/2015
Maureen Cassidy	Triage Nurse	03/27/2015
Roger Proulx	Sr. Optician	03/28/2015
Abbie Ferrie-Calkins	Administrative Coordinator	04/10/2015
Marianna Helin	Nurse Practitioner	05/08/2015
Wendy Westford	Dental Hygienist	05/11/2015
Hercilia Corona	Psychologist	05/31/2015
Mary Farrahar	Nurse Practitioner	06/05/2015

Promotions

Kate McCarthy	Director of Violence Prevention and Response	12/01/2014
Deborah Friscino	Interim Executive Director	01/01/2015