

ZSFG CHIEF OF STAFF REPORT
Presented to the JCC-ZSFG on May 22 2018
05/14/18 Leadership MEC and 05/19/18 Business MEC7

CLINICAL SERVICE REPORT:

Neurosurgery Service Report– Geoff Manley, MD, Service Chief

The Brain and Spinal Injury Center (BASIC) was created in 2002 at ZSFG, and is focused on creating a synergy that will facilitate translation of fundamental understandings into clinical practice. The Neurosurgery Report included the following:

- Goals – Provide the most advanced care for patients with brain and spinal cord injury, translate basic neuroscience into clinical practice, train the next generation of neurotrauma clinicians and scientists, and transform neurotrauma worldwide.
- Scope of Clinical Services- Inpatient Services (Traumatic brain, spine and other neurosurgical emergencies, Neurocritical Care, Elective/Consult), 24/7/365 (Attending rounds every day and sees all patients, attending reviews all studies, comprehensive consultation documentation).
- Clinical Services – Trauma (Traumatic Brain Injury, Spine/Spinal Cord Injury), Non-Trauma (Craniocerebral, Spinal, Peripheral Nerve), and Ambulatory (4M Clinic, TBI Clinic and Concussion Clinic). Volume on the number of traumatic brain injury cases and consults continue to increase due to more awareness, and the significant increase in elderly TBI in CA over the last ten years.
- Faculty and Residents – Estimated “Right Size” FTE is 4.5 to 5.3 but current attending staff is only at 2.82 FTE due to competitive salary challenges in recruiting neurosurgeons. The support by the nurse practitioners has been critical.
- Quality Assurance and Process Improvement. Performance improvement work includes:
 - Workforce development - Neurosurgery Attending 360 Evaluation
 - Alcohol Counseling – Alcohol use is a known risk factor for TBI and alcohol use following TBI may impede recovery. TBI patients testing positive for alcohol are referred for additional screening and brief intervention.
 - Performance Improvement, Outcomes – Monthly Performance Dashboards: On Time VTE Prophylaxis%, Multimodal Monitoring %, EtOH Screening %, EtOH Brief Intervention %.
- Finances – 28% increase in Collections as a result of extensive documentation and real time daily monitoring on consults, critical care and daily notes by attendings. Coding classes, consulting and external coders are utilized for OR cases.
- Research – NIH Funding FY 2015 \$6.3 M. As a department of Neurosurgery, ZSFG would rank second in the country. Total Funding (NIH, DoD, Public/Private currently at \$47.7 M). Prime Study is on Track-TBI which is a precision medicine study of traumatic brain injury across hospitals all over the country.
- Challenges: Clinical Responsibilities/staffing ratio (2.82 FTE), Faculty retention and recruitment, Administrative responsibilities/staffing ratio, Support for the TBI Program, New Funding model for clinical services at ZSFG, IT Infrastructure and Data Access

Other highlights include:

- Severe challenges in recruiting neurotrauma trainees and surgeons due to compensation issues and the long erratic work schedule associated with the subspecialty. Neurosurgery physician salary rate at ZSFG is -3 Standards Deviation below the median, based on the standard compensation data and analysis compiled through leading organizations including American Medical Group Association, Medical Group Management Association, and Sullivan Cotter.
- Expanding clinical presence in spinal cord injuries (SPI). This year was the first time when Neurosurgery pioneered a spinal cord injury treatment protocol on a patient where a spinal cord drain was placed to monitor the pressure within the spinal canal. The patient regained strength in his arms and legs, was subsequently transferred to a sister safety net hospital, and is now an advocate for BASIC.
- ZSFG’s Traumatic Brain Injury Program was first in the nation to receive Joint Commission Certification in 2011, recertified in 2013, 2016 and recently in 2018. There were no deficiencies identified in the recent recertification. The hospital’s TBI program has become a model for other TBI programs across the country.

Members commended Dr. Manley’s excellent report, outstanding leadership, and the impressive and inspiring work done at the Neurosurgery Service.