Staff Town Hall Meeting
September 13, 2023

We will start at 12:10!

Overview

- Lifespan Leadership Update

- BPI Foundations and Board of Directors

- BPI Integration Journey and CAO Search

- Belonging, Equity, Diversity, and Inclusion Committee Update

- Questions

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Questions?

- Please put questions in the chat, either to everyone or Jen Hyde

Lifespan Leadership Update

- John Fernandez, President and CEO

- Peter Markell, Executive Vice President and Chief Financial Officer

- Marcia Neiberg, Senior Vice President and Chief Strategy and Planning Officer

- Athena Poppas, Interim President Lifespan Physician Group

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Lifespan System Leadership Committee Structure

Committees	Purpose	
Hospital Operations Committee	The HOC is responsible for the oversight and endorsement of operational decisions effecting the clinical delivery of hospital care and to ensure optimal operational efficiency and effectiveness in asset utilization and clinical programs for hospitals for the system.	
Ambulatory Committee	The AC is responsible for the oversight and endorsement of operational decisions effecting the clinical delivery of ambulatory care and to ensure the optimal operational efficiency and effectiveness in asset utilization and clinical programs for ambulatory practices operations for the system.	
Research & Education Committee	The REC is responsible for the strategy, oversight and effectiveness of the research and teaching enterprise for the system. (May change as ARC comes to fruition.)	
Administration & Finance Committee	The AFC is responsible for the strategic management and oversight of the organization's resources to include financial, human capital, information technology, the digital front door, payer contracting/VBC, capital deployment, workforce planning and supply chain.	
Planning Committee	The PC is responsible for guiding the development of, review, and recommendations for approval of all organizational growth initiatives and their impact on the organization and its mission, including implications to finance, strategy, resources and space. This committee will oversee and approve any changes to off campus space planning, including new space needs and the moving of existing programs to different space.	

*BPI will have representation on each of these committees

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BPI: Who are we and why did we create BPI?

- BPI formed in 2017
  - Brown Dermatology, Brown Emergency Medicine, Brown Medicine, Brown Neurology, Brown Surgery, Brown Urology

- With all the changes in healthcare, we are stronger in the market together
  - Advance patient care, coordination of care
  - Strengthen the academic mission
  - Improving operational efficiencies

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Brown Physicians, Inc Board of Directors

Angela Caliendo, MD, PhD

President, Brown Physicians, Inc. Vice Chair, Department of Medicine

William Cioffi, MD, FACS

Chair, Brown Physicians, Inc. Chair Department of Surgery

Karen L. Furie, MD, MPH

Secretary, Brown Physicians, Inc. Chair, Department of Neurology

Kim Galligan, MBA

Vice President for Clinical Affairs and Strategy and Chief Operating Officer, Warren Alpert Medical School

Mukesh Jain, MD

Dean of Medicine and Biological Sciences, Warren Alpert Medical School

Abrar Qureshi, MD, MPH

Chair, Department of Dermatology

Gyan Pareek, MD, FACS

Chair, Department of Urology

Louis Rice, MD

Treasurer, Brown Physicians, Inc. Chair, Department of Medicine

Linda Brown, MD, MHS

Interim Chair, Department of Emergency Medicine

At Large Members

Andrew Blum, MD, PhD
Professor and Vice Chair of Neurology at the Alpert Medical School of Brown University

Anthony Napoli, MD, MHL
Professor of Emergency Medicine and Health Services, Policy, and Practice

Su-Jean Seo, MD, PhD
Assistant Professor of Dermatology

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Integration Journey

- As of November 2022, the BPI Board and Foundations voted to fully integrate.

- We are beginning the process of integrating administrative functions.

- A national search for a Chief Administrative Officer (CAO) is ongoing with the assistance of a search firm.

- The search committee is reviewing candidates with a goal to have a CAO in place by end of the calendar year.

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Chief Administrative Officer (CAO)

- Responsible for the continued success of the Brown Physicians, Inc (BPI) by providing operational and financial leadership, while overseeing the daily operations ensuring short and long-term goals are met.

- The CAO will serve as the administrative partner to the BPI Physician President and together they will co-lead the management of BPI.

- Oversight over all BPI administrative staff and centralized functions.

- Lead BPI's growth initiatives, under board direction, to grow and expand BPI's impact.

- The CAO will be employed by BPI, hired by President & Board and reports to the President.

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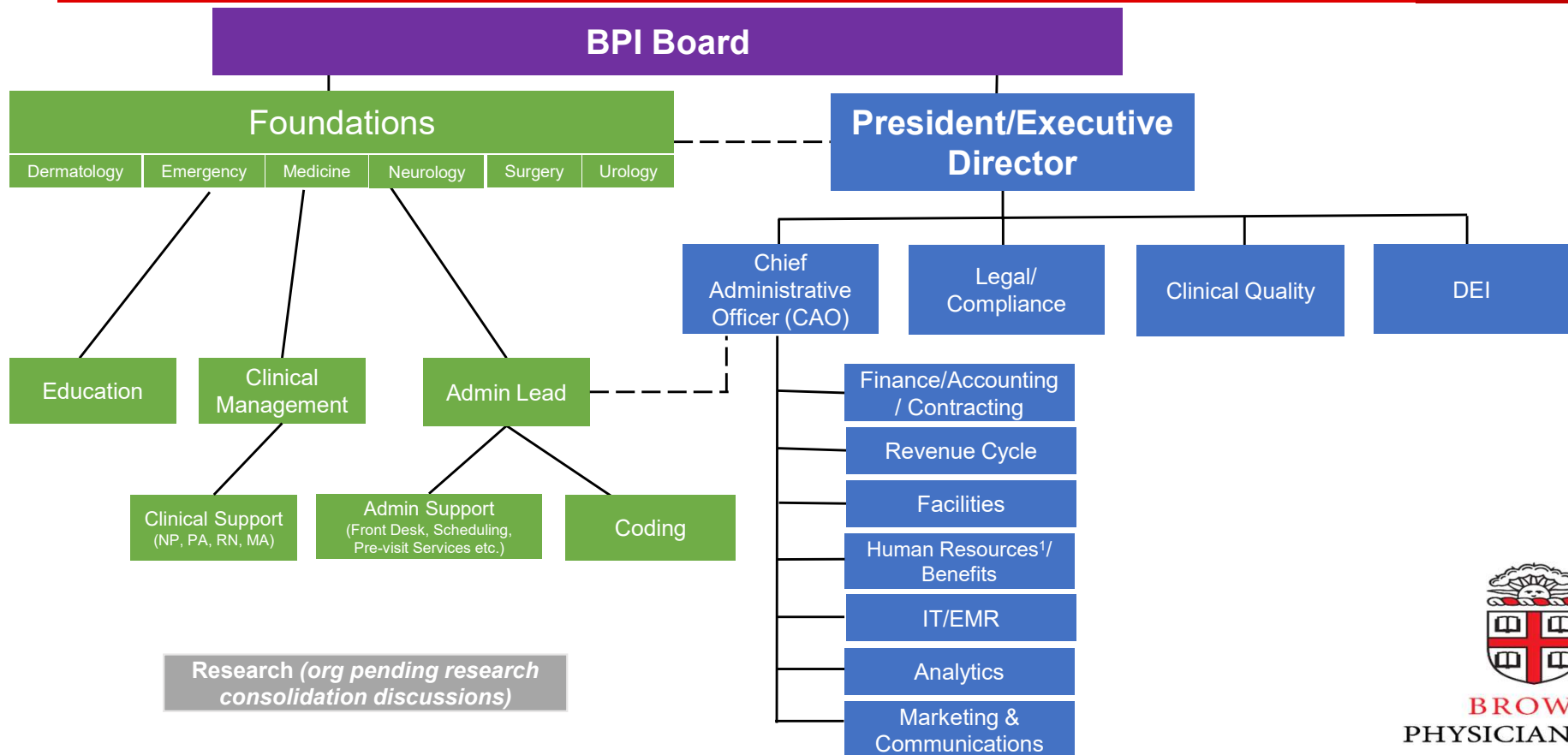
Integration Journey

- Phase 1, effective Oct 1st:
  - HR and IT staff will be employed by BPI
  - HR staff will report to Tammy Lederer, IT staff will report to David Hemendinger

- Phase 2: the CAO will develop a plan for the additional areas
  - Areas under consideration for integration: finance, payroll, facilities, analytics, marketing and communications
  - Time frame for next steps

- Areas that will <u>remain under Foundation management</u>: physicians, APPs, clinical staff, coding, front desk, scheduling, lead administrators

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Draft BPI Org Structure

BPI Board

Foundations
| Dermatology | Emergency | Medicine | Neurology | Surgery | Urology |

President/Executive Director

- Education
- Clinical Management
- Admin Lead
  - Clinical Support (NP, PA, RN, MA)
  - Admin Support (Front Desk, Scheduling, Pre-visit Services etc.)
  - Coding

Research *(org pending research consolidation discussions)*

Chief Administrative Officer (CAO)

Legal/ Compliance

Clinical Quality

DEI

- Finance/Accounting / Contracting
- Revenue Cycle
- Facilities
- Human Resources[1]/ Benefits
- IT/EMR
- Analytics
- Marketing & Communications

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Advantages of Centralized HR Services

- Common benefits

- Development of career ladders and additional opportunities for career advancement

- Opportunities for cross-training and diversifying the work you are doing

- Establishing and sharing best practices

- Standardizing policies

- Contract negotiations with vendors – healthcare and others

- Domestic network for benefits at a reduced cost

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IT Advantages of Centralized Services

- Standard network and system tools, login from any facility and perform your foundation tasks.

- New software and applications available to all foundations.

- Single IT support team which supports all foundational IT needs, better customer support, timely response, mitigate IT staff burnout, on-call IT coverage, full help desk.

- Advanced security framework in place which protects all foundations from internal and external cyber threats, framework monitors network and device 24x7x365

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IT Advantages of Centralized Services- EMR

- Foundation to foundation patient referrals, scheduling, and clinical record visibility.

- New clinical software modules available to all foundations.

- Implementation of a master patient index for BPI, same patient across all foundations (eliminates duplicate patients and streamlines clinical workflow).

- Central formulary which enhances medication administration, med-to-med checking, and timely e-RX delivery to the pharmacies and the patient. Enhances patient safety.

- Clinical provider and staff workflow enhancements

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Overview

- BPI continues to evolve, important integration progress regarding HR/benefits and IT/EMR

- Moving into next phase with hiring of CAO and integrating additional administrative functions.