

April 25, 2022

Annual Report to the Faculty

Banner -University Medical Group Tucson

Dear Colleagues:

As I approach my third year here in Tucson it is with both humble gratitude and tremendous pride that I present the annual report from the medical group and the health system. Barely two years ago, when I drafted a similar report we were but a few weeks into what would prove to be a global challenge that has perhaps transformed healthcare and society in general in unfathomable ways. Yet, as I write this April, it is a spirit infused with hope and expectation as we have not only weathered multiple and repeated challenges together but we remain a vibrant health system, a leader in our community and committed and united in our dedication to compassionate and pioneering care to our community.

There are a few highlights of our pandemic response I would like to highlight and celebrate. From the very start of the pandemic, our faculty engineered novel ways to address challenges not only in direct treatment of the viral infection and its ravages on the body but also in the coordination of care. Our faculty were involved in national and international trials on novel therapies that became standard of care, and also studied the immune trajectory of the infection. Realizing we had to come up with new ways to manage capacity, our leaders crafted “COVID at home” programs and created unique coordination activities with long term care facilities. Once vaccines became available, faculty and staff through their energies full tilt in a campaign to provide lifesaving product to our communities with our drive through facility at South campus. All of this was accomplished with our physicians, housestaff and students taking on personal risk to provide care to others.

To pivot to the amazing expansion of our footprint, I would like to start with a review of our growth as a health system over the past three years. I have included a table below that shows that trajectory in the key areas of admission, surgical cases, ED admissions, ambulatory visits and deliveries. In every single category, we have demonstrated sustained growth, and in fact, our review of 2021 shows that Banner University Medicine has emerged as the market leader in the Pima market. This has resulted from the work of many but I would like to point out the dedicated efforts of our clinical leaders (chairs, chiefs, service line leaders) who have sustained recruitment and retention efforts amidst the most challenging of pandemics.

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	<b>2021</b>	<b>2020</b>	<b>2019</b>
Admissions	31,981	27,135	30,162
Surgical Cases	19,814	17,694	19,370
ED Admissions	23,707	21,064	21,079
Ambulatory Visits	773,220	700,519	694,481
Deliveries	2,430	1,831	1,785

Our growth is set to continue as in the next two months, we will open our first B-UMG exclusive Ambulatory Surgery Center with our partners at Banner/Atlas in Reid Park and we have received approval to refurbish an additional 6 operating theatres in the older footprint of the hospital so that we can continue provide lifesaving treatments to the communities who entrust us with their care.

On the quality and regulatory front, since our last Annual review, both our Tucson and South campuses have undergone accreditation visits from The Joint Commission, and we have received many complimentary statements regarding the care we provide every day. In the course of our Tucson campus visit, leaders from multiple disciplines gathered together to optimize our sterile processing and instrument handling paradigms, renewing our dedication to infection prevention and safe surgery. This year also marked our third year of improving statistics with respect to mortality index, indicating our continued focus on making healthcare safer.

I would be remiss if I did not comment on the infusion of new leadership with the recruitment of 11 going on 12 new chairs and the creation of an expanded perioperative leadership team who have banded together to create a state of the art model of care for perioperative patients. As we look to the coming year we hope to expand in multiple setting a dyadic form of leadership where physician leaders are linked to administrative leaders to optimize their care areas.

Of course, I am mindful of the many challenges ahead, and one of the most challenging (and elusive of easy fixes) is the current state of healthcare staffing overall. As our country has undergone fundamental shift in the patterns of labor , our own industry has been impacted and we strive to find novel strategies to recruit and retain a workforce that will allow us to deliver the kind of care to which we all aspire. I am confident that just as we have proven over the past two years, we will find creative and innovative solutions to these challenges.

Respectfully Submitted,

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