FACULTY SENATE
SENATE ASSEMBLY
UNIVERSITY OF MICHIGAN

1120 Ruthven Building
1109 Geddes Avenue
Ann Arbor, MI 48109

Medical Affairs Advisory Committee
Meeting Minutes

Meeting Date: April 17, 2024
Circulated: 10/10/2024
Approved: 10/16/2024

Present: Analisa DiFeo (Chair), Katherine Gold, Mujtaba Hameed, Ann Marshall (FSO, Coordinator), William Meurer, Shahzad Mian, Michal Olszewski, Zack Ouellette (Office of EVPMA, Admin), Sara Pasquali, Marschall Runge (Executive Vice President for Medical Affairs), Carol Shannon
Absent: Nancy Allee, Aadit Bhausar, Ruth Carlos

Presenters:
• Balqis Elhaddi, Director of Business Operations, University of Michigan Medical Group
• Mehul Naik, Contact Center Director
Guests:
• Vallerie McLaughlin, MD, Kim A. Eagle M.D. Endowed Professor of Cardiovascular Medicine, Associate Chief Clinical Officer and Professor of Internal Medicine, Cardiology Clinic, Frankel Cardiovascular Center
• Sara Koenig McLaughlin, MD, PhD, Clinical Assistant Professor of Pediatrics, Michigan Medicine Pediatrics-Primary Care, Pediatric Clinic, East Ann Arbor Health & Geriatrics Center

Meeting Topic: Update on progress of call centers

1. Chair Analisa Difeo called the meeting to order and the minutes from the last meeting were approved.
• Dr. Runge expressed his gratitude for Analisa Difeo's leadership as Chair and also to MAAC members for the ideas they have shared over the past year.
• The *Faculty Wire* has been utilized over the last few months to announce MAAC meeting topics and to invite faculty comments. It has been good to see faculty engagement. It was suggested that possible MAAC agenda items be invited through the *Faculty Wire*. For today's call center topic, several comments were received from faculty via the *Faculty Wire*.

2. Balqis Elhaddi presented on call center performance:
• In March 2024, 64% of inbound calls were answered within 30 seconds or less, which is a 33% increase from July 2023. Ongoing efforts include optimizing technology enhancements with Cisco and MIChart, exploring opportunities with AI, and strengthening the float pool (staff who can offer backup).
• Call centers experience staff turnover and 6-8 weeks of training is needed for new call center staff. Turnover has improved over time, and exit interviews have shown that staff often leave for promotion opportunities. The transition to the new call center system happened during COVID. A work force management tool is in the process of being added.
• For outbound calls, key measures include the turnaround time for making initial outreach and schedule utilization. Potential enhancements to outbound calls have included working on building in texting capabilities and identifying no-show opportunities, and incorporating feedback from a recent faculty survey.

3. Discussion and recommendations included the topics:
• Appreciation was expressed for Balqis and Mehul's work on this enormous and very complex project.
• Call center staff burnout was discussed and the call center has incorporated an employee engagement committee as well as staff recognition at an annual awards banquet. Increasing the float pool is also a strategy to reduce overtime and burnout. Support for patient transportation could also help solve no-show issues, especially for appointments that can't be virtual. Another option that has been investigated is to over

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schedule. A secret shopper approach was discussed as a possible way to collect data on call centers. At MM, there are 32 different call center groups and 63 distinct workflows that the call center works with.

- Possible recommendations to consider included:
    o Given the complexity and specialization of the call centers, some simple language and/or a simple flow chart/s could be added to presentations to better explain the call centers to faculty.
    o Central nurse triage (CNT) could be a helpful topic of discussion at a future MAAC meeting. Since the call center is the first point of entry, it may be unclear if an issue is related to the call center or to CNT. The call centers work to maintain good communication with CNT.
    o The call center agents could consider rotating through faculty meetings so that faculty could put names to faces. The leadership team might also participate in faculty meetings to review statistics.
    o In general, engaging with end-users is beneficial, i.e. "your schedule is like this because …"

Respectfully submitted,

Ann Marshall, Faculty Governance Coordinator