MEMORANDUM

To: Board of Regents

From: Board Office

Subject: Meeting of the Board of Regents as the Trustees of the University of Iowa Hospitals and Clinics

Date: August 30, 2001

Recommended Action:

Receive the report on the University of Iowa Hospitals and Clinics (UIHC).

Executive Summary:

The Board of Regents, in its role as Trustees of the University of Iowa Hospitals and Clinics, will be provided a quarterly report on the operations of the UIHC. Areas to be covered in this oral report are: 1) Quarterly Update on UIHC Operations, Programs and Finances; 2) Report on UIHC Delegated Governance Functions; and 3) UI Hospitals and Clinics and College of Pharmacy Project – Providing Medication Therapy Continuity for UIHC Patients: Establishment of a Network with Community Pharmacies.

- Quarterly Update on UIHC Operations, Programs and Finances

The University of Iowa Hospitals and Clinics completed fiscal year 2001. During the period July 1, 2000 to June 30, 2001, clinic visits increased 6.4%. Acute inpatient admissions increased 0.6% compared to the same period during the preceding fiscal year. During fiscal year 2001, the average length of inpatient stays increased 0.4%. Inpatient days increased 1.0%.

Total operating revenue increased 8.9% compared to the FY 2000 period ended June 30, 2000. Expenses, including salaries and wages, increased 10.6%. UIHC recorded an operating margin of 3.6% during the 2001 fiscal year compared to 5.1% during FY 2000.

- Report on UIHC Delegated Governance Functions

As delegated by the Board of Regents, State of Iowa, through the University of Iowa President, the University Hospital Advisory Committee acts as an internal governing body in establishing internal policies and procedures; evaluating the quality of professional services and utilization of hospital facilities and services; and granting or decreasing clinical privileges. This report summarizes agendas and actions taken during the past fiscal year.
UI Hospitals and Clinics and College of Pharmacy Project – Providing Medication Therapy Continuity for UIHC Patients: Establishment of a Network with Community Pharmacies

The UIHC and College of Pharmacy are working with a group of nearly 40 community pharmacies in Eastern Iowa to enhance communication about medication usage among patients who are either being admitted to University Hospitals or are being discharged back to their homes. The goal of this pilot project is to share all medication records back and forth so that both the hospital and the community pharmacist have a complete picture of what drugs the patient is currently taking or has been taking in the past.

Prior to the initiation of this project, and generally speaking, pharmacists practicing in the hospital and community settings did not regularly communicate with each other regarding medication therapy when patients were hospitalized or discharged. Further, the medication histories taken upon admission to the hospital relied upon inaccurate or incomplete data and were principally based upon the memory of the patient (or their families), especially if multiple physicians had treated them. To provide effective continuity of care and reduce the potential for adverse drug events, the Department of Pharmaceutical Care at the UIHC and the College of Pharmacy are collaborating on a project to receive information about a patient’s drug therapy from community pharmacists upon the patient’s hospitalization. In addition, the UIHC provides similar information to the patient’s community pharmacist at hospital discharge.

A system to readily communicate information and apply the information in both the community and hospital settings has been developed to improve medication therapy. Based on the information exchanged, the project investigators are analyzing the changes made in drug therapy. It is anticipated that this pilot will provide strong evidence documenting the need for this type of information sharing on a larger scale, and perhaps could form the basis for a new model of interaction at the state or national level.

Complete material on the agenda and exhibits is included in a separate University of Iowa Hospitals and Clinics docket.

Robert J. Barak

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