

ABSTRACT: 2013 ELAM Institutional Action Project Poster Symposium

Project Title: Strategic Vision for a Women's Health Program

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Background, Challenge or Opportunity: Increasingly, evidence suggests that common health conditions differ, often dramatically, between men and women and that sex differences are not confined to reproductive function. To optimize health and health delivery, we must understand the contribution of sex to pathobiology, diagnostics, and therapies. Only then can health professionals deliver on the promise of personalized medicine.

Purpose/Objectives: We developed a comprehensive Women's Health Program as a strategic maneuver to: 1) improve care delivery, 2) expand our clinical portfolio, 3) capture greater market share, 4) improve teaching, and 5) spur clinical, translational, and basic research about sex differences.

Methods/Approach:

Goal 1: Strengthen the Core (Tier 1). We began by augmenting our core services to meet demand in obstetrics, maternal-fetal-neonatal services, and genetic counseling / state-of-the-art genomic/ genetic detection/diagnosis.

Goal 2: Enhance and Expand Women-Focused Programs (Develop Women's Health Integrated Practice Units). Tier 2 services include reproductive endocrinology, infertility / assisted reproduction, integrated menopause / midlife women's health program, gynecologic oncology, family planning, pediatric /adolescent gynecology, minimally invasive surgery, office-based procedures, female pelvic floor and reconstructive surgery (urogynecology).

Goal 3: Implement a Regional Service Model to Channel Market Demand and Ensure Quality Care through Best Practice Protocols. We are developing sex-specific programs by integrating into or separating from existing service lines. Women's heart disease requires sex-specific screening and risk assessment in addition to sex-specific interventions. Other Tier 3 services recognized to benefit from sex-specific approaches include neurological / psychiatric / behavioral conditions (migraine, stroke, postpartum depression), cancer, sports medicine, gastrointestinal disorders, and autoimmune conditions, among others. We initiated a phased, overlapping approach.

Outcomes and Evaluation: Outcome metrics include regional health statistics, market share, comprehensiveness of services for women and men, medical student, resident/fellow, and faculty awareness of and competency in sex differences, and the extent to which our research portfolio includes projects in sex differences, including comparative effectiveness clinical trials and basic molecular research.

Progress to date: To strengthen our core, we initiated a joint practice agreement in maternal-fetal medicine (MFM) with our partner health system. We added 3 MFM obstetricians, increased access by recruiting a gynecologic oncologist, expanded access to gynecologic office procedures by adding a faculty gynecologist with specialized training, initiated new disciplinary and interdisciplinary research avenues, and began collaborations with cardiology, ophthalmology, and neurology. A blueprint for midlife women's health is under development. We sponsor an ongoing conference highlighting sex and gender differences in science and medicine to spur collaborative connection. Education in sex differences is being explicitly incorporated into the medical student curriculum.

Strategic Vision for the Wake Forest Women's Health Program

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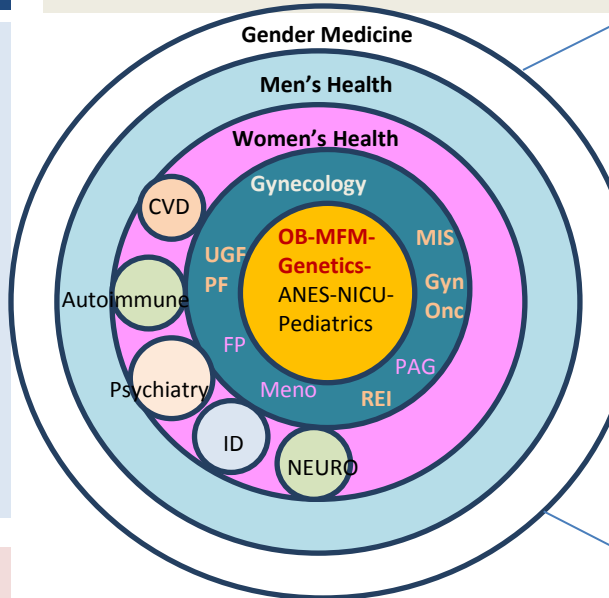
Presented April 2013 at the ELAM® Leadership Forum

Background / Challenge / Opportunity

- ❖ Common health conditions differ, often dramatically, between men & women
- ❖ Sex differences are not confined to reproductive function or fully explained by sex hormone exposures
- ❖ To optimize health & health delivery & harness the promise of personalized medicine, we must understand the contribution of sex to pathobiology, diagnostics, & therapeutic responses

Purpose / Objectives

- ❖ improve care delivery
- ❖ expand our clinical portfolio
- ❖ increase market share
- ❖ improve teaching
- ❖ spur clinical, translational, & basic research about sex differences



Outcomes and Evaluation

- ❖ Regional health statistics, market share, comprehensive portfolio of clinical services for women & men
- ❖ MS, resident/fellow, allied health professional & faculty awareness of & competency in sex differences
- ❖ Research portfolio encompasses sex differences, including comparative effectiveness clinical trials

Methods / Approach

- Goal 1: Strengthen the Core** by augmenting services to meet demand in obstetrics, maternal-fetal-neonatal services, & genetic counseling / state-of-the-art genomic / genetic detection / diagnosis.
- Goal 2: Enhance / Expand Women-Focused Programs / Develop Women's Health Integrated Practice Units** including reproductive endocrinology, infertility / assisted reproduction, integrated menopause / midlife women's health program, gynecologic oncology, family planning, pediatric / adolescent gynecology, minimally invasive surgery, office-based procedures, female pelvic floor & reconstructive surgery (urogynecology).
- Goal 3: Implement a Regional Service Model to Channel Market Demand & Ensure Quality Care through Best Practice Protocols.** Develop sex-specific programs by integrating into or separating from existing service lines. Services recognized to benefit from sex-specific approaches include cardiology, neurology, psychiatry, behavioral conditions (migraine, stroke, postpartum depression), cancer, sports medicine, GI disorders, & autoimmune conditions.

Progress to date – Phased, Overlapping Approach

- ❖ Joint practice agreement in MFM with partner health system
- ❖ ↑access: + 3 MFM, 1 gyne onc, 1 gyne w specialized training, 1 laborist
- ❖ Initiated new disciplinary and interdisciplinary research avenues
- ❖ Initiated collaborations with cardiology, ophthalmology, neurology
- ❖ Blueprint for midlife women's health under development
- ❖ Conference highlighting sex & gender differences
- ❖ Sex differences explicitly incorporated into MS curriculum.