Charles Keller, M.D., has been named Mercy’s new chief medical officer (CMO), in an appointment that became effective on May 24.

In his role as CMO, Dr. Keller will oversee clinical operations for the entire medical staff, including employed and non-employed physicians, providers and staff. Dr. Keller will focus his attention on initiatives designed to improve physician engagement, patient satisfaction and overall clinical quality. He will also lead ongoing enhancements in the areas of safety, reporting, coding and billing, credentialing and medical staff privileges to assure the highest quality of care for all patients we serve. In addition, Dr. Keller will direct graduate medical education programs for family medicine, internal medicine, general surgery, plastic surgery and, starting this fall, psychiatry.

“I enjoy working with our talented clinical care teams to help them provide care in a supportive, patient centered environment,” said Dr. Keller. “By working as one, with a united focus, we have an extraordinary opportunity to deliver world-class care while providing a remarkable experience not only for our patients and their families, but also for our colleagues.”

Dr. Keller joined Mercy in 2012 as a family medicine and urgent care physician. He quickly became involved in a number of leadership roles, serving as the physician leader of the Accountable Care Organization (ACO) Data Committee, the site clinical director for the STRIDE Fall Reduction Study, the medical director for Mercy Hospice and a member of the Central Iowa Clinically Integrated Network Governance Committee.

In 2015, Dr. Keller was named the physician leader for primary care services, providing strategic leadership to a group comprised of more than 130 family medicine, internal medicine and urgent care physicians, PAs and NPs. In this role, Dr. Keller was instrumental in guiding the transition to a more forward-focused business and operating model based on a shared culture and greater organizational alignment.

Prior to joining Mercy, Dr. Keller practiced outpatient family medicine, inpatient pediatrics and newborn care at Yavapai Regional Medical Center in Prescott/Prescott Valley, Ariz. He practiced eight years at McFarland Clinics in Marshalltown, Iowa, providing the full range of inpatient and outpatient family medicine.

NEW MERCY PSYCHIATRIC RESIDENCY PROGRAM WILL TRAIN FUTURE BEHAVIORAL HEALTH PHYSICIANS

On July 1, Mercy will welcome two U.S. and two international residents to the first class of the four-year Mercy Psychiatric Residency Program. The start of this new program comes as Mercy is seeking state approval to build a freestanding behavioral health hospital to improve access to behavioral health treatment and services within the community.

With Iowa ranking at or near the bottom in behavioral health categories for inpatient beds and physicians, Mercy has started efforts to fill behavioral care shortages. Developing new providers is a crucial piece of the puzzle in providing improved access to these vital services.
NEW MERCY PSYCHIATRIC RESIDENCY PROGRAM

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Mercy and the state of Iowa partnered in 2016 to fund the psychiatry residency program, with both providing matching $1.5 million investments to create the program. Deb Bagnall, manager of medical education and research at Mercy, said the financial assistance made the program possible. In addition to seeking residents, the funds also helped in hiring faculty and renovating space for a new outpatient clinic on Level Three in the West Building.

Attracting potential residents did not prove challenging. Nearly 1,000 applications were received, and 52 new medical school graduates were interviewed for the four open positions. Moving forward, each March four additional residents will be matched with the program until the program has a full complement of 16 physicians.

Residency program director, Dr. Sasha Khosravi said, “the selection process is highly competitive, however we attracted the residents we sought.” He shared that nationally, all the behavioral residency positions were filled except for one program. More American students also applied this year, which he sees as a good sign of interest in the field. Dr. Khosravi says the new program appears to have raised awareness of the need for psychiatrists in Iowa. Trends indicate about 50 percent of residents stay where they receive their training. If that happens here, it would be good news for the state.

As the residents begin their studies, they will have an impact on access to care.

The residents will help care for inpatients in Mercy’s current adult and pediatric units. They will also provide continuity care for recently discharged patients, and help shorten the wait for new patients to be seen, through use of the new outpatient clinic.

Before creation of the psychiatric residency program, Mercy worked with Des Moines University (DMU) to provide behavioral training as part of its medical school curriculum. Dr. Khosravi, who also teaches at DMU, says 40 students do rotations at Mercy each year and some express an interest in psychiatry. Dr. Khosravi says this fall, students will have a psychiatry track as part of their rotations to gain even more experience in the field. He says this could raise further interest in the specialty, and if the state approves Mercy’s behavioral hospital request, it could lead to creating larger residency classes in the future.