Our Division has been both academically and clinically successful by following a few basic concepts:

- **We look for opportunities to collaborate.** Often, trying to solve someone else’s problem is an ideal opportunity. Whether it’s ED throughput, increasing volumes in an era of ACGME changes, or ambulance diversion due to ICU capacity, our hospitalist group has frequently provided solutions to vexing problems.

- **We strive to innovate.** We develop “outside of the box” solutions to increase quality and drive down costs. Whether it’s re-imagining the block schedule, triaging ICU admissions, or developing an “on the job learning” system to compensate for the lack of fellowship training, our division has come up with unique and cost-effective solutions to challenging problems.

- **We believe that being patient-centered means developing a faculty-centered approach.** We have initiated strong protocols for safeguarding a healthy work-life balance, while still providing 24-7 in house care. We have dedicated rest space, including a lactation room (complete with a refrigerator). We have broad input on new initiatives and divisional operations at all levels.

- **We study what we do.** Our scholarly activities rest on our clinical work, especially operations, patient safety and quality, leadership, clinical excellence and professional development.