



Special Committee on Academic Health

June 2024

June 13, 2024

8:00 a.m.

West Committee Room, McNamara Alumni Center

CAH - JUN 2024

1. Health Sciences Strategic Planning Update

Docket Item Summary - 3

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2. M Health Fairview Update

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BOARD OF REGENTS DOCKET ITEM SUMMARY

Special Committee on Academic Health

June 13, 2024

AGENDA ITEM: Health Sciences Strategic Planning Update

Review

Review + Action

Action

Discussion

This is a report required by Board policy.

PRESENTERS:

Connie Delaney, Dean, School of Nursing, Twin Cities campus
Keith Mays, Dean, School of Dentistry, Twin Cities campus
Laura Molgaard, Dean, College of Veterinary Medicine, Twin Cities campus
Melinda Pettigrew, Dean, School of Public Health, Twin Cities campus
Jakub Tolar, Dean, Medical School, Twin Cities campus and Vice President for Clinical Affairs
Lynda Welage, Dean, College of Pharmacy, Twin Cities campus

PURPOSE & KEY POINTS

The purpose of this item is to provide the special committee with an overview of the draft high level strategic plan components for the University’s six health sciences schools. The University’s health sciences are comprised of the School of Dentistry, the Medical School, the School of Nursing, the College of Pharmacy, the School of Public Health, and the College of Veterinary Medicine. Each school plays a pivotal role in care delivery in Minnesota through training, research, and clinical service.

The presentation will outline a framework for the joint strategic plan. Emphasis will be given to the commitments that align with the core mission and purpose. These commitments—focused on workforce, rural, practice, and underserved areas—will guide the goals and strategies for the University’s health sciences vision. The discussion will also solicit feedback from special committee members on key components and themes being developed.

BACKGROUND INFORMATION

Questions to Help Guide Health Sciences Strategic Planning

Included below are questions that were developed by special committee leadership and Board Chair Mayeron to help frame development of this presentation and future discussions on this topic.

1. *University Health Science Overarching Strategic Vision*
 - a. Mission fulfillment: What needs exist in the community for which the University is uniquely qualified and positioned to solve?
 - b. What key values/principles guide our ability to serve these needs?

- c. Specifically, what talent/workforce needs, innovation focus, and clinical care areas are unique University assets to meet these needs? i.e. What are the key strategic initiatives needed to support the vision? How do we make certain ALL 6 health science schools are involved and considered in the key strategic initiatives?
 - i. The Governor’s Task Force Recommendations included developing a strategic plan for the six Health Professional Schools to strengthen interprofessional learning and clinical training. What is the process by which ALL 6 health sciences schools are involved in this key strategic initiative to meet the goals defined in the report (increase graduates of Health Sciences while maintaining quality, achieving rankings and social mission impact, and designing and piloting breakthrough public health and care delivery models)?
 - ii. Beyond advancing inter-professional learning and clinical training, what are the other key strategic initiatives in the areas of education, research, and specific clinical care services?
 - iii. How will success be measured?
 - d. What resources are available in the community that need not be replicated by the University Health Sciences?
2. *Requirements needed to fulfill the University’s unique role*
- a. What is the gap between the Health Sciences current capabilities/resources and those needed to fulfill these initiatives?
 - b. How should we best scope, participate, and propose funding for the community needs assessment, as called for in the Governor’s Task Force Report?
 - c. What are the facility needs to execute the vision while not unnecessarily duplicating community resources?
 - d. What must the University “own” and where should we look to partner with other health systems?
 - e. What opportunities exist to coordinate and innovate with the other colleges and universities of the University to enable the strategic position?
 - f. What are the communication needs so stakeholders remain clear and informed on our strengths and positioning?
3. *Economic Model to Support*
- a. What is the appropriate economic model to support this strategy?
 - b. What is the relative weighting of the funds flow between the funding sources?

The special committee previously discussed this topic at the following meetings:

- May 2024: *Health Sciences Strategic Planning*, Special Committee on Academic Health
- November 2023: *The University’s Health Sciences*, Special Committee on Academic Health
- September 2023: *Overview of the University’s Health Sciences*, Special Committee on Academic Health

Health Sciences Strategic Plan

Board of Regents Special Committee on Academic Health
June 13, 2024



Our Commitments



Workforce



Rural



Practice



Underserved

Education

Research

Care

Commitment: Workforce

Improve the health of Minnesotans by addressing the health care workforce needs throughout the state.

Goal 1: Conduct a thorough analysis to quantify and assess the current shortages and mismatches within Minnesota's health care workforce.

Strategy 1: Partner with existing entities (Health Care Workforce and Education Committee - formerly MERC, Minnesota State HealthForce Center of Excellence, and the Office of Rural Health and Primary Care) to establish an interprofessional advisory board aimed at analyzing health care workforce needs (gaps and maldistribution) at the state and local (county) level.

Strategy 2: Establish health care hubs within the UMN Extension network across the state to work with communities and other partners to determine local workforce and health care needs.

Goal 2: Create interventions to address the identified workforce gaps by leveraging interprofessional collaborations.

Strategy 1: Utilize relationships with system campuses and partnerships with local communities to implement innovative strategies that address workforce gaps.

Strategy 2: Partner/lead the development of new workforce models to support communities in areas of workforce shortages.



Commitment: Rural

Equitably advance rural health in Minnesota through academic excellence in interprofessional education, research, care and community engagement.

Goal 1: Expand the pool of health sciences professionals trained for interprofessional practice statewide.

Strategy 1: Champion interprofessional pathway programs for rural youth in health sciences careers

Strategy 2: Emphasize rural curriculum and experiential learning as an area of focus in partnership with communities.

Strategy 3: Optimize rural interprofessional placements for health professions learners.

Goal 2: Be the primary trusted partner for addressing statewide health needs.

Strategy 1: Identify, co-develop, coordinate, and sustain key relationships throughout the State of Minnesota.

Strategy 2: Enhance a robust research program to positively impact rural health.

Commitment: Practice

Realize primary care delivery transformation models to advance overall health.

Goal 1: Build collaborative practices that promote equitable care models.

Strategy 1: Expand Twin Cities Community-University Health Care Center (CUHCC) location.

Strategy 2: Establish a second CUHCC location in St. Cloud.

Goal 2: Utilize integrative research and outcomes to inform evidence-based care and primary care-transformation strategies.

Strategy 1: Utilize interdisciplinary teams in targeted settings using emerging knowledge and evidence-based practices.

Strategy 2: Develop data and value-based care delivery models.

Goal 3: Establish a clear and structured organizational framework for implementing a One Health approach to research and education across the health sciences and the University.

Strategy 1: Build on existing models of serving and learning in interprofessional teams with communities.

Strategy 2: Foster a collaborative and interprofessional/interdisciplinary culture of research and innovation that translates discovery into care and improved health.

Commitment: Underserved

Reduce health disparities in Minnesota by addressing the needs of the state's diverse populations.

Goal 1: Increase the number of graduates providing care for Minnesota underserved communities through targeted recruitment and retention initiatives.

Strategy 1: Activate expansion in rural Minnesota, specifically in St. Cloud, and build on existing models, i.e., Duluth. |

Strategy 2: Advance Metro strategy pathway programs.

Goal 2: Expand community engagement opportunities to advance health in the Minnesota ecosystem.

Strategy 1: Optimize use of community engagement strategies inclusive of Mobile Health Initiative.

Strategy 2: Expand pedagogical strategies to outstate locations.



Stakeholder Input



June-July

July-August



- Health Sciences faculty and staff
- Health Sciences leaders
- Faculty Advisory Committee on Health Sciences
- National Center for Interprofessional Practice and Education
- TC Deans Council
- UMN Chancellors
- Other UMN stakeholders

- External reviewers
- Members of Governor's Task Force



Questions for Discussion

- Does this outline address the concerns of the legislature and the task force?
Do the Regents have additional advice to do so?
- Do the Regents have other, reordered, or additional priorities that should be included?
- How should the Deans/colleges be thinking about new resources in the context of this plan?





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BOARD OF REGENTS DOCKET ITEM SUMMARY

Special Committee on Academic Health

June 13, 2024

AGENDA ITEM: M Health Fairview Update

Review

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Discussion

This is a report required by Board policy.

PRESENTERS: Jakub Tolar, Dean, Medical School, Vice President for Clinical Affairs

PURPOSE & KEY POINTS

The purpose of this item is to provide the special committee with an update on continued conversations with Fairview Health Services (Fairview) as discussions of the transition toward the University’s eventual ownership and control of the University of Minnesota Medical Center continue. It will also include an overview of the purpose and use of academic support received by the Medical School from Fairview. This presentation was given to the Fairview Board on May 9, 2024.

The Definitive Agreement between the Medical School and Fairview requires Vice President Tolar to report on the use of academic funds annually to the Fairview Board. The Definitive Agreement calls on academic support funds to be used for recruitment and retention of talented faculty, fostering and expanding research activities, and supporting other customary Medical School uses.

The presentation will demonstrate the benefit of academic medicine. It will also highlight the strides that the joint clinical enterprise has made together, the metrics for this past academic and fiscal year, and future priorities.

BACKGROUND INFORMATION

At the December 2023 meeting, the special committee received an update on discussions with Fairview regarding M Health Fairview and their intention not to renew the current agreement. The special committee then reviewed and acted on the non-binding Letter of Intent (Non-Binding LOI) between the University of Minnesota, University of Minnesota Physicians (UMP), and Fairview at the subsequent meeting in February 2024. The special committee also received an overview of the Joint Clinical Enterprise at the October 2023 meeting. Most recently, the special committee heard an overview of the expertise engaged by the University to inform the transaction and negotiation with Fairview at the May 2024 meeting.

In 1997, the University began a 30-year affiliation with Fairview Health Services, which included transferring ownership of the University of Minnesota Medical Center to Fairview Health Services. Since then, an academic affiliation agreement between the University and Fairview has ensured that Medical School faculty, practicing through the University of Minnesota Physicians (UMP), have

access to an academic medical center housed within the Fairview system, facilitating training of residents, and ensuring Minnesotans have access to clinical trials as well as specialized health care. The University and University of Minnesota Physicians (UMP) signed a definitive agreement (Definitive Agreement) in 2018 with Fairview Health Services, creating the Joint Clinical Enterprise—branded as M Health Fairview. Both the Definitive Agreement (and associated contracts) and the underlying Affiliation Agreement are set to expire at the end of 2026.



Value of Academic Medicine and use of Academic Support

**Presentation to: Board of Regents, Special Committee
on Academic Health**

**Presented by: Jakub Tolar, Dean, Medical School, Vice
President, Office of Academic and Clinical Affairs**

June 13, 2024





The Race to Reinvent CPR

A new, high-tech approach called ECPR can restart more hearts and save more lives. Why aren't more hospitals embracing it?

New York Times

M Health Fairview transplant on young cancer patient may be first in the world

Doctors told 11-year-old Khloe Cox that they couldn't remove the tumor on her liver and pancreas, so she opted for a rare, double transplant.

KARE 11





Two sisters, two heart transplants, share one life-saving message

After Tracie Vandenburg received a heart transplant, she sought to find out why. Nine years later, her sister is grateful she did.

KARE 11

Specialized surgical units to short organ transplant wait times

M Health Fairview and Mayo Clinic are setting up surgical centers that will accepted full bodies of organ donors

KARE 11



Children and long COVID-19: M Health Fairview opens clinic to treat symptoms

Organ donor's heart saves Minnesota baby born with rare genetic disorder

M Health Fairview marks milestone of 10,000 kidney transplants

M Health Fairview now offers mobile mammography services

2 Minnesota Medical Centers

Among Best Children's Hospitals: U.S. News

Kidney transplant saves Minnesota teen exactly 17 years after his first transplant

A chain of 5 kidney donors and recipients are together for the first time



**Increased
Excellence
and Expertise**



**Increased
Innovation
through
Research**



**Improved
Outcomes**



**Access to
Complex Care**

The Value of Academic Medicine

Metrics 2023

\$244M

NIH Funding

2122

Grants

\$400M

All Sponsored
Funding

4882

Publications

6119

Clinical Trials

49,859

Trial Enrollees

**Translational
Center for
Resuscitative
Trauma Care**

- **USU Collaboration** - \$15M in grant funding for year one with PIs across the Medical School and Fairview
- **Air Force Sustainment** - active duty military providing critical care without salary support at M Health Fairview
- **State Trauma Network** - continuing to identify gaps in trauma care across MN, evaluation will inform appropriate interventions

**UMN Institute
on Infectious
Disease**

- **Monitored wastewater** for SARS CoV-2 RNA from >35 sites around the state and provided real-time feedback to the MDH on levels 2x/week
- **Developed an RNA sequencing platform** in wastewater to identify > 300 infectious agents to expand our molecular surveillance capabilities
- **Developed PCR testing** for influenza and RSV in wastewater and are providing that data in real-time to MDH
- **Analysis of wastewater levels of SARS-CoV-2 and hospital employee absentee rate** to determine if wastewater analysis can predict shortages at least 1-2 weeks out.

**Center for
Learning
Health
System
Sciences**

- **Q-rounds Patient Experience App** - transparent rounding on pediatric patients.
- **Maternal Hypertension Remote patient monitoring program** - decreased readmission rates for this high risk group. Planning for expansion of program.
- **Virtual Stroke RapidEval** - extending access to telestroke neurology speciality services helping support quicker triage and door to needle time
- **AI Program Governance**
- **Improving** evidence-based pre-exposure prophylaxis prescribing (**PrEP**) in the outpatient setting
- **Assessing the impact of the Fairview Opioid Stewardship program**
- **Assessing the use of PROMIS** for assessment of depression outcomes

Achievements

Children's
#2 in
Minnesota



Blue Ridge
Rankings

#21 Overall
#1 Family Med
#4 Surgery

Liver
Transplant
ELITE



vizient™

Rising
Star
Award

Mpls St. Paul
Top Doctors

184
+123 Rising
Stars

Additional Support to the JCE



Medical School funds have also been used for:

- Recruitment and retention of key faculty/physicians
- Support for the NCI-designated Cancer Center (renewal successful this year)
- Facilities and Equipment
- EPIC inbox management pilot
- Staff roles supporting clinical work
- Salary support for physicians (when FV blend is non-competitive); on call pay
- Marketing of our physicians
- Fellowships previously funded by the health system
- Unfunded and necessary medical direction
- Care coordination
- Technology support (clinical)



Cardiology



**Geriatrics and
Aging**



Cancer



Data Science

What's Next