



# Special Committee on Academic Health

September 2024

September 12, 2024

8:00 a.m.

West Committee Room, McNamara Alumni Center

## SCAH - SEP 2024

### 1. 2024-25 Special Committee Work Plan

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### 2. Health Sciences Strategic Planning: Key Objectives

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# BOARD OF REGENTS DOCKET ITEM SUMMARY

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**Special Committee on Academic Health**

**September 12, 2024**

**AGENDA ITEM:** 2024–25 Special Committee Work Plan

**Review**                       **Review + Action**                       **Action**                       **Discussion**

*This is a report required by Board policy.*

**PRESENTERS:** Regent Penny Wheeler  
Jakub Tolar, Dean, Medical School, Twin Cities campus and Vice President  
for Clinical Affairs

### **PURPOSE & KEY POINTS**

The purpose of this item is to review and discuss the 2024–25 special committee work plan.

### **BACKGROUND INFORMATION**

The Special Committee on Academic Health was established in July 2023 by Board Chair Mayeron. The special committee’s charge is as follows:

The Special Committee on Academic Health will oversee the University’s academic medical enterprise and clinical partnerships. The special committee will build the Board’s understanding and capacity in this area and make recommendations to the Board related to the [MPact Health Care Innovation proposal](#) and clinical partnership arrangements. The committee will advise the administration on academic medical strategy and help propel health sciences toward a clinical partnership plan that will champion medical education, improve clinical care, and more fully serve the people of Minnesota.

**Special Committee on Academic Health  
2024-25 Work Plan**

Date	Topics
<b>2024</b>	
September 12-13	<ul style="list-style-type: none"> <li>• <b>2024-25 Special Committee Work Plan</b></li> <li>• <b>Health Sciences Strategic Planning: Key Objectives</b> The special committee will receive an update on shared health sciences strategic planning, including progress made, and the vision and objectives guiding development.</li> </ul>
October 10-11	<ul style="list-style-type: none"> <li>• <b>University Academic and Clinical Enterprise Economic Model</b> The special committee will review the current financial health of the University’s academic and clinical enterprise and consider next steps towards developing a financial plan for the transition of ownership and continued operation of the academic health center. Once developed, the financial plan will be presented to the Finance &amp; Operations Committee.</li> <li>• <b>National Trends and Models for Academic Medical Centers</b> This item will focus on current national trends and governance models at peer academic medical centers, along with examples from the University’s own history. The special committee will discuss elements from these different models that might be helpful to consider as the transition towards the University’s ownership and control of the academic medical center continues.</li> <li>• <b>[Health Sciences Strategic Plan – Review]</b> The special committee will review the proposed joint health sciences strategic plan. The item will provide an opportunity for in-depth discussion of the economic model needed to the plan. Based on feedback from the special committee members, amendments will be made, and the plan will return for action in in December.</li> </ul>
December 12-13	<ul style="list-style-type: none"> <li>• <b>[Health Sciences Strategic Plan – Action]</b></li> <li>• <b>The University and M Physicians</b> The special committee will engage in a discussion focused on the relationship between the University and the University of Minnesota Physicians (M Physicians).</li> <li>• <b>University Health Sciences Across the State: Duluth</b> This item will be the first of a four-part series in which the special committee will learn about the various ways that the University has fostered academic and clinical partnerships to serve the people of Minnesota. This first discussion will provide a holistic overview of the external clinical training partnerships and internal program opportunities available in Duluth.</li> </ul>
<b>2025</b>	
February 13-14	<ul style="list-style-type: none"> <li>• <b>University Health Sciences Across the State: Rochester</b> Continuing the special committee’s discussions of health sciences across the state, this item will highlight the external clinical training partnerships and internal program opportunities available in Rochester.</li> </ul>
May 8-9	<ul style="list-style-type: none"> <li>• <b>University Health Sciences Across the State: Undergraduate Programs</b> For this discussion of health sciences across the state, the special committee will focus on the health sciences undergraduate programs across this system,</li> </ul>

	<p>including programs on the Crookston, Morris, and Twin Cities campuses. The item will highlight the external clinical training partnerships and internal program opportunities available to undergraduates.</p> <ul style="list-style-type: none"> <li>• <b>Minnesota Clinical Care Market Overview</b> The special committee will receive an overview of the clinical care market within Minnesota. The item will give context on where the University fits within that market, and the opportunities and challenges that presents.</li> </ul>
June 12-13	<ul style="list-style-type: none"> <li>• <b>University Health Sciences Across the State: St. Cloud</b> Concluding the special committee’s discussions of health sciences across the state, this item will highlight the collaboration between the University and CentraCare, including programs focused on rural health. The special committee will also consider how the University can reach more Minnesotans through outreach and opportunities like the ones presented in this discussion series.</li> </ul>



# BOARD OF REGENTS DOCKET ITEM SUMMARY

Special Committee on Academic Health

September 12, 2024

**AGENDA ITEM:** Health Sciences Strategic Planning: Key Objectives

Review

Review + Action

Action

Discussion

*This is a report required by Board policy.*

**PRESENTERS:** Lori Carrell, Chancellor, Rochester campus  
Rachel Croson, Executive Vice President and Provost  
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  
Amy Pittenger, Interim Dean, College of Pharmacy, Twin Cities campus  
Jakub Tolar, Dean, Medical School, Twin Cities campus and Vice President for Clinical Affairs

## PURPOSE & KEY POINTS

The purpose of this item is to provide the special committee with an overview of the key objectives included in the University’s draft health sciences strategic plan. Since the June 2024 special committee meeting, commitments within the draft strategic plan have been refined and streamlined. In addition, feedback to reflect how the draft strategic plan interacts with the Rochester campus has been added.

The discussion will outline a framework for the draft joint strategic plan. The deans will highlight commitments that align with the University’s core mission and purpose, focusing on workforce, rural health, practice, and underserved areas. These commitments will guide the goals and strategies related to the University’s mission in education, clinical practice, and research.

## BACKGROUND INFORMATION

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

- June 2024: *Health Sciences Strategic Planning Update*, Special Committee on Academic Health
- 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 2024



UNIVERSITY OF MINNESOTA

Driven to Discover®



## Vision

**Minnesota leads the nation as the healthiest state.**

## Mission

To foster a healthier Minnesota through education, accessible care, innovation, and partnerships.





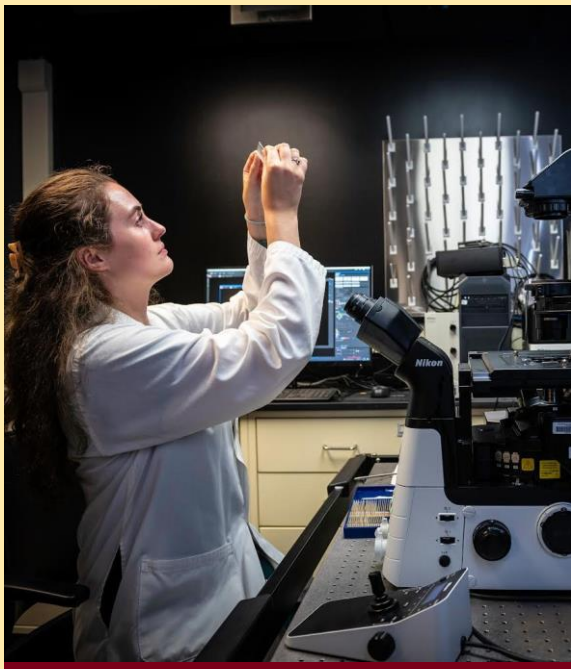
## Our Shared Goal

Ensure that all Minnesotans have access to exceptional healthcare.

## How We'll Achieve This Goal

1. Expand access by reducing healthcare workforce shortages statewide.
2. Reduce health inequities by expanding partnerships to reach rural and underserved communities.
3. Improve healthcare quality close to home.
4. Transform health outcomes through innovation in prevention, treatment, and care models.





## Recognized Excellence

- School of Dentistry is ranked 16th\*
- Medical School is ranked:
  - 1st in Family Medicine\*
  - 4th in Surgery\*
  - 7th in Pediatrics\*
  - 15th for most graduates practicing in rural areas#
- School of Nursing is ranked:
  - 8th in Doctor of Nursing Practice#
  - 3rd in Midwifery#
  - 16th in Bachelor of Science in Nursing#
- College of Pharmacy is ranked 6th#
- School of Public Health is ranked 12th#
- College of Veterinary Medicine is ranked 4th^

\*Blue Ridge Institute for Medical Research | #U.S. News & World Report | ^Shanghai Global





## Objective 1

### Expand Access by Reducing Healthcare Workforce Shortages Statewide

Minnesota is facing a critical shortage of healthcare providers.

The University plays a unique role.

We will increase the number of professionals we train.



## Objective 1

### With Requested Investment

- Collaborate with the Minnesota Department of Health to identify unmet needs and increase class sizes in workforce areas experiencing shortages.

### Metric

- Over the next decade, we will increase the healthcare workforce by 240 doctors, 200 veterinarians, 650 nurses, 400 public health practitioners, 800 patient care specialists or medical research coordinators, 240 pharmacists and 200 oral health professionals.

### With Increased Investment

- Expand interprofessional training opportunities to prepare graduates to deliver coordinated care.
- Develop one-stop pathway programs in partnership with high schools—including in Tribal communities—and Minnesota State to recruit and train future health professionals.

### Metric

- A 10% annual increase in graduates with interprofessional experiential training.
- Launch of three one-stop pathway programs in the next five years.
- The design and launch by Fall 2026 of a new academic program on the Rochester campus in a critical need area to be determined.





## Objective 2

### Reduce Health Inequities by Expanding Partnerships to Reach Rural and Underserved Communities

Committed to serving the entire state of Minnesota, especially in rural and underserved communities.

We will enhance our partnerships with organizations and providers.



## Objective 2

### With Requested Investment

- Integrate curriculum and experiential learning focused on underserved communities into current programs.
- Address barriers such as preceptors, clinical sites, and housing to facilitate more student placements in underserved areas.

### Metric

- New curriculum and experiential learning launched by Fall 2025.
- Year-over-year increase in health science student placements in underserved areas.

### With Increased Investment

- Leverage pathway programs and enhanced recruiting strategies to increase the number of learners with experience in providing health services to underserved communities.
- Build on existing successes to expand clinical and community research in Greater Minnesota.

### Metric

- Year-over-year increase in incoming health science students with backgrounds in providing health services to underserved communities.
- Expand clinical and community research in Greater Minnesota.





### Objective 3

## Improve Healthcare Quality Close to Home

Everyone in Minnesota deserves access to the right high-quality care at the right time.

The University is uniquely positioned to improve the availability and quality of healthcare across the state.



### Objective 3

#### With Requested Investment

- Expand mobile health and telehealth services in partnership and consultation with local communities.
- Pilot one health clinic that offers interprofessional prevention and care for people and their pets, including nutrition, environmental health, and more.

#### Metric

- Increased patients served through mobile health and telehealth year over year.
- One health clinic piloted by 2026.

#### With Increased Investment

- Replicate the [Community-University Health Care Center \(CUHCC\)](#) model in Greater Minnesota.
- Expand the number of clinical faculty and health professionals to provide care and train the next generation of clinicians.
- Partner with health systems and local public health organizations to provide professional development for current healthcare workers, specifically to expand competence with interprofessional collaboration and telehealth.

#### Metric

- Opening of a Greater Minnesota CUHCC by 2029.
- Year over year increase in clinical services offered in more Minnesota locations.
- Partnerships with at least six communities and health systems to establish or join a [Project ECHO](#) program by 2027.







## Objective 4

# Transform Health Outcomes Through Innovation in Prevention, Treatment, and Care Models

As Minnesota's research engine, the University continues to lead in healthcare innovation.



## Objective 4

### With Requested Investment

- Launch new targeted, interprofessional, and multidisciplinary research into prevention, treatments, care models, and cures for one high-need condition, determined in collaboration with the State.
- Translate research innovations into practice by expanding community connections.

### Metric

- Establishment of two new industry partnerships or start-ups.
- Translation of two innovations to communities throughout the state using the [Clinical and Translational Science Institute](#) and [Learning Health System](#) initiatives.

### With Increased Investment

- Launch new targeted research into prevention, treatments, care models, and cures for three high-need conditions, determined in collaboration with the State.
- Expand translations of research innovations to communities throughout the State.

### Metric

- Establishment of five new industry partnerships or start-ups.
- Translation of five innovations to communities throughout the state using the Clinical and Translational Science Institute and Learning Health System initiatives.



## Why We Need to Invest Now

Healthcare deserts

Inequities

Education disparities

Aging population

Climate change

Healthcare business pressures



## Conclusion

We are uniquely positioned to address critical healthcare challenges facing Minnesota.

Through collaboration and partnerships, we will continue to lead the nation in health.





UNIVERSITY OF MINNESOTA

**Driven to Discover®**

Crookston Duluth Morris Rochester Twin Cities

The University of Minnesota is an equal opportunity educator and employer.

# HEALTH SCIENCES



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2. Reduce health inequities by expanding partnerships to reach rural and underserved communities.
3. Improve healthcare quality close to home.
4. Transform health outcomes through innovation in prevention, treatment, and care models.



## Objective 1

### Expand Access by Reducing Healthcare Workforce Shortages Statewide

#### Key Action(s)

- Collaborate with the Minnesota Department of Health to identify unmet needs and increase class sizes in workforce areas experiencing shortages.

#### Metrics

- Over the next decade, we will increase the healthcare workforce by 240 doctors, 200 veterinarians, 650 nurses, 400 public health practitioners, 800 patient care specialists or medical research coordinators, 240 pharmacists and 200 oral health professionals.

## Objective 2

### Reduce health inequities by expanding partnerships to reach rural and underserved communities

#### Key Action(s)

- Integrate curriculum and experiential learning focused on underserved communities into current programs.
- Address barriers such as preceptors, clinical sites, and housing to facilitate more health science student placements in underserved areas.

#### Metrics

- New curriculum and experiential learning launched by Fall 2025.
- Year-over-year increase in health science student placements in underserved areas.

## Objective 3

### Improve Healthcare Quality Close to Home

#### Key Action(s)

- Expand mobile health and telehealth services in partnership and consultation with local communities.
- Pilot one health clinic that offers interprofessional prevention and care for people and their pets, including nutrition, environmental health, and other dimensions.

#### Metrics

- Increased patients served through mobile health and telehealth year over year.
- One health clinic piloted by 2026.

## Objective 4

### Transform Health Outcomes Through Innovation in Prevention, Treatment, and Care Models

#### Key Action(s)

- Launch new targeted, interprofessional, and multidisciplinary research into prevention, treatments, care models, and cures for one high-need condition, determined in collaboration with the State.
- Translate research innovations into practice by expanding community connections.

#### Metrics

- Establishment of two new industry partnerships or start-ups.
- Translation of two innovations to communities throughout the state using the [Clinical and Translational Science Institute](#) and [Learning Health System](#) initiatives.

