



BOARD OF DIRECTORS

April 4, 2005

Minutes

Ms. Leonardi called the meeting to order at 8:32 a.m.

1. Public Comment – None
2. Overview of the Planning Process and the Workshop Agenda – N Hutson/B Carlson
 - Nancy Hutson opened the meeting by addressing what the goals of workshop were:
 - Understand the issues and introduce the Board to the scope of the activities that appropriately address the UCHC 2020 Vision
 - Identify common themes that would benefit from coordinated planning efforts across the Vision Planning groups
 - Differentiated between projects that can be achieved 3-5 years versus long range plans
 - Provide an opportunity for BoD members to clarify the intent of each project and to provide feedback to the project's planning group
 - Identify projects for '06 budget consideration – prioritize
 - Prepare the BoD for setting priorities and reallocating resources accordingly.
 - Bruce Carlson thanked the Working Group leaders (Anne Horbatuck-Signature Programs; Eileen Storey and Robert Trestman-Public Health; Lynn Kosowicz – Health Knowledge and Awareness; Rhea Sanford, Patient Safety and Quality Care), along with Scott Wetstone for all their efforts.
 - Mr. Carlson presented an overview of UCHC Vision 2020 consisting of three elements:
 1. Bench to bedside (T1 or translational) research is the core of the NIH road map and the UCHC Signature programs. In support of this, UCHC already has an NIH funded General Clinical Research Center, which provides support for clinical trials and research. The Biostatistics Center has been created and currently is in place to support the statistical needs of clinical research.
 2. Community healthcare research (T2) and Public Health the T2 level applies the knowledge generated at the bedside and implements it into the community. In addition, public health activities lead to disease prevention or early detection. Population data collected in the community can feedback to drive additional T1 and T2 research.
 3. Patient safety, C4I, crosses these domains in which methods and processes enhancing safety are developed at UCHC and then disseminated into the community.

Effective educational activities are needed across all domains and for healthcare provides at all levels throughout their professional careers.

3 Breakout Sessions

Three breakout sessions were convened and the BoD members rotated through each. Each session included an overview of the written reports of the 2020 Vision Planning Groups previously provided to the BOD members and a discussion of those reports. One report, Patient Safety, was not discussed since it represents the Collaborative Center for Clinical Care Improvement (C4I) report provided and discussed with the BoD earlier in the year. The other reports were:

- Health Knowledge and Awareness – L. Kosowicz
- Public Health – E. Storey & R. Trestman
- Signature Programs – A. Horbatuck

4 Board Discussion and Next Steps

All Board members reconvened to review and discuss the Vision Planning Group reports

- Issues
 - The Board agreed that the Chart showing the relationship between T1 and T2 research, public health, signature programs and education were coherent and well describe the intend of the 2020 Vision.
 - Infrastructure – There appears to be a need for more research infrastructure and there may be a savings if these resources can be coordinated
 - Metrics – Each of the Vision Planning Group reports need more detail, especially specific performance measures that would facilitate planning, the setting of priorities and then the tracking of initiatives that are implemented.
 - Involvement of other entities – The question was raised as to how these plans can be integrated with Storrs and the degree to which other state agencies or local hospitals need to be involved.
 - Management structure – There will need to be a management structure to oversee the implementation of the Vision plans. The use of matrix management is evident and people will have to begin to feel comfortable with this type of leadership.
 - Scope – there were varying opinions as to whether the scope of recommended projects were too resource demanding. Several BoD members felt we should not limit our planning efforts at this time, but should strive to find a way to fund the whole package.
- Next Steps
 - Develop standard criteria that will facilitate the BoD's review of the projects
 - Continue to refine the plans including more details as to timelines, cost, and metrics for judging success. While traditional ROI may not be the best approach, the Board needs enough information to make good business/academic decisions
 - The FY 06 budget should have sufficient support for each of the 4 Planning Group domains to keep the momentum moving forward and to demonstrate the Board's commitment to the Vision.
 - Discussions should begin on finding funding sources for these plans: development, State, internal reallocation, etc.
 - Consideration should be made to test the needs assumptions made in the plan (i.e. both the demand for services we intend to provide and what is already being provided.)

- Integration with the University

There being no further business, the meeting was adjourned at 11:53 am.

Respectfully submitted,

Peter J. Deckers, M.D.

Attendees

J. Abromaitis, P. Austin, G Burrow, B. Chudwick, T. Devers, D. Friend, R. Galvin, A. Gnazzo, JJ. Haberland, N. Hutson, G. Lawrence, C. Leonardi, R. Samuels

Documents Distributed During the Meeting

- Room Assignments
- BoD HIPAA security training packet
- UCHC Vision 2020 Overview Figure
- Public Health, Signature Programs, Health Knowledge and Awareness presentations
- Public Health Working Group membership