<table>
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<tr>
<th>A.</th>
<th>CONVENE MEETING OF THE HEALTH AFFAIRS COMMITTEE</th>
<th>3:00 p.m.</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>U. T. System Board of Regents: Amendment to the Regents’ Rules and Regulations, Rule 40601, Section 1.14(a), concerning proposed name change of The University of Texas Dental Branch at Houston to The University of Texas School of Dentistry at Houston</td>
<td>3:00 p.m.</td>
<td>Action</td>
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<td>2.</td>
<td>U. T. Health Science Center – Houston: Authorization to ground lease approximately 2.9 acres of unimproved land located near the northwest corner of Cambridge and El Paseo Streets, Houston, Harris County, Texas, to KIPP, Inc., a Delaware nonprofit corporation doing business as Knowledge is Power Program, Inc. (KIPP), for the construction and operation of a KIPP charter school; and finding of public purpose</td>
<td>3:05 p.m.</td>
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<td>3.</td>
<td>U. T. M. D. Anderson Cancer Center: Authorization to purchase approximately 0.363 of an acre of unimproved real property located at 7305 Fannin Street and 0 Dreyfus Street, Houston, Harris County, Texas, from Mr. Sadik M. Haddad, Ms. Elie P. Haddad, and Mr. George P. Haddad for a purchase price of $1.6 million for future programmed campus expansion or other purposes related to the institution’s mission</td>
<td>3:15 p.m.</td>
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<td>4.</td>
<td><strong>U. T. M. D. Anderson Cancer Center:</strong> Authorization to purchase approximately 1.045 acres and improvements located at 1841 Old Spanish Trail, Houston, Harris County, Texas, from Mr. James W. and Ms. Sandra R. Hoskin for a purchase price not to exceed fair market value as determined by independent appraisals for near term use as surge space and thereafter for future programmed campus expansion or other purposes related to the institution’s mission</td>
<td>3:20 p.m.</td>
<td>Action 229</td>
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<td></td>
<td>President Mendelsohn</td>
<td>Ms. Mayne</td>
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<td>5.</td>
<td><strong>U. T. Medical Branch – Galveston:</strong> Authorization to lease approximately 45,411 rentable square feet in a commercial center at 2660 Gulf Freeway South, League City, Galveston County, Texas, from A-S 85 Victory Lakes Town Center, L.P., a Texas limited partnership, for use by the institution for medical clinics</td>
<td>3:25 p.m.</td>
<td>Action 232</td>
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<td>President Callender</td>
<td>Ms. Mayne</td>
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<td>6.</td>
<td><strong>U. T. Medical Branch – Galveston:</strong> Approval regarding proposed revisions to Mission, Vision, and Values Statement</td>
<td>3:30 p.m.</td>
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<td>President Callender</td>
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<td>7.</td>
<td><strong>U. T. Medical Branch – Galveston:</strong> Progress of recovery efforts following Hurricane Ike</td>
<td>3:35 p.m.</td>
<td>Report/Discussion 244</td>
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<td>President Callender</td>
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<td>8.</td>
<td><strong>U. T. System:</strong> Update on investment in public health</td>
<td>3:40 p.m.</td>
<td>Report/Discussion 251</td>
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<td></td>
<td>Mr. Pat Francis, U. T. System Health Affairs</td>
<td>Dr. Roberta B. Ness, U. T. Health Science Center – Houston</td>
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<td>9.</td>
<td><strong>U. T. System:</strong> Quarterly report on health matters, including a follow-up on the U. T. System’s Transformation in Medical Education (TIME) initiative and comments on the meaningful use of electronic health records</td>
<td>3:50 p.m.</td>
<td>Report/Discussion 263</td>
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<td>Dr. Shine</td>
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<tr>
<td>B.</td>
<td><strong>ADJOURN MEETING OF THE HEALTH AFFAIRS COMMITTEE</strong></td>
<td>4:00 p.m.</td>
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</tbody>
</table>
C. CONVENE SPECIAL MEETING OF THE HEALTH AFFAIRS COMMITTEE

9:30 a.m.
Chairman Longoria

U. T. System: Discussion regarding health information technology

Report/Discussion
Dr. Jack Smith,
U. T. Health Science Center – Houston

Not on Agenda

D. ADJOURN SPECIAL MEETING OF THE HEALTH AFFAIRS COMMITTEE

11:00 a.m.
Wednesday, November 10, 2010

1. U. T. System Board of Regents: Amendment to the Regents' Rules and Regulations, Rule 40601, Section 1.14(a), concerning proposed name change of The University of Texas Dental Branch at Houston to The University of Texas School of Dentistry at Houston

RECOMMENDATION

The Chancellor concurs in the recommendation of the Executive Vice Chancellor for Health Affairs, the Vice Chancellor and General Counsel, and President Kaiser that the Regents' Rules and Regulations, Rule 40601, Section 1.14(a), concerning institutions comprising The University of Texas System, be amended as set forth below in congressional style:

Sec. 1 Official Titles. The U. T. System is composed of the institutions and entities set forth below. To ensure uniformity and consistence of usage throughout the U. T. System, the institutions and their respective entities shall be listed in the following order and the following titles (short form of title follows) shall be used:

1.14 The University of Texas Health Science Center at Houston (U. T. Health Science Center – Houston)
   (a) The University of Texas School of Dentistry Dental Branch at Houston
       (U. T. School of Dentistry Dental Branch – Houston)

   . . . .

BACKGROUND INFORMATION

This proposed amendment to the Regents' Rules and Regulations, Rule 40601 is to reflect the official name change of The University of Texas Dental Branch at Houston to The University of Texas School of Dentistry at Houston. The proposed change is consistent with standard naming conventions and is planned to more clearly identify the school.

Texas Education Code Section 65.11 authorizes the Board of Regents to provide for the "names of the institutions and entities in The University of Texas System in such a way as will achieve the maximum operating efficiency of such institutions and entities[.]"
2. **U. T. Health Science Center – Houston: Authorization to ground lease approximately 2.9 acres of unimproved land located near the northwest corner of Cambridge and El Paseo Streets, Houston, Harris County, Texas, to KIPP, Inc., a Delaware nonprofit corporation doing business as Knowledge is Power Program, Inc. (KIPP), for the construction and operation of a KIPP charter school; and finding of public purpose**

**RECOMMENDATION**

The Chancellor and Executive Vice Chancellor for Health Affairs concur in the recommendation of the Vice Chancellor and General Counsel and President Kaiser that authorization be granted by the U. T. System Board of Regents, on behalf of U. T. Health Science Center – Houston, to

a. ground lease approximately 2.9 acres of unimproved land located near the northwest corner of Cambridge and El Paseo Streets, Houston, Harris County, Texas, to KIPP, Inc., a Delaware nonprofit corporation doing business as Knowledge is Power Program, Inc. (KIPP), for the construction and operation of a KIPP charter school;

b. determine that the lease of the land to KIPP for the stated reason serves a public purpose appropriate to the function of U. T. Health Science Center – Houston, and that the consideration to the U. T. System and U. T. Health Science Center – Houston for the lease of the land is adequate; and

c. authorize the Executive Director of Real Estate to execute the lease and all documents, instruments, or other agreements, and to take all further actions deemed necessary or advisable to carry out the purpose and intent of the foregoing recommendations.

**BACKGROUND INFORMATION**

Through the proposed ground lease to KIPP, U. T. Health Science Center – Houston desires to further its collaborative venture between the institution's Children's Learning Institute (CLI) and the nationally recognized Knowledge is Power Program. The collaboration is a natural progression of the existing relationship between CLI and KIPP that began in 2003 when KIPP enlisted CLI's assistance with the development of its early childhood curriculum.

The next step in this collaborative venture is the proposed establishment of a KIPP charter school on the approximately 2.9 acres ground lease site. The ground lease tract is part of an approximately 5.12-acre tract. The institution envisions a future facility housing a consolidated CLI program on the remainder of the tract. The property is south of the U. T. Research Park and immediately south of the institution's current student apartments.
CLI was formed in 2003 to build upon the success of U. T. Health Science Center – Houston's Center for Academic and Reading Skills and Center for Improving the Readiness of Children for Learning and Education. In that same year, Governor Perry named CLI the Texas State Center for Early Childhood Development with the objective of developing training for early childhood providers in Texas and enhancing preliteracy skills development for young children. In Fiscal Year 2010, CLI secured more than $46 million in federal, State, and private grants and philanthropic support.

KIPP was founded in Houston in 1994 and has grown into a national network of open-enrollment, college preparatory schools with a track record of preparing students in underserved communities for success in college and beyond. There are currently 99 KIPP schools in 20 states and the District of Columbia serving over 26,000 students. KIPP's funding has come from some of the nation's foremost donors, including the Gates Foundation.

The proposed KIPP charter school would provide model classrooms for observation and assessment, clinical rooms to treat and serve students, and a practical testing and training ground for CLI's educational theories. The nonbinding letter of intent signed by the parties calls for KIPP and CLI to create a comprehensive memorandum of understanding outlining the principal terms and conditions of the collaborative relationship. It is anticipated that the memorandum of understanding will be signed contemporaneously with the ground lease.

The permitted use under the proposed lease is limited solely to the construction and operation of a KIPP open-enrollment charter school for Pre-K through fourth grade. The proposed lease includes an initial one year feasibility period to enable KIPP to assess the feasibility of funding and constructing the school. At KIPP's request and subject to the institution's approval, the feasibility period may be extended for one additional year.

The lease allows approximately two and two-thirds years for design and construction. The initial 20-year term begins on the completion of construction. KIPP has two 10-year contingent options to renew the lease, but KIPP is not permitted to exercise the extension option(s) if it is in default or if it has previously been in default and the lease has converted to a market rental lease.

In lieu of cash rent, the consideration for the proposed lease is a set of obligations on the part of KIPP that are designed to establish and further the collaborative venture. The obligations are summarized in the transaction summary that begins on Page 223.

If KIPP fails to meet its obligations under the lease, U. T. Health Science Center – Houston may terminate the lease, with or without requiring KIPP to demolish improvements, or may convert the lease to a fair market rental rate based on the then fair market value of the land. Additionally, should the institution at a future date end the programmatic collaboration, KIPP would be required to either elect to terminate the lease (and be paid the fair market value of the improvements based on their value for use as a private elementary school) or to commence paying to the institution fair market
rental based on the then fair market value of the land. If the lease converts to a market rental lease, rent will increase 3% per year, plus adjustments to then current market rents at the commencement of each extension term, if applicable.

Because of the unique programmatic connection, the lease prohibits KIPP from assigning or mortgaging its leasehold interest or granting a lien on the facility. Additionally, and as is standard practice with ground leases in which the Board of Regents is the lessor, the lease expressly stipulates that the lessor's fee interest in the land will not be subordinated.

The obligations of KIPP and the rights and remedies of U. T. Health Science Center – Houston under the lease are designed to comply with the requirements enunciated by the Attorney General of the State of Texas. In Opinion No. MW-373 (1981), the Texas Attorney General stated that, for the use of university property without cash rental payments to comply with the Texas Constitution, three requirements must be met: (1) the use of the property must serve a public purpose, appropriate to the function of the university; (2) adequate consideration must be received by the university; and (3) the university must maintain controls over the user's activity to ensure that the public purpose is achieved.

U. T. Health Science Center – Houston has concluded that a KIPP charter school in close proximity to CLI and the availability of the school for use as a lab school for CLI faculty and researchers would serve the public purpose of strengthening the quality of research and expanding the depth and breadth of knowledge being developed by CLI.

A transaction summary and map depicting the proposed ground lease site follow.

**Transaction Summary**

<table>
<thead>
<tr>
<th>Institution:</th>
<th>U. T. Health Science Center – Houston</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Transaction:</td>
<td>Ground lease</td>
</tr>
<tr>
<td>Total Area:</td>
<td>Approximately 2.9 acres</td>
</tr>
<tr>
<td>Location:</td>
<td>Near the northwest corner of Cambridge and El Paseo Streets, Houston, Harris County, Texas (see map on Page 226)</td>
</tr>
<tr>
<td>Tenant:</td>
<td>KIPP, Inc., a Delaware nonprofit corporation doing business as Knowledge is Power Program, Inc. (KIPP)</td>
</tr>
<tr>
<td>Lease Consideration:</td>
<td>In lieu of payment of cash rental, the lease will obligate KIPP to construct and continuously operate and maintain on the leased land and at KIPP’s sole cost and expense a KIPP</td>
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</table>
open-enrollment charter school and to provide opportunities for collaboration with CLI faculty and researchers through the provision of, among other things:

- a venue in the facility for model classrooms that will serve as observatories for teachers and for assessment and clinical rooms to treat and serve students, all of which will be shared with the staff and faculty of CLI at no charge to the institution or CLI;
- observation classrooms for use by CLI faculty;
- assessment and clinical rooms for the institution’s clinicians in training to treat and serve students;
- shared meeting space for CLI and KIPP teams to collaborate on research initiatives and teacher/leader professional development components; and
- opportunities for CLI to design innovative, educational intervention classroom studies in collaboration with KIPP

Appraised Value: Appraisal from The Gerald A. Teel Company in March 2007 valued the entire 5.1156 acres at $6,685,050, or $30 per square foot; the proportional value of the 2.9 acres ground lease tract calculated at $30 per square foot is $3.8 million; because the proposed structure of the lease does not call for cash rental, the appraisal has not been updated

Term: Twenty years following completion of construction of the improvements; the lease permits an approximately 220-day period for submission, review, and approval of construction plans and commencement of construction; construction must be completed no later than 24 months following commencement of construction, subject to delays for force majeure not to exceed 90 days in the aggregate; the lease provides for two 10-year contingent extension options, but KIPP is not permitted to exercise an option if KIPP is in default or if KIPP has previously defaulted under the lease and the lessor has exercised its right to require KIPP to pay market rental; the lease also includes an initial one year feasibility period to permit KIPP to assess the feasibility of funding and construction, with the possibility of a second year feasibility period at KIPP’s request and subject to the institution’s approval in its sole discretion

Permitted Use: Construction and operation of a KIPP open-enrollment charter school for Pre-K through fourth grade that will serve as a lab school for collaborative work by CLI researchers and KIPP educators
Lessor’s Remedies: If KIPP defaults on its obligations that constitute consideration for the lease in lieu of cash rental, the lessor may either terminate the lease or immediately modify the lease to require KIPP to pay market rental of the land, with 3% annual increases; if the institution elects to terminate the lease, it may require KIPP to demolish the improvements at KIPP’s sole cost, or it may purchase the improvements from KIPP at market value based on their use as a private elementary school reduced by the cost of renovating the improvements for use by U. T. Health Science Center – Houston.

End of Collaboration: If U. T. Health Science Center – Houston at a future date ends the collaborative work between CLI and KIPP, KIPP is put to the election of either terminating the lease or commencing to pay market rental, with 3% annual increases, and with adjustment based on a new appraisal of the land at the time of the exercise of any extension option; if KIPP elects to terminate the lease, U. T. Health Science Center – Houston must purchase the improvements at the then fair market value of the improvements based on their use as a private elementary school.
3. **U. T. M. D. Anderson Cancer Center: Authorization to purchase approximately 0.363 of an acre of unimproved real property located at 7305 Fannin Street and 0 Dreyfus Street, Houston, Harris County, Texas, from Mr. Sadik M. Haddad, Ms. Elie P. Haddad, and Mr. George P. Haddad for a purchase price of $1.6 million for future programmed campus expansion or other purposes related to the institution's mission.**

**RECOMMENDATION**

The Chancellor concurs in the recommendation of the Executive Vice Chancellor for Health Affairs, the Executive Vice Chancellor for Business Affairs, and President Mendelsohn that authorization be granted by the U. T. System Board of Regents, on behalf of U. T. M. D. Anderson Cancer Center, to

a. purchase approximately 0.363 of an acre of unimproved real property located at 7305 Fannin Street and 0 Dreyfus Street, Houston, Harris County, Texas, from Mr. Sadik M. Haddad, Ms. Elie P. Haddad, and Mr. George P. Haddad for a purchase price of $1.6 million, plus all due diligence expenses, closing costs, and other costs and expenses to complete the acquisition of the property as deemed necessary or advisable by the Executive Director of Real Estate, for future programmed development of campus expansion or other purposes related to the institution's mission; and

b. authorize the Executive Director of Real Estate to execute all documents, instruments, and other agreements, and to take all further actions deemed necessary or advisable to carry out the purpose and intent of the foregoing recommendation.

**BACKGROUND INFORMATION**

The subject property consists of two contiguous tracts totaling 0.363 acres of unimproved real property located at the southwest corner of Fannin Street and Dreyfus Street within U. T. M. D. Anderson Cancer Center's Mid-Campus. The Mid-Campus area is located between the institution's academic and clinical core facilities in the Texas Medical Center and its research facilities in the South Campus, and consists of a mix of vacant lots, older houses, small multifamily and commercial buildings, and newer, large-scale facilities associated with or supporting the Texas Medical Center. The area has long been in transition, as the expansion of the nearby Texas Medical Center has changed the type and scale of use that is economically viable.

U. T. M. D. Anderson Cancer Center owns land on the block adjacent to the subject property, and has for several years attempted to acquire the subject property. However, prior attempts to come to agreement with the owners failed. The purchase price of $1,600,000 was negotiated with the owners. Ownership by the institution of the subject
property increases the probability that U. T. M. D. Anderson Cancer Center can acquire adjacent lots with obsolete buildings and in time assemble a development site. The property will be held for future programmed development of campus expansion or other purposes related to the institution’s mission.

Institutional funds from operations will be used to fund the purchase, the terms and conditions of which are reflected in the summary of the transaction below.

Transaction Summary

Institution: U. T. M. D. Anderson Cancer Center

Type of Transaction: Purchase

Total Area: Approximately 0.363 of an acre

Improvements: None

Location: 7305 Fannin Street and 0 Dreyfus Street, Houston, Harris County, Texas; see map on Page 231

Seller: Mr. Sadik M. Haddad, Ms. Elie P. Haddad, and Mr. George P. Haddad

Purchase Price: $1,600,000 ($101.05 per square foot)

Appraised Value: $1,700,000 ($107.37 per square foot) (Gerald A. Teel, MAI, CRE, The Gerald A. Teel Company, Inc., June 7, 2010); $1,350,000 ($85.26 per square foot) (Stephen DuPlantis, MAI, CB Richard Ellis, Inc., October 4, 2010)

Source of Funds: Institutional funds from operations

Intended Use: Future programmed development of campus expansion or other purposes related to the institution’s mission
4. **U. T. M. D. Anderson Cancer Center: Authorization to purchase approximately 1.045 acres and improvements located at 1841 Old Spanish Trail, Houston, Harris County, Texas, from Mr. James W. and Ms. Sandra R. Hoskin for a purchase price not to exceed fair market value as determined by independent appraisals for near term use as surge space and thereafter for future programmed campus expansion or other purposes related to the institution's mission**

**RECOMMENDATION**

The Chancellor concurs in the recommendation of the Executive Vice Chancellor for Health Affairs, the Executive Vice Chancellor for Business Affairs, and President Mendelsohn that authorization be granted by the U. T. System Board of Regents, on behalf of U. T. M. D. Anderson Cancer Center, to

a. purchase approximately 1.045 acres and improvements located at 1841 Old Spanish Trail, Houston, Harris County, Texas, from Mr. James W. and Ms. Sandra R. Hoskin for a purchase price not to exceed fair market value as determined by independent appraisals, plus all due diligence expenses, closing costs, and other costs and expenses to complete the acquisition of the property as deemed necessary or advisable by the Executive Director of Real Estate, for near term use as surge space and thereafter for future programmed development of campus expansion or other purposes related to the institution's mission; and

b. authorize the Executive Director of Real Estate to execute all documents, instruments, and other agreements, and to take all further actions deemed necessary or advisable to carry out the purpose and intent of the foregoing recommendation.

**BACKGROUND INFORMATION**

The subject property consists of approximately 1.045 acres improved with a two-story concrete office/warehouse building with approximately 30,000 square feet of office, showroom, and shell space and related surface parking. The facility is currently occupied by the owner's medical goods distribution business. It is located near the northwest corner of Old Spanish Trail and the recently extended Bertner Road within U. T. M. D. Anderson Cancer Center's Mid-Campus. The institution owns property on both sides of the subject property. The assemblage would provide a building site of almost three acres at the corner of Old Spanish Trail and Bertner Road, and could, by further acquisition, potentially be expanded to about five acres.

The Mid-Campus area, located between the institution's academic and clinical core facilities in the Texas Medical Center and its research facilities in the South Campus, consists of a mix of vacant lots, older houses, small multifamily and commercial
buildings, and newer, large-scale facilities associated with or supporting the Texas Medical Center. The area has long been in transition, as the expansion of the nearby Texas Medical Center has changed the type and scale of use that is economically viable.

The subject property lies within the acquisition zone defined in the institution's Master Plan approved by the Board on May 11, 2000, and U. T. M. D. Anderson Cancer Center has for many years attempted to acquire the subject property. However, prior attempts to come to agreement with the owners failed. The property will be used in the near term as surge space, and thereafter for future programmed development of campus expansion or other purposes related to the institution's mission.

Institutional funds from operations will be used to fund the purchase, the terms and conditions of which are reflected in the summary of the transaction below.

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<td><strong>Institution:</strong></td>
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<td><strong>Total Area:</strong></td>
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<td><strong>Improvements:</strong></td>
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<td><strong>Location:</strong></td>
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<td><strong>Seller:</strong></td>
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<td><strong>Purchase Price:</strong></td>
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<tr>
<td><strong>Appraised Value:</strong></td>
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<td><strong>Source of Funds:</strong></td>
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<td><strong>Intended Use:</strong></td>
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</table>
5. **U. T. Medical Branch – Galveston: Authorization to lease approximately 45,411 rentable square feet in a commercial center at 2660 Gulf Freeway South, League City, Galveston County, Texas, from A-S 85 Victory Lakes Town Center, L.P., a Texas limited partnership, for use by the institution for medical clinics**

**RECOMMENDATION**

The Chancellor concurs in the recommendation of the Executive Vice Chancellor for Health Affairs, the Vice Chancellor and General Counsel, and President Callender that authorization be granted by the U. T. System Board of Regents, on behalf of U. T. Medical Branch – Galveston, to

a. lease approximately 45,411 rentable square feet in a commercial center at 2660 Gulf Freeway South, League City, Galveston County, Texas, from A-S 85 Victory Lakes Town Center, L.P., a Texas limited partnership, for use by the institution for medical clinics; and

b. authorize the President of U. T. Medical Branch – Galveston to execute the lease and all related documents, instruments, and other agreements on behalf of the institution, subject to approval of all such documents by the U. T. System Real Estate Office, and to take all further actions deemed necessary or advisable to carry out the purpose and intent of the foregoing recommendation.

**BACKGROUND INFORMATION**

U. T. Medical Branch – Galveston is seeking to develop a more strategic, long-term and cost effective approach to its mainland clinical operations. To that end, the Medical Branch is proposing to consolidate several existing clinics in one central facility in League City, Texas, and to expand its clinical programs by opening new clinics within the facility. The Medical Branch has determined that it is critical to have these clinics operational as soon as possible.

As a result of damage resulting from Hurricane Ike to various then-existing clinics, the institution relocated the pain and neurology clinic, the geriatric clinic, and the Harborside Medical Group clinics to facilities in different locations in and around League City. The urgency of relocating the clinics after the hurricane resulted in locations for the clinics in spaces that often did not adequately meet the needs and requirements of the clinical operations and the patients. Among the inadequacies are clinic spaces in which it is difficult to accommodate wheelchair patients and examination rooms of insufficient quantity, which results in long wait times for patients and lost opportunities to see more patients.
In addition, the business plan for U. T. Medical Branch – Galveston includes the opening of an organ transplant clinic to expand the current transplant program to the mainland, allowing the institution to serve more patients; the relocation and expansion of the Stark Diabetes Center; and the creation of an aviation medicine clinic to support a long-standing relationship with NASA. The institution has determined that a relocated and expanded Stark Diabetes Center is critical to its strategic plan to develop chronic disease management programs, a hallmark of health reform and cost effective care. In addition, this new location for the Stark Diabetes Center will permit the consolidation of medical specialties in endocrinology, cardiology, nephrology, pulmonary, ophthalmology, allergy, and rheumatology to support the diabetes program. The center will also benefit from proximity to the institution's recently opened Victory Lakes Specialty Care Center for laboratory and radiology procedures.

The aviation medicine clinic is a new program that has the potential for supporting commercial space flight health assessments. It will also focus on long-term management of astronaut health following extended periods in space, continuing the rich collaborative history between the Medical Branch and NASA.

In consolidating the existing clinics, the Medical Branch will be able to design and construct optimal up-to-date space of sufficient size and to take advantage of the efficiencies of having the clinics under one roof. As such, the institution will be able to deliver state-of-the-art preventive, diagnostic, and treatment services to patients.

The Medical Branch evaluated its Victory Lakes campus that is nearby as the location on which it could construct a facility to house the clinics. Two factors, however, make this option less viable than the proposed lease: (1) the time required to construct the clinic facility at the Victory Lakes campus is estimated to be 18 to 24 months, in contrast to the estimated six to eight months to build out the leased facility; and (2) the master plan for the Victory Lakes campus does not contemplate a stand-alone 45,000-square foot building.

The institution engaged a broker to locate suitable lease sites available for the clinics. This subject property was chosen because it is the only facility in the area that has sufficient space to accommodate the consolidation of the existing clinics and the development of the Stark Diabetes Center and the aviation medicine clinic, it is approximately five blocks from the Victory Lakes Specialty Care Center, and the landlord can construct and complete the improvements within six to eight months.

The proposed lease is for a term of 10 years, plus two five-year renewal options at fair market rental. U. T. Medical Branch – Galveston will have the ongoing option to terminate the lease after the end of the 60th month on payment of unamortized tenant improvements and commissions. The Medical Branch will also have a right of first refusal to purchase the leased premises at any time during the lease term.

The area of the leased premises is 45,411 rentable square feet (rsf). The annual base rent for the first year is $544,932; in the third year, the annual base rent increases to $681,165; in the ninth year the annual base rent increases to $749,281; the average
annual rent during the 10-year period is $667,541, or $14.70 per rsf. The 2011 estimated annual operating expenses payable by the institution under the lease are $249,760 or $5.50 per rsf.

The landlord is contributing $1,125,000 toward construction of the tenant improvements. U. T. Medical Branch is contributing $5,676,375 towards construction of fixed tenant improvements within the leased premises. These improvements are necessary to convert the shell space to clinic space. The Medical Branch is also contributing $2,250,000 toward furniture, fixtures, and equipment, the majority of which the institution will be able to remove on termination of the lease.

Details of this lease, which will be funded with hospital income, are summarized in the transaction summary below.

### Transaction Summary

<table>
<thead>
<tr>
<th>Institution:</th>
<th>U. T. Medical Branch – Galveston</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Transaction:</td>
<td>Lease of space in a commercial center</td>
</tr>
<tr>
<td>Lessor:</td>
<td>A-S 85 Victory Lakes Town Center, L.P., a Texas limited partnership</td>
</tr>
<tr>
<td>Location:</td>
<td>2660 Gulf Freeway South, League City, Galveston County, Texas; see map on Page 236</td>
</tr>
<tr>
<td>Total Rentable Area:</td>
<td>Approximately 45,411 rentable square feet</td>
</tr>
<tr>
<td>Commencement Date:</td>
<td>Anticipated to be June 1, 2011</td>
</tr>
<tr>
<td>Lease Term:</td>
<td>Ten-year initial term with two five-year options to renew</td>
</tr>
<tr>
<td>Annual Rent:</td>
<td>The annual base rent for the first year is $544,932; in the third year, the annual base rent increases to $681,165; in the ninth year the annual base rent increases to $749,281; the average annual rent during the 10-year period is $667,541, or $14.70 per rsf; rent during either five-year renewal term will be at market rates</td>
</tr>
<tr>
<td>Operating Expenses:</td>
<td>$249,760 or $5.50 per rsf based on 2011 estimates</td>
</tr>
<tr>
<td>Tenant Improvements:</td>
<td>The landlord is contributing $1,125,000 towards construction of the tenant improvements; the Medical Branch is contributing $5,676,375 towards construction of fixed tenant improvements within the leased premises and $2,250,000 towards furniture, fixtures, and equipment</td>
</tr>
</tbody>
</table>
Termination Option: U. T. Medical Branch has an ongoing right to terminate the lease beginning at the end of the 60th month; termination requires 12 months notice and payment to the landlord of unamortized transaction costs

Purchase Option: The institution will have the option to purchase the leased premises and associated common areas until such time as the owner puts in place permanent financing

Right of First Refusal: U. T. Medical Branch will have a right of first refusal to purchase the leased premises and associated common areas if the owner receives a bona fide offer from a third party to purchase the leased premises

Intended Use: Operation of a medical clinic, medical laboratory, and medical administrative offices

Source of Funds: Hospital income
6. **U. T. Medical Branch – Galveston: Approval regarding proposed revisions to Mission, Vision, and Values Statement**

**RECOMMENDATION**

The Chancellor concurs in the recommendation of the Executive Vice Chancellor for Health Affairs and President Callender that proposed changes to the U. T. Medical Branch –Galveston (UTMB) Mission, Vision, and Values Statement as set forth below be approved by the U. T. System Board of Regents and forwarded to the Texas Higher Education Coordinating Board for approval. Changes to the mission statement were last approved by the U. T. System Board of Regents on August 12, 1999.

**Proposed Revised Mission, Vision, and Values Statement**

**Preamble**

The University of Texas Medical Branch at Galveston's mission is to improve health for the people of Texas and around the world. UTMB is an inclusive, collaborative community of forward-thinking educators, scientists, clinicians, staff, and students dedicated to a single purpose - improving health. We prepare future health professionals for practice, public service, and lifelong learning through innovative curricula and individualized educational experiences. We advance understanding and treatment of illness and injury through groundbreaking research, in the lab and at the bedside, including the commercialization of such research, as appropriate. We deliver skilled and patient-centered health care, and we continue to shape the future of health sciences education, research, and clinical care by always asking, "What's next?"

**Mission**

UTMB's mission is to improve health for the people of Texas and around the world.

**Vision**

We work together to work wonders as we define the future of health care and strive to be the best in all of our endeavors.

**Values**

Our values define our culture and guide our every interaction.

- We demonstrate **compassion** for all.
- We always act with **integrity**.
- We show **respect** to everyone we meet.
- We embrace **diversity** to best serve a global community.
- We promote excellence and innovation through **lifelong learning**.
Current Mission Statement

The mission of The University of Texas Medical Branch at Galveston is to provide scholarly teaching, innovative scientific investigation, and state-of-the-art patient care, in a learning environment to better the health of society.

UTMB's education programs enable the State's talented individuals to become outstanding practitioners, teachers, and investigators in the health care sciences, thereby meeting the needs of the people of Texas and its national and international neighbors. UTMB's comprehensive primary, specialty, and subspecialty care clinical programs support the educational mission and are committed to the health and well-being of all Texans through the delivery of state-of-the-art preventive, diagnostic and treatment services.

UTMB's research programs are committed to the discovery of new, innovative biomedical and health services knowledge leading to increasingly effective and accessible health care for the citizens of Texas.

Approved by the U. T. System Board of Regents on August 12, 1999.

BACKGROUND INFORMATION

Section 61.051 of the Texas Education Code requires the Texas Higher Education Coordinating Board to periodically review the role and mission statements of public institutions of higher education. Accordingly, the Mission Statement was recently reviewed by U. T. Medical Branch – Galveston faculty, administration, and students to ensure its accuracy and applicability to an ever-changing and growing institution. Upon review, the consensus was to restate the mission, vision, and values of U. T. Medical Branch – Galveston to align with the institution's new brand identity (utmb Health) and tagline (working together to work wonders), as part of overall efforts to communicate the institution's ongoing purpose and contributions to the people of Texas.
Mission, Vision, Values
The Heart of UTMB

David L. Callender, M.D.
President, U. T. Medical Branch - Galveston

Presented to: U. T. System Board of Regents
November 2010
Preamble

• The University of Texas Medical Branch at Galveston’s mission is to improve health for the people of Texas and around the world.

• UTMB is an inclusive, collaborative community of forward-thinking educators, scientists, clinicians, staff, and students dedicated to a single purpose – improving health.

• We prepare future health professionals for practice, public service, and lifelong learning through innovative curricula and individualized educational experiences.

• We advance understanding and treatment of illness and injury through groundbreaking research, in the lab and at the bedside, including the commercialization of such research, as appropriate.

• We deliver skilled and patient-centered health care, and we continue to shape the future of health sciences education, research, and clinical care by always asking, “What’s next?”
Our Mission

UTMB’s mission is to improve health for the people of Texas and around the world.
Our Vision

We work together to work wonders as we define the future of health care and strive to be the best in all of our endeavors.
Our Values

Our values define our culture and guide our every interaction.

• We demonstrate compassion for all.
• We always act with integrity.
• We show respect to everyone we meet.
• We value diversity to best serve a global community.
• We promote excellence and innovation through lifelong learning.
7. **U. T. Medical Branch – Galveston: Progress of recovery efforts following Hurricane Ike**

**REPORT**

President David Callender will report on the progress of repair and mitigation efforts at U. T. Medical Branch – Galveston following Hurricane Ike, which made landfall near Galveston, Texas, on September 13, 2008. Dr. Callender will review in detail the major new addition of the Clinical Services Wing to the existing John Sealy Hospital building complex, using the PowerPoint presentation that follows on Pages 245 - 250.
Progress of Hurricane Ike Recovery Efforts

Report regarding the Clinical Services Wing at The University of Texas Medical Branch at Galveston

David L. Callender, M.D., M.B.A., F.A.C.S.
President, The University of Texas Medical Branch at Galveston

U. T. System Board of Regents’ Meeting
Health Affairs Committee
November 2010
Clinical Services Wing: 2^{nd} Floor Plan
Critical Departments within the Clinical Services Wing

Level 1
• Docks

Levels 2-3
• Materials Management
• Environmental Services
• Epidemiology Offices

Level 4
• Central Maintenance
• Sterile Processing Dept.
• Blood Bank

Level 5
• Interstitial / Mechanical

Level 6
• Respiratory Therapy
• Clinical Equipment Services
• Kitchen and Staff Dining

Level 7
• Pharmacy
• Offices
Clinical Services Wing
View from Southeast
Clinical Services Wing
View from Southeast with Vertical Expansion
8. **U. T. System: Update on investment in public health**

**REPORT**

Mr. Patrick Francis, Assistant Vice Chancellor for Health Affairs, and Roberta B. Ness, M.D., M.P.H., Dean of U. T. Health Science Center – Houston's School of Public Health, will provide an update on activities and results of the U. T. System's Public Health Initiative, using the materials following on Pages 252 - 262 as background information.
HIGHLIGHTS OF U. T. SYSTEM PUBLIC HEALTH INITIATIVE

In response to the 2005 report of the U. T. System Task Force on the Future of Public Health in Texas, the Board of Regents of The University of Texas System authorized the use of $10 million for a Public Health Initiative. The report recommended a number of ways to strengthen and expand public health efforts in Texas. The $10 million was allocated on a competitive basis across U. T. institutions.

Since that time, the U. T. Health Science Center – Houston School of Public Health recruited Roberta B. Ness, M.D., M.P.H., formerly Chair of Epidemiology at the University of Pittsburgh and a member of the National Academies of Science, as its new dean (November, 2008). She was attracted, in part, by the potential of the regional campuses and under her direction, the School has increased student enrollment by 41% since Fall 2008, increased extramural funding by 81% since fiscal year 2008, and greatly increased offerings of Interactive Television (ITV) and online courses. Results of the overall investment of Public Health Initiative Funds include:

- The number of courses offered via ITV increased 200%, from 34 courses in 2005 to 102 courses in 2009. Students enrolled in these courses also increased from 437 to 1,901 in the same time period.

- There has been an even more dramatic increase in online courses, which increased from five in 2006 to 43 in 2009 (760%). Enrollment in these courses increased 624%, from 157 to 1,133 during the same period.

- The availability of these courses has resulted in expanded program offerings:
  - All five regional campuses now offer a doctoral level program. Previously only master’s level programs were available at the regional campuses.
  - Faculty with specific expertise at any campus can now provide that expertise in courses across all campuses.
  - Classes for undergraduate certificate programs are available online and graduate certificate coursework can be taken via ITV at any campus or online. Total enrollment in certificate programs has doubled over the last five years. Specialized graduate certificate programs in Maternal & Child Health, Health Disparities, and Public Health Informatics (with School of Biomedical Informatics) have now been developed.

- Eleven graduate-level dual degree programs have been added since 2005, including M.D., M.B.A., and masters in nursing, public affairs, and social work.

- As a result of this course expansion and recruiting efforts, total enrollment in the School of Public Health has increased 46%, from 974 in Fall 2005 to 1,413 in Fall 2009.
2010. The largest incoming class in the history of the School of Public Health matriculated in Fall 2010, with >480 new degree seeking students attending orientation.

- Overall research awards attributable to the School of Public Health declined each year from 2005 to 2008, but rebounded in 2009 and grew to their highest level ever in 2010. Awards were $41.6 million in 2008, $55.3 million in 2009, and $65.5 million in 2010 (estimated). This represents a 57% increase since 2008 and a 22% increase from 2005. In some instances, collaborations facilitated by this Initiative have also resulted in increased research awards attributed only to the collaborating institutions and are not included in this data for the School of Public Health.
Update on the UT System Public Health Initiative

In response to the 2005 “The Future of Public Health in Texas” report, the Board of Regents of The University of Texas System authorized the use of $10 million for a Public Health Initiative. The report recommended a number of ways to strengthen and expand public health efforts in Texas. The $10 million was allocated on a competitive basis across U. T. institutions to: support joint recruitment of faculty; enhance the infrastructure for distance learning and public health initiatives; renovate facilities to enhance coordinated programs between campuses; and purchase computers and other analytical tools to support the public health enterprise.

Some of the conclusions of the 2005 report were:

- The overall state of public health in Texas is poor in comparison to national averages for many parameters;
- There is a shortage of well-trained public health professionals;
- Schools of Public Health should collaborate with academic campuses to significantly increase opportunities for public health education;
- To reach their potential, the regional campuses of the U. T. Health Science Center School of Public Health must be integrated with other academic and health science campuses in education, research, and public service; and
- Significant economic benefits will be derived from proper funding of public health in Texas, including decreased medical costs, a healthier and thus more productive workforce, and increased federal public health research funding.

While it is too early to see an impact on health statistics, this update reviews the impact of the Public Health Initiative on the academic, research, and public service efforts of U. T. institutions.

The U. T. Health Science Center - Houston (UTHSCH) is one of three schools of public health in Texas offering masters and doctoral degrees. The other two schools are at Texas A&M Health Science Center and the University of North Texas Health Science Center.

The main campus of the UTHSCH School of Public Health (UTSPH) is in Houston and admitted its first class in the fall of 1969. In 2007, Austin became the fifth regional campus of the School of Public Health, joining San Antonio (1979), El Paso (1992), Dallas (1998) and Brownsville (2000). In 2004 the regional campuses offered only the Masters of Public Health (M.P.H.) but all now have the capacity to offer selective doctoral degrees.

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1 U. T. El Paso and U. T. Medical Branch – Galveston offer masters in public health but do not have a separate School of Public Health.
2 U. T. Austin and U. T. Brownsville both offer a Ph.D. in Epidemiology and a Dr.PH. in Health Promotion/Health Education; U. T. Dallas offers a Ph.D. in Epidemiology; U. T. El Paso offers a Dr.PH. in Health Promotion/Health Education; and U. T. San Antonio offers a Dr.PH. in Community Health Practice and a Dr.PH. in Environmental and Occupational Health.
This report is an update on the efforts supported by the Initiative. Tables included in this report focus on the entire School of Public Health. Because there were overlapping goals for the awards, it is difficult to attribute some outcomes, such as growth in enrollment and research, to a single project. Additionally, many of the awards resulted in growth, particularly in research funding, at collaborating institutions. These increases are not captured in the tables below.

**Distributive Learning System**

The first and largest award ($2.8 million) was for a “Distributive Learning System” to upgrade and increase instructional television classrooms, improve electronic connectivity between Houston and regional campuses, expand ability to offer online classes, and support collaborative research. The main campus used the award to deploy technology across all six campuses to:

- Provide interactive television (ITV) classrooms at every campus and expand on the number of ITV classes shared between campuses;
- Improve the reliability of multisite classes and videoconferences and increase the number of concurrent sessions between campuses;
- Improve the quality of video data transmission between campuses to teach courses that require high resolution images; and
- Expand access to asynchronous, online courses.

As a result, an enriched curriculum is available to students at all campuses and additional degrees are now available at the regional campuses, including M.S. and doctoral degrees. Additionally, certificate programs have been expanded, which allows students to begin or enhance their public health education with fewer time and place constraints.

Increases in the number of offerings and students taking classes via ITV and online are indicated in the charts on the next page.

The ITV capacity has made it possible to join students at the regional campuses in classes with students in Houston, thus making it possible to offer doctoral degree programs at each regional campus. Furthermore, expertise located at any campus can now be made available to all campuses. The specific doctoral degree offered at a regional campus reflects the faculty training and research focus of that campus. Eleven graduate-level dual degree programs have been added between 2005 and 2009, including programs at U. T. Brownsville, U. T. Health Science Center – San Antonio, U. T. San Antonio, U. T. Austin, and Texas Tech University’s Paul L. Foster School of Medicine in El Paso.

Additionally, the Distributive Learning System award has facilitated an increase in the graduate and undergraduate certificate programs offered. Total enrollment in certificate programs has increased 350% over the past five years. The graduate certificate coursework can be taken via ITV at any campus or online from anywhere in Texas. The
courses can be applied towards an MPH degree. The undergraduate certificate program was approved in 2009 to provide training for public health professionals without a college degree. Classes are available online.

The growth in enrollment has been consistent in recent years (concentrated in non-degree certificate programs) and increased significantly in Fall 2010 due to increased capacity made possible by state funding for public health in fiscal years 2010 and 2011. The enhanced ITV and IT infrastructure provided by the Initiative are critical to the ability
to accommodate the enrollment growth prompted by the additional operating funds from the State.

![Fall Enrollments](image)

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>974</td>
</tr>
<tr>
<td>2006</td>
<td>931</td>
</tr>
<tr>
<td>2007</td>
<td>970</td>
</tr>
<tr>
<td>2008</td>
<td>1005</td>
</tr>
<tr>
<td>2009</td>
<td>1030</td>
</tr>
<tr>
<td>2010 (estimated)</td>
<td>1421</td>
</tr>
</tbody>
</table>

While overall research awards declined from 2005 to 2008, an increased effort in applications resulted in an increase in award dollars in 2009 and continued success in 2010. ITV capabilities have enhanced the ability of faculty to collaborate across all campuses, leading to increased research productivity.

![Sponsored Research](image)

<table>
<thead>
<tr>
<th>Year</th>
<th>Sponsored Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>$53,670,332</td>
</tr>
<tr>
<td>2006</td>
<td>$46,703,541</td>
</tr>
<tr>
<td>2007</td>
<td>$45,741,778</td>
</tr>
<tr>
<td>2008</td>
<td>$41,640,661</td>
</tr>
<tr>
<td>2009</td>
<td>$55,328,471</td>
</tr>
<tr>
<td>2010 (est.)</td>
<td>$65,500,000</td>
</tr>
</tbody>
</table>
Epidemiology and Biostatistics Core Program

The $1.6 million award to support U. T. Southwestern Medical Center – Dallas (Simmons Comprehensive Cancer Center) and UTSPH campus in Dallas (UTSPH-D) was matched with more than $2 million in institutional resources to build a cancer population research program. The investment has supported two new U. T. Southwestern Medical Center – Dallas faculty members. Each of these new faculty members has appointments in both institutions. Their presence has helped build academic programs, strengthen research and facilitate community-based projects. In addition, the award will soon provide partial support to a public health faculty member recently recruited to the UTSPH-D campus.

One of the faculty members supported by the funds is steadily building a research portfolio that began with three pilot awards and led to a larger grant from the Cancer Prevention and Research Institute of Texas for working on interventions in Parkland Hospital’s primary care clinics. The second U. T. Southwestern Medical Center – Dallas faculty member supported by the award became an adjoint professor in the School of Public Health and has conducted statistical and psychometric analyses to support population science researchers across both institutions and to organize seminars on psychometric measures for public health faculty and research staff. Independent of support from the award, a partnership with two other public health faculty members has drawn them into cancer-related research and resulted in another funded study related physical activity behaviors in an impoverished Dallas neighborhood. The new faculty member supported by the award has a grant proposal pending.

Hispanic Health Research Center/Community Outreach Research Facility

A $1.2 million award, in conjunction with institutional funds, allowed for the completion of research and outreach facilities at the UTSPH campus in Brownsville (UTSPH-B) located on the U. T. Brownsville campus. The completion of shelled space resulted in additional classrooms, offices, space for graduate students, community outreach and meeting space, and a BSL 3 laboratory for tuberculosis, a significant issue in South Texas.

The lab space is shared by UTSPH-B and U. T. Brownsville faculty and undergraduate and graduate students involved in collaborative research projects. The laboratory coupled with the community based research program has resulted in collaborations with the Institute of Molecular Medicine in Houston and the Baylor College of Medicine. The office and outreach space has facilitated meetings between faculty and students with various community organizations and training, such as nutrition classes for community members. Additionally, small clinic space has made it easier for researchers to work on-site with participants in outreach studies.

As indicated in the Distributive Learning System section of this paper, state-of-the-art ITV equipment allows for teleconferencing from all classrooms and most conference
rooms, which allows for meetings and teaching with colleagues and collaborators statewide and overseas.

UTSPH-B has been unique in its ability to obtain research funding even in its infancy, but the graduate level nature of public health in a poor population with many educational and health disparities has made it challenging to achieve substantial enrollment in the program. UTSPH-B has tried a number of approaches to sustain and grow enrollment. In 2005, the program began offering a graduate level certificate in public health to overcome what had been a significant barrier to enrollment — the requirement to take the Graduate Record Exam (GRE). The certificate program allows students to take certificate courses and if they do well, they can be admitted into the M.P.H. program even with GRE scores lower than the usual requirement. The certificate program has become the approach taken for almost 50% of the current student enrollment at UTSPH-B. It has allowed for a 25% increase in enrollment in 2010.

The upgraded ITV capability achieved by this and the Distributive Learning award has allowed the program to expand its offerings by accessing courses beyond Brownsville faculty and to also become more accessible to students. The entire certificate program is available online. UTSPH-B faculty teach 100% of their course either online or by ITV. Additionally, doctoral level programs are now available because of the ITV capability; two students enrolled in the fall of 2009, and three more enrolled in 2010.

With additional graduate level enrollment, it is critical to have research opportunities for these students. The research space made possible by this award has allowed for such opportunities and accommodates a summer program for four to six local high school students and allows six to eight biology students from U. T. Austin to work on research projects during the summer.

Because all of the programs at UTSPH-B focus on major problems in the community, such as obesity and diabetes, and increased susceptibility to infections like tuberculosis and influenza, the new space has been particularly beneficial for community based education, training, and research efforts. The facilities have helped attract five young faculty members in the last two years and have provided the nucleus for collaboration with colleagues from U. T. Brownsville.

The participation in the Clinical and Translational Science Awards (CTSA) grant with UTHSCH has created a clinical research unit with specific program expansions to include population and translational research with a Cameron County Hispanic Cohort, which has recruited 2,000 community members to document socio-demographic, epidemiological, clinical, mental health, behavioral, and biological data. The cohort and new clinical research unit has attracted faculty from U. T. Health Science Center - Houston, U. T. Medical Branch – Galveston, and Baylor College of Medicine, and a research center in Karachi, Pakistan to collaborate on funded grants and grant proposals.
A key to the success and sustainability of community based efforts is to have the community see benefit from the research, not merely taking data from the community for research completed and utilized elsewhere. The efforts in Brownsville have included community meetings and focus groups related to child and adolescent health. Having the infrastructure on site makes it easier for direct interaction and community buy-in. Housing two local non-profit organizations (Health Communities of Brownsville and the Brownsville Farmer Market) within the center is a testament to the School’s commitment to the community.

Efforts in Translational Research

This $1.2 million award was to renovate two buildings at U. T. El Paso and build-out lab facilities in another to support new collaborative programs in translational research in basic and applied sciences. The result is the Translational Hispanic Health Research Initiative (THHRI), which consists of a multidisciplinary team of academicians and researchers at U. T. El Paso and the UTSPH campus in El Paso (UTSPH-EP).

With the hiring of a one full-time faculty member within U. T. El Paso’s College of Education who works collaboratively with faculty at UTSPH-EP and with support for two postdoctoral fellows, THHRI has identified a number of research lines that have received external funding. The “Health Literacy and Health Promotion” has received funding from the National Institutes of Health (NIH). The “Translational Research on Cardiovascular Disease” effort tests new models of community outreach. As one of the most successful collaborations between the two schools, this project has generated $4 million in research funding to U. T. El Paso. The “Translational Research on Periodontal Disease” is in collaboration with Tulane University’s School of Public Health and a joint proposal has been submitted for NIH funding.

Also, facilities renovated with funding from this award are being used by the U. T. El Paso College of Sciences and has been instrumental in U. T. El Paso securing additional funding for the Border Biomedical Research Center, which will work with UTSPH-EP on additional health disparities research.

Cooperative Public Health Program

The original $745,000 award to U.T. Health Science Center - San Antonio (UTHSCSA) and the UTSPH campus in San Antonio (UTSPH-SA) was for a “Cooperative Public Health Program” focused on environmental health and water quality research and teaching. With the departure of the primary faculty member involved in this project, the funding was redirected to strengthen collaborations among the three U. T. institutions in San Antonio. Infrastructure at UTSPH-SA was enhanced by build-out of leased space and purchase of research equipment, computer hardware and software and video equipment. The funding has helped strengthen the partnership among the three U. T. institutions, but also the San Antonio Metropolitan Health District (Metro Health), Region 8 Office of the State Department of Health, and the University Health System. The number of adjunct faculty appointments has increased from two to 50, and there are two
jointly funded appointments and shared office space for two UTHSCSA/UTSPH-SA faculty members.

The funding increased the capacity for community health assessments, geographic information system (GIS) applications to public health, water quality research, forensic toxicology research, and hosting meetings with partners. It has directly assisted the collaboration between UTSPH-SA and UTHSCSA’s clinical translational science award and resulted in a UTSPH-SA contract to manage and develop a community information system for over 25 organizations in the San Antonio area.

Equipment shared by UTSPH-SA and UTHSCSA’s School of Health Professions has been used in teaching labs for training graduate students in forensic toxicology. It is also being used in new interdisciplinary collaborations with the UTHSCSA Department of Ophthalmology. The U. T. San Antonio Center for Water Research is in discussions with the Texas Department of Transportation to research the impact associated with corrosion of concrete structures.

Since 2007, a dual M.D./M.P.H. has been offered between UTHSCSA and UTSPH-SA, growing from 19 students to 100. Additionally, U. T. San Antonio has begun to offer Ph.D. programs (Applied Demography and Applied Statistics) in collaboration with UTHSCSA and UTSPH-SA. In 2008, the UTHSCSA School of Medicine, in collaboration with UTSPH-SA and Metro Health began to offer Public Health Grand Rounds, which can be viewed online. In addition to now offering a Dr.PH. at UTSPH-SA, other developments include a M.B.A./M.P.H. with U. T. San Antonio, and a public health certificate program with UTHSCSA Dental School. Additionally, there are plans for an undergraduate degree in public health at U. T. San Antonio and an undergraduate certificate program with a local, private university.

This summer, two community-based research projects were funded by the Centers for Disease Control and Prevention (CDC) and the NIH. In addition to research targeting local issues and expanding education efforts, community service efforts have been a significant part of this effort, including using the expanded space for meetings with academic, agency and community partners.

Research and Education Programs in Nursing and Public Health

The original proposal from the UTSPH campus in Austin (UTSPH-A) and U. T. Austin would have provided $1.8 million from U. T. System to be matched by the two institutions to renovate space within the U. T. Austin School of Nursing building. Those plans were changed when it became clear that the School of Nursing building could not accommodate the tremendous interest in public health and the expanded needs of the School of Nursing. This resulted in a delay in finalizing facilities for UTSPH-A. A new location was found for UTSPH-A and renovation was completed in Summer 2010.

The M.P.H. program in Austin started in Fall 2008 and just awarded its first 12 degrees. In addition to the growing masters program, dual degree programs have been
established with U. T. Austin’s School of Social Work and LBJ School of Public Affairs. Also, a Doctor of Public Health and Doctor of Philosophy (in Epidemiology), and a certificate in public health are offered.

UTSPH-A is working with U. T. Austin to develop a 4 + 1 program whereby graduates of U. T. Austin’s bachelor’s in public health program could receive a masters from UTSPH-A with one year of additional study. In addition to the dual degree programs with U. T. Austin, there are two faculty members with appointments at both institutions and whose courses are open to students at both institutions.

The primary faculty interest is in the prevention of chronic diseases. UTHSPH-A is the “home” to the Michael & Susan Dell Center for Advancement of Healthy Living, which provides infrastructure support for research and community activities related to child and adolescent health promotion, particularly obesity prevention. With about $3 million a year in external research funding and the emphasis on healthy living and health promotion research, faculty are engaged in ongoing partnerships with a variety of partners in central Texas and across the state.

**Electronic Medical Record Demonstration Project**

The “Master Patient Index” project received $500,000 as part of a Systemwide effort to design and construct networks capable of sharing patients’ healthcare information among regional but disparate healthcare providers and payers. This work continues as part of the agenda of the Chancellor’s Health Fellow in Health Information Technology.

**Borderplex Health Council Seed Grants**

Just over $150,000 was provided to the Borderplex Health Council for seed grants to member institutions. Each of the four U. T. institutions has contributed funding to the effort and, to date, 14 seed grants have been made. Each grant involves faculty from at least two institutions and the array of faculty disciplines/departments include biological sciences, computer science, family medicine, microbiology, nephrology, nursing, and psychiatry. Some of these seed grants have served as the foundation for successful grants proposals (from NIH and HRSA), poster presentations, and published manuscripts. Other seed grants focused on enhancing the infrastructure for nursing scholarship in the region and better alignment and sharing of nursing curriculum across institutions in the region.

**Note:** In addition to the U. T. System Public Health Initiative investment in the ITV infrastructure, UTSPH has made additional investments of $340,000 in mid-FY 2010 and an additional $195,000 in summer FY 2010 to accommodate the large increase in use.

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9. **U. T. System: Quarterly report on health matters, including a follow-up on the U. T. System's Transformation in Medical Education (TIME) initiative and comments on the meaningful use of electronic health records**

**REPORT**

Executive Vice Chancellor Shine will report on health matters of interest to the U. T. System, including a follow-up on the U. T. System's Transformation in Medical Education (TIME) initiative and comments on the meaningful use of electronic health records.
SPECIAL MEETING OF THE HEALTH AFFAIRS COMMITTEE

U. T. System: Discussion regarding health information technology

DISCUSSION

Jack Smith, M.D., Ph.D., Dean of the School of Biomedical Informatics at U. T. Health Science Center – Houston, will provide an overview of health information technology initiatives, using the PowerPoint presentation on Pages 265 - 283. A discussion with the presidents of U. T. System health institutions regarding health information technology will follow Dr. Smith's presentation.
Overview of the Office of the National Coordinator for Health Information Technology Initiatives and UTHealth

Jack Smith, M.D., Ph.D.
Dean and Professor, School of Biomedical Informatics
The University of Texas Health Science Center at Houston

U. T. System Board of Regents’ Meeting
Special Health Affairs Committee
November 2010
Potential Return of Investment of Electronic Health Record (EHR)

- 8% of total healthcare cost
- 1.2% of gross domestic product

$162 billions/year could be saved by health information technology in the U.S.

Bar chart showing:
- Increased efficiencies: $67 billions
- Reduced adverse drug events: $4 billions
- Prevention & Management: $81 billions

The University of Texas System
Challenge Electronic Health Record Adoption Levels


Notes: Any EMR/EHR is a medical or health record system that is either all or partially electronic (excluding systems solely for billing). The 2009 data are preliminary estimates (as shown on dashed lines) based only on the mail survey. Estimates of basic and fully functional systems prior to 2006 could not be computed because some items were not collected in the survey. Starting in 2007, the skip pattern after the all or partial EMR/EHR systems question was removed. Includes non-federal, office based physicians. Excludes radiologists, anesthesiologists and pathologists.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey
Health and Human Services: Office of the National Coordinator for Health Information Technology (ONC)

Coordinator's Corner: Updates from the National Coordinator for Health Information Technology

The following are part of a series of ongoing updates from Dr. David Blumenthal, National Coordinator for Health Information Technology. The Office of the National Coordinator for Health Information Technology (ONC) encourages you to share this information as we work together to advance the quality, safety, and value of care and the health of all Americans through the use of electronic health records and health information technology.

For more information and to receive regular updates from ONC, please subscribe to our Health IT News list.

Update: July 13, 2010

- Investing in the Future of Health Care with Electronic Health Records
  The Health Information Technology for Economic and Clinical Health Act (HITECH), part of the American Recovery and Reinvestment Act, provides for an unprecedented amount of funding to improve the quality and efficiency of our health care system through health information technology. The HITECH Act’s historic investment in HIT will advance health care in our country through adoption and use of EHRs and other tools of our digital age.
  [read more]

Update: June 18, 2010

- Establishment of the Temporary Certification Program for Electronic Health Information Technology
  Like many innovations, the advent of health information technology has introduced its own vocabulary. As a practicing primary care physician, I can attest that terms like electronic health records, EHRs, certified HIT technology, and meaningful use are not typically used around most doctors’ offices and hospitals. However, as our nation moves towards a more technologically advanced system to improve health care, perhaps it’s time for us to make these words a part of our vocabulary. The Office of the National Coordinator for Health Information Technology (ONC) is dedicated to helping you understand HIT concepts and what they mean for you.
  [read more]

Update: May 14, 2010

- There Is No Time Zone for a Nationwide Health Information Network
  Private and sector health information exchange enables information to follow the patient where and when it is needed for better care. The federal government is working to enable a wide range of innovative and complimentary approaches that will allow secure and meaningful exchange within and across states, but all of our efforts must be grounded in a common foundation of standards, technical specifications, and policies.
  [read more]

Update: May 5, 2010

- Establishing Reasons for Nationwide Advancements in Health IT
  Healthcare professionals appreciate opportunities to learn from innovative colleagues and communities - to see what really works, to get "boots-on-the-ground" perspectives, to learn best practices, and to use the experiences of other leaders to inform how to improve performance more broadly.
  [read more]

Update: April 7, 2010

- Preparing Professionals for a Nationwide Health Care Transformation
  I know that health care providers are concerned about implementing new health information technology and finding professionals who can use and
Office of the National Coordinator for Health Information Technology (ONC) Initiatives

- Regional Extension Center – Assist with EHRs in Primary Care
- Strategic Health Information Technology Advanced Research Projects – Research
- Community College Consortium – Workforce
- University Based Education – Workforce
- Beacon Community – Community Health Integration
- National Health Information Infrastructure – standards for inter-connection
The Texas Regional Extension Centers Commitment

Health Information Technology Regional Extension Center Supports Primary Care Physicians in Getting to Meaningful Use
Texas Regional Extension Center (REC) & Health Information Exchange (HIE) Overview

Texas Health and Human Services Commission
Medicaid eHealth/Texas Health Services Authority

<table>
<thead>
<tr>
<th>Texas REC Coalition</th>
<th>Texas HIE Coalition</th>
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</thead>
<tbody>
<tr>
<td>South (U. T. Health Science Center - Houston)</td>
<td>Harris County, Galveston, Beaumont, San Antonio/ HASA, Corpus Christi, Montgomery, Southeast Texas Hospital, Kleberg</td>
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<tr>
<td>Central (Texas A&amp;M System Health Science Center)</td>
<td>Integrated Care Collaborative</td>
</tr>
<tr>
<td>West (Texas Tech University Health Sciences Center)</td>
<td>El Paso, Amarillo, Lubbock, West Texas, South Plains</td>
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Texas Health Information Exchange

Purpose: To develop a statewide exchange process through which electronic health information from different EMR systems can be converted into comparable information. Health care reform is moving rapidly to outcome-based payments and needs information systems that can identify outcomes and not simply procedures and other inputs.
Gulf Coast Regional Extension Center

Mission:
The mission of the Gulf Coast Regional Extension Center (GCREC) is to facilitate the meaningful use of health information technology by eligible primary care providers.

Vision:
To create a safe and secure electronic environment for the input, storage, retrieval, and exchange of comprehensive health information for consumers, clinicians, payors, and governmental health agencies.
# Houston Gulf Coast Regional Extension Center Organization

**Governance:** Steering Committee (50% Physicians) with Operational Agreement  
Chair: Jack Smith. Comprised of Physicians, Hospitals, HIE, Payers, Business, Public Health  
**Advisory Committees:** Enrollment, Quality Management, Meaningful Use, Sustainability, Training

| Executive Director | Kim Dunn, M.D., Ph.D.  
| Southern Associate Director | Joe McCormick, M.D.  
| Operations Manager | Pam Salyer, Ph.D.  

| **Meaningful Use and Vendor Quality Management**  
Director | Dean Sittig, Ph.D.  
| **Vendor Lab and Field Usability**  
Director | Jiajie Zhang, Ph.D.  
| Operations | Michele Toffelmire  
| **Workforce Training**  
Director | Jim Turley, RN, Ph.D.  
| Operations | Julie Brixey, RN, Ph.D.  

| Interoperability with Health Information Exchanges  
| Enrollment, Technical Assistance to Go Live  
| Call Center Support  
| EMR Vendors  
| Field Usability and Feedback from Practitioners on meeting Meaningful Use  
| Usability Testing of EMR Vendors in Lab: Workflow, Training, Technical Support: FAQ for Level 1, Integration with Level 2/3  
| Practitioner Outreach in partnership with Enrollment Partners  
| Workforce Program Online:  
| • Week  
| • Month  
| • Fellowship  
| • Certificate  
| • Associates
## Enrollment Process & Quality Management

<table>
<thead>
<tr>
<th>Milestone 1</th>
<th>Milestone 2</th>
<th>Milestone 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility Determination</td>
<td>Workflow Analysis</td>
<td>2011: Meaningful Use Attestation</td>
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<tr>
<td>Readiness Assessment</td>
<td>EHR Contract, Project Plan, EHR</td>
<td>2012: System Submit Data</td>
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<td></td>
<td>Go-Live</td>
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<tr>
<td>Practice Enrollment</td>
<td>ePrescribe, Outcomes Report</td>
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</table>

**Quality Management Surveys**
<table>
<thead>
<tr>
<th>Awardee</th>
<th>Research Focus Area</th>
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</thead>
<tbody>
<tr>
<td>University of Illinois at Urbana-Champaign</td>
<td>Security of Health Information Technology</td>
</tr>
<tr>
<td>The University of Texas Health Science Center at Houston</td>
<td>Patient-Centered Cognitive Support</td>
</tr>
<tr>
<td>Harvard University</td>
<td>Healthcare Application and Network Platform Architectures</td>
</tr>
<tr>
<td>Mayo Clinic College of Medicine</td>
<td>Secondary Use of EHR Data</td>
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Strategic Health Information Technology Advanced Research Projects (SHARP)

National Center for Cognitive Informatics and Decision Making in Healthcare (NCCD)

Funded by ONC SHARP Patient-Centered Cognitive Support Program (SHARP-C)

SHARP-C Principal Investigator: Jiajie Zhang
NCCD Co-Directors: Jiajie Zhang & Vimla Patel

www.uthouston.edu/nccd/
Strategic Health Information Technology Advanced Research Projects (SHARP) (cont.)

National Center for Cognitive Informatics and Decision Making in Healthcare (NCCD) Vision:

Become a national resource providing strategic leadership in research and applications for patient-centered cognitive support in healthcare.
Usability Protocol

Heuristic Analysis
• Independent Expert Human Factors Evaluators
• Complete 12 Meaningful Use Tasks for Evaluation
• Identify the Number of Usability Heuristic Violations for Each Task
• Identify the Location and Type of Each Heuristic Violation
• Rank the Severity of Each Heuristic Violation

Keystroke Level Method (KLM) Analysis
• Expert Human Factors Evaluator
• Complete 12 Meaningful Use Tasks for Evaluation
• Identify the Number Steps to Complete Each Meaningful Use Task
• Associate Standardized Times for Each Mental and Physical Task Step
• Determine Total Time for Task Completion by an Expert User
Workforce Development: Community College

Roles supported by program include:
• Practice workflow and information management redesign specialist
• Clinician/practitioner consultant
• Implementation support specialist
• Implementation manager
• Technical/software support staff
• Trainer
Office of the National Coordinator for Health Information Technology (ONC) Activities

• Community College Consortium
  ▪ Houston Community College, Midland Community College, Temple Community College, Dallas Community College

• Community College Curriculum Development
  ▪ Ohio State University, University of Alabama, Johns Hopkins University, Columbia University, Duke University

• University-based Training
  ▪ Texas State University, U. T. Austin, U. T. Health Science Center - Houston
Workforce Development

• University-based Programs
  • Clinician/Public Health Leader
  • Health Information Management and Exchange Specialist
  • Health Information Privacy and Security Specialist
  • Research and Development Scientist
  • Programmers and Software Engineer
  • Health IT Subspecialist

• Online Program
  • Applied M.S. in Electronic Health Records

• Educational Ladder
University-based

The six roles targeted by this program are:

1. Clinician/Public Health Leader
2. Health Information Management and Exchange Specialist
3. Health Information Privacy and Security Specialist
4. Research and Development Scientist
5. Programmers and Software Engineer
6. Health IT Subspecialist