Committee Attendees:
Paul Roth  Steve McKernan  Jeffery Griffith  Holly Buchanan  John Pieper
Karen Carlson  Ava Lovell  Pug Burge  Ryan Deller

Executive Committee Attendees Absent:
Robert Katz  Art Kauffman

Work Group Attendees:
Mary Kenney  Joe Brawley

Notes prepared by Tabia Murray

<table>
<thead>
<tr>
<th>Next Steps</th>
<th>Responsible Party</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Review assumptions and include any that were missed</td>
<td>Executive Strategic Committee</td>
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<tr>
<td>Draft of the planning assumptions and circulate to Executive Strategic Committee.</td>
<td>Joe Brawley</td>
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<tr>
<td>Schedule Orientation of Subcommittees</td>
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<tr>
<td>Draft invitation for taskforce groups from Strategic Committee</td>
<td>Mary Kenney</td>
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Agenda Review

Strategic Issues
Item:  Broad Strategies Presentation

Discussion:  Joe Brawley led the discussion revisiting the three levels of planning for the Comprehensive Master Plan, a review of the President Schmidly’s Vision and the conceptual framework within which the Master Plan must be updated, review of the Master Plan Process and the timing which will be needed to complete the development of alternatives by Fall 2008, reminding the HSC Strategic Committee that the update to the HSC Master Plan must be made within the context of the Comprehensive Master Plan and the other plans and projects. Finally, Brawley discussed the deliverables for this meeting:

- List of planning sub-committees
- Committee Charge
- Committee Members
Item: **Visioning Session**

Discussion: Dr. Roth opened the session with a discussion on the need for this visioning session for the Health Sciences Center. The HSC campus is not limited to the North Campus, but rather is a state-wide campus including Sandoval County, Rio Rancho, Las Cruces, Valencia, Taos, Santa Fe, Gallup, etc. and that has changed the mission of the HSC and must be reflected in the planning efforts for the future. What will the clinical needs for the state be and how will the HSC provide for those needs? What are the educational needs, as well as the research needs and what is the most efficient way to distribute the HSC resources to meet those needs? Where and how will the Administration/Finance for the HSC function? What are the assumptions for the traditional HSC Campus (i.e. wet lab space, special teaching needs (hi-tech), administration buildings, student services, daycare center (child and elders), etc. This Strategic Committee needs to create and verify a list of assumptions for designing the HSC Level 2 Master Plan.

Action: No Action Required.

Item: **Planning Assumptions**

Discussion: The committee began the discussion of the major issues and planning assumptions for the update to the HSC Level 2 State-wide Campus Master Plan.

**Major Issues:**
1. Distributive Factors for each mission area and assumption
   a. Telehealth – facilities technology
   b. Diversity
   c. Community Presence (CTSC)
   d. Translational Research
2. Need for a single, updated platform for Data/Voice/Media
   a. Tele-services
   b. Relationship to ITS
3. University Enrollment Levels
   a. Need to understand Main Campus undergraduate needs and how they will change/effect HSC
   b. Need to understand CNM undergraduate needs and how they will change/effect HSC

**Planning Assumptions for next 10 years:**
1. Education
   a. Pharmacy
      i. Increase Pharm. D. enrollment 25%
      ii. Increase Pharm. D. Graduate enrollment 50%
      iii. Changing requirements will require an increase in Residency Program enrollment by 400%
   b. Nursing
      i. Increase RN to BSN enrollment 100%
ii. Increase AND to BSN enrollment 100%
iii. Increase MSN enrollment 100%
iv. Add DNP program (Nurse Practitioner program will be phased out and become Doctor of Nursing Program)
v. Increase combo FNP, PNP, ACNP, CNM enrollment 70%
c. Medicine
   i. Increase class size to 125
   ii. Increase PA enrollment 100%
   iii. Increase PT enrollment 50%
   iv. OT enrollment ??%
   v. Increase Radiology enrollment 100%
   vi. Possible expansion of EMS program to 4 year degree program
   vii. Increase ALS enrollment 10%
viii. Expansion of Residency Program: increase Graduate Medical Education enrollment 25%
        a. Will need to address Faculty : Student ratios
d. Core Training
   i. For Residents
      a. Need for centralized core training for residencies across multiple disciplines
   ii. Expansion of simulated training facilities
e. Library & Technology Services
   i. Collection will remain at 90% electronic and 10% physical, however redundancy is needed.
   ii. Increase storage space needed (have been forced to use storage space for personnel)
   iii. Increased distributed knowledge management and information technology
   iv. Increased distributed student study space
   v. Need balance between distributed and centralized – certain activities require “face time” to be productive.
   vi. Core to remain the same with additional space needs increased by distributed space.
f. Distance Education
   i. Synchronous digital streaming
   ii. Balance between High-Tech & High-Touch
   iii. Digital sites distributed around state
g. Dental
   i. Dental School within 4-5 years
   ii. Clinical located on north campus
   iii. Residency program increase to 2 yrs pediatric, orthopedic
   iv. Increase enrollment for Dental Hygiene ??%
h. Public Health
i. Continuing Professional Education
   i. Pharmacy will become more involved in offering Continuing Professional Development
   ii.
j. Telehealth
   i.
k. Allied Health
   i. Program in Rio Rancho?
l. Impact on Arts & Sciences undergraduate education
   i. Increase capacity in pre-req classes and labs.

m. Diversity
   i. Increase Faculty and Student Diversity
   ii. 

2. Research
   a. Lab-based
      i. Proximity to lab facilities
   b. Population-based
      i. Proximity to primary care pcps

3. Clinical
   a. Assumptions will be determined separately.

4. Administration/Finance
   a. Parking
      i. Additional capacity required
   b. Mass Transit
      i. 
   c. Expansion of services for staff & students
      i. Recreation
      ii. Food Services
      iii. Day Care (child & elders)
      iv. Bookstore
   d. Physical Environment
      i. Aesthetically pleasing
      ii. Environmentally friendly
      iii. Good wayfinding
      iv. Security and Lighting
   e. Standardization
      i. Equipment
   f. Central Administration
      i. More Deans/Support
      ii. Finance
      iii. Development
      iv. Marketing
      v. Legal
      vi. *Located in a single building – programs and faculty distributed, administration centralized?*
   g. Associated Programs
      i. Poison Control
      ii. Autism
      iii. Other Programs

**Action:** Executive Strategic Committee will review assumptions and include any that were missed.
Subcommittees will validate assumptions and determine faculty, staff, technology, facility, other resource needs as well as impact of assumptions on Main campus for the assumptions.

**Item:** *Strategic Goals by Mission Areas*
Discussion: Began discussion of strategic goals by mission areas.

1. Research

   Goal: Grow research by 10% annually and by doing so have a greater relevance and impact on the healthcare of New Mexico’s unique populations (need metrics/report cards). Increase research in areas such as:
   - Population based and health systems based
   - CBPR
   - Health Policy
   - Public Health

   Strategy: To have a research enterprise that is flexible
   Tactic: CTSC
       - a. Within 15 years increase population and health systems research...
       - b. Important and relevant to NM Healthy Communities
       - c. Enhance relationships with other local enterprises (Lovelace, NM Tech, NM State, National Labs, VA, Private, Dept of Health)
       - d. Increase collaboration with main campus – internal relationships
       - e. Enhance Commercialization & Intellectual Property (STC relationship w/HSC)

   2. Education
   3. Clinical
   4. Administration/Finance

Action: 1. Joe Brawley will work up a draft of the planning assumptions and circulate to Executive Strategic Committee.

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Item: Subcommittees

Discussion: The Executive Strategic Committee created a list for the four subcommittees. Subcommittee chairs will report to the Executive Strategic Committee and to each other. Executive Strategic Committee will hear reports from subcommittee chairs once a month.

Charge to subcommittees is:
   1) Validate &/or revise Goals and Assumptions
   2) Develop strategies to meet the goals and objectives
   3) Impact of goals and assumptions on other entities (ie. Main Campus, CNM, etc)
   4) Indicate faculty, staff and special facility needs for goal achievement
   5) Document and report back to Executive Strategic Committee
       a. (Preliminary Reports Due 31 January)

Research Subcommittee

Goal: Grow research by 10% annually and by doing so have a greater relevance and impact on the healthcare of New Mexico’s unique populations (need metrics/report cards). Increase research in areas such as:
   - Population based and health systems based
   - CBPR
   - Health Policy
• Public Health

Members: Richard Larson (Chair) Scott Burchiel
Bill Weise Elizabeth Tigges
Larry Sklar DTS
Cathy Penick (staff)

Education Subcommittee
Goal: Address health professional workforce needs in New Mexico by enhancing the size and array of educational programs at the Health Sciences Center.
School of Medicine » Implement year 2 of BA/MD program
College of Pharmacy » Implement UNM/NMSU Cooperative Pharmacy Program
College of Nursing » Implement 4-term/16-month curriculum, » Implement satellite Nursing Program
Health Sciences Library and Informatics Center » Plan and implement technology and Hall of Discovery required for Domenici Center for Health Sciences Education

Members: Holly Buchanan (Chair) Jean Giddens/Robin Meize-Grochowski
Angela Ness Ellen Cosgrove
Don Goodwin Sue Queen
MPH Staff

Clinical Subcommittee
Goal: Offer both comprehensive and specialty health care to New Mexicans.
Clinical Enterprise Strategic Plan » Implement strategy to become one of top 20 of UHC academic medical health centers, » Establish and begin implementation of an effective UNM Medical Group (UNMMG)

Members: Robert Katz (Chair) Steve McKernan
Janis Teal Susan Fox
Mark Holdsworth Staff

Administrative/Finance
Goal: Ensure an environment that supports our missions consistent with our values and leadership role as the state’s only academic health center.
Diversity » Increase the diversity of the student body, faculty, and staff to more closely reflect the population of the state
Community Accountability » HSC will assure broader communication and accountability to the community
Statewide Initiative » Increase integration of HSC into the counties of New Mexico for all three HSC mission areas
State Funding » Advance the HSC’s state legislative agenda, leading to funding of the highest priority items – actively participate in the interim process
Capital Projects » Continue implementation, including meeting the following goals:
» UNMH Expansion: Bring on-line and proceed on-budget and on-time with Barbara and Bill Richardson Pavilion (Bring the Barbara and Bill Richardson Pavilion on-line, on-budget, and on-time) – revised language per Pug 11-2-07
» Domenici Center for Health Sciences Education Building: for phase II, proceed with design and construction; for phase III, validate and confirm program and identify funding
» CRTC-II: Begin construction (complete by Jan. 2009)
» MRF (RIB-II): Begin construction (complete by Apr. 2008)
» Neurobiology Research Facility: Complete design development
» Regenerative Medicine Facility: Legislative Request FY09

Development/Fundraising » Recruit HSC AVP for Development

Members: Pug Burge (Chair) Robert Fondino
Dan McKinney Marie St. Claire
Beth Walker Marcia Sletten
Greg Gaillard Staff

Action:
1. Add Val to Executive Strategic Committee
2. Schedule Orientation of Subcommittees
3. Mary Kenney will draft invitation for taskforce groups from Strategic Committee.

Next Meeting: Thursday December 6th, 2007
HSSB Room 316 at 3:00pm – 5:00pm