

MINUTES
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BOARD OF GOVERNORS
HEALTH INITIATIVES COMMITTEE
UNIVERSITY OF SOUTH FLORIDA
TAMPA, FLORIDA
FEBRUARY 11, 2016

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1. Call to Order

Chair Ed Morton convened the meeting at 1:00 p.m. on February 11, 2016, with the following members present and answering roll call: Governor Beard, Governor Valverde, and Governor Robinson (by phone). Also participating in the workshop from the Health Initiatives Advisory Committee were Celeste Philip from the Department of Health, John Mines from the Florida Hospital Association (substituting for Bruce Rueben), Mary Lou Brunell from the Florida Center for Nursing, and Andres Gil from the SUS Vice Presidents for Research. Amy Beaven, Christy England-Siegerdt, and Vikki Shirley were present as staff of the Board of Governors.

Governor Morton opened by stating that the purpose of the workshop was to ask questions and to get ideas on strategies that advance the goals set out in the Health Strategic Plan. He emphasized the importance of the Committee's efforts in looking at gaps in the health workforce and the healthcare sector's large contribution to jobs, economic development, and cutting-edge research in Florida.

2. Review Strategic Plan for Health

Ms. Beaven gave a brief history on the Committee's environmental scan process, noting that the Committee took a System-wide look at Florida's health workforce, healthcare delivery, and health-related research and drew comparisons to national trends. The findings from the environmental scan were used to inform a Health Strategic Plan with two goals and five priorities. The focus of the presentations for the workshop would be two potential grant programs to advance the first goal of meeting the workforce needs of Florida, and one grant program to advance the second goal of increasing the competitiveness of health-related research for the System. Each of the initial strategies were chosen among the strategic plan priorities because they are actionable within the next year and could be potentially supported through grant funding similar to the Board's successful TEAm grant model.

3. Critical Area: Physician Residencies

Ms. Beaven introduced Dean Michael Good from the University of Florida's College of Medicine as the first presenter. Dr. Good noted that he was speaking on behalf of the Council of Florida Medical School Deans as he presented a background on graduate medical education (GME) for Florida and made recommendations for a competitive grant program for GME expansion.

Dean Good's presentation addressed the critical role that GME plays in educating the physician workforce. He noted the fundamental problem of not having enough residency positions in the state to ensure that there will be enough physicians to meet near-term health needs in Florida. Without an expansion of medical residency positions, the state will fall further behind in the training and recruitment of physicians. He estimated that Florida needs to create between 500-800 new first-year positions to keep up with the pace of growth in the medical schools and approximately 3,400 overall residency slots (representing multiple years of the 3-6 year residencies) to bring Florida up to the national average for number of residents per 100,000 population. Based on growth in Florida's population and the unique demographics of the state, just coming up to the national average may be a conservative measure of the need.

Dean Good addressed several issues: the long pipeline of education and training for a physician, medical school growth in recent years, physician retention trends for those educated in Florida, funding trends for GME (sources and shares of the funding), costs of GME to institutional providers and sponsors, and recent initiatives to expand GME in Florida. He noted that Florida currently has 51 sponsors for 161 residency programs, with roughly 54% of the 3,800 current residency positions sponsored by an SUS medical school.

Dean Good noted the attractiveness of a competitive grant program to fund innovative strategies to start-up and/or expand residency programs around the state. The nine medical schools in Florida are already a source of leadership and coordination for GME programs and a dedicated funding source for that work could directly increase GME in the state. He emphasized the need for plans that would maintain the financial stability of the programs after the grant period ends. He suggested a role for the Physician Workforce Advisory Group in establishing where GME data collection and coordination happens in the state. He concluded that Florida has about 3,800 residents currently in training and needs another 3,400 just to come up to the national average based on population.

Governor Valverde calculated the cost for an additional 3,400 positions to be about \$350 million dollars and noted that, even with recent state efforts, Florida is far under budget to achieve this number of positions. He questioned whether savings from Medicaid's transition to managed care could be re-directed from the state's general fund back to the

Agency for Healthcare Administration (AHCA) for GME. However, John Mines with the Florida Hospital Association suggested that the state has not actually realized the projected savings and the actual costs of managed care have been higher than anticipated, leaving no recoverable funds for GME.

Governor Beard noted that an appropriate first goal may be the creation of 500 first year positions to mirror the recent growth in the number of medical school graduates. Dean Good explained that the 500 post-graduate year one (PGY-1) positions would be a start but there would need to be funding for each year of the 3-6 year residency programs, essentially multiplying the number of first year positions by the length of the program to get to the full program capacity figures.

Governor Morton expressed the need to get people's attention on the consequences and economic impact of not having an adequate supply of physicians. He asked about making the economic case for expanding GME and being able to tell the story of the return on investment of expansion and the costs to the state and to quality of care if we don't expand it. There was conversation about comparing patient outcomes in Florida to other states that have more medical residents and physicians on a per population basis. The group discussed Robert Wood Johnson county health rankings and Dartmouth Atlas as data sources, and the need to include socioeconomic status (SES) in the consideration of health outcomes (medical care only contributes about 20% to health outcomes). Celeste Philip noted current funding opportunities through Centers for Medicare & Medicaid Services to gauge how clinical systems impact SES determinants of health.

4. Critical Area: Nurse Faculty Pipeline

Ms. Beaven introduced Dean Dianne Morrison-Beedy from the University of South Florida's College of Nursing to provide a presentation on nursing faculty shortages. Dr. Morrison-Beedy noted that she was presenting on successful innovations based on input from all of the SUS nursing school deans and directors. She also stated that any or all of the strategies could be funded by a grant in the short-term. She described the national shortage of nursing faculty as a big challenge and said any plans for the SUS would need to be bold in decision-making, intentional in its strategies, and genuine in what's best for residents of Florida. She noted an increase in the demand for nurses with advanced education, such as the Bachelor of Science in Nursing (BSN); recent increases in employer vacancies for RNs; preference in hiring nurses with a BSN; high student demand for SUS nursing programs; and better patient outcomes linked to the higher education of nurses. High quality nurses are coming out of the SUS programs.

There was discussion on the number of nurses graduating from SUS programs compared to other sectors of education in Florida. Mary Lou Brunell from the Florida Center for Nursing noted that when one considers both ASN and BSN programs, the

SUS is graduating 10-15% of Florida's registered nursing graduates. She also noted that there has not been a significant increase in the number of pre-licensure BSN nursing graduates recently, whereas there have been large increases of ASN and RN-BSN graduates. Dean Morrison-Beedy noted that expansion in the SUS is constrained by the number of faculty.

Dean Morrison-Beedy demonstrated the exponential impact between one educator, the 12,000 students he/she trains, and the 23 million patients the students in turn care for over a 40-year faculty career. She then described the high number of faculty due to retire soon; the burdensome professional requirements (especially for maintaining the nursing license); and the rigors of balancing research, clinical assessments of students, classroom teaching loads, and clinical practice. She noted that most nurses do not choose to teach because the compensation and workload for nursing faculty is not as appealing as private sector practice. The pipeline of PhD students is also not adequate to meet future faculty vacancies. Dr. Morrison-Beedy then described several short-term innovations that could target recruitment and retention of nursing faculty. She described USF's successful INFORM program and noted that either the entire program or selected components could be implemented by the other SUS nursing programs.

Governor Morton expressed the need for strategic direction in increasing the number of nurses coming out of the SUS BSN programs. He asked whether expanding these programs and securing the resources to do so was seen as a priority by the institutions and by the System. He stressed that the System needs to look at faculty salaries in addition to qualitative elements. Ms. Beaven noted that the focus of the workshop was short-term elements that could be funded with a grant program and that the nursing deans had also offered written recommendations on long-term strategies, including salary issues.

Ms. Brunell suggested that the institutions and Committee consider the mix of faculty required to teach in the BSN programs versus the graduate programs. She noted there is a need to educate PhD students to teach in the graduate programs but she asked how many faculty, and at what level, would be needed to double the number of BSN graduates. The salary differences may not be as large between early-career private practice and teaching if administrators are able to hire younger, junior faculty. She noted the faculty recruitment and retention strategies may be different depending on the end goals and the programs that need to be expanded. Governor Robinson noted tuition waivers for SUS employees as one strategy to support the training of future faculty.

Governor Morton concluded that expanding the nursing program capacity in the SUS is a priority and we need the experts to take on the long-term strategies to fix the problem. Governor Valverde asked why so many students choose private nursing programs and Dr. Morrison-Beedy noted that the SUS programs are limited access programs. Many of

those students would choose the SUS schools if there was infrastructure and resources to expand capacity.

5. Critical Area: Building Upon Federal SBIR/STTR Awards

Ms. Beaven introduced Dr. MJ Soileau, Vice President for Research and Commercialization at the University of Central Florida to present a matching grant program for federal SBIR/STTR awards. He noted that with state funds for a matching grant program the SUS would be able to enhance research, increase collaboration between Florida industry and university research, promote “born here, grow here” companies, provide opportunities to students, and build from a proven model.

Dr. Soileau described the federal SBIR/STTR program and noted that 3% of federal agency budgets are set aside to fund small business innovation grants under this program. He described the current Florida High Tech Corridor program, which matches federal SBIR/STTR awards for businesses partnering with UCF, USF and UF. In some cases, the businesses that apply for the federal awards are members of the universities’ business incubator programs. The SBIR/STTR award is a means for Florida companies to tap into early stage capital. The matching program is a way to encourage small businesses to partner with and pay SUS researchers for their expertise and use of specialized equipment. In turn, a company is more likely to be successful because it does not have to fully fund its own research and development (R&D) at such an early business stage.

Dr. Soileau noted that a Phase I award for Proof of Concept is for 6-12 months and is not a lot of money (up to \$150K), but is a way to get started. The Phase II awards are for a full R&D effort and provide up to \$1M which is attractive, especially if matched. Phase III is the commercialization stage and has no federal funds. Dr. Soileau noted that through the Florida High Tech Corridor Program, UCF has seen an increase in faculty and student engagement with private companies and significant multipliers of economic impact from the original investment. He noted that other states have matching programs and Florida currently gets about half of what other successful states with matching programs are getting from the NIH SBIR/STTR program.

He then discussed ideas for pairing research expertise across the System using available data and data mining software. For health-related research there could be benefit to connecting medical faculty with other researchers in the university(s) through the posting/advertisement for a needed expertise or specific technology challenge.

Governor Morton asked if the multiplier effect from matching the SBIR/STTR awards is well understood by the local economic development groups around the state. He also asked if more SUS institutions should be going after SBIR/STTR funds. Dr. Soileau confirmed that the economic development groups have made some efforts to bring in

this federal money and our universities currently work with those groups to do more. Dr. Good noted that the multiplier effect of these funds hasn't always been well understood, but for good research teams there are multiples of \$4-11 for every dollar invested. Dr. Gil suggested a growing awareness and growing need to partner with industry in light of the shrinking federal budget for research. He said FIU has increased its efforts through the incubator program to go after SBIR/STTR awards and to increase technology transfer. He also noted that the program is a good way to maximize a university's core facilities, by allowing companies to pay for use of the specialized equipment.

Governor Morton and Governor Valverde thought expanding the Florida High Tech Corridor model to more SUS schools through a state matching grant program was a good strategy.

6. Closing Remarks and Adjournment

Governor Beard suggested the Committee set goals for each of the topics presented in the workshop. Chair Morton agreed and adjourned the meeting at 4:00 p.m.

Ed Morton, Chair

Amy Beaven,
Director, STEM and Health Initiatives