AD HOC COMMITTEE ON STRATEGIC RESEARCH INITIATIVES
MEETING AGENDA

Friday, January 11, 2018
Conference Call - 10:00 a.m.
Call-in Number: (888) 207-9997; passcode: FAUOWLS
Contact Number: 561-297-3450

I. Roll Call

II. Approval of the November 7, 2018 Ad Hoc Committee on Strategic Research Initiatives Minutes

III. Information Item: FAU-Hospital Partnerships in Academic Medicine

IV. Adjournment
Chair Robert Stilley called the Ad Hoc Committee on Strategic Research Initiatives to order. Roll was requested to confirm quorum. Those in attendance were:

Mr. Abdol Moabery, Dr. Michael Dennis, Dr. Malcolm Dorman, and Mr. Brad Levine.

The following university officials participated: Dr. Philip Boiselle, Dean, College of Medicine; Dr. Daniel Flynn, VP for Research; Mr. David Kian, VP for Legal Affairs and General Counsel; and Ms. Gina Niemi, Director of Administration and Operations, Division of Research

Discussion of Committee Objectives
Trustee Stilley opened the meeting by summarizing that the purpose of the Committee is to help the university grow its research activity by exploring ways to associate with area hospitals on clinical research. Trustee Stilley asked Dean Phillip Boiselle to share some general background information on the University’s current hospital relationships.

Dean Boiselle advised the Committee that the current hospital affiliations were education-based only, not research-based, and focus on FAU’s Graduate Medical Education (GME) Consortium. This Consortium is comprised of five hospitals in Palm Beach County. The Consortium relationship is contractual in nature and involves both undergraduate medical education (UME) and GME programs connected to training and residency. FAU also has three other affiliation agreements with hospitals for UME educational programs only. If the College of Medicine should ever want to work with other hospitals outside of the Consortium as it relates to GME, it would require a unanimous vote of approval from the members of the Consortium. This education-based relationship works
well as there is a firm commitment to GME by all of the Consortium members, but the relationship is also fluid and has had many changes as FAU’s medical education program has grown and matured. The Consortium agreement has been in place for some time and is up for renewal in approximately six months.

Dr. Flynn stated that since many research grants favor working with not-for-profit hospitals, partnering with neighboring not-for-profits could be advantageous to improve research at FAU. The Division of Research recently worked with an Association of American Medical Colleges (AAMC) consultant to study and measure the strengths of hospitals in our area and found a few hospitals that stood out as potentially attractive partners.

Dr. Boiselle said that no hospital within the existing GME Consortium has reached out to FAU about research at this time as they are primarily focused on patient care and do not focus on research. He added that while there may be some GME Consortium hospitals that conduct industry-sponsored research peripherally or have an interest in device development, these small groups or select individuals interested in research are not sufficient to help propel FAU forward.

Dr. Boiselle informed the Committee that the College of Medicine recently completed a strategic plan (which he will share with the group electronically after the meeting) that addresses various future program goals. Knowing what these goals and steps are may help the Committee in their decision-making efforts.

Trustee Stilley indicated that Dr. Flynn has a strong understanding of building relationships between research programs and hospitals and suggested that he provide a brief summary of his professional background and experience in this connection. Dr. Flynn proceeded to share his involvement in a former role when he helped a cancer center build a collaborative relationship with a local hospital.

The trustees discussed long-term goals for the College of Medicine and Division of Research. Dr. Flynn expressed his desire to move FAU into a Tier 1 Research Institution. His challenges are that FAU has a small base of research faculty. Therefore, to reach this goal he will need to lean heavily on grants affiliated with the College of Medicine, Classified Research, and HBOI. The College of Medicine can contribute 30-40% toward annual research expenditures but will need to partner with a
hospital to make this a reality. Grant submissions can be routed through FAU and hospitals will be eager to off-load the administrative component to us. We would need about 100 more researchers and may need to consider joint hiring efforts with hospitals and clinics. This will increase research activity.

Dr. Flynn and Dr. Boiselle agreed that branding should not be an issue as FAU has created a solid brand of its own with strong faculty like Dr. Jim Galvin, with the Primary Care Clinic, and with our resident practice at Boca Raton Regional Hospital. The group agreed that FAU should be mindful regarding branding when working with a hospital. We will need to be respectful of a hospital’s existing brand and recognize that the university and the hospital can raise capital separately.

At Trustee Stilley’s request, Dr. Flynn further described what an ideal partner hospital would look like. This includes having an agreement to hire jointly with FAU and route grants and/or research projects through the Division of Research. It includes a long-term (~5year) commitment to build a physical facility structure together and, in general, learn to work together. He stated that this would be a culture shift as community based hospitals will need to invest, change and develop a new infrastructure. If their research is not compliant, it would adversely impact FAU’s reputation. FAU will need to invest in people and infrastructure, but doing so can have a profoundly positive impact on the area. A research center can provide options for the hospitals and help them become a dominant force beyond patient dollars.

Dr. Flynn advised that they have started a dialogue with some hospital prospects. He noted that FAU may wish to partner with multiple hospitals in different markets. It may also be easier to partner with independent hospitals.

Trustee Stilley stated that we need to refine the vision before we move forward and asked Drs. Flynn and Boiselle to outline a plan to include targets and actions. It will be important to create a narrative. The BOT is in favor but needs the planned steps laid out. Drs. Flynn and Boiselle will share strengths and weaknesses and how they would correspond to the FAU assets we currently have or will have.

The meeting was adjourned.
AD HOC COMMITTEE ON STRATEGIC RESEARCH INITIATIVES
Friday, January 11, 2019

SUBJECT: FAU-HOSPITAL PARTNERSHIPS IN ACADEMIC MEDICINE

PROPOSED COMMITTEE ACTION

Information only.

BACKGROUND INFORMATION

Vice President for Research Dr. Daniel Flynn will present the Committee with goals and principles of prospective partnership agreements between FAU and local hospitals to conduct clinical research activity. Dr. Flynn will also discuss the negotiation process for developing such partnerships. He will request the Committee’s feedback and its endorsement of his proposed process.

IMPLEMENTATION PLAN/DATE

Not Applicable

FISCAL IMPLICATIONS

Not Applicable

Supporting Documentation: FAU-Hospital Partnership in Academic Medicine

Presented by: Dr. Daniel Flynn, Vice President for Research  
Phone: 561-297-0268
FAU-Hospital Partnership in Academic Medicine

Goals:

A University partnership with a hospital would be focused on research. It may also include recruiting pipeline talent in non-MD areas such as business (accounting), health sciences (exercise physiology, social work) and nursing. Thus, the collaboration would primarily involve the College of Medicine, but could also involve collaborations with the Colleges of Nursing, Science, Engineering and Business.

Areas of collaboration would require Hospital financial support for FAU medical research programs and pipeline training programs, which would include some baseline support that can grow if:

a. We develop joint research programs together – examples include clinical trials, clinical & translational research projects (NIH grants), and clinical studies in areas such as oncology, cardiovascular, data science, health administration research and other areas of mutual interest
b. We recruit faculty jointly
c. The overall clinical enterprise grows as the two institutions grow.

Facilitating the collaboration would require:

a. A joint organizational structure - a “Liaison board” comprised of University and Hospital leadership, which would address collaborative research and educational issues and provide guidance on how FAU and the hospital leadership would work together.
b. Strategic planning - a process to develop a strategic plan for research and education that has agreed upon goals and metrics.

Process for negotiating a partnership:

FAU has defined its service area, and analyzed the demographics and patient populations in this service area. FAU has also analyzed data that shows fundamental metrics of strength for regional hospitals. This analysis highlights hospitals that might be suitable partners for FAU.

FAU believes that a partnership in academic medicine is complimentary to its mission in GME residency training and could involve non-exclusive partnerships with more than one hospital in different geographic regions. Thus, the partnership would be non-exclusive with regard to hospital partners, but exclusive to a partner within a geographic region that defines the partners market.

Process:

FAU has defined potential hospital partners in our service region. Given these guiding principals, the process for negotiating a partnership would proceed as follows:

a. FAU leadership meet, refine and agree on these goals and guiding principals.
b. FAU leadership define a short list of preferred hospital partners.
c. FAU leadership meet with the leadership team of preferred hospital partners in academic medicine and determine our mutual interest in partnering.
d. FAU leadership develops an NDA that enables a discussion on partnering.
d. FAU leadership creates an MOU that outlines specific areas of partnership.
d. FAU develops an Affiliation Agreement that is negotiated between the President of FAU and the CEO of the hospital partner. This Affiliation Agreement formalizes the broad areas of collaboration and enables the formation of a Liaison committee and Articulation Agreements.
e. FAU leadership develop a joint Liaison Committee with the Hospital Partner for purpose of strategic and joint planning
f. FAU Leadership develop an Articulation Agreement to define specific areas of partnering.