President Eric W. Kaler: Response to the AHC External Review Final Report  
December 17, 2012

Dear Colleagues,

Earlier this year, I requested an external review to explore the direction and leadership of the health sciences at the University of Minnesota. Finalizing the report and follow-up actions has been slowed in large part due to our negotiations with Fairview Health Services to create a new integrated structure, which will be highly significant to the future of the Medical School and our clinical enterprise. While the conversation with Fairview is not complete, we can responsibly make some decisions today.

The external review is online and I encourage you to read it in its entirety. However, the bottom line is that the review does not provide a road map, but rather a calibration. Much energy has been spent by many on organizational and operational questions that have little to do with advancing excellence in research and education. The review reminds us that there are as many leadership and organizational models in the United States as there are academic health centers. The path we choose must be guided by what is right for this University and this moment.

The report emphasizes that we have an outstanding platform from which to return this Medical School and our health sciences enterprise to the highest tier nationally, and that we have much of which to be proud. Neither of these facts is well appreciated. I have said many times that strength in our health sciences research, teaching, clinical and outreach programs is essential to the strength of the University itself. Few universities in the world can match the breadth of what we do to advance science and human and animal well-being, and the diverse schools in the academic health center have enormous opportunities.

Our research portfolio is strong. With the help of state support, the University will soon be home to one of the nation’s most state-of-the-art basic and translational research complexes. We have demonstrated a research synergy with Mayo Clinic that is advancing scientific progress in critical areas of medicine. Both the Biomedical Discovery District and our Mayo partnership are the envy of our peers and competitors. We are the national model of interdisciplinary education. Just this fall, the U.S. Department of Health and Human Services chose the University of Minnesota Academic Health Center to lead a new coordinating center to provide national leadership in the field of interprofessional education and collaborative practice among health professionals. The University of Minnesota will be part of the new educational reality for health professionals—truly shaping the future of healthcare professionals across the nation. There are many, many more examples of excellence in what we do.

**Leadership**  
To attract top talent and define the University’s role in an evolving healthcare marketplace, I concur with the reviewers’ conclusion that we need a strong dean of the Medical School. I believe our model, which combines the responsibilities of the dean of the Medical School and vice president of health sciences, is the best to achieve these goals.
In this time of transitions, Vice President and Dean Aaron Friedman has brought steadfast leadership to the Academic Health Center and it is important to maintain this continuity as we carefully negotiate a new clinical agreement with Fairview Health Services.

In this leadership model, the vice president for health sciences will serve as a leader among peers, focusing on coordinating the clinical interface across disciplines, and interprofessional education and interdisciplinary research. The role represents the University’s external face to the healthcare marketplace. The colleges and schools that make up the health sciences will continue to report to the provost for academic issues, ensuring the budget compact process for colleges is consistent and transparent across the University.

Together with the deans of the other schools that make up the health sciences, we are well poised to leverage our research portfolio and advance critical breakthroughs, model interdisciplinary education and care, and deliver on the healthcare expectations of our state.

**Strategic Planning for the Medical School**
The review clearly articulates the need for increased strategic planning at the Medical School. I have asked Dean Friedman to launch a faculty-led strategic planning process for the Medical School to help provide the “north star” that our faculty seeks.

We know we cannot be all things. It is critical that we define our differentiating strengths and articulate how we intend to deliver on the promise of high-quality research, education and care for those who choose the University of Minnesota— as students, educators, scientists, or patients. We need a vision and plan that brings together our faculty and staff and sets a foundation for growth and investment. I have requested this plan be completed and shared with the broader community by June 30, 2013.

**Curricular Integration**
I have asked the deans of CBS, CFANS, and CSE to join with the AHC deans and define the spaces of further health integration, especially in curriculum and in research. I expect this conversation also to provide a time for all of the AHC schools to evaluate their future paths. It is clear to me that there are opportunities for continued integration that will build upon our considerable strengths. I have asked for their views on further integration by March 1, 2013.

**Operational Integration and Excellence**
There has been significant analysis and study of the structure of the Academic Health Center. The structure we have today is broad based and utilizes considerable resources, but it has met the needs of the units well. There are, however, opportunities to improve alignment, and beginning in early 2013, Research Animal Resources will be integrated into the University’s Office of the Vice President for Research. This move ensures authority and responsibility are aligned.

The University, through its operational excellence initiative, is working to achieve greater administrative efficiency. Among our goals are to reduce costs and improve processes and transparency. To that end, we are examining units across the institution and the Academic Health Center and its administrative functions will continue to be included in that work. We must leverage skills and resources systemwide to best achieve our academic and research needs. Any decision to make changes must be informed by the
structure of our revised partnership and operating model with Fairview and the Medical School’s strategic planning process.

**Investing in our Strengths**

These actions are steps towards a future of excellence for the Academic Health Center and for the Medical School. Faculty, staff, and leaders have been well surveyed and much input has been given to this process. I have heard you, and it is clear that no path will satisfy all. But now is the time to focus on the future, to plan strategically, and to align our resources to achieve greater excellence. Thank you for your commitment to this great university.

Sincerely,
Eric W. Kaler,
President