

**Board of Regents, Uniformed Services University of the Health Sciences  
Open Session Meeting Minutes**

**Meeting No. 219  
February 5, 2024**

The Board of Regents (BOR), Uniformed Services University of the Health Sciences (USU) met in an Open Session Meeting on Monday, February 5, 2024, hosted via Google Meet.

The meeting date and agenda items were published in the Federal Register, and each Regent was duly notified prior to the meeting. The Designated Federal Officer (DFO), Ms. Annette Askins-Roberts and the Chair, Dr. Nancy Dickey, were both present during the entire meeting. The meeting was called to order by the DFO at 2:30 p.m.

Members, staff, and briefers listed below were in attendance:

**Board Members**

Nancy Dickey M.D., Chair  
VADM (Ret.) Raquel Bono, M.D., Member  
Julio Frenk, M.D., Member  
HON Kenneth W. Kizer, M.D., M.P.H., Member  
Gen (Ret.) Richard Myers, Member  
HON James Peake, M.D., Member  
MG (Ret.) Patrick Sargent, M.A., Member  
Antonia Villarruel, Ph.D., R.N., Member  
HON Jonathan Woodson, M.D., President, USU  
HON Lester Martínez-López, M.D, M.P.H., Assistant Secretary of Defense for Health Affairs, Member  
RDML Richard Schobitz, Ph.D. representing VADM Vivek Murthy, M.D., M.B.A., U.S. Surgeon General, Member  
Telita Crosland, M.D., Director, DHA  
BG Thad Collard representing LTG Mary Izaguirre, D.O., Member  
RDML Darin Via, M.D., Member  
Maj Gen John DeGoes, M.D., representing Lt. Gen. Robert I. Miller, M.D., Member

**Staff Members**

Annette Askins-Roberts, Designated Federal Officer, BOR, USU  
Clarice Waters, Project Manager, BOR Staff Support, USU  
Angela Bee, Management Analyst, BOR Staff Support, USU  
Tanner Dean, Management Analyst, BOR Staff Support, USU

**Briefers**

HON Jonathan Woodson, M.D., President, USU  
HON Lester Martínez-López, M.D, M.P.H., Assistant Secretary of Defense (HA), Member  
Eric Elster, M.D., Dean, USU School of Medicine  
Catherine Witkop, M.D., Associate Dean, USU School of Medicine

Richard Bond, Special Assistant to the President for Strategic Infrastructure

### **MEETING CALL TO ORDER/OPENING COMMENTS**

Ms. Askins-Roberts introduced herself as the DFO for the Board of Regents and called the meeting to order. She provided administrative remarks and thanked USU staff, briefers, the contract support, and attendees for their participation. Dr. Dickey welcomed the Regents and discussed the meeting agenda. Ms. Askins-Roberts reminded the Regents to abstain from providing comments on matters for which they may have a conflict of interest. She discussed the logistics for the meeting and thanked the Regents, attendees, and support staff. Dr. Dickey asked for a moment of silence to honor those who serve our country. She proceeded with introductions of Regents, Staff, Briefers, and members of the public in the room, then introduction of those attending virtually.

### **PRESIDENT'S REPORT**

HON Woodson began by thanking the Regents for their participation and commented on their expertise. He thanked the members of the public for their interests in USU. HON Woodson spoke of the three searches for important leadership positions, Provost/Chief Academic Officer, Dean of Allied Health Sciences, and Vice President of Financial Operations:

- Chief Academic Officer is needed as USU started as a small medical school and has expanded to include three more schools and 20 research centers, this position will ensure academic integrity and program progress. He said the search committee, chaired by Dr. Louis Pangaro from the School of Medicine (SoM), will evaluate the 33 candidates. HON Woodson said they are looking to have the CAO selected by mid-spring with on-boarding in summer/early-fall.
- Dean of the College of Allied Health Sciences (CAHS) to replace retiring Dr. Lula Pelayo. Dr. Pelayo developed the program, and it is the most rapidly growing school at USU with 27 programs with potential for 35 more. There is a need for a dean to continue the academic integrity and development of the school. HON Woodson added that there are 29 applicants so far with Admiral Bill Roberts as chair of the search committee.
- Vice President of Financial Operations to replace, Mr. Walter Tinling, VP for Finance and Administration, who will retire after a few decades with USU. The candidate will need to be a strategic leader with knowledge of the DHA and HA to ensure USU is aligned with the MHS. There are 17 candidates. The search committee is beginning its deliberation phase.

HON Woodson discussed the 2024-2028 USU Strategic planning process and how USU is using the programs the DoD and MHS has, such as the National Security Strategy, the National Defense Strategy, the National Military Strategy, and the for the first time in a decade, the Military Health Systems Strategy. He added the MHS Strategy was issued in January 2024 by HON Martínez-López. HON Woodson stated that these strategies are supported by the MHS Manpower Study which has a line of effort regarding digital transformation. The MHS Strategy identifies many important issues which USU can address—medically ready force and ready

medical force—by producing a portion of the MHS workforce. HON Woodson spoke about one guiding principal in this strategy, helping people achieve greatness. He said USU's programs and curricula will support this with lifecycle support for health professions in education, training, and skills sustainment for uniformed and civilian personnel. He stressed the importance of collaboration with the Services, DHA, and HA to empower the healthcare workforce for delivering and modernizing military healthcare which includes a digital health strategy. He acknowledged LTG Crosland's work regarding the digitally enabled era and expanding biodefense as part of the National Defense Strategy, in this volatile and complex world. HON Woodson said that in early April, the USU strategic planning process will work with HA to concentrate lines of effort for MHS. He would like input from the Regents, HA, and DHA for this.

VADM (Ret.) Bono asked for information regarding artificial intelligence (AI) as part of the digital strategy. HON Woodson noted that Dr. Elster is working on an effort to coordinate policies to incorporate AI in the educational process. HON Woodson spoke of the rapidly evolving technology of AI and the need be proactive and set guardrails to prevent untoward events and poor outcomes. He added it enables healthcare providers to do more, but it needs to be studied in terms of healthcare delivery.

LTG Crosland stressed the importance of DHA and the MHS incorporating AI while being conscious of the risks. She said there will need to be regulatory guardrails. LTG Crosland stated that DHA is focusing on what is low risk and can be done today, such as billing and automated clinical notes. She noted that AI has the potential to address health disparities, but it needs to be proactive because AI may amplify disparities and inequality, e.g. gender terminology in healthcare--they/them default and gender at birth does not feed into the clinical decision-making process. LTG Crosland stated AI can increase capacity and expand accessibility but emphasized the need for guardrails and to consider the ethics.

HON Woodson thanked LTG Crosland for her comments and leadership regarding AI. He reiterated that AI could lead to greater capacity and increased accessibility. HON Woodson asked the Surgeon Generals and representatives how USU can help with their workforce needs. RDML Via spoke about the many programs at USU, especially the College of Allied Health Sciences' support of the Navy's Independent Duty Corpsman program. He discussed the Duty Corpsman program that is part of the College of Allied Health Sciences, the Graduate School of Nursing, and programs and their requirements. RDML Via noted that the U.S. Navy is getting closer to a number of MH providers needed—have right capacity of licensed providers and can help provide USU with information. Dr. Villarruel agreed with RDML Via. She stressed the importance of workforce analysis to see the need and the capacity to see what would make the most sense in terms of preparation and use of resources.

Gen DeGoes thanked the USU and Dean Pelayo regarding all the training. He also thanked LTG Crosland for her leadership of the digital transformation which helps readiness efficiencies and effectiveness while prioritizing health care and reduction of clinician burnout. Gen DeGoes said AI would be good for quality and safety, allowing more time to focus on readiness without completely reducing time in the clinic.

HON Peake asked how the College of Allied Health Sciences can better prepare the enlisted workforce help meet the needs of MHS and the Services. HON Woodson gave an example of technology and education; students can complete a gross anatomy course in about a third of the time. He stressed the importance of having simulation platforms to increase efficiency for training, sustaining, and retraining. MG (Ret.) Sargent spoke about the ability to ensure that training is integrated with allied partners, at respective institutions or combat commands, because it will always be a coalition fight. HON Woodson said USU is aware of increasing demand signals from our allies to support the development of their military medical training and is looking forward to getting the authorities to support the global health engagement initiative. He went on to say that DoD policies are looking at how to shape a better effort of global health engagement. USU is having a role in supporting this effort. He stated, that USU may not be on point for the broader set of programs, but asked to upgrade their authorities so that they can enhance foreign students in a more direct and meaningful way, such as West Point, Annapolis or any of the other graduate defense universities. HON Woodson stated that they are looking forward to getting these authorities, as they would like to participate in the full range of the support of the global health engagement initiatives. HON Martínez-López reiterated that many allies are counting on the U.S. to deliver health care and to take the lead; but the allies also have good ideas, which we can leverage, and in terms of interoperability there is reciprocal training. He noted there are gaps but the best solutions will be achieved by working together.

Dr. Dickey thanked HON Woodson for his brief and the discussion and committed to follow up in future BOR meetings.

### **HEALTH AFFAIRS UPDATE**

HON Martínez-López thanked the Board for giving him the opportunity to speak about the Military Health System. He introduced one critical document, the MHS Strategy Fiscal Years 2024-2029. He said they will lead the future of the MHS. He spoke about the three interconnected and necessary pillars of the MHS, Medically Ready Force, Military Medical Force that is ready, and this cannot be done as an enterprise if we don't deliver everyday Health Care. He stated that we must operate like a healthcare system—all three pillars are important.

HON Martínez-López spoke about what needs to be done in the next five years. First, is to take care of the military and civilian personnel—manage them in a manner that provides an opportunity for them to flourish so they may achieve greatness. Second, and the most important thing we need to do, is stabilize the MHS. He said for the past 10 to 15 years there has been a decrease in the manpower, a decrease in the number of patients being seen in the direct healthcare system leading to a readiness issue. HON Martínez-López noted the driver of what needs to be done over the next five years is readiness. The demographics of patients have changed and many with complex care needs were sent to the network (purchased care), which affects clinical readiness. He said the MHS needs to figure out how to attract those patients back into direct care. This helps two-fold—helps the patients get the care and helps ensure clinical readiness. The third thing is to modernize the MHS including digital health care. He spoke about focusing on two areas of research—trauma (along with blood) and behavioral health. He

notes that these are two big issues going into a conflict. If the MHS continues delivering healthcare the current way, it will come up short because there are gaps. We need to invest and change the approach to these issues, to change the way we are delivering healthcare to close the gaps.

HON Martínez-López stated the whole enterprise needs to become a requirement-based enterprise. He spoke about his experience in the Army and how requirements focused on war assets and Roles 1-3 and those requirements which were not formalized, were shed. He said in operational medicine there are four levels of requirements or “Roles”: embedded medic or corpsman, battalion or aid station, Army combat support hospital, and MTFs in the United States receiving service members to deliver the care and the rehabilitation. He said they are codifying Role 4 requirements to be part of the mix like Roles 1-3. He spoke about billets too; he indicated that it is difficult to attract civilian personnel, so MHS will need to staff with military medical personnel. HON Martínez-López noted they are in the process of identifying all the requirements, including training, as part of the strategy while minimizing risk for the Department of Defense. He said the MHS is addressing the manpower issue, and it must be competitive in order to address the medical personnel shortages in military and civilian healthcare. HON Martínez-López stated the MHS is moving in the right direction with the support of the Services but there is more complex research and work to be done. Dr. Dickey thanked HON Martínez-López for his update.

Dr. Frenk asked about how the research is conducted given the complexities of delivering healthcare in combat situations and in non-combat situations. HON Martínez-López said that he relies on USU to help with research, but of course the portfolio is much larger than trauma and behavioral health he mentioned earlier. He said another example is infectious diseases because next time, malaria and dengue can be a threat, so there must be programs to address these. He stated there is interconnectivity among transport logistics, supplies, etc. to best care for patients. HON Martínez-López stated that they are looking at all those aspects in the future and how we can provide value to a patient not only through the direct Healthcare System but in the network (purchased care) as well.

Dr. Dickey stated part of the material the Regents received was the MHS Strategy plan and she encouraged them to spend time to review and identify areas of concern you may want to address. She thanked HON Martínez-López.

### **UPDATE FROM THE LIAISON COMMITTEE OF MEDICAL EDUCATION SITE SURVEY VISIT**

Dr. Elster spoke about the two-year journey of accreditation and noted the LCME was on the top of the list of critical success factors when he took over as Dean of the School of Medicine (SoM). He said the LCME process was important in identifying blind spots and for resident development. Dr. Elster reviewed the prior briefings to the Board—the process, graduation questionnaire results— noted that today Dr. Witkop would cover the initial findings. He added there will be a briefing after summer on the final recommendation. Dr. Witkop discussed the LCME accreditation steps, including those completed. She stated there are 93 elements in 12

standards with each element is evaluated by the survey team during a visit. She stressed any that are “satisfactory with a need for monitoring” or “unsatisfactory” constitute a “finding.” Dr. Witkop stated that the survey team only identified six findings, less than half of the number of findings for medical schools on average. She said they are very optimistic about the accreditation visit and will brief the Board after the final report. HON Woodson praised the SoM’s efforts and noted one comment about tax dollars well spent at the SoM.

Dr. Frenk said that having gone through similar exercises at his university, he congratulated USU SoM on their efforts. He asked if there were any insights Dr. Elster and Dr. Witkop gained from going through this process. Dr. Witkop stated she was not part of the process in 2015 but since she has been a part of it, she has noticed the LCME really focuses on continuous quality improvement (CQI) with ongoing review of the 93 elements and data collection. She said in the past with accreditation every eight years, it was people pulling things together each time rather than continuously monitoring. From the medical education office standpoint, we will continue to do annual reviews in many areas, look at data and make sure that everyone is aware of the processes. Dr. Witkop said the survey team appreciated that the medical education office had done a self-study and put CQI in place. Dr. Elster said it helps to identify blind spots. He gave the example of the disconnect between what the office of student affairs was doing and what students were hearing. He stated that through this process they found they have a lot of work to do on faculty development and resident development. He said this is part of the CQI and the SoM will move to almost a constant LCME office because it is important to collect data and continually improve.

MG (Ret.) Sargent asked about systemic issues that are present and might carry over from year to year that might involve resource constraints that could prohibit you from achieving your ultimate goal. Dr. Elster said as part of the process, we recognize some of the challenges ahead of time, one being the preparation of the resident. He noted they are working on the SoM’s step one scores and a couple of very focused efforts to improve those scores to develop educational decision support schools. They have already seen an increase in the step one scores for example, great improvement in student diversity and improvement in faculty diversity, though they are still working to improve, they have made great strides. Dr. Elster stated that by using their CQI process, they have moved from red to amber with respect to faculty diversity and have made progress in student travel using the DTS the Defense Travel System. He added that they helped the students learn how to use it, the vagaries of that system and the uniqueness of their rotations. He stated that this is an example of recognizing challenges and addressing those challenges proactively.

HON Woodson stated that the report did not address how the SoM represents certain data. He spoke about financial data specifically and how they make it easily extracted and understandable to external agencies and the accreditation body. He said it is necessary to represent their financial data or research data in different ways so that accreditation bodies can easily understand it. He added that this was not in the report but something they determined during their self-study. Dr. Elster agreed and said they spent two sessions on finances, for example, what is peer reviewed funding, and how they count NIH funding versus DOD peer

review funding. He is working with Mark Kortepeter, Vice President for Research at USU, and finance to more accurately present the richness of the activities that are happening at USU. Dr. Witkop stated the SoM faculty is amazing and the report is a testament to the work that our faculty put in preparation. She said one thing that came up during internal preparation but not part of the report was faculty—faculty diversity and even having enough applicants for faculty positions. MG (Ret.) Sargent said the SoM work was in line with the tenants of an HRO and praised them for a job well done.

Dr. Dickey thanked Drs. Elster and Witkop on behalf of the board on their remarkable job—not only the continuous work, but the exceptional performance and the Board looks forward to the formal report.

Following a short break, the meeting resumed at 4:00 p.m.

### **USU FACILITIES MASTER PLAN**

HON Woodson made opening remarks prior to Mr. Richard Bond's briefing USU Facilities Master Plan. He stated that this was one of the initiatives when he became President of USU, to understand what the current state was and what would be needed in the future for facilities. He emphasized that the physical plant of any university is important to ensure the students have a proper learning environment.

Mr. Bond thanked the Board for requesting a briefing about infrastructure. He stated that it was critical, but like IT, no one notices until it breaks. He went over the history of USU facilities, which began 51 years ago when predecessors to the BOR chartered a site exploration for the USU campus. After exploring 10 sites, on October 1973 it was determined that USU would be built on the 8<sup>th</sup> fairway of the Bethesda Navy Medical Center Golf Course. The groundbreaking was in 1975 and the first building, where the President's office is currently located, was built in 1977 and served as the school until buildings B, C, and D were completed in 1979. The design of the buildings was cutting edge for the time, but this was when computers used punch cards, medical research was mostly solitary, and education was one-way and in large lecture halls.

Mr. Bond provided context to the Facilities Master Plan by discussing the current situation in terms of building quality and condition, the master plan, infrastructure planning, and how it aligns with the USU Strategic Plan. He said there are 15 systems from foundations to roofs and they do not look at each one every year. Mr. Bond said the average Building Condition Index of 68 for USU does not comport well with the MHS average of 74. He stated that over the years there have been budget cuts. He added that inflation is part of the cost increase for infrastructure and the money put into the AFFRI building may not be captured in the latest report. Mr. Bond stressed there is nothing catastrophic, just slow decline in the condition and capabilities of the buildings. He discussed the short-term objectives that came out of the Infrastructure Strategic Plan, including resource plan analysis, space planning/process review, facility oversight and management, long range master plan development, and work schedule guidance. He discussed investments and space management, emphasizing the need for measurement, and maintaining the

quality and standards to keep up with peer institutions. Mr. Bond stated one thing they are considering is how improving technology can decrease demand on buildings.

HON Woodson stated this is a comprehensive process and that one of the issues is that operations can be moved to low cost leased space, which will open space for increased education opportunities on campus. He added that the Infrastructure Master Plan feeds into the Strategic Planning which they will conduct in April 2024. Dr. Frenk agrees that the way space is configured often reflects the culture and the way an organization understands its work. He asked if the Facilities Master Plan includes this, especially for educational space. Since the 2010's there have been insights into better pedagogical advances, technological innovations, increasing AI in education and each of those has an impact on space. He stated the tradition buildings do not fit with the changes in pedagogy—there is a need for flexible learning spaces rather than classrooms, with high level of technology and flexible to allow for different types of pedagogical approaches. HON Woodson said that moving away from lecture halls to more modern learning spaces is part of the plan. For example, Sim Center in Silver Spring demonstrates a different way that space is used. He said they looked at how workforce was redistributed after COVID and how they could analyze and revise their infrastructure plans to reduce costs and modernize space. Mr. Bond said during a meeting last week the most contentious topics were (1) workforce management and offices, (2) classroom space and having small group space available, and (3) laboratory space. He said anything put in the master plan still needs to be monitored for any changes.

HON Peake asked about the shift from MILCON to holistic approach and what it means. Mr. Bond said when he arrived at USU five years ago, MILCON solution would have added 500,000 square feet, but that has changed in last couple years and there is a need to work holistically within the space they have while still building a case for MILCON. He noted MILCON is not off the table but just on hold. HON Peake spoke about issues he ran into leasing buildings when he was with the VA. He asked if USU needs any special authority to lease. Mr. Samuel Smith said USU adheres to GSA requirements for standard leasing, but in terms of research and cooperative agreement awards, there are different standards—an intricate series of rules, laws, and regulations that apply depending upon the context. Some projects don't have standard leasing plans; there are different rules/laws/regulation depending on the requirements. Dr. Elster stated that 160,000 square feet with 34,000 square feet of lab space at the Rockledge Facility (referred to as "USU North") are all connected to the USU network and it is used for research. The Regents further discussed leasing and HON Woodson said they will go back and look at leasing with HA and other authorities.

HON Peake asked how transportation fits into the facilities plan. Mr. Bond state that transportation and how it has changed with more people working virtually and using public transportation, is a step outside the master plan but access to transportation is something they need to consider. Dr. Dickey asked if shuttles are provided to their other locations that are a distance away from campus, like the Sim Center. Ms. Arta Mahboubi, Assistant Vice President for Administration at USU, said there are shuttles for special situations but not regular shuttles. There is parking available at the Sim Center. Dr. Elster stated there was a shuttle to the



Rockledge Facility, but it was underutilized, thus not cost effective. He noted parking in not much of an issue unless someone needs to travel there mid-day.

VADM (Ret.) Bono asked about the buildings in terms of what the opportunities look like with DHA's assistance looking at USU infrastructure. Mr. Bond said that the space planning they are looking at are small moves they can make within the space they have, absent of MILCON. He gave an example out of the study from a decade ago, which resulted in the building of Rice Hall. Ms. Mahboubi stated this was smaller funding to help with curriculum changes—divisible 7000 square feet of space. HON Woodson stated they are not giving up on MILCON but are moving forward with a wholistic approach with smaller solutions—modernized learning environment, leased space, and redistribution of divisions that may not need to be on the main campus. He said in regard to DHA, they are doing due diligence with the Infrastructure Master Plans so they can represent USU's needs and requirements with data to the DHA and HA because they have a lot to consider, including the MTFs (MHS infrastructure). HON Peake asked how much maintenance money USU needs to keep the buildings in the red from being having a bad outcome. HON Woodson said this is part of the analysis process and to prioritize what needs to be funded to prevent crises. Mr. Bond stated this is the “sources and uses”—what they are getting today and how they are spending it, and what they need to prevent buildings from getting worse or improving those in the red to the yellow and be on par with the rest of the MHS infrastructure. He said having the data helps us make decisions today, for example, Ms. Mahboubi is having the roof fixed for Building C. Ms. Mahboubi added the building that moved from green to yellow was due to the roof and the HVAC. She stated that even with unlimited resources, there is still a limit to how much can be done at a given time. Dr. Dickey thanked Mr. Bond for briefing the Regents and indicated that the Board looks forward to updates.

### **CLOSING COMMENTS**

Dr. Dickey thanked the Regents, briefers, and all attendees for their support of the BOR. She reminded the Regents the next BOR meeting is May 17, 2024, at USU in Bethesda, Maryland with USUHS Commencement on May 18, 2024.

### **ADJOURNMENT**

Ms. Askins-Roberts adjourned the meeting at 4:48 p.m.

### **CERTIFIED BY:**



May 9, 2024

Nancy W. Dickey, M.D.  
Chair, Board of Regents

Date