



# **OHSU Board of Directors Meeting**

**April 7, 2016  
9:00 am – 11:00 am**

**Collaborative Life Sciences Building, Rm. 3A002  
2730 SW Moody, Portland, OR 97201**



# OREGON HEALTH & SCIENCE UNIVERSITY BOARD OF DIRECTORS MEETING

**April 7, 2016  
9:00 am – 11:00 am  
CLSB 3A002**

9:00 am	Call to Order/ Chairman's Comments President's Comments Approval of Minutes <b>(Action)</b>	Jay Waldron Joe Robertson, M.D. Jay Waldron
9:20 am	Financial Update	Lawrence Furnstahl
9:40 am	Board Survey Report	Jay Waldron
9:50 am	Quality Report	Chuck Kilo, M.D.
10:25 am	Casey Eye	Dave Wilson, M.D.
10:45 am	Adopt Committees <b>(Action)</b>	Jay Waldron
11:00 am	Other Business, Adjournment	Jay Waldron

**Oregon Health & Science University**  
**Board of Directors Meeting**  
**January 28, 2016**

Following due notice to the public, the regular meeting of the Board of Directors of Oregon Health & Science University (OHSU) was held at 1:00 p.m. in the Collaborative Life Sciences Building, 2730 SW Moody Road, room 3A001, Portland, Oregon.

A transcript of the audio recording was made of these proceedings. The recording and transcript are both available by contacting the OHSU Board Secretary at 3181 SW Sam Jackson Park Road, Mail Code L101, Portland, Oregon 97239. The following written minutes constitute a summary of the proceedings.

**Attendance**

A quorum of the Board was present. Board members in attendance were Jay Waldron, Chair, presiding; Maria Pope, vice-chair; Ken Allen; Suzy Funkhouser, Joe Robertson; David Yaden; and Amy Tykeson. Also present were Lawrence Furnstahl, Chief Financial Officer; Connie Seeley, Board Secretary and OHSU Chief of Staff; other OHSU staff members and members of the public.

**Call to Order**

Jay Waldron called the meeting to order at 1:01 p.m.

**Chairman of the Board's Comments**

Dr. Joe Robertson, our president, is attending a luncheon with the Portland Business Journal where he is joining other Oregon-based CEOs among the top 10 most admired executives. His leadership and vision, as we all know, have elevated OHSU during his tenure as president, and he richly deserves to be honored at such an event.

Two other OHSU staff members will also be honored in February as part of the Business Journal's 40 under 40 awards. They are recently hired Vice President for Technology Transfer and Business Development, Brendan Rauw, and Dr. Alisha Moreland-Capuia, who is an Assistant Professor of Public Psychiatry here at OHSU and the Executive Director of the OHSU Avel Gordly Center for Healing. She is also Chief Medical Director of the Oregon Chapter of Volunteers of America. And on behalf of the Board we want to congratulate both because that is quite an honor.

And then finally, in the awards column, is OHSU itself, it is number seven, number seven globally, that is. OHSU has recently ranked seventh for best small university in the world by the publication the Times Higher Education. It is an annual ranking of small universities, that are 5,000 or smaller. OHSU is the highest ranking medical school on that list, and the only other US institution above it is Cal-Tech. So, we are in pretty highfalutin company.

**FY16 First Half Results**

*Lawrence Furnstahl*

Mr. Furnstahl reviewed the financial results for the first half of fiscal year 2016. Some key points are that operating revenues across the university are up nine percent over the previous year; we are a little bit behind in the budget pace; we are experiencing ten percent year-over-year growth in net patient revenue; the average severity of our patients is up two percent; OHSU's cash position is strong, showing significant improvement over last year's position.

Mr. Furnstahl then went into great depth on the debt structure of the university. In order to restructure finances to pay for the extensive construction just beginning in the S. Waterfront, Mr. Furnstahl proposed re-financing of 2009 bonds, which would save an estimated \$22M, and extending an interest rate swap. He then went into great detail explaining the ramifications of these proposals.

**David Yaden** asked about the acquisition of new debt, that it is saving us a lot of money, but we didn't seem to be extending any risks to get it. He went on to say that this is really a pretty significant piece of work. He said he wanted to test that by asking Mr. Furnstahl what an outside analyst would say. Would this be a nudge up in the credit rating as far as the rating agencies are concerned? Mr. Furnstahl replied that the general plan of finance was described to the rating agencies last May, and as a result of that, all three rating agencies made positive advances in it with Fitch and S&P upgrading us from A+ to AA-, and Moody's, which is perhaps a little slow on these things, changing their outlook from A1 stable to A1 positive. And what that reflects, is despite the issuance of \$240 million of new debt with these buildings, that was all included in the plan and our projections. It reflects that overall strength of the university and the doubling over the last nine years of our revenues and of our net worth, and that we have a prudent and conservative capital structure where every time we have an opportunity to extend commitments and to lower rates in an economic way, we have done that. It is absolutely the case that they have reflected that, two of them already in the ratings and one in their outlook.

#### **Resolution 2016-01-01 Bond Refunding resolution**

Mr. Waldron asked for a motion for Resolution 2016-01-01. Ken Allen moved to approve the motion. Maria Pope seconded the motion. The motion passed.

#### **Resolution 2016-01-02 Swap Novation resolution**

Mr. Waldron asked for a motion for Resolution 2016-01-02. Amy Tykeson moved to approve the motion. David Yaden seconded the motion. The motion passed.

#### **Women's & Children's Update**

*Cindy Grueber*

Ms. Grueber, along with Drs. Dana Braner and Aaron Caughey, presented to the board on the expansion of OHSU's Doernbecher Children's Hospital. The plan is to create the first children's hospital in the Pacific Northwest, and one of the very few in the country, to combine comprehensive obstetric, neonatal and developmental medicine services in one location. As part of the presentation, Drs. Braner and Caughey shared a brief patient vignette that illustrated the unique capabilities of OHSU's women's and children's clinical team and how the proposed facility will support their best work. Ms. Grueber concluded by saying that this expansion will help to replace a neonatal unit that is almost 30 years old, and will provide a plan for long-term care adult med/surg expansion. She said they will be back before the board in a few months when their pre-planning and assessment is complete.

**Dave Yaden** said this is really exciting, and the promise of just better care for more women and children in the way it has been described by itself is exciting. But, one of the things that we talk about here, and I have never fully understood how it actually happens, is accelerating the benefits of research into actual clinical practice. So, is this in anyway a platform that advances that goal? Aaron Caughey replied that when we think about the span of research, which really goes from basic through clinical research through translational research and policy research. It will affect all of those. It provides kind of a laboratory, a better laboratory for some to do some of the clinical research. For example, one of Dana's neonatology faculty, Cindy McElvoy, is conducting a large prospective randomized control trial of vitamin C in women who smoke. Now, we prefer that they don't smoke, but even in pregnancy women continue to smoke. And so her pilot data was published in JAMA a few years ago, so we expect her randomized trial to even go bigger. So, it provides that population base that clinical transition

work. By this being the epicenter, we think that the work in genetics, rare diseases, which, again, in pediatrics is one of the strongest aspects, will then be even further heightened because we will become a referral center for a large cash menaria.

Dana Braner replied, the idea of a single researcher toiling alone, splitting the atom, those days are past. Research moves forward now with collaboration. Having all of us in the same place at the same time will definitely move research forward faster and allow us to bring it to the bedside much quicker.

**Amy Tykeson** asked about the women/children's hospitals Dr. Caughey had mentioned, and if he could share some best practices that he learned from there that he is incorporating here. Dr. Caughey replied that he came from UCFS where the idea of fetal surgery was created by Mike Harrison about 30 years ago. And even that enterprise, which was exciting and innovative, and utilized the interaction between pediatric surgeons, neonatologists and maternal fetal medicine specialists didn't capture what we have been able to do in a relatively short time here in Oregon, which is the broad depth of wide range of pediatric specialists. To a carpenter everything looks like a nail, right, so then you got a bunch of people hammering away. And you're like what about a drill, what about a saw? So, we found that here at OHSU we were kind of startled by how collaborative people were. Maybe that is because people were recruited from places like UCSF and Harvard and Columbia where people are like, mine. And so here people are like what can we do together? To be fair, while there are best practices out there, and we will incorporate many of them, there are going to be things that can't be done elsewhere because of the collaborative spirit and how easy it is for collaboration to occur here. That being said, Packard Children's does some amazing things together with their neonatology and maternal fetal medicine group, and part of it is being nested. That is one of the reasons why this is a nesting of the maternal units and the neonatology mixed together.

Dana Braner said she would be remiss if she didn't plug Doernbecher a little bit. Doernbecher's Children's Hospital is currently first in the nation among 135 academic medical centers in safety and quality. We like to lead. This facility will give OHSU the opportunity to lead, and that is a good place for us to be and it is a better place for our patients to be.

**Maria Pope** said that Lawrence showed pretty significant increase in patient activity and revenue. How has that impacted in, translated into, your bed utilization across the hospital, and what will this do to improve that situation? Cindy Grueber replied that in the women's area of this project, we are envisioning private beds, and a slight expansion in those beds. And it is a very competitive playing field these days for births, even for high risk moms, so we are going to create the kind of environment that will attract additional volume. But with that private bed component, we will be able to operate at a higher bed capacity because of the volumes coming in. On the neonatal side, both of these services have some of the highest variation that hospitals experience in terms of census. The variability because of the unpredictability of a patient. When we plan capacity, we have to take that into account. And in our current capacity there are times when at peak demand we are unable to accept a patient either into our NICU or our mother baby side of the hospital. On the adult side on our med/surg beds we operate throughout the week at close to 100 percent capacity, and then in the high 90s over the weekend. We have short term strategies through the OHSU Partners' network and working collaboratively with our other hospital partners to keep the volume in our system, and spread that throughout the region, if you will, and appropriate to what the patient's needs are. But over the long term by 2021-2022 there will be a need for additional beds for our adult patients as well. We would assume a very high capacity in both services.

**Jay Waldron** said that he couldn't imagine a better project to fulfill our mission for the wellbeing and health for all Oregonians.

Mr. Waldron then introduced Dr. Joe Robertson.

### **President's Comments**

Dr. Robertson's comments covered the following topics:

Portland Business Journal recognition

Dr. Robertson was one of ten local executives nominated for CEO of the Year, an honor he says he shares with all 16,000 OHSU employees and 4,000 learners.

Diseases mentioned by President Obama in State of the Union address

Dr. Robertson noted that the president mentioned four diseases in his State of the Union address: cancer, malaria, TB, and HIV/AIDS, all four of which OHSU researchers are on the leading edge of.

Knight Cancer Institute awards statewide projects

The Knight Cancer Institute has awarded 13 projects through its community partnership program. This is part of our commitment to the effort behind the Knight Cancer Challenge. These projects address cancer prevention, early detection, treatment, and survivorship.

Important scientific discoveries

Scientists at OHSU Doernbecher's Children's Hospital have defined the first causal link between blood lead exposure and the attention deficit hyperactivity disorder. The effort was led by Dr. Joel Nigg.

Major partnership announced

OHSU has partnered with GE Healthcare. We hope to combine our clinical expertise with GE Healthcare's technology expertise to answer basic fundamental questions in biology and medicine.

OHSU Partners Launched

OHSU has gone live with our Salem partners and this is the first of hopefully many partners that will join with OHSU in our joint effort to form a collaborative statewide network.

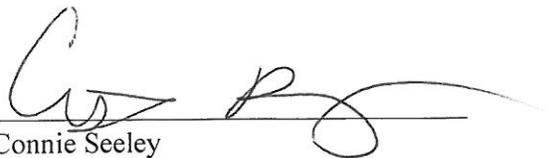
**Approval of Minutes**

Mr. Waldron asked for approval of the minutes of the October 29, 2015 Board meeting, included in the board docket. Upon motion duly made by David Yaden and seconded by Ken Allen, the minutes were unanimously approved.

**Adjournment**

Hearing no further business, Mr. Waldron adjourned the meeting at 1:59 p.m.

Respectfully submitted,



Connie Seeley

Board Secretary



# FY16 February YTD Financial Results

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OHSU Board of Directors  
April 7, 2016

# Overview of February Results

- OHSU operating income through 8 months is \$71 million, \$(2.6) million below budget but 33% above last year's earnings:
  - Patient revenues are \$29 million over budget, driven by specialty pharmacy use especially in cancer and hemophilia services
  - Research revenues are \$24 million off budget, with delays in drawing on grants & gifts in the first half of the fiscal year
  - Spending in central administrative & support areas and on strategic initiatives are running under budget, offsetting some of the research revenue impact
  - Continued focus on costs, higher gift and grant spending as the year proceeds, together with the Hospital Transformation Performance Pool payment expected in April, should close the small gap to target.

# Overview of February Results (continued)

- February includes the first three months of OHSU Partners:
  - OHSU Hospital and Salem Health (plus Tuality Healthcare as of February) are now managed as an integrated health system with one executive leadership team.
  - A single operating income “bottom line” is shared across sites based on a six-year (FY10 – FY15) historical average of earnings of 81% OHSU Hospital and 19% Salem Health.
  - This is before support from OHSU Hospital to research and education.
  - Through February this results in a net \$5 million true-up towards OHSU because Salem Health operating income has recently increased faster, reflecting both program growth and relatively more gain from the Affordable Care Act.
  - The true-up is expected to vary back and forth over time, with all parties and patients benefiting from a larger, integrated and more diversified base of operations.

# Overview of February Results (continued)

- OHSU has issued \$220 million in new debt this fiscal year: \$100 million taxable bonds in July for population health initiatives and \$120 million tax-exempt debt in January – February for first-year construction of CHH-South.
- We also refinanced 2009A bonds for \$25 million of present value savings, eliminating debt service reserve fund and reducing outstanding principal from this debt by \$30 million.
- In February's bond issue, the average spread to MMD (the AAA GO index that OHSU's bonds are priced off) was 47 basis points, beating our prior best of 65 basis points, as well as recent AA- comps for Partners Healthcare and Temple University.
- Each basis point is worth \$200,000 in PV savings.
- We had strong demand from both retail and institutional investors. The recent added prominence of OHSU, including the Knight Cancer Challenge, a Provost / CFO presentation to the JPM Healthcare Conference in January, the innovative structure of OHSU Partners, and Moody's upgrade of OHSU to Aa3, were all evident in investor interest.

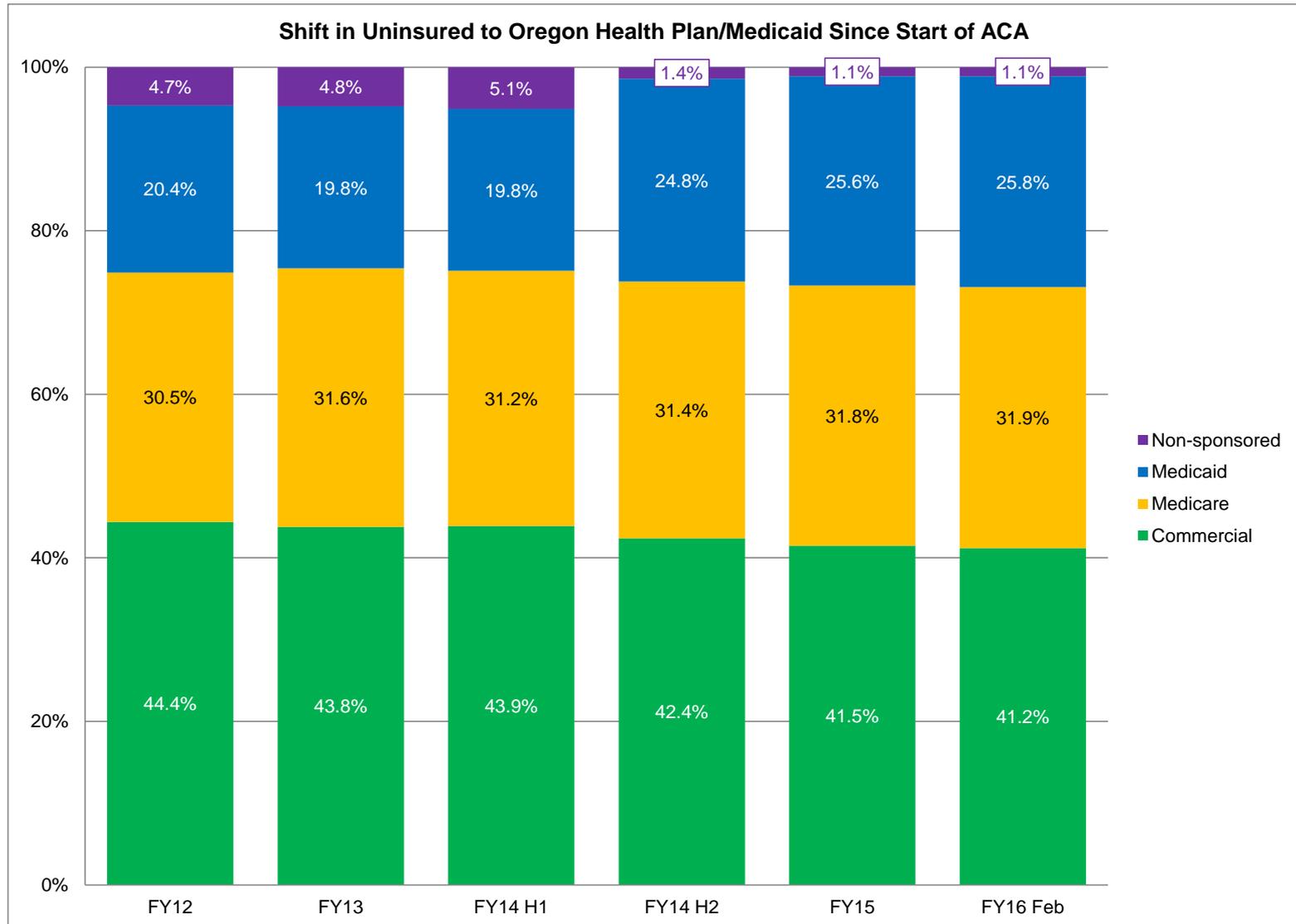
# February Earnings Slightly Off Budget

<b>February YTD (8 months)</b> (millions)	FY15 Actual	FY16 Budget	FY16 Actual	Actual - Budget	FY16 / FY15
Net patient revenue	\$1,168.5	\$1,256.5	\$1,285.7	\$29.3	10.0%
Grants & contracts	244.1	253.2	241.2	(12.1)	-1.2%
Gifts applied to operations	48.8	70.3	58.7	(11.6)	20.4%
Tuition & fees	44.0	45.2	46.1	0.9	4.9%
State appropriations	22.3	23.8	23.7	(0.1)	6.3%
Other revenue	63.8	70.1	73.2	3.1	14.6%
Operating revenues	<u>1,591.4</u>	<u>1,719.1</u>	<u>1,728.6</u>	<u>9.5</u>	<u>8.6%</u>
Salaries & benefits	933.0	994.6	1,003.1	8.4	7.5%
Services & supplies	450.2	483.4	480.8	(2.7)	6.8%
Medicaid provider tax	51.7	57.9	59.4	1.5	14.9%
Depreciation	84.7	87.8	90.3	2.4	6.6%
Interest	18.2	21.6	24.0	2.4	32.0%
Operating expenses	<u>1,537.9</u>	<u>1,645.4</u>	<u>1,657.5</u>	<u>12.1</u>	<u>7.8%</u>
Operating income (pre-GASB 68)	<u>\$53.6</u>	<u>\$73.7</u>	<u>\$71.1</u>	<u>\$(2.6)</u>	<u>32.8%</u>

# Patient Activity Up 5% Year-over-Year

<b>February YTD (8 months)</b>	FY15 Actual	FY16 Budget	FY16 Actual	Actual / Budget	Actual / Last Year
Inpatient admissions	19,214	19,470	19,460	0%	1%
Average length of stay	5.86	5.74	5.90	3%	1%
Average daily census	450	449	461	3%	2%
Day/observation patients	23,548	25,531	24,701	-3%	5%
Emergency visits	31,289	31,587	32,284	2%	3%
Ambulatory visits	531,784	572,098	554,687	-3%	4%
Surgical cases	20,791	22,376	21,584	-4%	4%
Casemix index	1.98	2.00	2.02	1%	2%
Outpatient share of activity	46.6%	47.4%	47.5%	0%	2%
CMI/OP adjusted admissions	71,202	73,974	74,901	1%	5%

# ACA Continues to Cover Oregonians



# Balance Sheet Reflects Debt Issuance

Balance Sheet (millions)	6/30/15	2/29/16	Change	Cashflow (millions)	Feb YTD
Operating cash & investments	\$595	\$667	\$72	Oper. income (pre-GASB 68)	\$71
Quasi-endowment funds	86	76	(10)	Depreciation	90
Moda surplus note, net	34	34	0	OHSU investment return	(2)
OHSU cash & investments	714	776	62	New debt issued	220
Trustee-held bond funds	31	18	(13)	Deposit to capital project funds	(120)
Capital project funds	1	120	120	2009A DSRF applied to refunding	16
Total cash & investments	746	915	169	Sources of OHSU cash	275
Net physical plant	1,528	1,535	7	Regular principal repaid	(20)
Interest in Foundations	922	878	(44)	Principal repaid on refunding	(30)
Long-term debt	(739)	(909)	(170)	Capital spending	(97)
GASB 68 pension items, net	(53)	(53)	0	Capital accounts payable	(16)
Working capital & other, net	113	176	63	Increase in patient A/R	(44)
OHSU net worth	2,516	2,541	24	Other working capital, net	(6)
				Uses of OHSU cash	(213)
				Sources less uses of cash	62
Oper. income (pre-GASB 68)			71	6/30/15 balance	714
OHSU investment return			(2)	2/29/16 balance	\$776
Gain (loss) from Foundations			(44)		
Other non-operating items			(0)		
Total change in net worth			\$24		

*First \$20m of bond & grant reimbursement for building projects received 3/31/16*



# OHSU Board of Directors

The state of performance improvement in 2016 – Quality,  
Safety, and our Journey Toward Performance Excellence

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April 7, 2016

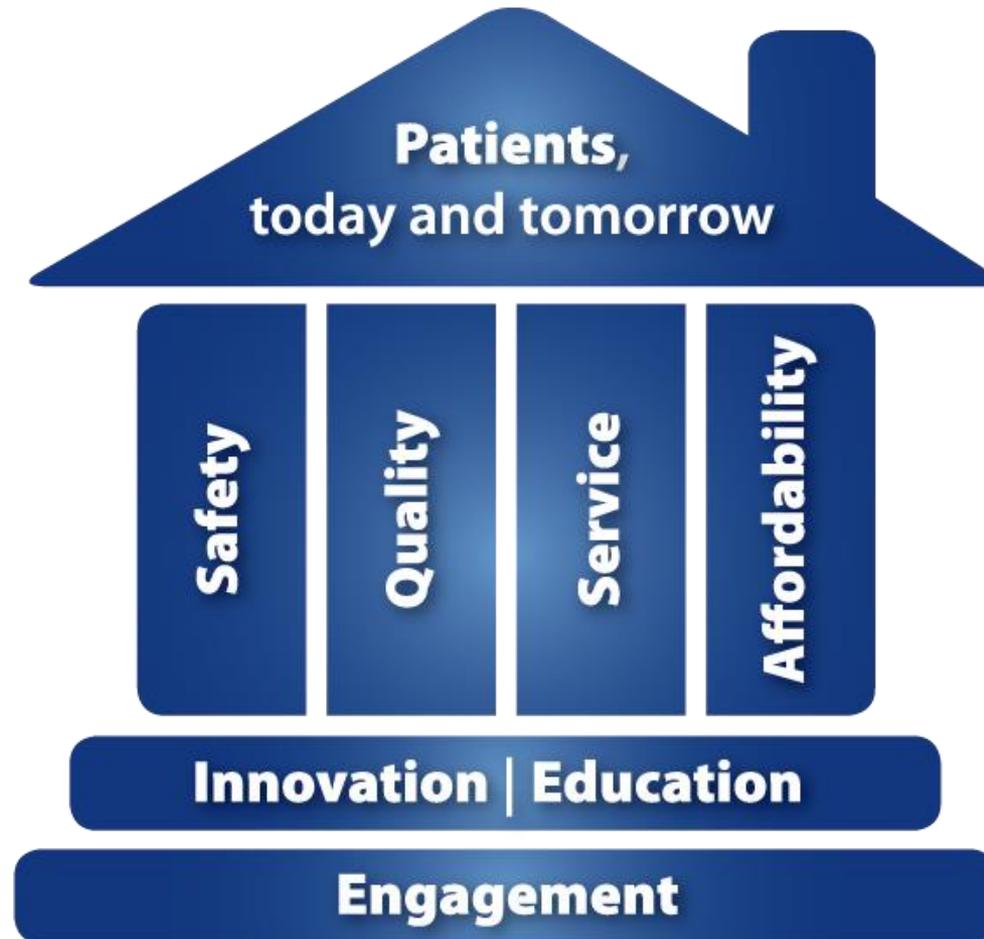
Charles M. Kilo MD, MPH

VP/Chief Medical Officer, Oregon Health & Science University

# University Health System (UHS) Board

- **Board Members**
  - Prashant Dubey, President and CEO, Sumati Group
  - Dr. Paul Flint, Chair, Professional Board and Chair, Department of Otolaryngology, OHSU
  - Cynthia Grueber, Interim CEO, OHSU Healthcare
  - Dr. Jenny Mladenovic, Executive Vice President and Provost, OHSU
  - Maria Pope, Senior Vice President of Power Supply and Operations and Resource Strategy, Portland General Electric
  - Dr. Mark Richardson, Dean of the School of Medicine, OHSU
  - Dr. Joe Robertson, President, OHSU
  - Keith Thompson, retired, Vice President and Oregon Site Manager, Intel Corporation and Past OHSU Board Chair
- **Meet quarterly to oversee quality, safety, patient experience, governance and related efforts of the Professional Board**

# “True North” –OHSU’s Performance Excellence (OPEX) “House”



**Our purpose is to excel in healing,  
teaching, and discovery.**

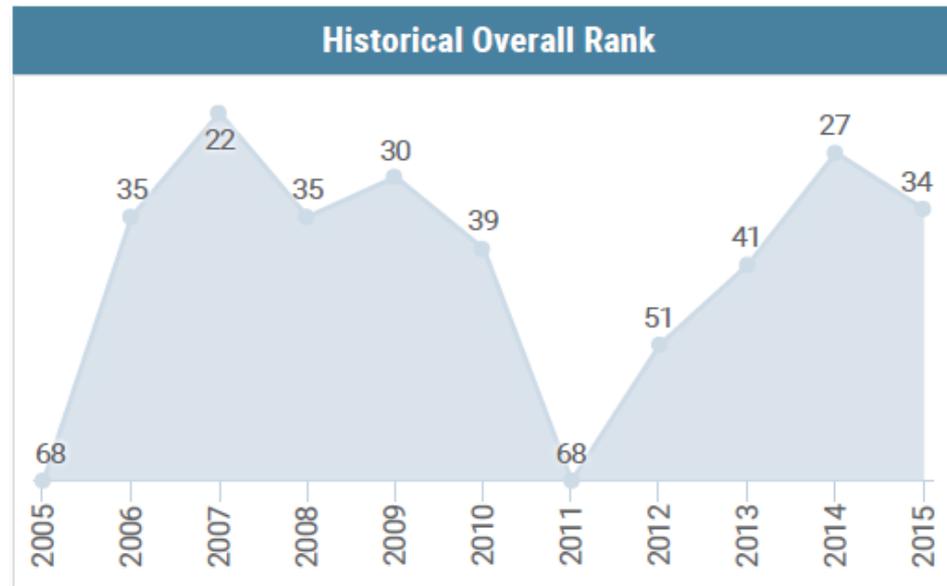
# University HealthSystem Consortium (UHC) 2015 Hospital Quality and Accountability Ranking (n = 102)

OHSU 34/102 of Academic Medical Centers → goal Top 10

**Six Domains: Mortality, Safety, Effectiveness, Patient Centeredness, Efficiency, Equity**

## Key Observations

- Performance Excellence efforts quite advanced
- Data Integrity initiative advancing rapidly



# Mortality Management

1. Clinical Competency
2. Data Integrity
3. Inpatient Hospice
4. Transfer Management
  - OHSU receives the state's most complex patients
  - Support local hospitals and physicians to manage appropriate patients locally without transfer
5. Caring Wisely
  - Improve advanced care planning to solicit and abide by patient goals of care during very complex illnesses and at the end of life

# Doernbecher Children's Hospital 2015 Pediatric Quality Award

- Children's Hospital Association's Award for Patient Safety and Reduction of Harm
- Significant improvements with the potential to advance children's health care
- Interdisciplinary team - nurses, radiologists, quality improvement specialists, others
- Radiation exposure ↓50% with barium swallow studies reduce long-term radiation-related cancer risk

[DCH 2015 CHA Quality Award](#)

# Improvement Methods used to Design New Clinical Programs

## OPEX (OHSU Performance Excellence) methods

- Process mapping to design work flows, build in quality and safety
- Failure Mode & Effectives Analysis to address safety risks in advance
- Simulation-based training to optimize team functioning, train to and refine work, look for failure modes

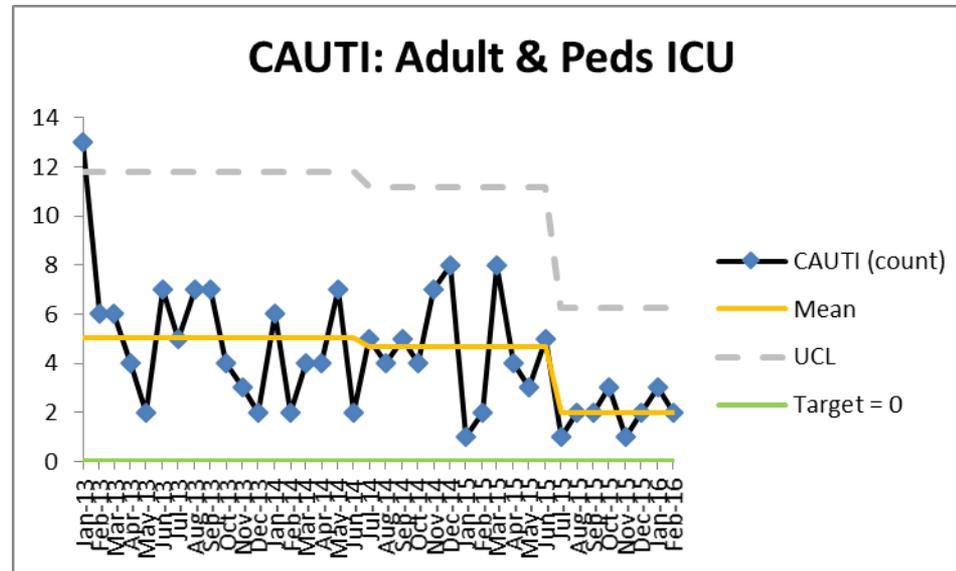
## Examples

1. **Transcatheter Aortic Valve Replacement** → Advanced heart valve procedure
2. **Extracorporeal Membrane Oxygenation** → successful adult program launch March '16 for highly complex patient population
3. **Center for Health & Healing South** → building design

# Managing Hospital Acquired Infections

## Hospital Acquired Infections

- Catheter Associated Urinary Tract Infections
- Central Line Associated Blood Stream Infections
- Clostridium difficile
- Methicillin Resistant Staphylococcus Aureus





**Thank You!**

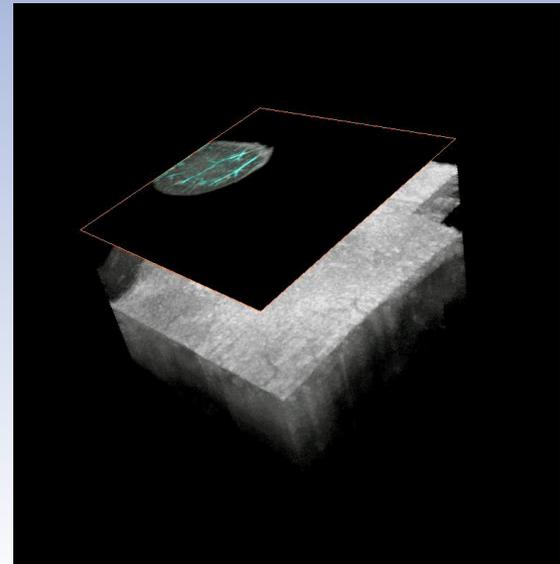
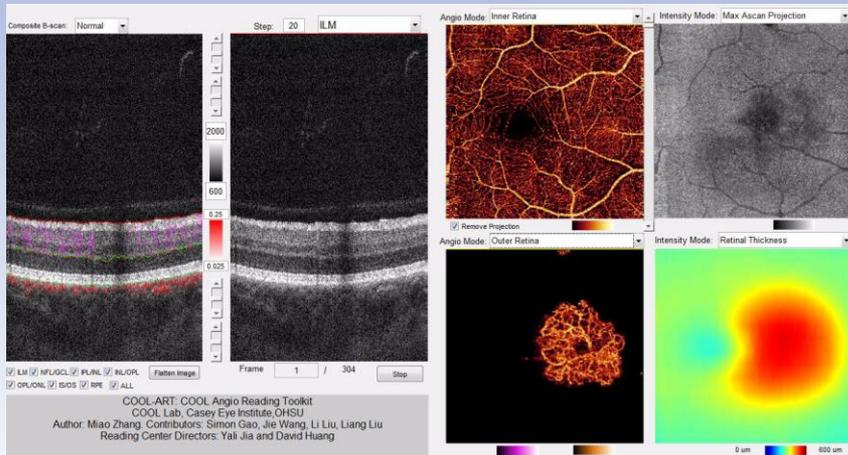
# *Eliminating Blindness in Oregon*

*through Innovation, Education and Community Service*



CASEY  
EYE INSTITUTE  
*Oregon Health & Science University*

# Innovation for Macular Degeneration Diagnostic Imaging



# Innovation for Congenital Defects

## Gene Therapy

### Gene therapy's big promise: Fighting vision loss with gene therapy

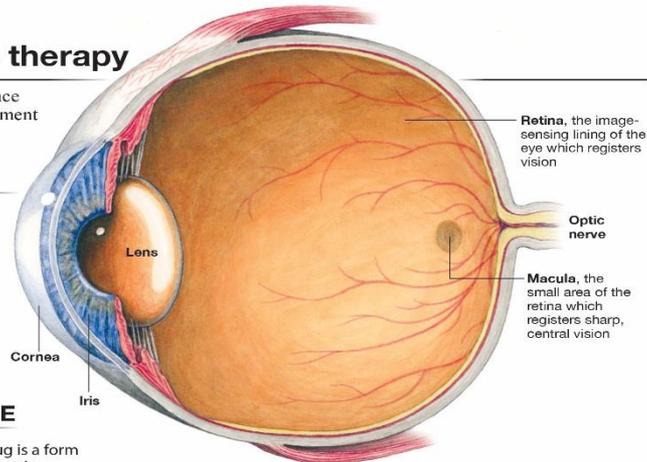
Doctors of the Casey Eye Institute at Oregon Health & Science University are conducting clinical trials using a gene replacement therapy to treat three eye diseases.

#### THE THREE TARGETED EYE DISEASES

**Stargardt's disease** - An inherited disease that has onset in children between the ages of six and twelve, leading to severe vision loss in young adults.

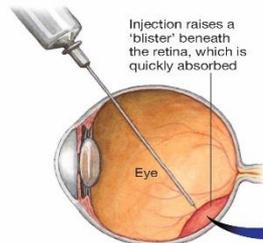
**Usher syndrome** - A condition that affects both vision and hearing. It affects the retina, initially causing the loss of peripheral vision but later affects central vision. Also causes severe hearing loss.

**Macular degeneration** - A major cause of visual impairment and blindness among older adults, it affects the macula of the eye, causing the loss of central vision.

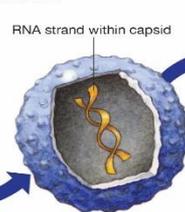


#### THE GENE REPLACEMENT PROCEDURE

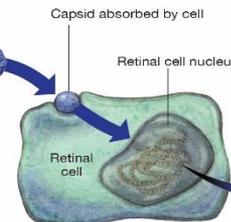
**1** Under anesthesia, the gene therapy drug is injected into the patient's eye. The tip of the needle is the width of a human hair, and the drug is infused into a specific location beneath the retina.



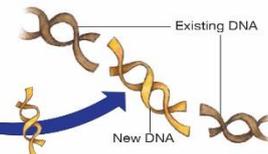
**2** The gene therapy drug is a form of an equine virus, harmless in humans. The virus contains a double strand of RNA, that encodes the gene for transplantation. The virus is encapsulated within a capsid, which attaches itself to a retinal cell.



**3** The retinal cell engulfs the capsid, absorbing it into the cell. The RNA is converted to DNA, encoding the gene of interest.



**4** The gene from the new DNA strand incorporates in the cell's existing DNA. In Stargardt's and Usher patients, the inserted gene provides a functional copy of the nonfunctional gene. In macular degeneration patients, the insertion of a new gene produces a 'medication' to combat the disease.



Sources: The Casey Eye Institute, Oregon Health Sciences University

Credit: Eric Baker, OHSU

# *Innovation for Congenital Defects*

## *Gene Therapy*

- World Center for Gene Therapy
- Five Active Gene Therapy Trials



# *Eliminating Blindness Community Service*



## Adult Screening Program

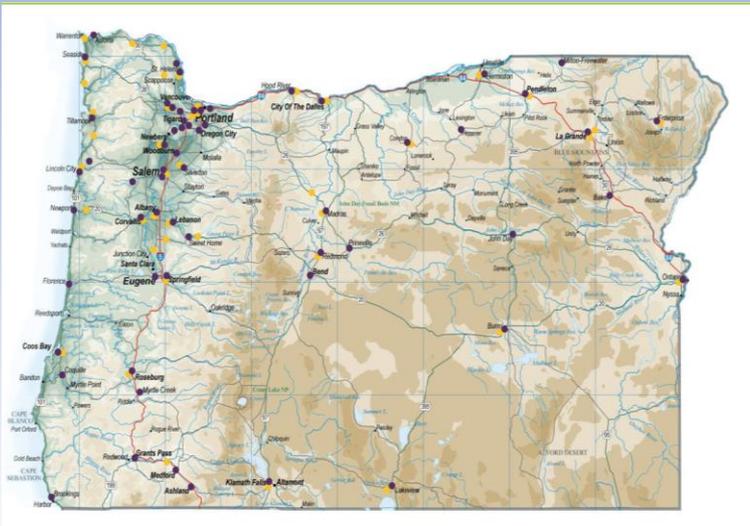
- 40 community partners
- 60 physician volunteers
- Vision Van
- Diabetes, Macular Degeneration, Glaucoma
- Refractive Error



# Eliminating Blindness Community Service



- 6,492 Oregon Head Start
- 1,500 See To Read screenings
- 742 children referred for full examinations
- Salem Hospital ROP Telemedicine



# *Eliminating Blindness Education*



- Formal Programs
  - Medical Students
  - Residents
  - Fellows
  - Orthoptists
  - Optometrists
- Community Outreach
- International Ophthalmology

*Improving the Health of Oregonians*  
*through Innovation, Education and Community Service*



**RESOLUTION 2016-04-03  
OREGON HEALTH & SCIENCE UNIVERSITY  
BOARD OF DIRECTORS**

**WHEREAS**, the Board wishes to identify and appoint Board members to serve on each of the Board Committees, the Integrity Program Oversight Council, and the University Health System Board.

**NOW, THEREFORE, BE IT RESOLVED**, that the following Board members shall be appointed as listed below, to serve at the pleasure of the Board of Directors:

**Finance & Audit Committee**

David Yaden (Chair)  
Maria Pope  
Jay Waldron  
Ken Allen (alternate)

**Human Resources Committee**

Amy Tykeson (Chair)  
Prashant Dubey  
Jay Waldron

**Integrity Program Oversight Council**

Suzy Funkhouser  
Frank Toda  
David Yaden

**University Health System Board**

Prashant Dubey  
Maria Pope  
Joe Robertson

This Resolution is adopted this 7<sup>th</sup> day of April, 2016.

Yeas 7  
Nays 0

Signed by the Secretary of the Board on April 7, 2016.

Connie Seeley  
Board Secretary



**RESOLUTION 2016-04-04  
OREGON HEALTH & SCIENCE UNIVERSITY  
BOARD OF DIRECTORS**

**WHEREAS**, the Board of Directors of Oregon Health & Science University wishes to recognize the service of MardiLyn Saathoff on the OHSU Board:

**NOW THEREFORE, BE IT RESOLVED**, that Oregon Health & Science University expresses its sincere appreciation for the valuable service and dedication of MardiLyn Saathoff throughout her tenure on the OHSU Board of Directors, including her service as Chair of the Finance & Audit Committee, the Integrity Program Oversight Council and the Governance Committee of the Board, and for advancing OHSU's missions of teaching, healing, discovery and outreach.

This Resolution is adopted this 7<sup>th</sup> day of April, 2016.

Yeas 7

Nays 0

Signed by the Secretary of the Board on April 7, 2016.

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Connie Seeley  
Board Secretary