



OHSU Board of Directors Meeting

Friday, April 16, 2021

9:30-11:30am

Please join the meeting here:

YouTube live link with closed captioning

https://youtu.be/wv_h3Zz5NVY

Join by phone:

+1-503-388-9555 Portland Oregon Toll

Access code: 120 525 5123



**OREGON HEALTH & SCIENCE UNIVERSITY
BOARD OF DIRECTORS MEETING
Public Agenda**

**Friday, April 16, 2021
9:30am- 11:30am**

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9:30am	Call to Order/ Chairman's Comments President's Comments Approval of Minutes January 28, 2021 (ACTION)	Wayne Monfries Danny Jacobs, MD Wayne Monfries
9:45am	Financial Update	Lawrence Furnstahl
10:05am	Approval of Investment Policy (ACTION)	Lawrence Furnstahl
10:10am	Code of Conduct Update	Tim Marshall
10:30am	Anti-Racism Initiatives Update	Derick Du Vivier, MD
10:50am	OHSU Campus Safety Review Taskforce Final Report	Alisha Moreland-Capuia, MD Dana Bjarnason, PhD, RN
11:20am	Recognition of Service for Lubna Khan (ACTION)	Wayne Monfries
11:25am	Recognition of Service for Amy Tykeson (ACTION)	Wayne Monfries
11:30am	Meeting adjourned	

**Oregon Health & Science University
Board of Directors Meeting
January 28, 2021
WebEx/ECHO 360 virtual live meeting**

Following due notice to the public, the regular meeting of the Board of Directors of Oregon Health & Science University (OHSU) was held at 12:00 pm via a virtual WebEx and YouTube links.

A transcript of the audio recording was made of these proceedings. The recording and transcript are both available by contacting the Secretary of the Board at 3225 SW Pavilion Loop, Mail Code L101, Portland, Oregon 97239. The following written minutes constitute a summary of the proceedings.

Attendance

Board members in virtual attendance were: Wayne Monfries, Danny Jacobs, MD, Chad Paulson, Lubna Khan, Steve Zika, Ruth Beyer and Prashant Dubey. OHSU staff presenting material on the agenda were Lawrence Furnstahl, Renee Edwards, MD, Bridget Barnes, Joe Ness, Derick Du Vivier, MD, Elena Andresen PhD, Sydney Ey, PhD and Abigail Lenhart, MD. Alice Cuprill Comas, JD, Assistant Secretary of the Board was also in virtual attendance as well as other OHSU staff members and members of the public.

Call to Order

Wayne Monfries

Mr. Wayne Monfries, Chair of the OHSU Board of Directors, called the public meeting to order at 12:00 pm and welcomed all those in attendance.

Chairman's Comments

Wayne Monfries

Mr. Monfries began by welcoming everyone to the first board meeting of 2021. He acknowledged they were eager to move beyond COVID 19 and commended OHSU on its important work and critical role they have played in fighting the pandemic. He said it is a tough balancing act but is confident in the teams at OHSU to manage through. He reviewed the agenda and encouraged everyone to review the important information in the meeting material. He then turned the meeting over to President Jacobs.

President's Comments

Danny Jacobs, MD, OHSU President

Dr. Danny Jacobs welcomed everyone in attendance. He discussed OHSU's effort to assist with the launch of the largest vaccine effort in the country's history and the prioritization of OHSU's vaccination of their healthcare workforce according to CDC guidelines. He spoke about the partnering vaccination centers at Oregon Convention Center, Hillsboro and the Portland International Airport. OHSU also opened a clinic in the Multnomah Pavilion to vaccinate OHSU employees and patients. He spoke about the Oregon Health Authorities COVID 19 Vaccine Advisory Committee, mobile testing vans and training for the administering of vaccines. He also spoke about OHSU's most recent research contributions. He closed by saying OHSU will press on with their commitments to patient care, education and research and will continue to get vaccines into all arms.

Approval of Minutes

Wayne Monfries

Mr. Monfries asked for approval of the minutes from the October 29, 2020 OHSU Public Board meeting. Upon motion duly made by Steve Zika and seconded by Chad Paulson the minutes were approved by all board members in attendance.

FY21 Financial Results

Lawrence Furnstahl, Chief Financial Officer

Mr. Monfries recognized Lawrence Furnstahl, EVP and Chief Financial Officer.

Mr. Furnstahl gave an overview of the FY21 H1 Financial Results covering OHSU's financial model, restoration of salaries, net patient revenues, operating income, major uncertainties moving in a positive direction and the Affordable Care Act.

Board members asked Mr. Furnstahl for further information on stability, additional uncertainties, the Affordable Care Act and Medicaid access.

Annual Quality Report

Renee Edwards, MD, SVP, Chief Medical Officer OHSU Health

Mr. Monfries recognized Renee Edwards, MD, SVP, and Chief Medical Officer OHSU Health.

Dr. Edwards gave an overview of the Annual Quality and Safety Report. She gave a review of the department and OHSU's Management System. She spoke about the Quality and Safety

Oversight Committee and their FY20 accomplishments and the COVID 19 priorities. She also covered the 2020 Quality and Accountability scorecards and ratings. Projects supported by the group and their performance were also discussed as well as a summary of the patient safety report.

Board members asked Dr. Edwards for additional information on the CMS rankings, numbers rankings and risk.

OSHU 2025 Update

Bridget Barnes, VP & Chief Information Officer

Mr. Monfries recognized Bridget Barnes, VP & Chief Information Officer.

Ms. Barnes gave an update on OHSU 2025. She discussed the University Cabinet and study group findings, previous and current prioritized objectives and their revised estimates and the results and recommendations from the OHSU Budget Committee. She closed her discussion covering Next Steps for OHSU 2025.

Board members asked Ms. Barnes for additional information on Budget Committee recommendations and learners success.

COVID-19 Report Update

Joe Ness, SVP, COO OHSU Healthcare

Mr. Monfries recognized Joe Ness, SVP, and COO OHSU Healthcare.

Mr. Ness gave a review on OHSU COVID 19 and vaccination updates. He discussed the COVID 19 daily dashboard operations for 2020 including the results that covered patients, students and staff testing. He also covered the COVID 19 patient census, ventilator percentages, ECMO cases and vaccine inventory. Mr. Ness also spoke about vaccine dose planning and administration and closed by saying OHSU was fortunate to have a dedicated work force on site to keep normal hospital services fully functioning while also managing the work that comes with the COVID 19 workload.

Board members asked Mr. Ness for additional information on vaccine effectiveness, vaccine eligibility and mobilization of vaccine resources.

Anti-Racism Initiatives Update

Derick Du Vivier, MD, Elena Andresen, PhD

Mr. Monfries recognized Derick Du Vivier, MD, Senior Vice President of Diversity, Equity & Inclusion.

Dr. Du Vivier gave an update on Diversity, Equity and Inclusion. He spoke about Implicit Bias and Structural Racism, OHSU training offerings and feedback received. He discussed the “Stepping In” program and the health systems ongoing health equity colloquium. He drew attention to the OHSU Center for Ethics and Healthcare and its role in caring for folks with disabilities and an Anti-Racism news update implemented through the CDI. He mentioned the hiring of a DEI communications specialist and said they have also worked with a black employee resource group to help design and facilitate a Black History Month speaker series.

Board members asked Dr. Du Vivier for additional information on feedback, implementation barriers at the institutional level and resources at CDI.

Mr. Monfries recognized Elena Andresen, PhD, EVP and Provost

Dr. Andresen gave an update on Education’s path towards Anti-Racism. She mentioned their work was linked to the OHSU 2025 goals. She reviewed new policies and practices and improvement of data. She spoke about strategic investments in cautious economic times and discussed some of their recent accomplishments including CDI support of admissions processes and new remote mentoring training for faculty.

Board members asked Dr. Andresen for additional information on management of other mission efforts.

Workforce Wellbeing Support Report

Renee Edwards, MD, Sydney Ey, PhD, Abigail Lenhart, MD

Mr. Monfries recognized Renee Edwards, MD, SVP, Chief Medical Officer OHSU Health, Sydney Ey, PhD, Professor of Psychiatry, Associate Director, Resident and Faculty Wellness Program, and Abigail Lenhart, MD, Associate Professor of Medicine, Primary Care Wellness Leader

Dr. Edwards reviewed multiple initiatives of the Wellness Task Force in support with Human Resources including the Employee Assistance and Spark Wellness programs. She also discussed the task force’s recently held wellness summit. She introduced Dr. Ey and Dr. Lenhart to provide additional updates on the task force.

Dr. Lenhart gave an overview of the task force's mission and highlighted the work they have been doing including wellness rounds and town halls with leaders and teams, free respite spaces and snacks and well-being tool kits and psychological support services. She also covered the pulse survey.

Dr. Ey discussed the need for a consult service to support leaders and teams in a number of different ways including individual consultation with leaders, virtual supportive listening sessions with groups of leaders and interactive workshops. She also mentioned several themes that have emerged from the listening sessions that included exhaustion and acknowledging grief.

Board members asked Dr. Edwards, Dr. Ey and Dr. Lenhart for additional information on the pulse survey, the childcare and hardship fund, efforts regarding work/family relationships and listening sessions.

Adjournment

Wayne Monfries

Hearing no further business for discussion, Mr. Monfries thanked all of the Board members and presenters for their participation. The meeting was adjourned at 2:22 pm.

Respectfully submitted,

Alice Cuprill Comas
Assistant Secretary of the Board



April 9, 2021

To: Members, OHSU Board of Directors

From: Lawrence J. Furnstahl
Executive Vice President & Chief Financial Officer

Re: Finance & Investment Materials for April 16th Board Meeting

The financial update at the Board of Directors meeting will include FY21 year-to-date results and the preliminary budget plan for FY22. Operating income through February is \$41 million, \$67 million above the loss assumed in the revised budget approved in September, even after paying \$23 million to offset salary reductions taken by 4,500 faculty and managers last summer. Increased complexity of care, stable payer mix, strong pharmacy growth, and tight control of services & supplies all contribute to above-budget performance.

However, after recovering rapidly last summer, earnings softened during the winter. February recorded the first monthly loss this fiscal year, a combination of lower patient revenues and higher costs, including the impact of a significant increase in behavioral health census, difficulty filling nursing positions, and the month's ice storms. Viewed another way, one year ago pre-COVID, OHSU revenues were rising at 11%; now they are flat. We expect revenue growth into next fiscal year to be in the middle.

By carefully navigating the uncertainty of pandemic and recession, combined with the global impact of massive federal fiscal and monetary stimulus, OHSU has preserved its balance sheet: in 20 months from June 2019 to February 2021, net worth is up \$270 million and OHSU-held cash & investments are up \$220 million net of CARES Act loans. These gains include \$94 million in CARES Act grants plus \$222 million in investment return and net gift additions.

Budget planning for FY22 is based on COVID census increasing through Memorial Day before zeroing out by Labor Day with widespread vaccination. There is continued strong demand for OHSU's tertiary and quaternary services, which must be met by active recruitment of nurses to fully staff ICUs and ORs. We will focus on OHSU 2025's goal of putting people first, while holding tuition increases to 2% with continuation of the Tuition Promise for eligible programs. In summary, the preliminary FY22 budget targets 6% revenue growth to \$3.74 billion and a 1% operating margin to fund \$190 million in capital spending and \$25 million of pension liability prepayment, with balanced cash flow.

As February results show, there is greater than usual volatility in revenues and expenses. As more monthly results come in and budget development continues throughout the University, we are fine-tuning the line items outlined in preliminary form here. March results will be available next week, with

early numbers showing stronger patient revenues. We will return in June with a proposed FY22 budget for the Board's consideration.

After the financial update, I will ask the Board's approval of proposed changes to OHSU's investment approach to position us better for the future, including an Environmental, Social and Governance (ESG) focus for all OHSU-held equity and fixed income funds to align with our mission of improving health and well-being. This approach has been discussed at the Finance & Audit Committee across several meetings. We plan to gradually shift the consolidated unrestricted cash & investment portfolio from its past 25% equity / 75% fixed income allocation to 60% equity / 40% fixed income, in order to increase expected long-term returns with prudent increases in risk.

The 25% equity / 75% fixed income allocation has a long-term expected return of about 2.5%, which is well below OHSU's 7% historical budget growth trend, creating drag in terms of days cash on hand. In other words, if the size of the budget increased by 7%, cash had to grow by 7% to maintain the same days cash, and if only 2.5% came from investment return, we had to divert 4.5% (or about \$80 million per year) from other uses just to keep even. A peer-institution analysis showed an average portfolio of 60% equity / 40% fixed income, with an expected long-term return of about 5%, which would cut this gap in half.

We engaged Goldman Sachs (one of our two main investment bankers) to conduct an enterprise risk management analysis, capturing operational, public policy, investment and debt risks within a comprehensive framework. The Finance & Audit Committee reviewed this work in early 2019. The analysis showed that we could increase our equity exposure from 25% to 60% without an excessive amount of risk to the balance sheet, measured by the 95% percentile downside risk compared to key rating agency metrics.

We started moving toward the higher allocation after further discussion at Finance & Audit in January 2020, although we slowed the pace given uncertainty from the pandemic. We are currently about 30% equities and expect to move to the 60% target over the next two years, while monitoring the markets and other risk factors.

OHSU's investment advisor, Mercer, conducted a comprehensive manager search to identify the Blackrock ACWI ex-Fossil Fuels ESG Focus Index Fund for equity holdings and the JP Morgan Carbon Transition Core Bond Strategy for fixed income funds. These funds exclude fossil fuel investments among other ESG weighting criteria, yet still track the overall stock and bond markets closely. For example, the equity ESG fund has returned 12.54% since inception vs benchmark performance of 12.33% with identical standard deviation.

Mercer also advised on drafting the refined investment policy included with the Board materials, for which I ask your approval.



OHSU Onward: FY21 February Results & Preliminary Budget Planning for FY22

OHSU Board of Directors / April 16, 2021

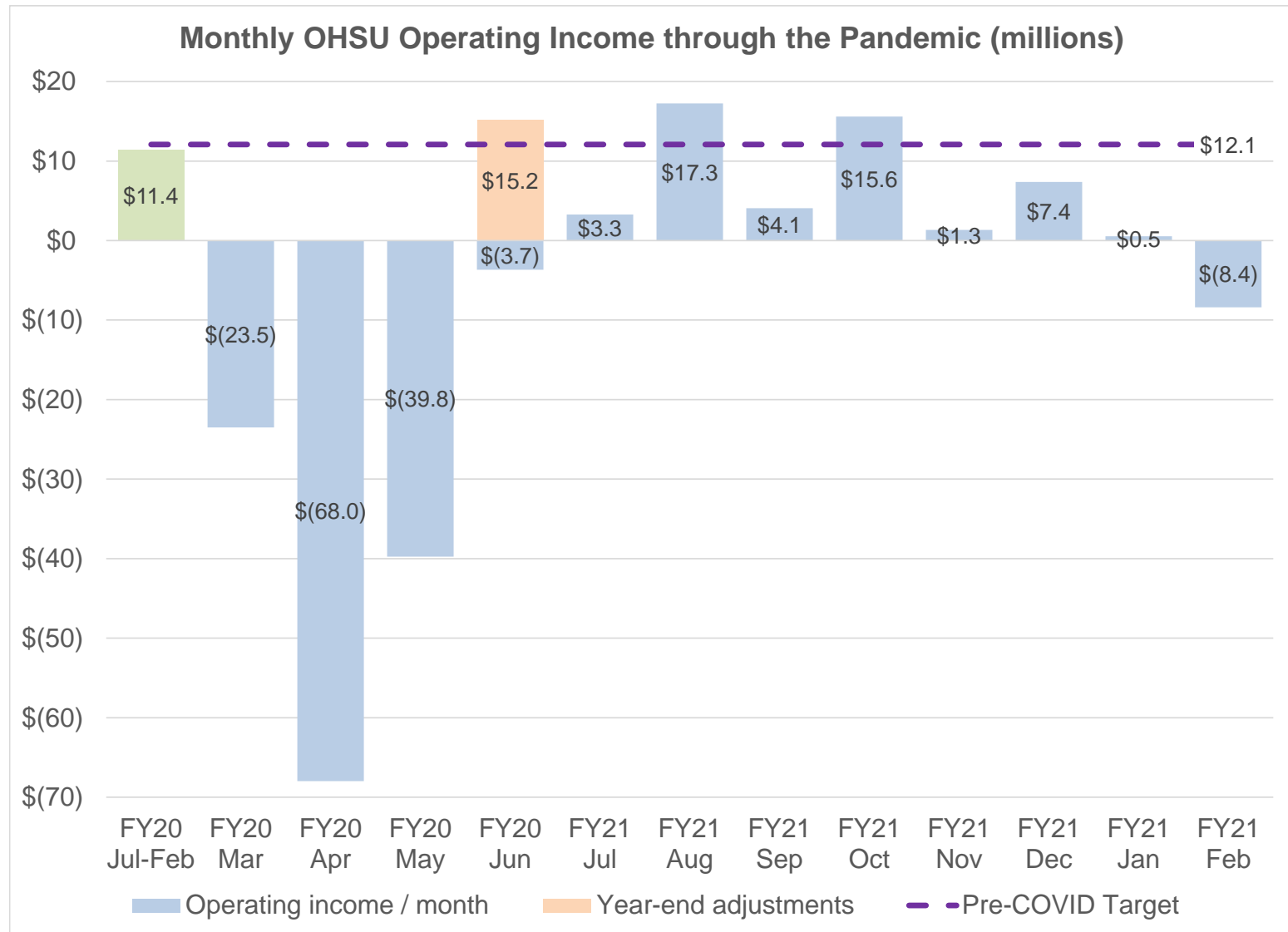
Overview of FY21 February YTD Results

- This document presents financial results through February 2021 before turning to preliminary budget planning for FY22 plus an update to OHSU's investment policy.
- OHSU operating income through 8 months is \$41 million, \$67 million above the loss assumed in the revised budget approved in September, even after the \$23 million one-time payment (accrued in December and paid in February) to compensate faculty and management for salary reductions taken in July – September.
- Increased complexity of cases, stable payer mix, strong pharmacy growth, and tight control of services & supplies all contribute to above-budget performance.
- But after recovering sharply last summer, earnings have generally softened recently. February shows an \$(8) million loss for the month, the first in this fiscal year and a \$(15) million negative swing from the prior YTD run-rate:
 - \$(1) million is unreimbursed vaccination costs that should be covered by FEMA later
 - \$(14) million is largely in the direct margin of OHSU Health + School of Medicine— with over 80% of total OHSU revenues, the largest driver of OHSU earnings this year, up and down.
- The February decrease is a combination of softening patient revenues and rising expenses, including the impact of an increase in behavioral health census (seen nationally) and difficulty filling nursing positions, plus delayed cases due to winter storms.

YTD Earnings \$67M > Budget with Salary Payback

OHSU February YTD (millions)	FY20 Last Year	FY21 Budget	FY21 Actual	Actual - Budget
Net patient revenue	\$1,589	\$1,532	\$1,583	\$51
Medical contracts	79	77	80	4
Grants & contracts	310	306	326	20
Gifts applied	67	55	50	(5)
Tuition & fees	55	54	56	2
State appropriations	26	26	26	0
IGT funding	90	86	90	4
Other revenue	138	134	149	14
Operating revenues	2,353	2,271	2,361	90
<i>Year-over-year growth</i>	11.2%		0.3%	
<i>Adjusted growth*</i>			-0.3%	
Salaries & benefits	1,369	1,407	1,423	16
Rx & medical supplies	378	393	405	12
Other services & supplies	372	354	350	(4)
Depreciation	117	119	119	1
Interest	26	24	23	(1)
Total expenses	2,262	2,297	2,320	22
<i>Year-over-year growth</i>	13.1%		2.6%	
<i>Adjusted growth*</i>			1.9%	
Operating income	\$91	\$(26)	\$41	\$67
<i>Operating margin</i>	3.9%	-1.2%	1.7%	
<i>EBITDA margin</i>	10.0%	5.1%	7.7%	
<i>*Adjusted for \$14m passthrough of out-of-state hemophilia grant activity</i>				

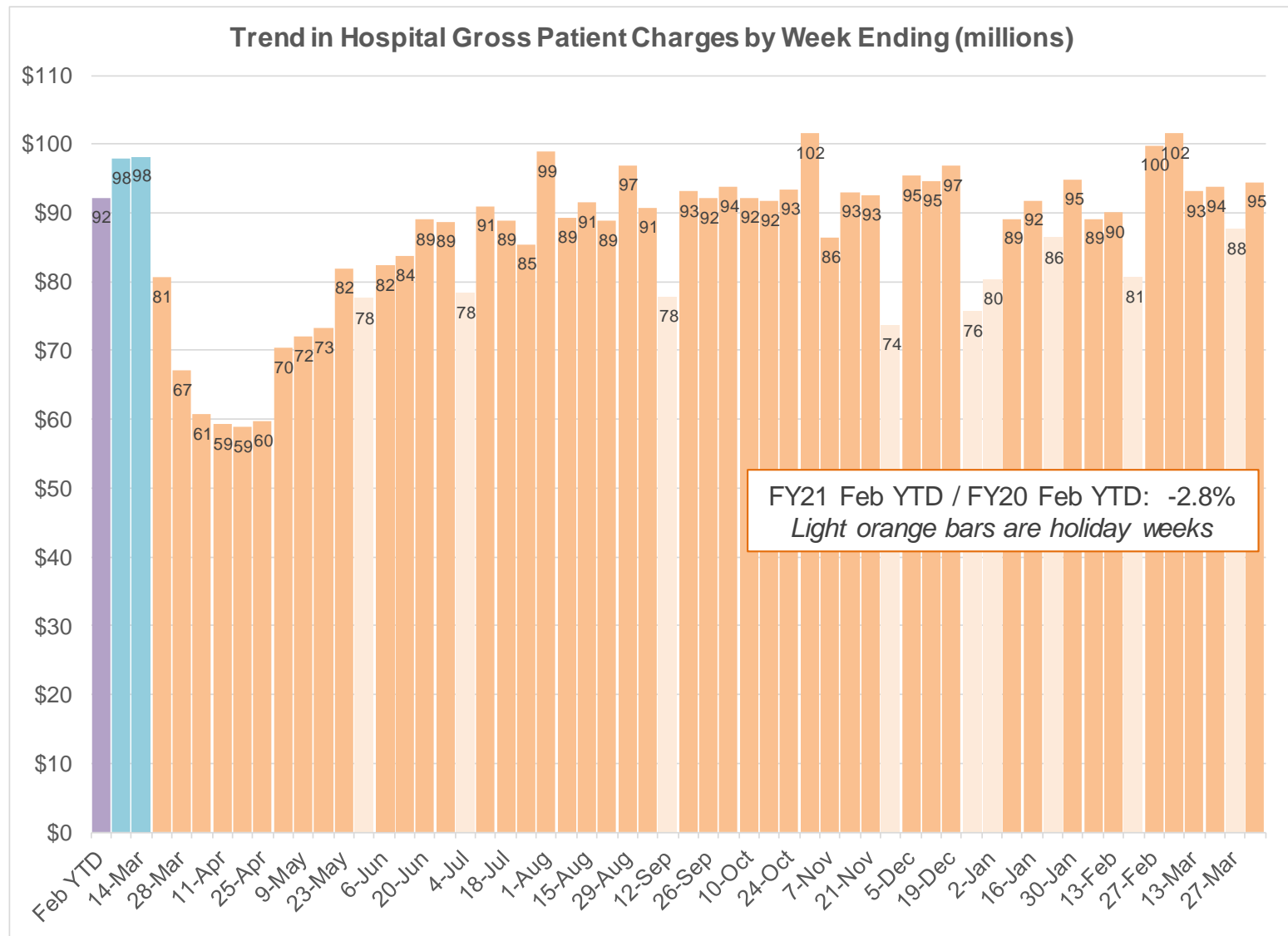
February has First Monthly Loss this Fiscal Year



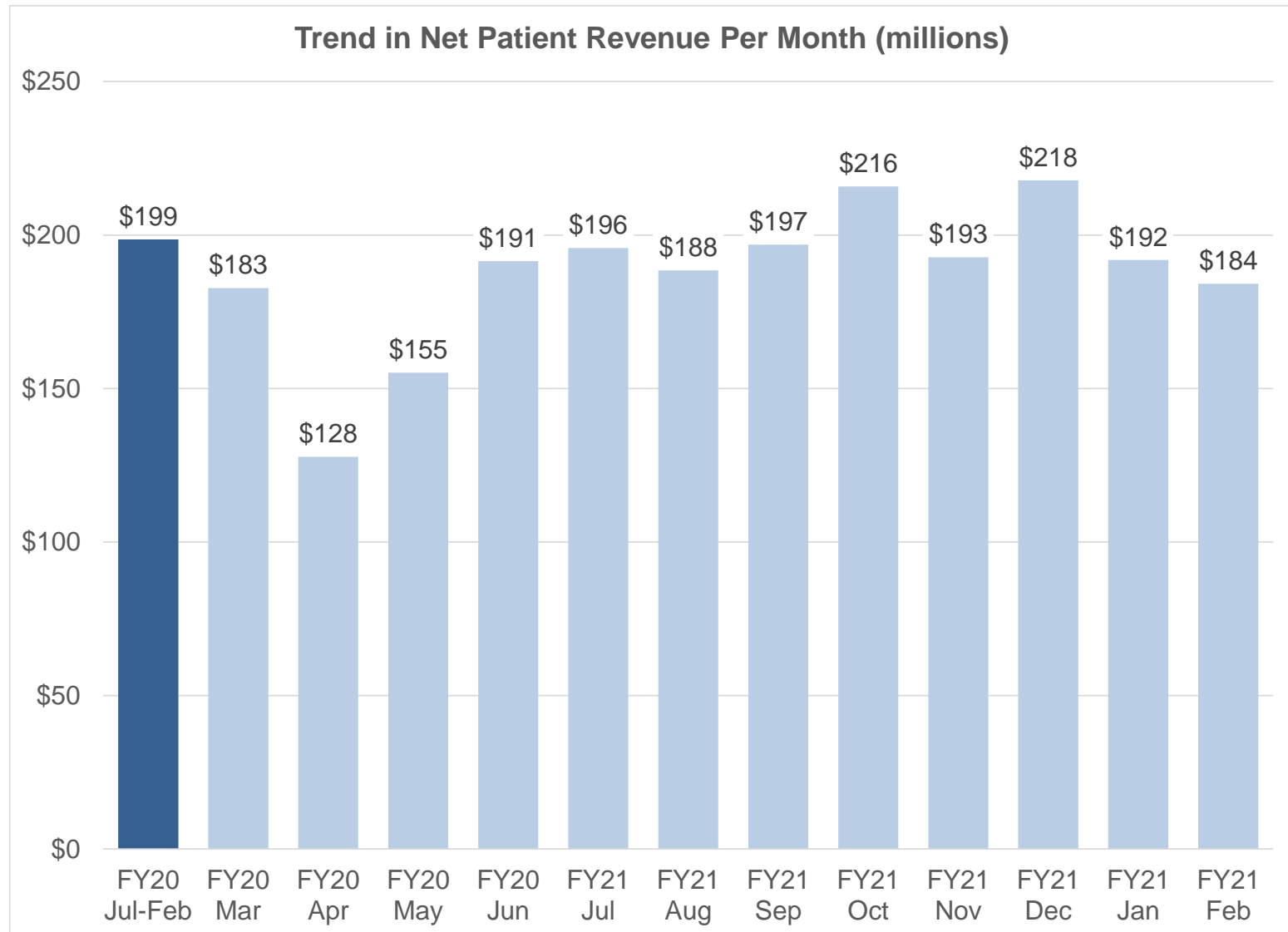
Overview of February Results (continued)

- Viewing February results another way, one year ago pre-COVID, FY20 February YTD total OHSU revenues were up 11% above prior year.
 - This year with COVID, FY21 February YTD total revenues are flat against prior year.
 - We expect revenue growth into FY22 to be somewhere in the middle. A 6% increase in total OHSU revenues will provide \$215 million in incremental funds next year to cover all increases in spending, allocated among:
 - Higher wages & benefits for existing faculty & staff
 - Hiring more faculty & staff
 - Spending more on services & supplies
 - Spending more on infrastructure capital
 - Spending more on new program capital.
- *Preliminary March financial results will be available by next week's Board meeting.*

Weekly Trend in Aggregate OHSU Hospital Activity



Patient Revenue Softens after Rising Last Summer

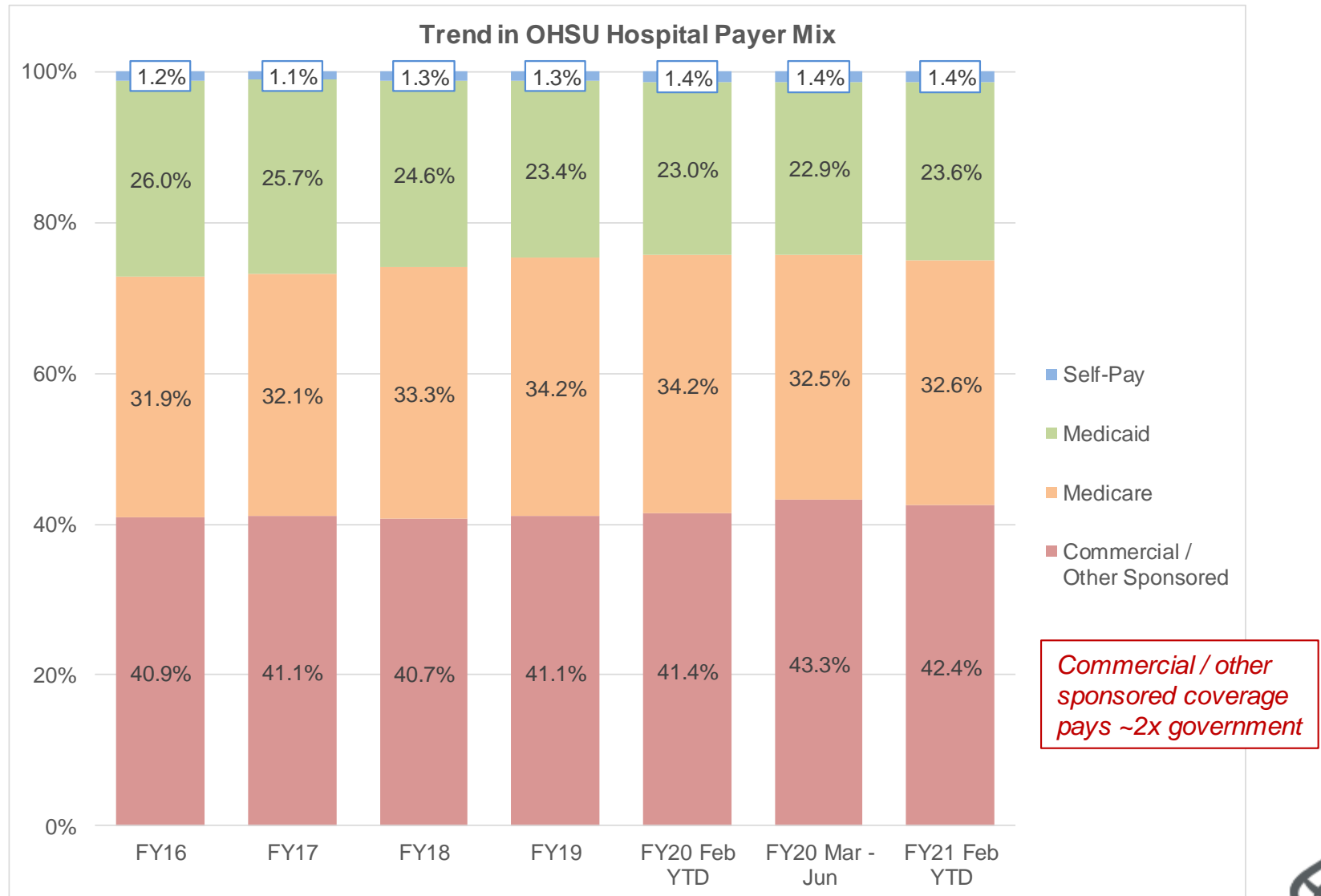


Aggregate Patient Activity -2.8% Below Prior Year

- After plunging -40% in April 2020, patient activity rebounded quickly last summer as non-urgent procedures resumed but has softened recently.
- The issue is not a lack of demand for OHSU's tertiary and quaternary services, but supply: 30 beds in double rooms are closed due to COVID, while nurse staffing shortages have reduced ICU beds by 8 and limited OR and procedural capacity.
- Compared to last year pre-COVID, admissions are down -14% offset by +8% in casemix index or complexity, while the increase in behavioral health cases has further increased length of stay.

Feb YTD Patient Activity	FY20	FY21	% Change
Inpatient admissions	19,398	16,707	-13.9%
Average length of stay	6.17	6.72	8.9%
Average daily census	481	443	-8.0%
Day/observation patients	29,428	26,414	-10.2%
Emergency visits	32,825	26,415	-19.5%
Ambulatory visits	693,179	712,999	2.9%
Surgical cases	24,876	21,428	-13.9%
Casemix index	2.30	2.49	8.3%
Outpatient share of activity	53.7%	54.5%	1.5%
CMI/OP adjusted admissions	96,256	91,279	-5.2%
Gross charges (5% rate adj.)	3,376	3,283	-2.8%

Payer Mix Still Largely Unaffected by COVID-19



Key Healthcare Take-Aways from February

- Volumes lower since November, not due to demand but staffing and complexity increases. Actions include:
 - “Hospital at Home” program with Adventist Health
 - Complex Care Unit & IMPACT (case management for substance abuse patients) at Hillsboro Medical (summer opening)
 - Connected Care Center (system-wide outpatient triage and scheduling).
- Payer mix stable despite high unemployment.
- Managing labor to volume but at a premium (agency, traveler and overtime):
 - Redeployment of staff in response to COVID demands
 - Managing morale after a full year of pandemic
 - Active recruitment to replace agency nurses by June.
- Medical supplies and pharmacy spending in alignment with volume.
- Key Performance Indicators (KPIs) for behavioral health census, South (adult inpatient) OR utilization, number of available community post-acute beds, contract labor by department / weeks of commitment, bedside and OR nurse vacancies.

Net Worth & Cash to Debt Through February

- In addition to \$41 million in operating income through February, we recorded:
 - \$72 million of investment return on OHSU-held cash & investments
 - \$56 million of additional CARES Act grants as non-operating income so far in FY21 (with another \$15 million received in cash but deferred until we get greater clarity on the federal rules)
 - Foundation net worth is up \$109 million with endowment gains and gifts to the \$2 billion OHSU Onward campaign.
- OHSU's consolidated balance sheet continues to strengthen accordingly, with net worth up \$284 million or 7.9% in 8 months.
- We have continued to improve the ratio of OHSU-held cash to debt, but revenue is flat compared to sustained annual growth pre-COVID.
- Liabilities as of February 28th include \$974 million of long-term debt at 3.5% average interest, \$503 million of unfunded PERS pension obligations at approximately 7%, and \$207 million of interest-free CARES Act loans to be repaid in 2021 and 2022.
- Although many risks remain, OHSU has preserved its underlying financial position, providing a firm platform to build back to where revenues cover both operations and new investments in people, programs and places on a sustainable basis.

Net Worth Up \$284M with Investment Gains

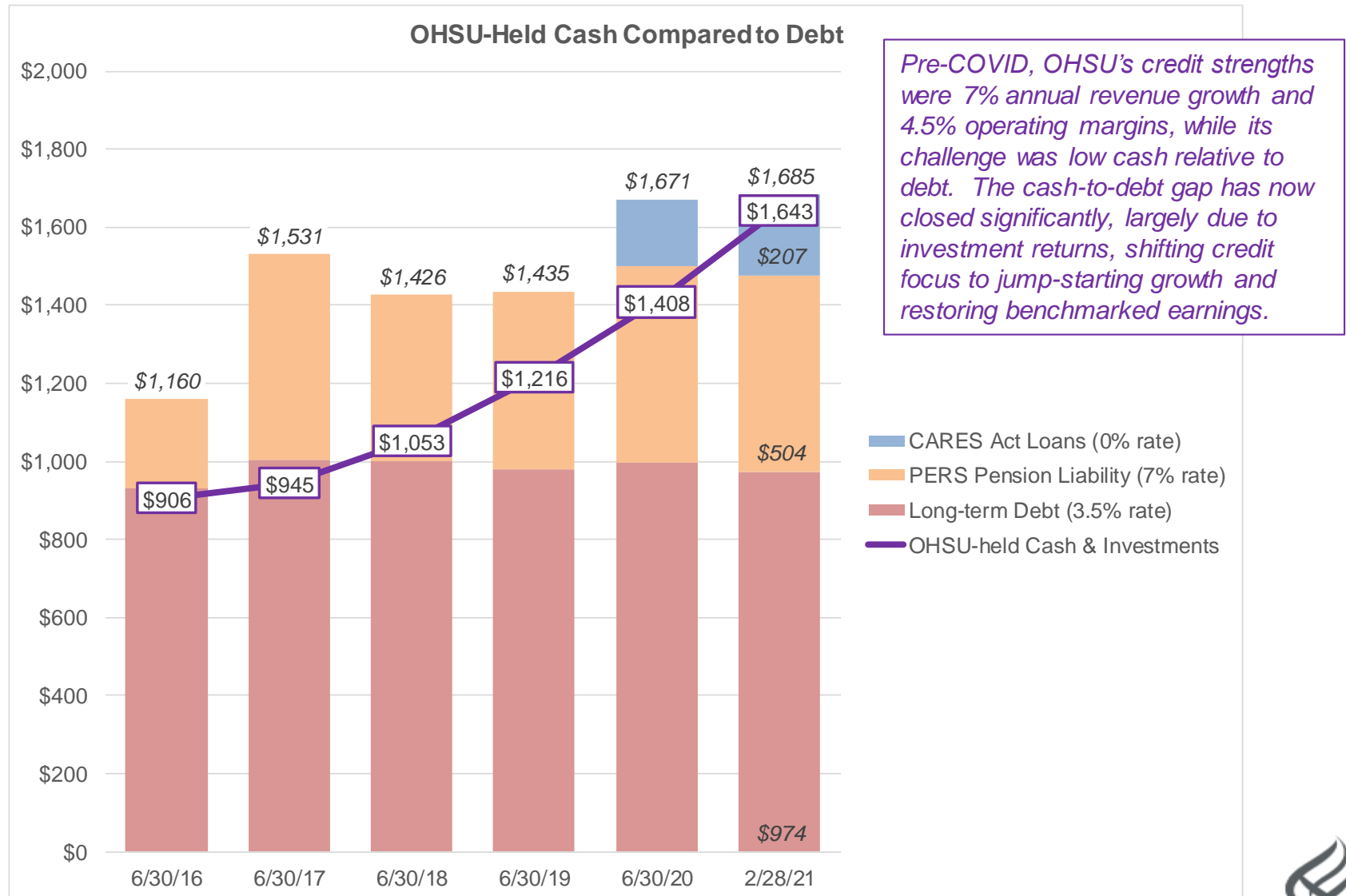
Balance Sheet (millions)	6/30/20	2/28/21	Change
OHSU-held cash & investments	\$1,408	\$1,643	\$235
Interest in OHSU Foundation	1,342	1,451	109
Net property, plant & equipment	2,103	2,044	(60)
CARES Act loans	(170)	(207)	(37)
Long-term debt	(997)	(974)	24
PERS pension liability	(504)	(504)	0
Working capital & other, net	424	436	12
Consolidated net worth	3,605	3,889	284
OHSU operating income			41
OHSU investment return			72
CARES Act grants			56
Gift & grant funded capital			5
Other non-operating items			(1)
Subtotal - Increase in University net worth			174
Contributuions to the Foundation (GAAP basis)			64
Foundation investment return			120
Gift & endowment transfers to OHSU			(63)
Foundation operating expense			(12)
Other non-operating items			1
Subtotal - Increase in Foundation net worth			109
Total increase in consolidated net worth			\$284

February YTD Operating Cash Flow +\$235M

- In the first 8 months of FY21, OHSU-held cash & investments increased by \$235 million from positive operating earnings, strong investment returns, CARES Act grants and loans, and deferral of capital expenditures.
- Last April, the Board authorized two short-term lines of credit for \$100 million and \$50 million to provide extra liquidity at a time of great economic uncertainty. Although we have not drawn on either, we plan to keep the \$100 million line of credit at US Bank in place going forward.

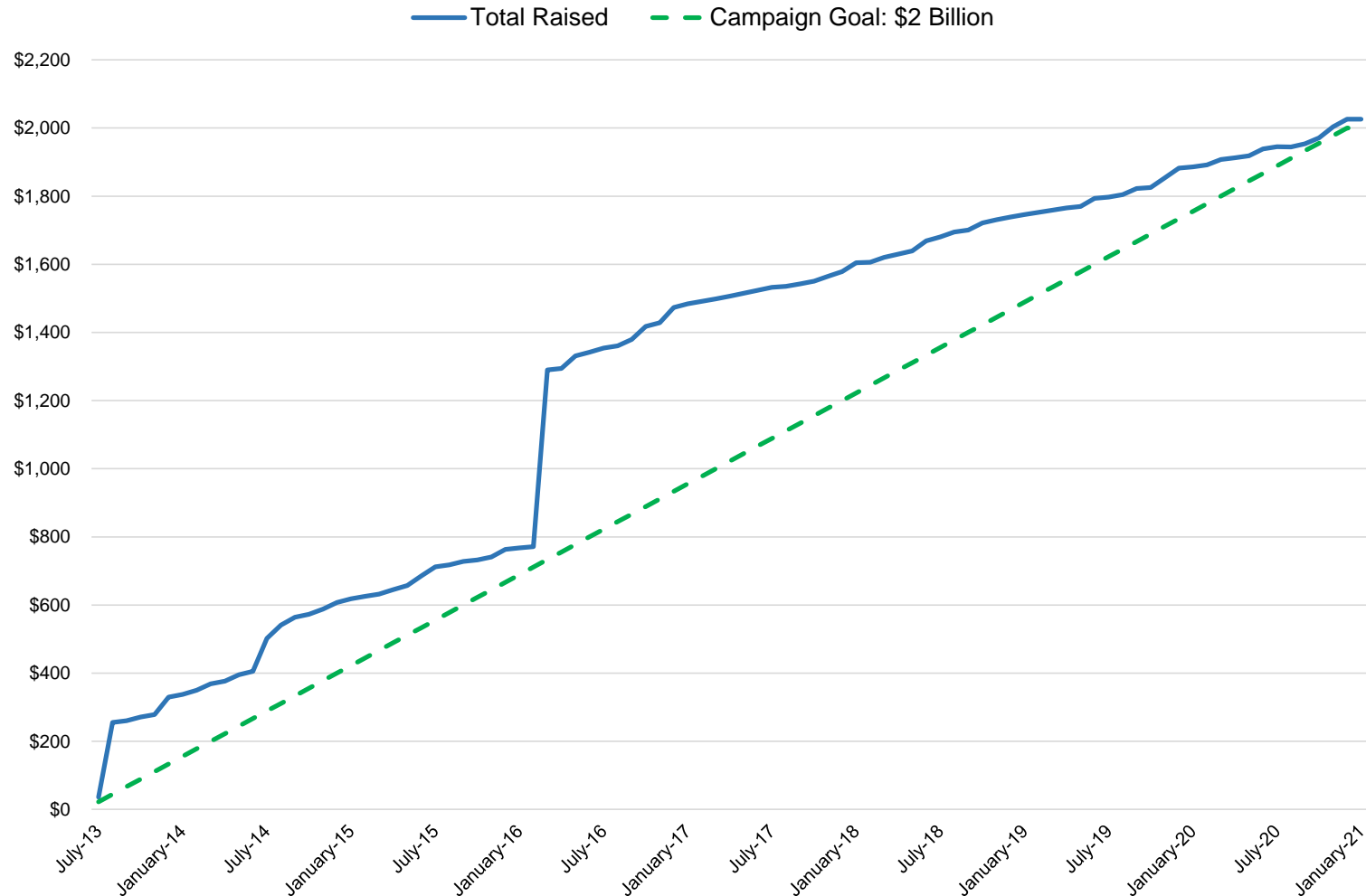
February YTD Cash Flow	(millions)
Operating income	\$41
Depreciation	119
Investment return	72
CARES Act grants recorded	56
CARES Act loans	37
Sources of cash	327
Principal repaid	(24)
Capital expenditures	(60)
Patient A/R & other, net	(8)
Uses of cash	(91)
Sources less uses of cash	\$235

Improving Ratio of OHSU-Held Cash to Debt



Onward Campaign Reaches \$2 Billion Goal

**Total Raised as of December 2020 \$2.02 Billion
(Dollars in Millions)**



Overview of Preliminary FY22 Budget

- Budget development is underway throughout OHSU based on:
 - Current year results, including last summer's recovery and winter's softening
 - Expectation that COVID census will increase through Memorial Day before zeroing out by Labor Day with widespread vaccination
 - Planning for a return to a “new normal” with hybrid telecommuting
 - Continued strong demand for OHSU's tertiary and quaternary services (20% of OHSU Hospital's patients use 90% of resources and generate ~120% of earnings)
 - Active nurse recruitment to staff ICUs and ORs
 - Managing OHSU Health + School of Medicine on a combined direct margin basis
 - Expected 2% tuition increase with Tuition Promise for eligible programs
 - Focus on OHSU 2025's first goal of putting people first.
- The preliminary FY22 budget targets:
 - 6% top-line growth to \$3.74 billion (with recovery from recent softer revenue)
 - 1% operating margin
 - \$190 million in capital spending
 - Balanced cash flow.
- We will return in June with a proposed budget for the Board's consideration.

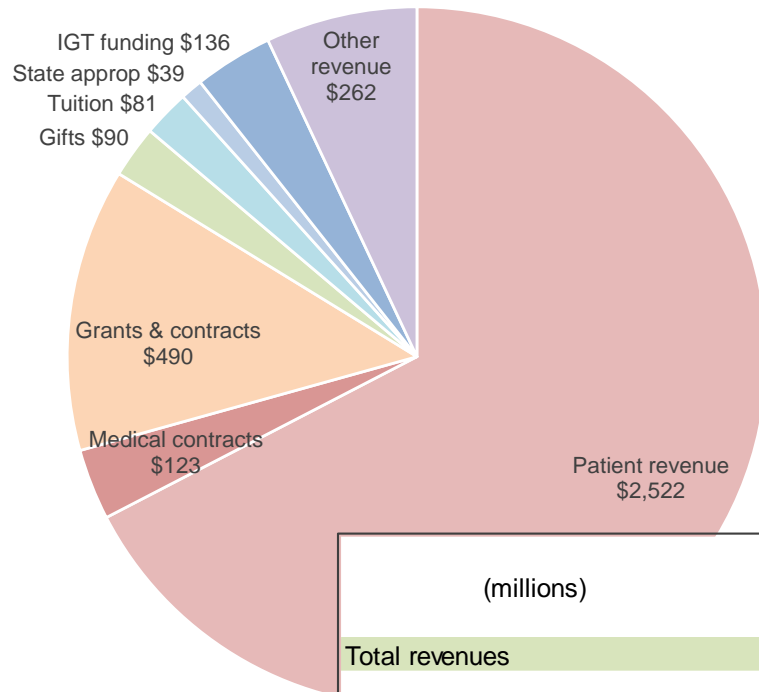
Applying OHSU 2025 Plan: Putting People First



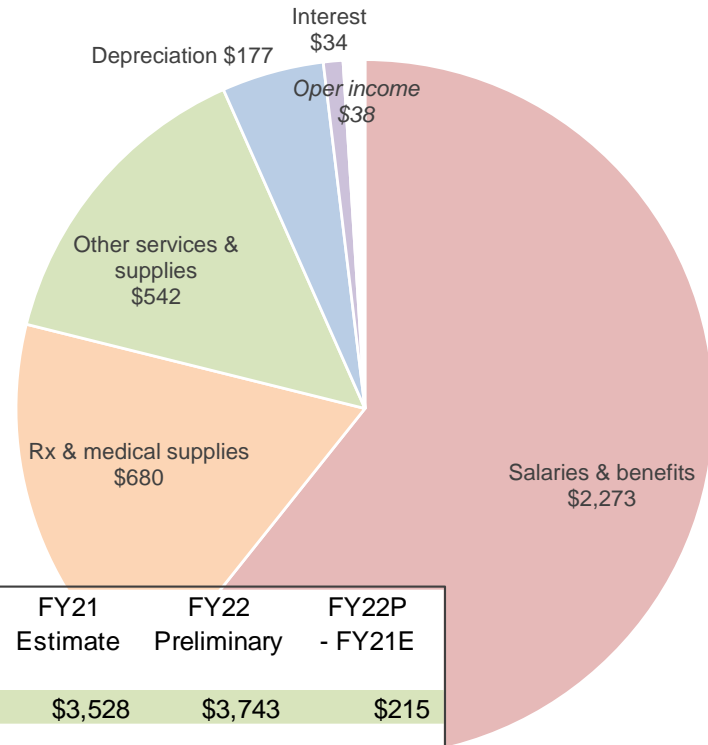
- 5,300 OHSU members contributed to the OHSU 2025 future picture with 6 goals.
- Although we paused implementation due to bandwidth and financial constraints, a University Cabinet Study Group are reprioritizing objectives based on COVID-19 impact and current conditions.

Preliminary FY22 Budget in a Nutshell

FY22 Preliminary Budget Revenues
(total = \$3.74 billion)

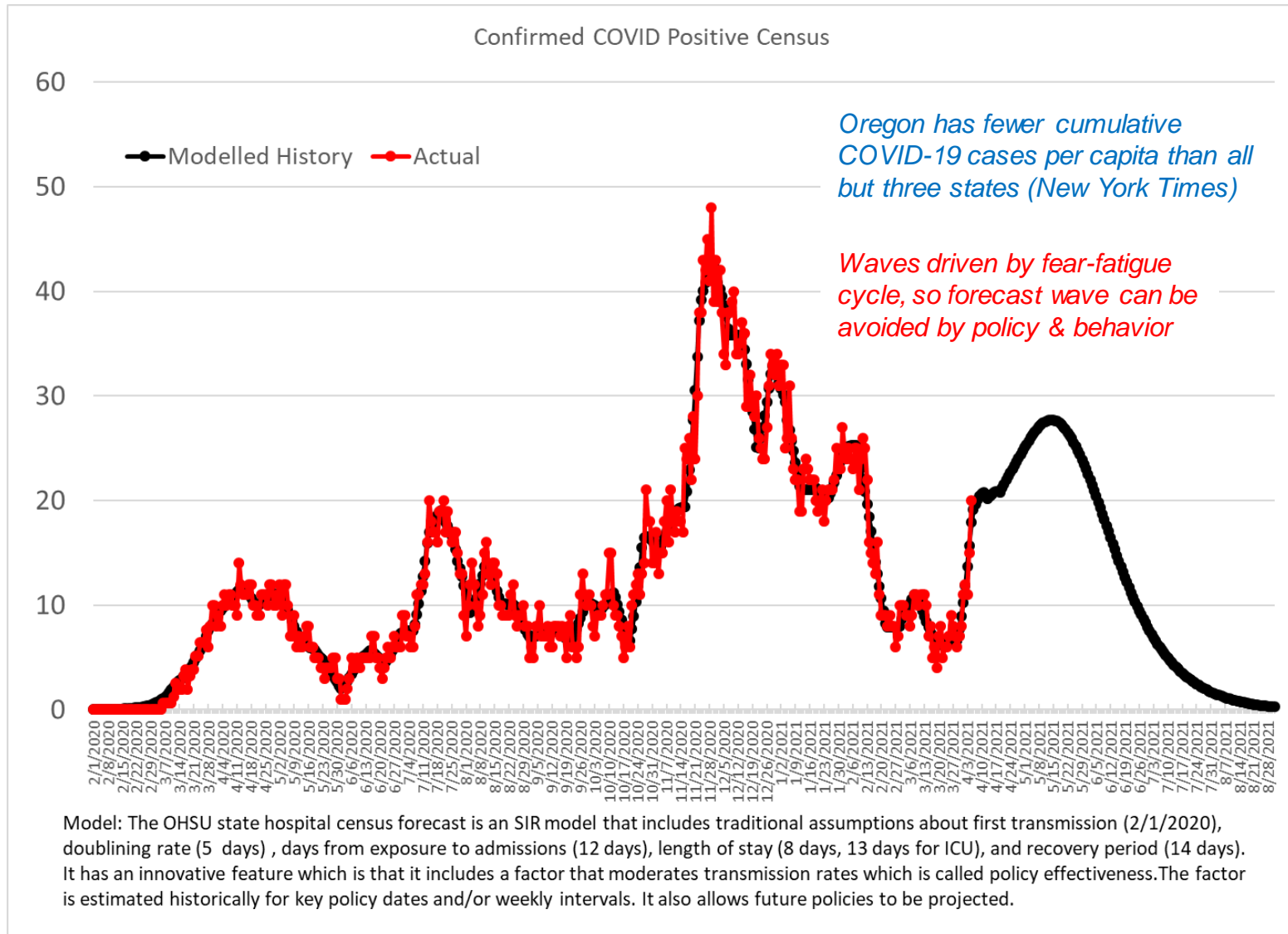


FY22 Preliminary Budget Expenses
(total = \$3.70 billion)



(millions)	FY20 Actual	FY21 Estimate	FY22 Preliminary	FY22P - FY21E
Total revenues	\$3,391	\$3,528	\$3,743	\$215
Salaries & benefits	2,079	2,158	2,273	115
Rx & medical supplies	564	616	680	64
Other services & supplies	564	495	542	46
Depreciation & interest	213	213	211	(2)
Total expenses	3,420	3,482	3,705	223
Operating income	\$(29)	\$46	\$38	\$(9)
<i>Operating margin</i>	<i>-0.9%</i>	<i>1.3%</i>	<i>1.0%</i>	
<i>EBITDA margin</i>	<i>5.4%</i>	<i>7.3%</i>	<i>6.6%</i>	

OHSU + Hillsboro Census Forecast with Vaccine

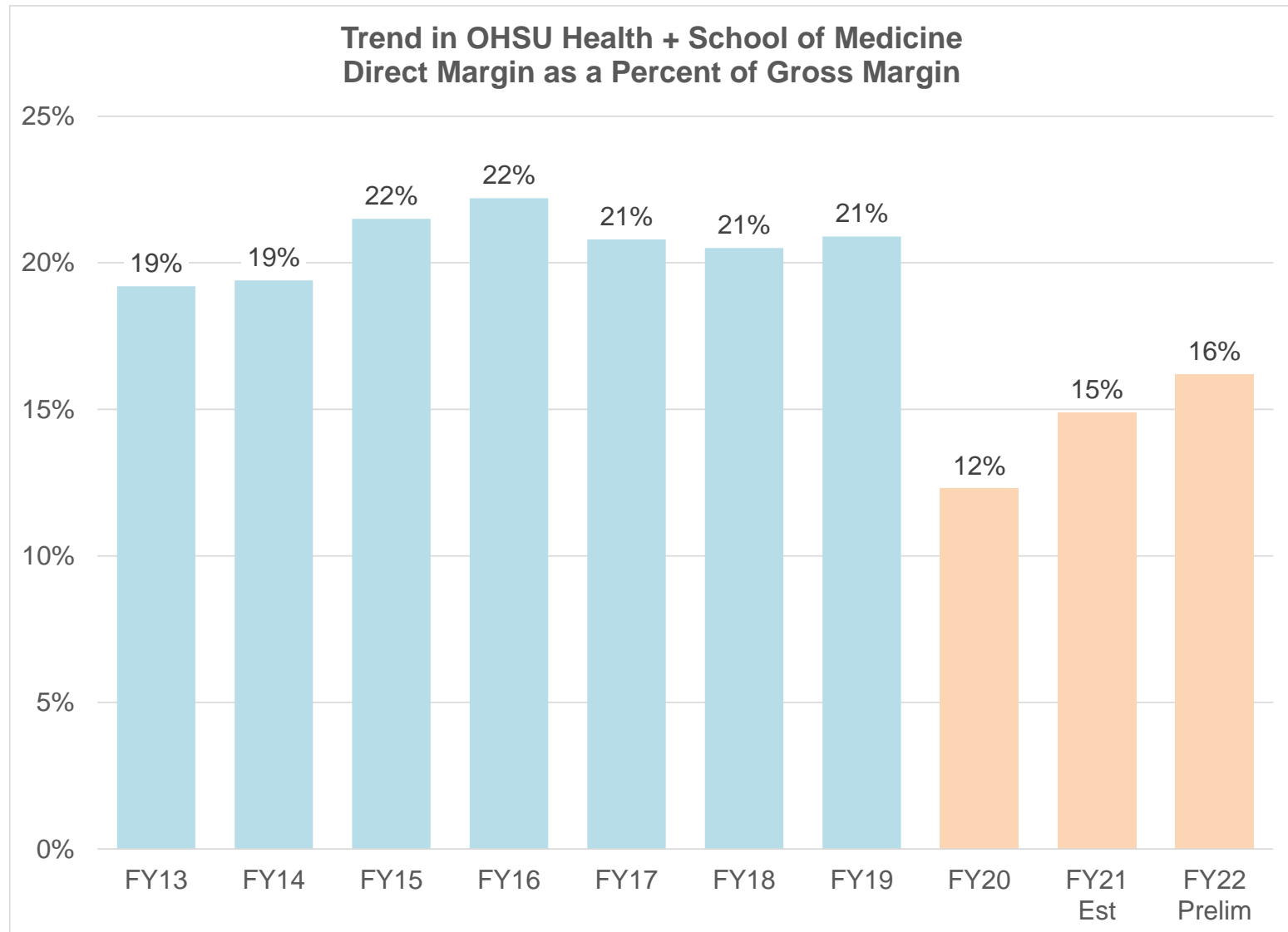


Source: OHSU COVID Forecast Model, 4-9-21

Managing on a Combined Direct Margin Basis

- In mid-FY20 we agreed to manage the budgets of OHSU Health and the School of Medicine on a combined direct margin basis.
- This new approach acknowledges both the centrality of clinical faculty practice to the hospital's finances and the interdependence of the school's clinical, research and education missions.
- It is also intended to focus effort on external revenues and directly managed expenses rather than on internal transfers (IAs and OCA).
- Gross margin = external revenues less pharmacy & medical supplies ("cost of goods sold") netting Legacy cancer collaborative transfers here.
- Direct expense = salaries & benefits plus other services & supplies that are directly managed by the hospital or school and exclude OCA, insurance, interest, depreciation.
- Direct margin = gross margin less direct expense
- In the 7 years pre-pandemic, Health + SoM direct margin averaged 20.6%. It fell to 12% in FY20 due to the first impact of COVID-19 (before CARES Act grants). The preliminary budget targets recovery to 16% in FY22 (see next page).

Recovery in OHSU Health + SoM Direct Margin

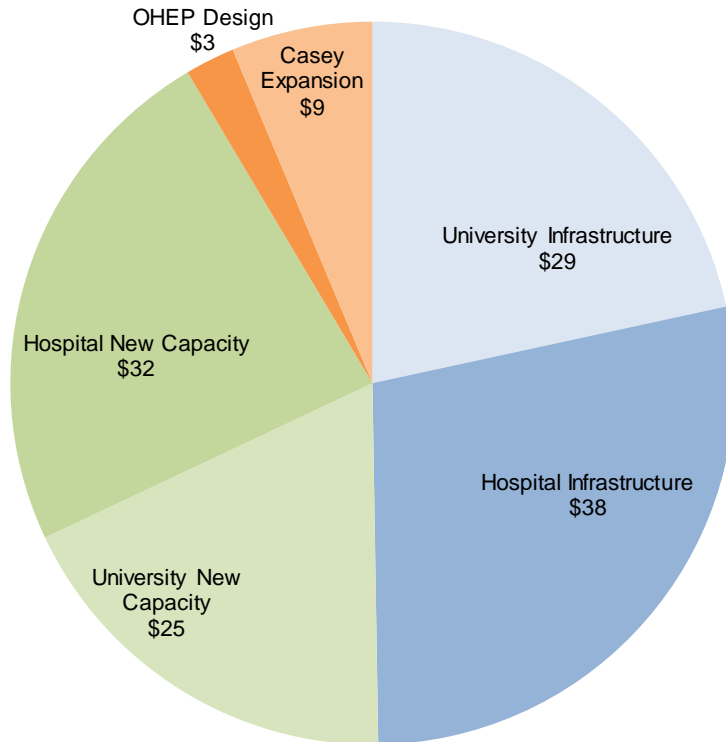


Overview of FY22 Capital Budget & Cash Flow

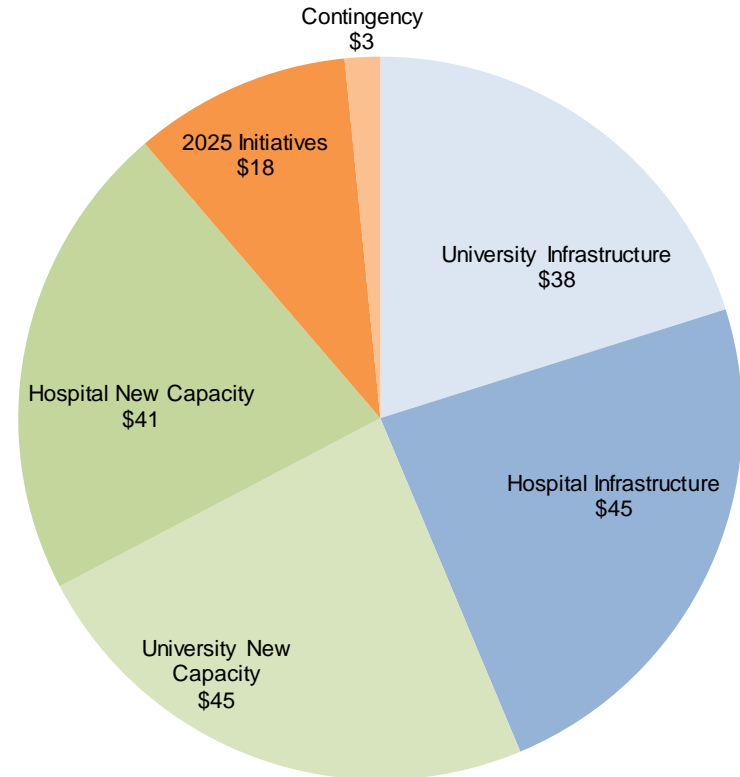
- During the past pandemic year, federal fiscal support to the US economy totals \$5.5 trillion, while the Federal Reserve added \$3.5 trillion in monetary support.
- Fiscal and monetary stimulus shows up on OHSU's books through CARES Act grants, investment income and new gifts received in excess of gifts spent.
- In the 20 months from June 2019 to February 2021, OHSU's net worth is up \$270 million and OHSU-held cash & investments are up \$220 million *net of CARES Act loans*. These gains include \$94 million in CARES Act grants recorded to date plus \$222 million in investment return and net gifts.
- Pre-COVID, annual capital budgets were expected to increase from \$150 million to \$175 million in line with depreciation. Annual capital excludes major buildings funded by debt, State grants or philanthropy, such as RLSB, KCRB, CHH-2 or OHEP.
- Instead, we reduced FY21 capital spending by \$15 million to \$135 million in order to mitigate financial risk.
- With widespread vaccination bringing the end of the pandemic in sight, we plan to increase capital spending to \$190 million in FY22, increasing the annual base to \$175 million plus the \$15 million deferred from FY21.

Preliminary Capital Budget Compared to FY21

FY21 Approved Capital Budget (total = \$135m)



FY22 Preliminary Capital Budget (total = \$190m)

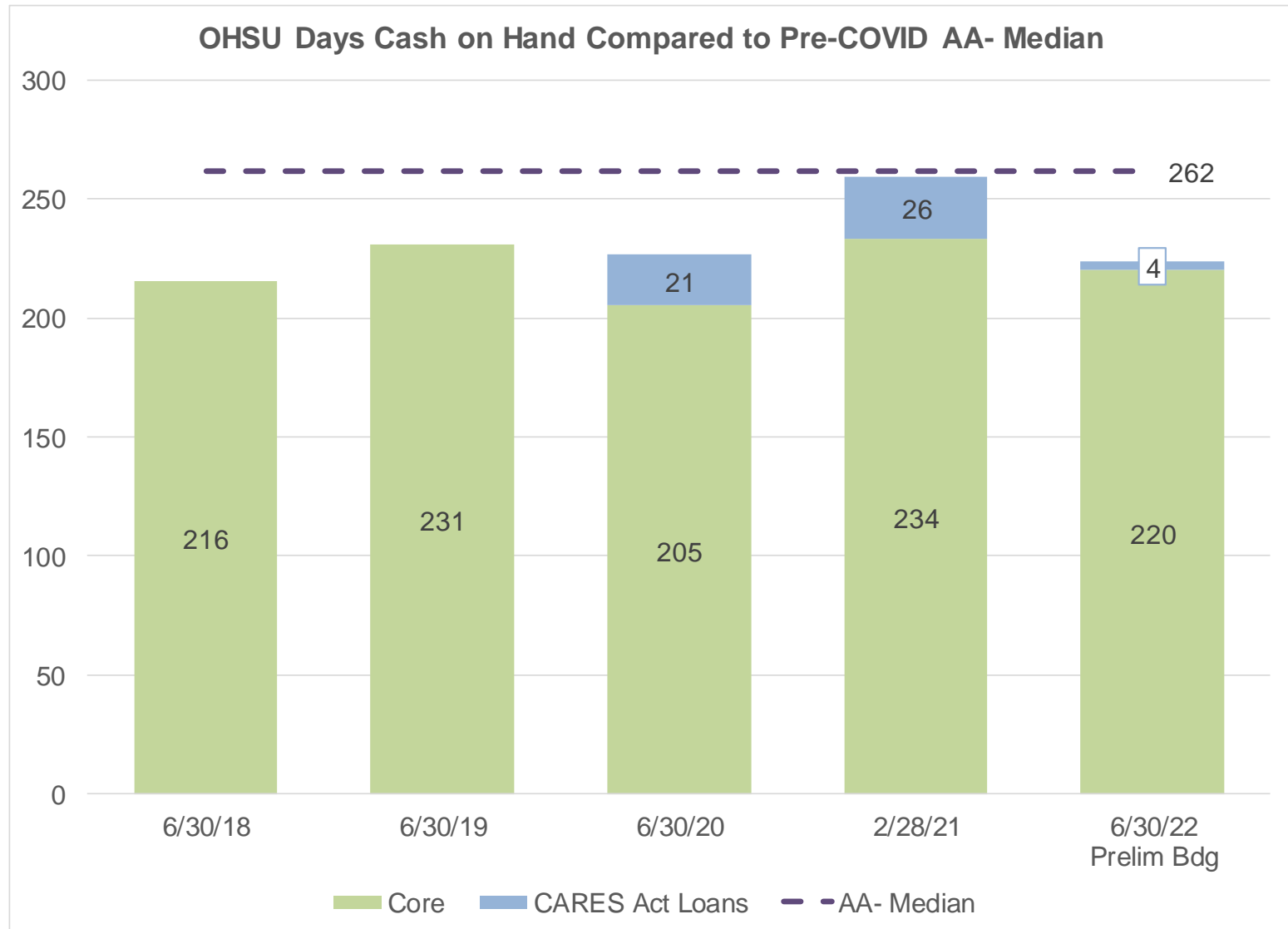


Preliminary FY22 Capital Budget & Cash Flow

- With 6% growth and a 1% operating margin, a \$190 million capital budget results in essentially balanced cash flow next year, deploying some of the improved liquidity banked during the pandemic.
- We are targeting a 4% total return on ~\$1.5 billion of OHSU-held cash & investments while pre-paying \$25 million of OHSU's \$503 million PERS pension liability. This is our most expensive debt, with an effective 7% interest rate and 20-year maturity.

FY22 Preliminary Cash Flow	(millions)
Operating income	\$38
Depreciation	177
OHSU-held investment return	60
Sources of cash	275
Principal repayment	(24)
Capital expenditures	(190)
Increase in patient A/R	(24)
PERS liability prepaid	(25)
Uses of cash	(263)
Sources less uses of cash	\$12
<i>Excludes repayment of CARES Act loans</i>	

Days Cash with Repayment of CARES Act Loans



Updated Investment Approach with ESG Screen

- In January 2020, we introduced at the Finance & Audit Committee a plan to increase OHSU's expected long-term investment return, while prudently increasing risk and maintaining debt covenant levels.
- This will shift OHSU's consolidated unrestricted portfolio from its past 25% in equities and 75% in fixed income to 60% equities / 40% fixed income over the next two years. This is benchmark for similar organizations, while a 2019 enterprise risk management analysis showed this move to be an acceptable balance of risk and long-term return.
- We subsequently added an Environmental, Social and Governance (ESG) screen consistent with the University's missions in advancing health & well-being, through a widely-used MCSI external methodology. This approach screens out fossil fuel investments, among other ESG weighting factors.
- OHSU's investment advisor, Mercer, has identified a set of best-performing passively-managed equity funds and core bond managers using this ESG approach, from which we propose:
 - Blackrock ACWI ex-Fossil Fuels ESG Focus Index Fund for equity
 - JP Morgan Carbon Transition Core Bond Strategy for fixed income
- With review by the Finance & Audit Committee on April 9th, we ask for full Board approval of this refined approach at next week's meeting.

Investment Objectives for Non-Endowment Funds

- OHSU and the Foundation together have approximately \$3 billion of cash & investments, of which \$2.1 billion is unrestricted including \$1.5 billion held by OHSU directly and \$600 million at the Foundation (most of the rest is endowment).
- OHSU's investment objectives for non-endowment expendable resources are:
 - Liquidity (ready access to resources)
 - Capital preservation (moderating market risk)
 - Risk management (in context of balance sheet and operations)
 - Income generation (not creating drag on total return).
- OHSU's core investment approach for non-endowment assets includes:
 - Broad-based, passively invested public equity exposure obtained through low-cost providers in an efficient structure to enhance returns over time
 - Actively-managed US investment grade fixed income invested across major core bond sectors, while allowing the manager flexibility to hold some non-investment grade bonds, to preserve capital and balance total portfolio risk
 - Both screened for ESG characteristics using an external framework.

MSCI ESG Scoring Framework

- Morgan Stanley Capital International (MSCI) is a global investment research firm that provides stock indexes, portfolio analysis tools and ESG products.
- MSCI ESG ratings are constructed using 1,000 data points from company disclosures and alternative data sets across 35 key ESG issues that are reviewed weekly.
- Focus is on the intersection between a company's core business and industry issues that can create significant risks and opportunities for the company, rated relative to the standards and performance of their industry peers.

MSCI ESG Score									
Environment Pillar				Social Pillar				Governance Pillar	
Climate Change	Natural Capital	Pollution & Waste	Env. Opportunities	Human Capital	Product Liability	Stakeholder Opposition	Social Opportunities	Corporate Governance	Corporate Behavior
Carbon Emissions	Water Stress	Toxic Emissions & Waste	Clean Tech	Labor Management	Product Safety & Quality	Controversial Sourcing	Access to Communication	Board	Business Ethics
Product Carbon Footprint	Biodiversity & Land Use	Packaging Material & Waste	Green Building	Health & Safety	Chemical Safety	Community Relations	Access to Finance	Pay	Tax Transparency
Financing Environmental Impact	Raw Material Sourcing	Electronic Waste	Renewable Energy	Human Capital Development	Consumer Financial Protection		Access to Health Care	Ownership	
Climate Change Vulnerability				Supply Chain Labor Standards	Privacy & Data Security		Opportunities in Nutrition & Health	Accounting	
					Responsible Investment				
					Insuring Health & Demographic Risk				

 Key Issues selected for the Soft Drinks Sub Industry (e.g. Coca Cola)

 Universal Key Issues applicable to all industries

Implementation Plan for Investment Approach

- Key principles:
 - Minimize transaction costs
 - Best market execution (flexibility to delay transactions due to market volatility)
 - Limit round-trip transactions
- Phase I:
 - Liquidate Vanguard Social Index Fund and Morgan Stanley Core Plus Bond Fund
 - Allocate proceeds from Morgan Stanley to JP Morgan Carbon Transition strategy
 - Re-invest proceeds from Vanguard into the Blackrock ESG strategy
- Phase II:
 - Liquidate the remaining Vanguard index fund strategy and re-invest proceeds to the Blackrock ESG strategy
- Phase III:
 - Transition the current JP Morgan bond allocation into the Carbon Transition strategy and Blackrock strategy systematically toward the long-term allocations (60% equity / 40% fixed income over 24 months).

Conclusion

- The preliminary FY22 budget targets 6% top-line growth to \$3.74 billion, 1% operating margin, \$190 million in capital spending, and balanced cash flow.
- Although we learn more each week, by tightening first and loosening later, OHSU is weathering and adjusting to the changing course of the virus and the economy.
- Carefully navigating unprecedented uncertainty, we have preserved the opportunity to reinvest in people, programs and places through OHSU 2025 as conditions improve.
- By putting people first, the University seeks to protect its core strengths:
 - 3,000 faculty, 15,000 staff and 4,000 learners
 - Market leader in AHC-level tertiary / quaternary care
 - Nationally ranked research program & state's science leader
 - Statutory role to educate Oregon's health care workforce
 - Public & legislative support
 - Balance sheet: improving ratio of OHSU-held cash to total debt.
- We seek Board approval of the refined ESG investment approach now.
- We will return in June with a proposed FY22 budget for the Board's consideration.



OHSU BOARD POLICY

Policy Title: INVESTMENT

Resolution No: 2021-04-01

Dated: DRAFT 04/09/2021

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PART A – GENERAL PROVISIONS

Purpose

This Investment Policy of Oregon Health & Science University (“OHSU” or “University”) sets forth policies to guide the day-to-day administration of all University investment activities. The contents of this policy are approved by the Board of Directors and are to be followed by administrative personnel.

Scope

All monies available for operation of the University (including departments or operating units which are part of the University) are covered by this policy. Monies derived from the sale of bonds or other financial obligations and monies held for Workers’ Compensation coverage and other risk management activities are also covered by this Policy. However, this policy does not apply to the investment activities of Oregon Health & Science University Foundation, to OHSU Insurance Company, to other entities owned or controlled by the University, or to monies held for deferred compensation or retirement plans.

The general powers of the OHSU Board of Directors, 1995 Oregon Laws, Chapter 162, Section 8 (codified at ORS 353.050), authorizes the University to:

“(6) Encourage gifts and donations for the benefit of the university and subject to the terms of the gift, retain, invest and use such gifts as deemed appropriate by the university.”

“(7) Acquire, receive, hold, keep, control, convey, manage, use, lend, expend and invest all funds, appropriations, gifts, bequests, stock and revenue from any source to the university.”

“(20) Purchase, receive, subscribe for or otherwise acquire, own, hold, vote, use, sell, mortgage, lend, pledge, invest in or otherwise dispose of and deal in or with the shares, stock or other equity or interest in or obligations of any other entity. The board may establish separate funds for such investments. The State of Oregon shall have no proprietary or other interest in such investments or such funds.”

Any gifts and donations received for the benefit of the University are governed by separate Board policy. Those gifts and donations deposited as Endowment Funds or designated by the Board as Quasi-Endowments are exempt from the provisions of this Investment Policy. This policy provides investment guidelines for Mission-Related Investments in Part B and for Ordinary Investments in Part C of this document.

Governing Laws and Accounting Method

All investments shall comply with applicable laws and regulations.

All investments of monies related to the sale of bonds and other tax-exempt obligations shall comply with all covenants with bondholders, bond insurers, and tax laws.

The University shall comply with Generally Accepted Accounting Principles (GAAP). The accounting principles include but are not limited to those issued by the Governmental Accounting Standards Board (GASB).

Finance and Audit Committee

The performance of each of the University's investments shall be monitored quarterly by the Finance and Audit Committee, by comparing the rate of return of the University's investments to appropriate benchmarks and/or comparable funds. The OHSU Board of Directors shall appoint not less than three of its members to serve on the Finance and Audit Committee.

The performance of each Mission-Related Investment, as described in Part B, shall be monitored by the President or by the President's designee.

Banking Services

The University may contract with financial institutions to provide primary banking services, including cash and investment management services and securities custodial services. The Finance and Audit Committee shall review these functions annually and determine necessary changes to the contract and/or vendor. The University may contract with financial institutions to provide trust services for any proceeds derived from the sale of bonds or other financing obligations.

The University shall seek banking services in accordance with its Contracting and Purchasing policies. The Finance and Audit Committee shall establish minimum qualifications for financial institutions to help ensure adequate safeguarding of University assets.

Voting Policy

The University shall exercise its voting responsibility with the goal of maximizing value consistent with governing laws and applicable investment policies. The University supports sound corporate governance practices within companies in which the University holds an investment.

With the exception of Mission-Related Investments, voting responsibility will be delegated to OHSU's Investment Managers who should act in the best interests of the institution.

Investment Principles

The University believes in efficient markets and generally invests with low cost passive managers. The University will utilize active management only where there a manager can demonstrate potential alpha, net of fees.

Periodic Review

This Investment Policy shall be reviewed annually by University staff and the results of the review reported to the Finance and Audit Committee and Board of Directors.

PART B – MISSION-RELATED INVESTMENTS**Definition**

Part B of this Investment Policy applies to all Mission-Related Investments. Part C of this Investment Policy shall not apply to Mission-Related Investments. As used in this policy, the term Mission-Related Investments means any investment of cash or other property for the purchase of debt or equity issued by any private, or not for profit or governmental corporation, partnership, joint venture, limited liability company, agency or instrumentality or other person or entity whose principal purpose is to engage in one or more of OHSU's statutory missions.

Investments that are derived from or produced by the University's activities shall also be covered by Part B of this Investment Policy.

Investment Guidelines

The President or their designee may invest in Mission-Related Investments, provided that any single Mission-Related Investment in excess of \$1,000,000 or which, when aggregated with all other Mission-Related Investments then outstanding, exceeds .5% of total assets of the University, shall be approved by the Board in advance.

Records

The Treasurer shall maintain a record of all Mission Related Investments including the date, amount, nature and performance of each such investment. The Finance and Audit Committee shall monitor the performance of the investment.

Voting and Disposition

The Chief Financial Officer or their designee is authorized to vote shares that represent ownership interests in OHSU Mission-Related Investments, provided that such actions are in the best interests of OHSU.

The Finance and Audit Committee shall oversee the disposition of shares that represent ownership interests in OHSU Mission-Related Investments. For OHSU Technology Transfer, acquisition and disposition of ownership interests in entities produced from the University's research activities will be governed by Policy 04-50-001, Intellectual Property and Royalty Distribution.

PART C – ORDINARY INVESTMENTS

Investment Objectives

As used in Part C of this Investment Policy, the term “investments” or “ordinary investments” means all investments other than Mission-Related Investments.

The primary objectives of the University's investment portfolio are to:

1. Maintain an overall level of financial assets to ensure sufficient capital is available for strategic initiatives, capital expenditures, and other capital requirements deemed appropriate.
2. Support borrowing capacity and credit rating stability.

With environmental, social and governance (“ESG”) investing playing an increased role in investment management and the University's strong commitment to diversity, equity and inclusion, the University considers various ESG factors as part of the investment selection process. These considerations should not be viewed in isolation when evaluating the appropriateness of holding an investment.

The University believes that it has the obligation to relentlessly strive to produce transformative positive impacts on the health and wellness of Oregonians and beyond.

Risk Tolerance

The risk characteristics of the portfolio will be measured to ensure that it maintains an acceptable level of volatility and drawdown exposure in light of the financial and operating environment of the University.

When determining the appropriate risk level, the following considerations apply:

1. Management drawdown tolerance
2. Credit rating stress test
3. Peer asset allocation

Other considerations include:

1. Time Horizon – The portfolios are intended to support the University into perpetuity. Therefore, a long-term horizon is appropriate.
2. Liquidity Needs – Given the potential for short-term cash needs from the portfolio,

and consideration of the impact on credit ratings, there is a preference for highly liquid investment vehicles. Illiquid or less-liquid investments can be considered; however, only after ensuring adequate funding is available to meet short-term needs.

See Exhibit A, Investment Management Principles and Guidelines, for a more detailed description of how the University investment portfolio is managed and administered.

Portfolio Structure and Performance

The University shall structure its investment portfolio in funds as deemed appropriate by the Finance and Audit Committee. The performance of the funds shall be monitored on at least a quarterly basis by comparing the returns to appropriate benchmark indices and/or comparable funds. On a quarterly basis, the Finance and Audit Committee will review the most current cash projections of funds available for general operations, capital construction and debt service to ensure that the duration of the University's investments is appropriate.

Banking and Investment Transactions

Only persons, including Investment Managers, designated by the Finance and Audit Committee shall transact investments of University funds. Notification to all appropriate Banking Service Providers and broker/dealers will be made when authorization changes are made. In order to accomplish these purposes, the Finance and Audit Committee by the signature of the chairperson shall authorize designated individuals and/or firms to buy, sell and transfer securities; to exercise the voting rights as security holders; to open and close bank accounts, investment accounts, and trust accounts; to enter into agreements regarding the accounts as may be required so that the accounts can be used for their intended purpose; to sign checks and other instruments withdrawing funds from the accounts; to authorize electronic and other fund transfers to withdraw funds from the accounts; to negotiate checks and other items payable to OHSU and its subsidiaries; and to otherwise conduct transactions on behalf of OHSU.

Prudence Standard

Investments shall be made with judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived.

Delegation of Responsibilities

The OHSU Board of Directors approves the Investment Policy. The Finance and Audit Committee monitors the investments and returns.

Management

OHSU Staff shall perform the following activities:

- Assist in the development of sound and consistent guidelines and overall investment strategy, including: portfolio objectives, constraints, and asset allocation;
- Periodically review this Investment Policy and recommend modifications for approval;
- Select or remove external professional service providers such as an Investment Consultant and Custodian(s);
- Select or remove Investment Managers for the University's portfolio;
- Provide timely communication of investment performance or any other investment program details to the Committee as requested

Investment Managers

Each Investment Manager must be registered with the Securities and Exchange Commission under the Investment Advisors Act of 1940 as Registered Investment Advisors or documented as exempt by the same laws. Investment Manager responsibilities shall include:

- Adhere to all guidelines set forth in the manager agreements entered into by the Investment Manager and the health system, where applicable;
- Discretionary investment management including decisions to buy, sell, or hold securities that will be used to meet the Investment Manager's specific objectives and within the guidelines of its stated strategy;
- Report, on a timely basis, investment performance results;
- Communicate any major changes to economic outlook, investment strategy, or any other factors which affect implementation of the investment process or the investment objective progress of the Investment Manager;
- Inform Management and the Investment Consultant regarding any material change to the Investment Manager's organization (i.e. changes in portfolio management staff, ownership structure, investment philosophy, etc.);
- Vote proxies, if requested by Management, on behalf of the health system and communicate such voting records to Management on a timely basis, where applicable;
- Execute all investment transactions with brokers and dealers qualified to execute institutional orders at the best execution possible.

Custodian

The Custodian(s) will maintain possession of the securities held on behalf of the portfolios, collect dividends and interest payments, redeem maturing securities, and affect the receipt and delivery following purchases and sales of assets. The Custodian(s) shall also perform regular accounting of the assets owned, purchased, or sold as well as the movements of assets in and out of the portfolios' individual accounts.

Permitted Investments

See Exhibit B for a listing of prohibited investments and transactions.

Payment/Delivery/Safekeeping

All securities purchased shall be held by a Securities Custodian in the University's name. Bond Funds shall be separately held and not co-mingled. Payment shall only be made for securities with receipt of sufficient evidence of title transfer that is consistent with modern banking practices. The University shall not deliver securities prior to receiving payment in full for the securities transferred. All transactions regarding principal and interest shall be made directly with the Securities Custodian.

Collateralization

The Treasurer shall ensure University compliance with ORS Chapter 295 relating to depositories of public funds and securities. Where applicable, the University will maintain funds with a Primary Banking Services Provider that meets the Depository Bank definition of ORS 295.005.

The Comptroller shall ensure that a Certificate of Participation has been issued by a Pool Manager (as defined under ORS 295.005) in an amount sufficient to cover University deposits maintained by the Primary Banking Services Provider and the Bond Trustee, if applicable.

Internal Controls/Recordkeeping

The Treasurer shall ensure the following internal control objectives are met regarding the investment portfolio:

1. Proper authorization for each transaction;
2. Physical existence and proper ownership;
3. Proper valuation;
4. Adequate record keeping; and
5. Proper safekeeping of investments.

Internal controls shall be evaluated through internal or external audit not less than annually.

Revision History: Adopted December 7, 1995 (Resolution No. 1995-12-10)
Revised May 5, 1999 (Resolution No. 1999-05-02)
Revised August 3, 1999 (Resolution No. 1999-08-11)
Revised September 17, 2002 (Resolution No. 2002-09-07)
Revised December 7, 2004 (Resolution No. 2004-12-19)
Revised June 28, 2007 (Resolution No. 2007-06-06)
Revised May 5, 2010 (Resolution No. 2010-05-07)
Revised October 24, 2013 (Resolution No. 2013-10-05)
Revised September 28, 2017 (Resolution No. 2017-09-13)

EXHIBIT A – INVESTMENT MANAGEMENT PRINCIPLES AND GUIDELINES

Investment Objective

A primary objective of the University's investment portfolio is to preserve the University's credit rating. The portfolio's asset allocation will be driven by considerations utilized in the credit rating process. The following are the key ratings metrics potentially impacted by changes in the value of the investment assets:

- Days Cash on Hand
- Unrestricted Cash and Investments vs. Total Debt

In order to preserve its credit rating, the University will seek to grow its investment assets at an equal or greater rate to the University's operating expenses and total debt level.

Investment Risk

In determining the appropriate trade-off between the targeted portfolio return and risk, OHSU staff will utilize consultant (as applicable), investment manager and third party's long-term capital markets assumptions. These assumptions are based on underlying market fundamentals (economic growth, interest rates, valuations, and other variables), and they are forward looking. These assumptions are updated quarterly, incorporating changes in market conditions.

Investment portfolio risk is defined as:

- Expected drawdown during a 95th percentile event (based on a normal distribution)
- Asset allocation relative to peer median hospital organizations

The maximum portfolio risk posture will never exceed the level at which the expected drawdown results in a credit rating downgrade (based on historical hospital peer ratings metrics).

Investment Management

Investment manager selection will be conducted based on investment manager ratings (as applicable). Given that markets are highly efficient, exposure based strategies will be utilized for portfolio implementation. Preference will be given to investment managers with lower fees. Investment management fees will be evaluated based on both a stand-alone basis and through the incorporation of each firm's broader relationship with the University.

Monies set aside for capital construction shall be invested in maturities that provide for projected future cash flow requirements. Maturities, investment asset classes and individual

securities within those asset classes will be managed to maximize total return while maintaining preservation of capital and providing for projected future cash flow requirements.

Monies that are set aside for debt service will have maturities managed to maximize total return while maintaining preservation of capital and satisfying requirements in the applicable borrowing documents.

The University may maintain amounts perpetually in mutual or money market funds that are not deemed sufficient to invest efficiently, taking into consideration administrative costs, fees charged by the bond trustee, and difference in yield opportunities. The University may invest monies that are held by the bond trustee for payment of debt service during the following business day, in overnight or in mutual or money market funds.

Ongoing Review and Management

A monthly performance report that includes performance of the portfolios, their sub-components, and investment managers will be monitored by OHSU staff. Additionally, a quarterly report that reviews the investment program, strategy, asset allocation, performance will be provided to the Finance & Audit Committee. The portfolio's asset allocation will be reviewed quarterly to incorporate changes to OHSU's capital planning forecast and risk tolerance. Additionally, OHSU staff will work with consultants, investment managers and third parties to evaluate and incorporate updated capital markets expectations and peer considerations.

EXHIBIT B – INVESTMENT LIMITATIONS

Unless otherwise specifically approved by the Finance and Audit Committee (or a designated individual) in writing, the following investments are prohibited within Ordinary Investments:

- Margin transactions or short sales
- Letter stock
- Speculative (non-hedged) use of options and futures
- Commodities
- Real estate, both direct holdings and commingled funds (except REITs are permissible)
- Unregistered securities and private placements (except those securities regulated by SEC Rule 144A).
- Direct loans or extension of lines of credit to any interested party.
- Leverage of any kind, unless permitted by the investment policy of a commingled investment vehicle, as considered under the below section.

The Committee may choose to use commingled investment vehicles (such as common trust funds, mutual funds, limited liability companies, and limited partnerships) to carry out their asset allocation and investment implementation strategy. In this case, such commingled investment vehicles shall:

- i. Be invested according to the investment guidelines contained in the applicable prospectus, trust agreement or offering documents of the commingled fund;
- ii. Vote proxies in the best interest of the investors in the fund;
- iii. Immediately notify OHSU Staff should the investment guidelines contained in the prospectus, trust agreement or offering document change; and
- iv. Immediately notify OHSU Staff should the personnel with the fund change.



**RESOLUTION NO. 2021-04-01
OREGON HEALTH & SCIENCE UNIVERSITY
BOARD OF DIRECTORS**

(Approval of Investment Policy Amendment)

WHEREAS, the Finance and Audit Committee conducts periodic reviews of certain policies adopted by the Board of Directors;

WHEREAS, members of the Committee reviewed the Investment Policy and provided their comments to the Board at the April 16, 2021 Board meeting; and

WHEREAS, the Board now wishes to adopt certain amendments to this policy;

NOW, THEREFORE, BE IT RESOLVED: the Board of Directors of Oregon Health & Science University hereby approves the amendments to the Investment Policy in the form attached hereto as Exhibit 1 to this Resolution, effective immediately.

This Resolution is adopted this 16th day of April, 2021.

_____ Yeas

_____ Nays

_____ Abstentions

Signed by the Secretary of the Board on April 16, 2021.

Connie Seeley
Board Secretary



OHSU BOARD POLICY

Policy Title: INVESTMENT

Resolution No: 2021-04-01

Dated: DRAFT 04/09/2021

Page 1 of 8

PART A – GENERAL PROVISIONS

Purpose

This Investment Policy of Oregon Health & Science University (“OHSU” or “University”) sets forth policies to guide the day-to-day administration of all University investment activities. The contents of this policy are approved by the Board of Directors and are to be followed by administrative personnel.

Scope

All monies available for operation of the University (including departments or operating units which are part of the University) are covered by this policy. Monies derived from the sale of bonds or other financial obligations and monies held for Workers’ Compensation coverage and other risk management activities are also covered by this Policy. However, this policy does not apply to the investment activities of Oregon Health & Science University Foundation, to OHSU Insurance Company, to other entities owned or controlled by the University, or to monies held for deferred compensation or retirement plans.

The general powers of the OHSU Board of Directors, 1995 Oregon Laws, Chapter 162, Section 8 (codified at ORS 353.050), authorizes the University to:

“(6) Encourage gifts and donations for the benefit of the university and subject to the terms of the gift, retain, invest and use such gifts as deemed appropriate by the university.”

“(7) Acquire, receive, hold, keep, control, convey, manage, use, lend, expend and invest all funds, appropriations, gifts, bequests, stock and revenue from any source to the university.”

“(20) Purchase, receive, subscribe for or otherwise acquire, own, hold, vote, use, sell, mortgage, lend, pledge, invest in or otherwise dispose of and deal in or with the shares, stock or other equity or interest in or obligations of any other entity. The board may establish separate funds for such investments. The State of Oregon shall have no proprietary or other interest in such investments or such funds.”

Any gifts and donations received for the benefit of the University are governed by separate Board policy. Those gifts and donations deposited as Endowment Funds or designated by the Board as Quasi-Endowments are exempt from the provisions of this Investment Policy. This policy provides investment guidelines for Mission-Related Investments in Part B and for Ordinary Investments in Part C of this document.

Governing Laws and Accounting Method

All investments shall comply with applicable laws and regulations.

All investments of monies related to the sale of bonds and other tax-exempt obligations shall comply with all covenants with bondholders, bond insurers, and tax laws.

The University shall comply with Generally Accepted Accounting Principles (GAAP). The accounting principles include but are not limited to those issued by the Governmental Accounting Standards Board (GASB).

Finance and Audit Committee

The performance of each of the University's investments shall be monitored quarterly by the Finance and Audit Committee, by comparing the rate of return of the University's investments to appropriate benchmarks and/or comparable funds. The OHSU Board of Directors shall appoint not less than three of its members to serve on the Finance and Audit Committee.

The performance of each Mission-Related Investment, as described in Part B, shall be monitored by the President or by the President's designee.

Banking Services

The University may contract with financial institutions to provide primary banking services, including cash and investment management services and securities custodial services. The Finance and Audit Committee shall review these functions annually and determine necessary changes to the contract and/or vendor. The University may contract with financial institutions to provide trust services for any proceeds derived from the sale of bonds or other financing obligations.

The University shall seek banking services in accordance with its Contracting and Purchasing policies. The Finance and Audit Committee shall establish minimum qualifications for financial institutions to help ensure adequate safeguarding of University assets.

Voting Policy

The University shall exercise its voting responsibility with the goal of maximizing value consistent with governing laws and applicable investment policies. The University supports sound corporate governance practices within companies in which the University holds an investment.

With the exception of Mission-Related Investments, voting responsibility will be delegated to OHSU's ~~money~~ Investment ~~m~~Managers who should act in the best interests of the institution.

Investment Principles

The University believes in efficient markets and generally invests with low cost passive managers. The University will utilize active management only where there a manager can demonstrate potential alpha, net of fees.

Periodic Review

This Investment Policy shall be reviewed annually by University staff and the results of the review reported to the Finance and Audit Committee and Board of Directors.

PART B – MISSION-RELATED INVESTMENTS

Definition

Part B of this Investment Policy applies to all Mission-Related Investments. Part C of this Investment Policy shall not apply to Mission-Related Investments. As used in this policy, the term Mission-Related Investments means any investment of cash or other property for the purchase of debt or equity issued by any private, or not for profit or governmental corporation, partnership, joint venture, limited liability company, agency or instrumentality or other person or entity whose principal purpose is to engage in one or more of OHSU's statutory missions.

Investments that are derived from or produced by the University's activities shall also be covered by Part B of this Investment Policy.

Investment Guidelines

The President or ~~his/her~~ their designee may invest in Mission-Related Investments, provided that any single Mission-Related Investment in excess of \$1,000,000 or which, when aggregated with all other Mission-Related Investments then outstanding, exceeds .5% of total assets of the University, shall be approved by the Board in advance.

Records

The ~~Comptroller~~ Treasurer shall maintain a record of all Mission Related Investments including the date, amount, nature and performance of each such investment. The Finance and Audit Committee shall monitor the performance of the investment.

Voting and Disposition

The ~~following OHSU executives are~~ Chief Financial Officer or their designee is authorized to vote shares that represent ownership interests in OHSU Mission-Related Investments, provided that such actions are in the best interests of OHSU. ~~:(i) for hospital Mission-Related Investments, the Chief Financial Officer of the Hospital is the authorized individual; and (ii) for~~

~~all non-hospital Mission-Related Investments, the designee of the Finance and Audit Committee is the authorized individual.~~

The Finance and Audit Committee shall oversee the disposition of shares that represent ownership interests in OHSU Mission-Related Investments. For OHSU Technology Transfer, and Business Development, ~~the Finance and Audit Committee shall establish measures, metrics and procedures for the~~ acquisition and disposition of ownership interests in entities produced from the University's research activities will be governed by Policy 04-50-001, Intellectual Property and Royalty Distribution.

PART C – ORDINARY INVESTMENTS

Investment Objectives

As used in Part C of this Investment Policy, the term “investments” or “ordinary investments” means all investments other than Mission-Related Investments.

The primary objectives of the University's investment portfolio are to:

1. Maintain an overall level of financial assets to ensure sufficient capital is available for strategic initiatives, capital expenditures, and other capital requirements deemed appropriate.
2. Support borrowing capacity and credit rating stability.

With environmental, social and governance (“ESG”) investing playing an increased role in investment management and the University's strong commitment to diversity, equity and inclusion, the University considers various ESG factors as part of the investment selection process. These considerations should not be viewed in isolation when evaluating the appropriateness of holding an investment.

The University believes that it has the obligation to relentlessly strive to produce transformative positive impacts on the health and wellness of Oregonians and beyond.

Risk Tolerance

The risk characteristics of the portfolio will be measured to ensure that it maintains an acceptable level of volatility and drawdown exposure in light of the financial and operating environment of the University.

When determining the appropriate risk level, the following considerations apply:

1. Management drawdown tolerance
2. Credit rating stress test
3. Peer asset allocation

Other considerations include:

1. Time Horizon – The portfolios are intended to support the University into perpetuity. Therefore, a long-term horizon is appropriate.
2. Liquidity Needs – Given the potential for short-term cash needs from the portfolio, and consideration of the impact on credit ratings, there is a preference for highly liquid investment vehicles. Illiquid or less-liquid investments can be considered; however, only after ensuring adequate funding is available to meet short-term needs.

See Exhibit A, Investment Management Principles and Guidelines, for a more detailed description of how the University investment portfolio is managed and administered.

~~The primary objective of administering the University's investment portfolio is the preservation of capital. The University shall maintain adequate liquidity to ensure availability of funds necessary to meet cash flow requirements while maximizing total return and maintaining compliance with all applicable laws and regulations.~~

Investment Strategy

~~Investments of monies for general operations will be managed to maximize total return, promote diversification and to provide for the seasonal, temporary and long term cash flow needs of the University and to maintain preservation of capital. Diversification of investments may include the use of pooled investment programs, some of which may invest in alternative strategies such as derivative products or hedge funds so long as the aggregate risk profile of the pooled components is consistent with the Objectives and Prudence Standard criteria established within this Policy.~~

~~Monies set aside for capital construction shall be invested in maturities that provide for projected future cash flow requirements. Maturities, investment asset classes and individual securities within those asset classes will be managed to maximize total return while maintaining preservation of capital and providing for projected future cash flow requirements. Monies that are set aside for debt service will have maturities managed to maximize total return while maintaining preservation of capital and satisfying requirements in the applicable borrowing documents.~~

~~The University may maintain amounts perpetually in mutual or money market funds that are not deemed sufficient to invest efficiently, taking into consideration administrative costs, fees charged by the bond trustee, and difference in yield opportunities. The University may invest monies that are held by the bond trustee for payment of debt service during the following business day, in overnight or in mutual or money market funds.~~

Portfolio Structure and Performance

The University shall structure its investment portfolio in funds as deemed appropriate by the Finance and Audit Committee. The performance of the funds shall be monitored on at least a quarterly basis by comparing the returns to appropriate benchmark indices and/or comparable

funds. On a quarterly basis, the Finance and Audit Committee will review the most current cash projections of funds available for general operations, capital construction and debt service to ensure that the duration of the University's investments is appropriate.

Banking and Investment Transactions

Only persons, including Investment Managers, designated by the Finance and Audit Committee shall transact investments of University funds. Notification to all appropriate Banking Service Providers and broker/dealers will be made when authorization changes are made. In order to accomplish these purposes, the Finance and Audit Committee by the signature of the chairperson shall authorize designated individuals and/or firms to buy, sell and transfer securities; to exercise the voting rights as security holders; to open and close bank accounts, investment accounts, and trust accounts; to enter into agreements regarding the accounts as may be required so that the accounts can be used for their intended purpose; to sign checks and other instruments withdrawing funds from the accounts; to authorize electronic and other fund transfers to withdraw funds from the accounts; to negotiate checks and other items payable to OHSU and its subsidiaries; and to otherwise conduct transactions on behalf of OHSU.

Prudence Standard

Investments shall be made with judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived.

Delegation of Responsibilities

The OHSU Board of Directors approves the Investment Policy. The Finance and Audit Committee monitors the investments and returns.

Management

OHSU Staff shall perform the following activities:

- Assist in the development of sound and consistent guidelines and overall investment strategy, including: portfolio objectives, constraints, and asset allocation;
- Periodically review this Investment Policy and recommend modifications for approval;
- Select or remove external professional service providers such as an Investment Consultant and Custodian(s);
- Select or remove Investment Managers for the University's portfolio;
- Provide timely communication of investment performance or any other investment program details to the Committee as requested

Investment Managers

Each Investment Manager must be registered with the Securities and Exchange Commission under the Investment Advisors Act of 1940 as Registered Investment Advisors or documented as exempt by the same laws. Investment Manager responsibilities shall include:

- Adhere to all guidelines set forth in the manager agreements entered into by the Investment Manager and the health system, where applicable;
- Discretionary investment management including decisions to buy, sell, or hold securities that will be used to meet the Investment Manager's specific objectives and within the guidelines of its stated strategy;
- Report, on a timely basis, investment performance results;
- Communicate any major changes to economic outlook, investment strategy, or any other factors which affect implementation of the investment process or the investment objective progress of the Investment Manager;
- Inform Management and the Investment Consultant regarding any material change to the Investment Manager's organization (i.e. changes in portfolio management staff, ownership structure, investment philosophy, etc.);
- Vote proxies, if requested by Management, on behalf of the health system and communicate such voting records to Management on a timely basis, where applicable;
- Execute all investment transactions with brokers and dealers qualified to execute institutional orders at the best execution possible.

Custodian

The Custodian(s) will maintain possession of the securities held on behalf of the portfolios, collect dividends and interest payments, redeem maturing securities, and affect the receipt and delivery following purchases and sales of assets. The Custodian(s) shall also perform regular accounting of the assets owned, purchased, or sold as well as the movements of assets in and out of the portfolios' individual accounts.

Permitted Investments

See Exhibit [AB](#) for a listing of prohibited investments and transactions.

Payment/Delivery/Safekeeping

All securities purchased shall be held by a Securities Custodian in the University's name. Bond Funds shall be separately held and not co-mingled. Payment shall only be made for securities with receipt of sufficient evidence of title transfer that is consistent with modern banking practices. The University shall not deliver securities prior to receiving payment in full for the securities transferred. All transactions regarding principal and interest shall be made directly with the Securities Custodian.

Collateralization

The ~~University Comptroller~~ Treasurer shall ensure University compliance with ORS Chapter 295 relating to depositories of public funds and securities. Where applicable, the University will maintain funds with a Primary Banking Services Provider that meets the Depository Bank definition of ORS 295.005.

The Comptroller shall ensure that a Certificate of Participation has been issued by a Pool Manager (as defined under ORS 295.005) in an amount sufficient to cover University deposits maintained by the Primary Banking Services Provider and the Bond Trustee, if applicable.

Internal Controls/Recordkeeping

The ~~Comptroller~~ Treasurer shall ensure the following internal control objectives are met regarding the investment portfolio:

1. Proper authorization for each transaction;
2. Physical existence and proper ownership;
3. Proper valuation;
4. Adequate record keeping; and
5. Proper safekeeping of investments.

Internal controls shall be evaluated through internal or external audit not less than annually.

Revision History: Adopted December 7, 1995 (Resolution No. 1995-12-10)
Revised May 5, 1999 (Resolution No. 1999-05-02)
Revised August 3, 1999 (Resolution No. 1999-08-11)
Revised September 17, 2002 (Resolution No. 2002-09-07)
Revised December 7, 2004 (Resolution No. 2004-12-19)
Revised June 28, 2007 (Resolution No. 2007-06-06)
Revised May 5, 2010 (Resolution No. 2010-05-07)
Revised October 24, 2013 (Resolution No. 2013-10-05)
Revised September 28, 2017 (Resolution No. 2017-09-13)



Date: April 16, 2021

To: OHSU Board of Directors

From: Tim Marshall, Chief Integrity Officer

RE: Code of Conduct revision update

The OHSU Code of Conduct was last updated in 2015. As announced during Dr. Jacob's State of the Institution address in January 2020, the Integrity Office started a comprehensive review of the Code in early 2020. The review included leadership, key content and stakeholder groups, designated focus groups, and an OHSU public comment period, including a crowdsourced information gathering using IDEASCALE.

The Integrity Office has partnered with the Strategic Communication and Creative Marketing teams to collaborate, re-vision, and rebuild the Code of Conduct in a desired and easy to understand format, to make the Code more accessible and understandable to all, and to develop an awareness campaign to roll out the revised Code and educate OHSU members over the next several months.

This presentation will provide an update on the project, including timeline, results to date, OHSU member engagement and feedback, and a "First Look" of the revised Code of Conduct. We have a lot of work ahead but are excited about this new look and feel of the Code.



Code of Conduct review and update

DATE: April 16, 2021

PRESENTED BY: TIM MARSHALL, Chief Integrity Officer



Discussion topics

- ☐ Background
- ☐ Timeline of project
- ☐ OHSU Member engagement
- ☐ Reflection on Code feedback
- ☐ Feedback recommendations
- ☐ First Look
- ☐ Next Steps

Background

- In January 2020 during his State of the University address, Dr. Jacobs noted that the Code would be reviewed and updated using a crowd sourced approach during the year.
- The last major update of Code was completed in 2015 with support provided by 3rd party vendor and roadshow by Integrity Office personnel
- The OHSU Code of Conduct is available on the external OHSU site, internal intranet (O2), and in the Compass learning system
- Several FAQs are available on O2 that support Code topics and inquiries



Timeline of Project

- **Phase 1 (by February 28, 2020) – Planning and oversight**
 - Identify and convene advisory group of key stakeholders to provide oversight of project
 - Identify content owners and other key stakeholders and groups for Code input
 - Determine mechanism to capture edits and feedback (Box)
- **Phase 2 (by August 31, 2020) – edits and feedback collection (delayed due to COVID)**
 - Gather content owner feedback and edits
 - Engage with other identified stakeholders and groups for comments and edits
 - Provide edited version of Code for public comment
- **Phase 3 (by November 30, 2020) - OHSU member engagement/crowd sourcing**
 - OHSU Now announcement for public comment period and all voices heard campaign
 - Provided edited version of Code to Policy Advisory Committee for comment
 - Conducted meetings with several focus groups, including Employee Advisory Committee, Student Council, and Faculty Senate
 - Conducted IDEASCALE crowd sourcing campaign for OHSU member comment
- **Phase 4 (by April 2021) – creative design and communication strategy (delayed due to Vaccination roll-out)**
 - Identify positioning and theme for new Code
 - Pilot privacy and security section for creative design and brand alignment
 - Formal communication strategy and OHSU member engagement
 - Provide update to Board
- **Phase 5 (starting in May 2021) – formal roll out**
 - Monthly introduction of content
 - Feedback loop for improved engagement

The timelines for Phases 2-4 were impacted by COVID priorities, Modified Operations and staffing turnover, resulting in a 6-month delay.



OHSU member engagement

- Content owner and key stakeholder feedback
- Solicit feedback from OHSU members to ensure all voices heard, including:
 - Public comment – various OHSU Now posts and meeting announcements communicated
 - IDEASCALE – OHSU member crowdsourcing
 - » 29 ideas submitted during 2 week period
 - Focus groups, including Employee Advisory Committee, Student Council, and Faculty Senate, led by Strategic Communication and/or Integrity



Reflection on Code feedback

- OHSU members understand and are invested in OHSU's mission
- The perceived authenticity and accessibility of communications is paramount: no one wants more corporate speak
- Determine best approach and practices to document Code content in order to optimize awareness and understanding for all members including:
 - Format and length
 - Easy access and reference
 - Links to policies, resources, and O2 content
 - FAQs to supplement content and understanding
- Consistency and cohesiveness in visuals, audio, terminology and structure will provide a memory framework
- Support “revised” Code with interactive communication and awareness campaign



Feedback recommendations

Opportunities exist to enhance and improve the Code in the following areas:

- Leadership and Culture (4)
- Enforcement/Investigations/Discipline (18)
- Communication and Marketing (23)
- Training and Education (14)
- Design (28)

The OHSU community provided over 80 recommendations during the discussion and feedback period. Further engagement will ensure branding and roll out of the new Code addresses the topics identified.



Leadership and Culture examples

- The Code of Conduct is a useful guide for OHSU employees but it leans too heavily on OHSU's expectations for employee conduct and too little on employees' expectations of institutional OHSU conduct. Salutatory employee conduct is enhanced by salutatory institutional conduct.
- Codes for department, mission (hold them accountable too) – in addition to organizational for members. Addressing structural inequity is just as important.
- How does the Code follow members at partner institutions and other non-OHSU locations?



Enforcement / Investigations / Discipline examples

- How do we ensure the Code is followed?
- Include the Discipline matrix to speak to expected outcomes and explain how these work together. Further definition and clarity on how the Code works with other documents.
- More information about how the Code is enforced and the investigatory process (what does an investigation entail, what are the steps, what triggers an investigation and when do they lead to termination)
- How do we ensure equity in consequences?
- Transparency about how others are disciplined across populations and representations.
- Retaliation occurs even if it's against the Code. What should members do when it happens?
- How does the Code apply and extend to OHSU members outside of work?



Communication and Marketing examples

- Create a one page, quick/easy reference document
- Consider posters or displays of mission, vision, values, etc.
- Make more succinct (reiterate/repeats)
- Focus on the positive, aspirational elements - not punitive
- Series of University-wide town halls to discuss elements. Include audio with translation. Live broadcast in other languages. Needs to be inclusive and for all so everyone hears the same message.
- Define what the Code of Conduct is. Is it a list of rules? Or a body of principles? Is it both? What is the scope and how is it used if you don't follow the Code. Consistency in how each subject treated and consequences. Clarity of purpose and binding nature of document (or not).
- Communicate over-arching themes regularly.
- Transparency, speak directly to the challenges.
- Have leaders explain. This can be a rallying point – a commonality for every member.
- Offer the Code in other languages (into at least the four most common)



Training and Education examples

- Create case studies that are relevant to sections of the Code exemplifying behavior that is expected
 - can be used to affect areas where we want to see change in lessons learned
- Give examples of “musts and must nots” throughout sections of the Code
- Distill the Code into the work environment through mini Boosters that are more interactive that managers can use in depts.
 - Consider developing an accompanying document or summary for folks to use per topic outside of the Code
- Utilize OHSU Now for “mini Boosters”
 - marketing campaign that includes highlighting positive examples of employees upholding principles of the Code throughout the year in OHSU Now etc.
- Highlight commonly encountered conduct violations by students
 - Develop “commonly asked code questions by students” that could be given as a supplement to the Code of Conduct.
- Trainings on the points within Code to better explain definitions
 - Example: Microaggressions – give examples to show how it may change by person and give clarity (give clarity in context).
- Monthly staff meeting conversations, departmental conversations about what this looks like and means.



Design examples

- Most important thing is that people know where to go and what to do if there are issues. Easily accessible.
- Reduce the length of the Code
- Interactive
- Bulleted summaries at the beginning of each section; instead of table of contents
- Draw attention to key points.
- Top-level summaries for each main point. Clickable links to the detailed section. Find easier ways to navigate in online format.
- Graphs and tables for summaries of key points.
- Breakout text boxes for exec summaries or the examples. Your eye is drawn to something that helps summarize.
- Keep the details, but separate so people can find.
- Searchable case studies that are tied to sections of the Code
- Create an appendix for definitions (microaggressions came up often)
- Accessibility/searchability of the Code and how it downloads from Ellucid





FIRST LOOK

Protecting Information and Assets

4.1

Privacy and Security of OHSU Restricted Information

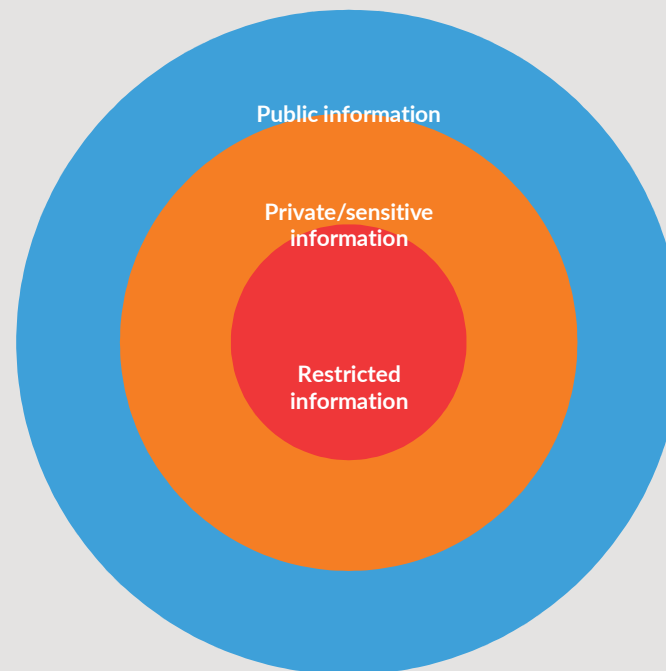
We work with three categories of information: Public, Private/Sensitive, and Restricted.

Public information is information that is specifically intended for public audiences.

Restricted information is the opposite. It must be kept secure and confidential: used by and shared only with authorized people; and stored, accessed, and transmitted in accordance with Information Privacy and Security (IPS) policies. Most OHSU computing systems fall under the Restricted Information category.

Private/Sensitive information occupies the middle ground: it must be protected in a manner that addresses the risks associated with improper access to the information. Private/Sensitive Information risk determinations must be conducted in accordance with all applicable IPS policies.

One of OHSU's most valuable assets is information, and everyone is responsible for protecting it.





Public information

Public Information includes OHSU information that is generally intended for public consumption and is not subject to state or federal regulations, OHSU policies or contracts which prohibit the sharing of such information. Disclosure of Public information may carry minor or negligible risk to OHSU. Public information may be shared with any person regardless of their affiliation with OHSU.

Examples of Public Information include:

- a. General information about educational programs;
- b. Approved marketing materials;
- c. Information about health care offerings; and
- d. Research publications.



Private/sensitive information

Private/Sensitive Information includes OHSU information that is not categorized as Restricted Information but is potentially sensitive and not generally intended to be shared with the public. Private/Sensitive Information could result in moderate risk to OHSU if disclosed, altered, or destroyed by unauthorized persons. Private/Sensitive Information should not be disclosed outside of OHSU without permission from the Data Steward of the information.

Examples of Private/Sensitive Information include:

- a. Some types of research information;
- b. Individual practice plans; and
- c. Communications and memos containing no Restricted Information which are generally intended for consumption by OHSU Members.



Restricted information

Restricted Information includes all information that OHSU has a contractual, legal, or regulatory obligation to safeguard in a specified manner. In some cases, a breach or loss of this data would require OHSU to notify the affected individual(s) or regulatory authorities. Restricted Information must be protected against unauthorized disclosure or modification and should only be used as necessary for business purposes. **Examples of Restricted Information include:**

- a. Protected Health Information (PHI);
- b. Education Records subject to FERPA
- c. Employees' health information
- d. Students' health information;
- e. Any other OHSU Information designated as Restricted Information by the Data Steward.



Public information

Public Information includes OHSU information that is generally intended for public consumption and is not subject to state or federal regulations, OHSU policies or contracts which prohibit the sharing of such information. Disclosure of Public information may carry minor or negligible risk to OHSU. Public information may be shared with any person regardless of their affiliation with OHSU.

Examples of Public Information include:

- General information about educational programs;
- Approved marketing materials;
- Information about health care offerings; and
- Research publications.

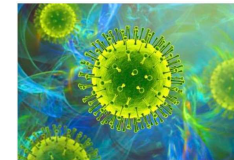
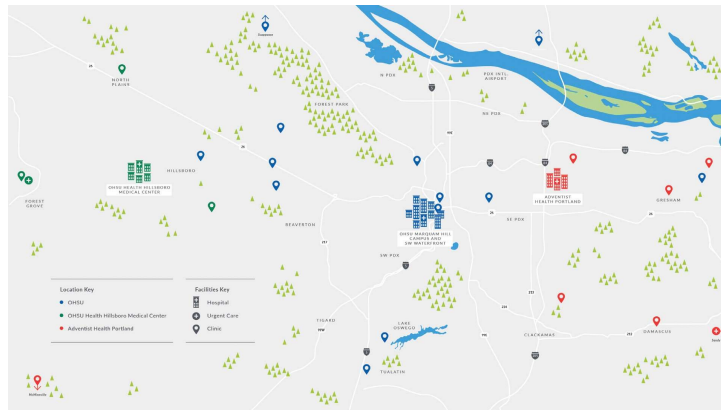
Graduate Program



Earn a graduate degree in Biomedical Engineering at OHSU

The Biomedical Engineering Ph.D. program serves as the center of innovation for the School of Medicine. We train future innovators, entrepreneurs and scientific leaders. Are you ready to join?

[Apply now](#)



What genome sequencing tells us about COVID-19 in Oregon

February 10, 2021



NBA 'bubble' reveals the ultimate home court advantage, study finds

December 11, 2020

About OHSU: Fast facts

Oregon Health & Science University is Oregon's only academic health center and is nationally respected distinguished as a research university dedicated solely to advancing health sciences. This allows us to focus on discoveries to prevent and cure diseases, on education that prepares the health care and health science professionals of the future, and on patient care that incorporates the latest advances.

Unless otherwise noted, numbers on this page are from:

- Fiscal 2018, which ended June 30, 2018
- The 2017-18 academic year (degrees)
- The 2018-19 academic year (enrollment)

History

OHSU's beginning as an institution dates back to 1887 when the University of Oregon chartered a state medical school.

[Learn more](#)

Facilities and people

- Employees: 16,478
- Capital spending: \$417 million

Marquam Hill Campus, Portland:

- 36 major buildings, including OHSU Hospital, Kohler Pavilion and Doernbecher Children's Hospital
- Connected to the South Waterfront by the Portland Aerial Tram, which is owned by the city of Portland and operated by OHSU

South Waterfront Campus, Portland:

- The Center for Health & Healing, completed in 2006, was the nation's first large medical facility to earn LEED platinum certification for its environmentally sustainable design



Tip of the Week: Who ya gonna call?

The Information Privacy and Security Office is here to help.

OHSU is responsible for protecting personal information about thousands of employees, students and — of course — patients. Help keep restricted information like this safe by promptly reporting any concerns about its handling to the Information Privacy and Security Office.

What to report

Information privacy and security incidents happen when someone accesses, acquires, uses or shares restricted information without permission. Some common examples include:

- Sending restricted information to the wrong fax number or email address.
- Sending an unencrypted email that contains restricted information.
- Losing equipment that is used to store or work with restricted information, such as laptops, mobile phones, pagers and removable storage devices (e.g., USB sticks, portable hard drives). This also includes cases of theft.
- Sharing OHSU network passwords, which is a violation of OHSU policy.
- Inappropriately accessing records in a patient-care tool, such as Epic or Axium. Remember: it is only acceptable to access a patient's record if it is necessary to do your job.
- Inappropriately sharing PHI. Patients file complaints when they suspect the privacy of their information has been compromised — for example, if it has been verbally disclosed when it shouldn't have been.
- Storing PHI in unapproved cloud-based services. Remember, Box.com is OHSU's approved cloud storage solution.
- Inappropriately disposing of PHI, such as putting an after-visit summary in a recycling bin instead of a locked, confidential shred bin managed by OHSU.

How to report

To report a concern, contact the Information Privacy and Security Office at 503-494-0219 or olps@ohsu.edu. You can also [report a concern anonymously](#) through the Office of Integrity.

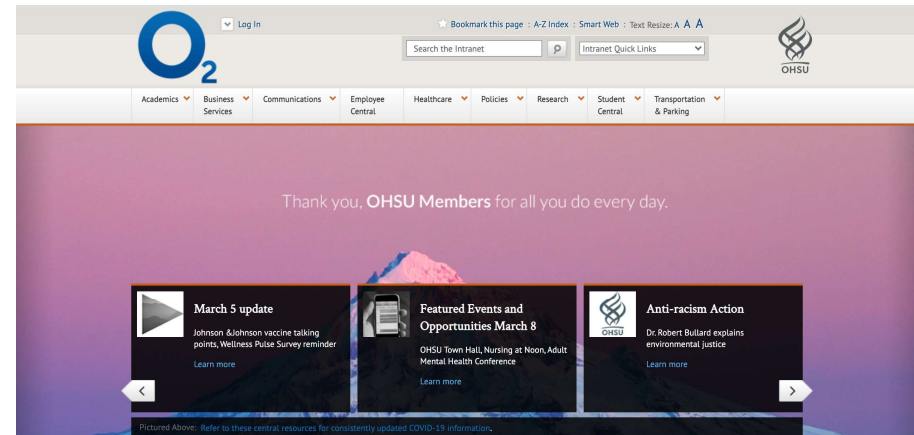
Important note! Do not report information privacy and security incidents through the Patient Safety Intelligence (PSI) system. That system should be used to report patient or visitor incidents or unsafe conditions — not information privacy and security incidents. If a patient or visitor incident *also* involves information privacy and security concerns, please report the event in the PSI system and submit a separate report to the Information Privacy and Security Office.

About Tip of the Week

Tip of the Week is your source for quick advice or expert information on topics ranging from career advancement to emergency preparedness. If you're interested in contributing to this series, contact [Strategic Communications](#).

Operations

Dec 5, 2019, 347 views



**HOW DOES THIS
RELATE TO THE
MISSION AND VALUES ?**

Next Steps

– Communication and rollout strategy

- Reaffirm OHSU's culture and mission. Messaging rooted in this as a reaffirmation of who we are as OHSU members.
- Highlight specific portions of the Code each month through video, huddle points and OHSU Now posts to enable engagement and enhance understanding.
- Enhanced O2 searchability and placement/access

– Creative design and alignment with brand

- Community creative discovery
- Updated positioning, design and format
- Development of campaign look and feel
- Creation of campaign assets and communication tools





Questions



Date: April 9, 2021

To: OHSU Board of Directors

From: Derick Du Vivier, Senior Vice President Diversity, Equity and Inclusion; and Director, Center for Diversity & Inclusion (CDI)

RE: OHSU Diversity, Equity and Inclusion Update

Memo: OHSU defines anti-racism as the practice of identifying, challenging and changing the values, structures, and behaviors that perpetuate systemic racism (Ontario Anti-racism Secretariat). OHSU has begun an aspirational and intentional journey of organizational transformation to advance anti-racism and multiculturalism within its community and in the region by promoting fair and just treatment in the education, research, scholarship, clinical practice and community services missions, as well as the equitable access to business, services and employment.

Our current approach to this work is multi-pronged and carried out by different stakeholders across the institution. We are in the process of bolstering our capacity to actualize this work by adding key new roles dedicated to building out a multiyear strategy that is under design. With the advice and input of university stakeholders, this strategy will have clearly outlined phases that will help ensure OHSU maintains the focus and momentum needed to create and maintain an anti-racist and multicultural organization with corresponding culture, policies and practices.

Over the past three months, OHSU has promoted and supported anti-racism work through multiple channels.

State Advocacy: OHSU provided testimony before the state judiciary committee in support of Senate Bill 398 which “Creates crime of intimidation by display of a noose. Punishes by maximum of 364 days’ imprisonment, \$6,250 fine, or both.”

Policy and Procedure Review: Multiple policies and procedures have been reviewed and amended with an equity lens, for example:

- The OHSU Campus Safety Review Task Force (OCSRTF), created by OHSU President Jacobs, evaluated OHSU Department of Public Safety operations, procedures, use of force, services and structure to ensure they align with OHSU's missions and values, and follow procedurally just and equitable practices in public safety.
- The Committee for the Review of Policies Addressing Patients Engaging in Racist, Sexist or Otherwise Harassing Behavior convened with the intention of gaining an anti-racist informed understanding of the current situation, discuss policy and guidance, determine if any changes are needed to support care and protect providers, and most importantly, provide guidance and policy suggestions to best provide care and protect/support providers when acts of violence or racism are made by patients.
- The Composition and Training of Admissions Committees Policy (No. 02-90-055) establishes the requirement that all members of admissions committees and admissions staff for Academic Programs shall undergo OHSU sponsored Unconscious Bias and Anti-Racism

education and training, and establishes guidelines for the composition of admissions committees, including but not limited to Faculty Observers.

- The Anti-racism Committee has been engaged to provide guidance and recommendations on anti-racism work at OHSU. Currently, the committee is discussing the creation of an anti-racism organizational matrix as well as an equity impact assessment tool.

Staff/Employee Support: Human Resources has continued implementing an anti-racist plan of action informed by engagement with employees of color. This work is ongoing and is focused on areas such as data collection, well-being of BIPOC employees, cultivating diverse leaders through mentoring and career development, and debiasing the hiring process with the aim of improving the recruitment, retention and advancement of employees of color.

Employee Resource Groups (ERGs): An equity centered ERG bylaw revision has been completed and is awaiting approval by the university Policy Advisory Committee. This revision, utilizing affirming language and emphasizing anti-racism, will enable the implementation of financial support for ERG leadership and facilitate empowerment through Executive Sponsorship.

Health Equity: In response to a decreased rate of vaccination in Oregon communities of color, OHSU Health has created a committee tasked with improving vaccination rates and vaccine education among culturally, racially, ethnically and linguistically diverse communities. A diverse leadership team has led to increased community engagement in the setting of diverse lived experiences, ideas and approaches to care. Most recently, this committee was able to vaccinate over 1,200 priority community members through a community centered approach grounded in humility.

Center for Diversity and Inclusion: The center continues to expand its resources with the most recent addition of two more educators as well as leadership promotion with the establishment of an associate director and a program manager for university-wide education. Programmatically, the center is in the process of educating a second cohort of 25 Search Advocates as well continuing to support implicit bias training for hiring managers and new employees.

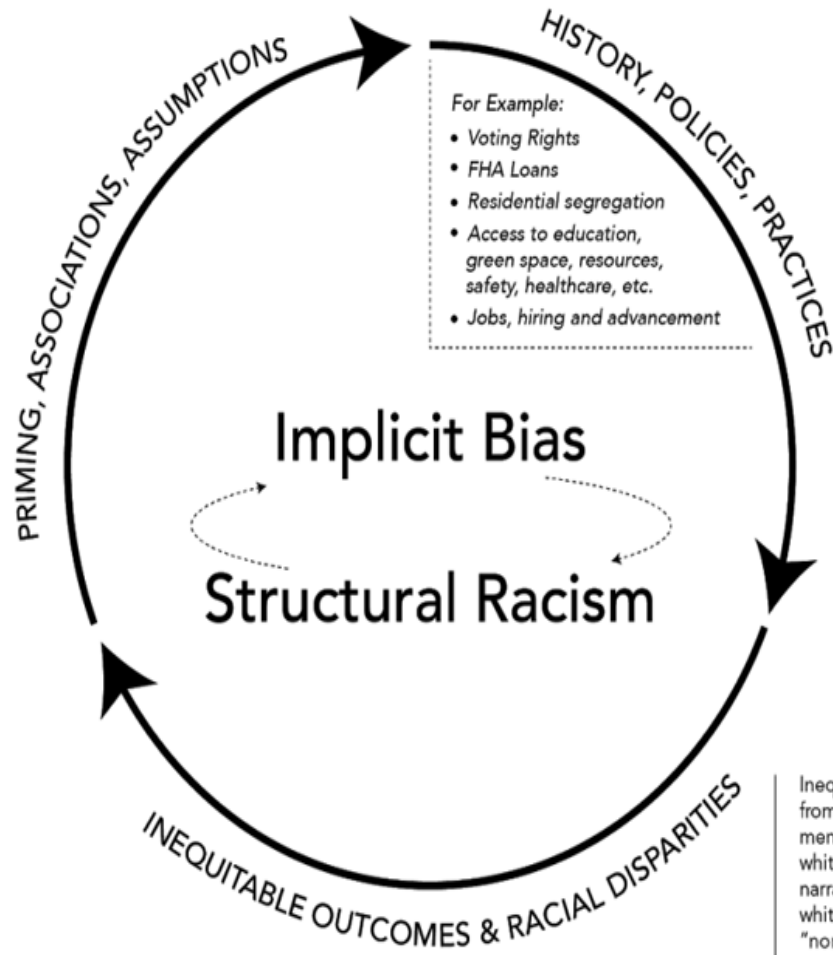
I would like to emphasize that this list is not exhaustive of all efforts across the university. There are ongoing anti-racist efforts in the Research, Education and Clinical Missions. It is the goal of the CDI over the coming months to create a tracking system for these efforts in order to provide updates and facilitate accountability. In addition to such a system, there is the expectation that in the same time frame an Anti-racism Organizational Matrix and Equity Impact Assessment Tool will be introduced to the OHSU community.



OHSU DEI Update

April 16, 2021 PRESENTED BY: Derick Du Vivier MD, MBA; Senior Vice President Diversity, Equity and Inclusion

Dominant narratives about race (family, media, society) coupled with racialized structural arrangements and differential outcomes by race all prime us to believe that people of color are inferior to white people, create and maintain harmful associations, and lead us to make harmful assumptions, consciously and unconsciously, about people of color



Race is created to justify enslaving people from Africa (economic engine of country)

Policies and practices that consolidate and protect power bestow unearned economic, social, cultural, and political **advantage** to people called "white," and unearned **disadvantage** to people of color

National narrative (ideology, belief system) about people of color being "less than" human (and less than white) justifies mistreatment and inequality (white supremacy)

Inequitable outcomes and experiences resulting from policy decisions in health, housing, employment, education, and life expectancy - reinforces white supremacist beliefs and ideology; dominant narrative uses disparate outcomes as evidence of white superiority, promotes whiteness as "normal" and desirable and justifies inequality

Anti-racism Actions

- State Advocacy
 - Senate Bill 398
- Staff/Employee Support
 - HR initiatives
 - Employee Resource Groups (ERGs)
- Policy and Procedure Review
 - OHSU Campus Safety Review Task Force (OCSRTF)
 - Committee for the Review of Policies Addressing Patients Engaging in Racist, Sexist or Otherwise Harassing Behavior
 - Committee for the Review of Admissions Policy
 - Anti-racism committee

Staff/Employee Support

- Employee Resource Groups (ERGs)
 - Bylaw revision
 - Leadership Financial Support
 - Black History Month
- Human Resources
 - Anti-racism plan

Antiracism Education and Information Offerings

- Search Advocate Program
- "Stepping In - Creating a Culture of Respect and Inclusion Collaboration Program "
- Implicit Bias education
- StoryShare
- Summer Equity Research Program



Unconscious Bias for Hiring Managers & Search Committees Class

Data Refreshed On : Apr-08-2021

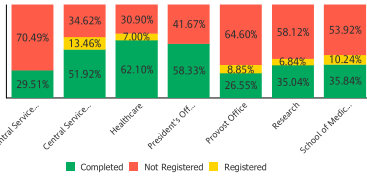
Hiring Manager Count
991

Total Trainings - Current Active Hiring Managers

Completed
45.02%

Registered
7.63%

Not Registered
47.34%



Headcount ELT	Completed	Registered	Not Registered	Total
Central Services - CFO	18		43	61
Central Services - Chief of Staff	27	7	18	52
Healthcare	213	24	106	343
President's Office	7		5	12
Provost Office	30	10	73	113
Research	41	8	68	117
School of Medicine	105	30	158	293
Total	441	79	471	991

Rep Group/Job Category	Completed	Registered	Not Registered	Total
AFSCME			5	5
APP	3		4	7
Faculty (ex. APP & OPP)	33	11	115	159
ONA			1	1
OPP/Physician/Clinical Assoc	12	2	50	64
Research	21	2	17	40
Unclass Admin (ex. Clinical Assoc)	372	64	279	715
Total	441	79	471	991

Notes: "Not Registered" represents supervisors who have not taken or registered for the "Unconscious Bias for Hiring Managers and Search Committee" class.

Total Trainings - Prior Months

Includes active & terminated hiring managers and non-hiring managers

Headcount ELT	Apr-2020	May-2020	Jun-2020	Jul-2020	Aug-2020	Sep-2020	Oct-2020	Nov-2020	Dec-2020	Jan-2021	Feb-2021	Mar-2021	Total
Central Services - CFO											4	5	9
Central Services - Chief of Staff		2	4									8	14
External	1			2			11	3	1			1	19
Healthcare		6	20	12	9	12	12	16	26	4	12	44	223
President's Office		2	1	1			1	1	1	2			9
Provost Office		3	10	1	5	3	1	4	9	9	11	22	78
Research	1		2	2	1	2	1		3	2	4	18	41
School of Medicine	6	4	19	30	5	6	16	4	45	12	17	70	234
Total	8	17	111	48	20	23	42	28	85	29	48	168	627

Rep Group	Apr-2020	May-2020	Jun-2020	Jul-2020	Aug-2020	Sep-2020	Oct-2020	Nov-2020	Dec-2020	Jan-2021	Feb-2021	Mar-2021	Total
AFSCME	1		4	2	3	2			3	2	6	15	38
External	1			2			11	3	1			1	19
Faculty	3	2	20	21	4	5	13	4	42	18	15	50	197
House Officer			3						16				19
ONA				1					2				3
Research	1	1	4	4	2	3	1	2	2	2	6	6	34
Unclass Admin	2	14	80	18	11	13	17	19	19	7	21	96	317
Total	8	17	111	48	20	23	42	28	85	29	48	168	627

Health Equity

- Vaccine Equity Committee
 - In response to a decreased rate of vaccination in Oregon communities of color, OHSU health has stood up a committee tasked with improving vaccination rates in historically marginalized communities
- Health Disparities Data Hub

Looking Forward

- Equity Impact Matrix
- Organizational Anti-racism matrix
- Human Resources: Building a Racially Diverse and Equitable Workforce plan

Equality



Equity



Empowerment



Program Status: Update

OHSU Anti-racism Action Plan

Tuesday April 6, 2021

Program Vision: With support from the highest levels of administration OHSU has begun an intentional journey of transformation to advance anti-racism at OHSU and in the region by promoting fair and just treatment in the education, research, scholarship, clinical practice and community services missions, as well as, the equitable access to business, services, and employment.

Our current approach to this work is multi-pronged and carried out by different stakeholders across the institution. We are in the process of bolstering our capacity to carry out this work by adding key new roles dedicated to building out a multiyear strategy with clearly outlined phases that will help ensure OHSU maintains the focus and momentum needed to evolve our culture, policies and practices to create and maintain an anti-racist and multi-cultural organization.

Working Anti-racism Definition: OHSU defines anti-racism as the practice of identifying, challenging and changing the values, structures, and behaviors that perpetuate systemic racism (Ontario Anti-racism Secretariat).

ACTIONS TAKEN

- **STATE ADVOCACY**

- Derick Du Vivier, M.D., M.B.A., OHSU Senior Vice President of Diversity, Equity and Inclusion testified before state judiciary committee in support of Senate Bill 398 which “Creates crime of intimidation by display of a noose. Punishes by maximum of 364 days’ imprisonment, \$6,250 fine, or both.”
 - <https://www.opb.org/article/2021/03/02/oregon-lawmakers-could-make-it-a-crime-to-display-a-noose/>
 - <https://olis.oregonlegislature.gov/liz/2021R1/Downloads/MeasureDocument/SB0398/Introduced>
- Danny Jacobs, M.D., M.P.H, FACS, OHSU President, serves on the State of Oregon: Racial Justice Council
- OHSU representative participated on Health Equity Subcommittee of State of Oregon: Racial Justice Council
- Derick Du Vivier, M.D., M.B.A., OHSU Senior Vice President of Diversity Equity and Inclusion and co-chair of OHA Health Equity Committee, gives public testimony before OHPB in support of public declaration that “Racism is a public health crisis.”
- Danny Jacobs, M.D., M.P.H, FACS, OHSU President, testifies before the Joint Committee on Transparent Policing and Use of Force Reform on policing and its outcomes through a public health lens.

- **OHSU POLICY AND PROCEDURE REVIEW**

- OHSU Campus Safety Review Taskforce
 - The OHSU Campus Safety Review Task Force (OCSRTF), created by OHSU President Jacobs, will evaluate OHSU Department of Public Safety operations, procedures, use of force, services and structure to ensure they align with OHSU's missions and values, and follow procedurally just and equitable practices in public safety. The OCSRTF is part of OHSU's continued movement towards becoming an anti-racist institution.

- The committee has broad and diverse representation. Membership includes city community members, OHSU Employee Resource Group members, OHSU Anti-racism Committee representation, as well as, administration, faculty and staff. The proceedings of the committee are grounded in a trauma-informed approach.
 - <https://www.youtube.com/watch?v=nSr3ZBkAdNo>
 - <https://ohsu.box.com/s/8x4f21f26yb7rjyzkj72858zn8wa8vvyo>
- **Status:** Review is complete. Recommendations have been made.
- Committee for the Review of Policies Addressing Patients Engaging in Racist, Sexist or Otherwise Harassing Behavior (met 6 times)
 - Committee charged to understand current situation, discuss policy and guidance and determine if any changes are needed to support care and protect providers, and most importantly, discuss ways to best provide care and protect/support providers when acts of violence or racism are made by patients.
 - Action of the committee led to the review of multiple associated policies:
 - *Requests for or Refusal of Healthcare Professionals or Other Personnel with Specific Characteristics*
(<https://ohsu.ellucid.com/documents/view/4328/active/5>)
 - *How to Respond to a Request for, or Refusal of, Health Care Professionals with Specific Characteristics*
(<https://ohsu.ellucid.com/documents/view/10255>)
 - *Incident Response Procedure - A guide for the Care Team to respond to an incident of discrimination, harassment, or threat of violence*
(CCC216124438)
 - *Standards of Behavior – DCH* (CCC21612440)
 - *Patient Rights and Responsibilities*
(<https://ohsu.ellucid.com/documents/view/167>)
 - *Administrative Discharge of an Adult Inpatient*
(<https://ohsu.ellucid.com/documents/view/11075>)
 - *Use of FYI Flags and Patient Highlight Alerts in the IHR*
<https://ohsu.ellucid.com/documents/view/10120> and the associated Matrix <https://ohsu.ellucid.com/documents/view/10121>
 - *Permanently Excluded from Elective Care as Described in the University Policy on Exclusion from Campus* <https://o2.ohsu.edu/policies-and-compliance/ohsu-policy-manual/chapter-7-facilities-management-support-services/ohsu-policy-07-30-030.cfm>
 - *Dismissing Patients from Clinic and/or MyChart due to Disruptive Behavior* (<https://ohsu.ellucid.com/documents/view/16320>)
 - **Status/Next steps:**
 - Policy and protocol documents and recommendations advanced to Dr. Jacobs

- Seek OHSU community review and commentary on policy and protocol documents and recommendations (engagement of OHSU BIPOC community members including ERGs and Anti-racism Committee)
 - Policy Committee review on policy and protocol documents and recommendations
 - Present outcomes to OHSU Board
- Committee for the Review of Admissions Policy
 - Empaneled and chaired by Provost Elena Andresen with the mandate to review admissions committee policy with an anti-racism lens
 - Outcomes
 - <https://o2.ohsu.edu/policies-and-compliance/ohsu-policy-manual/chapter-2-student-affairs/ohsu-policy-02-90-055.cfm>
 - Policy establishes the requirement that all members of admissions committees and admissions staff will undergo OHSU sponsored unconscious bias and anti-racism training. Further the policy establishes guidelines for the composition of admissions committees, which includes trained faculty observers.
 - Effective date 3/5/2021
 - **Status:** Above policy fully implemented by AY (Admissions Year) 2022-23.
- Antiracism Committee
 - Empaneled by Dr. Jacobs and charged with reviewing, prioritizing and advising on antiracism efforts at OHSU. The committee has broad representation from communities of color at OHSU including Employee Resource Groups, faculty, students and recognized DEI leaders at the university.
 - **Status:** In process
- **STAFF/EMPLOYEE SUPPORT**
 - Human Resources
 - Hired consulting firm to perform review focused on recommendations to bring HR practices into alignment with antiracism and equity values of OHSU
 - **Status:** Action plan designed and in the process of implementation
 - Hired culturally progressive HR firm to review and assess the Food and Nutrition Department. Firm provided recommendations on how to improve workplace climate
 - **Status:** Action plan designed and being implemented
 - Implemented an antiracism plan of action in response to Black Employee Resource Group's (BERG) *"14 points of action for OHSU to increase engagement, support, recruiting, retaining, equitable training and promotional opportunities for Black employees and to strengthen OHSU's standing as a better than good corporate citizen in the Black community"*
 - **Status:** In process

- FTE for data collection on BIPOC employee job cycle and workforce experience-Career Advancement Advocate
 - **Status:** In process. Interviews conducted.
- FTE to design and implement wellbeing programs for BIPOC employees
 - **Status:** In process
- FTE to provide BIPOC employee support
 - **Status:** In process
- Mandatory implicit bias training for all hiring managers
 - **Status:** Implementation date socialized, July 1, 2021
- Implementation of Search Committee Advocate program
 - **Status:** Trainers Trained, Program Logistics under development
- Created executive sponsorship program for ERGs
 - **Status:** In progress, implementation 2021
- Learning & Organizational Development team created “Anti-racism Self-Reflection Guide.”
 - **Status:** Launched Juneteenth 2020
- Learning & Organizational Development team created “Anti-racism for white people: Self-reflection group discussion guide.”
 - **Status:** Launched 10-week pilot February 2021
- Employee Resource Groups (ERGs)
 - Partnered with ERG leadership to rewrite ERG bylaws by centering equity, utilizing affirming language and emphasizing anti-racism
 - **Status:** Expected ratification April 13, 2021
 - Addressed diversity tax by implementing financial support for ERG leadership—pay structure of \$250/month for 4 leadership positions in each ERG
 - **Status:** Implementation April 2021
 - Partnered with the BERG and student groups to create a Black History Month speaker series focused on anti-racism.
 - *The Oregon Remembrance Project - History of Racism In Oregon* (Taylor Stuart)
 - *The Lived Experience of Data: Racism in Health Care* (Jodi-Ann Burey)
 - *A Day of Mourning - "A pause for the lives lost as we look toward solutions in the future".*
 - Round-Table Discussion: *Health Policy and How It Relates to the Health Equity of Black Communities*
 - *Environmental Justice: The Connection Between Pollution, Unequal Protection and Vulnerability* (Robert Bullard)
 - Commitment to improved communication and dialogue between the Black Employee Resource Group and university administration through a facilitated conversation to discuss university response to BERG 14 Point document
 - **Status:** Date in 2021, TBD, BERG engaged in date selection

- **METRICS**

- Health Disparities Reduction Core (NB- At an academic medical center antiracism is at the heart of addressing health disparities in communities of color. These disparities are the result of structural racism. Not only are our employees of color our patients but they are also members of communities that are experiencing the impact of structural racism.)
 - Began a 3-year effort to create a health disparities data hub and dashboards to facilitate the collection, analysis, and incorporation of health disparities data into policy, process and procedures at OHSU with the goal of improving the health and well-being of members of the communities of color in Oregon
 - Partnership between CDI, Health System and School of Medicine
 - Hiring of data analyst and quality analyst to manage and analyze data
 - **Status:** In process
 - Will be the basis for engaging and partnering with communities of color
- Implicit Bias
 - Created a dashboard to track university-wide participation in implicit bias training.
 - Enables tracking by geographic location and employee
 - Creates a data architecture that can be adapted to track participation in other equity and antiracism educational offerings
 - **Status:** Complete.
- **COVID-19**
 - Crisis Care Guidelines (CCGs)
 - Centered equity and antiracism during writing of CCGs for allocation of scarce resources at the regional and institutional levels in order to mitigate the impact of individual, interpersonal and structural racism.
 - OHSU Vaccine Equity Committee
 - In response to a decreased rate of vaccination in Oregon communities of color, OHSU health has stood up a committee tasked with improving vaccination rates in historically marginalized communities
 - Committee has diverse BIPOC representation
 - OHSU/county vaccination events in planning stages
- **ANTIRACISM EDUCATION AND INFORMATION OFFERINGS**
 - Center for Diversity and Inclusion
 - Partnered with Dr. Karen Eden to modify and expand the "Respect for All" telephone app to include information on anti-racism resources
 - **Status:** Expected date of completion 2022
 - Partnered with OHSU Library Services to create and maintain a centralized location for anti-racism and health disparity resources
 - <https://libguides.ohsu.edu/race-racism-health/cdi-antiracist-resources>
 - Anti-racism mini-grants

- Offered by the CDI and Office of the Provost, these Racial Equity and Inclusion (REI) Mini-Grants are targeted toward creative projects that impact current diversity goals but also to stimulate and sustain anti-racist behavior at OHSU. The goals of the REI Mini-Grant Program are to:
 - encourage faculty, staff, and students to be actively involved in confronting racism and the intersectionality of race and sexism, race and classism, race and homophobia, race and ageism, and race and ableism
 - promote anti-racist practices in recruitment and retention efforts in educational programs at OHSU
 - support the development of educational initiatives and policies that value
 - There are 20—\$10,000 grants
 - **Status:** Call for grant proposals – April/May 2021
- Faculty Observer Program
 - A program that trains, supports and manages volunteer consultants (faculty members) to help admissions committees identify and implement practices that mitigate the effects of unconscious biases in the admissions process.
 - **Status:** Start date August/2021
- Search Advocate Program
 - A program that trains, supports and manages volunteer consultants to help hiring managers and search committees identify practices that minimize the effects of unconscious biases in the hiring process.
 - **Status:** First cohort of 25 already trained with second cohort of 25 scheduled for training April/2021
- Inclusion Ambassador Program
 - A program that facilitates department specific learning and practices for addressing bias beyond the unconscious bias training
 - Ongoing
- "Stepping In - Creating a Culture of Respect and Inclusion Collaboration Program "
 - A multi-institutional effort to improve the quality of the healthcare environment for patients, providers, and healthcare teams through the review of videos based on real-life occurrences and the use of the B.E.G.I.N. framework to facilitate enriching conversations
 - Train the trainer start date April/2021
- Implicit Bias Foundations Course
- Implicit Bias for Hiring Managers Course
- Implicit Bias: Student Edition
- "Anti-racism in the Research Environment" - Lecture
- "Structural Racism in Medicine" - Lecture
- "Anti-racism: Beginning to Talk About Race" – Lecture
- Interrupting Bias in the Workplace – Workshop
- StoryShare Project
 - The mission of the OHSU StoryShare Project is to encourage and nourish the human spirit; to demonstrate resilience, encouragement,

and success from marginalized members' experiences from our community.

- <https://soundcloud.com/ohsu/eddie-alayna-storycorps>

- Diversity Advisory Council

- The DAC advises the President and the Executive Leadership Team on ways to enhance diversity, multiculturalism and equal opportunity for all aspects of our mission. As a campus-wide group, the DAC supports diversity initiatives across the university—everything from helping units understand the business case for diversity to providing practical resources for employees, students and community members.
- The DAC represents all of university's mission areas and student, staff and faculty groups. Working together, DAC members enhance communication and collaboration across OHSU's schools and departments.

- CDI Internship Programs/Collaborations with other Diversity Internship Programs

- The Equity Research program offers an exciting opportunity for undergraduate college students to spend eight to 10 weeks during the summer working with faculty and graduate students in a research setting. The students learn new skills and gain hands-on experience. Applicants choose from a variety of OHSU departments and programs.
- The Ted R. Lilley CURE Program is a research mentorship training program for high school students. It is sponsored by the Center for Diversity and Inclusion and the Knight Cancer Institute. The long-term goals of this program are to give hands-on research experience and science exposure to disadvantaged high school students interested biomedical research and other health-related programs.
- The Vollum Institute/Neuroscience Graduate Program has a limited number of summer fellowships for college students who are looking for hands-on research experience in neuroscience. The program is designed to enhance opportunities for students who are interested in attending graduate school in neuroscience.

- Educational Improvement and Innovation

- The Fostering Respectful and Equitable Education (F.R.E.E.) initiative intends to develop the learning environment to improve engagement, achievement, and motivation. As Conway and Hayes explain, "Students are motivated to learn in positive environments and when they feel respected" (2011). Educators need to understand their learners' diverse cultural identities and use this to enrich everyone's education. OHSU's learning environments attempts to enhance our learners' educational experiences in preparing them to become competent healthcare providers or researchers.
- <https://o2.ohsu.edu/foster-respectful-equitable-education/>

- <https://o2.ohsu.edu/foster-respectful-equitable-education/creating-an-inclusive-learning.cfm>
- <https://o2.ohsu.edu/foster-respectful-equitable-education/best-practices.cfm>
- Research Mission
 - Racial Equity and Inclusion Center
 - One year pilot program in the research mission
 - Attempt at the creation of a "hub and spoke" model of support for racial equity work that is designed to address the needs of the research arm
 - OHSU Fellowship for Diversity in Research (OFDIR) program—strives to increase the diversity of the OHSU research community by recruiting scientists from minoritized races/ethnicities.
 - Fellowships are available for postdoctoral training in all scientific areas of study at OHSU. OFDIR Fellows will receive mentored research training and opportunities to build community with and receive support from other scientists who identify as members of a racial or ethnic group underrepresented in STEM.
- School of Medicine
 - Active Bystander Training
 - UME Diversity Navigators
 - DEI Council
- School of Nursing
 - Immediate Initial Anti-Racism Actions of the OHSU School of Nursing:
 - Create an anti-racism repository of resources for faculty, staff, and students, including multicultural curriculum resources.
 - Listen to our students about their observations of racism, provide opportunities for dialog and processing of observations in classes and clinical, and potential responses and interventions.
 - Listen to faculty and staff about racism and anti-racism efforts and seek to provide opportunities for dialog and action.
 - Examine clinical course outcomes and rubrics, add language regarding system biases/racism and incorporate more opportunity for students to pay attention to the racism that exists in microsystems of care.
 - Consider program outcomes to incorporate social justice.
 - Conduct a review of cases, exam questions, assignments, and simulations across the undergraduate and graduate curricula to ensure accuracy, lack of bias, diversity and multicultural examples.
 - Offer courses for student unconscious bias training in specific undergraduate and graduate courses beginning summer 2020.
 - Encourage a personal anti-racism individual goal for SON employees in the coming year.
 - Consider a personal anti-racism goal in the Faculty Performance Review—this work will be led by the Faculty Affairs Council.

- Support an Interprofessional Education focus on anti-racism.
 - Health System & Organizational Leadership program racism course series of 3 starting fall 2020 will include seats for other students.
 - Update the statement on diversity, equity, and inclusion for the SON catalog. (completed July/2020)
 - Create several pre- and post-conferences for undergraduate clinical faculty to support faculty in addressing racism and opening conversation about it.
 - Create a safe place for faculty to bring situations forward and discuss how to address and learn from them.
 - Create safe spaces for students and staff for dialog, being together, and learning.
- **RESOURCES**
 - Center for Diversity and Inclusion
 - Hired diversity communications specialist
 - Hired an associate director
 - Hired a program manager for institutional DEI educational programs
 - Hired four diversity education trainers
- **ANTIRACISM STRATEGIC PLAN**
 - Organizational Antiracism Matrix
 - Design matrix based on best practices
 - Socialize matrix with Antiracism Committee, Diversity Advisory Committee, ERGs and OHSU community at large for commentary - April/2021
 - Human Resources Driven Becoming an Anti-racist Institution: Building a Racially Diverse and Equitable Workforce plan
 - Collect and report data about organizational practices
 - De-bias the hiring process and increase the number of racial minorities at OHSU
 - Cultivate diverse leaders through mentoring and career development—Inclusive Access Program
 - Provide physical and psychological support to Black, Indigenous and Latino/Latinx employees
 - Instill accountability for racial and ethnic diversity



Date: April 9, 2021

To: President Jacobs and Members of the OHSU Board of Directors

From: Alisha Moreland-Capuia, M.D. and Dana Bjarnason, Ph.D., R.N., NE-BC

RE: OHSU Campus Safety Review Taskforce Final Report

We are pleased to share with you the final report of the OHSU Campus Safety Review Task Force. You charged the 32 members of the task force with responding to two challenging and timely items. First, you asked us to evaluate the state of the OHSU Department of Public Safety and second, based on this evaluation, to recommend changes, if any, to the department or the legal authority and status of its officers.

Further, you asked the task force to undertake this charge within the context of OHSU's journey to become a trauma-informed anti-racist institution.

This report provides our findings and recommendations along with a discussion of the broader societal factors driving this work and an explanation of the process the task force went through to reach its outcomes. The report also includes an accounting of our outreach to OHSU members and summaries of resulting testimony. Finally, the attachments to this report provide in-depth information about the content of task force deliberations, data considered and presentations made.

We want to express our respect for and appreciation of the values underlying the formation of and support for this task force. Through this initiative, OHSU has demonstrated leadership in the ongoing state and national dialogue related to the demand for police accountability and the evolution of policing models. Indeed, we hope the work of this task force adds to the momentum of these important efforts.

And finally, we want to thank the members of this task force for their time, their expertise and their commitment to improving the safety and security of our communities. We look forward to your response. Thank you for trusting us with this process.

Sincerely,

Alisha Moreland-Capuia, M.D.
Co-Chair, OHSU Campus Safety Review Task Force

Dana Bjarnason, Ph.D., R.N., NE-BC
Co-Chair, OHSU Campus Safety Review Task Force

Task Force Charge

The task force operated within the framework of its formal charge, which was issued in November 2020 by President Jacobs. The charge is provided here for reference.

The singular objective of the OHSU Department of Public Safety is to support OHSU's mission of enhancing the health and well-being of all Oregonians by providing a safe and secure environment for OHSU patients, visitors, employees and students through the delivery of law enforcement and public safety services in our unique academic health setting.

The nation has risen to demand changes in the way law enforcement services are delivered to our communities. The OHSU Department of Public Safety is a leader in best practices, but periodic input, review and oversight of the department is essential to maintaining that advantage and to ensure that these practices reflect and advance evolving models for anti-racist policing and safety.

The OHSU Campus Safety Review Task Force (OCSRTF), created by OHSU President Jacobs, will evaluate OHSU Department of Public Safety operations, procedures, use of force, services and structure to ensure they align with OHSU's missions and values, and follow procedurally just and equitable practices in public safety.

The OCSRTF is part of OHSU's continued movement towards becoming an anti-racist institution. The methods of this task force itself will be aligned with and reflect OHSU's goal in this regard. To this end, in addition to relying on the expertise and lived experience of key task force members, the OCSRTF will be guided by Alisha Moreland-Capuia, MD, an expert in trauma-informed systems change, who will serve as co-chair. Further, the OCSRTF will seek input from a diverse cross-section of the OHSU community, welcoming meaningful and significant representation of perspectives from members of color.

The OCSRTF will report to the President of OHSU and the OHSU Board of Directors on the following two items, giving equal consideration to each:

1. An evaluation of the current “state” of the Department of Public Safety with the metrics for that evaluation identified and defined.
Is the department doing well against these defined metrics?
How could the department be improved?
2. What, if any, changes to the structure of the Department of Public Safety or legal status and authority of the police officers, or to the functions, procedures, policies or practices of the Department, would ensure just and equitable practices within the Department of Public Safety and best ensure safety at OHSU?
What are the functional benefits and functional challenges of each identified option?

In considering these items, the task force will have access to any and all information it deems pertinent, including data describing arrests, use of force and other information, disaggregated by race.

Executive Summary

In November 2020, OHSU President Danny Jacobs charged the OHSU Campus Safety Review Task Force (OCSRTF) with undertaking an evaluation of the OHSU Department of Public Safety.

The review of the Department of Public Safety was identified as a key part of OHSU's journey to become a trauma-informed anti-racist institution. The intent of the review was, in part, to show solidarity with and support for communities across the nation demanding the dismantling of systemic racism in American policing after the killing of George Floyd in May 2020.

The task force was asked to report on the current state of the Department of Public Safety, including identifying and defining performance metrics. The task force was also asked to recommend changes, if necessary, to the department's structure or legal status, as well as its functions, procedures, policies or practices.

Individuals on the task force were drawn from across OHSU missions and included representatives from all active OHSU Employee Resource Groups, the Anti-Racism Task Force, the Student Council, the Faculty Senate, the Department of Public Safety and groups who because of their roles at OHSU interact frequently with the department. Two members were selected from an open call to self-nominate. The resulting 32 members represented a wide breadth of expertise and lived experience.

Under the leadership of co-chairs Alisha Moreland-Capua and Dana Bjarnason, the OCSRTF met seven times in highly productive working sessions over four months, starting in December 2020. Additional work was completed outside of meeting times. No subcommittees were formed or charged.

The task force reviewed data, received presentations regarding the history, organization and performance of the department, reviewed emerging tenets describing best practices in anti-racist policing and discussed OHSU's security setting.

All task force meetings were conducted through the OHSU Webex platform and were open to OHSU members in real time. During an open testimony period in March, the task force heard the perspectives of OHSU members directly in writing and in person.

In response to the first part of its charge — with respect to the six metrics identified and defined by the task force — the task force concluded that, broadly speaking, the Department of Public Safety is performing well in most areas and that many current practices, including its focus on de-escalation and strategic disengagement as primary modes of operation, could be deemed best practices aligned with anti-racist policing models.

However, there are areas of concern including racial/ethnic disproportionality in use-of-force, stop-and-arrest and other performance data relative to Oregon demographics and

the OHSU employee base. Further, the evaluation of the department was limited by a lack of data related to race and ethnicity, an issue that must be addressed going forward.

In response to the second part of its charge, the task force did not recommend any changes to the current legal status or authority of OHSU police officers.

The task force did make 11 recommendations relative to the functions, procedures, policies or practices of the department. The first recommendation is to transition the OCSRTF to an ongoing oversight body for the Department of Public Safety and to charge it with developing a trauma-informed continuous improvement plan for the department, relying on strengthened data collection.

The recommendations also include conducting a campus-wide survey to develop an understanding of how OHSU members define safety and what they need to be safe, to improve department community outreach and to evaluate the value to OHSU of a campus program modeled after Portland Street Response, which would pair unarmed mental health professionals with OHSU armed police officers for certain categories of service calls.

The task force further noted the recent rise in the incidence of violence and aggression against health care employees, especially those working in emergency and acute settings, as a key security threat. As part of its 11 recommendations, the task force articulated support for the ongoing collaboration between the Department of Public Safety, the Department of Emergency Medicine and other clinical units to help mitigate this threat.

Please refer to the full OHSU Campus Safety Review Task Force Final Report for the complete explanation of the task force process, findings regarding anti-racism policing models, identification of areas for improvement and 11 recommendations.

1. Context

The killing of George Floyd by police in Minneapolis in May 2020 was the impetus for a re-evaluation of public safety departments and police agencies around the country. The nation and world were traumatized. The history and current state of violence disparately and deleteriously impacting marginalized populations compelled people across the nation to decide they had witnessed enough, and that change was the only way forward. Floyd's death was met with relentless calls to re-imagine policing practices in the U.S. and other countries.

In Portland, the summer of 2020 was one of considerable unrest and conflict between protestors, the Portland Police Bureau and officials at city, state and federal levels. Charges of excessive use of force and questionable tactics by Portland police officers and federal security officials in response to largely peaceful protests combined with the economic and social stress associated with the pandemic created a volatile situation.

In November 2020, OHSU President Jacobs answered the collective community cry for police accountability and reform by forming and charging a task force to undertake a review of the OHSU Department of Public Safety regarding whether its practices and approaches were contributing to an environment of safety at OHSU and to recommend immediate and long-term changes as needed.

The task force was charged with evaluating the Department of Public Safety and its police officers in a manner aligned with and reflecting OHSU's goal to become a trauma-informed anti-racist organization.

No specific event associated directly with the department triggered the review. Rather, the formation and charging of the task force was an acknowledgment by OHSU of the historical significance of the moment as well as the need to bring new tools, analytical models and voices to the delivery of law-enforcement services on campus.

In addition, implicit in the charge to the task force was examining the implications of arming OHSU police officers, a decision that emerged from the work of the 2008 Critical Incidence Readiness Task Force. This prior task force had been asked to provide recommendations regarding how to ensure a safe and secure campus in light of the growing incidence of campus shootings.

Within this societal and university context, the OCSRTF began its work in December 2020.

2. The campus setting

OHSU's size, geographic layout and scope present a unique and complex environment for safety and security. OHSU is among the largest employers in Oregon, with about 18,200 people working in geographically dispersed locations including Marquam Hill, the South Waterfront, the West Campus and other locations. Altogether, OHSU occupies more than 7.9 million square feet on about 400 acres.

Last year, OHSU provided health care to about 71,000 children and 239,000 adults in its hospitals and clinics, across a breadth of disciplines including trauma, emergency, mental illness and serious illness. Patients and visitors at OHSU facilities are often facing acute health crises or other highly stressful situations.

Nearly 5,000 students are enrolled in OHSU education programs. The university is also home to hundreds of research labs and programs — including the Oregon National Primate Research Center, one of only seven such facilities in the U.S.

Pre-pandemic, an estimated 25,000 people circulated through OHSU’s main campus on any given weekday, making the Department of Public Safety’s responsibility to the OHSU community roughly equivalent to that of a mid-size Oregon city.

3. A brief overview of the OHSU Department of Public Safety

A security presence on the OHSU campus has existed for decades. It was originally called the Security and Parking Division when OHSU, previously known as the University of Oregon Medical School, was formally created around 1970. It wasn’t until the 1990s that the Department of Public Safety was recognized as a distinct OHSU organizational entity.

For most of its existence, the department comprised unarmed public safety officers, also called community service officers. Their authority for and approach to intervention in disputes or to otherwise keep the OHSU community safe was derived from and overseen by the OHSU Board of Directors and the OHSU administration.

OHSU campus security needs began to evolve in parallel with the institution’s rapid and significant growth starting in the mid-1990s, including the expansion to the South Waterfront. For example, from 1995 to 2005, the OHSU operating budget increased from \$500 million to \$1.2 billion, and in 2020 reached nearly \$4 billion; patient-visits grew from 340,000 to 750,000 during the same time, and today are more than a million annually.

A shift in the institution’s approach to campus security began in 2004, due to an increasing number of security calls involving potentially violent situations. In response, OHSU authorized its public safety officers to be trained in the use of, and to subsequently carry, Tasers.

This shift accelerated in 2007 after a mass shooting event at Virginia Tech. In response, OHSU — along with colleges and universities across the country — began a process of reviewing its “critical incident readiness” capabilities.

In 2008, then-President Joe Robertson formed and charged the Critical Incident Readiness Task Force to evaluate the campus’s ability to respond to an active shooter event. Chaired by Oregon Senator Ginny Burdick, the 2008 task force recommended that OHSU develop a state-certified armed campus police force.

This recommendation kicked off a multi-year collaborative campus-wide process to develop hiring principles, training models and best practices for the newly authorized

police force to meet the unique needs of OHSU's setting. This process involved experts in mental health, patient care, community advocates and others.

Today, the Department of Public Safety has 47 employees, including 33 armed police officers and supervisors. Five to eight armed officers are always on active duty across OHSU properties. The department operates its own dispatch center that functions 24 hours a day, 365 days per year, overseeing emergency and non-emergency calls.

Annually, the Department of Public Safety responds to about 26,000 calls for service, the majority of which are associated with the health care mission. Calls cover a wide range of service requests, including "Code Green" calls (violence or imminent violence in the clinical setting) and potential crimes-in-progress as well as non-emergency requests such as safety escorts and car unlocks.

In addition, the department supports other critical campus functions including security assessments, access control and ID badges, inclement weather support and airship/helipad safety. The department also oversees and coordinates the multi-disciplinary OHSU Threat Assessment Team, which works across units to identify and mitigate potentially violent situations.

The Department of Public Safety reports to the OHSU Chief of Operations. The OHSU Critical Incident Committee, a 15-member community guidance and review panel, is charged with analyzing instances in which the department or other OHSU entities have been involved in a critical incident or are at risk of being involved in an incident. The panel is empowered to make policy, practice and/or training recommendations. The CIC meets monthly or as needed.

A backgrounder on the history, status, training and recent performance of the Department of Public Safety is provided as Attachment 1.

4. Task force process

The OCSRTF centered its work in trauma-informed practices, which recognize the role of trauma and seek to avoid re-traumatization in the process of listening to and receiving feedback, and helping people and systems move towards change and healing.

A trauma-informed approach was applied across all facets of the task force work, including in the construction and management of the OCSRTF, as well as the communications to and between task force members and with the larger OHSU community.

Trauma-informed care is guided by six principles (SAMHSA, 2014).

1. Safety
2. Choice
3. Collaboration
4. Trustworthiness
5. Empowerment
6. Cultural/historical/gender

Further, in an acknowledgement of the need to build and sustain trust among all stakeholders engaged in dialogues about anti-racism and police accountability, the task force centered its work in full transparency.

Member recruitment and roster

Task force recruitment was overseen by Connie Seeley, OHSU Executive Vice President, Chief Administrative Officer and Chief of Staff to the President, relying on input and guidance from representatives of the Center for Diversity and Inclusion; Human Resources; Legal Affairs; Public Affairs; Campus Operations; and Government Relations.

The principles and process underlying task force recruitment were described in the January 2021 “Update from the Task Force” to President Jacobs and the OHSU Board of Directors. The January update is provided as Attachment 2.

The OHSU Campus Safety Review Task Force includes 32 people, including co-chairs Alisha Moreland-Capuia and Dana Bjarnason. These individuals are drawn from across OHSU mission areas and include representatives from all active OHSU Employee Resource Groups, the OHSU Anti-Racism Task Force, the Student Council, the Faculty Senate and the Department of Public Safety.

In addition, some task force representatives are from OHSU constituencies with professional roles that bring them into frequent contact with OHSU police including psychiatry, social work, patient relations and emergency medicine.

The task force has two at-large members who were selected from a self-nomination process open to all OHSU members.

Finally, two members of the task force are external to OHSU: Michael Alexander, past president and CEO of the Urban League of Portland, and Lisa Reynolds, MD, an Oregon legislator representing House District 36 in Portland. Rep. Reynolds participated as a non-voting observer.

Intersectional to these represented areas, the task force is populated by people with experience or expertise in anti-racist and equity and inclusion activism, knowledge of police, law enforcement and/or the criminal justice system and lived experience — including negative interactions — with police (at OHSU or elsewhere).

The 32 members of the task force are listed in Table 1 at the end of this report.

Communications and community engagement

A dedicated website on the OHSU intranet O2 platform was developed to serve as a centralized repository for information about the task force including the charge, background information, roster, meeting recordings and more. A dedicated email was also established.

Communications about the task force were initiated with an all-campus letter from President Jacobs on Nov. 30, 2020. This letter included an invitation to all OHSU members

to self-nominate for the two at-large positions on the task force and information about the website.

The *OHSU Now* weekly feature “Anti-Racism Action” provided periodic updates to the OHSU community, including information on meeting dates and links to access the meetings (live or as post-meeting video recordings). The January “Update from the Task Force” was posted and available on this OCSRTF website. A report on the task force work to date was provided simultaneous with the outreach associated with the call for OHSU member input on March 1.

All communications associated with the task force process were amplified by inclusion in the daily all-campus email from Connie Seeley and/or Alice Cuprill Comas, OHSU Executive Vice President and General Counsel and, as warranted, in the periodic all-research mission email from Peter Barr-Gillespie, OHSU Executive Vice President and Chief Research Officer.

OHSU members were provided with opportunities to provide input to the task force (named or anonymous) through real-time testimony or written/pre-recorded video or audio submissions. Information on the number of submissions, the substance of this testimony and its role in informing the task force deliberations is provided in Section 7.

Meetings

The task force met seven times via Webex platform starting in December 2020. The first meeting was a four-hour training workshop led by Dr. Moreland-Capuia to introduce task force members to the concepts of trauma-informed healing and systems analysis.

The subsequent six meetings were 90 minutes each, for a total of nine hours of in-person working sessions. Additional work was completed outside of meeting times. No subcommittees were formed or charged.

Meeting agendas were set by task force co-chairs Alisha Moreland-Capuia and Dana Bjarnason based on input and requests from task force members.

Materials were provided to task force members generally about a week in advance of each meeting to provide for ample preparation time. In addition, links to relevant academic articles or media reports were shared with task force members.

Task force meetings were well-attended, with an average 90% of members across all working meetings.

As noted, OCSRTF meetings were open to OHSU members and the public in real-time. The meetings were recorded and YouTube links posted on the OCSRTF website. In total, the live meetings and/or recordings were viewed 263 times. (Data pulled on April 6, 2021. This is a sum of individual counts for each of the six videos; unique visitors were not tracked). The recordings will remain on the website for future viewing.

5. Task force meetings and deliberations

This section provides information on the topics covered during task force meetings. This information is presented to document the work and deliberations of the task force and shared here as an overview only. Agendas, slides, data presented and discussion notes for each meeting are included in Attachments 3 – 8.

Dec. 14, 2020

Dr. Moreland-Capuia led a four-hour workshop on trauma-informed models of healing and systems review.

Jan. 11, 2021

Presenter: Lieutenant Sam Habibi, OHSU Department of Public Safety

Overview information about the department; a review of principles underlying officer hiring and training and the focus on de-escalation as a primary mode of operation and interaction; review of use-of-force and stop-and-arrest data and other performance data* since 2014 by gender and race (of note, in the six years since officers at OHSU have been armed, no officer has ever discharged their weapon); the task force noted that the performance data do not capture if individuals are patients, employees, students or visitors and observed that the data are disproportionate relative to OHSU employment and Oregon racial/ethnic demographics; an introduction to the concept of the health care mission's "Code Green" calls (threat of imminent violence), the role of the Critical Incident Committee (CIC) in departmental review and the purpose of the Threat Assessment Team (TAT) were included in the presentation; the task force requested a race/ethnicity/gender data breakdown of Code Green calls (who makes the call and for whom the call is made); information on health care policies related to chain of command in crisis situations; presentations from the Critical Incident Committee and Threat Assessment Team; and a copy of the 2008 Critical Incident Readiness Task Force Report.

*The full suite of use-of-force and stop-and-arrest data and more are provided in Attachment 3.

Jan. 25, 2021

Presenters: Dan Haupt, Skilled Volunteer, Department of Public Safety and CIC member; Pam Brown, Patient Safety Manager and CIC member; Greg Moawad, Vice President of Human Resources and TAT member; Susan Yoder, Patient Relations Director and TAT member

Review of Code Green data (average of one call per day) and other calls to public safety; identification of data gaps related to patient and caller race/ethnicity; review of race/ethnicity of nursing staff (who make the majority of Code Green calls) relative to Portland demographics; discussion of chains of escalation in health care mission, culture of

safety; presentations about the Critical Incident Committee, charged with a post-event review of critical incidents and monitoring situations with high-risk of potential incidents, and about the Threat Assessment Team, a multi-disciplinary team charged with integrating information from across OHSU units to assess and mitigate threats, including potential active shooter events. Discussion about Black representation on the CIC and TAT; of the lack of routine or well-known mechanisms for input to CIC or, more generally, feedback from the department's "customers" or interactions (task force members cited patient satisfaction surveys, for example, as a model for ongoing collection of feedback).

Feb. 8, 2021

A live poll was taken regarding the readiness of task force members to formulate recommendations responsive to its charge; 48% felt ready, the remainder voted no or abstained.

Presenter: Heath Kula, Director of OHSU Department of Public Safety and OHSU Chief of Police

Detailed review and discussion of the 2008 Critical Incident Readiness Task Force purpose, process and outcomes, including the ensuing four-year collaboration with mental health and other experts across OHSU to develop required training modules focused on de-escalation and strategic disengagement before arming OHSU officers; discussion of the resulting four-part training, which begins with the 16-week State of Oregon Police Basic Academy followed by a three-part training customized to the OHSU setting; discussion about gaps in knowledge across campus regarding the history, performance and oversight of the department, especially about the extent of its trauma-informed training; discussion around the fact that while continuous improvement is warranted, the Department of Public Safety is following and likely in some cases exceeding best practices in de-escalation models; however, even with this expertise, staff, visitors and patients will respond to OHSU officers based on interactions with and media coverage about police outside of the OHSU setting, and that racial/ethnic minorities in particular may enter OHSU campus with negative perceptions; discussion of metrics, or their absence, to measure effectiveness of policy changes or CIC recommendations; discussion of the rise in the incidence of violence against health care workers as a serious security threat and potential impediment to the clinical mission.

Feb. 22, 2021

Presenters: Judi Workman, Associate Chief Nursing Officer, Department of Emergency Medicine; Deanna Eichler, Nursing Manager; Derrick Du Vivier, Senior Vice President and Director of the Center for Diversity Inclusion; Alisha Moreland-Capua; Krista Klinkhammer, Executive Communications Specialist

A presentation on the history of the Code Green model in the context of rising violence and aggression directed at health care workers, which based on presented data is now cited as the number one concern of OHSU emergency department staff; between 8% and 38% of

health care workers globally experience physical violence at some point in their career with more threatened and/or exposed to verbal aggression; Code Green is part of a multi-tiered program to prevent workplace violence undertaken across the health care mission in collaboration with the Department of Public Safety; a review of the work of the OHSU Anti-Racism Task Force including the points of intersection with the OCSRTF; initial review of themes associated with emerging state and national legislation regarding police accountability reform; a presentation to the task force to solicit OHSU member testimony followed by discussion and approval of the plan.

March 8, 2021

Presenters: Julie Hanna, Director of State Relations; Ellie Boggs, Associate Director of State Relations; Alisha Moreland-Capuia

Overview of police accountability legislation currently pending in the Oregon Legislature; presentation of results from Dr. Moreland-Capuia's review of Department of Public Safety policies and practices through a trauma-informed lens; meeting opened to public testimony; task force open discussion.

March 15, 2021

Presenters: Desiree McCue, Director of Nursing, Department of Emergency Medicine; Jonathan Jui, Professor, Department of Emergency Medicine; Anne Horgan, Social Work Supervisor; Judi Workman, Associate Chief Nursing Officer, Emergency Medicine

Overview presentation about the collaborative efforts of the past two years to improve safety and security of Department of Emergency and health care staff given the rise in violence and aggression (30% of OHSU emergency medicine staff feel violence is increasing; 90% report having experienced workplace violence in the past year; health care workers identifying as Black or other marginalized communities are often the specific targets of aggression from some patients and visitors; 212 edged weapons were removed last year from patients receiving treatment in the emergency department; nationwide, the emergency department is the most frequent site for hospital shootings); reasons for this rise in violence were cited anecdotally by task force members representing the emergency department as likely related to a combination of factors including drug abuse, economic insecurity, political tensions and, more recently, the stress and isolation associated with the pandemic; the security feature implemented in the emergency department rated most highly by staff was the assignment of a dedicated OHSU police officer in November 2019 and an overall increase in frequency of officer rounding; discussion of cooperation between social workers and the department, including social worker "ride-alongs" with OHSU police officers and the shared goal to "treat rather than police" mental health; reading into the record written public testimony; invitation to all task members to present their ideas for recommendations responsive to the charge; discussion.

6. State and federal legislative proposals for police accountability and reform

As noted in Section 5, a review was undertaken of state and federal legislative proposals. The purpose of this review was to develop an understanding of the concepts now under discussion related to police accountability and reform.

According to the National Conference of State Legislatures (2021):

- Thirty-seven states and the District of Columbia introduced more than 700 pieces of new legislation regarding police reform.
- Approximately 25 states have already enacted legislation addressing various police reform measures.
- Approximately 21 states and the District of Columbia have passed laws relating to the investigation or prosecution of use of force by law enforcement.

By understanding the specific tenets in the legislation by which activists and advocates are seeking to reform policing as part of the national dialogue spurred by the killing of George Floyd and others, the OCSRTF gained insight into what are considered emerging and evolving best practices for policing. In turn, this provided a metric against which the Department of Public Safety's current state could be compared. The legislative review was presented to the task force over the course of two meetings along with supporting reference materials.

One effort discussed in the OCSRTF as a potential model for OHSU consideration was the pilot project now underway in Portland called Portland Street Response (PSR), which is designed to reduce police contact and presence in the case of mental health crises.

PSR is modeled on the nationally recognized CAHOOTS (Crisis Assistance Helping Out On The Streets) program operating in Eugene, Oregon, an unarmed mobile crisis intervention team providing support for the Eugene Police Department. CAHOOTS personnel make initial contact and provide transport for people who are intoxicated, mentally ill or disoriented, as well as transport for necessary non-emergency medical calls.

The content of the legislative review is provided in Attachments 7 and 9.

7. Summary of OHSU member testimony

The OCSRTF provided a two-week window for OHSU members to give testimony in person, submit it in writing or via a video/audio recording (named or anonymously).

Forty-three people provided written testimony: 16 submissions were anonymous, 11 were named and another 16 were combined into a single written submission from the Department of Emergency Medicine, in which four were anonymous. One person provided in-person testimony via Webex to the task force.

While the input varied, testimony from those identifying as staff in clinical units spoke about the rise in violence against health care workers, their own concerns about safety and, in some instances, jarring examples of their experiences with patient violence and

aggression. Some submissions from these clinical units indicated that Black health care workers were specific targets of threats, aggression and hate from some patients.

However, testimony from other employees spoke to perceptions of how officers patrolling and showing up to campus units in full tactical gear contributes to fear and trauma for patients and staff. Further, the testimony indicated that such displays of arms seemed unnecessary. Four commenters suggested that the department should be disarmed or that visible weapons were not conducive to a hospital setting, one referred to transforming the security presence department into unarmed non-police (calling out the Portland Street Response model) and another commented on the lack of visible diversity of armed OHSU officers.

8. Response of the task force to its charge

In this section, the findings and the recommendations of the OCSRTF relative to the charge from President Jacobs are presented.

The first part of the charge requested the task force provide:

An evaluation of the current “state” of the Department of Public Safety with the metrics for that evaluation identified and defined.

Is the department doing well against these defined metrics?

How could the department be improved?

The task force defined six metrics with which to evaluate the Department of Public Safety:

1. Racial/ethnic data related to use-of-force, stop-and-arrest and other performance indicators. While not a metric over which the department has direct control, Code Green calls were also deemed relevant.
2. The type and effectiveness of the department’s partnerships and collaboration to address existing or potential security concerns.
3. The degree to which the department aligns with emerging state and federal legislation (best practices) regarding police accountability and reform.
4. The perspective of the OHSU community on the department as assessed through OHSU member testimony and other available data.
5. The effectiveness of the department’s oversight and its responsiveness to recommended changes.
6. The degree to which department policies are trauma-informed in their language and application.

With respect to these six metrics, the task force finds that broadly speaking the Department of Public Safety is performing well in most areas and that many current practices could be deemed best practice.

However, there are areas of concern and actions are needed to sustain these practices and ensure a culture of continuous improvement, including developing stronger data collection processes.

Key findings regarding the state of the department with areas for improvement are listed below.

- None of the officers of the Department of Public Safety have discharged their weapon since the department was armed in 2014.
- Race/ethnicity disproportionality relative to the racial/ethnic demographics of Oregon and OHSU's employee base is present in use-of-force, stop-and-arrest, trespass and other performance data. This warrants close monitoring and better data collection is required to fully understand and address this disproportionality.
- Insufficient data exists to determine if there is racial bias in Code Green calls. While Code Green calls are initiated by the health care mission and not the department, given their significance to public safety interactions and resources, the data collection regarding this important collaboration between the department and clinical units should be strengthened in ways that inform and support efforts to identify any trends related to racial disparities in its application.
- OHSU officer training is effectively customized based on the unique and complex academic health center/hospital setting, with an emphasis on strategic disengagement, de-escalation, trauma-informed practices and cultural responsiveness.
- Based on a review of emerging state and federal legislation related to police accountability and reform, OHSU police training and performance are at a level of best practice that meet and, in some cases, exceed current or emerging accountability and trauma-informed policing models, but more can and should be done on this point.
- OHSU police training should be continually evaluated within the evolving best practices framework, and regular input and review of training modules from representatives of socially-culturally diverse communities should be sought.
- The rising incidence of physical violence and aggression toward health care workers is a vital concern; Department of Public Safety, emergency and other clinical units are working collaboratively to address this violence and these efforts should continue, be supported at the institutional level and be informed by data collection, including incidents of violence or aggression directed at OHSU staff.
- The Critical Incident Committee functions well in its review role of the department but a requirement for diversity on the CIC should be formalized in its charter; further, policy or practice recommendations from the CIC should always be accompanied by metrics to continually evaluate their effectiveness. Based on anecdotal data (the only information available) the OHSU community is largely unaware of the existence of this body, and its communications, including to units under review or being monitored, should be standardized.
- The Threat Assessment Team that emerged from the 2008 Critical Incident Readiness Task Force work is organized effectively to meet its charge and its members indicate it is functioning well; however, data measuring that performance was not available/provided. A requirement for diversity on the TAT should be formalized in the charter.

- Based on task member and community input, the department's performance and policing philosophy centered in de-escalation and disengagement are not well known outside parts of the clinical mission and there is no comprehensive plan or infrastructure to support officer community outreach and engagement (often referred to as community policing) to reverse this knowledge gap.
- There is no mechanism by which "customer" feedback is routinely sought/provided regarding interactions with OHSU officers. Further, data do not exist describing how OHSU members define safety or what they need to feel safe. This should be addressed.
- Despite a commitment to best practices, prior interactions with and media reports about the Portland Police Bureau and other police agencies around the country will inevitably shape perceptions of patients and visitors — and to varying degrees, OHSU staff and students — regarding OHSU police. The department should partner with members of socially-culturally diverse communities to gain insight into ways these perceptions can be altered or informed, both for crisis situations and for the long-term.
- Perceptions of the department's performance as measured through public testimony to the task force indicate that the Department of Public Safety has forged a meaningful partnership with the Department of Emergency Medicine and some clinical units but there is a need to expand and fortify collaborations with other clinical and non-clinical departments, units and programs. Some testimony indicated that the appearance of officers in full tactical gear was inappropriate in a healing setting. This finding about perceptions, however, is based on the small sample size of OHSU member testimony and this, as well as other perceptions of all OHSU members about safety and security, should be more thoroughly evaluated.

The second part of the charge requested that the task force recommend:

What, if any, changes to the structure of the Department of Public Safety or legal status and authority of the police officers, or to the functions, procedures, policies or practices of the department, would ensure just and equitable practices within the Department of Public Safety and best ensure safety at OHSU?

What are the functional benefits and functional challenges of each identified option?

In response to the second part of the charge, the task force does not recommend any changes to the legal status or authority of the police officers currently.

The task force does, however, make 11 recommendations relative to the functions, procedures, policies or practices of the department. Of note, the task force found that the request in the charge to identify the "functional challenges or benefits of each identified option" to not be applicable to the 11 recommendations.

1. Transition the OCSRTF to serve as a community oversight body/board to ensure sustained, evolving and meaningful trauma-informed anti-racist practices, policies and procedures as they pertain to the Department of Public Safety. The task force should meet quarterly or as needed and a standing agenda item for each meeting

should include reports from the CIC and TAT. Further, consideration should be given to expanding the task force to include more members external to OHSU.

2. Charge the OCSRTF/oversight body with conducting a survey about OHSU member attitudes toward Department of Public Safety officers and use this information to better understand how members of the OHSU community define safety and what they need to feel safe.
3. Charge the OCSRTF/oversight body with developing a plan for continuous improvement relying on information from the survey along with other data/input and metrics to measure the effectiveness of any change to department policies or procedures.
4. Establish an ongoing data collection program to specifically measure the department's performance from a racial justice standpoint (including defining and tracking a suite of health care-initiated Code Green racial/ethnicity data to include demographics of who is calling for Code Green and who Code Green is being called on).
5. Establish a user-friendly public safety dashboard that is easily accessible from the public-facing department website. It should include data on arrests, Taser use, critical incidents, use-of-force, training data and more, along with race/ethnicity information. The data should be updated no less than monthly.
6. Establish a formal and routine customer feedback mechanism for interactions with the Department of Public Safety officers and staff; review this data with staff regularly as part of the continuous improvement plan and summarize for inclusion on the public safety dashboard.
7. Build on the ongoing collaboration between the Department of Public Safety and the Department of Emergency Medicine and other clinical units to evaluate the costs and benefits from a security perspective of developing a program modeled after the Portland Street Response in which unarmed social workers or other staff respond to certain call types. Consult with other OHSU experts and external partners on this process, as needed.
8. Develop and execute a communications and community engagement plan, including improvements to the department's website, that reframes public safety as an aspect of public health. Include measurable goals to raise department and individual officer visibility and strengthen relationships across OHSU community and externally (community policing).
9. Increase the racial/ethnic diversity of the Department of Public Safety staff with emphasis on hiring diverse representatives for armed officer positions.
10. Require annual training/competency validation for all department staff on the trauma of racism, bias, discrimination, secondary traumatic stress and emerging trauma-informed practices and approaches.
11. Review and respond to the information presented in Attachment 10 — "OHSU Public Safety Policy Review/Trauma-Informed Feedback" — within the OCSRTF and create a plan for responsive action, as appropriate and feasible.

Of note, the task force did not specify funding levels for these recommendations. Budgetary considerations were outside the scope of this work. While some can be undertaken with current staffing and within existing budgets, many may require new resource commitments.

Reaching consensus

The members of the OCSRTF voted on the final report's contents, including the findings and 11 recommendations prior to its submission to President Jacobs and the Board of Directors. The response rate was 100%. Of the 31 voting OCSRTF members, 29 voted to approve, one voted no and one chose to abstain.

Table 1: OHSU Campus Safety Review Task Force members

Alisha Moreland-Capuia, MD

*Affiliate Associate Professor, Psychiatry
Consultant Facilitator, Co-Chair*

Dana Bjarnason, PhD, RN, NE-BC

*VP/Chief Nursing Executive,
Co-Chair*

Michael Alexander, MSS

*President of the Urban League of Portland
(Retired) Community Member*

Elena Andresen, PhD

*EVP & Provost
Office of the Provost*

Peter Barr-Gillespie, PhD

*EVP & Chief Research Officer, Research
Administration*

Amela Blekic, MD

*Associate Professor, Department of
Psychiatry and Member-at-Large*

Pam Brown, RN, PhD

*Manager, Patient Safety
Healthcare Quality Management*

Alice Cuprill-Comas, JD

*EVP and General Counsel,
Legal Department*

Derick Du Vivier, MD, MBA

*SVP, Director, Center for Diversity, Equity
and Inclusion*

Dana Ghazi

*Bicultural Qualified Mental Health
Professional, Anti-Racism Task Force, Middle
Eastern Employee Resource Group*

Megan Jones

*Assistant Integrity Officer, Integrity
Department, Black Employee
Resource Group*

Jonathan Jui, MD, MPH, FACEP

*Professor, Emergency Medicine and
Member-at-Large*

Adreana Kusaba

*Administrative Coordinator,
Department of Surgery, Women's
Employee Resource Group*

Amanda Macy MBA, CHESP, CMIP

*Director, Environmental Services,
OHSU Pride Employee Resource Group*

Gretchen McCullough, MSN, RN,

*Associate Chief Nursing Officer
(alternate with Jane Russell)*

Greg Moawad, JD, MBA

Interim VP for Human Resources

Sarah Owens

*MD Candidate 2020, OHSU Student
Council*

Scott Page

*Chief OHSU Operations, Department of
Campus Services*

Lisa Reynolds, MD

*Representative, House District 36,
State Legislator (non-voting observer)*

Jane Russell, MSN, NE-BC, BA

*Chief Nursing Officer Doernbecher
Children's Hospital (alternate with
Gretchen McCullough)*

Phil Gordon

*Sr. Project Manager, Hospital
Administration, Latinos Unidos Organization
Employee Resource Group*

Sam Habibi

Lieutenant, Department of Public Safety

Raphaela Haessler

*Executive Specialist, Knight Leukemia Center
International Employee Resource Group*

Nancy Haigwood, PhD

*Director, Oregon National Primate Research
Center, West Campus*

Daniel Haupt, MD

*Skilled Volunteer, Department of Public
Safety*

Anne Horgan

*Social Work Supervisor, Social Work-
Healthcare Management*

Ian Jaquiss

*Interim ADA Coordinator, AAEO,
Veterans Employee Resource Group*

Holden Sanders

*Research Audiologist, Ability Resource
Employee Resource Group*

Helen Schuckers, MPH

*Research Associate, OIOHS, Asian
Pacific Islander Employee Resource
Group*

Violet Trammel

*Police Officer, Department of Public
Safety*

Lawrence Williams

*Educational Technology Specialist,
OHSU Faculty Senate*

Judi Workman

*Associate Chief Nursing Officer,
ICU/IMC Services, Department of
Emergency Medicine*

Susan Yoder RN, BSN

Director, Patient Relations

Attachments

1. [Backgrounder on the OHSU Department of Public Safety including use-of-force data, stop-and-arrest data and more](#)
2. [January 2021 Update from the Task Force](#)
3. [Meeting agenda and supporting materials: Jan. 11, 2021](#)
4. [Meeting agenda and supporting materials: Jan. 25, 2021](#)
5. [Meeting agenda and supporting materials: Feb. 8, 2021](#)
6. [Meeting agenda and supporting materials: Feb. 22, 2021](#)
7. [Meeting agenda and supporting materials: March 8, 2021](#)
8. [Meeting agenda and supporting materials: March 15, 2021](#)
9. [Review of relevant state and federal legislation](#)
10. [OHSU Public Safety policy review/trauma-informed feedback](#)
11. [Report from the 2008 Critical Incident Readiness Task Force \(without attachments\)](#)



The OHSU Campus Safety Review Task Force

Applying a trauma-informed lens

Alisha Moreland-Capuia, M.D.
Dana Bjarnason, Ph.D., R.N., NE-BC

Anti-racist efforts must be built on a trauma-informed
foundation

The context

- The murder of George Floyd at the hands of police in Minneapolis in May 2020 was met with relentless calls to re-imagine policing practices across the country (and around the world really)
- Struck deep, historic wounds
- 37 states and the District of Columbia introduced over 700 pieces of new legislation directly related to police reform (National Conference of State Legislatures, 2021)
- Approximately 25 states have already enacted legislation addressing police reform (use-of-force standards, use-of-force data, training, certification, decertification)

The two-part OCSRTF charge

1. An evaluation of the current “state” of the Department of Public Safety with the metrics for that evaluation identified and defined.

Is the department doing well against these defined metrics? How could the department be improved?

2. What, if any, changes to the structure of the Department of Public Safety or legal status and authority of the police officers, or to the functions, procedures, policies or practices of the Department, would ensure just and equitable practices within the Department of Public Safety and best ensure safety at OHSU?

What are the functional benefits and functional challenges of each identified option?

2008 Critical Incident Readiness Task

Force

Findings:

- Public Safety lacks sufficient legal authority to protect the campus
- Portland Police cannot provide adequate armed response (up to 15 minute response time/lack of familiarity with campus)

Recommendations:

- OHSU should seek legislation to provide Public Safety with police officer authority/training
- OHSU should arm Public Safety officers *or* contract with a police agency for an armed presence on campus

Trauma-informed principles

1. Safety
2. Choice
3. Collaboration
4. Trustworthiness
5. Empowerment
6. Cultural/historical/gender

Trauma-informed principles application

- Selection of OCSRTF members
- Expectations for information sharing at working meetings
- Expectations for communications with OHSU community
- Review of policies and procedures – reviewed 400 + page Public Safety policy
- Feedback
- Findings and recommendations

Security setting

- Public Safety Officers are “Peace Officers” by Oregon statute
 - Tasked with ensuring the safety of hospital and university personnel, trainees, patients and the public
- Pre-pandemic: ~ 25,000 people circulated through OHSU campus each day—akin to mid-sized Oregon city from security standpoint
- More than 90% of the 26,000 annual calls to Public Safety are from clinical mission
- Incidence of violence and aggression aimed at health care workers is a growing security threat

OCSRTF membership

- Representatives from all OHSU missions, employee categories
- All active Employee Resource Groups, Student Council, Faculty Senate, Anti-Racism Task Force
- Public Safety representatives
- Clinical units with high rate of interaction with Public Safety
- Two self-nominated at-large members, two external members
- Knowledge of police, law, judicial system; anti-racism, equity and inclusion activism; relevant lived-experience (including negative) with police

Task force process

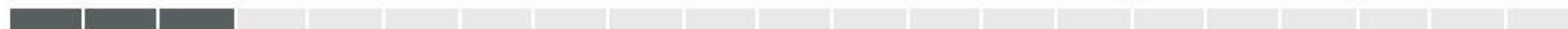
- Transparent operations and communications
- Trauma-informed training workshop for all members
- Seven working sessions
- Wide breadth of performance and other data reviewed, expert presentations, officer training models, anti-racist policing best practices
- Testimony from OHSU members
- Task force deliberations

Use-of-force, stop-and-arrest data

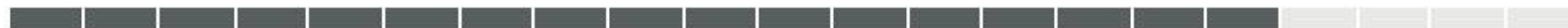
- Since the 2014 decision to arm OHSU police, a firearm has never been discharged by an OHSU officer
- 21 incidents involving a firearm have occurred
 - pointed at an individual 9 times
 - unholstered without pointing 9 times
 - unlocked a holstered firearm 3 times
- During the same six years, 7 Taser, 0 baton and 0 OC (pepper spray) incidents have occurred

Actions involving a firearm

21 incidents | Fall, 2014 – June 2020



3 OF 21 PERSON OF COLOR



17 OF 21 MALE

Reason for interaction with a firearm

21 incidents | Fall, 2014 – June 2020



8 OF 21 PERSONS ARMED WITH A WEAPON



3 OF 21 PERSONS REPORTED OR BELIEVED TO BE ARMED WITH A WEAPON



5 OF 21 CHALLENGING PERSON AT END OF PURSUIT OR DURING HIGH-RISK STOP



5 OF 21 CLEARING SPACE FOR PERSON POTENTIALLY COMMITTING FELONY CRIME

Actions involving a Taser

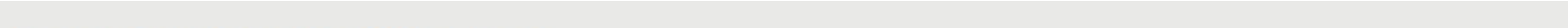
7 incidents | 2014 - June 2020



3 OF 7 PERSON OF COLOR



7 OF 7 MALE



Reason for interaction with a Taser

7 incidents | 2014 - June 2020



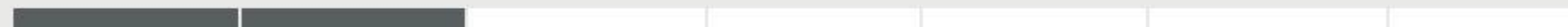
2 OF 7 PERSON ATTACKED OFFICER



2 OF 7 PERSON POSSESSED KNIFE AND ASSAULTED OFFICER



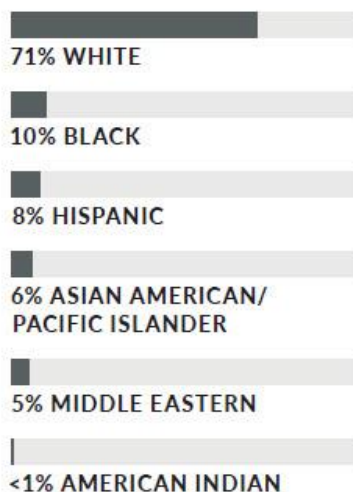
1 OF 7 PERSON ATTEMPTED TO ASSAULT OFFICER AND GRABBED OFFICER'S HOLSTERED FIREARM



2 OF 7 PERSON ARMED AND THREATENING WITH KNIFE

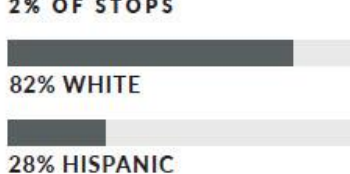
Over the past year, OHSU police officers have made 702 stops not associated with a call for service

Stops



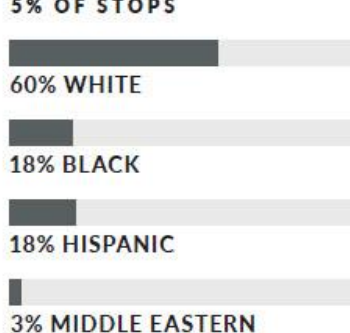
Searches

2% OF STOPS



Citations

5% OF STOPS

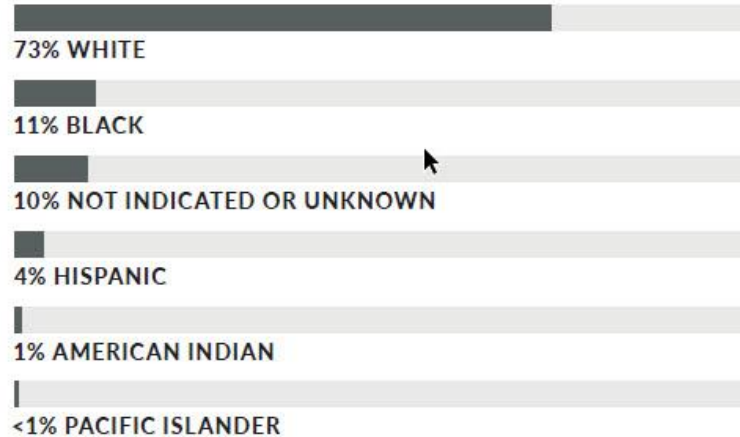


Arrests

2% OF STOPS



Over the past year, OHSU police officers have made 241 arrests



Four-part training for OHSU police

1. Oregon Basic Policy Academy training
2. Customized OHSU training emphasizing strategic disengagement, de-escalation, trauma-informed and cultural responsiveness
3. Field-training at OHSU campus under guidance/mentorship of existing officers
4. Continuous improvement annual training

Local police reform efforts (best practice review)

- Portland Committee on Community-Engaged Policing: Re-envisioning Core Patrol Services (i.e. officers responses to emergency and non-emergency calls for service)
- Call for a community-led review and re-envisioning of core patrol services, convened by the Portland Committee on Community-Engaged Policing - June 9, 2020
- 19-point police reform action plan
- Intended outcomes? Increase public safety by addressing crime and change behavior by way of:
 - Police officer presence, citations, fines, written and verbal warnings, arrests, referrals

Models of safety and policing (best practice review)

The Portland Street Response pilot

- Includes a team of four:
 - Firefighter EMT
 - Licensed mental health crisis therapist
 - Two community health workers
- Main objective as directed by the community: keep this program separate from police
- Portland Street Response is partnering with Portland State University's Homelessness Research and Action Collaborative to provide external program evaluation

CAHOOTS (Crisis Assistance Helping Out On The Streets) operating in Eugene, Oregon

- Nationally recognized success story, in operation for 30 years
- Each van is staffed by a medic (nurse or EMT) and an experienced crisis worker
- Takes the social and crisis counseling calls for Eugene Police department
- CAHOOTS diverts 5-8% of calls from police

In response to the first part of the charge (in brief)

- The Department of Public Safety's focus on de-escalation and strategic disengagement as primary modes of operation could be deemed best practices aligned with anti-racist policing models
- Areas of concern including racial/ethnic disproportionality in use-of-force, stop-and-arrest and other performance data relative to Oregon demographics and the OHSU employee base exist
- Incomplete data related to race/ethnicity and category (patient, employee, visitor, student) limited the evaluation and this must be addressed going forward
- The task force made recommendations for improvements in key areas

In response to the second part of the charge (in brief)

- No changes to the legal status or authority of OHSU police officers are recommended currently
- Eleven recommendations relative to the functions, procedures, policies or practices of the department are made including:
 - Transition the OCSRTF to an ongoing oversight body, and charge it with developing a trauma-informed continuous improvement plan relying on strengthened data collection
 - Understand how OHSU members define safety and what they need to be safe
 - Improve department community outreach and communications, reframe public safety as an aspect of public health
 - Evaluate a campus program modeled after Portland Street Response
 - Address the rising threat of violence against health care workers



Discussion



**RESOLUTION 2021-04-02
OREGON HEALTH & SCIENCE UNIVERSITY
BOARD OF DIRECTORS**

WHEREAS, Lubna Khan, M.D., has served as a member of the Board of Directors of Oregon Health & Science University since May 8, 2019, including service on the Integrity Program Oversight Council and University Health System Board;

WHEREAS, the Board of Directors wishes to recognize the service, thoughtful leadership and outstanding achievements of Dr. Khan; and

NOW THEREFORE, BE IT RESOLVED, that Oregon Health & Science University expresses its sincere appreciation for the valuable service and dedication of Dr. Lubna Khan throughout her tenure on the Board of Directors and for advancing OHSU's missions of teaching, healing, discovery and outreach.

This Resolution is adopted this 16th day of April, 2021.

Yeas _____

Nays _____

Signed by the Secretary of the Board on April 16, 2021.

Connie Seeley
Board Secretary



**RESOLUTION 2021-04-03
OREGON HEALTH & SCIENCE UNIVERSITY
BOARD OF DIRECTORS**

WHEREAS, Amy Tykeson has served as a member of the Board of Directors of Oregon Health & Science University since December 13, 2012;

WHEREAS, in addition to and as a part of her membership on the OHSU Board, Ms. Tykeson served as a member and Chair of the Finance and Audit Committee, as a member of the Investment Committee, as a member of the Human Resources Committee, as a member of the Governance Committee, and as a member of the Integrity Program Oversight Committee;

WHEREAS, throughout her Board service and in each of these many venues, Ms. Tykeson has brought her strong intellect, her thoughtful approach to decision making, her sound critical thinking, and her strong leadership skills; and

WHEREAS, the Board wishes to recognize Ms. Tykeson's service on the OHSU Board and on each of the Committees of the OHSU Board of Directors.

NOW THEREFORE, BE IT RESOLVED, that Oregon Health & Science University expresses its heartfelt appreciation for the significant contributions of Amy Tykeson throughout her service on the OHSU Board of Directors and for advancing OHSU's missions of teaching, healing, discovery and outreach.

This Resolution is adopted this 16th day of April, 2021.

Yeas _____

Nays _____

Signed by the Secretary of the Board on April 16, 2021.

Connie Seeley
Board Secretary

Glossary of Terms

A3 – Single page strategy

AAEO – Affirmative Action and Equal Opportunity

ACA - Affordable Care Act. The Patient Protection and Affordable Care Act, often shortened to the Affordable Care Act (ACA) or nicknamed Obamacare, is a United States federal statute enacted by the 111th United States Congress and signed into law by President Barack Obama on March 23, 2010

AFSCME - American Federation of State, County and Municipal Employees. A union that represents OHSU classified employees.

AH - Adventist Health.

AHC - Academic Health Center. A partnership between healthcare providers and universities focusing on research, clinical services, education and training. They are intended to ensure that medical research breakthroughs lead to direct clinical benefits for patients.

AHRQ – Agency for Healthcare Research and Quality

AI/AN - American Indian/Alaska Native

AMD - Age-Related Muscular Degeneration is a common eye condition and a leading cause of vision loss among people age 50 and older.

APP – advanced practice providers

APR - Academic Program Review: The process by which all academic programs are evaluated for quality and effectiveness by a faculty committee at least once every five years.

ARRA - American Recovery and Reinvestment Act of 2009.

A/R - Accounts Receivable. Money owed to a company by its debtors

ASF - Assignable Square Feet. The sum of all area on all floors of a building assigned to, or available for assignment to, an occupant or specific use.

AVS – After visit summary

A&AS – Audit and Advisory Services

BIPOC – Black, Indigenous, and People of Color

BRB - Biomedical Research Building. A building at OHSU.

CAGR - Compound Annual Growth Rate measures the annual growth rate of an investment for a time period greater than a year.

CAO - Chief Administrative Officer.

Capex - Capital expense

CAUTI – catheter associated urinary tract infections

C Diff – Clostridium Difficile

CEI - Casey Eye Institute. An institute with OHSU.

CFO - Chief Financial Officer.

CHH - Center for Health & Healing Building. A building at OHSU.

CHH-2 - Center for Health & Healing Building 2. A building at OHSU.

CHIO – Chief Health Information Officer

CLABSI – Central line associated bloodstream infections

CLSB - Collaborative Life Sciences Building. A building at OHSU.

CMH - Columbia Memorial Hospital. A hospital in Astoria, Oregon.

CMI - Case Mix Index. Relative value assigned to a diagnosis-related group of patients in a medical care environment.

CMS - Centers for Medicare & Medicaid Services. A federal agency within the United States Department of Health and Human Services (HHS) that administers the Medicare program and works in partnership with state governments to administer Medicaid, the Children's Health Insurance Program (CHIP), and health insurance portability standards. In addition to these programs, CMS has other responsibilities, including the administrative simplification standards from the Health Insurance Portability and Accountability Act of 1996 (HIPAA), quality standards in long-term care facilities (more commonly referred to as nursing homes) through its survey and certification process, clinical laboratory quality standards under the Clinical Laboratory Improvement Amendments, and oversight of HealthCare.gov.

CPI - Consumer Price Index measures the average prices of goods & services in the United States.

CWTF - COVID Wellness Task Force

CY - Current Year.

DAC- Diversity Advisory Council

DEI – Diversity, Equity, & Inclusion

Downstream referral activity - specialty referrals that generate a higher margin and result from the primary care activity.

Days Cash on Hand - The number of days that OHSU can continue to pay its operating expenses with the unrestricted operating cash and investments.

DCH - Doernbecher Children's Hospital. A building at OHSU.

DMD - Doctor of Dental Medicine.

DNP - Doctor of Nursing.

DNV – Det Norske Veritas

E&M – Evaluation and management

EBIT - Earnings before Interest and Taxes. A financial measure measuring a firm's profit that includes all expenses except interest and income tax.

EBITDA - Earnings before Interest, Taxes, Depreciation and Amortization.
ED - Emergency Department. A department in OHSU specializing in the acute care of patients who present without prior appointment.
EHR - Electronic Health Record. A digital version of a patient's medical history.
EHRS - Environmental Health and Safety
EMR - Electronic medical record
ENT - Ear, Nose, and Throat. A surgical subspecialty known as Otorhinolaryngology.
EOC - Emergency Operations Center
EPIC - Epic Systems. An electronic medical records system.
ER - Emergency Room.
ERG - Electroretinography is an eye test used to detect abnormal function of the retina.
ERM - Enterprise Risk Management. Enterprise risk management in business includes the methods and processes used by organizations to manage risks and seize opportunities related to the achievement of their objectives.

FTE - Full-time equivalent is the hours worked by an employee on a full-time basis.
FY - Fiscal Year. OHSU's fiscal year is July 1 – June 30.

GAAP - Generally Accepted Accounting Principles. Is a collection of commonly-followed accounting rules and standards for financial reporting.
GASB - Governmental Accounting Standards Board. Is the source of generally accepted accounting principles used by state and local governments in the United States.
GDP - Gross Domestic Product is the total value of goods and services produced within a country's borders for a specified time period.
GIP - General in-patient
GME - Graduate Medical Education. Any type of formal medical education, usually hospital-sponsored or hospital-based training, pursued after receipt of the M.D. or D.O. degree in the United States. This education includes internship, residency, subspecialty and fellowship programs, and leads to state licensure.
GPO - group purchasing organization

H1 - first half of fiscal year
H2 - second half of fiscal year
HCAHPS - Hospital Consumer Assessment of Healthcare Providers and Systems
HR - Human Resources.
HRBP - Human resources business partner
HSE - Harvard School of Education
HSPH - Harvard School of Public Health

IA - Internal Arrangements. The funds flow between different units or schools within OHSU.
ICU - Intensive Care Unit. A designated area of a hospital facility that is dedicated to the care of patients who are seriously ill.
IGT - Intergovernmental Transfers. Are a transfer of funds from another government entity (e.g., county, city or another state agency) to the state Medicaid agency.
IHI - Institute for Health Care Improvement
IP - In Patient
IPS - Information Privacy and Security
ISO - International Organization for Standardization

KCC - Knight Cancer Center. A building at OHSU.
KCRB - Knight Cancer Research Building
KPV - Kohler Pavilion. A building at OHSU.

L - Floor Level
L&D - Labor and Delivery.
LGBTQ - Lesbian, Gay, Bisexual, Transgender, Queer
LOI - Letter of Intent. Generally used before a definitive agreement to start a period of due diligence before an enduring contract is created.
LOS - Length of stay

M - Million
MA - Medicare Advantage
M and A - Merger and acquisition.
MBU - Mother-Baby Unit. A unit in a hospital for postpartum women and their newborn.
MCMC - Mid-Columbia Medical Center. A medical center in The Dalles, OR.
MD - Doctor of Medicine.
MOU - Memorandum of Understanding
MPH - Master of Public Health.

NAM – National Academy of Medicine

NFP - Not For Profit.

NICU - Neonatal Intensive Care Unit specializes in the care of ill or premature newborn infants.

NIH - National Institutes of Health. A part of the U.S. Department of Health and Human Services, NIH is the largest biomedical research agency in the world.

NOL - Net Operating Loss. A loss taken in a period where a company's allowable tax deductions are greater than its taxable income. When more expenses than revenues are incurred during the period, the net operating loss for the company can generally be used to recover past tax payments.

NPS: Net Promotor Score.

NWCCU - Northwest Commission on Colleges and Universities: OHSU's regional accrediting body which is recognized by the U.S. Department of Education as the authority on the educational quality of institutions in the Northwest region and which qualifies OHSU and our students with access to federal Title IV student financial aid funds.

O2 – OHSU's Intranet

OCA - Overhead Cost Allocation. Internal OHSU mechanism for allocating overhead expenses out to departments.

OCNE - Oregon Consortium for Nursing Education. A partnership of Oregon nursing programs.

OCT - Optical Coherence Tomography is a non-invasive imaging test.

OCTRI - Oregon Clinical & Translational Research Institute. An institute within OHSU.

OHA - Oregon Health Authority. A government agency in the state of Oregon.

O/E – observed/expected ratio

OHSU—Oregon Health & Science University

OHSUF - Oregon Health & Science University Foundation.

ONA - Oregon Nurses Association. Professional association for nurses in Oregon.

ONPRC - Oregon National Primate Research Center. One of seven federally funded National Primate Research Centers in the United States and a part of OHSU.

OP – Outpatient. If your doctor sends you to the hospital for x-rays or other diagnostic tests, or if you have same-day surgery or visit the emergency department, you are considered an outpatient, even if you spend the night in the course of getting those services. You only become an inpatient if your doctor writes orders to have you formally admitted.

OPP – OHSU Practice Plan

OPAM - Office of Proposal and Award Management is an OHSU department that supports the research community by providing pre-award and post-award services of sponsored projects and awards.

OPE - Other Payroll Expense. Employment-related expenses for benefits which the university incurs in addition to an employee's actual salary.

Opex: Operating expense

OR- Oregon

OR - Operating Room. A room in a hospital specially equipped for surgical operations.

OSU - Oregon State University.

P – Parking Floor Level

PAMC - Portland Adventist Medical Center.

PaWS – Parking and Workplace Strategy

PDT - Photodynamic Therapy is a treatment that uses special drugs and light to kill cancer cells.

PERI-OP – Perioperative. The time period describing the duration of a patient's surgical procedure; this commonly includes ward admission, anesthesia, surgery, and recovery

PERS - Public Employees Retirement System. The State of Oregon's defined benefit plan.

PET/MRI - Positron Emission Tomography and Magnetic Resonance Imaging. A hybrid imaging technology that incorporates MRI soft tissue morphological imaging and positron emission tomography PET functional imaging.

PHB – Portland Housing Bureau

PPI – physician preference items

PPO - Preferred Provider Organization. A type of health plan that contracts with medical providers, such as hospitals and doctors, to create a network of participating providers. You pay less if you use providers that belong to the plan's network.

Prgram – Program

PSI – patient safety intelligence

PSU - Portland State University.

PTO - Personal Time Off. For example sick and vacation time.

PV - Present Value. The current value of a future sum of money or stream of cash flows given a specified rate of return.

PY - Previous Year.

Quaternary - Extension of Tertiary care involving even more highly specialized medical procedures and treatments.

R&E - Research and Education.

RFP – Request for Proposal

RLSB: Robertson Life Sciences Building

RN - Registered Nurse.

ROI – return on investment

RPA - Robotic Process Automation. Refers to software that can be easily programmed to do basic tasks across applications just as human workers do

RPV – revenue per visit

SCB – Schnitzer CampusBlock

SG&A - Selling, General and Administrative expenses. A major non-production cost presented in an income statement

SLM – Senior Leadership Meeting

SLO - Student Learning Outcomes Assessment: The process of establishing learning goals, providing learning opportunities, measuring student learning and using the results to inform curricular change. The assessment process examines whether students achieved the learning goals established for them.

SoD – School of Dentistry

SoM - School of Medicine. A school within OHSU.

SoN – School of Nursing

SOPs – Standard Operating Procedures

SPH - School of Public Health. A school within OHSU.

SPD - Sterile Processing Department. An integrated place in hospitals and other health care facilities that performs sterilization and other actions on medical devices, equipment and consumables.

SSI – surgical site infection

TBD – to be decided

Tertiary - Highly specialized medical care over extended period of time involving advanced and complex procedures and treatments.

THK – Total hip and knees

TBD - Technology Transfer & Business Development supports advancement of OHSU research, innovation, commercialization and entrepreneurship for the benefit of society.

UBCI – Unconscious Bias Campus– wide initiative

Unfunded Actuarial Liability - Difference between actuarial values of assets and actuarial accrued liabilities of a pension plan. Represents amount owed to an employee in future years that exceed current assets and projected growth.

UO—University of Oregon

UPP - University Pension Plan. OHSU's defined benefit plan.

URM – underrepresented minority

VBP – Value-based purchasing

VGTI - Vaccine and Gene Therapy Institute. An institute within OHSU.

VTE – venous thromboembolism

WACC - Weighted Average Cost of Capital is the calculation of a firm's cost of capital in which each capital category is proportionately weighted.

WMG – Wednesday Morning Group

wRVU - Work Relative Value Unit. A measure of value used in the United States Medicare reimbursement formula for physician services

YoY - Year over year.

YTD - Year to date.