



## UTHealth Executive Summary

### Background

The University of Texas Health Science Center at Houston (UTHealth) initiated a strategic planning process by forming a team to examine the needs of the communities we serve, and develop an approach to improve the health outcomes and disparities of this population. We sought to be inclusive of faculty across all areas and regions where we had campuses and faculty (e.g., Brownville, San Antonio). Key members of the 20+ member planning committee include the Dean of the School of Biomedical Informatics (Jiajie Zhang, PhD); Dean of the School of Public Health (Eric Boerwinkle, PhD); and Dean of the McGovern Medical School (Barbara Stoll, MD). Each of the Deans were asked to nominate other members, and we ended up with approximately 22 representatives. All 6 schools were represented in the planning process.

### Approach

We followed a modified approach to community-based strategic planning, similar to that recommended by the National Association of County and City Health Officials (NACCHO, 2010). This involved addressing critical questions early on, such as “what population do we serve?” and “what are our UTHealth priorities?”. This process was organized around four critical phases:

- Assemble the right mix of faculty from across the institution
- Perform baseline measurement of existing programs in population health
- Develop a structure for analyzing strategic choices for moving forward
- Implementation of strategy

### Targeted Health Focus Areas

As a result of the strategic planning process, we identified 8 core health areas to target in future research and practice. These areas include:

1. Maternal and child health (including both women's health, quality and safety of maternal care, and infant/child health)
2. Cardiovascular health (reducing hypertension with a focus on secondary and tertiary prevention)
3. Children's vaccination (for necessary and recommendation immunizations)

4. Latino health (improving the health of Latino and Hispanic populations in Texas)
5. Vulnerable and Homeless populations (improving access to care for homeless youths and adults; people with disabilities)
6. Mental health (e.g. reach of rural and underserved populations)
7. High-risk chronically ill (e.g., COPD, type 2 diabetes, and hypertension)
8. Alternative Health care Delivery Models (including new delivery modalities such as telehealth and mobile health).

### Action Items

Through the efforts of our faculty in all schools and regions, UTHealth will begin to pursue the following short-term action items.

- Pursue Funding for Population Science Research: We will work collaboratively to identify one or two “foundational” health priorities to target and submit grant protocols. We will develop collaboration across all schools and regional campuses for broad-based community research initiatives for targeted health priorities.
- Improve our UT Physicians clinical practice. The UT Physician network (comprised of 18+ clinics) has potential for real improvements in health for populations we currently serve. We will focus on value we can achieve at our own physician practice, by integrating population health concepts to improve clinical care and financing programs.
- Develop Thought Leadership. The institution will sponsor routine, regular thought leaders and speakers on population health to continue to bring expertise in this area to the University.

### Summary

Our proposed strategic plan and initiatives, if supported by institutional and future grant funding, will improve the population health of Southeast Texas. Through engagement of local community partners and the development of multiple population health initiatives, the plan discussed here will focus on determinants of health, and introduce health strategies and interventions to improve the health status of Texans.