



THE SUMMIT VIEW

**As his eleven-year tenure
nears its end, Dean Rick
Morin reflects on the high
points of his time at the
helm of the Larner College
of Medicine, and looks at
the landscape ahead.**

VERMONT MEDICINE:

When you first came to UVM in 2007, you said that you felt that your career up to that point had prepared you well for this next step in your career. Do you still feel that way today as you reflect on your tenure as dean?

RICK MORIN:

A good deal of my career had prepared me. I'd seen many of the pieces as a division chief, department chair, interim dean, and a pediatrician-in-chief. The difference with the deanship is that the scope of the job is so much larger. You're maintaining relationships with a broad audience — with UVM Health Network, the UVM Medical Center, the physician group, the University, and the other colleges, and with the State of Vermont, the legislature and the Vermont Medical Society. All that in addition to the relationships here at “home” — the faculty, staff, students, and alumni. So you have this much broader view as dean. Many people at the institution have discrete areas of responsibility. The dean, in some ways, is the only one who's responsible for the whole thing. I had some experience with this as the interim dean in Buffalo, but it's even more complicated here in some ways because of the importance of this College within the state.



Meeting with medical students over lunch in 2009.

community. And we've greatly improved and strengthened the relationship among the College, the Medical Center, and the University with our renegotiated affiliation agreement. Those aren't things that happen in the public eye, but they're vital to the success of the institution.

VM You also implemented an extensive strategic planning process, didn't you?

RM Yes. The first one we completed, across the institution, was the diversity and inclusion plan. We actually executed that first five-year plan and instituted a new one looking ahead. We did the things we said we were going to do and I'm proud that we have the most diverse student body in the history of the University of Vermont. There's certainly more work to do, and our current five-year plan will help guide those efforts.

When we made plans, we executed the plans. We weren't always successful. We always did what we said we were going to do and, most of the time, it actually worked. And in the end, it's the execution of the plans that counts — getting everybody together, crowdsourcing ideas, getting cohesion and commitment, and then making it real. I hope this has encouraged a culture of collaboration, and nimbleness, so that we can take advantage of opportunities that come up.

VM Back in 2007, when you first arrived here, you noted enhancing educational programs as something that was going to be a key focus.

RM And that's something that was way beyond my personal expertise. But we have people here who are very strong educational leaders — Lewis First, and then Bill Jeffries — who have been great to work with. When Bill Jeffries came to me and said "Here's the data on where we ought to be going," it was hard to argue with 250 studies that all pointed toward the immense value of active learning.

Dr. Larner's gift has accelerated our work dramatically, but we were going in that direction already. Dr. Larner challenged us to go further, and provided us the resources to do that. We've been able to accomplish our goals even faster than we'd planned, and I do believe the medical education we offer here will be second to none. A year after the Larners' gift, we had a five year plan, and almost immediately we jumped to year three of the plan. By year three we hoped to start telling the world where

we were. By the end of one year, the world already knew. I think there is no college of medicine that in the last few years that has received as much national and international recognition for their educational program. I have never seen anything like it in my career. We have a compelling story.

Along with our active learning work, we've built a Teaching Academy to help faculty develop teaching techniques and study the results, and keep improving our efforts. That's an unprecedented thing.

VM This dovetails very interestingly with your relationship with alumni. You've spent a lot of time over the last decade getting to know our graduates. It's interesting that one of our oldest alumni was most influential in making possible the most modern of teaching reforms.

RM Our alumni feel involved. That's why we consistently rank so high in alumni support and engagement. Bob Larner was an example. He was a person who wanted to see results, and I understand that. That was true when he first started supporting student loans and scholarships — he wanted the data on how that was helping. We kept showing him the results. I think it was the confidence in our ability to produce results, and his gratitude for where his medical education had taken him, that guided his incredible generosity.

VM That also led to improvements in our Clinical Simulation Laboratory, didn't it?



Leading a tour of the Given Courtyard construction in 2009.

RM And to our knowledge, and we surveyed medical school sim centers, our is the busiest one in the country. We actually teach more students, in more hours. Others may be bigger and shinier, but ours is actually used. And it actually has an impact with the students.

VM Another challenge you've faced is building clinical education opportunities.

RM Yes, that was certainly a challenge. It was a real loss for us when we lost Maine Medical Center. But we rebounded from that quickly. We set up agreements with other places with substantial clinical foundations. And we also managed, as part of that, to find a much more diverse population of patients, and of physicians and educators, to work with our students. ...Which was an unexpected positive outcome, I think. That was something that Maine didn't offer. Bill Jeffries just really scrambled to make that happen. There were ups and downs. There were challenges, and we had to meet those challenges, but our partners worked with us.

VM And now we're at the point where we have a branch campus.

RM Now we have a formal branch campus, with Western Connecticut Health Network, recognized by the state of Connecticut, and by the LCME, our accrediting body. And there's actually a potential for growth of that now with WCHN's merger with Quest, which has four more hospitals on the other side of the Hudson River.

And meanwhile our program with St. Mary's in Florida is thriving. It's one of our highest-rated clerkships every year.



Vermont Senator Bernie Sanders speaks with Dean Morin in 2010.

VM And you've overseen the formation of longitudinal integrative clerkships.

RM That was an attempt to do more, in a setting like those in the smaller hospitals in our network, where it's almost impossible to do a traditional clerkship, but over a year, with a broad panel of patients to follow, it can be very successful. We stated piloting it with Hudson Headwaters Health Network a year ago, and our first group of students did incredibly well. We have four more students there this year and we're working on doing another LIC at Central Vermont Medical Center next. If we can train students like that in Vermont, that's great, and this is what we're working to do — using the network to expand clinical education.

VM Among the changes you've seen is the formation of that very network, the UVM Health Network—

RM Well, that's something that's foundational, that fundamental relationship. You can't be a medical school unless you can teach clinical medicine, and you can't teach clinical medicine unless you have a substantial clinical foundation in which to do it. It takes an amazing number of patients to train a medical student. I remember when we started rewriting the affiliation agreement with [UVM Health Network CEO] John Brumsted. We rewrote that and it was dramatically better for both of us, I think. We became much better connected. It worked for us clinically and in education, and led to us merging our development efforts, which has been very successful. We're unquestionably functioning better than ever. I give John Brumsted credit — he recognized the value of being a university medical center, where it all comes together: the teaching, the research, and the patient care.

VM You've also seen, in your time here, the rise of the accountable care organizations—

RM And that's an area where John Brumsted and I really drank the Kool-Aid. (laughs) We both believed in this idea of value-based reimbursement, where you're incentivized to get better outcomes. And we're aligning with the clinical operation. One of our strategic plans

"BUT YOU'RE NEVER REALLY PREPARED UNTIL YOU JUST START DOING IT. I HAD BEEN TOLD, WHEN YOU'RE THE DEAN, YOU'RE NO LONGER PLAYING AN INSTRUMENT, YOU'RE THE CONDUCTOR. AND THAT'S TRUE. RIGHT? YOU CAN'T FOCUS ON BEING THE BEST AT ANY SINGLE FUNCTION OF THE COLLEGE. YOU'VE GOT TO KEEP YOUR EYE ON THE WHOLE THING, KEEP THE CONNECTIONS GOING, AND PROVIDE THE ENVIRONMENT PEOPLE CAN THRIVE IN."

— DEAN RICK MORIN

was to develop health care services research. We have about 15 million dollars a year of such work going on, and we've hired a leader, Adam Atherly, to organize that. We have a commitment to go forward with creating a data warehouse, and that clinical data will help us see how to control costs and get better outcomes. We've already had experience with that via VCHIP [the Vermont Child Health improvement Program]. Vermont can be a leader on this, and affect health care delivery far beyond our borders.

VM It's also been a challenging landscape for research over the last ten years.

RM We receive a very modest amount of state support. And if you look at the return on investment that we make to the state, we return about eight to nine dollars per dollar of investment. The average public medical school returns about a dollar. We are nine times higher than average. So we are incredibly productive at what we do. And if you also look at spinoff corporations from the University of Vermont, the vast majority originate at our College. What we do is important for the economy. Our research is a big engine. Our research also brings in clinical trials for devices and drugs and diagnostic tools that just, frankly, would not be available in the state otherwise. Vermont is in the top ten states in research

money per capita, and we're the driver of that. A year after I came here, in 2008, we got hit, as everybody did. There were a lot of things that could have gone wrong then. But we got through all that. We've held our own in research and we have grown it recently. And the work we do is world class.

With that in mind, it's important for us to consider the state of our facilities. Given is our biggest building, and it's nearly 60 years old. The research world has changed since then. Even if we had kept this place pristine, it wouldn't be adequate for today's science and equipment. So our plans are to put up a new building and then we're going to completely rehab Given.

VM And this leads into graduate education too—

RM It definitely impacts graduate education. We need better space to perform the research, and we should be able to do 30 percent more with the same amount of space because it's so much more efficient. That investment is also a huge recruiting tool for doctoral students, junior faculty, senior faculty. It functions as a recruitment and retention tool. Graduate education in the natural sciences, certainly in medicine, is built upon good, funded, published ongoing research. If you have that going on, then it's a wonderful



Presenting Robert Larner, M.D.'42 with a photo of current Larner Scholars in 2013.

environment in which to teach Ph.D. students. If you don't have that going on, you can't. The research is a foundation for having robust Ph.D. and post-doctorate programs. The research is first, and you build the educational programs on top of that. We need to build the next generation of biomedical scientists, recruit them, and retain them.

VM Returning again to things you said when you first came to UVM: you said you loved the fact that all the different components of the University and the academic health center were so close — that you could walk to the President's office or the medical center CEO's office in a matter of a few minutes. Clearly, that physical proximity has turned into a personal proximity with the people in those offices.

RM That just enhances and improves the opportunity for good relationships. And that has happened, you know. We can get things done just more rapidly because there's a longstanding trust there with my fellow leaders. In some ways, it's the same thing with the alumni — it's a sense of trust that's developed. You don't give your hard-earned money to somebody that you don't trust. They can see what we've done. That's why we're going to meet or beat our \$200 million goal for this campaign. And sure, we had the Larner gift, but more than half that goal came from a broad array of other alumni and friends. It's been a wonderful thing to work with alumni and find

their passion and help them do things, create things, for their medical school.

VM You also seem to have really embraced Vermont.

RM Oh, yes. It's a great place to live. Tracy and I love it. I love the outdoors — hiking, biking, skiing, fishing, climbing mountains.

VM So you're not going away. Is the path ahead clear?

RM I'll have a sabbatical — the first one I've ever taken in my career. And I've been talking with the president and provost about projects they would like to have done that I might help with. And I'd like to continue my relationships with alumni.

VM As you said when you made the announcement last August, there are more peaks for you to climb.

RM There always are. I like go out and climb mountains and I like to get to the top. I remember many years ago, running with a friend of mine, and talking about our careers. And I said I wanted to find something I could devote myself to, work hard at, and reach the end of it completely spent. Well, I found it, and I've reached what I feel is a good stopping point. But I'm not spent! The job's never really done. So we'll get a new dean who'll bring their own passion to it. I feel we've done a lot and set a foundation for a lot more to come. I'm confident of that. **VM**



Assisting at the Class of 2016 White Coat Ceremony.



MORE MOUNTAINS

When he's not busy leading the UVM Larner College of Medicine, Dean Rick Morin likes to engage in challenging outdoor activities, so it was only natural for him to choose winter mountaineering as the focus of his fundraising campaign — "Three Peaks in Four Weeks" — in honor of the Class of 2018 and their Match Day.

Launched one month out from Match Day on February 16, 2018, the campaign consisted of three milestones at which Morin pledged to climb a mountain and contribute funds for the 2018 Match Challenge. Originally, Morin set his sights on summiting Vermont's three tallest peaks — Camel's Hump, Killington, and Mount Mansfield. But after reviewing the routes, he decided to replace the less-challenging Killington with Mount Marcy in New York's Adirondacks and altered his plan to the three tallest peaks that can be seen from campus.

Morin challenged 375 medical alumni to make donations during this campaign. After the first 100 donations were logged, he summited Camel's Hump -- and donated \$2,500 to the College of Medicine Fund.

"Camel's Hump can be an easy hike, with good conditions," said Morin, who completed the hike following the Forest City trail to the Long Trail to the summit, which he explained makes the hike 50 to 100 percent longer and more difficult. An experienced winter climber, Morin wore a combination of layers for his mountain ascents and descents. Upon reaching the tree line, he added a windbreaker and down jacket to provide protection from the winds and colder air at the summit.

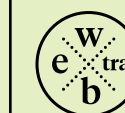
With the Match Challenge campaign's surpassing 200 medical alumni donors, Morin took on a second peak — Mount Mansfield. His first attempt was solo and more challenging than expected. He opted to take "the road less traveled" and found a trail that was abandoned



At top, Dean Rick Morin holds the "Move Mountains" campaign banner atop Camel's Hump. Above, Morin on the trek up Mt. Marcy.

in the early 1960s, around the same time when the Given building was built. Due to deep snow and waning daylight, he had to return to the base before reaching the top. However, his second attempt, with friends, was successful, and was followed by a \$5,000 gift.

Alumni donor number 375 came through the morning of Match Day, and prompted Morin's final trek up Mt. Marcy a few days later, and his final gift of \$7,500 for a total of \$15,000 to support student scholarships and wellness.



See a video of the "3 Peaks in 4 Weeks" challenge at: www.med.uvm.edu/vtmedicine