



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committee on Health
and

Senate Committee on Higher Education
March 23, 2021 at 3:15 p.m.

by

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HB 1297 HD2 Proposed SD1 – RELATING TO STATE FINANCES

Chair Keohokalole and Kim, Vice Chairs Baker and Kidani, and members of the Committees:

Thank you for this opportunity to provide testimony in strong opposition to Part III of HB 1297 HD2 Proposed SD1, which proposes to legislate several matters of internal structure and management within the University of Hawai'i (UH) relating to the UH Cancer Center (UHCC) and the John A. Burns School of Medicine (JABSOM).

This section would replace the judgment and decision of the Board of Regents, which established the Cancer Center in 1981 as a freestanding Organized Research Unit (ORU) of the University of Hawai'i at Mānoa, by imposing a structure created by the Legislature and by imposing new restrictions on the use of certain funds by both the UHCC and JABSOM.

We oppose this section for three reasons:

The UH Cancer Center is now an extraordinarily successful unit. The National Cancer Institute (NCI) of the National Institutes of Health has awarded formal cancer center designation to only 71 NCI-designated cancer centers in the nation and the UHCC. This is a critical designation for which we have worked diligently and in which the university and State have invested significant resources. The UHCC is not in need of a management “fix” by the Legislature that would tie the hands of the university from making future changes, perhaps even more sweeping than those proposed in this bill. Our External Advisory Board has noted (Attached) the importance of the current structure to achieving our success.

It is also not necessary to the desired synergies to single out the UH Cancer Center and JABSOM for a new legislative mandate that places new restrictions on these two units' uses of specific funds.

Third, while the Legislature has reserved to itself the right to legislate matters of statewide concern, it is neither appropriate nor necessary for the legislature to substitute its opinions on specific matters of internal structure and management for the reasoned views of the UH, which is ultimately responsible to maximize the ability of the Cancer Center to reduce the burden of cancer on the people of Hawai'i.

Success of the UHCC

Each year the University of Hawai'i Cancer Center is assessed by our External Advisory Committee (EAC), which is sometimes referred to as the External Advisory Board or EAB. The EAC is composed of a group of Cancer Center directors and leaders from around the country who visit each year to provide unbiased input and guidance to advance our program and help ensure our compliance with the NCI P30 guidelines.

The EAC could hardly have been more positive over these past years regarding the turnaround at the UH Cancer Center under the leadership of Dr. Randy Holcombe, our esteemed, accomplished and experienced Cancer Center director. I have appended the latest Executive Summary of their report to this testimony so that you can see just how well Dr. Holcombe and his team have addressed what were longstanding and widely recognized challenges. This report is from their 2020 visit and the verbal debriefing we received after their 2021 (virtual) visit was extremely positive as well.

The primary mission of the UH Cancer is distinct from that of JABSOM. A legislative "fix" such as proposed in this Bill would embed a legislatively developed structure in statute and likely tie the hands of the University and Board of Regents from making future structural changes, which might be even more sweeping than what is proposed in this legislation.

Achieving Synergies

It is important also to note that modern cancer research reaches across the entire University, including but not limited to our medical school. There are many opportunities for synergies at our Kaka'ako campus, and it is important also to note that modern cancer research reaches across the entire University. Major synergies and efficiencies have already been achieved through collaboration with JABSOM and other critical parts of UH.

It is notable that **26 full and associate members** of the Cancer Center are based in UH units other than the Cancer Center as are **21 collaborating members**.

Some specific academic examples of synergies and efficiencies include:

- Dean of JABSOM participates as a member of the Hawai'i Cancer Consortium which was created by UHCC and includes the CEOs and other representatives of the major hospital systems (Queens, HPH, Adventist Health Castle, Kuakini) and the UH President and UHM Provost to coordinate efforts in Hawai'i to reduce the burden of cancer and enhance the quality of cancer care for our state.

- UHCC moved ownership of the NMR (more than \$1M in value) to Chemistry to better support their work as their NMR was less capable and eventually non-functional. The NMR also remains housed in JABSOM.
- The R25 CREATE grant (\$1.3M) which is designed to give the undergraduate students summer instruction has PIs from both the UH Cancer Center (Maskarinec & Ramos) and the Department of Native Hawaiian Health at JABSOM (Kaholokula).
- UHCC has one of its Faculty (Ramos) working as multi-PI with JABSOM (Kaholokula & Gerschenson) and Engineering (Francis) PIs to submit a large Proposal called 'Akahi which is designed to provide funds to recruit Native Hawaiian and Pacific Islanders into Faculty positions across UH STEM programs and create a culture of Inclusive Excellence at UH Mānoa.
- Support of two First year Graduate students in JABSOM's Cell and Molecular Biology Program.
- Support of two graduate students per year in Public Health (School of Social Work) or Nutrition (CTAHR)
- JABSOM and UH Cancer Center share access and expenses of running the vivarium at Kaka'ako with members from both on its Space Allocation Committee.
- UHCC collaborated with Outreach College to create the highly successful and oversubscribed Clinical Research Professional Certificate Program in Fall 2020. This was an intense program taught by faculty from UHCC to fill the great need in Hawai'i of Clinical Research Associates to help run clinical research in the hospitals. Several have already obtained positions.
- UHCC works with hospitals in the Hawai'i Cancer Consortium to recruit much needed Cancer Specialists to Hawai'i. This includes providing a research/clinical trials outlet for them which is an expectation of these Clinicians.
- UHCC is working with Life Sciences to identify areas where its faculty can work to help teach undergraduates there in lecture formats (they already coordinate to identify students for research training).
- Joint faculty appointment with Nursing (July 1, 2018)
- Participation in the Colleges of Health Sciences which includes not only JABSOM but Nursing & Dental Hygiene, Social Work & Public Health, and Pharmacy (UH Hilo)
- All Cancer Biology faculty provide course direction and teaching in the JABSOM CMB department
- Cancer Center participation in JABSOM-created UHP faculty practice plan
- Support of Kaka'ako wide Genomics and Bioinformatics Shared Resource (joint venture between UH Cancer Center and JABSOM)
- Support of Chemical Biology Core leader, who is Chemistry faculty
- UH Cancer Center NMR facility is housed in JABSOM
- Cancer Center endowed chair awarded to a Chemistry faculty member
- JABSOM faculty member (Palafox) heads Cancer Center effort on a research partnership with Guam

- Cancer Center faculty participate in innumerable graduate committees for programs in other units, particularly Cell and Molecular Biology (JABSOM), Molecular Biosciences & Biotechnology (CTAHR), Public Health (Social Work)
- UH Cancer Center faculty participate as members of the JABSOM recruitment and curriculum committees for Cell and Molecular Biology
- Multiple UH Cancer Center clinically oriented faculty hold joint appointments in JABSOM (Medicine, OBGYN, Pediatrics, Pathology)
- UHCC and JABSOM merged phone systems to improve efficiencies
- UHCC and JABSOM share common area maintenance charges
- UHCC and JABSOM coordinate on achieving parking solutions for Kaka'ako campus
- Several of the large COBRE grants include UHCC faculty either currently or previously.
- Clinical Faculty at UHCC practice through the University Health Partners of Hawai'i Practice Plan.
- Cancer Center Director serves as chair of IFA search committee
- Standing meetings between Cancer Center and JABSOM administrative directors
- Cancer Center supports 2 months of salary for a JABSOM researcher
- Significant amount Cancer Center pilot research funds have been awarded to JABSOM faculty (>\$150,000 over the last 3 years)
- Nomination of JABSOM faculty researchers for grant mechanisms restricted to Cancer Centers
- UHCC Director serves as a Board member of University Health Partners
- UHCC Director serves as a Steering Committee Member Ola Hawai'i
- UHCC Director serves as a Board member for the Hawai'i Journal of Health and Social Welfare with JABSOM, Nursing, Social Work, Pharmacy Schools
- UHCC member Morita serves as Contributing editor, Journal of Health and Social Welfare
- UHCC Director serves as Internal Advisory Committee member for Marla Berry-led COBRE project, Pacific Biosciences Research Center
- UHCC member Braun-Inglis holds a secondary appointment in School of Nursing, developing advance practice training program for cancer APPs with Assoc. Dean of Nursing Qureshi.
- UHCC and JABSOM Facilities/Admin collaborated on lease arrangement for Disney for Doogie Kamealoha
- UHCC has established 3 advisory boards to enhance collaborations in the community: Community Advisory Board, Patient Advocacy Committee, Native Hawaiian Cancer Research Advisory Board (Cathy has membership of each).
- UHCC member Shepherd collaborates actively with the Hawai'i Data Science Institute

We fully realize that our work to create and expand synergies in Kaka'ako is not complete. But it is clear that an ongoing effort to identify further synergies and

efficiencies in the areas of research, education, clinical practice and administration within Kaka'ako, and potentially with other health sciences programs beyond, does not require the legislative imposition of a specific structural change that would then require further legislation if we are to continue to evolve.

University Governance

Article X, Section 6 of the Constitution of the State of Hawai'i charges the Regents with "exclusive jurisdiction over the internal structure, management, and operation of the university," with the legislature reserving to itself laws of statewide concern. Imposing this change in internal structure and management via statute, with disregard for the university's consultative shared governance and management processes, would overrule the judgments of those who are responsible for the internal structure and management of the university under the Constitution. These are the entities and processes responsible for making decisions that will lessen the burden of cancer on the people of Hawai'i.

At a more detailed level Part III of this bill: (1) creates a new appointment process outside Board of Regents policy that is inconsistent with the Board of Regents policy utilized for all other executive appointments across the UH system; and (2) creates a new organizational construct called "administratively affiliated" that is not defined but is clearly intended to create a form of subservient relationship for the Cancer Center relative to JABSOM; and (3) mandates a new and ambiguous dual reporting structure to implement that subservience.

We also oppose the language in the proposed SD1 that would create a set of new restrictions on both the UH Cancer Center and JABSOM regarding the allowable use of two specific of funds. The University of Hawai'i has worked over the past 25 years to manage itself using multiple sources of funding provided by the state as well as funds generated internally by our own efforts. Some of these types of funding are more fungible than others, but our ability to use funds flexibly under HRS and Executive direction today has helped us cope with the State appropriating a shrinking portion of state general funds to public higher education over the last several decades. Creating major new restrictions on two significant sources of funds for two UH Mānoa campus units (only) will create additional administrative burdens as we work to support the vital work of these two units, which are critical to improving the health of the people of Hawai'i.

We urge that the legislature not overstep the spirit of the Constitution to legislate the internal structure and management of the university. It is neither prudent nor necessary.

We strongly oppose this section and ask that it be deferred.

ATTACHMENT

January 31, 2020

Randall F. Holcombe, MD, MBA
Director, University of Hawaii Cancer Center
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Dear Dr. Holcombe

Thank you for hosting the External Advisory Board during our recent visit to the University of Hawaii Cancer Center (UHCC). It was exciting to see the continued progress taking place at UHCC under your leadership. We will be sending you a detailed report on our recommendations concerning the various aspects of your center with a focus on performance and compliance with the NCI P30 guidelines. This letter is an executive summary that focuses on the larger issues that go beyond the details of NCI guidelines. Feel free to share this summary with others as you see fit.

First, and most importantly, we would like to comment on the remarkable progress that you, your colleagues, and University and community leaders have made over the past year. The morale and esprit de corps of UHCC members and staff are stronger than they have been for a very long time. The new faculty you have recruited to the University of Hawaii over the past two years are top tier and are already making significant contributions including obtaining funding, publishing and assuming leadership roles within the UHCC. The presentations they gave during our visit were dynamic and scientifically exciting. Bringing such quality new talent to the UHCC is key to your continued scientific success, will strengthen the base of your research programs, and will contribute economic and educational value to the University, Hawaii, and the people of Hawaii in general.

The development of an early phase clinical trial capability in Hawaii has been a topic of discussion during EAB meetings for over a decade. It is exciting to see the progress you have made over the past year including obtaining a construction grant from the NIH, securing state support, and moving forward with plans for both building the unit physically, and recruiting the talent needed to make it work. In addition, the work that you have done to secure the collaboration of your clinical partners in the Hawaii Cancer Consortium for this endeavor is exceptional. This effort should remain a top priority as it will provide the people of Hawaii with access to Phase 1 clinical trials, that is the newest cancer treatments, at a time when cancer care is advancing at a remarkable rate. It also has great potential to serve as a hub for "medical tourism" for the entire Pacific rim. Given the diversity of your patient population, we are confident big pharma and small biotech will seek out your participation in their most promising early phase trials; the resultant enhanced reputation for clinical research will benefit both the Cancer Center and all of the HCC clinical partners.

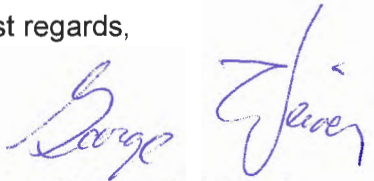
Equally impressive is the progress you and your colleagues have made in strengthening the Hawai'i Cancer Consortium. UHCC's leadership in this consortium will help the participating health systems recruit top flight oncology clinicians who see the value of clinical trials and the research that underpins them. UHCC's oversight over all oncology clinical research activity within the HCC, and the broader clinical trials network, is an outstanding example of the value-added of an NCI-designated cancer center to its home state and the benefits that can accrue to affiliated clinical partners.

UHCC is a national leader in population-based research. Particular strengths include the Multiethnic Cohort (MEC) that has led the way in helping the cancer research community explore the relationship across race and ethnicity of genetics and environment in cancer risk and the NCORP that enrolls patients from across Hawaii on NCI trials. Your basic research scientists are also making major contributions and bringing external research funding to Hawaii at a time when getting such funding at the national level is incredibly competitive.

The unique structure of UHCC, in essence a hybrid of a "matrix" center within a University and a "free-standing" center with defined authority, has been a key to the Cancer Center's success. This has enabled you as Director to expand membership in the HCC, forge new community alliances, and strategically recruit faculty researchers who support your efforts to conduct cancer research with particular relevance to your unique population. This type of authority speaks directly to NCI's expectations of a cancer center director. The structure your institution has put in place, with you reporting to the Provost and working closely with the University President, is vital for your continued success and continued NCI designation.

Once again, congratulations on your ongoing success. We look forward to seeing the future contributions being made by the UHCC to the health and welfare of the people of Hawaii.

Best regards,

A handwritten signature in blue ink that reads "George Weiner". The signature is written in a cursive, flowing style.

George Weiner, MD, Chair
Holden Comprehensive Cancer Center, University of Iowa
On behalf of the External Advisory Board Members