

UT Southwestern

Medical Center

Sept. 9, 2026, Campus Briefing Transcript

Dr. Podolsky:

Good morning. I'm Dr. Daniel Podolsky, President of UT Southwestern Medical Center. I want to welcome all of you who are joining me this morning for this first quarterly briefing of the new academic year and hope you've had an enjoyable summer. And a special welcome to those who are new to our UT Southwestern community, learners across our four schools, trainees, and many new colleagues who have joined our faculty and staff. If you haven't seen it, I hope you will look in your inbox for a message with the subject line "A New Academic Year at UT Southwestern," sent yesterday. Rather than repeat the details of the message, which I shared yesterday morning, I'll focus today's update on other news so we can leave as much time as possible for your questions.

As I usually do, I'll begin with updates on key leadership positions since people really are the essence of UT Southwestern. Last Monday, coinciding with his 10th anniversary in joining UT Southwestern, Dr. Marc Nivet assumed a new position as the permanent Executive Vice President for Business Affairs. This follows his serving in that role on an interim basis since the retirement of Holly Crawford this past May. Dr. Nivet previously served as Executive Vice President for Institutional Advancement, a unit that includes in part Development & Alumni Relations; Communications, Marketing, and Public Affairs; and Government Affairs and Policy. With Dr. Nivet's shift in leadership responsibility, those departments will return to their original reporting structure directly under me, and I look forward to continued accomplishments across each of these areas in support of our institutional mission.

In addition to Dr. Nivet assuming his new leadership role, I'm pleased to note that we've had two new additions to the UT Southwestern leadership team: In July, Dr. Warren D'Souza joined us from the University of Maryland Medical System as our inaugural Chief AI Officer. And in August, Mr. Wayne Young joined us from Houston as the inaugural CEO of the Texas Behavioral Health Center.

I want to now recognize a pretty extraordinary national distinction for UT Southwestern science, which I emailed the campus about just a little earlier this morning. Sleep researcher Dr. Masashi Yanagisawa has been named as the recipient of the 2026 Albert Lasker Basic Medical Research Award for his discovery of the cause of narcolepsy and fundamental new insights into the nature of sleep. Dr. Yanagisawa identified orexin, a peptide in the brain that regulates wakefulness, and this discovery made in his laboratory at UT Southwestern has transformed scientific understanding of sleep and helped lead to new treatments for insomnia and narcolepsy. He shares this award with Dr. Emmanuel Mignot, a member of the faculty of Stanford University.

Dr. Yanagisawa was a full-time faculty member at UT Southwestern for more than 20 years before returning to a primary appointment at Tsukuba University in Japan, where he is the Director of the International Institute for Integrative Sleep Medicine. He continues to maintain a part-time adjunct appointment on our faculty of UT Southwestern.

This marks the third consecutive year and sixth time overall that a UT Southwestern scientist has received a Lasker Award, often referred to as “America’s Nobel Prize.” This follows Dr. Steven McKnight last year and Dr. Zhijian “James” Chen in 2024. I take this as a powerful example of the lasting impact of discovery science at UT Southwestern and the way fundamental research can ultimately improve lives around the world.

Keeping with the theme of recognition, earlier this summer, UT Southwestern was ranked the No. 1 hospital in Dallas-Fort Worth by *U.S. News & World Report* for the 10th consecutive year. That places UT Southwestern among the top 25 out of more than 4,500 hospitals ranked nationwide. We also continue to lead the state with the most nationally ranked specialties of any hospital in Texas, with 11 of our specialty services in the top 50 and eight among the top 25 across more than 4,500 hospitals in the country.

This includes a top 10 national ranking for neurology and neurosurgery, which speaks volumes about the impact of those departments and our O’Donnell Brain Institute and its role in advancing brain care and research over the past decade. We also received “High Performing” ratings for 18 adult procedures and conditions, reinforcing our reputation as a leader not only in North Texas but across the nation. I want to thank all of you who in any way support the care that we provide to our patients, whether that’s in a direct caregiving role or in the many, many roles which make it possible for our physicians, nurses, and other direct caregivers to provide for the needs of our patients.

Again, staying with the theme of recognition, I want to take a moment to thank members of our Faculty Awards Committee along with our co-Chairs, Drs. Maeve Sheehan and John Mansour, who spent the past several weeks reviewing nominations for this year’s Leaders in Clinical Excellence Awards. They work exceptionally hard to select from among a large and very strong pool of nominees. The winners were announced last week, so if you missed it, I encourage you to revisit that campus message and hope you’ll join me on Nov. 4 in Gooch Auditorium as we recognize these exceptional colleagues and their teams who have worked across our many sites of service in their commitment to the care of our patients, to the education and training of the next generation of healthcare professionals, and to advancing UT Southwestern overall.

Now I’d like to move on to some updates on our investments and capital projects supporting clinical expansion and more. If you have driven on our campus, it is almost impossible not to notice the progress being made on the New Pediatric Campus, including the progress in the installation of the exterior’s dichroic glass, which gives the distinctive color that you will see and its many different shades depending on time of

day and the position from which you are observing the structure. We are fast approaching a major milestone for construction, the topping out of the Moody Children's Hospital on the campus, which celebrates the placement of the final construction beams. While there is still a long road ahead before we open its doors to care for our patients – indeed, four years or more – this is a meaningful moment for everyone involved in the project, including our faculty and staff, to reflect on what has been accomplished by working together along with our colleagues and partners at Children's Health as a means of providing for the future generations of children and their families in North Texas and beyond.

We want to ensure that everybody across UT Southwestern has an opportunity to be part of this milestone and leave their mark on the New Pediatric Campus. On Sept. 22 and 23, a construction beam will be placed on McDermott Plaza on the South Campus for members of the UT Southwestern community to sign. I encourage each of you to stop by and add your signature, joining the many individuals whose work and commitment are helping bring this extraordinary new campus to life. Once signed, the beam will make its way to the construction site where it will become a lasting part of the new hospital and a meaningful symbol of the collective effort behind this, really, historic project.

We are also making significant progress on another major capital investment, our new Radiation Oncology facility in Fort Worth. On Nov. 16, we will celebrate the topping off of that facility, marking another construction milestone since we broke ground last May. This project represents a key step forward in our continued expansion in Fort Worth and our long-standing commitment to meeting the healthcare needs of this rapidly growing community in that community. We look forward to celebrating this milestone with our Fort Worth community and recognizing the many individuals whose hard work and commitment continue to move this important project forward.

Finally, I am pleased to report that progress is being made in the planning for a new academic building to be constructed on our South Campus. This effort is being led by our Provost and Dean Dr. Andy Lee and will provide a home for our expanding O'Donnell School of Public Health as well as a new home replacing the existing facility for our School of Health Professions. This represents a further investment in our commitment to both the education and research missions that are embodied by these two important schools that comprise a key part of the UT Southwestern Medical Center.

Turning from those investments in facilities, I want to make note of an important initiative, which will begin later in this month and in many ways is even more fundamental in laying the foundations for the future of UT Southwestern, and that is an update of our Six-Year Strategic Plan. This rolling six-year plan allows us to prioritize both our resources and our efforts in identifying the greatest opportunities to advance our mission across all of its fronts. The plan will be the product of perspectives from all aspects of the campus, and overall effort will be led by Dr. Lora Hooper, Chair of our Department of Immunology, and Dr. Elan Louis, Chair of our Department of Neurology.

I'm grateful for all who will be participating in this effort, which sets the path for UT Southwestern over the next several years.

Turning from those investments in the future, I want to spend a moment to highlight some really important frame setting in the areas of policies that govern how we carry out our mission. I want to begin by highlighting an update for our Standards of Conduct. Our Standards of Conduct represent a shared commitment among all of us at UT Southwestern to uphold our culture built on ethical decision-making, accountability, and compliance across all operations and our collective daily decisions. This update includes a handful of changes, and I want to highlight those briefly.

First, these updated standards for individual accountability emphasize that each person has the responsibility to exercise sound judgment, to report concerns, and to cooperate with investigations and institutional reviews. New guidance on research security introduces expectations for protecting research data, intellectual property, and other research assets, while complying with all applicable laws, sponsor requirements, and institutional policy. The updated standards recognize the potential for artificial intelligence to enhance education, research, patient care, and administrative operations, making clear that these tools must be used ethically and responsibly with protection for sensitive information, with human oversight of generated content, and with accountability for AI-assisted decisions.

New language promotes our shared responsibility for cybersecurity as well, emphasizing that everyone has a role in safeguarding our institutional information and technology resources. This includes recognizing and reporting suspicious activity and complying with our institutional security requirements.

Finally, and in some ways most importantly in my view, the update makes absolutely explicit our obligation to speak up when we see something that does not comport with UT Southwestern policy or values. It reinforces that every one of us has an affirmative duty to report suspected violations of law, regulation, institutional policy, or other misconduct.

I want to emphasize that these updates do not change the fundamental values that have long defined UT Southwestern. Rather, they are intended to clarify how those values apply to emerging risks, technologies, and responsibilities. Each of us contributes to the strength of our culture through the choices we make, the questions we ask, and our willingness to speak up when something does not appear right.

Now we'd like to turn to another important area of update. Our Human Resources team has been working on several technology enhancements, which will launch over the next 18 months, and I wanted to share those with you this morning. These new tools are designed to make it easier to access HR resources, to manage key responsibilities, and to receive timely support when you need it through modernized technology.

One of the largest projects they are working on is HR Central, a unified hub where you will be able to easily connect with the HR team for any HR need, to navigate new self-

service options, and to explore best practices. Last month, mid-August, we launched the first phase of this platform for leaders, the Employee Relations Portal. This secure platform provides resources, expert guidance, and integrated support in partnership with the Employees Relations Consultants on workplace and employee concerns. Phase two of this project will add more functionality and expand support channels and resources across a wide range of topics for both employees and leaders, and that will launch in the spring of 2027.

The HR team is also working on two other exciting upgrades. First, UTS Learn, a much-upgraded learning management system which will replace Taleo Learn. It will offer personalized learning plans, career development resources, and analytics to support professional and leadership development. And the second exciting upgrade is the new recruiting applicant tracking system that will replace Taleo's Talent Acquisition Manager. It will give hiring managers a more efficient, transparent process while using an AI interface to improve the candidate experience. Please watch for additional communication about these upgrades.

Finally this morning, I invite you to join me in this year's State Employee Charitable Campaign, SECC, as an opportunity to come together as a community to make a meaningful difference in the lives of those less fortunate throughout Texas and beyond. SECC is an annual initiative that allows state employees to contribute to a wide range of charitable organizations and causes, more than 1,000 overall. The campaign is a testament to the power of collective giving, where even the smallest contributions can add up to significant impact. We have set a goal of \$300,000 for this year's campaign, which runs through Oct. 31. Every contribution helps, and together we can make a meaningful difference for fellow Texans in need. More information is on our website.

Now before I address the many questions you have submitted, I'd like to provide a few reminders about upcoming events. The academic year's first President's Lecture will take place next week, on Thursday, Sept. 17, and will feature Dr. Jim Collins, Professor of Pharmacology here at UT Southwestern. Dr. Collins' work is reshaping the approach to global health by focusing on neglected tropical diseases that affect hundreds of millions of people worldwide.

This year marks UT Southwestern's 16th year participating in the Dallas Heart Walk, and that's scheduled for Saturday, Oct. 17. Like last year, the walk will be held at Levy Event Plaza in Irving. I hope to see you there as you join your hundreds, and really thousands of UT Southwestern colleagues in this important event. I encourage everyone to join a team or to sign up as an individual walker. Money raised during the walk benefits heart disease and stroke patients and funds critical research at UT Southwestern and beyond.

And with that, I'll conclude my update. Before I turn to Jenny Doren, who will, as she has so wonderfully done in the past, pose your questions, I want to let you know that even if we don't have time to get to all of your questions, your concerns are heard and

we plan to reply to your original email with more information. And so I'll now turn to you, Jenny.

Jenny Doren:

Well, thank you very much, Dr. Podolsky. Always a pleasure to be here. I'm going to begin with campus safety and some new camera technology. What prompted UTSW to adopt it? How does it support security? And how are privacy considerations being addressed?

Dr. Podolsky:

Well, I appreciate the question and understand the concern, particularly with recent developments in the news and attention on Flock cameras. Some of you may recall that I have mentioned in past briefings that the University Police had contracted with Flock in response to a rising number of vehicle burglaries, auto thefts, and catalytic converter thefts, mostly subsequent to the COVID-19 pandemic, across the campus. The cameras have proved to be an effective investigation tool, crime deterrent, and protective warning device. University Police follows policies governing the system's use, monitoring, and auditing. The cameras capture images of vehicles driven in public spaces, not drivers. Additionally, Flock does not provide vehicle owner information. Any vehicle-identifying information is obtained through the Texas Law Enforcement Telecommunications System and the Texas Department of Motor Vehicles. Both systems are regulated by external state entities and are for official law enforcement use only. Lastly, the University Police retains only information used to further criminal investigations, and none outside of that purpose is retained for any record.

Jenny Doren:

I want to stick with campus safety for another question. Can you share how UT Southwestern is evaluating security needs across our hospitals and clinics, including whether additional screening or other measures are being considered to help employees, patients, and visitors feel safe?

Dr. Podolsky:

Safety and security of our employees, patients, and visitors is among our highest priorities, and we are continually evaluating our practices to ensure we respond appropriately to the needs of our campus community. As part of those efforts, about six months ago, we implemented weapons detection screening in the Emergency Department at Clements University Hospital. We are now gathering data to assess the effectiveness of that implementation, including how it has addressed safety concerns raised by staff there. Once that evaluation is complete, we will review the findings with the appropriate leaders and consider opportunities to expand this screening detection or implement additional security measures in other areas across our campus. We'll note

that we have also incorporated weapons detection screening at the entrance of the Texas Behavioral Health Center, which opened earlier this summer.

Importantly, no single measure can address every potential safety concern. Our approach is to continually assess our environment, listen to feedback from those who work and receive care here, and make thoughtful evidence-based decisions about where additional safeguards may be needed.

We recognize how important it is for everyone who comes to UT Southwestern – whether to work, receive care, or visit – to feel safe and secure, and we remain deeply committed to that responsibility.

Jenny Doren:

We appreciate that. I want to move to another important topic, and that's artificial intelligence. It is becoming an increasingly important tool across healthcare, research, education, and administrative work. Can you share how UT Southwestern is approaching AI, where you see the greatest opportunities for our institution, and how we are ensuring it is used responsibly?

Dr. Podolsky:

Well, there is no question that AI is already reshaping biomedical research, clinical care, education, and institutional operations. Our responsibility is to identify where it creates value, evaluate it rigorously, ensure that we protect patients and institutional data, and keep people with the right expertise accountable for consequential decisions. While we may not use AI everywhere, wherever we do, we will be sure to adopt it responsibly. I will note in this context that in July, Dr. Warren D'Souza joined UT Southwestern as our inaugural Chief AI Officer. And Dr. Sousa, in these early weeks and months, has taken responsibility for organizing an overall governance structure for the deployment of AI across our institution.

There will be an overall institutional governance committee, but then in addition to that, committees that are responsible for evaluating the opportunities and the implementation of AI tools in our major mission areas. We will also be looking to the office of the Chief AI Officer to build capacity here, to support our teams across the campus in identifying the opportunities that AI can provide for enhancing the work that we do and our ability to deliver on our mission, and then how to realize that opportunity.

This work is already taking shape in practical ways using AI to help physicians identify clinical trials for which patients may be eligible, combining clinical pathology with AI algorithms to support more precise treatment for lung cancer patients, and evaluating clinical knowledge and technical skills in simulating learning environments while preserving the human touch that is essential to care. These are just a few examples of the scores of initiatives that I know are underway across our campus. I note that we are planning for a campuswide AI Town Hall later this fall, which will be hosted by Dr. D'Souza, and that will be a great opportunity for anyone on the campus interested to dig

into this topic in greater detail and an opportunity where he will share that vision for AI across the breadth of UT Southwestern's missions.

Jenny Doren:

Certainly look forward to learning more about that. Here's a question related to our *U.S. News and World Report* Best Hospitals rankings, which I know you touched on earlier. What do you see as the key factors that distinguish the hospitals ranked above us, and what strategic priorities will help UT Southwestern achieve and sustain the No. 1 position in Texas?

Dr. Podolsky:

Well, I appreciate the question, first as an opportunity to reemphasize what I hope is felt across our institution, and that is that nobody should be getting up in the morning – and myself included – with the goal of rankings as an end in and of themselves. We take pride in those rankings for what they reflect in terms of the quality of care that we are delivering to our patients, our commitment to excellence and compassion, and how we do that. But the rankings are based on important metrics related to those goals of sustained excellence and patient experience. And so I take the question as a question of “how can we do even better,” which then will be reflected in those rankings.

Some of the answer to this question is really within the details of the rankings. There are certain programs that go into the ultimate point count that determines these rankings, which we've made a decision are not appropriate for a number of reasons here at UT Southwestern, and the one I can point to most obviously is having a Level I trauma center at our Clements University Hospital. With a Level I trauma center at our partner, Parkland, just down the block, we believe that is where it makes most sense to concentrate our resources rather than duplicate them. And as a consequence, the points which would be attributable to us if we made the decision for the wrong reason, that is to get rankings, would elevate it. So, I want to emphasize that in any of our further efforts, we're going to focus on, what I've said already, excellence as opposed to things that have only a primary benefit in this kind of recognition.

Now, when you look at hospitals that consistently rank among the very top in the country, the differences are often measured at the margins in very, very small differences. Indeed, UT Southwestern already performs at the very highest levels in many specialties, as I mentioned already in my briefing remarks. Our opportunity is to extend the depth of excellence more consistently across an even broader range of programs.

What often distinguishes those institutions is sustained excellence across multiple specialties and conditions, exceptional patient outcomes, and strong national reputations built over many years. And our focus is clear: continue improving outcomes and patient safety, expand the number of programs and services recognized as high performing, enhance the patient experience, broaden access to the outstanding care we provide, and provide a means of continuing to attract exceptional faculty, staff, and trainees. And what will follow with that will be a higher level of national recognition that does come really in the course of time.

If we remain focused on these fundamentals, we will continue to strengthen our position in Texas and nationally and, most importantly, continue to deliver on our mission to provide the very best care for our patients, advance discovery, and educate the next generation of healthcare leaders.

Jenny Doren:

Very helpful perspective. And we know all of this work requires exceptional people. You speak about them often. What steps is UT Southwestern taking to create clearer career pathways and professional development opportunities that help employees grow, advance, and build long-term careers here?

Dr. Podolsky:

We certainly recognize that career growth and professional development are important elements of our employees' experience, and opportunities to grow are essential to keep them here and contributing to the UT Southwestern mission. And we're committed to providing resources that help employees build skills, explore opportunities, and grow within the institution.

As mentioned in my initial remarks, we are investing in a new online learning management system, UTSW Learn, which will launch later this fall and replace Taleo Learn. It will use AI to provide personalized learning plans, career growth resources, and analytics to support professional and leadership development. UTSW Learn will link job categories and required skills to relevant content and certification materials, I believe dramatically simplifying career planning and continuous learning for advancement. It will also offer an opportunity to practice interview skills, customer service interactions, and difficult conversations in a simulated AI environment and provide tips and training based on your responses. UTSW Learn will complement existing staff development programs, including DiSC communication training, Values in Practice, customer service skills, and leadership programs for aspiring new and current leaders.

Jenny Doren:

Thank you for that. Our next question relates to communication among care teams. An employee shared concerns that providers are sometimes unavailable in [Epic] Secure Chat during working hours, that pager messages may go unanswered, and that coverage arrangements are not always clear when a provider is out of office. The employee asks whether we can improve communication availability and coverage processes to support timely patient care. And I recognize this probably will be our last question.

Dr. Podolsky:

Thank you to the colleague who has raised this important concern. Effective communication among care teams is essential to safe, timely, high-quality care, and

unclear communication pathways can not only create confusion and inefficiency, but potentially undermine the quality of the care that we are providing to our patients. This is a complex challenge.

Electronic clinical communications have increased substantially across healthcare, and though tools such as Secure Chat can improve connection, they can also create interruptions for clinicians who are caring for patients, reviewing results, documenting care, and managing other responsibilities. For that reason, our goal is not simply to increase the volume of communication, but to ensure that communication reaches the right individual at the right time and through the most appropriate channel. And essential to all that is having clarity about who is responsible for the care of the patient, whether that's in the hospital or the ambulatory setting.

In our hospitals, we have made meaningful progress establishing more consistent identification of who is the first call provider responsible for each patient. In the ambulatory setting, coverage models and workflows do vary across specialties in clinic. So clinical and operational leaders are now focused on making arrangements for clarity and consistency in identifying responsible physicians for patients on any given day. We will continue to evaluate clinical communication tools and workflows and develop clear guidance on the appropriate use of pagers, Secure Chat, and other channels. And we will continue working with clinical leaders, informatics teams, and operational partners to support timely communication and patient safety while being mindful of the interruption load experienced by physicians, advanced practice providers, nurses, and other members of the care team.

Jenny Doren:

Well, thank you so much for your time this morning and for your answers to these many questions.

Dr. Podolsky:

Thank you, Jenny.