



*Presidential
Inauguration Speech*
OF

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Commitment to Maryland



Ruby Simmons was my first patient as a medical student. She was in her 60s. She had diabetes, and her kidneys were failing.

Today, we would have put her on dialysis, maybe considered her for a transplant.

Back then, when I was a medical student, dialysis was a rare resource. We didn't have much of it, and it wasn't well developed. So, the way dialysis was allocated at that time was by a triage process. There was a group of people who evaluated a patient's medical suitability. And if they chose you, you had a chance to survive. If they didn't choose you, you didn't survive. You had no hope.

So, my patient, Ruby Simmons, came before that committee. She had many medical problems. She lived alone. She used public transportation. It took her an hour to get to the medical center. After deliberation, she was not chosen. She was not going to have dialysis available for her. She had no hope. She didn't have any options. But that's where we came in.

And when I say we, I mean my professor of medicine at Jefferson, Norman Lasker, a kidney doctor, and me. Dr. Lasker had a dream that there was another kind of dialysis that could be done at home, at night, and was easier to do. I was a young medical student, believe it or not, with an engineering background. I knew a lot about dialysis — about the science of it. So, he and I partnered together, and we worked very well together. We also worked very hard to develop a prototype machine, a device that would do what we dreamed it would do. We called it the Cyclor.

So, when Ruby found out she had no hope, no options, we were ready.

We were ready to give her an option, an option that might let her survive. So, with her permission, we got started working out the details of how to dialyze Ruby. There were plenty of challenges. And there were many nights that I spent in the ICU with Ruby all night, making sure that she was OK, that the Cyclor was working, that we were accomplishing what we wanted to do. There came a time when it worked fine. And it was time to go home.

So, Ruby went home. And every week, Dr. Lasker and I would get in his big blue Chevy. We'd drive it down to South Philly near the oil refinery. There was a housing project there. We parked in the middle, got out to take supplies to Ruby, check her out, and make sure she was doing OK. And she was. Ruby and I and Dr. Lasker had many discussions about her health, but also about her life and what was important to her. We formed a bond.

What did Ruby appreciate the most with all this newfound time? She appreciated that she got to spend several more years with her grandchildren, to see her grandchildren grow a little bit more, to see them mature, to see their careers develop. That was so important to her. I learned a lot from Ruby. I learned respect for life and human dignity. I learned what a health disparity is. I mean, really what it is up close and personal, in taking care of Ruby. I also learned in that process that I could make a difference. I'd already made a difference for one person. But maybe I could make a difference for more than one person? Maybe for many? You never know what could happen.

A month ago, I was sitting with my wife, Leslie, an internist, and my daughter Gwynneth, a nurse.

Gwynneth tells us often about how she's taking care of patients, how difficult it is during COVID, and what the problems are. She started talking to me about one patient. This particular patient was in the hospital for a small procedure, but she was a dialysis patient. She was a dialysis patient at home at night using a machine. I started asking some questions. This is 30 to 40 years later, and she's using our Cyclor, our design, device, our invention. Now, my daughter didn't realize at the time where that thing had come from. But to me, it was a thrill. It was a thrill that our idea was still alive now, many years later. It was also a thrill because our invention, our Cyclor, was still helping people to survive.

When I look back at that period of time in my life, I ask the question: Why were Dr. Lasker and I so successful? I would sum it up in the following: First of all, we shared a dream that this thing would work. We thought we could make it. Actually, we knew we could make a difference if we made it work. But there was another element to success. We were immersed in an environment, the university, a particular environment that encouraged innovation, creativity, and a sense of going the extra mile to save a life. That environment was just as important as our passion and resolve to make this happen.

When I look back, and then when I look at the University of Maryland, Baltimore today, I see that same environment, one that creates and encourages innovation and creativity. I'm surrounded by creative people, people committed to improving the health and well-being of the people around us in our community, including all who come to our Medical Center. This is the magic of UMB, and it's the secret to our great success.

Magic like this is fragile. We have to work hard as leaders to keep that magic alive. And part of the trick to keeping it alive is standing out in front of the world, anticipating future needs, finding new opportunities, staying a step ahead. If we stay a step ahead, that will help UMB evolve — evolve and meet our mission as a university, but at the same time evolve to being a more inclusive place. A place that encourages those who live and work here to feel like they're appreciated. That they feel a sense of belonging. That they're appreciated just like everybody in this community. It's also important for UMB to evolve as an anchor institution. You've heard that we are committed to our city.

It is this process of evolving that will certainly help us stay a step ahead and stay prepared for a very unknown future. Now, of course, every one of us sitting here has seen an unknown future, when something happens that can turn us upside down. Who saw COVID coming? No one.

COVID has been a harsh test for us, for all of us, including UMB. And yet I would say to all of you, the magic of UMB became particularly evident during COVID. UMB rose to the occasion. We became a beehive of activity. We worked as a team like never before. Many people stepped up to lead. Many people rolled up their sleeves to serve. We learned a lot in that process. We learned a lot about COVID. We learned a lot about ourselves. And we learned a lot about our community. We did find new opportunities. And we did discover new things. We advanced as an institution during this time — we evolved. But, you might ask the question, how well were you really prepared for COVID?

That is a hard question to answer, but let me focus on at least one program at UMB that I think was very prepared. It ended up having a huge impact on this pandemic. That is our Center for Vaccine Development and Global Health. I call it the CVD, and it's in our School of Medicine. The current director, Dr. Kathy Neuzil, and the very distinguished faculty became the trusted advisors to the world,

trusted advisors to the governor of Maryland, Governor Hogan, to federal agencies like the Centers for Disease Control and the Food and Drug Administration, to the White House, and to the World Health Organization. I might also add that they've served as consultants offering expertise to our fellow universities and the presidents sitting here. I certainly appreciated CVD's wisdom and advice in dealing with COVID.

The experts at CVD also did vaccine trials — you might have seen that I got a shot in my arm. COVID started around March 2020 in this country. Do you know that by May — that's two months — the CVD had started the first clinical trial and vaccines in the U.S.? Pfizer was being put into arms in May. And then, in August, Moderna was in trials. I participated in that trial and got a shot in my arm. In December, we were doing the Novavax trial. We just finished the pediatric trials, and we just finished a report on the mix-and-match trials. How many of you have listened to that on TV? And how many of you knew that a lot of that data came from this institution?

CVD led the way on COVID over and over again. But you might ask the question, as an institution, how did CVD come to be? Somebody had vision, didn't they? The person who had the vision to make CVD happen was the chair of the School of Medicine. Forty years ago, he had a vision that UMB ought to be able to respond to any outbreak, any epidemic, anywhere in the world. Man, that's a tall order, isn't it? But that was the vision.

We should have the expertise, from basic science of viruses and bacteria to how to design and make vaccines. The expertise to do large-scale vaccine trials, with 5,000 to 10,000 patients. We need to be able to understand, did the vaccine really work or not? Was it really safe or not? So, the decision was made to build the CVD. Dr. Mike Levine was recruited along with other infectious disease experts to build it in 1974. We developed programs around the world, from Maryland to Mali. Programs that address many diseases — malaria, dysentery, cholera, ebola — as well as developing vaccines.

When COVID hit, CVD had the expertise sitting right here, already built, already deeply involved in coronavirus research. And they were ready to spring into action. And they did. So, were we prepared? Yes, I think we were very prepared. And I think the state of Maryland has done much better because of the Center for Vaccine Development and Global Health. This is a story of vision. And it's a story of continued vision and execution year after year, ready to meet the need. And that is the magic of UMB.

I think all of you know that there will be future harsh tests, just like COVID. We'll see new challenges, real-world problems. Will we be prepared as an institution to take them on? I am confident that the answer to that is a powerful yes! This university is loaded with talent, people with drive, faculty, staff, and students who see the future, many possible futures, and who prepare for those futures.

There are probably some other challenges down the road, don't you think? Challenges that could be another harsh test for us, like COVID has been, like George Floyd's death and the racial reckoning has been over the past two years.

One of those harsh tests could come from health inequities — people who don't have as good health because they don't have as good access to good health care. There are many health inequities in our community. That could certainly be a test, a harsh test indeed.

Our dental school works to address many health inequities, but one of them relates to oral health. Imagine a room the size of this tent, the Convention Center. Imagine it's filled with 100 dental chairs. Scary thought, isn't it? One hundred dental chairs with 120 dentists and students and staff, everyone volunteering to be there. And then imagine 1,000 people from our West Baltimore and other local communities who don't have access to oral health care, coming in over two days to get their care. Imagine children in that group, each getting care. That's what our dental school is doing, every year for an entire weekend, with their Mission of Mercy dental program.

Why are they doing this? Because they know that our West Baltimore neighbors have a worse health status than many of us in their overall health and in their oral health as well. So, the dental school could not tolerate this health inequity. So, they responded and have served over 3,000 people in our West Baltimore community over the past three years to make them a healthier community. The Mission of Mercy dental program — that's staying a step ahead of the problem. That's impact on our community.

Another example of health inequity is with vaccinations. We sure have heard a lot about that, haven't we? And we know that some of our population refused to be vaccinated against COVID. They don't have trust in the medical community, here in Baltimore and nationally. Some of this distrust is certainly well founded, for historical reasons. So, we need to rebuild trust. How do we do that?

The School of Pharmacy leadership took a stand that mistrust within the community was not acceptable. Rebuilding that trust became a priority to them. So, they recruited Dr. Daniel Mullins, who formed what is called the PATIENTS Program. In that program, folks in the West Baltimore community, the citizens, ask research questions important to them. Then that same community works with Dr. Mullins to design and conduct research. It's community research that the community is involved with, that they participate in, and see the results of. They have a stake in this research, and they trust the result.

During COVID, that became particularly evident. In one example, as soon as the vaccine became available in the city of Baltimore, one of the partners of the program, the Mount Lebanon Baptist Church, signed up everybody in the congregation. Two hundred people signed up within one hour to get the vaccine. That community knew that Dr. Mullins was authentic, that he had authentic concern for that community. And that's what we have to have for our community: authentic concern. He had earned their trust. What a great result. We need more efforts like that to make for a healthier community.

I want to give you one last example of a health inequity that UMB is addressing, and you saw the name of it on the screen: B'more for Healthy Babies. It addresses infant mortality. We know that infants are more likely to die in their first year of life than they are later in life. And in fact, if they make it through the first year, they have an excellent chance of living a normal, productive life. Yet, we know that the mortality in our West Baltimore community was five times higher than in more affluent communities in Baltimore. That is just shameful. Imagine, just imagine, if that baby who died was your baby and how you would feel. That is a horrible statistic.

So, a Baltimore coalition was formed, B'more for Healthy Babies. And it was to address this one specific inequity. Our School of Social Work got very involved with this and recruited a faculty member, Miss Stacey Stephens, to lead this program. She built trust in that community and empowered young mothers and fathers to take charge of their lives with their new baby. I just had the pleasure a month ago with the

mayor of Baltimore to announce the results. In the Druid Heights community, the reduction in infant mortality was 75 percent. That is quite a reduction.

Now, that's not just a statistic. That's a generation of a babies who can survive, grow up, and get educated, and, who knows, be governor, be senator, be your doctor, be your social worker, be your teacher. That's what a contribution that is.

Now, these are three examples of what an anchor institution does. UMB is proud to be an anchor institution. What that means is we're committed to our community's well-being, that we seek to be a trusted partner, that we're willing to leverage the economic power of this big university to benefit the community and to help wealth grow into the community — and to promote health equity. UMB must remain passionate about this part of our mission. But that's UMB. And that's our commitment to Maryland.

UMB has other commitments to Maryland. One of those is a responsibility for strengthening our workforce in the health and human services. We need to graduate more professionals to enter the workforce, and we need more faculty to teach those professionals. Believe it or not, there is a shortage of faculty to teach our professional students. So, let me start with how we're going to address getting more faculty available. Our Graduate School leadership is, in fact, focused on that. We recently began a doctoral degree program to teach deeper educational skills to people just like me. I'm a physician. I know my profession very well. I teach a lot. And yet, I don't really have any credentials, so to speak. I'm not taught how to teach, I'm taught how to operate. This program could make me a much better teacher. Although this degree just started several years ago, there has been unbelievably high demand and it has quickly grown. In fact, it's grown to the largest degree program of its kind in the U.S., which shows you that there's a demand. It also shows you that we're addressing a deficiency that will contribute to making our workforce stronger.

Now, I just mentioned the gap in the faculty pipeline. But we also want to talk about the student pipeline. You all hear this every day. And I know Dr. Suntha and Dr. O'Malley would say we can't find enough nurses to take care of our patients in the hospital. And so, beds are unfilled, because they're understaffed with nursing. So, what are we going to do about the nursing pipeline? Our School of Nursing has been addressing this. They prioritized a larger graduating class. In fact, they expanded by 40 percent over the past eight years. That's pretty big growth in my book. They also did another really good thing in creating the Conway Scholars. This was based upon a very nice gift from Mr. Bill and Ms. Joanne Conway. Believe it or not, it funds full scholarships for nursing students — full scholarships for 820 students. That's an unbelievable number. Talk about filling the pipeline. That is a phenomenal accomplishment.

But there's another dimension to that accomplishment. And that is diversity in the nursing workforce. Imagine if you're from where I grew up — on a farm. You don't have much wealth, you have modest income, and you've got a young person in your family who wants to go into nursing. Where's the money going to come from?

Well, with a scholarship program like this, that's where the money is going to come from. That means if I come from a disadvantaged background, I have a better chance of going to nursing school than I did before the Conway Scholars.

We want to have the face of our workforce match the face of our population. In all of our professions, in race and gender and culture — you name the dimension — we needed to match the population of the state of Maryland. That is our goal. And that's another way we will have a deeper impact in fixing health inequities in this state. That's UMB. And that's a commitment to Maryland.

How about another type of commitment? How about to our environment? Now, how many of you drove across that Bay Bridge and looked out over that beautiful bay? Maybe you saw the sun rising. Maybe you saw ships sitting there. The Chesapeake Bay is a beautiful resource. We have a lot to be proud about in the Chesapeake Bay. And yet, 30 or 40 years ago, people started asking questions: How healthy is the bay? Is it where we want it to be in terms of its pollution or not?

Our law school asked the question, as well, and said, you know, we could have something to do with improving the bay and improving our air, too. Because we know a lot about the law and how to make it effective in managing pollution. So, they formed the School of Law's Environmental Law Program, which was a pretty new idea 40 years ago. This was visionary by the School of Law leadership. They saw fit to recruit Professor Bob Percival, an expert on this topic, to come and lead the Environmental Law Program. Its programs have had a dramatic effect on air and water pollution, not just in Maryland, but in developing countries.

Now, you may say, why am I talking about other countries? What do we care about developing countries, and the law and pollution? And I would say to you, wait a minute, do any of you remember smelling forest fire smoke here a couple of months ago? Do you think Maryland is on an island? Do you think we're isolated from what happens in other countries, in Africa or Asia? It's really important that we understand and have an impact on the environment in the whole world, not just in the state of Maryland. This program has been so successful that it's now been replicated in over 60 law schools in this country. It takes a lot of vision in that and a lot of leadership to make that happen.

As an aside, you heard from our student government speaker that we had started a sustainability committee here. And the answer is, yes, we have, we funded it, because UMB must do its part on the environment as well. We must make UMB a much more environmentally responsible place. It's important to me. I drive an electric car. It's important to my grandchildren and your grandchildren. That's UMB. That's commitment to Maryland.

I already spoke about the impact of the Center for Vaccine Development and Global Health, the CVD, and its commitment to Maryland. I want to give you one or two other examples of our commitment to Maryland. The next one comes from the School of Medicine's Shock Trauma Center. I've heard two or three helicopters fly over the last hour. And those are helicopters transporting injured people to the university. Maryland has the best trauma program in the world — and yes, I mean in the world. We wrote the book on trauma care. We set the bar. We have surgeons from all over the world come here to train in trauma. We train the U.S. military in trauma.

Have you stopped to think how that ever happened? How did that come to be? And it gets back to that word: vision. There was an individual — a surgeon, I'm happy to say — Dr. R Adams Cowley. Forty or fifty years ago, he noted that if you get in a car crash in this state, too many people die who shouldn't have died because of their car crash. He studied the problem and developed the concept of the golden

hour. The concept of the golden hour is, if we get you transported and get resuscitation started, you've got a very high chance of surviving. But if it takes longer than an hour, things go down quite a lot. Rapid-transport quality care became a really big thing. So, he actually said: What if? What if we could do that?

Shock Trauma opened around 1960. My perspective is, Maryland has done an unbelievable job on this. We have the nation's only trauma hospital. And this could not have happened without many visionaries — visionaries at UMB, visionaries in the state of Maryland, in the legislature and the governor's office. Some are here in this room. I have no doubt that his vision led to the best trauma program in the world that has continued under the leadership of Dr. Tom Scalea.

Not only have they advanced the expertise, they continue to step up to the challenge — to take care of COVID patients, to treat victims of violence, they do it. Maryland has the best trauma program in the world. That's UMB, and that's another commitment to Maryland.

Now, Shock Trauma and CVD aren't alone. I could have mentioned a whole bunch of other examples. They're all peppered throughout our schools. We have an Institute of Human Virology, studying HIV and the AIDS epidemic. They have a profound effect on HIV in the world. From Baltimore to Botswana, they're making a huge difference, millions of people now under treatment under the guidance of our Institute of Human Virology. The Institute for Genome Sciences in the School of Medicine is an internationally known group of investigators. When COVID hit, they retooled their research lab, slowed down other research to develop a whole aspect of needed work. We could do testing for COVID. In Maryland, how were you going to get tested? How are you going to find out who's got it? So, they retooled their whole research lab to be able to test for COVID.

We've done over 1.1 million COVID PCR tests in the past year. And that was going from zero to 60 overnight, turning on a dime. Talk about a service to Maryland, that was a service to Maryland. We're better off because of it. UMB is loaded with expertise like this at every one of its schools, waiting to step up, waiting to solve problems.

Now, when you think about the few examples — and it's just a few — they all have some common themes. I want to mention a couple of those common themes. One of them is passionate leaders, passionate team members, over and over. Another is commitment to service, commitment to people in need. Another is commitment to the education of future professionals as well as commitment to partnerships. You heard from Dr. Suntha. We have an unbelievable partnership with the medical center.

But they also involve one other really important element, perhaps a little less visible, that I want to point out. That is a relentless pursuit of discovery, innovation, and research. That's what UMB is. It's a powerhouse for research.

Now, you might ask, how did we get there? It's a philosophy at this institution that we find new ways to improve the human condition. It is at our very core, whether it's a basic science question we ask, or whether it's in the care of clients in the community, or patients in the hospital, or during education, or doing community service. In each case, we always think about what research question can we ask, what new discovery might we find? What improvement can make us better? And also, what outside support do we need or can we give? Can we pursue our questions with grants, contracts, and the like? We have done

very, very well at that. Our professional schools are highly ranked partly because each of the schools has grown its research funding very significantly. In addition, our NIH funding in the School of Medicine has continued to soar under Dean Reece's leadership. We are well known for our research.

Not only are our schools highly ranked, as you can see in the recent rankings by the National Science Foundation of research universities. NSF ranks UMB with our strategic partner, the University of Maryland, College Park. So, we, as the University of Maryland, ranked eighth of all public institutions in research. Eight is a great number! Now, President Pines will vouch for me that I've said to him many times — I just sometimes have to pinch myself to wake up to realize just how significant that ranking is: No. 8 of all public universities in the U.S. That is a major accomplishment on the world scene, it puts us in rarefied company. I'm proud of that. It is one more reason how and why we make Maryland such a much better place. That's UMB. That's commitment to Maryland.

The magic, like I described, has happened to UMB over and over again. We must have something right. Part of what we have right is the strong, sustained supported, the advocacy that we receive from all of those around us — many of those are sitting here on this stage. That's who we rely on. They help keep UMB strong.

So, I want to say just a little bit about some of them here on the stage. And I would like to start with a special one. And that's Ms. Ida Powell. You saw her when she walked in, she was holding the mace. Ms. Powell has worked for custodial services at UMB for 26 years. She exemplifies the core values of UMB. Now, why Ms. Powell? Because during COVID, she and her colleagues were here every day. And that was true for many UMB staff — Facilities, Environmental Services, our police force, as well as doctors and nurses. We could not have met our mission without you and all of your colleagues, Ms. Powell. Thank you for that.

She and her colleagues carried a burden with COVID. Now she gets to carry the honor of being our mace bearer. I'm so proud of that.

The second person I want to thank is Chancellor Perman. You already heard him speak here a minute ago. I can never match his enthusiasm, but I'll try. He and I have been together one way or another for close to 20 years. I think I chaired the search committee to bring him here. And Chancellor Perman, you are one of those special colleagues that gets better with time like a fine wine. I am most appreciative of our special relationship. Now, you said it felt good to be home, and we miss you here. But I would point out to the audience, he sure left UMB in great shape. We are keeping his dreams alive. You know what some of them are: the Community Engagement Center, the CURE Scholars, and there are many, many more. So, we're keeping those alive. Thankfully, he didn't go very far away — it's not even a mile, where he goes as our chancellor. I bet you anything, you had no idea of the challenges that we were going to have in the next two years. And boy, have we had them. I might point out to all of you that's when leaders are at their best, in times of challenge and controversy. That is the measure of a leader, if you'll allow me to paraphrase Dr. King. You have done that, Chancellor Perman. Thank you.

There are a few more people I would like to introduce to you, and I will try to keep this rolling because I know sometimes these parts are hard to get through. So, I ask that you hold your applause until the end, even though they're all important, I assure you.

I'll start with the Regents Chair Gooden and her fellow regents. I want to thank you for governing our system and our university with wisdom, and creating the environment that I already described, for innovation, for discovery. You help keep us strong.

And to Governor Hogan, who could not be with us today. I have to say to all of you, I have admired his leadership during these very difficult times. It's been tough, and he's put trust in UMB, and our partner, the Medical Center. Governor Hogan, I appreciate your strong support and advocacy.

I also want to thank Secretary Fielder for being here. We have a number of elected officials here in the audience. At least one of them is an alum. Thank you for being here, Senator Lam. We could not do it without all of you. That's very clear.

Mayor Scott, who was with us just last week opening our Community Engagement Center, also could not be here. Several of Baltimore's councilmen are in attendance. Thank you for your support. Baltimore is a great city. We're committed at UMB to making it even greater.

I want to particularly point out the person in the red dress sitting behind me, Maryland's first lady, Yumi Hogan. Now, most of you may not think of art when you think of UMB. But you should. For me, art helps keep my life in balance. You've already seen that. It is really special to me to have a first lady who is an artist and who is also committed to UMB. She has helped us to balance the intensity and pace of life at UMB with the creativity that comes from art. She has chaired our UMB arts council, which highlights the many artists on this campus. You may think of us as lawyers and nurses and pharmacists, but you should know that there are an awful lot of artists, people with artistic interests, here. Thank you for enriching UMB through your art.

Also, here are my fellow presidents. Now, I don't know how the presidents interacted years ago. Over the last two years, there has been a special bond that's formed with all of us in a lot of ways that I thought, well, were not possible. But they formed because we have been through a lot. We have been through a lot together. We have become great, close colleagues. So, I would say to my fellow presidents, it's been a great honor to serve with you. It's also been my honor to serve you in the ways that we could do in the past. And I hope to do that in the future. So, thank you for joining me today.

I also want to thank other delegates from other colleges and universities. I certainly want to thank Dr. Mohan Suntha, CEO of UMMS, and Dr. Bert O'Malley, CEO of UMMC. You heard Dr. Suntha a minute ago. You know, he still calls me Dr. Jarrell. OK, here we are, running two big organizations, and it's still Dr. Jarrell. I think he's a wonderful colleague. They're both wonderful colleagues, and they have been great partners of this university. During these most difficult times, the best of times, and in the worst of times, they've been even better. It's been a great team. So, I thank you both for that.

Now, one of my mentors could not be here today, Dr. Donald Wilson. Dean Wilson recruited me here 25 years ago. He's watching on his computer today. I just want to thank you, Don, for recruiting me here. And for being my steadfast supporter. Thank you.

I also want to thank Dr. Knipp, who's representing the many boards of visitors and the UMB Foundation.

Harry, it's nice that you formed a fund. I'm waiting to hear how big it is. I hope I'm surprised. I'm sure I will be, right?

There are a number of other groups here that I want to absolutely emphasize. The deans of the seven schools are here. It's really the deans that make UMB happen from a leadership point of view. Yes, the president has some role, but the deans really are the drivers and sparkplugs to make things happen across the schools. I want you to know what a great group of deans we have. They are close colleagues, and I would trust any of them with anything. They're just wonderful people to be with. They are the critical ingredient. Thank you to my deans.

You also heard from our provost, Dr. Roger Ward. He's been my partner for 10 years. He is a leader at UMB. I prize him as a leader. He's also a trusted advisor to me, and he definitely keeps me out of trouble. That's a good thing. So, Dr. Ward, thank you for being with me and staying with me.

Now, these aren't just simply introductions of people. I'm trying to give you a taste of how important they are.

The next group you might view as just administrators, and that's our vice presidents. But I'm going to tell you our vice presidents are committed to the mission of UMB in a special way. Not only do they make the place run, but they have special programs that they develop and make happen. One of them is Live Near Your Work. We have nearly 60 families that work at UMB, that because of this program with financial assistance, and other incentives, they live in our West Baltimore community. That's a tremendous program.

We also have worked hard to help our West Baltimore community address the digital divide. We have helped many families with computers and internet services. We've also helped many minority businesses in West Baltimore get a leg up and become successful. We have a program for women at UMB called the UMBrella program to give staff and faculty women more support to be able to achieve their potential. We're also very committed to changing the culture of this institution to be a more inclusive place. There are many more things that I could thank them for, but they really drive a lot here.

You also heard from our shared governance leaders, I embrace the model and thank you for being here. Mr. Hayman, I will thank you in a minute. But there are two other groups that I would be remiss to not point out to you. Yes, thank them, but point out to you how important they are. Earlier this morning, you saw five Distinguished University Professors be recognized. That's great. You also heard about a whole lot of really terrific programs at UMB of one sort or another. Now, you probably figured out what I'm going to say next, the credit for all of those programs goes to the faculty, the faculty who are sitting here and hopefully online and over there working and over there teaching and whatever else they have as an obligation to do each day. Without great faculty, UMB is nothing. So, for all of those of you who are here, I deeply appreciate the vision, the creativity, the drive that you bring to UMB every day and especially throughout COVID. You make UMB magic happen. Thank you.

Last on my list, but first in my UMB heart, is our students. Students are the reason this university was founded over 200 years ago. You are the reason I continue to be here. You're the reason UMB continues to be here. You're the next generation. You are the next set of bright ideas. You're the ones who will help us evolve. Thank you for being here. Thank you for being the spark that ignites us as staff and faculty every day. Thank you.

Now, although not on the platform, I want to thank those friends and family who have come from far and near to be here. Thank you for being here. I'm very appreciative. Finally, there is my family. They are first in my life. I have this wonderful family. So, to my wife, Leslie, who's sitting here — I hate to say wife of 50 years, that's a long time. But it has been a great time.

Thank you. Thank you for helping me throughout my career, from the first days in anatomy class and medical school to today. Thank you for putting up with me and walking with me. I would not be here without you. You're a great wife, a great mother, and I think a great grandmother. I know six people there who would agree that you're a great grandmother.

Also here are my brothers, Jerry and Bob, and sister, Beth, and their families. We've had a great life. We have our mom and dad to thank for getting us off to a good start. My family is rounded out by my children, Noble, Sarah, Kevin, Ozzie, and Gwynneth, who are here, and I want to thank them. As for my grandchildren, I'll mention them in just a second.

You may wonder why I talk so much about the future. And here's why I talk so much about the future. Could I ask my grandchildren to come up here? Would you all come up here? I'm hoping they'll come. Here Katie, you come right here. Perfect. So, Katie, and Stella, and Joe, and Bruce, and Lily, and Scarlett.

So, these are my grandchildren. But I don't just see my grandchildren. I see your grandchildren. I see grandchildren in West Baltimore. I see grandchildren on the Eastern Shore of Maryland. I wonder, what will their future be 50 years from now? One hundred years? Do you know? Do you know what it's going to be 50 years from now?

I can't answer that question. But I can ask the question of, what can we do today? One answer comes from what we're already doing. You've heard a little bit about it. Think of the impact of the Conway Scholars in nursing. Or the impact if you're in a car crash and you get transported to Shock Trauma. Or you're planning to start a family in West Baltimore, and you know your baby has a great chance of surviving. Think about programs at UMB that have made a big impact today. And that will continue for the future. We've done a lot. But there's always more that we can do.

So, I'm pleased to introduce you to someone who is doing something for the future. But he's doing it today. And Lawrence, if you could just stand right here behind Katie for a second. Thank you. You heard we've been friends for decades. I remember the two of us at that age — he probably does, too — when we were this size, just like my grandchildren. We shared common interests back then. You heard some of them — basketball and sports. But neither of us ever thought for one minute that we would be standing together like this decades later on this stage. But we are, and it's because we share another common interest, an interest developed much later in life, and that is the health and well-being of the community we grew up in on the Eastern Shore. So, I'm very pleased to announce that Mr. Lawrence Hayman, my friend for life, has pledged the gift of nearly \$18 million.

I probably embarrassed him by that because he's like me. We don't always want to hear about ourselves. But ... \$18 million! This gift will support several presidential initiatives. One of them is cancer research. He's had his share in his family. Another big piece of it will go to the Eastern Shore, to provide scholarships for students on the Eastern Shore who want to come to UMB for professional studies, and

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also funds for incentives for care providers to go back to the Eastern Shore to set up practice there and help take care of that community. That is a wonderful thought. What do you think about that? That's commitment to UMB. That's a commitment to Maryland. Thank you, Lawrence.

So, you have heard a lot about UMB magic in the last hour. It is my honor to play a small part in that magic. I hope that I can rely on each of you here today to help me maintain that magic. UMB commits to educating future generations, it commits to solving future problems, to seeing solutions where others don't. We refuse to let cancer win. We refuse to let the ZIP code that you live in determine your lifespan. We refuse to accept injustice. We refuse to accept the unacceptable. We are prepared and ready to act.

So, when our next challenge comes along, the next COVID, the next threat to our children, UMB and all within it will step up to serve its fellow Marylanders. The impact will be far reaching. That is my vision for UMB. It is a simple vision, but it will make Maryland a much better place to live. We are up to the challenge. Bring it on! That's UMB. That's commitment to Maryland.

Thank you.

