February 12, 2024

# **Executive Sponsors**

Cynthia Dold, Chief Operating Officer, UW Medicine Hospitals & Clinics

Elizabeth Fleming, Chief Strategy Officer, UW Medicine

Margaret Peyton, Clinical Business Affairs & Regulatory Officer, Clinical Business Affairs, UW Medicine Shelly Sakiyama-Elbert, PhD, Vice Dean, Research & Graduate Education and Professor of Bioengineering, UW School of Medicine

Anneliese Schleyer, MD, Interim Chief Medical Officer, UW Medicine Brad Simmons, President, UW Medicine Hospitals & Clinics Hunter Wessells, MD, President, UW Physicians

# Workgroup Members

Ana Anderson (Chair), Senior Director, Clinical Business Affairs, UW Medicine

Todd Burstain, MD, Chief Medical Information Officer, UW Medicine

**Trevor Cohen, MBChB, PhD**, Professor, Department of Biomedical Informatics & Medical Education, University of Washington

Beth DeLair, Chief Compliance Officer, UW Medicine

**Chris Goss, MD**, Associate Dean for Clinical Research, Office of Research & Graduate Education, UW School of Medicine

Noah Hoffman, MD, PhD, Associate Professor, Head Informatics Division, UW Medicine

Eric Neil, Chief Information Officer, UW Medicine

Dushyant Sahani, MD, Chair, Department of Radiology, UW School of Medicine

Peter Tarczy-Hornoch, MD, Chief Data Officer, Information Technology Services, UW Medicine

RE: Phase II Generative Artificial Intelligence (AI) Task Force (GenAI Task Force)

### Dear Colleagues:

Thank you for agreeing to serve on the UW Medicine Generative AI Task Force. We are establishing this task force to continue UW Medicine's generative AI governance work, as recommended by the LLM Workgroup in its preliminary report dated January 31, 2024.

The purpose of the Task Force is to build upon the work of the LLM Workgroup and develop the business plan and infrastructure needed to support a permanent, steady-state approach to use of generative AI in the healthcare setting. This work will position UW Medicine leverage this technology in a responsible manner and enable us to move forward efficiently and effectively in this rapidly evolving space.

Timothy H. Dellit, M.D.

The Task Force should phase its work in two parts, with Part 1 focusing on UW Medicine's overarching strategy and structure, supported by an external consultant with robust subject matter expertise in Al.

The Task Force shall develop and recommend to the Executive Sponsors the following deliverables, without limitation:

#### Part 1:

- An initial UW Medicine strategy for generative AI in the healthcare setting.
- An operational leadership and accountability structure responsible for success in our ability to implement these tools responsibly.
- A long-term governance structure, including draft charters and membership, to oversee UW Medicine's institutional approach to generative AI in the healthcare setting.

# Part 2:

- An institutional policy to govern use of generative AI in the healthcare setting.
- Operational workflows to ensure processes to support assessment and approval of proposed use including for 1) clinical activity or activity in support of the clinical environment, 2) clinical research involving generative AI and 3) sharing of clinical data for research involving generative
- Processes to ensure appropriate evaluation, risk and bias assessment including in the approval of tools and in the assessment of performance once tools have been approved and implemented.
- Creating a robust communication, education and engagement strategy.
- In support of the other deliverables, developing financial, resource and other recommendations that will enable UW Medicine to advance the comprehensive business approach to generative AI in the healthcare setting.

The chair of the Task Force will lead the work to develop identified deliverables with substantive expertise from an external consultant (Part 1), project management resources, and significant stakeholder involvement driven by expertise needed to develop each discrete deliverable. The Task Force also will be responsible for triaging and assessing generative AI use requests during this interim period, consistent with the UW Medicine Interim Guidance.

Generative AI in the healthcare setting includes all clinical care, business operations supporting our healthcare activities (e.g., revenue cycle, human resources, supply chain), and research that is integrated with the clinical environment. For clarity, research is in scope of the Task Force's charge when the research takes place in a clinical setting (e.g., clinical trials) or involves the use of clinical data to prompt, test or train generative AI models.

Along with myself, I have asked Cynthia Dold, Elizabeth Fleming, Margaret Peyton, Shelly Sakiyama-Elbert, Anneliese Schleyer, Brad Simmons and Hunter Wessells to serve as the executive sponsors of this work. I have asked Ana Anderson to chair this taskforce with dedicated project management support. I ask that the Task Force prepare a report on the Part 1 work by July 31, 2024 and a final report addressing the Part 2 work by Dec. 31, 2024. The Chair of the Task Force may convene the Executive Sponsors, as needed, for guidance, discussion or other feedback.

Thank you for agreeing to take on this important work.

Sincerely,

Timothy H. Dellit, M.D.

THE WARD

CEO, UW Medicine

Executive Vice President for Medical Affairs and

Paul G. Ramsey Endowed Dean of the School of Medicine

University of Washington

cc: UW Medicine Leadership Council for System Integration

School of Medicine Department Chairs

Vice Chairs for Finance & Administration

Vice Chairs for Research

Glenn Bieler, Chief Marketing and Communications Officer

Nicki McCraw, Assistant Vice President, UW Human Resources