

# Strategic Plan (v1.1) Progress Report



THE UNIVERSITY OF ARIZONA  
**College of Medicine**  
Tucson



## BACKGROUND

Last year, the College of Medicine – Tucson constructed a metric-driven, target-focused tactical plan anchored within a strategic vision across seven mission areas (education, research, patient care, faculty affairs, diversity, equity and inclusion – DEI, financial sustainability, and development). Its premise was and continues to be based on 3 tenets: 1) creating a culture of **alignment** of all academic units within COM-T through a common set of mission area specific shared strategic visions and metrics; 2) engendering a culture of shared destiny and pride of enterprise through faculty and staff **engagement**; and 3) fostering a culture of responsibility and **accountability** for reaching individual and collective set targets.

Version 1.1 (v1.1) of the strategic plan, consisting of data tables for each mission area was implemented in July 2021. The 3-year rolling plan constitutes an exercise in continuous and longitudinal quality improvement for each academic unit. Adoption of the plan was monitored serially, and progress was measured by comparing year-1 projected targets for each metric to actual data, setting the stage for discussions with academic unit leaders across mission areas. Color coding was used for each metric as follows: green – target was met; amber – target was almost or likely to be met; red – target was not met. Academic unit leaders were told that they would not be held accountable for meeting targets, but instead for understanding why targets were not met. The primary objective of the exercise was to stimulate discussion between unit and mission area leaders, and ultimately the dean regarding potential barriers that may have led to ‘red’ coding. Of note, the education tables applied to the COM-T as a whole, and metrics related to clerkships or residencies were used for relevant clinical departments.

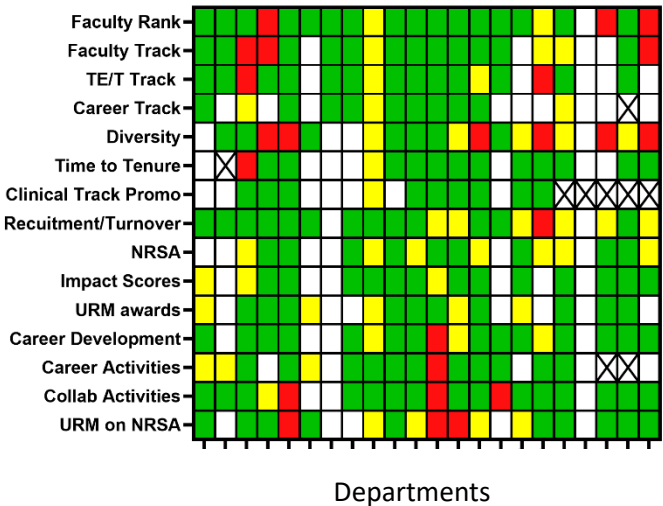
Across all academic units, approximately 70 metrics were collected, of which 53 were unit-specific. Engagement of the unit leadership, faculty and staff was measured subjectively by mission area leaders. Given the novelty of this tactical plan, it was anticipated that engagement and adoption would likely take 2-3 years.

## PROGRESS REPORT

Overall, 90% of departments participated and fulfilled the “first in kind” strategic planning exercise for the College of Medicine-Tucson. However, adoption and engagement were highly variable between mission areas within academic units, and between academic units. For this progress report, academic units are not identified. In contrast, for the purpose of each unit’s annual review (FY22), the dean reviewed color coding data with each unit leader. Only metrics coded ‘red’ were discussed. Unfortunately, there was a significant prevalence of both ‘yellow’ metrics, as well as metrics that were not color coded. The variability of the ability to color code across units led to a different discussion. Of interest, the lack of color coding correlated with the variability of data content available and worse faculty engagement scores within the unit for each mission area. Using these results, **four different action items** were identified: 1. Creation of an electronic system for auto-populating unit data in a strategic plan dashboard; 2. Increased faculty involvement in the process at the unit level 3. Creation of definitions from the mission area leaders that are clearly communicated to the units and 4. Use of the strategic plan dashboard to inform the unit annual review process. It is anticipated that a similar exercise for v1.2, implemented July 2022 will yield improved results. Included in this report are the color coding results across academic units for each mission area. Of note, non-clinical departments only included 6 mission areas (i.e., not patient care).



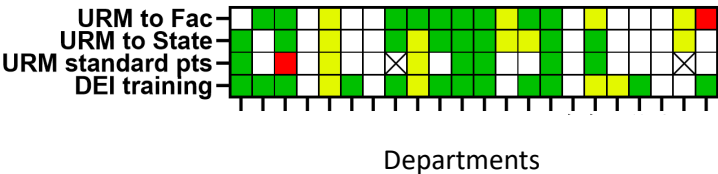
**Mission Area: Faculty Affairs**



**Table 1. Color coding of 15 Faculty Affairs metrics by each Department.** The 15 metrics were jointly color coded by the mission leader and each Department Head as either met (green), likely to be met (yellow) or not met (red). Uncoded metrics (white) or not applicable (X) were identified during the exercise.

**Comments:** Approximately 45% (10/22) of units had at least one metric which was coded red (not met). The majority of units responded as either have met the metrics or likely to meet. A concern for diversity was expressed in 50% (11/22) of units.

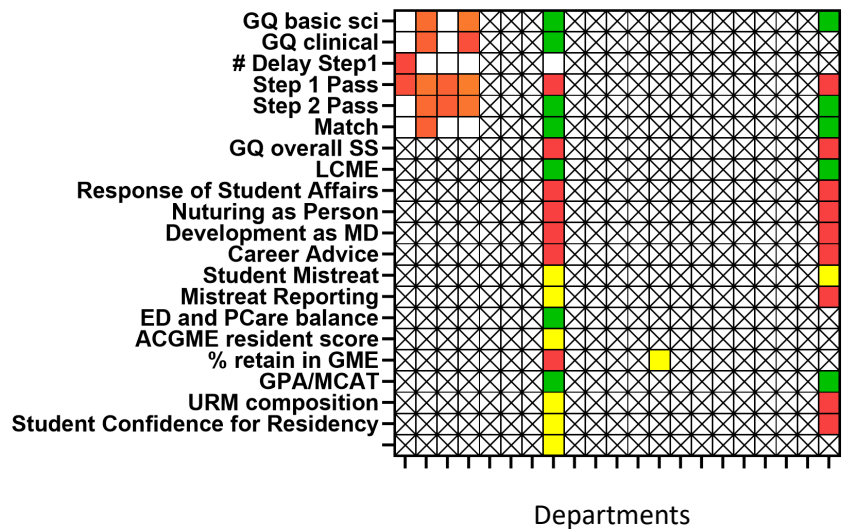
**Mission Area: Diversity Equity and Inclusion**



**Table 2: Color coding of four diversity and inclusion metrics by each Department.** The 4 metrics were jointly color coded by the mission leader and each Department Head as either met (green), likely to be met (yellow) or not met (red). Uncoded metrics (white) or not applicable (X) were identified during the exercise.

**Comments:** Approximately 64% (14/22) of the departments were not able to color code the metrics (white boxes). The principal reason for this was either the unavailability of the data or the lack of a full understanding of the metric.

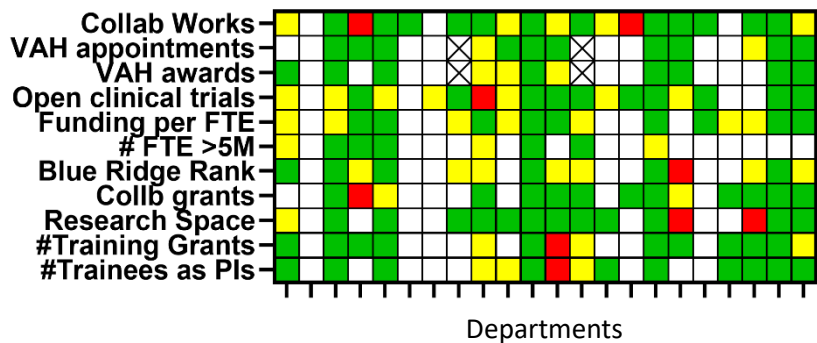
Mission Area: Education



**Table 3. Color coding of 20 medical school education metrics by each Department.** The 20 metrics were jointly color coded by the mission leader and each Department Head as either met (green), likely to be met (yellow) or not met (red). Uncoded metrics (white) or not applicable (X) were identified during the exercise.

**Comments:** The majority of the medical education metrics are coded as not applicable (X) since metrics are largely dictated by the American Association of Medical Colleges (AAMC) and are not departmental specific. The exceptions to this were ACGME resident scores and % retention in GME in a specialty area.

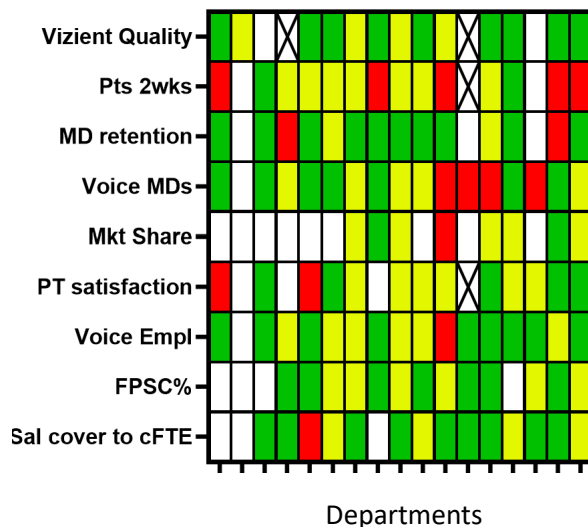
Mission Area: Research



**Table 4. Color coding of 11 research metrics by each Department.** The 11 metrics were jointly color coded by the mission leader and each Department Head as either met (green), likely to be met (yellow) or not met (red). Uncoded metrics (white) or not applicable (X) were identified during the exercise.

**Comments:** Approximately 91% (20/22) departments completed the color coding. Of these, 20% (4/20) of the departments had more than 50% of the metrics as white, indicating an inability to color code the metric. The principal reason for this was either the unavailability of the data or the lack of a full understanding of the metric.

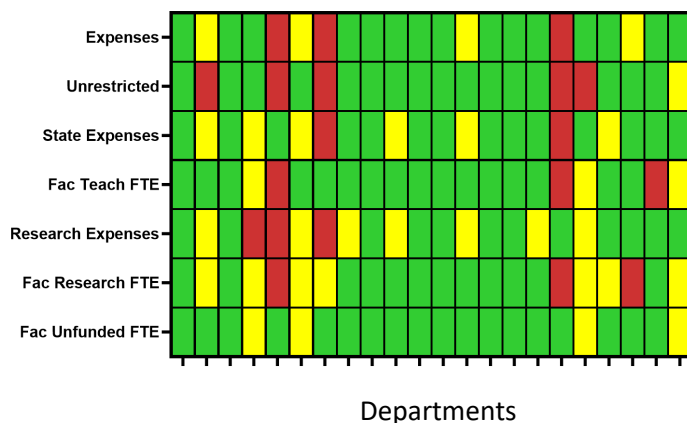
Mission Area: Patient Care



**Table 5. Color coding of 9 Patient Care metrics by each Department.** The 9 metrics were jointly color coded by the mission leader and each Department Head as either met (green), likely to be met (yellow) or not met (red). Uncoded metrics (white) or not applicable (X) were identified during the exercise.

**Comments:** 9/17 Departments did not code the market share metric. Upon discussion, an increased understanding of this metric and the data for the metric was needed.

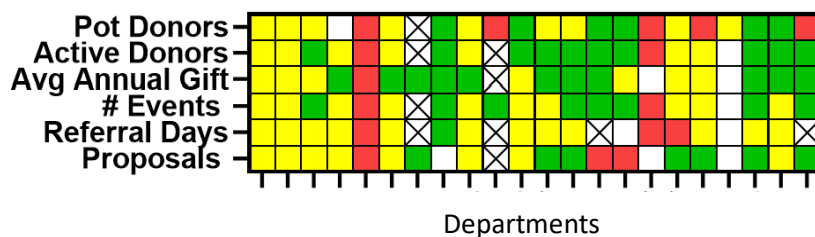
#### Mission Area: Finance



**Table 6. Color coding of 7 financial metrics by each Department.** The 7 metrics were jointly color coded by the mission leader and each Department Head as either met (green), likely to be met (yellow) or not met (red). Uncoded metrics (white) or not applicable (X) were identified during the exercise.

**Comments:** The majority of Departments 60% (13/22) had either green or yellow metrics. Approximately 18% (4/22) Departments scored more than one metric red.

#### Mission Area: Development

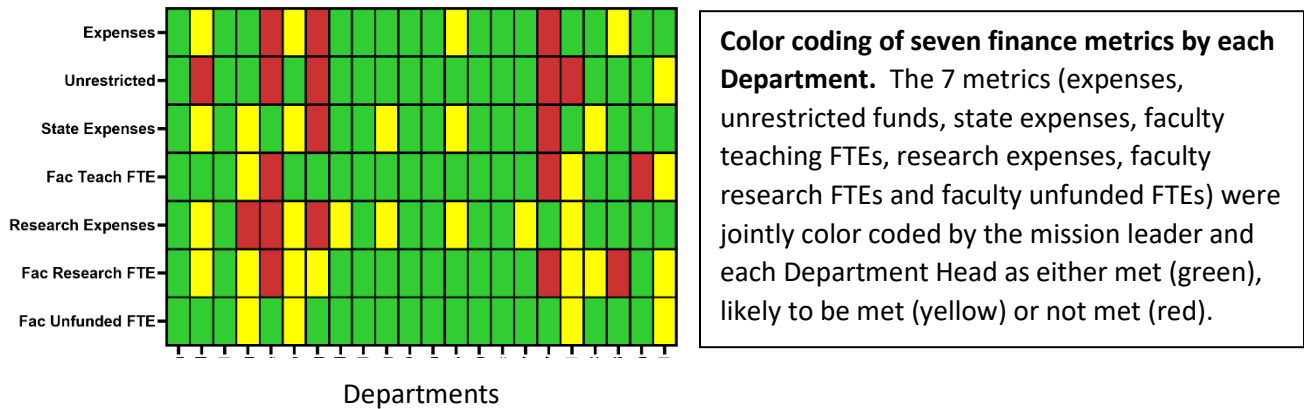


**Table 7. Color coding of 6 development metrics by each Department.** The 6 metrics were jointly color coded by the mission leader and each Department Head

**Comments:** Caution was expressed in 42% (55/132) of the metrics scored across all departments. Approximately 36% (8/22) units contained at least one metric of significant concern (red). Of these, the concern was with the number of potential donors.

**The Color-Coding Process of Metric Evaluation:**

A major element of the strategic planning process is to evaluate each metric as being met (green), likely to be met (yellow) or not met (red). The color coding is agreed upon jointly by the mission leader and the department head. The coding is a tool to inform the Department Heads to areas that require either refining the metric or addressing the barrier to success. In a reciprocal fashion, an inspection of the color coding across all departments will inform the mission leaders of metric(s) results that are in common with the majority of departments. In this way, common barriers (i.e., coded red) across departments will provide valuable information for improvement. Similarly, a scattering of the color code across a metric will indicate that some department tactics work well (i.e., green) and may be applicable to other departments for their use to turn yellow or red to green. Below is an example of a color coding across departments for one of the tables. The example of the color coding exercise for Table 6, Finance is below and illustrates the variation in color coding of each metric by department.



In this example, compliance for coding was 100% and represented a mixture of responses with no common red areas noted across all departments. It was noted that three departments in particular indicated a majority of red metrics, indicating areas to be corrected, perhaps using the tactics of the departments that reported green in the specific metric. In a similar fashion, all green across departments can reveal common tactics used by several departments, which can inform the departments in red.

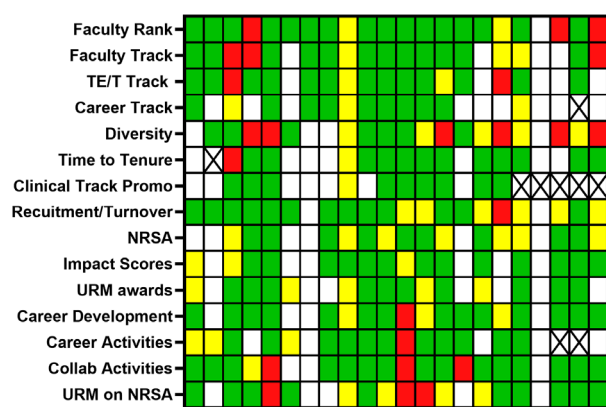
Using the color coding similarities, significant common tactics areas to support mission metrics were observed across academic units:

- Pre-retention tactic to prevent faculty loss by identifying flight risks early and engage them
  - Resulted in 43 at risk faculty retention efforts, with an 80% success rate.
- Increased use of faculty acknowledgement, reward and celebration of successes
  - Resulted in two-fold increase in acknowledgement of successes
  - Creation of the Frontier Fridays of Biomedical Research monthly presentations of outstanding faculty research



- Creation of a letter campaign to congratulate faculty for national grant awards
- Utilization of social clubs to advance clinical specialty training
  - Specialty hours include journal clubs, clinical presentations, career information

Using the color coding across units it was observed that some of the metrics within the tables were either not coded, or the metric was judged by the Department to be not applicable. This necessitated the use of white to indicate non-coded or an X to indicate a not-applicable metric. Below is an example of the color coding obtained for Table 1, Faculty Affairs, across the departments and illustrates that some metrics were either non-coded or were not applicable. In this example, compliance for coding was approximately 77%, with 3 departments accounting for most of the white coding status.



Departments

**Color coding of 15 faculty affairs metrics by each Department.** The 15 metrics were jointly color coded by the mission leader and each Department as either met (green), likely to be met (yellow), not met (red), not applicable (X) or left uncoded (white). It is worth noting that 3 departments were unable to complete the majority of the tasks (metrics are white) while another department felt the majority of the metrics might be met (yellow). These are examples of Departments that needed assistance.

Using the color-coding information with a focus on the non-coded metrics, it became clear that there were distinct barriers in some departments for completing the exercise in some of the tables. Four major areas were identified as common barriers to accomplish the strategic plan process; the resulting response to overcome the barriers are below:

- Requirement for a common understanding of this first-in-kind strategic planning process across all academic units
  - Resulted in three separate meetings with each of the 29 Department Heads and their key administrator (approximately 80 contact hours) to explain and actively populate each of the 7 mission tables. Approximately half of these meeting were held by ZOOM.
  - Resulted in two additional meetings with each of the 29 units (approximately 60 contact hours) and their key faculty leads for their understanding and progress in completing the 7 tables. Most of these meetings were held by ZOOM.
- Retrieval and auto-population of verified data for academic units to analyze and use for planning
  - Resulted in the creation of the Strategic Planning E-submission and E-services Dashboard (SPEED) by the innovative work of the IT team, led by Ed Xia and assisted by Vana Sherchand. This is a work in progress to configure the data streams to populate the dashboard and provide a monitoring system for task completion.
  - Point of contact list generated from Departments of leaders providing mission specific metrics.

- Point of contact list generated from mission leader team to provide data to Departments.
- Need for mission specific metric definitions to be provided by mission leaders and explained in detail
  - Resulted in creation of metric definitions with examples in each mission area.
- Mismatch of timeline with availability of verified data
  - Resulted in the timeline adjustment such that final progress report will follow final coding exercise.

Using the color-coding information with a focus on the green metrics, it became clear that there were common tactics that were used for success in several units. Below are some representative examples of tactics used by several units that has been expanded upon college-wide to result in greater success across the College of Medicine.

#### Innovative Tactics uncovered by the strategic planning process

- Senior level trainees are included in the process to “grow your own” for faculty positions
- Increased faculty engagement by increased data transparency through the strategic plan exercise

We also note that the grouping of the departments to observe the color coding of metrics across the mission areas (Appendix A), provides insight into departments that are by their nature cautious (most metrics yellow), optimistic (most metrics green) or pessimistic (most metrics red).

Finally, the increased communication between the mission leaders as the strategic planning process was moving forward, resulted in significant process improvements. In particular, it was noted that some metrics had been listed in more than one mission area. While this might appear duplicative, it was used to recognize that the tactics to drive the metric to success will benefit from working on a common goal by two mission leaders in a dyad-type model. Below are some examples of key areas that resulted in new efforts.

- Common metrics that overlap mission areas can be effective to drive change
  - Example 1: Table 1 (Faculty Affairs) and Table 2 (ODEI), resulted in Women in Medical Sciences (WIMS) program.
  - Example 2: Table 1 (Faculty Affairs) and Table 6 (Finance), resulted in Faculty Finance Committee (FFC) to expeditiously approve faculty hires/transactions to ensure financial responsibility.
  - Example 3: Table 4 (Research) and Table 5 (Patient Care), resulted in Strategic Project Initiative to aid creation of clinically relevant and high impact translational research.

## SUMMARY

The first iteration of the COM-T strategic plan (v1.1) as a tactical and useful planning tool has resulted in approximately 90% of the academic units responding with varied adoption, yielding several insights, iterative





improvements to the process, and has defined a learning curve. We encountered some initial confusion in both application and interpretation, and we identified both challenges and opportunities at the academic unit level. We fully expect that subsequent iterations will be better adopted because of improved communication and overall process, culminating in better outcomes, and ultimately, in the realization of successful alignment, engagement, and accountability across mission areas and across academic units. The second iteration (v1.2) was implemented in July 2022.



## Appendix A.

Comparison of color coding of all mission area metrics across all departments.

### Color coding Summaries of Table 1-7.

