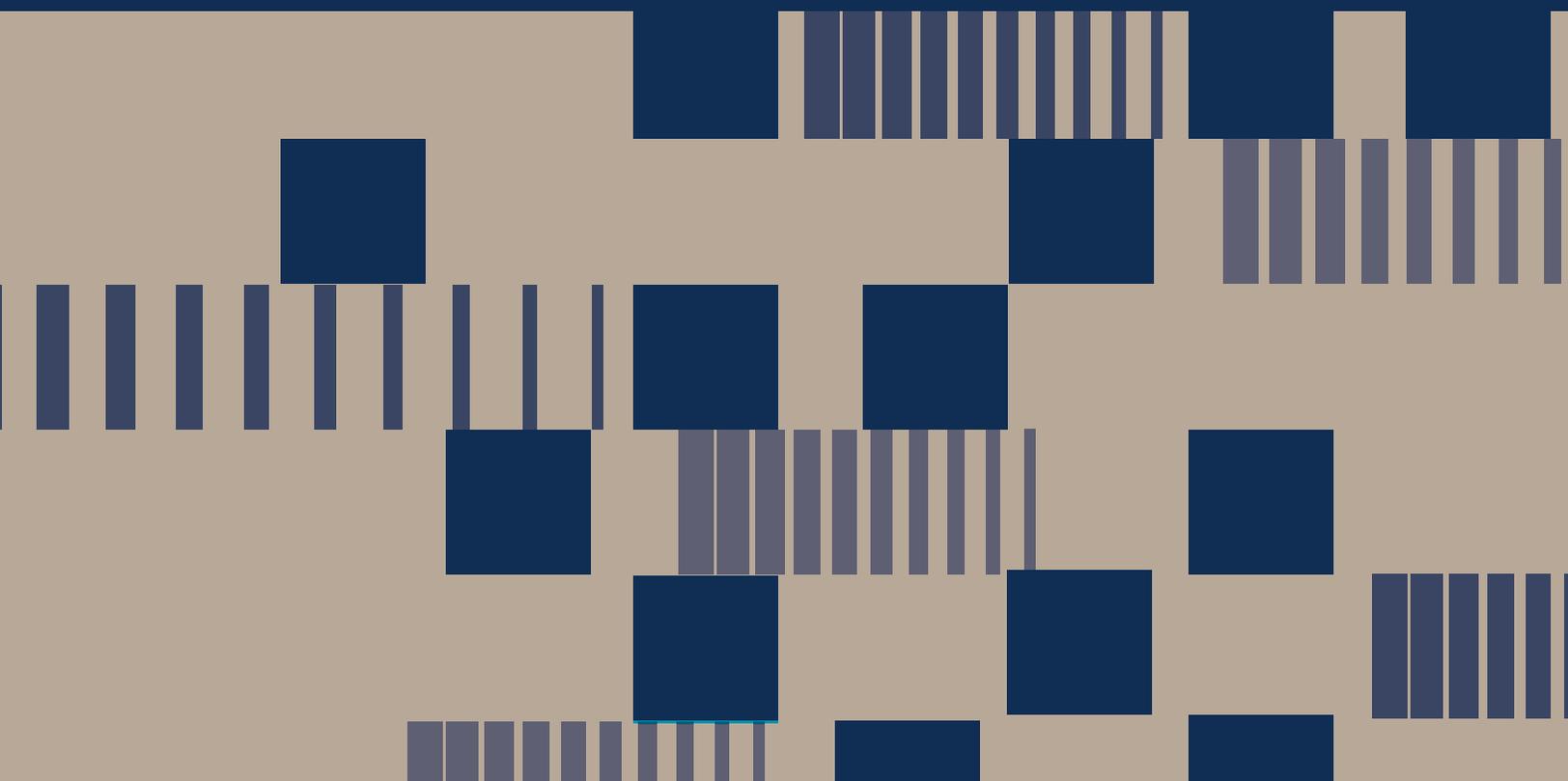


# McGovern Medical School Strategic Plan

(FY 2018-2022)





# McGovern Medical School Strategic Plan (FY 2018-2022)

## Mission Statement

To educate a diverse body of future physicians and biomedical scientists for a career dedicated to the highest ideals of their profession; to provide outstanding patient-centered care; and to conduct innovative research that benefits the health and well-being of the population of Texas and beyond.

## Core Values

Deliver compassionate patient care focusing on effectiveness, quality, safety, and service.

Provide a competency-based curriculum emphasizing integrity and professionalism.

Embrace a culture of lifelong learning, evidence-based practice, open inquiry, and scholarship.

Cultivate professional and respectful communication.

Foster a diverse and inclusive learning community.

Support the health and well-being of students, faculty and staff.

Promote interprofessional collaboration.

Support leadership and innovation in teaching, research, and service.

Advocate for excellent care for the underserved and for the reduction of health care disparities.



# Strategic Plan for Education (FY 2018-2022)

## Education - Goal 1

The medical school will provide an environment that prepares students to provide outstanding patient-centered care, while exhibiting the highest principles of professionalism and integrity in their responsibilities to patients, and to the communities that they serve.

*This goal will be achieved through objectives in the following four areas: content, pedagogy, assessment, and student development.*

### **Objective 1 – Provide an integrated (basic science and clinical science) competency-based medical education to prepare students for medical practice**

#### STRATEGIES

- Continue implementation of revised curriculum, preparing students for success on national examinations.
- Implement longitudinal themes throughout the curriculum.
- Expand opportunities for interprofessional educational (IPE) activities in the medical school curriculum.
- Implement Career Focus Tracks to provide enhanced mentoring and guidance.
- Map all four years of the revised required curriculum.

#### OUTCOMES

- By 2020, the revised curriculum, including longitudinal themes, will be fully implemented.
- By 2020, an IPE activity will be incorporated into the clerkship curriculum.
- By 2022, IPE will be incorporated into each year of the medical school curriculum.

- By 2020, Career Focus Tracks will be fully implemented with designated faculty as mentors for students.
- By 2020, 100% of the revised required curriculum will be mapped.
- By 2022, student performance on USMLE Step I and Step II CK and CS will be above average national levels.

### **Objective 2 - Incorporate interactive teaching strategies throughout the curriculum**

#### STRATEGIES

- Diversify methods of pedagogy to encourage active and self-directed learning by students.
- Increase use of standardized patients and technology, including ultrasound and simulation exercises, for instruction and assessment.

#### OUTCOMES

- By 2020, 30% of preclerkship educational activities will utilize an active learning/self-directed learning format.
- By 2020, 60% of required clinical clerkships will utilize simulation exercises.
- By 2022, 60% of preclerkship educational activities will utilize an active learning/self-directed learning format.
- By 2022, 100% of required core clerkships will utilize a simulation exercise.

### **Objective 3 - Expand assessment techniques**

#### STRATEGIES

- Incorporate progress testing in the preclerkship curriculum.
- Assess students on their readiness for entering residency throughout the four-year

curriculum.

## OUTCOMES

- By 2020, progress testing will be developed and implemented throughout the preclerkship curriculum.
- By 2020, tools will be implemented for assessment of select EPAs.
- By 2022, collected data will be evaluated to determine the feasibility of making entrustment decisions.
- By 2022, all graduated students will have met EPA standards as documented by Program Directors.

### **Objective 4 - Increase opportunities for student academic and career development**

## STRATEGIES

- Encourage student participation in dual-degree programs (e.g. MD/PhD, MD/MPH, MD/MBA, MD/MS).
- Encourage student participation in scholarly activities (e.g. Summer Research Program, Scholarly Concentration Program).
- Support student participation in community service and advocacy activities.
- Enhance student advising and mentorship through Career Focus Tracks.
- Support initiatives that promote health equity and inclusion.

## OUTCOMES

- By 2020, 10% of students will graduate in one of the offered dual-degree programs.
- By 2022, 15% of students will graduate in one of the offered dual-degree programs.
- By 2022, 80% of students will participate in a scholarly project.
- By 2020, 100% of students will be involved in community service and advocacy activities.
- By 2020, all students will be assigned a faculty mentor through the Career Focus Tracks.

- By 2020, all students will have participated in unconscious bias training and social determinants of health training activity.

## Education - Goal 2

The medical school will provide an environment that supports student learning and promotes positive relationships among students, residents and faculty.

### **Objective 1 – Enhance the development of faculty and residents as educators**

## STRATEGIES

- Expand opportunities for faculty education in novel educational methods and educational research.
- Implement peer coaching activities for formative feedback to faculty.
- Preserve dedicated teaching time for faculty with significant roles in undergraduate medical education.
- Expand activities of and membership in the McGovern Medical School Academy of Master Educators.
- Promote faculty involvement in educational research through support of faculty educational opportunities and financial support.

## OUTCOMES

- By 2020, 300 faculty will participate in workshops related to interactive teaching and assessment skills.
- By 2020, 35 faculty with major teaching responsibilities will use peer coaching for formative feedback.
- By 2022, 80 faculty with major teaching responsibilities will use peer coaching for formative feedback.
- By 2020, 88 faculty with education leadership roles will be supported financially.
- By 2022, all OEP monthly educational



development workshops will be live-streamed and recorded.

- By 2022, there will be a total of 95 active faculty members in the medical school's Academy of Master Educators.
- By 2020, an education specialist will be recruited to assist with faculty educational scholarship.

## **Objective 2 - The medical school will foster a positive learning environment to support student learning**

### **STRATEGIES**

- Develop a medical school compact between teachers and learners.
- Appoint an advocate for oversight of student reporting regarding the learning environment.
- Increase interactive sessions for faculty and residents related to optimizing the learning environment.
- Provide multiple venues for students to anonymously report mistreatment.
- Increase sessions for students related to expectations for the clinical learning environment.
- Increase communication between administration and students related to mistreatment reports.
- Increase communication with hospital partners to promote a shared responsibility for a positive learning environment.
- Appoint Directors of the Learning Environment for both Memorial Hermann Hospital and Lyndon B. Johnson Hospital.

### **OUTCOMES**

- By 2020, a medical school compact between teachers and learners will be disseminated.
- By 2020, an ombuds will be appointed.
- By 2020, 30 interactive sessions for faculty and residents will have been presented.
- By 2020, four sessions will be presented to students related to expectations for the

clinical learning environment.

- By 2022, reduction in incidents of mistreatment as identified in the learning environment survey.
- By 2022, student reporting of mistreatment on AAMC Graduation Questionnaire will be below the national average.
- By 2022, the AAMC Graduation Questionnaire will show increased student satisfaction with the learning environment.
- By 2020, Directors of Learning Environment will be appointed to major affiliated hospitals.
- Ongoing monitoring of learning environment with hospital partners and Directors of the Learning Environment. Regular reports reviewed by learning environment review committee.

## **Education Plan - Oversight**

The Curriculum Committee has overall responsibility for monitoring the outcomes of the strategic plan for education. The plan will be reviewed by the Curriculum Committee biannually to determine goal achievement. Working groups meeting semi-annually monitor progress in achieving outcomes related to the strategies, and identify aspects of the curriculum with opportunities for quality improvement. Revisions to the plan will be made on a four year cycle as necessary to meet the strategic plan's goals and objectives. Curriculum Committee subcommittees are responsible for continuous evaluation of the curriculum and ongoing quality improvement activities.

# Strategic Plan for the Clinical Enterprise (FY 2018-2022)

## Practice Plan - Mission

The mission of the clinical practice at McGovern Medical School is to provide excellent, compassionate and patient centered care based on quality, safety and accessibility while demonstrating measurable effectiveness in primary and specialty services.

Our mission will be accomplished through the development of targeted objectives, strategies and outcomes over the next five years.

## Core Values

- Providing the highest quality of medical care that is patient centered, compassionate and collaborative, and focused on the population that we serve.
- Provide and maintain an environment where patients, providers, students and staff will be treated with dignity and respect.
- Commitment to a mission embracing social responsibility and promotion of a culture of transparency, diversity, growth and innovation.

## Practice Plan - Goal 1

Develop innovative models of care delivery focusing on a patient centered and collaborative approach to care delivery that is responsive and flexible to address the needs of the population we serve.

### STRATEGIES

- Facilitate patient accessibility through expansion of clinic hours, increased number of care providers and locations. A new patient navigation structure will be implemented to

enhance online and virtual care.

- Expand the use of home visits for physical, behavioral and social health interventions.
- Identify and develop intervention plans for the clinically vulnerable at risk populations in the primary care setting including the frail elderly, patients experiencing depression, alcoholism, obesity, tobacco addiction and substance abuse.
- Demonstrate a clear institutional leadership position as an advocate for improved vaccination compliance across Texas.
- Use and improve chronic disease dashboards to monitor physician and overall system performance.
- Increase collaborative and coordinated patient care across the six schools of the UTHealth system in Houston through an improved referral system and patient navigation tools.
- Expand the tele-medicine programs for physical and behavioral health services through development of a UTHealth McGovern Medical School Center for Telemedicine.
- Use Nurse Triage lines available 24 hours a day as a point of rapid contact.
- Enhance patient and care team contact with patients between clinic visits through novel applications of technology including wearable monitoring devices and enhanced use of new care team members such as Clinical Pharmacists.
- Increase the percentage of patients receiving care coordination services via a Care Team, (clinical pharmacists, community health worker, social workers, diabetic educator and others).
- Increase the percentage of clinics offering pre-visit planning, post-visit planning and / or standing orders protocols.
- Develop and implement a centralized



transitions of care team for high-risk patients.

## OUTCOMES

- Increased numbers of patients accessing care outside of traditional clinic hours including nights and weekends.
- Expanded disease prevention strategies with measurable increase in frequency of use.
- Reduction of avoidable Emergency Department visits, hospital admissions, readmissions, and length of stay.
- Increased identification and appropriate clinical follow up of depression, falls, obesity, nicotine use, substance abuse, and health harming social needs through comprehensive screening tools, appropriate treatment measures, and prevention strategies.
- Increased number of rapid follow up appointments, 90% of which will occur within thirty days, throughout all UTP clinics. Improve the effectiveness of case managers, community health workers in coordinating post-hospital care.
- Increased participation in educational programs relating to Health System Science, Informatics and Artificial Intelligence in patient Care.
- Increased collaborative programs in biomedical informatics among all six UTHealth schools.
- Enhanced reputation for clinical excellence, relevance and influence in population health care delivery locally and beyond.
- Increased rates of vaccinations in both pediatric and adult populations served.
- Increased volume of service requests, referrals or patient touches.
- Number of patients receiving transitions of care services, percentage of patients completing a post hospital discharge clinic visit with a Primary Care provider.
- Decreased number of avoidable ER visits and admissions.

## Practice Plan - Goal 2

Complement Behavioral Health services for both inpatient and outpatient care including substance abuse.

## STRATEGIES

- Reduce health disparities through development of new community outreach programs using a multi-sector collaborative approach including mobile health screening, healthy lifestyle education, chronic disease management, medication adherence, programs to address smoking, obesity, substance abuse, medication adherence, enhanced immunization rates and addressing the health harming legal needs of our patients.
- Expand and enhance existing programs for wellness, diabetes education and self-management, hypertension, physical fitness and behavioral health.
- Partner with existing community based programs to enhance our outreach to an increased proportion of the population.
- Develop, study/research, and initiate innovative projects to address the social determinants of health that impact our patients.
- Provide programs that address social determinants of health.

## OUTCOMES

- Improvement in health outcomes including increased number of patients participating in wellness oriented programs, including diabetes education, exercise, Tai Chi, healthy meal selection and cooking, gardening and health fairs, improved disease management measures and improved patient self-reporting of overall health satisfaction and well-being.
- Improvement in our employees' health using self-reporting and standardized screening tools.
- Needs assessments by clinic.
- Actual number and type of programs available.

- Number of patients screened.
- Number of patients who screened positive and received services.
- Decreased patient no show or non-adherence to treatment.

## Practice Plan - Goal 3

Develop community based programs benefiting the overall health of the population.

### STRATEGIES

- Reduce health disparities through development of new community outreach programs using a multi-sector collaborative approach including mobile health screening, healthy lifestyle education, chronic disease management, medication adherence, programs to address smoking, obesity, substance abuse, medication adherence, enhanced immunization rates and addressing the health harming legal needs of our patients.
- Expand and enhance existing programs for wellness, diabetes education and self-management, hypertension, physical fitness and behavioral health.
- Partner with existing community based programs to enhance our outreach to an increased proportion of the population.
- Develop, study/research, and initiate innovative projects to address the social determinants of health that impact our patients.

### OUTCOMES

- Improvement in health outcomes including increased number of patients participating in wellness oriented programs, including diabetes education, exercise, Tai Chi, healthy meal selection and cooking, gardening and health fairs, improved disease management measures and improved patient self-reporting of overall health satisfaction and well-being.
- Improvement in our employees' health using

self-reporting and standardized screening tools.

## Practice Plan - Goal 4

Promote stronger, more integrated and patient focused affiliations with our major academic and community partners while aligning our strategic and financial goals with the stakeholders.

### STRATEGIES

- Establish criteria for mutually negotiated goals for patient care and outcomes for the clinical and financial enterprise.
- Work with Managed Care Organizations and payers to improve clinical outcomes and reduce costs.
- Partner with other UT schools to identify and secure new funding to improve infrastructure and patient outcomes.

### OUTCOMES

- Maintain a top 10% ranking as a provider of patient care and superior ranking in hospital quality measures on the Vizient index and Press Ganey Surveys.
- Increase our funded and philanthropic research awards by at least 5% yearly.
- Increased participation and increased performance in quality and shared savings programs.
- Increased data exchange via supplemental data feed or FTP (File Transfer Protocol).

## Practice Plan - Goal 5

Demonstrate continuous improvement of patient safety and quality measures through use of new and existing enhanced reporting mechanisms.

### STRATEGIES

- Expand the certification of the NCQA Patient Centered Home to all clinical sites.
- Enhance and facilitate the use of the Patient Safety Reporting Module.



- Initiate methods to improve and enhance ease of error reporting.
- Provide continuing education programs for error reduction and patient safety for students, staff and faculty.
- Implement Population Health measures to create and sustain systemic improvement through development of performance tools that allow multi-level tracking.

#### OUTCOMES

- Absolute reduction in serious and non-serious safety events.
- Absolute reduction in care errors, near misses, as well as omissions in care management.
- National recognition as leaders in patient quality and safety.
- Databases that will track quality and clinical outcomes, modelling to stratify risk, including tools for gaps in care analysis.

### Practice Plan - Goal 6

Develop and enhance Interprofessional Education (IPE) programs focused on a team based approach to patient care and disease prevention.

#### STRATEGIES

- Improve collaboration between all the UTHSC schools in IPE at all levels, undergraduate, graduate and professional CME activities.

#### OUTCOMES

- Increased number of IPE programs among the schools with a continuous increase in the number of students, staff and faculty participating.

### Practice Plan - Goal 7

Focus on recruitment and retention of outstanding clinical faculty. Expand and monitor

programs designed to promote faculty wellbeing, including tools and strategies to identify and reduce clinician burnout, and enhanced career-long programs for faculty development.

#### STRATEGIES

- Expansion of programs for faculty development, including mentoring and coaching programs.
- Support for faculty participation in the Clinical Safety and Effectiveness (CS&E) and Leadership development courses through UTHHealth and McGovern Medical School as well as participation in national leadership development courses.
- Use tools to survey workplace satisfaction to identify areas for improvement.
- Encourage use of screening tools to aid in identification of individuals at risk and provide appropriate management options.

#### OUTCOMES

- Recruitment of outstanding clinical faculty, with a measurable increase in recruitment of women and underrepresented minorities.
- All newly-hired faculty will have a designed faculty mentor.
- Improved work satisfaction as measured by improved satisfaction scores for faculty, trainees, staff.
- Improved retention of faculty and staff.

#### MEASURED OUTCOMES TO 2019

- Same-day appointments, evening and weekend hours added at all Community-Based Clinics totaling an additional 424 hours per month for patient care
- Care coordination and transitions of care team received over 15,000 referrals since inception. The care coordination team currently consists of financial counselors, clinical pharmacists, diabetes educators, medical social workers, community health workers, behavioral health providers, nurses, advanced care practitioners and physicians.
- Pediatric high-risk care program has resulted

in a 47-69% reduction in ED visits, admissions, PICU admissions and length of stay.

- Medicaid payments were reduced by \$6,243/child-year with care coordination.
- Social workers have received over 10,000 referrals since inception.
- Diabetic educators have received over 6,000 referrals since inception.
- Clinical pharmacist referrals have identified and resolved over 300 drug therapy problems.
- The EHR integrated Patient Safety Reporting Module has received over 100 instances of potential patient safety events that have been evaluated and remedial actions taken.
- Nurse triage line operating 24/7 answered 349,000 patient calls in 2019.
- Behavioral health is now integrated in all primary care clinics.
- Approximately 40 clinical care measures for primary, secondary and tertiary prevention have been established each with a measureable performance dashboard.
- All primary care patients are now screened annually for depression, falls, obesity, nicotine and alcohol use.
- Over 50 Wellness Programs for patients are currently available in conjunction with 30 community partners. Caring for the community programs include chronic disease management, nutrition and lifestyle, physical fitness, maternal and child care, and patient education and support.
- Strong Foundations for Motherhood uses community health workers to decrease severity and duration of postpartum depression showing a 50% decrease in psychological distress and achieved depression remission.
- Pediatric and adult vaccination rates have increased significantly.
- Construction on a new psychiatric hospital has commenced.
- A new physician to physician telephone consultation line for psychiatric patients is

now operational.

- The Department of Psychiatry has enrolled students in a program to educate Psychiatric Advanced Care Practitioners.
- UTP is leading a 60 member consortium to address food insecurity and clinical outcomes of intervention.
- NCQQA PCMH certification of 11 clinics with an additional 7 anticipated in 2020.
- IPE activities including mass casualty drills twice per year with participants from all health science disciplines participating in mock disaster simulations, Innovation Challenge interprofessional teams compete to find the best solution to active problems in health care, collaborative care continuing education in all clinical settings.

## **Practice Plan - Oversight**

- The plan will be monitored semiannually for successful outcomes completion by a multidisciplinary team representing clinical, research and education champions, these updates will be available for general faculty review and comment.
- Outcomes that are identified as not meeting anticipated goals will be brought to the Medical Directors, Section Chiefs or Department Chairs for discussion and implementation of methodologies for improvement.
- Periodic re-assessment and adjustments to the plan will be required over time. Responding to and anticipating future clinical challenges will be a necessary task of the plan oversight committee.
- Performance dashboards, retrospective and prospective analysis will be employed to track the performance in each of the identified areas.



# Strategic Plan for Research (FY 2018-2022)

## Research - Mission

To cultivate and sustain a culture of inquiry at all levels of professional endeavor; to conduct innovative research in pursuit of discovery, interprofessional collaboration, and integration of research into continuously improving health care that benefits the health and well-being of the population of Texas and beyond.

## Research - Core Values

Sustain an environment that integrates research seamlessly into clinical care, to create a learning healthcare system that delivers compassionate patient care focusing on effectiveness, quality, safety, and service.

Provide a broad, competency-based research curriculum emphasizing integrity, professionalism and strong methodological grounding.

Embrace a culture of research, open inquiry, evidence-based and evidence-generating practice, and lifelong learning, along the scientific continuum from fundamental discovery to population research.

Cultivate strong interdisciplinary research programs and develop and sustain enabling infrastructure.

Foster a diverse and inclusive research community.

Promote and enable student research throughout the curriculum.

Support the health and well-being of students, faculty and staff in research activity.

Promote interprofessional collaboration with strong institutional support.

Support leadership and innovation in research, training and translation of research to care.

Conduct research intended to promote discovery and identification of disease mechanisms.

Conduct research focused on improvement of population health and reduction of health care disparities.

## Research - Goal

The medical school will provide the resources and environment needed to enable development of a sustainable culture of inquiry, which is intended to integrate research into the daily professional operations of all service and educational activities. Research is seen as a lens through which the other mission areas are viewed, with focus on bringing the tools of research to continuous learning and problem solving. Practice should be not only evidence-based, but evidence-generating (learning healthcare).

*This goal will be achieved through objectives in the following three areas: collaboration, infrastructure, and career development.*

**Objective 1 – Collaboration.  
To develop a robust culture of multidisciplinary collaboration that engages professionals who may be at different levels of educational attainment and training**

## STRATEGIES

- Encourage collaboration with multidisciplinary showcase conferences such as the McGovern Medical School Research Retreat and other interdisciplinary programs.
- Incentivize collaboration through development of collaborative grant competitions that require multidisciplinary teams. For instance, we have started a joint program with Rice University that incentivizes collaboration between scholars in different disciplines (eg., Engineering and Medicine) and involves faculty and students.
- Continue to develop and support multidisciplinary Centers and Institutes that serve as academic homes to collaborative teams. More than 35 Centers, Institutes and Research Core Service Centers exist at the present time, and their productivity has established the value of such initiatives.
- Develop and support multidisciplinary programs for communities of scholars, which can benefit from the infrastructure programs of the institutional Center for Clinical and Translational Sciences (CCTS), which is the nominal designation for our NIH-supported Clinical and Translational Sciences (CTSA) program.

## OUTCOMES

- Assess the outputs of new collaborations developed through the showcase events as measured by collaborative publications and grants, especially those received by people who have not worked together previously.
- Assess publications and follow-on funding success of teams funded by multidisciplinary grants.
- Assess research productivity of multidisciplinary Center and Institute members by traditional metrics (bibliometrics, funding), and also by retention data as compared to the faculty at large.
- Develop a comprehensive research-related faculty satisfaction survey policy going

forward.

- Measure outputs of multidisciplinary teams using established tools such as the National Center for Advancing Translational Sciences' (NCATS) Common Metrics and Balanced Scorecard initiatives, which are used to evaluate the productivity of NIH-sponsored Clinical and Translational Science Awards (CTSA).

**Objective 2 – Infrastructure.  
To secure and sustain a robust  
research-enabling infrastructure,  
to support the research mission**

## STRATEGIES

- Increase support for bridging grants, just-missed grants, and mission-target grants, to develop and support the research mission.
- Increase seed grant and other pilot project opportunities.
- Provide sustained core funding for research service centers, in support of basic, translational and clinical research efforts.
- Develop research-related philanthropy and maintain a team of collaborative development professionals whose focus is to attract resources for research.
- Enhance intellectual property development and technology transfer infrastructure to help bring research findings into broadest use where they can have the largest impact.
- Promote and support the student Summer Research and Scholarly Concentration Programs and the student Academic Career Track.
- Expand and provide additional resources for an office that specifically promotes and supports medical student research.

## OUTCOMES

- Measure the effectiveness of bridging and just-missed funding assistance as a catalyst for follow-on extramural funding.
- Measure the effectiveness of seed grant and



pilot grant programs for generating follow-on extramural funding.

- Assess publications using bibliometric tools such as citations, journal impact factor, alt-metrics (social media impact) and follow-on funding success of teams funded by infrastructure grants.
- Measure yearly growth of service center activity, collaboration and output.
- Measure yearly growth in philanthropic support and document its use to support research.
- Document engagements between research and tech transfer professionals, and the success of translation of research to the market (patents, new products).
- Measure impact of the expanded office of student research (% of students who participate, % and adequacy of stipends for summer research, research products arising from these experiences).

**Objective 3 – Career Development. To develop and sustain a world-class research workforce, composed of professionals at multiple levels of education in multiple disciplines**

**STRATEGIES**

- Expand comprehensive research training to students, postdoctoral trainees, faculty, research staff, and research support personnel.
- Enhance comprehensive training in research ethics, responsible conduct of research and research regulatory affairs. Continue to develop scholarly content and research in best practices in these areas.
- Develop, sustain and reward mentorship of the highest quality in all areas of research.
- Recruit, develop and retain a research workforce that functions at the highest level. Invest in the recruitment of key people, and identify pathways to leadership in research

activity.

**OUTCOMES**

- Document the number of professionals served by the research training programs, assess participant feedback for continuous quality improvement, and assess the career progress of participants in the career development programs. A new management system in the postdoctoral office will improve capture of this information.
- Assess frequency and identify remedies for research-related compliance issues. Assess scholarly output and national-level participation in research ethics and regulatory affairs societies, such as the Public Responsibility in Medicine and Research (PRIM&R) organization.
- Survey mentor/mentee productivity and satisfaction, and assess the effects of mentorship on career and leadership development.
- Assess overall workforce satisfaction, productivity and retention.
- All of the above assessments are outcomes being tracked by the CTSA's evaluation plan.

**Plan Oversight and Monitoring**

A strategic plan oversight committee has overall responsibility for monitoring the plan and for making adjustments as necessary to meet the plan's goals and objectives. The committee is chaired by Dr. Charles Miller, Associate Vice President for Clinical Research and Healthcare Quality, and is advisory to the Dean of the medical school, Dr. Barbara Stoll, who has the authority and resources to approve recommended change as necessary. The oversight committee represents all major areas of the research mission, and also includes senior leaders from our institutional CTSA program, the Center for Clinical and Translational Sciences (CCTS). The committee expects to meet semi-annually,



or more frequently on an ad-hoc basis if a need arises or if the Dean requests an advisory opinion or directs the committee to study some concern or new development that may affect the strategic approach to research.



# Strategic Plan for Diversity and Inclusion (FY 2018-2022)

## Diversity - Mission

We are deeply committed to fostering a diverse, culturally rich and inclusive environment where opportunities for collaboration and innovation are limitless. McGovern Medical School subscribes to a broad concept of diversity which includes widely divergent life experiences as well as traditional associations with race, ethnicity, socioeconomic status, gender identity, sexual orientation, cultural orientation, disability, military service, religious beliefs, national origin and other distinctive immutable and mutable characteristics. We are steadfast in our commitment to cultivating a physician workforce that is equipped to meet the evolving healthcare needs of all Texans and all those living in our greater community.

## Diversity - Core Values

Promote an inclusive environment where all trainees, faculty, and staff are valued and respected.

Emphasize high quality, culturally responsive patient care, research, and training.

Enrichment of the educational environment with our diverse community.

Commitment to a diverse physician workforce that is able to meet the needs of our increasingly diverse patient population.

## Diversity - Goal 1

The medical school will foster an environment that is welcoming and inclusive of all people, regardless of their background or identity.

## Objective 1 – Develop and enhance initiatives that place value on our diverse community

### STRATEGIES

- Build a culture of diversity and enrich diversity awareness through delivery of a lecture series that encompasses topics of inclusion, equity, disability, multiculturalism, social justice, and unconscious bias.
- Administer school-wide biennial climate surveys to monitor success and effectiveness of on-going initiatives.
- Promote participation in and provide support to faculty, student and staff affinity groups.
- Expand existing cultural awareness fairs.
- Produce a quarterly newsletter highlighting the diversity within the McGovern community.
- Host regular networking events for diverse faculty and trainees.
- Encourage departmental mentorship for URM faculty and trainees.
- Collaborate with Chairs on department/specialty-specific strategies to foster an inclusive environment.
- Create additional leadership opportunities that lend themselves to the promotion of diversity and inclusion.

### OUTCOMES

- By 2020, appoint a Vice Chair for Diversity and Inclusion in each clinical department hosting a required clerkship.
- By 2021, create school-wide awards that recognize teaching, research and service promoting equity and equal opportunity.
- Results of biennial faculty climate surveys will demonstrate a quantifiable improvement

in cultures of diversity, inclusion and equity at McGovern Medical School.

- Increasing participation in the diversity awareness lectures with expanded topics (assessed by tracking attendance by faculty, staff and student participants).
- Expansion of affinity groups that support our diverse community.

## **Objective 2 – Promote an environment that is free of bias in our everyday work**

### **STRATEGIES**

- Mandate unconscious bias training for all search committees.
- Deliver unconscious bias training to faculty involved in the selection of trainees.
- Integrate lectures into the curriculum that address bias in healthcare delivery.

### **OUTCOMES**

- By 2020, develop and implement an online module for unconscious bias training.
- By 2020, complete a train-the-trainer series for each department such that there is an identified, trained diversity liaison to deliver unconscious bias workshops per department.
- Results of biennial faculty climate surveys will demonstrate an improvement in cultures of diversity, inclusion and equity at McGovern Medical School.
- By 2021, realize an upward trend in the number of URM faculty hires.

## **Diversity - Goal 2**

Engage in practices that ensure accountability and that demonstrate intention in recruitment of top talent from diverse backgrounds for our student, resident, faculty, and staff communities.

## **Objective 1 – Assure that medical school admissions practices align with a holistic review process**

### **STRATEGIES**

- Deliver annual, required training to admissions committee members on the holistic review process in admissions.
- Highlight our commitment to diversity in print materials and informational sessions during the recruitment and interview process.
- Engage in recruitment activities that target diverse populations of students and build a database of potential/future applicants from these encounters.
- Provide unconscious bias training for admissions interviewers and committee members.
- Identify extramural funding sources that support diversity initiatives related to matriculation and success of underrepresented students.

### **OUTCOMES**

- Increase enrollment of students underrepresented in medicine and from diverse backgrounds by 5% by 2021.
- Improved awareness of personal bias by faculty and staff who are involved in the admissions process.
- Wider engagement with students from diverse backgrounds through the establishment of two new community-based programs by 2022.
- Increased awareness in the community of our commitment to diversity.



## **Objective 2 – Continue to engage in pipeline programs to enhance the medical school applicant pool with qualified applicants from groups underrepresented in medicine**

### **STRATEGIES**

- Improve access for URM students by partnering with local minority-serving institutions (MSI) (high schools and universities) to cultivate an interest in the biomedical sciences and to build relationships with their top talent from backgrounds traditionally underrepresented in medicine.
- Expand on-campus opportunities to expose and educate potential applicants on the pathway to health science professions and accept/attend more speaking engagements at MSIs.
- Evaluate existing pipeline programs to assess efficacy and areas in need of expansion or improvement.
- Create and launch a minority male initiative to address the shortage of representation of this cohort in medicine.
- Recruit and engage trainees and faculty members from various affinity groups to regularly participate in initiatives of existing pipeline programs.
- Improve the organization capacity of the Office of Diversity and Inclusion by creating a new FTE dedicated to creating, managing and sustaining special programs.

### **OUTCOMES**

- By 2022, realize an upward trend in enrollment of students underrepresented in medicine and from diverse backgrounds.
- Expansion of current existing pipeline programs.
- Increased number of fruitful partnerships with disadvantaged and underrepresented stakeholder communities.

- Increased engagement with students from diverse backgrounds.
- By 2022, increase enrollment of minority males by 10%.
- Increased participation from current faculty and students with pipeline programs.

## **Objective 3 – Develop Graduate Medical Education selection practices that align with a holistic review process**

### **STRATEGIES**

- By 2021, complete assessment of graduate medical education recruitment and selection practices.
- Highlight our commitment to diversity in print materials and informational sessions during the recruitment and interview process.
- Engage in recruitment activities through national affinity groups to recruit residents and fellows who are top talent from diverse backgrounds.
- Provide unconscious bias training for faculty members who participate in the selection process.
- Distribute to residency programs the current literature and national trends to highlight and elucidate best practices for recruitment of residents and fellows from diverse backgrounds.

### **OUTCOMES**

- Increased selection and hiring of residents and fellows underrepresented in medicine and from diverse backgrounds.
- Expansion of a holistic review process in graduate medical education selection.
- Improved awareness of personal bias by faculty and staff who are involved in the selection process.
- Wider engagement with potential residents

from diverse backgrounds.

- Increased awareness in the community on our commitment to diversity.

**Objective 4 – Assure that policies and procedures are in place to recruit faculty and staff from diverse backgrounds**

**STRATEGIES**

- Assess current recruitment processes.
- Educate key stakeholders on faculty recruitment processes through annual, required training sessions.
- Engage in recruitment activities and strategies that target faculty and staff from diverse backgrounds.
- Provide mandatory unconscious bias training for search committee members.
- Advertise positions in outlets that target persons from diverse backgrounds.
- Highlight our commitment to diversity in print and web based resources.

**OUTCOMES**

- Realize an upward trend in faculty and staff hires from diverse backgrounds.
- Conduct annual audits to ensure that appropriate policies and procedures are being utilized in the hiring process.
- Present a biennial report to each department regarding their hiring outcomes as it pertains to diversity.
- Improved awareness of personal bias by faculty and staff who are involved in the hiring process.
- Wider engagement with potential applicants from diverse backgrounds.
- Increased awareness in the community on our commitment to diversity.

## **Plan Oversight and Monitoring**

A strategic plan oversight committee has overall responsibility for monitoring the plan and for making adjustments as necessary to meet the plan's goals and objectives. The committee is chaired by Dr. Charles Miller, Associate Vice President for Clinical Research and Healthcare Quality, and is advisory to the Dean of the medical school, Dr. Barbara Stoll, who has the authority and resources to approve recommended change as necessary. The oversight committee represents all major areas of the research mission, and also includes senior leaders from our institutional CTSA program, the Center for Clinical and Translational Sciences (CCTS). The committee expects to meet semi-annually, or more frequently on an ad-hoc basis if a need arises or if the Dean requests an advisory opinion or directs the committee to study some concern or new development that may affect the strategic approach to research.

## **Diversity - Goal 3**

Improve access and success for women and URM in academic medicine by developing sustainable support initiatives for these faculty members and trainees; enhance existing initiatives that foster success.

**Objective 1 – Collaborate with the Office of Faculty Affairs on career development opportunities for women and faculty from URM backgrounds**

**STRATEGIES**

- Inventory existing career development resources and assess effectiveness.



- Provide sponsorships for faculty to attend national, regional, and local career development conferences and trainings.
- Collaboration with department chairs to provide additional networking and mentoring opportunities for junior and mid-career faculty.
- Enlist the Faculty Diversity Committee as an advisory committee for the Office of Diversity and Inclusion and Faculty Affairs.
- Utilize the Faculty Diversity Committee for communication with Faculty Senate and departments for opportunities specific to underrepresented faculty members.
- Assure faculty are aware of available resources for faculty development.

#### OUTCOMES

- Mentoring and networking needs will be assessed and expanded.
- Realize an upward trend in the number of women and URM faculty who are being promoted.
- Realize an upward trend in the retention of women and URM faculty.
- Increased engagement with the Faculty Diversity Committee and the Office of Diversity and Inclusion and the Office of Faculty Affairs.
- Faculty will be empowered to actively engage in their own professional development through attending leadership and development workshops.

**Objective 2 – Collaborate with the Office of Admissions and Student Affairs and the Office of Educational Programs on strategies to ensure success for students from socioeconomically and disadvantaged and URM backgrounds**

#### STRATEGIES

- Inventory existing support structures and assess effectiveness.
- Work with senior learning specialist on identifying any additional resources for student success.
- Provide more networking opportunities for all students.
- Utilize the student diversity committee as an advisory committee to the Office of Diversity and Inclusion.
- Create a repository/database of annual diversity and inclusion opportunities.

#### OUTCOMES

- Enhanced support for all students.
- Decreased attrition rates from socioeconomically disadvantaged or URM students.
- Increased utilization of academic support programs and interactions with the senior learning specialist to yield improved success rates on high stakes and national board examinations.
- Empowerment of the student diversity committee.

**Objective 3 – Collaborate with the Office of Graduate Medical Education on strategies to ensure success for residents from URM backgrounds**

## STRATEGIES

- Inventory existing support structures and assess effectiveness.
- Work with Graduate Medical Education committee on identifying any additional support resources for residents.
- Provide more networking opportunities for URM residents.
- Work with residency program directors on establishing mentorship for resident trainees.

## OUTCOMES

- Enhanced support for all residents.
- Decreased attrition rates from URM residents.
- Increased retention of URM residents to our medical school faculty.
- Program directors are accountable for the diversity of their individual programs.

## **Plan Oversight and Monitoring**

A strategic plan oversight committee has overall responsibility for monitoring the plan and for making adjustments as necessary to meet the plan's goals and objectives. This committee will include members of the student and faculty diversity committees as well as other representatives from offices that collaborate with the Office of Diversity and Inclusion. This committee will meet semi-annually and as needed.

