Academic and Clinical Success Through Synergistic Growth

CONCLAVE RESULTS!
Goals for 2006-2010

- **Medical School**
  - class size 155 by FY 2007.
  - 200 by FY 2010.
  - Recognized leader in curricular reform.
  - Maintain status as leading COM.

- **PA Studies Program.**
  - Explore growth within small class size caps.

- **Extramural research funding >$10M/year.**
  - Renowned focused and unique programs.

- **Empower committees.**
  - Effect change.
  - Engage faculty.
  - Maintain transparency.

- **Expand GME programs and PGY I posts.**
- **UNTPG becomes dominant practice.**
  - Revenues $50-100M/yr.

- **Investment in Faculty.**
  - Intra and extramural leadership development.
  - Sabbaticals.
  - More clearly align rewards with mission specific expectations.

- **New award recognitions.**
  - Basic Science Excellence
  - Physician Assistant Studies
  - Adjunct Faculty
  - Gold-Headed Cane
TCOM Leadership Committees

• Committees are made up of faculty, chairs, associate deans, administrators and staff.
  – All meetings are open!

• Issues to be addressed are listed.

• Output from committees will be expected within 6-18 months.

• Committees will oversee change and advise corrections when needed.

• Activities will be entirely transparent.
Committee on Cultural Integration

"You know, we’re just not reaching that guy."
Committee on Cultural Integration

- Do not underestimate the importance of culture!
- Actively communicates the ongoing processes.
- Must develop a common sense of purpose, and shared goals!
  - Recognize that this is the starting point.
  - We break down all silos and align for the overall good of TCOM and our common goals.
  - **Invest in building a strong culture!!!!**

Thomas Fairchild, PhD, Co-Chair
Alan Podawiltz, DO, Co-Chair
Robert Adams, DO
Ralph Anderson, MD
Bruce Dubin, DO
Gary Etter, MD
JoAnn Frye
G. Sealy Massingill, MD, FACOG
Rob Richard, DO
Jim Roch, PA-C
Damon Schranz, DO
Jean Tips, Marketing
Monte Troutman, DO
Russell Wagner, MD
Wayne Williams, MD

Timeframe
  - ongoing planning
  - ongoing instituting
Committee on Cultural Integration

• We do not have a crisis, we have an opportunity.
  – Chance to build a true learning organization.
• Unbelievable accomplishments over the past 5 years.
  – What would have been possible if more faculty had been both aligned and engaged with the mission and vision (lost opportunities)?
  – Not sustainable without alignment.
• Internal communications and relations.
Committee on Cultural Integration

- To be a leading edge organization, and maintain a competitive advantage we must assure that we have a faculty and staff:
  - Aligned with the vision of the organization.
  - Career satisfaction.
  - Necessary skills.
- Initial focus on important traits:
  - Core values; team orientation; customer focus; change.
- Those not part of the solution are part of the problem!
Committee on Educational Programs and Hospital Relations

- How do we assess quality of our GME programs?
- Are we putting enough resources into them?
- How do we support our hospital partners?
- What new programs (or curricula) are important, and why?
- Timeframe
  - 3-6 month planning
  - 6-24 months instituting

Don Peska, DO, Chair
Samuel Tim Coleridge, DO
Jeff Hantes, DO
Hank Lemke, PA-C
David Lichtman, MD
Michael McFarland, DO
David Moreland, MD
Kendi Pim, DO
Bernard Rubin, DO
Paul Saperstein, DO
Frederick Schaller, DO
Gary Smith, EdD
Monte Troutman, DO
Scott Winter, MD
Committee on Educational Programs and Hospital Relations

• Diversify hospital relationships.
• Is AOA accreditation important?
  – Dual accreditation of programs.
• How do we engage mentors?
• How do we identify opportunities?
• How do we anticipate future specialty demands?
Committee on Clinical Research

- How do we encourage faculty involvement in research?
  - Mentorship, faculty development, required undergrad research, etc.
- What are the required resources for our departments?
- Do we identify specific programs where we currently have expertise and recruit to strengthen?
- Timeframe
  - 6-12 month planning
  - 3+ months instituting

Michael Clearfield, DO, Chair
Robert Bunata, MD
Roberto Cardarelli, DO
Samuel T. Coleridge, DO
Linda Davis, PA-C
Glenn Dillon, PhD
Arthur Eisenburg, PhD
Wendy Hammons
Kollier Hinkle, MD
Al O-Yurvati, DO
Bernard Rubin, DO
Ray Silva, MD
Peggy Smith-Barbaro, PhD
Scott Stoll, DO, PhD
Committee on Clinical Research

- Can research opportunities aid in recruitment?
- Establish a community IRB.
- Who should be our partners for most impact?
- What IT services are needed?
- What departments have best opportunity for growth?
- How do we enhance intramural collaboration?
- Can focused research enhance our “brand” recognition?
Committee on Resource Allocation

- What missions require public support?
- How do we prioritize within our missions?
- Who are our partners, and why?
- **Determine the basis for resource allocation after assessing need.**
  - How do we move money?
  - What is a reasonable timeframe?
- Timeframe
  - 6-12 month planning
  - 24+ months instituting

Ralph Anderson, MD, Chair
Robert Adams, DO, MS
Joel Daboub, MBA
Bruce Dubin, DO, JD
Hank Lemke, PA-C
Mike Martin, PhD
Arvind Nana, MD
Elizabeth Palmarozzi, DO
Alan Podawiltz, DO
Monte Troutman, DO
Susan Willis
Dennis Shingleton, MBA
Committee on Resource Allocation

- What are the commodities, and their value?
- Need to develop clear education budget.
- Change starts with us (Adams).
- Do we start?
Committee on Physician Practice

- What is the purpose of the UNTPG?
- What is required from the institution?
- How do we decide upon faculty hires (clinical, research, administrative, and educational needs)?
- What are our major constraints in practice expansion?
- What is attainable for our practice?
- How should we be structured? Timeframe
  - 6-12 month planning
  - 6-12 months instituting

Robert Adams, DO, Chair
Ralph Anderson, MD
Sam Buchanan, DO
John Fling, MD
Russ Gamber, DO, MPH
Randy Jones, MPA
Janice Knebl, DO, MBA
Arvind Nana, MD
Frank Nizzi, DO
Patti Pagels, PA-C
Elizabeth Palmarozzi, DO
Alan Podawiltz, DO
Committee on Physician Practice

- How do we capitalize on Brand recognition?
- How do we improve service?
- Can CoE break down silos and benefit our practice (or patient care)?
- What are our IT needs (need rep)?
- Do our systems work?
- Who are our partners and how do we collaborate?
- How do we utilize non-physician providers?
Committee on Medical Education

- What should our curricula (DO and PA) look like?
- Resources necessary for growth in class size?
- What is the optimal number of faculty, clinical sites, etc?
- How do we develop a homogenous clinical experience, role models and specific expectations for faculty?
- What are the resources necessary to attain excellence and how do we calculate?
- Timeframe
  - 6-12 month planning
  - 6-12 months instituting

Bruce Dubin, DO, JD, Chair
Jennifer Alexander, DO
Jerry Alexander, PhD
Mike Budd, PhD
Thomas Dayberry, DO
Patty Gwirtz, PhD
Laurie Hill, MHS, PA-C
Michael Martin, PhD
Al O-Yurvati, DO
Stephen Putthoff, DO
Linda Reed, MEd, PA
Richard Virgilio, DO
Committee on Medical Education

• Should we train med students in supervising non-physician providers?
• Who defines the curriculum?
• How do we train educators (faculty development)?
• What are our educational needs in the DO and PA programs?
• Are all departments’ contributions appropriate for the contribution of state med ed $$$?
• Can we utilize more adjunct lecturers?
Metrics for Assuring Success

- Enhanced mission specific funding.
- New programs that support the mission and vision.
  - Novel funding sources.
- **External recognition.**
  - Primary Care and Rural Health.
  - Academic and Research programs.
- **Improved performance by standardized means.**
- Total faculty growth.
  - recruitment and retention.
  - Active participation.
  - Positive morale and cultural accord.
- Do the leaders walk the talk?
Vision for TCOM

“To be a recognized academic leader in primary care and rural medicine for the state of Texas and the nation.”

• To achieve this vision we will become:
  • An international leader in medical education and curricular design.
  • Nationally renowned for focused research and unique programs.
  • The preeminent multi-specialty medical practice in Tarrant County.
  • An institution with high faculty and staff career satisfaction.

Marc B. Hahn, DO
January 20, 2006