





Education, Research, Patient Care and Service

Academic and Clinical Success Through Synergistic Growth: Leadership Conclave January 19-20, 2006

From Many, One!



Opportunity To Assure Success

- There are great challenges in health care.
 - But this can lead to great opportunities.
 - Turning point for our "new" organization.
- With the proper resources, focus, and commitment.
 - We will be the clinical practice of choice for Fort Worth and Tarrant County.
 - We will continue to be a defined leader in medical education and research.
- Our success is predicated upon effective strategic planning.



Begin Strategic Planning Process

- Shared commitment to our academic and clinical missions.
- Cultural assessment and integration.
 - Denison Culture Survey instrument.
- Planning conclave for TCOM Leadership January 19-20, 2006.
 - Mission specific planning.
 - Practice plan structure.
 - Resource allocation.
- Followed in summer 2006 by faculty planning session.

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Goals and Objectives

- Strategic review of the TCOM.
 - Past planning, current successes and the mission.
- Endorse the Vision for TCOM.
- Understand the impact of culture on an organization and the importance of change.
- Agree upon and embrace the strategic goals and objectives for assuring success in our multifaceted missions.
- Appoint committees to develop tactics.
 - Mission specific areas.
 - Cultural integration.
 - Understand our resources and structure a framework for appropriate use of funds.
- Ultimately during the next 6 months-2 years.
 - Engage faculty.
 - Enact our endorsed changes.
 - Develop metrics for monitoring success and making adjustments.



TCOM direction as defined through the Dean's Inaugural Address, 2001.



Leadershipto our profession and community.

- Develop a Shared Mission, Vision, and Culture.
 - Invite active participation, and develop depth and breath of leadership.
 - Enthusiastic culture for institutional success, and an appropriate system that rewards that structure.
 - The future success of TCOM is dependent upon maintaining strong, knowledgeable, and talented faculty leaders at the Chair level.



Goals- (over the next 36 months) to raise TCOM to the next level

- Continue Curriculum Reform
 - More active learning strategies.
 - Utilize simulation and technology.
 - Test core competencies.
 - Assure uniformity in all of the clinical rotations.
- Develop synergy with Schools of Public Health and Biomedical Sciences.



Goals- (over the next 36 months) to raise TCOM to the next level

- Advance Research Mission
 - National Osteopathic Research Center.
 - Associate Dean of Research.
 - Compliance.
 - Career development and assure clear goals.
 - Promote collaboration.
- Graduate Medical Education
 - Must define the future of primary care.
 - Develop new programs for the profession.



Goals- (over the next 36 months) to raise TCOM to the next level

Clinical Practice

- Practice plan structure and governance that is responsive to our current and future needs.
- Collaborative associations to grow the clinical practice and provide needed services.
- Restructure the office of the Dean
 - Sufficient infrastructure to assure mission success.
 - Equitable policies to attract and retain faculty.
 - People first!



TCOM direction as defined through the Conclave of 2002.



"If we always do what we've always done, then we'll always get what we've always gotten!"

Marc B. Hahn, DO August 8, 2002



How will we go from Good to Great?

- Retain, cultivate, and recruit great people, who are self-motivated.
 - Right people on the bus, and in the right seats!
- Simplicity is key
 - What can we be great at?
 - That's where do we put our resources?
- Cultural change
 - Respect, productivity, collaboration, and excellence.
- Embrace technology as an accelerator.



Our Principal Focus 5 years From Good to Great

- Medical Education
- Primary Care Medicine
 - Undergraduate and GME.
 - Focused research into access, rural and public health.
 - Family medicine, Internal Medicine, Pediatrics,
 Geriatrics, Physician Assistant Studies.
- Research
 - Osteopathic Research Center
 - Other clearly focused and aligned studies.
- Genomics and Molecular Medicine
 - DNA laboratory and research

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Common Goals For Our Success

- Closer county hospital affiliation.
- Use of patient simulation.
- A better incorporation of public health.
- Collaborations, both intra- and extramural.
- Appropriate use of resources and support=Mission Based Management!



TCOM direction as defined through the Associate Deans' Planning Session, January 2004.

oals for Success in Medical Education

- Development of Core faculty in a Dept of Medical Education.
 - Appropriate support and infrastructure.
 - Teams for content development ¿WIRA し
 - Improve communication and faculty development.
 - Central coordination of curriculum.
 - Active oversight of the clinical rotations.
 - PA Studies out of Family Medicine.
- Completion of Simulation CoE.
- Improved physical plant and technology strategic planning:

Goals for Success in GME

- Develop new programs
 - Assure internship in Texas for each TCOM graduate/
 - Fill both regional and professional voids (JALIII) -
 - Incorporate more ACGME programs.
 - Develop satellite core sites.
- Must start redesign of FM residency by July 04.
 - Management training
 - Advanced techniques
 - Public Health education
- Develop more academic services to assure added value to hospital partners.
 - Decrease reliance on TCOM financial support.
- Evaluate program directors.
 - Add faculty development and facilitate changes.

Goals for Success in Research

- Better institutional support of research efforts.
 - Grant writers, administrative, enhanced integrative collaboration.
- Enhance mentoring programs to develop new researchers.
- Researcher incentive program.
- Appropriate distribution of tobacco dollars.
- Establish relationships with academic partners.
 - JPS, CCMC, NTAMG, others.
- Assure state resources (\$) go to support ORC, focused programs, and collaborative ventures.
 - Label current funds
 - Bridge researchers
 - Start-up support
- Goal of \$10 million in extramural funding by 2005.

Goals for Success in Clinical Affairs

- Maintain fiscal success.
- Develop service culture, training program and reward Systems.

 - Consider 501-c-3 structure.

 - NEW HR RUCES systems.
- Develop new models.
 - for cost effective primary care.
 - that incorporates wellness, prevention, executive care.
- Expand most clinical operations through collaborations.
- collaborations.

 /NST/T TAX

 Improve technology and physical plant.
- Improved process for strategic decision making



TCOM direction as defined through the Chairs' Planning Session, July 2004.



Some of the questions we must answer

- Medical Education
 - What should our curriculum (DO and PA) look like?
 - What is the optimal number of faculty, clinical sites, etc?
 - How do we develop an homogenous clinical experience, role models and specific expectations for faculty?
 - What are the resources necessary to attain excellence?
- 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?



Some of the questions we must answer

Clinical Affairs

- What is the purpose of the UNTPG?
- What is required from the institution for its support?
- 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?

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?



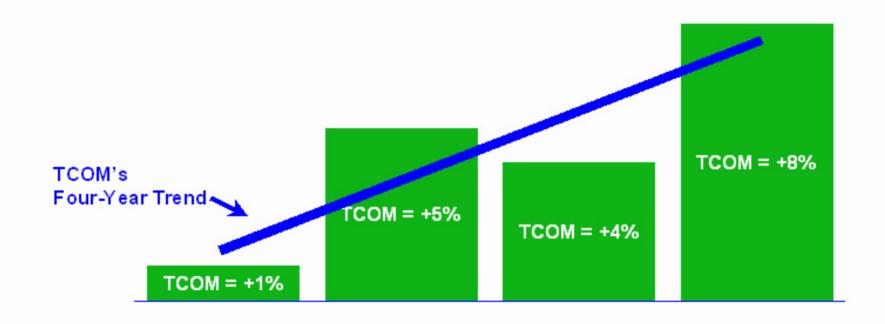
Some of the questions we must answer

- Resource Allocation
 - Where do we place our resources?
 - How do we prioritize within our missions?
 - Who are our partners, and why?
 - How do we move money?
 - Determine the basis for then the process of, allocation and need.
- Must develop a common sense of purpose, and shared goals!
 - Recognize that this is the starting point.
 - We don't look back, just forward.
 - We break down all silos and align for the overall good of TCOM.
 - Our actions from this time forth are principally focused on assuring the successes defined by our common goals!



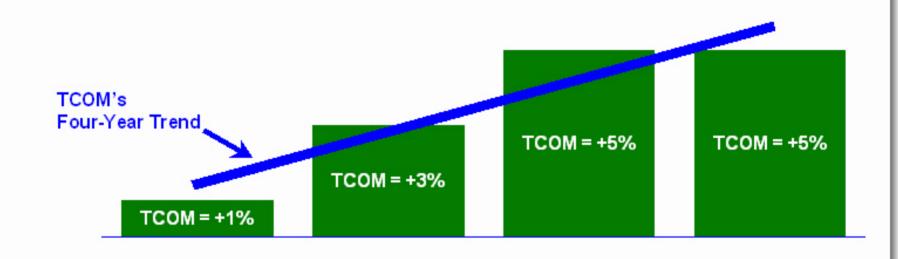
Current Successes

COMLEX 1 Passing Rates for First-Time Takers Comparison of TCOM's Passing Rate to National Reference Group's 2002-2005



	2002	2003	2004	2005
% Pass TCOM	91	97	93	99
% Pass National	90	92	89	91
n TCOM	110	105	120	120
n National	2696	2700	2766	2854
n Fail TCOM	10	3	8	1

COMLEX 2 Passing Rates for First-Time Takers Comparison of TCOM's Passing Rate to National Reference Group's Fall and Spring Administrations Combined, Fall 2001-Spring 2005



	F01+S02	F02+S03	F03+S04	F04+S05
% Pass TCOM	91	96	97	94
% Pass National	90	93	92	89
n TCOM	110	112	116	114
n National	2545	2274	2743	2798
n Fail TCOM	10	4	3	7

Class of 2009 MCAT Data

	MCAT
UT Southwestern	33.6
UTHSC - Houston	29.2
Texas Tech University HSC	28.7
UT Medical Branch	28.5
UNTHSC-TCOM	28.3
UTHSC – San Antonio	28.2
Texas A&M University HSC	28.2

^{*} Numbers based on TMDSAS match data as of February 1, 2005

Class of 2009 GPA Data

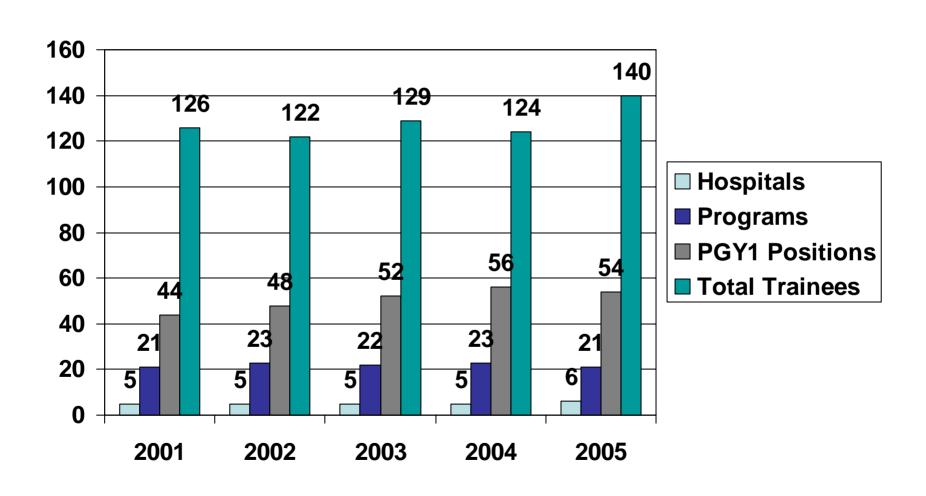
	GPA
UT Southwestern	3.81
Texas A&M University HSC	3.77
UT Medical Branch	3.74
UTHSC – Houston	3.68
UNTHSC-TCOM	3.60
Texas Tech University HSC	3.59
UTHSC – San Antonio	3.56

^{*} Numbers based on TMDSAS match data as of February 1, 2005



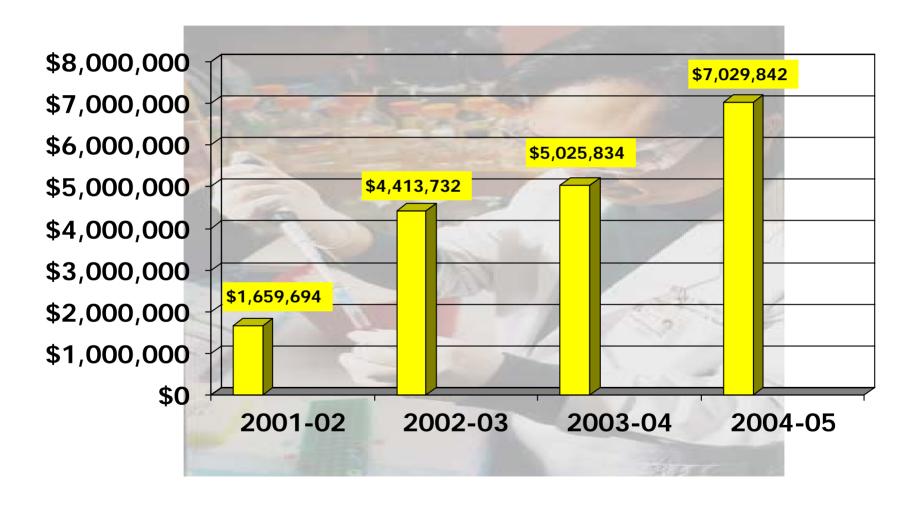
GME Program Statistics

As of September 1, 2005





Research Funding 2001-2005







For more information or to make an appointment with one of our physicians, call today.

Allergy and Immunology Services 817.735.2583

Family and Community Medicine 817.735.2440

Internal Medicine and Specialty Medicine 817.735.2660

Obstetrical Services 817.927.1609

Orthopedic Surgical Services 817.735.5450

Pediatric Services 817.735.2363

Psychiatry and Counseling Services 817,927,3651

Spinal Manipulation and Pain Management 817.735.2235

Surgical Services 817.735.5450

Women's Health Services 817,927,1609 More doctors

More clinics

More specialties

More availability and

More advanced patient care.

The new UNT Physicians Group—
Offering more of what you expect in medical care.

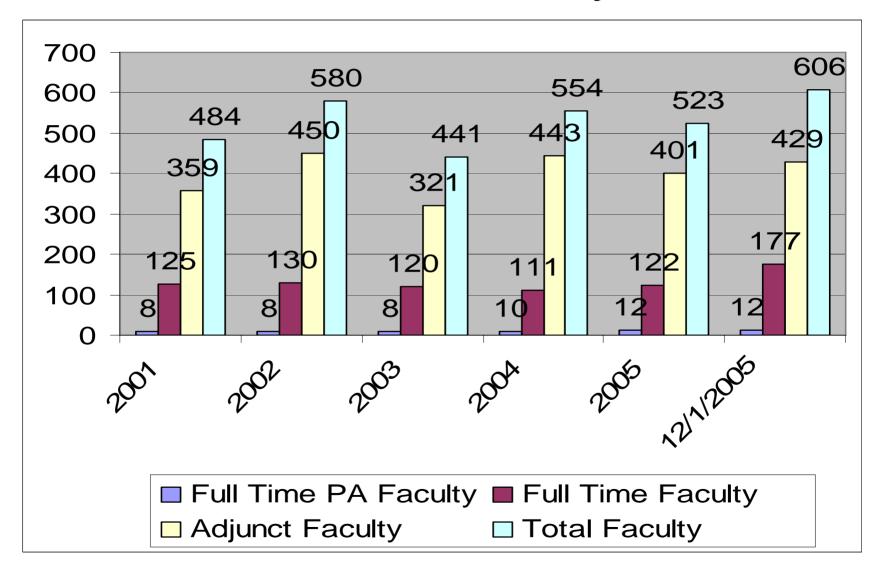
Our Story

From its beginnings with one physician in 1970 to more than 150 physicians today, the UNT Physicians Group has grown into the largest multispecialty group in Fort Worth. The past 35 years have been filled with achievements benefiting our patients and our community. Recognized by U.S. News & World Report for the past four years as a leader in primary care, the group now practices in 18 primary care clinics throughout Tarrant County. In addition to primary care, the group now has 77 specialty physicians in 25 medical areas to meet the advanced health care needs of Tarrant County. The UNT Physicians Group is part of the UNT Health Science Center, widely recognized for healthcare activities in education, research and community service.





TCOM Faculty





Top 5 Medical Schools in the US for Hispanics



- 1. Stanford University
 School of Medicine
- 2. Johns Hopkins University School of Medicine
- 3. University of New Mexico School of Medicine
- 4. Texas A&M University Health Science Center College of Medicine
- 5. University of North Texas
 Health Science Center
 Texas College of Osteopathic
 Medicine







BEST RANKINGS GRADUATE SCHOOLS

THE NATION'S TOP PROGRAMS
BUSINESS•FDUCATION•LAW

ENGINEERING & MEDICINE

Fort Worth's Medical School receives national ranking for past 4 years.





Physician Faculty Recognized





Mission and Vision of TCOM

Mission Statement of the Texas College of Osteopathic Medicine

• Educating the Physician and Physician Assistant of Tomorrow

Through the Quest For

Knowledge Today.



Properties of a Vision

- Appropriate for the organization and for the times.
- Set standards of <u>excellence</u> and reflects high ideals.
- Clarifies direction.
- Inspires enthusiasm and encourage commitment.
- Well articulated and easily <u>understood</u>.
- Ambitious.



Vision Statement of the TCOM

- Texas College of Osteopathic Medicine to be a leading supporter of the multifaceted vision of the UNT/HSC by being:
 - A medical school that offers a <u>state-of-the-art</u> <u>curriculum</u>, dynamic clinical rotations and unique GME.
 - A major contributor in clearly defined, and <u>well</u> focused medical research.
 - A <u>clinical program</u> that serves our community through collaborative and entrepreneurial efforts.
 - An organization that <u>offers leadership</u> to our profession and community.



Values That will Drive the Mission and Vision

- Always put <u>people</u> first!
- Rely upon, and support <u>collaboration</u>.
- Embrace responsible <u>change</u>.
- Make all decisions based upon guiding principles.
 - Listen.
 - themes that resonate, and to opinion leaders.
 - Encourage open communication.
 - Invite <u>participation</u>.
 - Build **trust** in all relationships.
 - Support **team building**.

Vision for TCOM

"To be a recognized academic leader in primary care and rural medicine for the state of Texas and the nature."

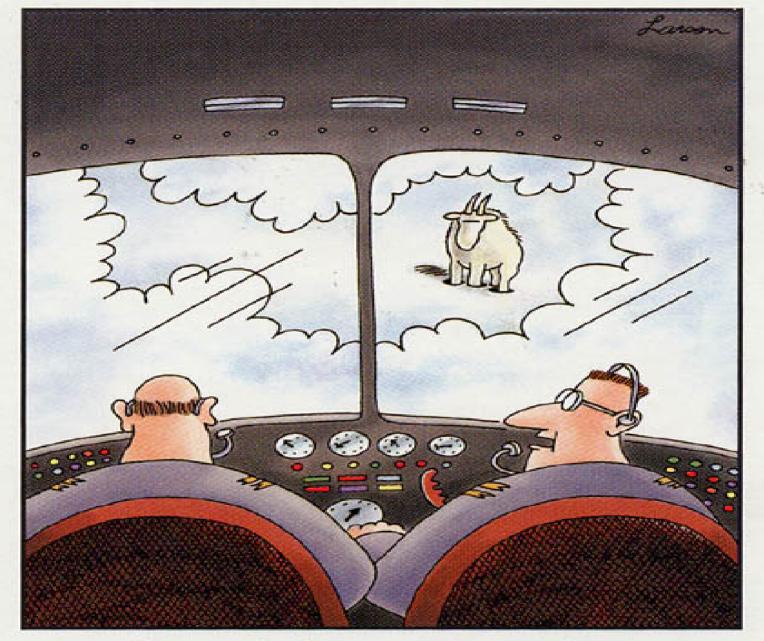
- •To achieve this visio will me:
 - •An international leader in medical education and curricular and
 - •National renowned to cused research and unit up rograms
 - •The dominant Medical practice in Tarrant County.
 - •An institution with high faculty and staff career satisfaction.



Strategic Committees

- Committee on Cultural Integration
 - Important for lasting growth and success.
 - Faculty Communication
- Committee on Educational Programs and Hospital Relations
- Committee on Clinical Research
- Committee on Resource Allocation
- Committee on Physician Practice
- Committee on Medical Education





"Say ... what's a mountain goat doing way up here in a cloud bank?"



Who is on the bus?



CHANGE!



- Institutions must have leadership that is capable
 of not only envisioning the future, but articulating it
 in such a way that members of the health team
 can recognize that change is necessary.
- A strategic plan is the next necessary tool.
- Consensus is necessary in many issues, but in a strategic plan, consensus must not be the modality.
 - Those who are threatened by change may have the loudest, most articulate voices.
 - If they are able to halt the drive for change, the world will pass that institution by.
- Robert Kay, M.D., Chief of Staff, Cleveland Clinic Foundation, in <u>Group Practice Journal</u>, June 2000



UNT Health Science Center Texas College of Osteopathic Medicine

- Career satisfaction.
- <u>Dominant medical practice</u> in Tarrant County.
- Nationally renowned for <u>focused</u> research and unique programs.
- International leader in medical education and curricular design.



The Nature of Change

- Inevitable
- Constant
- Adaptive

But...

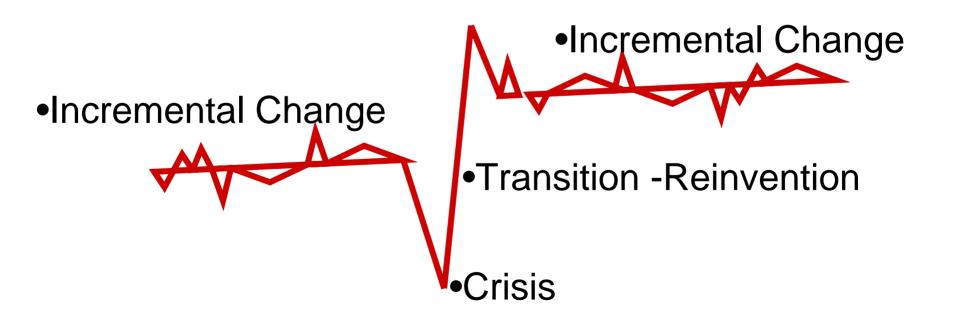
- Avoided
- Motivated by crisis





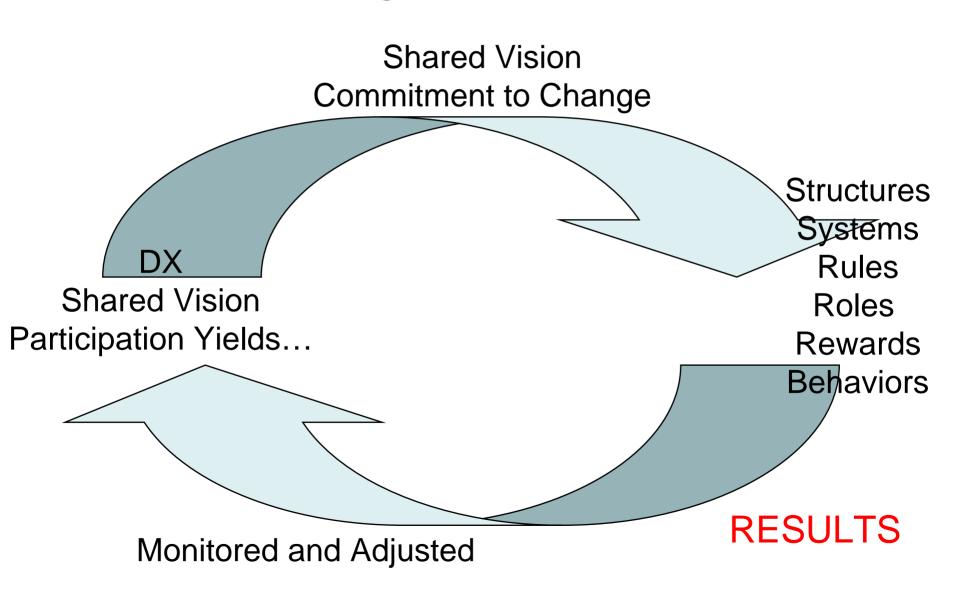
Patterns of Change

-or why you spend so much time in meetings and nothing happens





The Change Process - Ideal





Reactions to Change

- Change threatens!
- No one likes the unknown!
- As leaders, we must not only deal with change, but also our faculty, students and staff's reactions to it.
- Humans need time to adapt.



Kotter's Eight Steps

- 1. Sense of Urgency
- 2. Guiding Coalition
- 3. Create a vision
- 4. Communication

- 5. Empower
- 6. Short term wins
- 7. Do not declare victory too soon
- 8. Anchor change in culture

John P. Kotter
Konosuke Matsushita Professor of Leadership
Harvard Business School



1. Establish a Sense of Urgency

- Face Realities
 - Understand our Strategic and Competitive Environments, in all missions!
 - Acute Crisis, potential crisis, or opportunity.
 - People need to "get on the bus"
- "Lock and Load"





2. Form a Powerful Guiding Coalition

- Enough Power to Lead Change.
- Work As a Team.
 - Beware individual agendas!
- Strong Leadership at the Top
 - More than the Dean, Associate Dean, or Chair...
 - Without leadership, opposition will eventually stop change.





3. Create a Vision

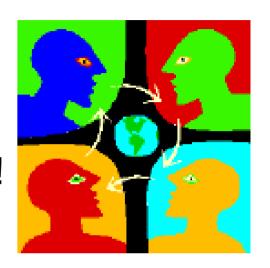
- Requires work!
- Need clear Mission or purpose-ideology
 - Reason for being
 - The organization's center
 - Supported by core values
- Realistic possibilities for the future.
- Communicate the vision in two minutes or less and get a reaction that signifies both understanding and interest.

The usual vision statement is fuzzy and inspires only boredom



4. Communicating the Vision

- This time change is for real!
 - "Change survivors"
 - Repeat, repeat, repeat
- Communication is more than talking!
 - Listen
 - Takes more time
 - longer if you don't like the message
 - Without information rumors run rampant!
- Leadership matters!
 - Walk the talk
 - Teach by example
 - Nothing undermines change more than inconsistent behavior of leaders!





5. Empowering Others to Act

- Giving people permission to do something is not helpful if they are unable to do it!
- Empowerment does not mean abandonment.
- Permission just sets them up to fail.
- Assure adequate resources and training for success.
 - Remove obstacles
 - Encourage risk-taking, new ideas, innovative activities and actions.



6. Create Short Term Wins

- People need to see progress
 - Lose momentum if nothing to celebrate!
 - Without wins people will give up or join ranks of the resisters!
- Short term wins should be planned
 - Recognize, celebrated.



7. Do Not Declare Victory Too Soon

- A premature victory celebration kills momentum.
- Consolidate improvements.
- Produce more change.
 - Reinvigorate the process with new projects





8. Anchor Change Into Organizations Culture

- Eventually new culture must replace the old
 - Change sticks when it becomes "the way we do things"!
 - Otherwise we will lapse when pressure is removed.
- Natural Selection
 - We must constantly demonstrate that new behaviors improve mission specific performance.
 - Make sure next generation carries on!
 - hiring, firing, promotion requirements.



Real World Change

- Never goes as planned unanticipated cost.
- Takes great effort for the integration of people.
- People dealing with:
 - No one engages in behavior that serves your values unless you give them adequate reason!
 - Loss of identity, routines and relationships,
 - Lack of information,
 - Survival.
- Faculty and staff require:
 - information
 - Symbols of the "Future",
 - Speed,
 - Fair treatment for departing colleagues.





Why do M&As fail?

- Presence of personal or political goals.
- Unrealistic to expect the disenfranchised to "share goals for future".
- Cultures are resistant to change easier to destroy.
- Success requires trust, time, openness, and willingness to take risks.
- Hostile takeover creates suspicion, low trust, risk aversion, distorted communication.
- Symbiosis required for shared values to evolve.
 - Synergy (1+1=3!)



The Learning Organization

- Rare.
- Goal oriented.
- Comfortable with constant change.
- Always looking to exploit new opportunities.
- Change and evolution becomes a permanent state!

"It is not the strongest of the species that survives; nor the most intelligent; it is the one that is most adaptable to change."



Charles Darwin

Vision for TCOM



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