## UNT HEALTH Science center



## Leadership: The Key to Excellence in Higher Education

Thomas Fairchild, PhD Douglas A. Mains, DrPH Jennifer Treviño, MBA

## Who We Are

- Academic:
  - Texas College of Osteopathic Medicine (TCOM)
  - Graduate School of Biomedical Sciences
  - School of Public Health
  - School of Health Professions
    - PA Studies
    - Physical Therapy
  - 1579 Students
  - 411 Fulltime Faculty
- \$42 million in <u>research</u> dollars awarded in 2010
- UNTHealth patient services had 588,574 patient encounters in 2010
- Campus square footage has doubled in the last 10 years



## Learning Outcomes

Participants will understand:

- Why the Leadership Development Institute (LDI) was developed and implemented
- How the LDI evolved based on a changing culture
- LDI successes and opportunities for improvement



## It is easier to ride a horse in the direction it is going. Confucius



## **Transformational Leadership**

Dr. Scott Ransom, DO, MBA, MPH – July 2006

UNTHSC was faced with the following challenges:

- Declining enrollment trends in School of Public Health
- Declining reimbursement for healthcare
- Declining federal funding for research
- Increasing competitive pressures in healthcare and education
- Increasing demands for accountability and transparency



## **Transformational Leadership**

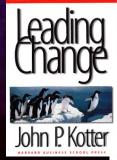
- Five year strategy map approved by BOR September 2006
- Upcoming legislative session January 2007
- Bottom line business as usual would <u>NOT</u> work
  - Sense of urgency
  - Need for change



- Mission
- Adaptability (e.g. customer focus)
- Consistency (e.g. coordination and integration)
- Involvement (e.g., team orientation)



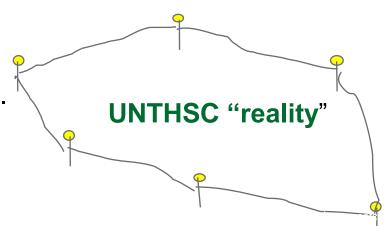
Strategy
Values
Vision
Consistency
Creating change
Organizational learning



**Organizational ICEBERG** 

## Culture is Slow to Change

- Culture is <u>slow to change</u> because it serves a basic <u>survival</u> function:
- Each assumption serves as a fence post a stake in the ground for one part of our "reality."
- The pattern of assumptions, our collection of fence posts, is our view of reality... "how things work around here."
- Without assumptions, we would literally "lose our minds."
- Hence....we cling firmly to our assumptions.

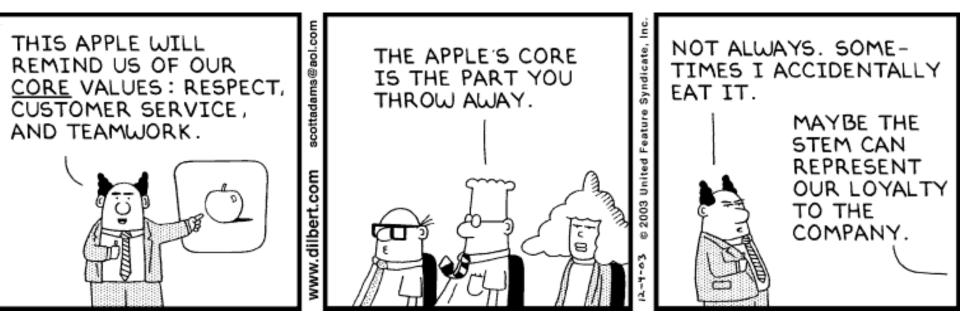




## Leadership Challenge

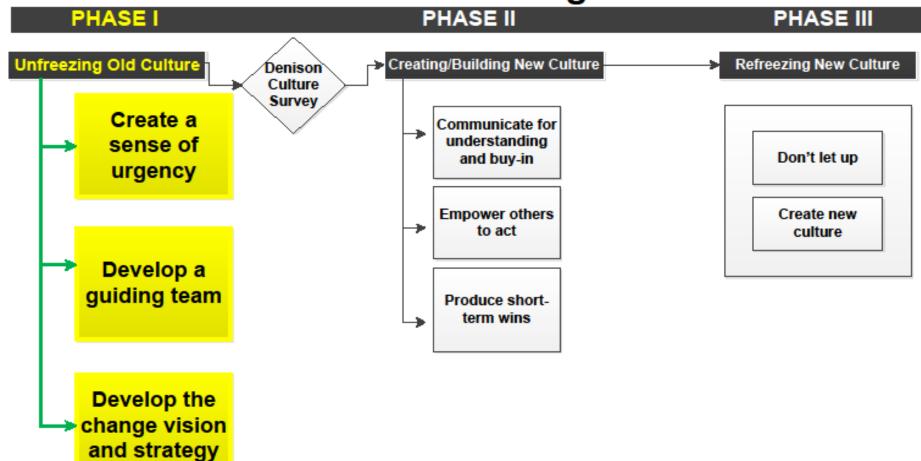
- Some Executive Team members, chairs and department heads and most faculty and staff <u>DID</u> <u>NOT</u> embrace the sense of urgency and need for change.
- Some key leaders <u>DID NOT</u> have the skills and knowledge to assist in the effective implementation of our mission and strategic plan.







### **Culture Change**





## Create a Sense of Urgency

Leaders get the right people on the bus (and the wrong people off the bus) and set the direction.

**Jim Collins** 



## Develop a Guiding Team

- Executive Team
  - Deans
  - Vice Presidents
  - Department Heads



# In God we trust; all others must bring data.

### W. Edwards Deming



## Develop the Vision and Strategy

#### UNT HEALTH SCIENCE CENTER FIVE YEAR STRATEGIC PLAN FOR UNTHSC: FY 2011 - 2015

	Mission		sion		Values					
beyond through excellence	uality of life for the people of Texa in education, research, clinical ca t and to provide national leadersh	re, To become a top 10	health science center		Excellence Innovation Pride Teamwork					
Academic Affairs		Research		<u>Clinical Affairs</u>						
Enhance quality, grow and diversify academic programs		Recruit, develop and retain high performing faculty		Continuously improve quality of care, access, service excellence, and patient satisfaction leading to a patient-centered competitive clinical						
Optimize academic support and academic technology		Enhance facilities and infrastructure		practice						
Recruit, develop and retain	Recruit, develop and retain high performing faculty		Invest in translational research capacity		Ensure UNTHealth is well positioned to optimize market and partnership opportunities, to maximize utilization of resources, and t					
Improve student learning outcomes		Enhance and develop partnerships		ensure financial viability						
				Pursue an interdisciplinary and integra delivery that positions UNTHealth to t the Affordable Care Act	••					
Interdisciplinary Academic, Research			d Clinical Centers of Excellence							
	Primary Care and Preve	ntion Aging/Alzheimer's	Investigati	ive Genetics						
<u>Administration</u> Strategically support and enhance our culture of excellence, performance improvement and accountability Ensure facilities support our mission and promote community image			<u>Community Engagement</u> Continue to grow and build UNTHSC's reputation as a world-class institution Rapidly expand and strengthen strategic alliances and partnerships internally and externally Diversify and strengthen philanthropic and other revenue channels							
								Optimize financial resources		
								Optimize institutional information resources and infrastructure		
Promote diversity among faculty and staff										
Enhance the institution's human capital management										

## **Develop the Vision and Strategy**

#### **WINT HEALTH SCIENCE CENTER**

Mission		ised on UNTHSC 2011-2015 Strateg		Values
To improve the health and quality Texas and beyond through exc research, clinical care, and comm provide national leadershi	ellence in education, To bee unity engagement and to	come a top 10 health science center		Excellence Innovation Pride Teamwork
Goals What do we expect to achieve? Administration Optimally support and facilitate the creation of a top 10 health creation of a top 10 health conter devoted to developing knowledge and creating professionals to maximize health and quality of life Institutional Performance Measures 1. Administration costs as a percentage of total expenditures 2. Institutional reserves 3. Denison Survey - Team orientation rating 4. UNT System Costs	Goals         What do we expect to achieve? Academic Affairs         Create knowledge, scientists and heatthcare professionals devoted to meeting the critical health needs of the state of Texas and the nation         Institutional Performance Measures         1. Number of enrolled students         • Headcount         • FTEs         2. Student Satisfaction         • Quality of education         • Quality of teaching         3. Percent of Student Diversity         4. Percent of target courses which have implemented QEP	Goals         What do we expect to achieve? Research         Research         To become the leading health         science center devoted to collaborative and translational research focused on critical health needs of Texas and the nation         Institutional Performance Measures         1       Dollar value of grants awarded         2       Dollar value of grants awarded         3       Average extramural funding per faculty member         4       Total number of unduplicated, peer-reviewed publications published / in press	Goals           What do we expect to achieve? Clinical Affairs           To become the preeminent multispecially medical practice in Tarrant County and the health care partner of choice in our communitie           Institutional Performance Measures           1         Overall visit score           2         Time to next third new appointment           3         UNTHealth Administrative Costs           4         Total Patient Encounters           5         Total Patient Encounters           6         UNTHealth cash reserves           7         Percent adherence to CMS PQRI Diabetes and Preventative Medicine measures groups	Community Engagement To create and maintain a partnership based environment in the internal, external and professional communities Institutional Performance Measures I. Alumni donors (number, percer of population) 2. Employee donors (number, percent of population) 3. Total amount of gifts 4. Pledges for new program and Fund for Excellence
Tactical Initiatives – Processes to accomplish long-term goals 1. Continue to optimize academic support units to provide quality services efficiently and effectively across the organization 2. Enhance strategic use of financial reporting to ensure alignment of budget with strategic goals 3. Align use of educational and research facilities with institutional strategy 4. Enhance exterior aesthetics through existing and new green spaces 5. Optimize effective UNT System support 6. Optimize sources of funding 7. Implement diversity awareness training across the institution 8. Improve staff recruitment, retention, and performance through faculty/staff development, evaluation, and compensation 9. Enhance technology to support	<ol> <li>Tactical Initiatives – Processes to accomplish long-term goals</li> <li>Expand/diversify enrollment and increase services/academic support and recruit faculty for the increased student numbers</li> <li>Increase offerings of educational programs to meet the needs of a diverse student population</li> <li>Develop a new LCME-accredited, medical school and consider branch campus osteopathic medicine program in Texas</li> <li>Train faculty in teaching approaches needed to increase student higher order thinking skills in targeted QEP courses</li> <li>Incorporate QEP higher order thinking skills approaches in five courses across the various programs in the HSC</li> <li>Fully implement comprehensive faculty compensation plan</li> <li>Expand academic assessment program to include institutes and centers</li> <li>Work collaboratively with UNT System to optimize academic</li> </ol>	<ol> <li>Tactical Initiatives – Processes to accomplish long-term goals</li> <li>Targeted faculty recruitment of high potential investigators</li> <li>Research development efforts through mentorship and formal training experiences such as workshops and seminars for faculty and staff</li> <li>Assess and optimize core laboratory capabilities and prioritize additional needs</li> <li>Further develop the Health Institutes of Texas</li> <li>Establish Phase 1 clinical trials capabilities</li> <li>Strengthen clinical and community based research capacity through workshops and training forums</li> <li>Assess/join regional consortia focused on collaborative research</li> </ol>	<ol> <li>Tactical Initiatives – Processes to accomplish long-term goals</li> <li>Participate in the CMS Physician Quality Reporting Initiative (PQRI</li> <li>Enhance patient access &amp; expand care delivery models</li> <li>Targeted recruitment of clinically productive providers</li> <li>Develop new clinical sites, at the Golden Triangle/Alliance Corridor and the Ben Hogan Center</li> <li>Position UNTHealth as a key member of a local accountable care organization</li> <li>Pursue full integration of the electronic medical record and enterprise practice management system</li> </ol>	<ul> <li>externally</li> <li>Prioritize marketing support to UNT Health, research, fundraising</li> <li>Proactively promote primary ca</li> </ul>

## Develop the Vision and Strategy

UNT HEALTH SC Vision: To become a top 10 health science center UNTHSC Performance	er			010					
Highlighted values are prorated for each quarter, where appropriate.	Actual > Target			Actual ≥ 80% of Target		Actual < 80% of Target		Max Store	And the second s
	First Qu Actual	arter % of Target	Second C Actual	Quarter % of Target	Third Que Actual	wrter % of Target	Fourth C Actual	warter % of Target	Target
Academic Affairs	Actual	76 OF Target	Actual	76 OF Target	Actual	/s of farget	Actual	76 OF Target	
Number of enrolled students - headcount 1	1,395	86%	1,343	83%	1,315	81%	1,579	98%	1,61
TCOM	685	89%	666	87%	666	87%	728	95%	76
SHP	134	72%	131	70%	99	53%	199	107%	18
GSBS	284	80%	260	73%	380	107%	353	99%	35
SPH	292	97%	286	95%	170	57%	299	99%	30
Number of enrolled students - FTE 1	LOL	3176	200	3576		5176	200	3376	
based on four semesters)	727	30%	1,399	58%	1,588	66%	2,445	101%	2,41
TCOM SHP	343	32% 28% 27%	676 230	63% 52%	676	63%	1,040 438	98% 100%	1,06
GSBS	161	27%	294	49%	256 418	58% 69%	620	103%	60
SPH	103	33%	200	64%	239	77%	347	112%	31
Student satisfaction - Quality of Education 2 TCOM	-				75.8%	89%	-		85
SHP					70.0%	109%			85
GSBS					71.5% 79.3%	84%	_		85
SPH student satisfaction - Quality of Teaching 3					79.3%	93% 87%			85
TCOM					71.4%	84%			85
SHP					89.9%	106%			85
GSBS SPH					60.3% 79.7%	94%	-		85
tudent Diversity - African American headcount enrollment	117	96%	108	89%	97	80%	132	108%	12
tudent Diversity - Hispanic headcount enrollment	137	92%	129	87%	72	48%	143	96%	14
EP implementation 5	107	02/6	120	07.%	12	4078	100%	100%	100
esearch							100 /6]	100%	100
otal extramural research award funding 6	\$ 11,288,771	31%	\$ 19,128,658	EDW	\$ 32,981,797	0.08	\$ 41,693,528	4400	\$ 37,000,00
TCOM	\$ 2,716,544	40%	\$ 3,582,124	52% 53%	\$ 3,886,988	89% 58%	\$ 5.682.673	113% 84%	\$ 6,750,00
SHP	S -	0%	\$ 20,000 \$ 14,445,350	40% 55%	\$ 20,000 \$ 23,976,042	40%	\$ 20,000	40%	\$ 50,00
GSBS SPH	\$ 8,223,165 \$ 201.082	31% 7%	\$ 14,445,350 \$ 367,899	55% 12%	\$ 23,976,042 \$ 822,428	92% 27%	\$ 29,740,654 \$ 1,298,258	114% 43%	\$ 26,200,00 \$ 3,000,00
iollar value of grant applications submitted. 6	\$ 53,778,904	26%	\$ 106,060,344	52%	\$ 149,593,850	73%	\$ 224,931,147	110%	\$ 205,000,00
TCOM	\$ 3,166,524	9%	\$ 11,482,053	34%	\$ 19,696,120	58%	\$ 32,633,464 \$ 2,065,799	96% 689%	\$ 34,000,00
SHP GSBS	\$ 40,135,483	21%	\$ 115,120 \$ 79,022,395	38% 54%	\$ 803,733 \$ 102,391,718	268% 70%	\$ 2,065,799 \$ 160,350,610	689% 110%	\$ 300,00 \$ 145,700,00
SPH	\$ 7,810,695	31%	\$ 12,834,694	51%	\$ 20,219,827	81%	\$ 22,796,041	91%	\$ 25,000,00
otal number of unduplicated peer-reviewed publications -									
Published/In Press 7 TCOM							285	114% 112%	2
SHP							7	140%	
GSBS SPH							163 65	112% 130%	1
Sinical Care							05	130%	
Iverall Visit Score of "Excellent" - Percent of Patients	I		63%	84%			68%	91%	75
verall Visit Score of "Excellent" - Percent of Patients			0.5 %	0476			00 /6	5176	1.
ercent of Patients Combined Total			90%	99%			92%	101%	91
me to next third new primary care appointment -									
ercent of specialties < 14 days 9	100%	105%	100%	105%	100%	105%	100%	105%	95
ime to next third new specialty care appointment -									
ercent of specialties < 21 days 9	100%	105%	100%	105%	100%	105%	67%	71%	95
NT Health Administrative Costs (% of Consolidated Expenses)									
	8.1%	119%	8.9%	111%	8.8%	112%	9.1%	109%	10
ercentage of Support Staff Trained 11	100%	102%	100%	102%	100%	102%	100%	102%	98
otal Net Clinical Revenues 12	\$ 15,447,416	25%	\$ 28,299,011	45%	\$ 44,564,096	71%	\$ 60,601,849	96%	\$ 63,000,00
otal Operational Revenues <sup>13</sup>	\$ 20,078,646	27%	\$ 37,318,320	50%	\$ 58,998,192	79%	\$ 80,607,317	107%	\$ 75,000,00
NT Health Reserves (days)	83.9	114%	65.3	89%	79.1	108%	89.9	122%	73
ercent of eligible patients placed on clinical pathways 14	64%	91%	67%	96%	63%	91%	75%	107%	70
ommunity Engagement									
lumni Donors (number percentage of population)	192 5%	24%	206 6%	26%	769 20%	96%	845 22%	106%	800 21
mployee Donors (number percentage of population) 15	977 69.4%	93%	1,011 72.2%	96%	1052 75%	100%	1052 75%	100%	1052 75
otal amount of gifts 16	\$ 3,136,254	39%	\$ 3,328,094	42%	\$ 4,355,968	54%	\$ 5,128,884	64%	\$ 8,000,00
ledges for new program <sup>17</sup>			\$ 2,512,000	13%	\$ 20,183,136	101%	\$ 25,229,436	126%	\$ 20,000,00
Iministration									
dministration cost as a percentage of total expenditures 18	7.27%	121%	8.91%	104%	10.04%	91%	7.72%	117%	9.2
stitutional Reserves (days)	88.6	106%	110.4	131%	108.8	130%	106.3	127%	
aculty and Staff Pride Survey - Culture of Quality 19					370	95%			3
aculty and Staff Pride Survey - Job Satisfaction 19					362	98%			3
aculty and Staff Pride Survey - Empowerment <sup>19</sup>					352	97%			3
									last edited 10/28/



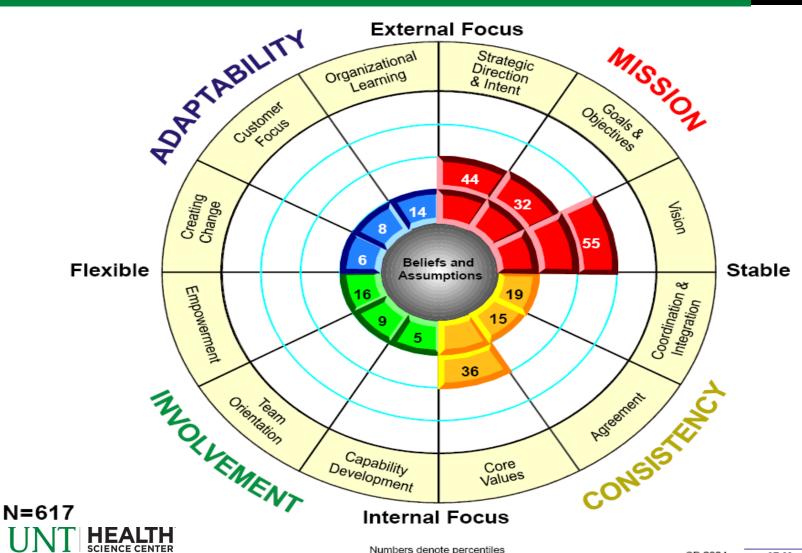
## Denison Organizational Culture Survey: What It Is



- 60-item survey that measures specific aspects of an organization's culture
- Culture is assessed through twelve management practices/indices grouped into four traits:
  - Mission
  - Adaptability
  - Involvement
  - Consistency



## **UNTHSC Denison Results 2007**



denison"

# Understanding the Five Dysfunctions of Your Team

The following questionnaire is a straightforward diagnostic tool for helping you evaluate your team's susceptibility to issues that contribute to a high functioning team.

### **Instructions**

Use the scale below to indicate how each statement applies to your team. It is important to evaluate the statements honestly and without over-thinking your answers.



# Understanding the Five Dysfunctions of Your Team

3 – Usually

2 – Sometimes

1 – Rarely

- 1. Team members are passionate and unguarded in their discussion of issues.
- \_\_\_\_\_2. Team members call out one another's deficiencies or unproductive behaviors.
- \_\_\_\_3. Team members know what their peers are working on and how they contribute to the collective good of the team.
- \_\_\_\_4. Team members quickly and genuinely apologize to one another when they say or do something inappropriate or possibly damaging to the team.
- 5. Team members willingly make sacrifices (such as budget, turf, head count) in their departments or areas of expertise for the good of the team.
- \_\_\_\_6. Team members openly admit their weaknesses and mistakes.
- \_\_\_\_7. Team meetings are compelling, and not boring.

The FIVE DYSFUNCTIONS of a TEAM A LEADERSHIP FARLE

PATRICK LENCION



Patrick Lencioni, <u>The Five Dysfunctions of a Team</u>, c. 2002

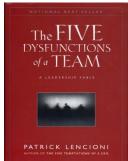
# Understanding the Five Dysfunctions of Your Team

3 – Usually

2 – Sometimes

1 – Rarely

- 8. Team members leave meetings confident that their peers are completely committed to the decisions that were agreed on, even if there was initial disagreement.
- 9. Morale is significantly affected by the failure to achieve team goals.
- \_\_\_\_10. During team meetings, the most important and difficult issues are put on the table to be resolved.
- 11. Team members are deeply concerned about the prospect of letting down their peers.
- \_\_\_\_12. Team members know about one another's personal lives and are comfortable discussing them.
- 13. Team members end discussions with clear and specific resolutions and calls to action.
- 14. Team members challenge one another about their plans and approaches.
- 15. Team members are slow to seek credit for their own contributions, but quick to point out those of others.





Patrick Lencioni, The Five Dysfunctions of a Team, c. 2002

#### Leadership: The Key to Excellence in Higher Education SACS Annual Meeting – December 4-7, 2010 Dr. Thomas Fairchild Team Assessment - Scoring

#### Scoring

Combine your scores for the preceding statements as indicated below.

Dysfunction 1: Absence of Trust	Dysfunction 2: Fear of Conflict	Dysfunction 3: Lack of Commitment	Dysfunction 4: Avoidance of Accountability	Dysfunction 5: Inattention to Results
Statement 4:	Statement 1:	Statement 3:	Statement 2:	Statement 5:
Statement 6:	Statement 7:	Statement 8:	Statement 11:	Statement 9:
Statement 12:	Statement 10:	Statement 13:	Statement 14:	Statement 15:
Total:	Total:	Total:	Total:	Total:

A score of 8 or 9 is a probable indication that the dysfunction is not a problem for your team.

A score of 6 or 7 indicated that the dysfunction could be a problem.

a score of 3 to 5 is probably an indication that the dysfunction needs to be addressed.

Regardless of your scores, it is important to keep in mind that every team needs constatn work, because without it, even the best ones deviate toward dysfunction.



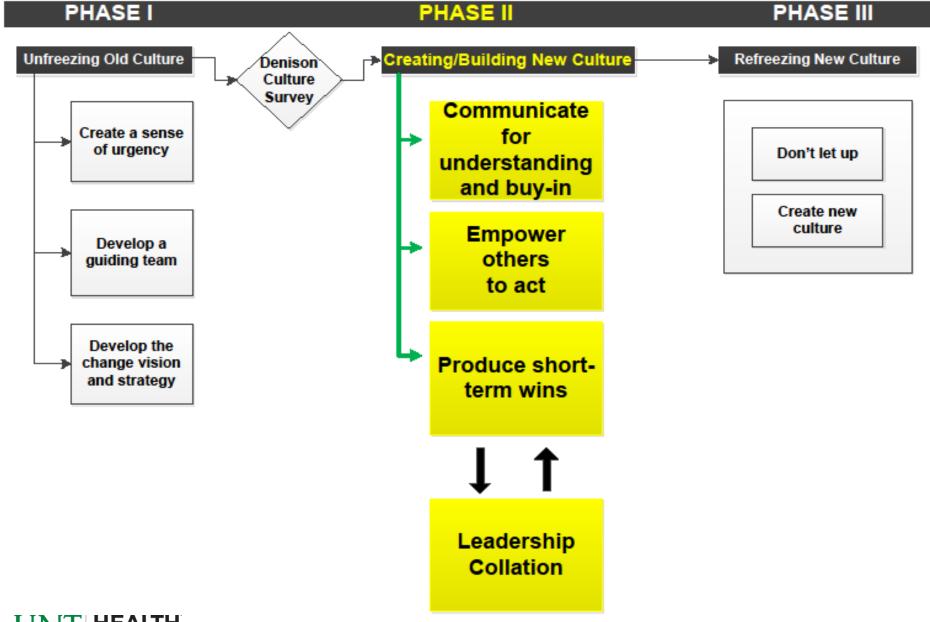
Patrick Lencioni, The Five Dysfunctions of a Team, c. 2002

# Culture Change and Leadership Development





### **Culture Change and Leadership Development**



## **Expanding Leadership Collation**

- Leadership Team Summer 2007
- Strategic Thinking Councils Summer 2007



"It is difficult to get people to think their way into a new way of acting. Instead, people must act their way into a new way of thinking."

John Kenagy, MD

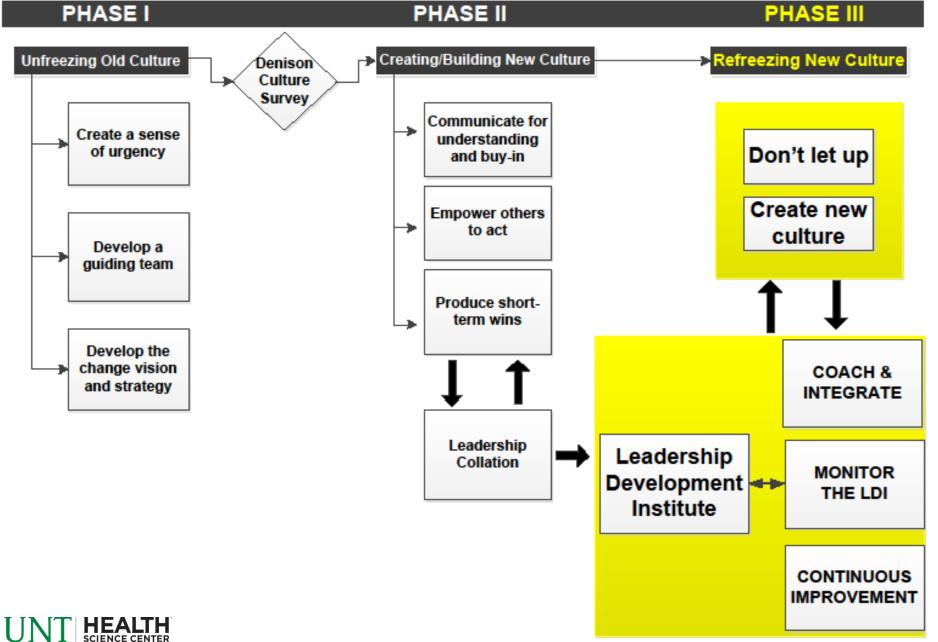


## **Refreezing New Culture**

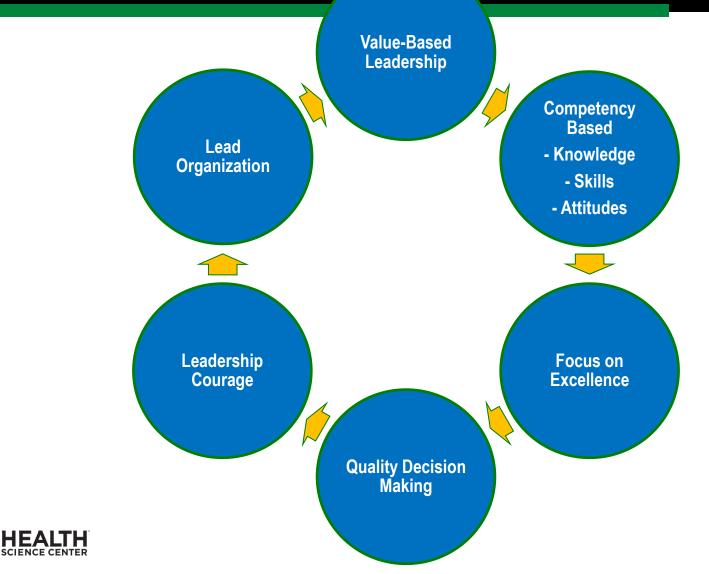
Leadership Team Programs FY 2007

- Role of Strategic Thinking Councils
- Faculty and staff evaluations
- Budget resource allocation model
- Change management
  - Change Style Indicator Tool
  - Organizational alignment and strategy maps
  - Denison Culture Survey Results
- Leadership
- Empowering financing
- Strategy implementation

### **Culture Change and Leadership Development**



## Refreezing New Culture -Leadership Development Model



## Refreezing New Culture -Leadership Development Institute

### FY 2008

- Communication
- Leadership Team Building
- State Budgeting Process
- Government Affairs
- Building Productive Relationships
- The Power of Persuasion

FY 2009

- Quality Improvement
- Performance Improvement
- Team Building MBTI/FIRO-B



## Refreezing New Culture -Leadership Development Institute

### FY 2010

- Crucial Conversations
- Performance Management
- Strategic Planning Workshops

FY 2011

- Chair Development
  - Transition to Academic Management
  - Legal Issues
  - Working Effectively with Conflict
  - Budgeting and Planning
  - Recruitment, Retaining, and Development



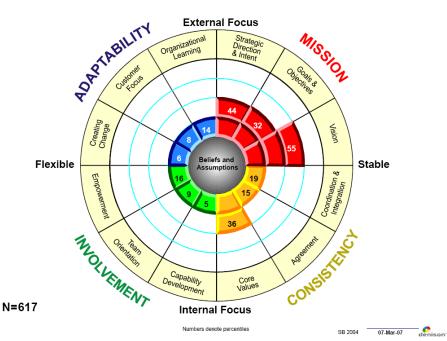
## **Refreezing New Culture**



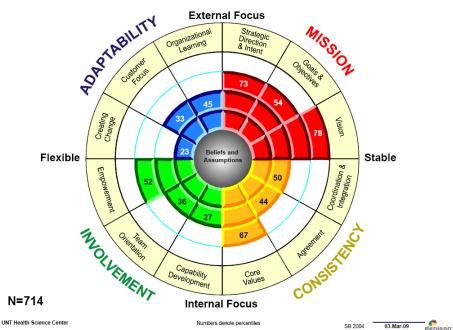


## **UNTHSC Denison Results**

#### 2007







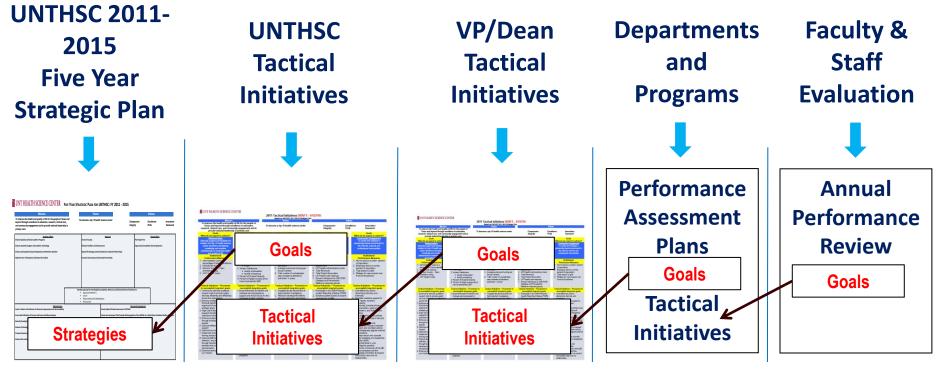


## Characteristics of New Culture

- Clearly defined mission, vision, values, and goals
- Increased degree of:
  - Accountability
  - Customer focus
  - Communication
  - Empowerment
  - Organizational learning
  - Teamwork
  - Transparency



## Characteristics of New Culture -Alignment and Accountability



Value added:

- Linkage of goals to tactical initiatives increases opportunity to impact behaviors that maximize resources and execute strategies
- Increases accountability by providing line of sight from faculty/staff to departments and programs

- Organizational Development Human Resources
  - Executive Team
    - 360 degree evaluations for Executive Team
  - Leadership Development Institute
  - Management Development Program
  - Supervisor Development Program
- New employee orientation & faculty orientation
  - Two days
  - Meeting with President Ransom



#### Leadership Development Bridges Culture & Educational Excellence

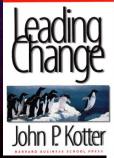
Adaptability <ul> <li>Creating Change</li> </ul>		Achievements & Results	
<ul><li>Customer Focus</li><li>Organizational Learning</li></ul>		Assessment – Closing the Loop	
<ul><li>Involvement</li><li>Empowerment</li><li>Team Orientation</li></ul>	Leadership	Faculty, Staff & Workplace	
Capability Development     Consistency	Development	Programs & Services	_
<ul><li>Core Values</li><li>Agreement</li><li>Coordination &amp; Integration</li></ul>	Institute	Student & Stakeholder	
sion Vision		Strategic Planning	
Goals & Objectives Strategic Direction & Intent		Leadership	
Denison Traits NT HEALTH SCIENCE CENTER		Educational Excellence	



- Adaptability (e.g. customer focus)
- Consistency (e.g. coordination and integration)

Involvement (e.g., team orientation)

Strategic direction
Values
Vision
Consistency
Creating change
Organizational learning



#### **Organizational ICEBERG**



#### **Strategic Thinking Councils**

- Academic
- Research
- Clinical
- Community Engagement
- Administration



- Annual faculty and staff performance evaluation with personal goals
- Faculty/Staff Survey
- Student Survey
- Denison Organizational Culture Survey
  - Follow-up with faculty and staff
- Center for Learning & Development
  - Support for faculty development



- Expansion of Dept. of Marketing and Communications
  - Daily News
  - Progress Report
  - Communications Team
  - Facebook



- President luncheons with opinion leaders
- Service Directors
- President Town Halls
- Quarterly faculty, staff, and student town halls
- Board of Visitors



#### None of us are as smart as all of us. Japanese Proverb



# Successes and Opportunities for Improvement (OFIs)

#### Successes

- Contributed to creation and freezing of new culture
- Increased knowledge and skills of faculty and staff
- Key leaders better able to drive change at their level
- Increased awareness of interdependency of all departments and units
- See how they fit into the big picture
- Sequence of development and topics is important!



# Successes and Opportunities for Improvement (OFIs)

#### OFIs

- Balancing needs of individuals vs. speed of driving change
- Maintaining momentum in challenging economic environment
- Optional vs. required development programs
- Dealing with sacred cows



#### There is NO Team in I

#### Great partnerships — share common goals.



#### Sources

- Denison Organizational Culture Survey
  - http://www.denison.org
- Leading Change
- My Iceberg is Melting
  - http://www.kotterinternational.com/
- The Five Dysfunctions of a Team
  - http://www.tablegroup.com/



#### Questions?

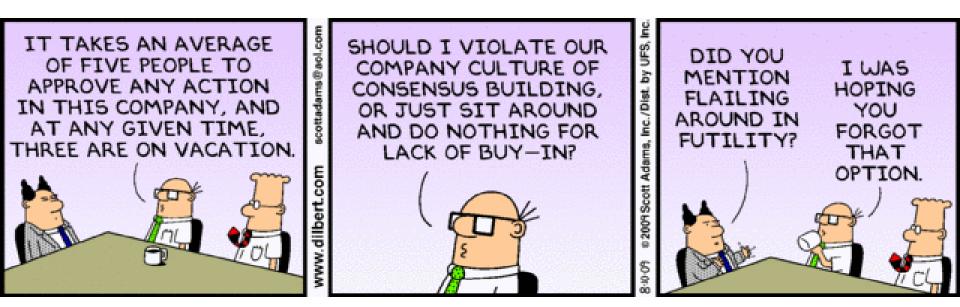
We have not succeeded in answering all of your questions...Indeed, we feel we have not answered any of them. The answers we have found only serve to raise a whole new set of questions. In some ways, we feel we are as confused as ever, But we now believe we are confused on a higher level and about more important things.



# Thank You!

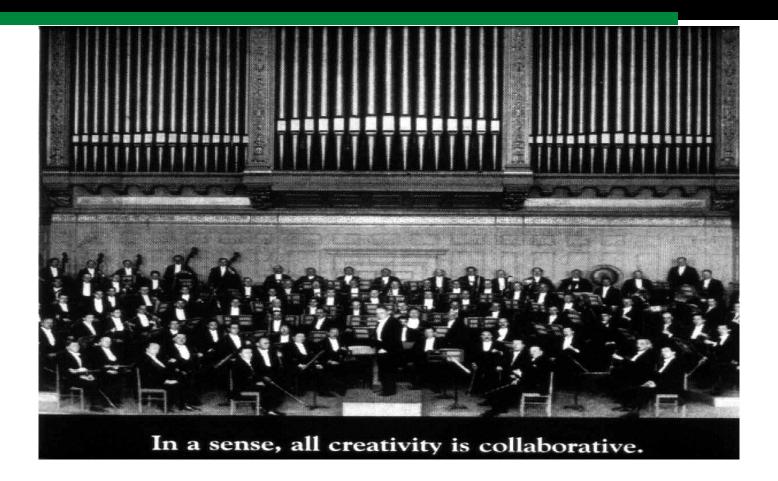
#### UNTHSC Office of Strategy & Measurement

- www.hsc.unt.edu/departments/osm
- Thomas.Fairchild@unthsc.edu





#### There is NO Team in I





#### UNT HEALTH SCIENCE CENTER FIVE YEAR STRATEGIC PLAN FOR UNTHSC: FY 2011 - 2015

	Mission		sion			Values			
beyond through excellence	uality of life for the people of Tex in education, research, clinical ca t and to provide national leadersh	re, To become a top 10	health science center		Compassion Integrity	Excellence Pride	Innovation Teamwork		
Academic Affairs		Research	Research			Clinical Affairs			
		Recruit, develop and retain high p Enhance facilities and infrastruct	Continuously improve quality of care, access, service excellence, and patient satisfaction leading to a patient-centered competitive clinical practice						
Recruit, develop and retain high performing faculty Improve student learning outcomes		Invest in translational research capacity Enhance and develop partnerships		Ensure UNTHealth is well positioned to optimize market and partnership opportunities, to maximize utilization of resources, and t ensure financial viability					
					ositions UNTHealt	ntegrated approach t h to take advantage			
Interdisciplinary Academic, Research,			and Clinical Centers of I	ers of Excellence					
	Primary Care and Preve	ntion Aging/Alzheimer's	Investigati	ive Genetics					
Administration			Community Engagement						
Strategically support and enhance our culture of excellence, performance improvement and accountability Ensure facilities support our mission and promote community image Optimize financial resources		Continue to grow and build UNTHSC's reputation as a world-class institution Rapidly expand and strengthen strategic alliances and partnerships internally and externally							
							Diversify and strength	en philanthropic	and other revenu
		Optimize institutional information resources and infrastructure							
Promote diversity among faculty and staff									
Enhance the institution's human capital management									

#### **WINT HEALTH SCIENCE CENTER**

#### 2011 Tactical Initiatives Based on UNTHSC 2011-2015 Strategic Plan

Mission Vision		Values				
To improve the health and quality of life for the people of Texas and beyond through excellence in education, research, clinical care, and community engagement and to provide national leadership in primary care		ecome a top 10 health science center		Excellence Innovation Pride Teamwork		
Goals What do we expect to achieve? Administration Optimally support and facilitate the creation of a top 10 health science center devoted to developing knowledge and creating professionals to maximize health and quality of life Institutional Performance Measures 1. Administration costs as a percentage of total expenditures 2. Institutional reserves 3. Denison Survey - Team orientation rating 4. UNT System Costs	Goals What do we expect to achieve? Academic Affairs Create knowledge, scientists and healthcare professionals devoted to meeting the critical health needs of the state of Texas and the nation Institutional Performance Measures I. Number of enrolled students I Headcount FTEs S. Student Satisfaction Quality of education Quality of teaching Reroent of Student Diversity Percent of target courses which have implemented QEP	Goals What do we expect to achieve? Research To become the leading health science center devoted to collaborative and translational research focused on critical health needs of Texas and the nation Institutional Performance Measures Dollar value of grants awarded Dollar value of proposals submitted Average extramural funding per faculty member Total number of unduplicated, peer-reviewed publications published / in press	Goals What do we expect to achieve? Clinical Affairs To become the preeminent multispecialty medical practice in Tarrant County and the health care partner of choice in our communities Institutional Performance Measures I. Overall visit score Time to next third new appointment UNTHealth Administrative Costs Total Revenues Total Revenues Total Retent Encounters UNTHealth cash reserves Tercent adherence to CMS PQRI Diabetes and Preventative	Goals What do we expect to achieve? Community Engagement To create and maintain a partnership based environment in the internal, external and professional communities Institutional Performance Measures I. Alumni donors (number, percent of population) Employee donors (number, percent of population) Total amount of gifts Piedges for new program and Fund for Excellence		
<ul> <li>Tactical Initiatives – Processes to accomplish long-term goals</li> <li>1. Continue to optimize academic support units to provide quality services efficiently and effectively across the organization</li> <li>2. Enhance strategic use of financial reporting to ensure alignment of budget with strategic goals</li> <li>3. Align use of educational and research facilities with institutional strategy</li> <li>4. Enhance exterior aesthetics through existing and new green spaces</li> <li>5. Optimize effective UNT System support</li> <li>6. Optimize sources of funding</li> <li>7. Implement diversity awareness training across the institution</li> <li>8. Improve staff recruitment, retention, and performance through faculty/staff development, evaluation, and compensation</li> <li>9. Enhance technology to support our mission</li> </ul>	<ul> <li>Tactical Initiatives – Processes to accomplish long-term goals</li> <li>Expand/diversify enrollment and increase services/academic support and recruit faculty for the increased student numbers</li> <li>Increase offerings of educational programs to meet the needs of a diverse student population</li> <li>Develop a new LCME-accredited, medical school and consider branch campus osteopathic medicine program in Texas</li> <li>Train faculty in teaching approaches needed to increase student higher order thinking skills in targeted QEP courses</li> <li>Incorporate QEP higher order thinking skills approaches in five courses across the various programs in the HSC</li> <li>Fully implement comprehensive faculty compensation plan</li> <li>Expand academic assessment program to include institutes and centers</li> <li>Work collaboratively with UNT System to optimize academic</li> </ul>	<ul> <li>Tactical Initiatives – Processes to accomplish long-term goals</li> <li>1. Targeted faculty recruitment of high potential investigators</li> <li>2. Research development efforts through mentorship and formal training experiences such as workshops and seminars for faculty and staff</li> <li>3. Assess and optimize core laboratory capabilities and prioritize additional needs</li> <li>4. Further develop the Health Institutes of Texas</li> <li>5. Establish Phase 1 clinical trials capabilities</li> <li>6. Strengthen clinical and community based research capacity through workshops and training forums</li> <li>7. Assess/join regional consortia focused on collaborative research</li> </ul>	<ul> <li>Medicine measures groups</li> <li>Tactical Initiatives – Processes to accomplish long-term goals</li> <li>Participate in the CMS Physician Quality Reporting Initiative (PQRI)</li> <li>Enhance patient access &amp; expand care delivery models</li> <li>Targeted recruitment of clinically productive providers</li> <li>Develop new clinical sites, at the Golden Triangle/Alliance Corridor and the Ben Hogan Center</li> <li>Position UNTHealth as a key member of a local accountable care organization</li> <li>Pursue full integration of the electronic medical record and enterprise practice management system</li> </ul>			

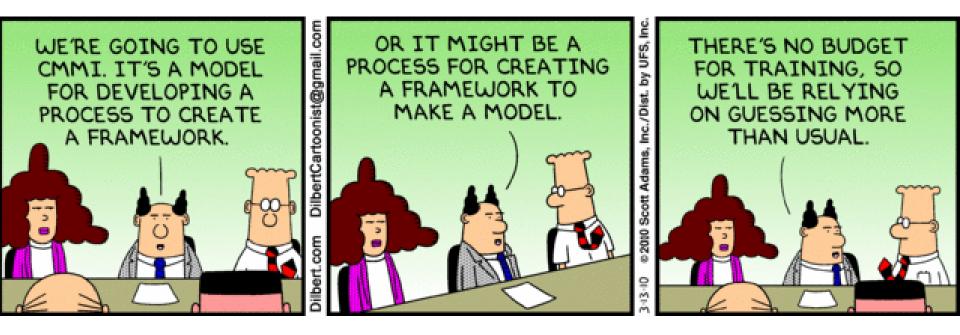
#### **Outcomes & Achievements**

UNT HEALTH SC	r								10 Tacifical Initiatives Initiation analysis Initiatives Initiation analysis Initiation analysis Initiationany analysis Initiationany analysis Initiationany analysis Init
UNTHSC Performance	e Meas	ures	- FY 20	010					Barris, Barris, Barris,
for each quarter, where appropriate.	Actual > Target First Quarter		Actual ≥ 80% of Target Second Quarter		Actual < 80% of Target Third Quarter		Fourth	-1501 au	Target
	Actual	% of Target		% of Target	Actual	% of Target	Actual	% of Target	larget
Academic Affairs									
Number of enrolled students - headcount	1,395	86%	1,343	83%	1,315	81%	1,579	98%	1,61
TCOM	685	89%	666	87%	666	87%	728	95%	76
SHP	134	72%	131	70%	99	53%	199	107%	18
GSBS	284	80%	260	73%	380	107%	353	99%	35
SPH	292	97%	286	95%	170	57%	299	99%	30
Number of enrolled students - FTE	707	0.02	4 200	500	1,588	0.00	2.445	1010	
(based on four semesters) TCOM	727 343 121	30% 32% 28%	1,399 676	58% 63%	1,566	66% 63%	2,445 1,040 438	101% 98%	2,41
SHP GSBS	121 161	28%	230 294	52% 49%	256 418	58% 69%	438 620	100% 103%	43
SPH	103	27% 33%	200	64%	239	77%	347	112%	31
Student satisfaction - Quality of Education 2					75.8%	89%			85
TCOM					70.0%	82%			85
SHP GSBS					92.5% 71.5%	109% 84%			85
SPH					71.5% 79.3%	93%			85
Student satisfaction - Quality of Teaching 3					74.2%	87%			85
TCOM SHP					71.4%	84% 106%			85
GSBS					60.3%	71%			85
SPH 4					79.7%	94%			85
student Diversity - African American headcount enrollment	117	96%	108	89%	97		132	108%	12
Student Diversity - Hispanic headcount enrollment	137	92%	129	87%	72	48%	143	96%	14
QEP implementation <sup>5</sup>							100%	100%	100
Research									
Fotal extramural research award funding	\$ 11,288,771	31%	\$ 19,128,658	52%	\$ 32,981,797	89%	\$ 41,693,528	113%	\$ 37,000,00
TCOM SHP	\$ 2,716,544	40%	\$ 3,582,124 \$ 20,000	53% 40%	\$ 3,886,988	58%	\$ 5,682,673 \$ 20,000	84%	\$ 6,750,00 \$ 50,00
GSBS	\$ 8,223,165	31%	\$ 14,445,350	55%	\$ 23,976,042	92%	\$ 29,740,654	114%	\$ 26,200,00
SPH Dollar value of grant applications submitted <sup>6</sup>	\$ 201,082 \$ 53,778,904	7% 26%	\$ 367,899 \$ 106,060,344	12% 52%	\$ 822,428 \$ 149,593,850	27% 73%	\$ 1,298,258 \$ 224,931,147	43% 110%	\$ 3,000,00 \$ 205,000,00
TCOM	\$ 53,778,904	26%	\$ 106,060,344	52% 34%	\$ 149,593,850 \$ 19,696,120	58%	\$ 32,633,464	96%	\$ 205,000,00 \$ 34,000,00
	\$ 61,998	21%	\$ 115,120	38%	\$ 803,733	268%	\$ 2,065,799	689%	\$ 300,00
GSBS SPH	\$ 40,135,483 \$ 7.810.695	28% 31%	\$ 79,022,395 \$ 12,834,694	54% 51%	\$ 102,391,718 \$ 20,219,827	70% 81%	\$ 160,350,610 \$ 22,796,041	110%	\$ 145,700,00 \$ 25,000,00
Total number of unduplicated peer-reviewed publications -	,								
Published/In Press 7							285	114%	25
TCOM SHP							56	112% 140%	
GSBS SPH							163	112%	14
							65	130%	
Clinical Care									
Overall Visit Score of "Excellent" - Percent of Patients 8			63%	84%			68%	91%	75
Overall Visit Score of "Excellent" or "Very Good" -									
Percent of Patients Combined Total			90%	99%			92%	101%	91
Fime to next third new primary care appointment -	100%	105%	100%	105%	100%	105%	1000/	105%	95
Percent of specialties < 14 days 9 Fime to next third new specialty care appointment -	100%	105%	100%	105%	100%	105%	100%	105%	95
Percent of specialties < 21 days <sup>9</sup>	100%	105%	100%	105%	100%	105%	67%	71%	95
JNT Health Administrative Costs (% of Consolidated Expenses)	10070	10010	100 //		10070	100 1	0170		50
10	8.1%	119%	8.9%	111%	8.8%	112%	9.1%	109%	10
Percentage of Support Staff Trained 11	100%	102%	100%	102%	100%	102%	100%	102%	98
Fotal Net Clinical Revenues	\$ 15,447,416	25%	\$ 28 299 011	45%	\$ 44,564,096	71%	\$ 60 601 849	96%	\$ 63,000,00
Total Operational Revenues 13	\$ 20,078,646	27%	\$ 37,318,320	50%	\$ 58,998,192	79%	\$ 80,607,317	107%	\$ 75,000,00
JNT Health Reserves (days)	83.9	114%	65,3	89%	79.1	108%	89.9	122%	73,000,00
Percent of eligible patients placed on clinical pathways 14	64%	91%	67%	96%	63%	91%	75%	107%	73
Community Engagement	04 %	81/0	57%	30 14	03%	01/4	10%	107.0	
Numni Donors (number percentage of population)	192 5%	24%	206 6%	26%	769 20%	96%	845 22%	106%	800 21
Employee Donors (number percentage of population) 15	977 69.4%	93%	1,011 72.2%	96%	1052 75%	100%	1052 75%	100%	1052 75
Fotal amount of gifts <sup>16</sup>	\$ 3,136,254	39%	\$ 3,328,094	42%	\$ 4,355,968	54%	\$ 5,128,884	64%	\$ 8,000,00
Pledges for new program <sup>17</sup>			\$ 2,512,000	13%	\$ 20,183,136	101%	\$ 25,229,436	126%	\$ 20,000,00
Administration									
Administration cost as a percentage of total expenditures 18	7.27%	121%	8.91%	104%	10.04%	91%	7.72%	117%	9.25
nstitutional Reserves (days)	88.6	106%	110.4	131%	108.8	130%	106.3	127%	5.20
Faculty and Staff Pride Survey - Culture of Quality 19	00.0	10070	110.4	101.4	370	95%	100.0	121.70	39
Faculty and Staff Pride Survey - Job Satisfaction 19					362	98%			36
aculty and Staff Pride Survey - 500 Satisfaction 19					352	97%			36



















# When you come to a fork in the road, take it.

Yogi Berra



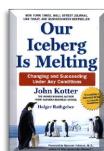
# The significant problems we face, cannot be solved with the same level of thinking we were at when we created them.





# Even if you're on the right track, you'll get run over if you just sit there.

#### Will Rogers





# The time to repair the roof is when the sun is shining.

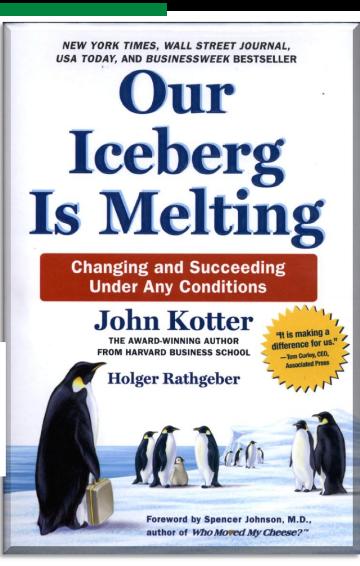
John F. Kennedy



# Change Management

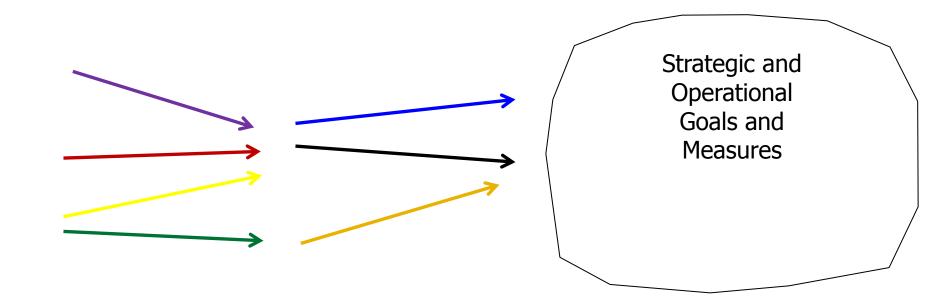
- Resistance to change
- Leadership
- Teamwork
- How to produce needed change

#### The future ain't what it used to be. Yogi Berra





#### Which one is PACS?



Strategy, goals, and measures are being defined.



#### Leadership

#### Leadership Groups

- President's Advisory Council 2<sup>nd</sup> & 4<sup>th</sup> Mondays
- Executive/Guiding Team 1<sup>st</sup> & 3<sup>rd</sup> Mondays
- Leadership Team 2<sup>nd</sup> Monday
- Strategic Thinking Councils Quarterly
- Board of Visitors semi-annual
- Leadership Development Institute, Chair Training
- Information dissemination
  - Communications Team
  - Service Directors
  - Town Halls



#### Health Institutes of Texas

- Cardiovascular Research Institute (CRI)
- Center for Community Health (CCH)
- Center for Commercialization of Fluorescence Technologies (CCFT)
- Focused on Resources for her Health, Education and Research (FOR HER)
- Institute for Aging and Alzheimer's Disease Research (IAADR)
- Institute for Cancer Research (ICR)
- Institute for Investigative Genetics (IIG)
- Mental Sciences Institute (MSI)
- North Texas Eye Research Institute (NTERI)
- Osteopathic Research Center (ORC)
- Primary Care Research Institute (PCRI)
- The Texas Center for Health Disparities (TCHD)





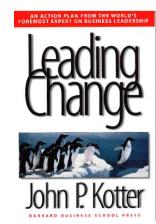
# National Recognition

- Top performer nationally in COMLEX
- 94% 1st time USMLE pass rate
- 3rd in percentage of graduates entering primary care residencies in the nation
- 12th in Hispanic medical education
  - Hispanic Business Press
- US News & World Report Rankings
  - 11th in Family Medicine
  - 15th in Geriatric Medicine
  - 19th for Primary Care Med Schools
  - 22nd for Rural Medicine
  - 34th in Physician Assistant Studies
- Best in Texas on "Social Mission" list
  - Annals of Internal Medicine

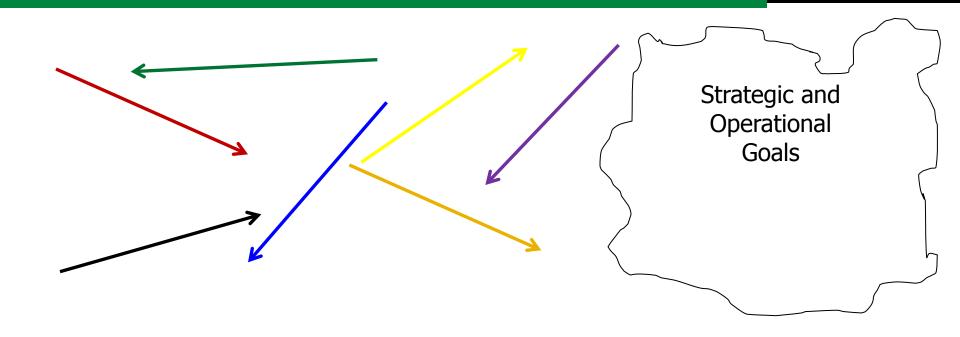


# **Eight Steps for Change**

- 1. Create a sense of <u>urgency</u>
- 2. Develop a guiding team
- 3. Develop the change <u>vision</u> and <u>strategy</u>
- 4. Communicate for <u>understanding</u> and <u>buy-in</u>
- 5. <u>Empower</u> others to act
- 6. Produce short-term wins
- 7. <u>Don't</u> let up
- 8. Create the <u>new culture</u>



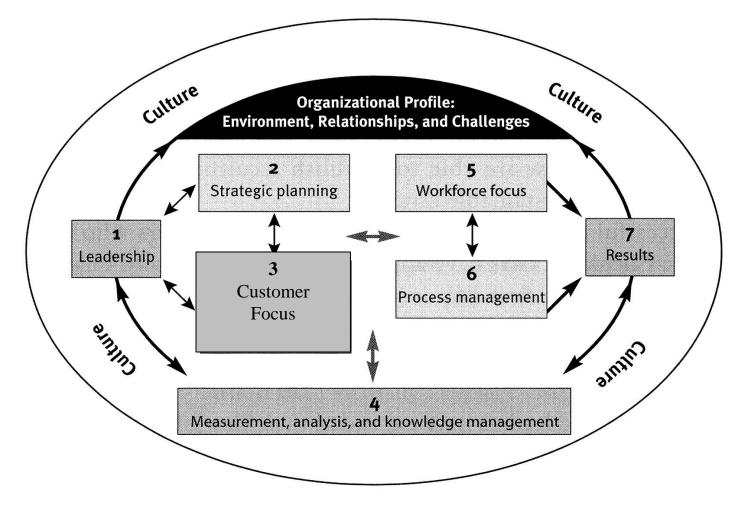
#### Which one is PACS?



Strategy and goals are poorly defined. Measures are not defined or tracked.



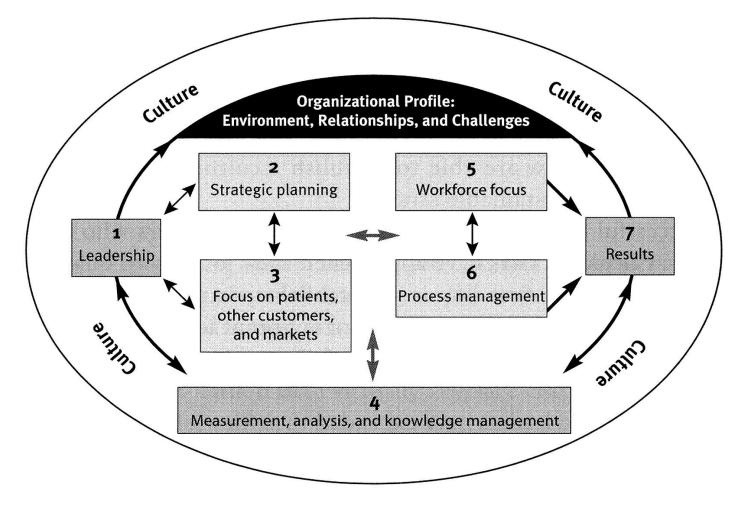
# Educational Excellence and Culture





Source: Ransom, Elizabeth R., Maulik S. Joshi, and David B. Nash, eds. The Healthcare Quality Book : Vision, Strategy, and Tools. 2<sup>nd</sup> ed. 2008. p 352

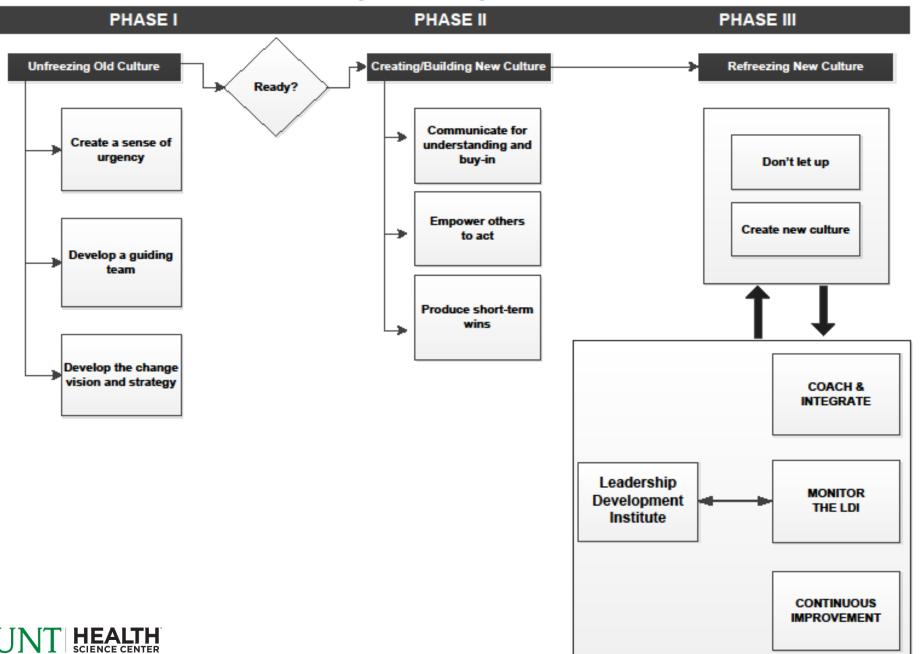
# Educational Excellence and Culture



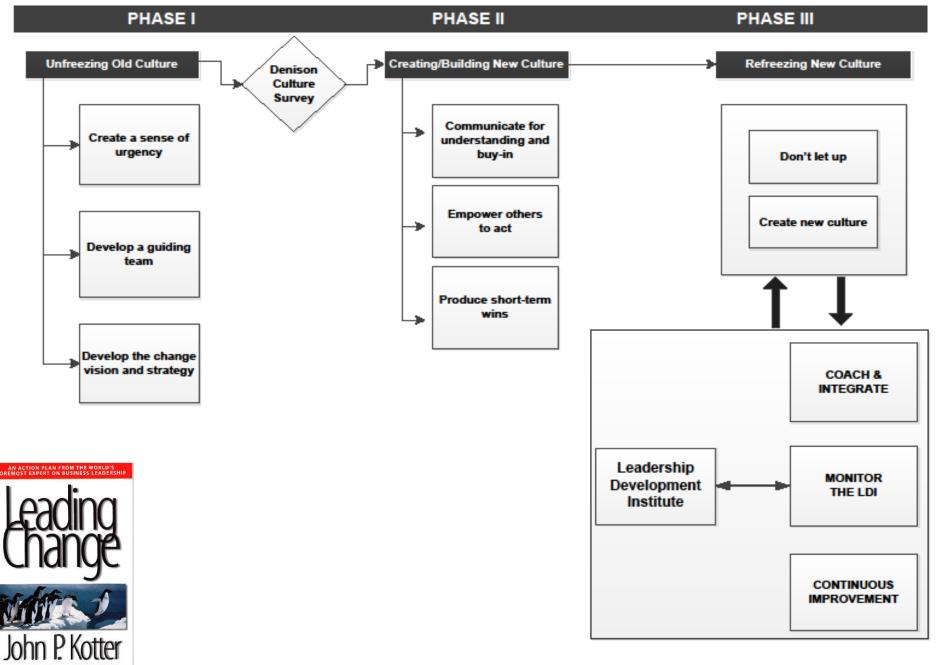


Source: Ransom, Elizabeth R., Maulik S. Joshi, and David B. Nash, eds. *The Healthcare Quality Book : Vision, Strategy, and Tools*. 2<sup>nd</sup> ed. 2008. p 352

#### Leadership Development Institute



#### **Culture Change and Leadership Development**



# UNT HEALTH Science center

ENCOURAGING AND RECOGNIZING EXCELLENCE



The Quality Texas Foundation Recognizes UNT Health Science Center at Fort Worth

2008 Commitment to Organizational Excellence

> Good performance and developing trends in many areas of the organization

Education Criteria for Performance LEADERSHIP Excellence

Effective June 2009









Process Management