In order to create an effective Strategic Plan, it is important to be sure that the plan reflects the Mission of Quillen. Everything that we do should contribute to our Mission. In that regard, we begin this document with our Mission statement.

**Mission**

*The primary mission of the Quillen College of Medicine is to educate future physicians, especially those with an interest in primary care, to practice in underserved rural communities. In addition, the College is committed to excellence in biomedical research and is dedicated to the improvement of health care in Northeast Tennessee and the surrounding Appalachian Region.*

The Quillen College of Medicine endeavors to meet community and regional health needs by identification, creation, and execution of the necessary programs through utilization of its diverse resources. The college is a major health care provider for East Tennessee. In view of this responsibility, the college emphasizes primary care as the focus of medical practice and training programs. The primary care physician is defined as the physician of first and continuing contact, coordinating the entire care of the patient. Primary medical care is a function rather than a discipline. This care is provided by family physicians, general internists, general pediatricians, and obstetricians/gynecologists. In addition to meeting the clinical and service responsibilities, the college also supports a significant research endeavor.

In order to better evaluate our strategic needs and goals, this document is segmented into individual functional categories. These are not intended to be an exhaustive list of functions that need to be addressed but are identified as key areas of improvement and change that will require specific planning in order to be effective and accomplish our Mission.

**Medical Student Education**

**Strategic Goal #1**

*C: Continue progress in curriculum integration and innovative learning pedagogy.* **Ongoing**

**Methods:**

1. - Complete Curricular Mapping and adjust learning activities to assure educational balance and achievement of Graduation Objectives. **2014**

2. - MSEC will continue to work towards the goal of enhanced integration across courses within segments of the curriculum and across the years of the curriculum. Recently established MS 1/2 and MS 3/4 review committees are mapping learning objectives and coordinating instructional content. Regularly scheduled course/clerkship director meetings facilitate this process. **Ongoing**

3. - Current small group learning activities and other alternatives to didactic based educational programs will be evaluated and expanded as effectiveness data is generated. Current programs include: Case Oriented Learning, Cadaver Case Presentations, Integrated Grand Rounds, Practice of Medicine, Transition to Clerkships and the Keystone Course. **Ongoing**

4. - The following strategies are in development: The Clinical Integration Framework, emphasis on increased clinical relevance of test questions. **Initiated, substantial implementation in 2014, then ongoing**
5. - Explore the initiation of a curriculum in Information Sciences across the spectrum of medical education. 2014
   a. - Invite an expert in medical informatics to present curricular concepts to MSEC.
   b. - Define the resources, including faculty, required to develop, establish and implement the curriculum.
   c. - Recommend course of action to dean.

**Strategic Goal #2**

*Develop and implement an innovative process for student evaluation and program assessment.*  Ongoing

**Methods:**

1. - Continue to develop the Educational Milestones across the learning objectives for all four years.  Ongoing
2. - Develop a student evaluation process that utilizes the Commencement Objectives as a core element of defining student progress in each course.  2014
3. - Provide MSEC, Course Directors and all faculty with educational programs that will train them to develop, utilize and study the establishment and implementation of Commencement Objective linked evaluations. 2014 and ongoing
4. - Systematically evaluate the student assessment programs implemented to provide additional objective information to complement the current student Graduation Questionnaire data. 2015

**Strategic Goal #3**

*Expansion of Quillen educational programs throughout the region.*

**Methods**

1. - Continue to work with Sevier County to expand medical education programs.  Ongoing
   a. - Maintain a robust Community Medicine Clerkship.
   b. - Work with LeConte Medical Center (Covenant System) to establish GME program(s).
   c. - Explore the possibility of expanding the affiliated campus in Sevierville.
2. - Collaborate with the King School of Medicine, Inc President and Board of Directors to establish a medical school campus in Abingdon, VA.  2015
   a. - Execute a Memorandum of Understanding. 2013
   b. - Define the Guiding Principles for the relationships. (2013)
   c. - As appropriate, move forward with planning and establishment of medical student educational program in conjunction with ETSU and TBR leadership.
   d. - Establish Graduate Medical Education programs in Johnston Memorial Hospital.

**Resources Needed**

- Additional administrative staff to support curricular mapping, milestones evaluation and development.
  o One additional technical clerk in the Office of Academic Affairs.
  o Identify staff support needs for course directors and faculty related to curriculum mapping.
- Review IT needs for administering Quillen educational programs and oversight.
  o Consider establishment of Director of IT position in the COM. Job responsibilities to consider would include the development, oversight and coordination of IT systems across Quillen. Present the options, OIT implications, and budget implications in recommendation on course of action to dean.
  o Identify or develop cost-effective system(s) for administering educational oversight.
    - Scheduling
- Evaluations
- Assessments
- Test delivery and analysis
- Curriculum monitoring/mapping
- Tracking of student experiences and work hours
- Student credentialing

**Graduate Medical Education**

**Strategic Goal #1**

*Sustain mission-based resident selection process that focuses on the college’s mission and addresses diversity.* **Ongoing**

Methods:
- At the program level, maintain continuous review of application data and Match results to refocus recruiting efforts as necessary to ensure alignment with mission.
- Continuous review of aggregate selection data across programs centrally by the Graduate Medical Education (GME) Office.

**Strategic Goal #2**

*Stabilize residency positions and funding.* **Ongoing**

Challenge: The College’s health system partners have given notice of their intent to reduce the number of GME positions funded above their 1996 federally imposed caps.  

Methods:
- Seek opportunities to expand GME programs in other locations, especially those with rural health focus (e.g., Sevier County, Morristown-Hamblen County, and Abingdon). **2015**
- Balance the loss of funded positions with the need to prioritize the college’s rural and primary care mission while ensuring strong GME programs. **2015**

**Strategic Goal #3**

*Implement new processes and initiatives related to central oversight of education and accreditation.* **2014**

Challenge: With implementation of the ACGME’s Next Accreditation System (NAS), Sponsoring Institutions must refocus efforts transitioning from the cycle length model to a method of continuous review. The GME Office must place new emphasis on review of the learning and working environment, facilitating patient and healthcare quality.  

Methods:
- Create a new GME program dashboard or scorecard system for Annual Institutional Review (AIR). **2013**
- Improve central management of program oversight while strengthening the ability to serve as a resource for programs. **Ongoing**
- Build new relationships with hospitals in the areas of quality improvement and patient safety plans for greater alignment with resident curricula. **2015**
Faculty Development

Rationale
In order to provide a vibrant educational atmosphere and encourage and engender high performing faculty, an ongoing program to continuously work to develop the skills and support the career aspirations of each faculty member is required. This process should provide faculty with feedback, support, skills and career development opportunities and insure that all faculty have the requisite skills to effectively educate medical students, residents and faculty and community colleagues.

Strategic Goal #1:
Provide a systematic program of needs assessment and skills development for each faculty member at Quillen regardless of rank or position. The Administrative Council will review the process annually and make recommendations to the dean on the additional leadership, organizational structure and resources required to achieve these goals. 2014, then ongoing

Methods:
1. - Provide a college wide consistent approach to all faculty development. 2014
   a. - Role: Work with Department Chairs to develop and/or coordinate a specific development plan to ensure that each faculty member has required knowledge and skills to be an effective clinician, educator and/or scholar.
   b. - Expectations and Methods:
      i. - Meet with each faculty annually to:
         1. - Review Annual Evaluation
         2. - Review Promotions and/or Tenure status
         3. - Review career and skills development needs
         4. - Develop specific plan to address needs and work successfully toward career advancement
      ii. - Develop, design and implement a robust program for all new faculty to be sure that they understand:
         1. - Basics of adult learning
         2. - Basics of curriculum design
         3. - Basics of learner evaluation processes
         4. - Basics of faculty evaluation process
         5. - Promotions and Tenure Requirements
         6. - Scholarship as part of being a medical school faculty member
         7. - Identification of and engagement with mentors
      iii. - Develop, design and implement a program that prepares junior to mid career faculty to understand the components of successful career advancement
         1. - Educational program design and implementation
         2. - Management and Administrative skills education
         3. - Basic financial management instruction
         4. - Advocacy and participation with national organizations
         5. - Health systems design
         6. - Developing a portfolio of scholarship
         7. - Basics of successful research and funding
         8. - Specific plans and instruction required for individual career aspirations
      iv. - Develop, design and implement a program for senior faculty/Quillen leadership to develop skills necessary to be effective managers and leaders
1. Basics of strategic planning
2. Advanced financial management
3. Giving and receiving feedback as important components of annual evaluations
4. Skills for effective advocacy
5. Participation and leadership of national organizations

2. Create a unified, comprehensive faculty evaluation process for the College of Medicine that will be used by all departments for all faculty. 2014
   a. Methods:
      i. Identify the Dean’s key priorities for the evaluation process. 2014
         1. Promotion and/or Tenure Status
         2. Individual career development needs
            Metrics will be used to assist Chairs in defining/judging the performance of each faculty member and will be used to assist with important performance based decisions/summary evaluations (e.g. promotions recommendations, salary equity adjustments, etc.)
      ii. Identify additional priorities from the Quillen leadership (Associate Deans and Department Chairpersons). 2014
         1. Define an “FTE”, i.e. expectations of a full time position
         2. Requirement for physical presence at work
         3. Post tenure review process
         4. Annual prospective, quantitative job description
            a. Clear expectations (goals, objectives, duties, etc)
            b. Time allocated for prep and delivery of didactics
         5. Measurement of teaching quantity and quality
         6. Track lectures/session given to teaching
         7. Include student evaluations with less emphasis on “popularity”
         8. Measurement of clinical productivity
            a. Must include objective quantification of productivity (e.g. # of patients per session, RVU, etc)
         9. A particular score should not equal an automatic merit increase
            a. Must include Chair’s opinion/summary of performance
            b. Must include evaluation of professionalism
            c. Respectful interactions, documentation up to date, etc
      iii. Establish a Task Force to design a comprehensive evaluation process that includes the priorities identified by the Quillen Dean and other leaders. 2014
Strategic Goal #2
Create a leadership group that has advanced leadership skills and is facile with performing meaningful faculty evaluations, supports comprehensive faculty development, possess strategic planning skills and Mission based decision skills. Ongoing

Methods:
- Perform a needs assessment of the COM leadership group (Associate Deans and Department Chairs). 2013
- Determine training needs and structure programs as defined by the needs assessment. 2014
- Leadership will participate in active succession planning. Ongoing
- Provide leadership skills development to junior leaders in the organization to prepare them for leadership roles. Ongoing
- Provide structured feedback on a regular basis in order to develop people, skills and programs.
  - Annual Evaluations with the Dean. 2014
  - 4 Year Summary Evaluation. 2017
    - A formal Chair and Program Review Committee appointed by the Dean
      - COM leaders
      - COM faculty
      - External reviewer in discipline of the Chair being reviewed
      - Formal report to the Dean
    - Parameters to be reviewed:
      - Annual Dean evaluations
      - Formal written report by Chair
      - Feedback from department faculty
      - Faculty progress
      - Departmental progress

Strategic Goal #3
Recruit and retain a diverse faculty which will bring a wide range of perspectives to the academic discourse of Quillen. Ongoing

Methods:
- Define the domains of diversity by which the faculty will be measured. 2011
- Coordinate all faculty searches through the University Office of Diversity. University Policy
- The Diversity Council will produce an annual report on diversity activities and effectiveness.
  - Through the report, the Diversity Council will advise the dean of leadership and resource requirements for effective ongoing diversity development in Quillen. 2013
  - Provide consistent guidance of all faculty search committees on diversity policy. 2013
  - Monitor effectiveness through ongoing collection of data on faculty diversity to include, but not be limited to, national origin, race, institution where terminal degree was achieved, socio-economic and educational environment through secondary school. 2011
  - Conduct ongoing educational programs on diversity for the COM. 2014

Strategic Goal #4
Provide community faculty with the training, skills development and feedback needed to assure that all community rotations have instructors who possess requisite educational skills. Ongoing

Methods:
- Rigorously evaluate the credentials of all potential community faculty.
- Perform regular needs assessments of community faculty teaching abilities with multiple methodologies.
- Provide all new community faculty with basic instruction in teaching and education and consider developing a certification process for community faculty.
- Regularly recognize outstanding community faculty.

Research

Strategic Goal #1
Create an administrative infrastructure that facilitates the educational requirements of and research collaboration across the basic science enterprise. 2013

Methods:
- Merge all Basic Science Departments into the Department of Biomedical Sciences. 2012
- Recruit a new Chairperson for this department. 2013
- Reorganize current basic science faculty, staff and students into effective units. 2013
- Create appropriate evaluation methods for basic science faculty performance and development needs. 2013
- Create required organizational functions to support this department. 2013
- See Appendix II and Appendix III.

Strategic Goal #2
Transition the research focus to become center and disease based, and advise the dean on the leadership and infrastructure requirements for meeting these goals. 2014

Methods:
- Evaluate the feasibility of establishing the position of Associate Dean for Research in the COM with emphasis on working with other Health Science research administrations to facilitate multidisciplinary and/or interdisciplinary collaboration between the colleges in the Health Sciences and other colleges in ETSU. 2015
- Develop effective interprofessional, multidisciplinary and translational approaches to biomedical research. Ongoing
- Leverage our human, infrastructure, and other resources to maximally increase our competitiveness for research funding. Ongoing -
- Transition the current COM disciplinary organization of research to a center/disease based organization with an emphasis on interdisciplinary and translational research. 2015
- See Appendix I

Strategic Goal #3
Implement a comprehensive faculty recruitment plan that will replace retiring basic science faculty, produce the next generation of academic leaders and will increase retention of current faculty at Quillen.  

**Ongoing**

Methods:

- Establish research focus areas. **2015**
- Define criteria, resource allocation and resource requirements for Research Centers and advise dean on implementation of research centers. **2015**
- Define faculty staffing priorities for basic science faculty including educational needs and faculty needs for focus areas and Research Centers. **2014**
- Identify critical functions of retiring faculty and advise on national trends in developing a recruitment plan. **2013**
- Over the next 5 years recruit faculty into research focus areas that are consistent with the development of research centers. **2018**

**Strategic Goal #4**

*Establish sustainable undergraduate, graduate, and clinical post-graduate research opportunities in the COM.* **Ongoing**

Methods:

- Secure funding sources to support stipends that guarantee long-term student participation in research and provide ACGME mandated research experiences for clinical post-graduate training. **Ongoing**
- Perform a review of the Biomedical Sciences graduate program consistent with the leadership reviews described under Faculty Development Strategic Goal #2. **2014**
- Evaluate and recommend on the feasibility of an M.D./Ph.D. program in the COM. **2017**

**Clinical Practice, Education and Research**

**Strategic Goal #1**

*Leverage our participation in health care reform initiatives to grow the financial viability of our clinical services.* **Ongoing**

Methods:

- Aggressively pursue excellence in the “Triple Aim” paradigm. **Ongoing**
  - Improved Patient Experience **Ongoing**
    - Coach Administrators in the concept of “Improved Patient Experience” and meet regularly to promote dialogue and discuss progress.
    - Promote a consistent approach to patient interactions across the organization that supports outstanding customer service.
    - Measure patient satisfaction and work to improve scores. Utilize positive outliers to assist negative outliers with improvement of their patient service.
- Work to eliminate individual clinic variations so that a consistent, identifiable product is produced by all Quillen clinics.
  - **Quality Care for Patients Ongoing**
    - Continue to enhance the current Electronic Health Record platform to facilitate acquisition of quality data for all providers.
    - Join an Accountable Care Organization that assists with the collection of quality data and is committed to improving quality.
    - Work with providers to create quality metrics based on evidence based protocols and best practices.
    - Assist providers with the skills needed to practice in an environment that promotes teamwork and best practices.
    - Embrace and implement the principles of the Patient Centered Medical Home across the enterprise.
  - **Lower the Cost of Care Ongoing**
    - Examine and standardize work flows across the clinical enterprise. This not only improves the patient experience; it also eliminates costly variations in care.
    - Eliminate compartmentalization of clinics and practices to facilitate the flow of patient information throughout the organization while maintaining patient confidentiality.
    - Follow cost metrics for each practice and each individual in the clinical enterprise. Use these metrics, along with the quality metrics, measure provider performance, provide feedback and create expectations to which each provider will be held accountable.

**Strategic Goal #2**

*Create a culture of transparency and equity in the clinical enterprise as it pertains to the allocation of resources across the college of medicine. Ongoing*

**Methods:**
- Work with COM leadership to:
  - Create a common culture of collaboration and consistency across the organization. This will require a process whereby how our decisions are made significantly change. We will need to navigate from a culture where each Chair makes decisions based on what is best for their department in isolation to a culture where many of those decisions will need to be made by the leadership group based on what is best for the organization in support of the Mission.
  - Eliminate unnecessary variations in financial management between departments/clinical units.
  - Standardize compensation models/policies across the organization and clearly, consistently and repetitively communicate these to all faculty.
  - Continuously evaluate the faculty compensation plan as to how it facilitates and incents the needs of the organization as well as the needs of the faculty. This will require periodic structured feedback from all faculty.
  - Engage a consultant in evaluating the current faculty compensation plan and recommend changes. Establish a committee empowered to make changes in the current faculty compensation model based on consultant, faculty and leadership input.

**Strategic Goal #3**
Provide outstanding educational experiences to all learners who utilize our clinical practices for their education and training. Ongoing

Methods:
• Create a Sub-committee for Clinical Education within the structure of MEAC. The role of this group will be to:
  o Create methods for learners to provide feedback to each unit as to how effectively the clinical structure facilitates learning.
  o Create and implement a coordinated program for residents and medical students to learn about health care reform, practice management and quality improvement. In addition, topics such as population health management and value versus volume based payments for services need to be included.
  o Facilitate the integration into our clinical practices of the learning and graduation objectives created by MSEC.
  o Standardize the educational experiences across our clinical enterprise.
• Regularly discuss the educational implications and impact of decisions made by the MEAC Board of Directors. Ongoing

Strategic Goal #4
Integrate clinical research into our network of clinical practice. Ongoing

Methods:
• Create a Clinical Research Center to apply for, coordinate and maintain grants and other clinical research opportunities. 2015
• Integrate the Centers created by the research strategic plan into the clinical enterprise. 2016
• Make discussion of clinical research programs a regular part of all Board of Directors meetings. 2014