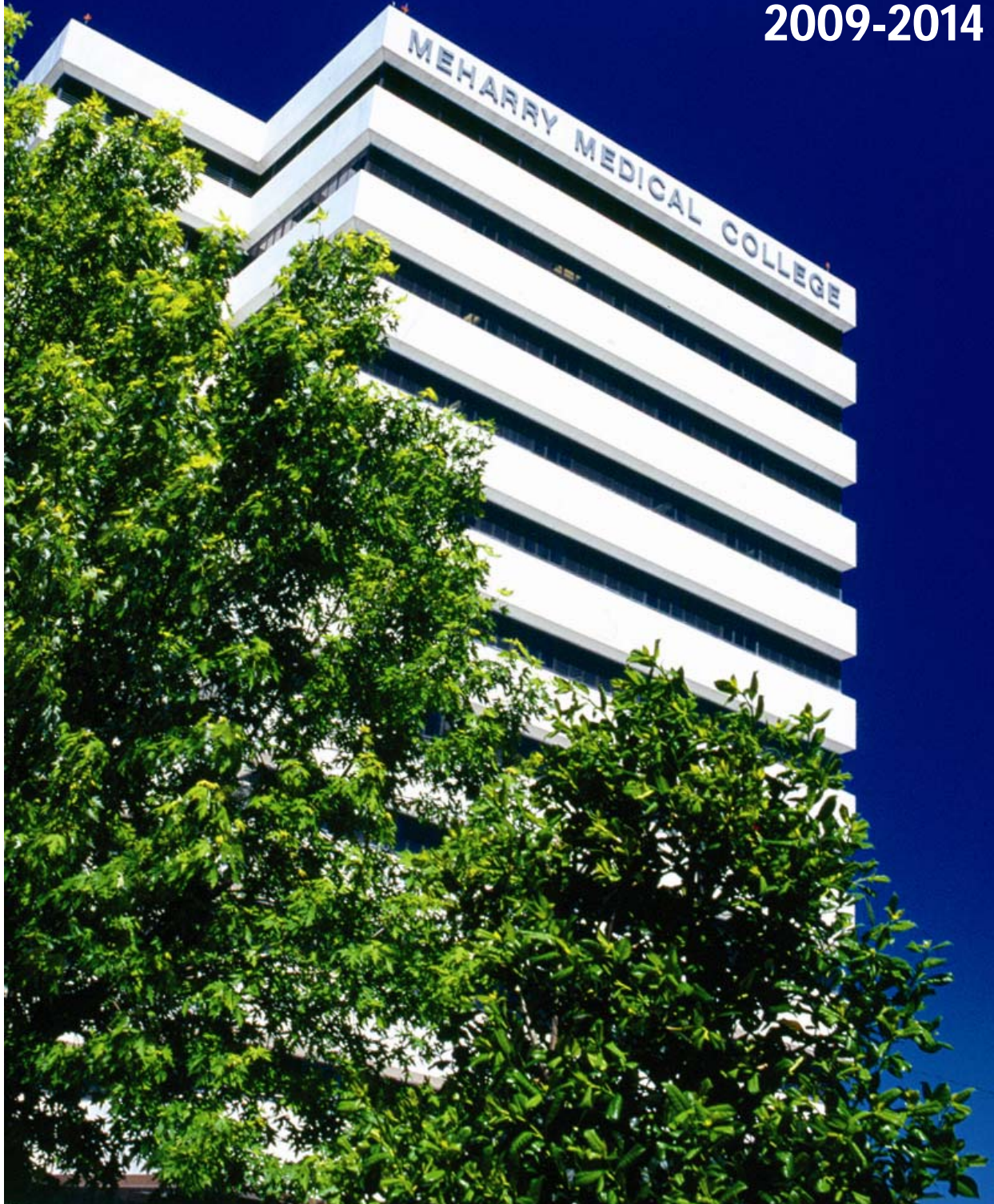




M-Pact!

Meharry's Plan For Action 2009-2014



Office of the President
Meharry Medical College
1005 D. B. Todd Blvd.
Nashville, Tennessee 37208

October 2009

M-PACT: Meharry's Plan for Action 2009-2014

Introduction

M-Pact, Meharry's Plan for Action, is the product of an effort designed to identify the College's greatest opportunities for advancement and to define the resources and strategies required for success in a dynamic healthcare environment. This inclusive process provided each constituency of the College multiple opportunities for input through retreats, focus groups, surveys, and task force meetings. We began with a review of the successes and shortcomings of previous planning efforts; we analyzed institutional strengths and weaknesses; we assessed relevant information about major trends in healthcare and health professions training programs; and we carefully examined new opportunities that would have an impact on the College's future.

PLANNING PROCESS

On January 23, 2008, Meharry's comprehensive strategic planning process was launched with an all day retreat convened by President Wayne J. Riley. This was the first phase in the creation of "*M-PACT, Meharry's Plan for ACTION*." During this retreat, we created a plan for surfacing major themes for the future that would allow us to have an impact—an "M-Pact" on our institution, an "M-Pact" on our students, and an "M-Pact" on our community, the nation, and the entire world.

We engaged more than 65 members of the Meharry Medical College (MMC) community, including administrators, faculty, staff, students, a resident, a post-doc, the CEO of Nashville General Hospital at Meharry, a representative of the Meharry/Vanderbilt Alliance, and members of the Meharry Board of Trustees, in this one day workshop. The session was held at the Vanderbilt Center for Better Health, an organization that has successfully used a "design-shop" process to help many academic health centers, Fortune 500 companies, and government entities to resolve complex issues and accelerate work to achieve their goals. The facilitators captured the actual proceedings of the day, which provided the opportunity to replay all recorded sessions and review the documented work of the day in a web-journal. The web-journal was available for use during follow-up meetings.

The MMC team identified **six** major focus areas for the planning process and assigned work group leaders for each area. The focus areas and their leaders were as follows. (A list of the participants on the Task Force, work groups, data team, and Executive Management Team and a photo of participants in the January planning retreat are included as Appendix A.)

Recruitment and Retention Education Mission

Janet Rachel and Karen Lewis
Drs. Daphne Young, Anthony
Disher, and Susanne Tropez-Sims



M-PACT!

Research Mission	Drs. James Hildreth and Hubert Rucker
Clinical Excellence	Drs. Chike Nzerue and Gloria Richard-Davis
Service Delivery	Lori Donnell and Veronica Johnson
Operating as One Meharry	Jim Powlus and Janet Caldwell

Each Work Group developed charge and mission statements during the retreat, which were debated and refined during subsequent meetings. The Work Groups were also charged with: (1) identifying the particular challenges within their area; (2) determining the current state of affairs; and (3) making recommendations for the future. They were also required to provide an operational focus on how to implement strategies to address the recommendations. Additionally, the groups were charged with following a prescribed schedule for completing the work by the April 15th deadline.

Following the retreat, each Work Group was expanded to include additional staff, faculty, and students. The Work Groups further expanded involvement of the campus community by inviting participation in focus groups and surveys.

The strategic planning Task Force, led by Dr. Angela L.W. Franklin, Executive Vice President (EVP), was formed immediately after the retreat. The Task Force included all Work group leaders, the Director of Planning, and other administrative support staff. The Task Force met bi-weekly through April. During the meetings, the Task Force received progress reports from the Work Groups and made recommendations for enhancing, streamlining, or refocusing discussion within the groups.

The final reports from each Work Group were reviewed and consolidated into one document, which was forwarded to the Executive Management Team (EMT) for review and prioritization of the recommendations. A briefing about the strategic planning progress was presented to the Board of Trustees during the May 2008 meeting, and preliminary approval was granted for its implementation.

On July 14-15, 2008, the EMT engaged in a “mini-retreat” to begin the work of prioritizing recommendations from the Work Groups. In addition, EMT engaged in an exercise to review the relevancy of the current SWOT Analysis, Mission Statement, and Core Values. The revised SWOT Analysis is attached as Appendix B. The EMT also worked to create a collective vision for the future of the College. Overarching goals were established during this retreat with particular emphasis placed on establishing the metrics for review and evaluation.

Following a second mini-retreat of the EMT on August 12-13, 2008, all prioritized goals were sent back to the Task Force for creating the final document and a schematic design for dashboard reporting. The first draft of the strategic planning document, *M-Pact, Meharry’s Plan for Action 2009-2014*, was presented to the Board of Trustees for review at the October 2008 Board meeting.



The Trustees responded to the report with recommendations concerning the revised mission statement, core values, and the goal statements. Given the nation's current economic issues, the Trustees asked that administrators prepare an economic forecast for the College and identify goals that will be addressed during the first and subsequent years of the strategic plan. The changes requested by the Board of Trustees at the October 2008 Board meeting were incorporated into the document. When presented to the Board in February 2009, the strategic plan and the first year goals were accepted. Following the Board meeting, the Strategic Planning Task Force was reconvened and given instructions to begin work on operational plans for 2009-2010. The operational plans will serve as a roadmap for accomplishing the first year goals of the strategic plan.

Task Force members invited participants in the previous work groups as well as additional faculty or staff to assist with identifying strategies, tasks, responsible offices or persons, resource needs, and completion dates for each of the first year goals. The Strategic Planning Task Force and work groups will continue refining the operational plans and monitoring outcomes throughout 2009-2010. A Strategic Planning Website was created for the campus community and will be launched following Board approval of the entire strategic plan.

During the May 2009 Board of Trustees meeting, the strategic plan was presented for final approval by the trustees. Some committee chairs requested additional time for further review of the plan relative to their areas of responsibility. They agreed to convene a teleconference to vote on final approval of the plan by June 30, 2009. Conversations between Dr. Franklin and BOT committee chairs yielded additional suggestions for presenting the information and adding information about the sources of funding. These changes were made. Due to the availability of various committee members, the teleconference was delayed until a quorum was scheduled. On September 30, 2009, the Meharry Medical College Board of Trustees Executive Committee formally approved the strategic plan, M-PACT! Meharry's Plan for Action 2009-2014.

M-Pact! Meharry's Plan for Action 2009-2014

MISSION STATEMENT

Meharry Medical College is an academic health center that exists to improve the health and health care of minority and underserved communities by offering excellent education and training programs in the health sciences. True to its heritage, Meharry places special emphasis on providing opportunities for people of color, individuals from disadvantaged backgrounds, and others regardless of race or ethnicity; delivering high quality health services; and conducting research that fosters the elimination of health disparities.





VISION STATEMENT

To enhance our national reputation and expand our global reach as a quality-driven academic health center noted for its:

- Leadership in diversifying the nation's health professions work force
- Highly effective and innovative educational and training programs
- Enlightened health policy development and culturally-sensitive, evidence-based health services
- Preeminence in focused research that leads to the elimination of health disparities

CORE VALUES

Excellence: consistently achieving outstanding levels of performance while upholding the highest standards of ethical behavior, intellectual honesty, and professional conduct.

Service: maintaining a nurturing and service-oriented environment that exceeds expectations and treats all people with compassion, dignity, and respect.

Accountability: accepting individual and collective responsibility for preserving and effectively managing the resources of the College.

Teamwork: encouraging, supporting and valuing the collaborative efforts of faculty, staff, and students to advance the quality of education, research, and patient care.

Innovation: promoting creativity and the development of ideas that stimulate improvements in our intellectual and operational endeavors.

Diversity: fostering ethnic, intellectual, social, and cultural diversity.

Community-focused: demonstrating our concern for the health care needs of underserved communities and advocating for local, state, and national health and public policies directed at improving the status of health of all individuals.

STRATEGIC PRIORITIES

At the beginning of the planning process, six themes emerged as primary areas of focus: **Education Mission, Clinical Mission, Research Mission, Recruitment and Retention, Service Delivery, and Operating as One Meharry.** Relevant strategic priority statements were developed to represent the fundamental aims of the strategic plan. Goals and strategies also were designed to help position the College for a new level of excellence and for national prominence. Two focus areas (Operating as One Meharry and Service Delivery) were merged to encompass one overarching priority, which is **Operational Excellence.** Two new priorities, **Facilities, Infrastructure and Environmental Excellence** and **Financial Performance** were added to the strategic plan.

Below is a summary of the seven major initiatives that will provide the “**pathways**” to institutional effectiveness. These pathways will drive institutional direction and guide the targeted investment of resources.

1. Educational Excellence

We will provide an enriching environment, which assures and sustains academic excellence and professional competency in all academic programs, by enhancing and strengthening the quality of our instructional programs, incrementally growing the size of existing programs, and adding new graduate degree programs.

2. Faculty Recruitment, Retention, and Development

We will attract and sustain a cadre of committed and productive faculty who exemplify the highest standards of personal ethics and professional excellence in teaching, research, patient care, and community service.

3. Clinical Excellence

We will diversify and expand our clinical enterprise by maintaining our primary care focus and targeting selected specialty areas that meet the community’s needs.

4. Research Excellence

We will capitalize on our research strengths and elevate the competitive quality and quantity of basic, clinical, translational, and community-service research to achieve a reduction in health disparities.

5. Operational Excellence

***Operating as one Meharry**, we will strengthen MMC’s organizational structure, processes, and culture to ensure the highest standards of performance, responsiveness, and accountability.*

6. Facilities, Infrastructure and Environmental Excellence

We will augment our facilities to demonstrate a long term commitment to providing an efficient, safe, and user friendly environment that enhances teaching, learning, research, and service delivery.

7. Financial Performance

We will continue to project the College on a path of financial health that adequately supports the College’s aspirations through effective management of current resources, identification and development of new resources, and stewardship that ensures financial stability and growth.





Strategic Pathways

STRATEGIC PATHWAY I: Educational Excellence

We will provide an enriching environment, which assures and sustains academic excellence and professional competency in all academic programs, by enhancing and strengthening the quality of our instructional programs, incrementally growing the size of existing programs, and adding new graduate degree programs.

Year One Priorities (2009-2010)

- Goal 1.1** Improve student performance on standardized and/or licensure examinations and on-time graduation rates in all schools.
- Goal 1.2** Achieve accreditation of the Masters of Science in Public Health (MSPH) program.
- Goal 1.3** Explore the feasibility of implementing new degree programs in the School of Graduate Studies and Research and the School of Dentistry.
- Goal 1.4** Enhance existing academic programs through new student support services and inter-professional curricular offerings.

Subsequent Year Priorities (2010-2014)

- Goal 1.5** Increase the number of highly qualified students admitted to all degree programs.
- Goal 1.6** Expand and enhance graduate medical education and advanced dental education (residency) programs.

STRATEGIC PATHWAY II: Faculty Recruitment, Retention, and Development

We will attract and sustain a cadre of committed and productive faculty who exemplify the highest standards of personal ethics and professional excellence in teaching, research, patient care, and community service.

Year One Priorities (2009-2010)

- Goal 2.1** Analyze baseline number of faculty in each school and determine the need for increasing faculty based on accreditation regulations, needs to enhance student performance, and to meet the educational, research, and clinical missions of the College.
- Goal 2.2** Analyze faculty compensation to determine baseline data then revise policies that govern faculty compen-

sation to align bonuses/incentive pay with promotion and changes in faculty rank.

Goal 2.3 Establish a Teaching Academy to ensure excellence in curriculum and instruction and to recognize excellence in teaching.

Subsequent Year Priorities (2010-2014)

Goal 2.4 Raise faculty compensation to 50th percentile for all faculty based on AAMC and ADEA standards.

Goal 2.5 Develop and implement a Senior Distinguished Educator Program.

**STRATEGIC PATHWAY III:
Clinical Excellence**

We will diversify and expand our clinical enterprise by maintaining our primary care focus and targeting selected specialty areas that meet the community's needs.

Year One Priorities (2009-2010)

Goal 3.1 Stabilize our primary hospital affiliate and index teaching hospital to support our education, clinical, and research missions.

Goal 3.2 Establish and implement a Medical Informatics plan.

Goal 3.3 Expand relationship with the U. S. Department of Veteran's Affairs (VA) through enhanced clinical services such as a VA Dental Clinic and additional VA Specialty and Primary Care Clinics.

Subsequent Year Priorities (2010-2014)

Goal 3.4 Expand clinical practice opportunities beyond Nashville General Hospital.

Goal 3.5 Serve as a referral focus for federally qualified community health centers in Nashville, Davidson County.

Goal 3.6 Establish a Dental Faculty Practice Plan as a component of the Meharry Medical Group (MMG).

**STRATEGIC PATHWAY IV:
Research Excellence**

We will capitalize on our research strengths and elevate the competitive quality and quantity of basic, clinical, translational, and community-based research to achieve a reduction in health disparities.





Year One Priorities (2009-2010)

- Goal 4.1** Increase the number of peer-reviewed publications produced by faculty members engaged in research.
- Goal 4.2** Further develop and enhance the MD-PHD program.
- Goal 4.3** Identify resources for bridge funding to support research faculty who are between grants.
- Goal 4.4** Define the MMC focused research areas.

Subsequent Year Priorities (2010-2014)

- Goal 4.5** Increase sponsored research funding.
- Goal 4.6** Increase the number of investigator initiated awards.
- Goal 4.7** Develop competitive “start-up” packages to attract and retain new research faculty.

**STRATEGIC PATHWAY V:
Operational Excellence**

Operating as one Meharry, we will strengthen MMC’s organizational structure, processes, and culture to ensure the highest standards of performance, responsiveness, and accountability.

Year One Priorities (2009-2010)

- Goal 5.1** Develop and implement an institutional data management strategy to leverage existing enterprise technologies and clearly define data sources, owners, and standards to be used by the College.
- Goal 5.2** Develop and implement a comprehensive internal communication program that focuses on providing consistent, clear, concise, and relevant information to all internal audiences.
- Goal 5.3** Develop and implement a comprehensive external communication program that focuses on providing consistent, clear, concise, and relevant information to all audiences while promoting a differentiated image to the external marketplace that is consistent with MMC’s identity.

Subsequent Year Priorities (2010-2014)

- Goal 5.4** Establish a centralized employee training program that recognizes “best practices” as an essential function of the enterprise.
- Goal 5.5** Improve employee satisfaction and retention by developing a plan for employee compensation and clas-

sification and implementing a performance evaluation system that is linked to merit compensation.

**STRATEGIC PATHWAY VI:
Facilities, Infrastructure, and Environmental Excellence**

We will augment our facilities to demonstrate a long term commitment, to providing an efficient, safe, and user-friendly environment that enhances teaching, learning, research, and service delivery.

Year One Priorities (2009-2010)

- Goal 6.1** Update the Campus Master Plan.
- Goal 6.2** Enhance the on-campus amenities available for faculty, staff, and students by upgrading student lounges, renovating the Library, improving parking, and improving the availability of food service.

Subsequent Year Priorities (2010-2014)

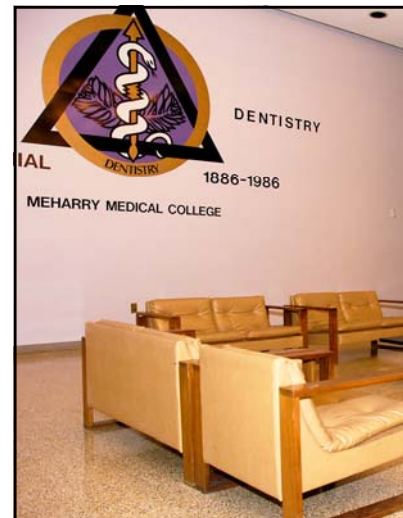
- Goal 6.3** Develop plans for a Campus Center.
- Goal 6.4** Align the capital improvement plan to maximize our educational, training, and research objectives.
- Goal 6.5** Adopt a campus wide environmental sustainability plan to include recycling, promoting energy efficiencies, and reducing the College's carbon footprint.

**STRATEGIC PATHWAY VII:
Financial Performance**

We will continue to project the College on a path of financial health that adequately supports the College's aspirations through effective management of current resources, identification of new resources, and stewardship that ensures financial stability and growth.

Year One Priorities (2009-2010)

- Goal 7.1** Develop and implement an annual operating budget showing a surplus of at least \$1.2 million.
- Goal 7.2** Develop and execute a debt management policy linked to the mission and long-term strategic priorities of the College by June 30, 2010.
- Goal 7.3** Develop effective partnerships and collaborations relating to best business practices for purchasing of goods, that facilitate cost efficiencies and economies of scale, which will result in an average savings of



10% beginning in year 2010.

Goal 7.4 Continue to increase the deferred maintenance reserve fund by \$250 thousand annually.

Subsequent Year Priorities (2010-2014)

Goal 7.5 Improve financial ratios: achieve a positive margin of 50% greater than the minimum requirements stipulated by Bond debt covenants, Department of Education composite score, SACS composite financial index, and other accrediting bodies; increase total net assets by 15% each year; and strengthen budgeting and performance review processes to achieve an annual EBIDA operating margin of > 3.0%.

Goal 7.6 Create a capital budget process tool to analyze the benefits, costs, and risks associated with potential capital investments to ensure strategic alignment with the College's capital improvement plan.

Goal 7.7 Increase annual private gifts and grants revenue by 10% in years 1 and 2, by 5% in years 3 and 4, and 2.5% in year 5 above the base year target of \$3.3 million for FY2009.

Goal 7.8 Conduct a needs analysis and/or plan a comprehensive capital campaign.

Measuring Progress

Meharry's strategic planning will continue with:

- Developing annual operational plans within each school and administrative division.
- Finalizing metrics for monitoring and measuring progress toward meeting strategic goals and objectives. (See Appendix C for a draft of the scorecard.)
- Appointing an Institutional Effectiveness Committee that will be responsible for tracking progress and reporting outcomes to the Executive Management Team and the campus community annually.
- Conducting periodic assessments of the alignment between the College's financial status and the strategic goals.

The Executive Management Team will examine outcomes, refine the goals, and determine which strategic goals will be pursued during the subsequent fiscal years.



Appendix A
2008 Work Group Members

Strategic Planning Task Force

Dr. Angela Franklin, Chair
Dr. Juanita Buford
Janet Caldwell
Dr. Anthony Disher
Lori Donnell
Christina Henderson
Dr. James Hildreth
Lisa Johnson
Veronica Johnson
Karen Lewis
Janet Rachel
Dr. Chike Nzerue
Jim Powlus
Dr. Gloria Richard-Davis
Dr. Hubert Rucker
Dr. Suzanne Tropez-Sims
Dr. Daphne Young

Clinical Mission Work Group

Dr. Chike Nzerue, Chair
Dr. Gloria Richard-Davis,
Vice-Chair
Dr. Billy Ballard
Dr. Xylina Bean
Dr. Derrick Beech
Janet Caldwell
Lori, Donnell
Dr. Clifton Meador
Andrew Jackson
Dr. Harold Jordan
Sheryl Shumpert
Dr. Mohammed Sidani
Machelle Thompson
Dr. Daphne Young
Dr. Roger Zoorob

Education Mission Work Group

Dr. Daphne Ferguson-Young,
Chair
Dr. Susanne Tropez-Sims,
Vice Chair
Dr. Anthony Disher, Vice
Chair
Dr. Billy Ballard
Renee Bowen
Dr. G. Chaudhuri
Dr. C.K. Chen
Dr. Green Ekadi
Dr. Carol Freund

Dee Gardner
Dr. Tanya Gibson
Dr. P. Grant
Dr. Christine Minja-Trupin
Vicky Mosley
Dr. Walter Owens
S. Ranganathan
Dr. Linda Sander
Robert Stephens
Dr. S. Trochtenberg
Dr. James Tyus
Dr. Cassandra Ward
Dr. Charles Williams
Dr. Pamela Williams
Dr. Steven Wolff

Operating As One Meharry Work Group

Jim Powlus, Chair
Janet Caldwell, Vice-Chair
Steven Brady
Richard Briggance
Linda Buckley
Dr. Juanita Buford
Dr. William Butler
Dr. Peter Dolce
Jimmy Ensley
John Ford
Dr. Edwin Hines
Sherrie Holt
Lisa Johnson
Veronica Johnson
George Kelly
Todd McKee
Dora Moore
Dennis Saucerman
Hank Skelton
Marvelyn Thompson
Dr. Bernard Turner
Dr. Cassandra Ward

Recruitment and Retention Work Group

Janet Rachel, Co-Chair
Karen Lewis, Co-Chair
Dr. Samuel Adunyah, Co-Chair
Steven Brady
Dr. Cherae Farmer-Dixon
Jackie Harding
Christina Henderson
Dr. Patricia Matthews-Juarez
Trea McMillian
Allen Mosley

Dr. Henry Moses
Patrice Moss (Graduate)
Dr. Evangeline Motley
Stacey Nickens
Kimberly Peeler
Emile Pelotte
Carina Qualls
Dr. Charles Smith
Cheryl Thomas
Justin Turner (Medicine)
Robin Turner (Dental)
Tamara Walk
Enola Walton
Linda Witt
Frances Wright

Research Mission Work Group

Dr. James Hildreth, Chair
Dr. Hubert Rucker, Vice Chair
LaMel Bandy-Neal
Dr. Clivel Charlton
Lewis Ethridge
Ruth Johnson
Dr. Paul Juarez
Dr. Maria Fatima Lima
Ayanna Moore
Dr. John Murray
Dr. Melvin Polk
Robert Poole
Dr. Valerie Montgomery Rice
Candace Shaifer
Harry Taylor
Dr. Marilyn Thompson
Dr. Angel R. Torres
Dr. James Townsel
Dr. Fernando Villalta
Dr. Tanya Wright
Dr. Roger Zoorob

Service Delivery Work Group

Lori Donnell, Chair
Veronica M. Johnson, Co-
Chair
Shanita Brown
Dr. Reginald Coopwood (NGH)
Ivanetta Davis-Samuels
David Floyd
Brad Gandy
Patrick Johnson
Osei Mevs
Karz Miller

Service Delivery Work Group

(continued)
Dr. Norman Jones (Board of Trustees)
Elnora Larkin
Dr. Bernard Ray
Dr. William Scales
Robert Stephens
Magdalyn Thomas (Student)
Princess Thomas (Student)
Linda Witt

Data/Reference Team

Dr. Juanita Buford, Chair
Fatima Barnes
Shanita Brown
Dr. C.K. Chen
Carmela Douglas-Ezell
Erika Graves
Roxie Johnson
Natalie Stevenson

Executive Management Team

Dr. Wayne Riley, President
Dr. Angela Franklin
LaMel Bandy-Neal
Dr. William Butler
Dr. Maria Lima
Robert Poole
Benjamin Rawlins
Dr. Valerie Montgomery Rice



Participants in the Strategic Planning Retreat held at the Vanderbilt Center for Better Health on January 23, 2008.

**Appendix B
Meharry Medical College
Revised SWOT Analysis**

STRENGTHS	WEAKNESSES
<ul style="list-style-type: none"> • National reputation • Proud history • Quality graduates • Mission-focused graduates • Dedication and commitment of faculty and staff • Strong applicant pool; attract many students, yet accept few • Amazingly resilient • Nurturing and supportive environment • Take and educate academically/ economically diverse student population • “Service-oriented” quality and character of physicians, dentists, and biomedical scientists • Graduate 150 new racially and economically diverse MD, DDS, PHD • 	<ul style="list-style-type: none"> • Relatively low faculty numbers (.3 faculty/ student) • Aged physical plant (approximately 48 years) • Low faculty salaries (approximately 25th to 59th percentile) • Awareness/visibility/undefined (marketing MMC in Nashville) • Under resourced relative to goals and vision and similar sized academic health science centers •
OPPORTUNITIES	THREATS
<ul style="list-style-type: none"> • +/- ability to raise \$10M in capital for growth • Reduce collateralization of current buildings • Untapped philanthropic opportunities: Alumni, friends (insurance, estate financial planning), foundations, and new clinical initiatives • Establish new degree programs: Physician Assistant; professional masters (bioinformatics, biotech); Increase post-bac (+MS Medical Sciences; foreign post-bacs); DDS for foreign dentists • Sell Herman Street Apartments • Leverage teaching post- and pre-bac opportunities (grad students and post-docs instead of faculty) • Expand electronic teaching nationally and internationally • 	<ul style="list-style-type: none"> • Loss of Nashville General Hospital at Meharry • Loss/reduction in state funding • Loss/reduction of key federal funding sources • General economic uncertainty (donors aging, financial market instability) • Constricted ability to borrow compared to cohort institutions •