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**Baldrige Report**  
Accountability Report Transmittal Form  
2006-2007

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**Agency Name:** Medical University of South Carolina

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## Section I. Executive Summary

### 1. MUSC's stated purpose, mission, and values.

Chartered in 1824, the Medical University of South Carolina has expanded from a small private college for the training of physicians to a state university with a medical center and six colleges for the education of a broad range of health professionals, biomedical scientists and other health related personnel. Since its inception the University has awarded more than 25,500 degrees. MUSC is a health science center comprised of colleges of Dental Medicine, Graduate Studies, Health Professions, Medicine, Nursing, and Pharmacy, and a 600-bed referral and teaching hospital. It awards fully accredited bachelor degrees, master degrees, first professional degrees, and doctoral degrees. The University has Board-approved Mission, Value and Vision Statements, an abbreviation of which follows:

**Mission Statement.** The Medical University of South Carolina (MUSC) is a public institution of higher learning, whose purpose is to preserve and optimize human life in South Carolina and beyond. The University fosters an environment for learning and discovery by educating health care professionals and biomedical scientists, conducting research in the health sciences, and ensuring comprehensive health care. As a publicly supported academic health center, the University pursues this mission within the framework of two core beliefs:

- Education, patient care, and research are complementary activities in which excellence in one expands the capacity of the others to achieve the ultimate goal of being at forefront in each;
- All citizens should have access to basic health care services, and because health care investments early in life result in the greatest gains, the highest priority is to support expanding coverage to all children.

**Value Statement:** The values of the University are reflected in the following established goals:

- Help the citizens of South Carolina achieve optimum physical and mental well being;
- Educate professionals who will deliver health care in the most effective way with respect, compassion, and cultural sensitivity;
- Improve access to health care for all citizens, but particularly underserved populations, by ensuring an adequate number of providers for all communities;
- Commitment to educating professionals who will deliver health care in the most effective way (i.e., delivered in a respectful, compassionate, and culturally sensitive manner).
- Support optimal health care through emphasis on training interdisciplinary teams from a wide-range of health care professionals.
- Stress innovation and advancement of knowledge in all efforts by hiring faculty who are on the leading edge of research and development and introducing emerging technologies with expanded applications;
- Advocate and support promotion and advancement of successful faculty, regardless of principal area(s) of their contribution;
- Collaborate with other organizations, expanding interdisciplinary capacities, while lending our unique strengths for partners to expand their research capacity;
- Play a crucial role in the competitive success of our state by training a technologically sophisticated workforce and by translating intellectual capital from our students and faculty for commercial development;
- Hold all employees accountable to the highest standards of personal and professional conduct;

- Maintain a welcoming and supportive campus environment for all persons regardless of race, ethnicity, gender, or national origin.

**Vision Statement.** The University is on the threshold of one of the most defining periods in its long history. Once distinguished primarily in the educational arena, the University now is recognized for patient care, biomedical research, and community service. Looking toward the future, the University is poised to make even greater contributions including:

- Making educational offerings more broadly available with special attention to incorporating innovative technology to support an interdisciplinary educational environment that is increasingly diverse and emphasizes high standards of personal conduct;
- Meeting the burgeoning demand for additional clinical services by expanding hospital facilities, initially in procedurally intensive areas, and eventually by replacing the current hospital—continuing to supply the most advanced referral center care, with an emphasis on patient safety, clinical innovation, and operational efficiency;
- Building additional areas of scientific leadership with support from the endowed chairs program funded by the Education Lottery and collaborating with sister research universities collaborations to leverage resources for the greatest possible scientific and economic impact;
- Improving the campus by purchasing additional land; constructing modern, efficient, and attractive buildings; and facilitating traffic flow and parking without sacrificing any the integration of the various mission components;
- Above all, maintaining our commitment to work for the public we serve to assure a healthy start for the children of South Carolina, help seniors achieve quality and longevity in their lives, and eliminate health disparities at all ages (build hope, improve lives, and serve society).

## **2. Major Achievements of FY 06/07.**

A more detailed discussion of achievements is included in Section III, Category 7.6. Following are some brief highlights:

- Successful reaffirmation of accreditation site visit by Southern Association of Colleges and Schools (SACS) including development of a Quality Enhancement Plan focused on promoting interprofessional education, research, and patient care
- Began construction of James B. Edwards College of Dental Medicine
- Achieved candidate status for accreditation of SC College of Pharmacy
- Finalized plans/financing for interprofessional Simulated Clinical Laboratory on campus and opened a sister laboratory in Greenville
- Completed schematic design of the Drug Discovery Building and a feasibility study for the Cancer Genomics/Bio-Engineering Building
- Secured funding for three new Centers of Economic Excellence in Stroke, Tobacco Control, and Hospital Design
- Exceeded a record with \$190 million in extramural grant funds
- Grew hospital admissions by 7%
- Maintained positive operating financial margins in hospital and faculty practice
- Maintained construction of Ashley River Tower ahead of schedule
- Entered initial phase of \$300 million, 5-year, institution-wide Capital Campaign

- Raised \$63 million in private funds and increased MUSC Foundation total assets

### **3. Key Strategic Goals for FY 06/07 and Future Years.**

The key strategic goals are presented in detail in Section III, Category 2. Following are some highlights:

- Secure SACS reaffirmation of accreditation
- Begin implementation of Quality Enhancement Plan focused on interprofessional efforts
- Secure \$200 million in extramural grants
- Submit application for Clinical and Translational Science Award
- Submit Core Grant for Hollings Cancer Center
- Complete construction planning for Drug Discovery Building
- Dedicate Ashley River Tower, begin clinical operations there
- Continue to grow hospital admissions by 7%
- Continue implementation of initial clinical service lines and add four additional lines
- Launch marketing/branding campaign
- Launch public phase of \$300 million fund-raising campaign and raise \$65 million in private support
- Grow MUSC Foundation total assets to more than \$300 million

#### **Key Strategic Objectives**

The University has set five key strategic objectives that are discussed in detail in Section III, Category 2. These are:

- Successfully open phase 1 of the new hospital and continue planning for phase 2 hospital replacement (with a related objective of becoming national leader in clinical effectiveness and patient safety)
- Integrate interprofessional education, research, and practice
- Meet future research needs including three new research buildings, specialized equipment; renovations/upgrades of existing facilities, and additional research faculty
- Conduct successful \$ 300 Million MUSC Capital Campaign
- Enhance Statewide Collaborations

### **4. Opportunities and Barriers to Achieving Mission.**

The most significant challenge continues to be budgetary--responding effectively to decreasing State funding percentages while also assuring steady progress towards achieving strategic goals/objectives and, thus, vision and mission in an ever changing environment.

Perhaps the most significant opportunity for achievement will result from innovative collaborations with our State research universities (i.e., Clemson and the University of South Carolina) as well as partnerships with teaching hospitals in Columbia, Greenville, and Charlotte.

### **5. The Use of the Accountability Report Used to Improve Organizational Performance.**

The process and inter-team collaborations required to create the Accountability Report contributed directly to improving future organizational performance through the following initiatives:

- Disseminating and reinforcing critical institutional knowledge to all administrative, educational, and research levels about overriding University needs, goals, strategies, progress, accomplishments, and related parameters
- Establishing more clearly defined and universally understood, accepted, and pursued goals
- Strengthening existing teamwork and building new teamwork relations which, in turn, will improve the ability to assign University resources to the most vital needs

**Section II – Organizational Profile**

**1. The Medical University of South Carolina’s main educational programs, offerings, and services and the primary methods by which these are delivered.**

The Medical University is an academic health sciences center composed of colleges of dental medicine, graduate studies, health professions, medicine, nursing, and pharmacy. Post-doctoral residency programs are offered in dental medicine, medicine, and pharmacy. Postgraduate continuing education programs are also provided for those disciplines requiring annual practitioner-educational updates for licensure. The University’s medical center (Medical University Hospital Authority) provides a multitude of health-care services for the citizens of South Carolina and serves as an experiential training site for students and residents.

Programs leading to undergraduate degrees (B.S.), first professional degrees (M.D., D.M.D., and Pharm.D.), and graduate degrees (M.S., Ph.D.) are provided primarily through the traditional lecture format, enhanced with small-group instruction, and supplemented with on-line resources, and clinical and laboratory experience.

**2. Key student segments, stakeholder groups, and market segments, as appropriate, and their key requirements/expectations.**

The vast majority of the graduates from the University are competent and skilled health-care practitioners in their chosen fields. The graduate programs prepare individuals to engage in professional pursuits directed toward research and the discovery of new knowledge, to pursue careers in higher education settings to prepare practitioners and scientists, or to secure positions in health care administration.

The stakeholders are the patients of South Carolina and across the country who benefit directly from the health care services provided by our graduates or, indirectly, from the research and teaching carried out by scientists and academicians completing our graduate-degree programs.

**3. Operating locations.**

The University campus is located in Charleston. The institution maintains a presence on the campus of the University Center in Greenville but does not offer any degree programs at this time. The Medical University Hospital Authority operates a number of ambulatory care clinics throughout the state of South Carolina.

**4. Number of employees segmented by faculty and staff or other appropriate categories.**

*Table 2.4-1. MUSC Employees as of September 5, 2007*

<b>Employees</b>	<b>2007</b>
<b>Full time</b>	
Classified	1522
Faculty	1069

Post-Docs	190
Research grants	355
Residents	596
Students	111
Unclassified non-faculty	30
<b><i>Total Full time</i></b>	<b>3873</b>
<b>Part time</b>	
Classified	50
Faculty	255
Post-Docs	5
Research grants	66
Residents	7
Temps & students	589
<b><i>Total Part time</i></b>	<b>972</b>
<b>TOTAL</b>	<b>4845</b>

**5. The regulatory environment under which the University operates.**

The Medical University of South Carolina operates under the authority of the S.C. Commission on Higher Education, and the governing body of the institution is a Board of Trustees. All professional degree programs with national professional organizations have earned accreditation. Regional accreditation for the University is granted through the Commission on Colleges of the Southern Association of Colleges and Schools.

**6. The University’s governance system (the reporting relationships between the governance board/policy making body and the senior leaders, as appropriate.**

The Board of Trustees is the governing body of the institution, and the President reports directly to the Chairman of the Board of Trustees. An appropriate number of vice presidents report to the President. The Deans of the various colleges report to the Vice President for Academic Affairs and Provost.

**7. MUSC’s key suppliers and partners.**

- Bank of America
- Dell Marketing LP
- Varian Medical Systems
- Healthcare.Com
- M B Kahn Construction Company Inc.
- Medical University Hospital Authority
- MUSC Facilities Corporation
- MUSC Foundation
- MUSC Foundation for Research Development
- NBM Construction Company Inc.
- South Carolina Electric and Gas Company
- University Medical Associates
- US Bank
- FIA Card Services

**8. Key competitors (other educational systems that directly compete for the same type of studies, research grants, etc.).**

The University is one of three research universities in South Carolina. The University of South Carolina in Columbia and Clemson University engage in research endeavors similar to those at the University. These two institutions, therefore, would be considered key competitors for research funding.

**9. Principal factors that determine the University's competitive success and the key changes taking place that significantly impact this competitive situation.**

The University is unique among institutions of in South Carolina in that it is devoted exclusively to health sciences education and research. In addition, it is the only university in the state to maintain a tertiary care hospital and ambulatory care facilities on its campus. It is this atmosphere of inter-professional education and training, along with convenient access to patient care that provides this institution with a competitive edge in recruiting students and faculty.

With the completion of the University's new hospital in 2007-2008, patients will be admitted to a sophisticated health care facility where they will receive technologically advanced health care in the most efficient and effective manner in comfortable surroundings.

In addition to teaching and patient care, the University has committed significant resources to the development of state-of-the-art research facilities on its campus. Over the past few years, the renovation of existing buildings and the creation of new research facilities have been instrumental in the University's success in recruiting world-class research scientists which, in turn, has allowed the institution to surpass other state research institutions in the level of funding, particularly from the National Institutes of Health.

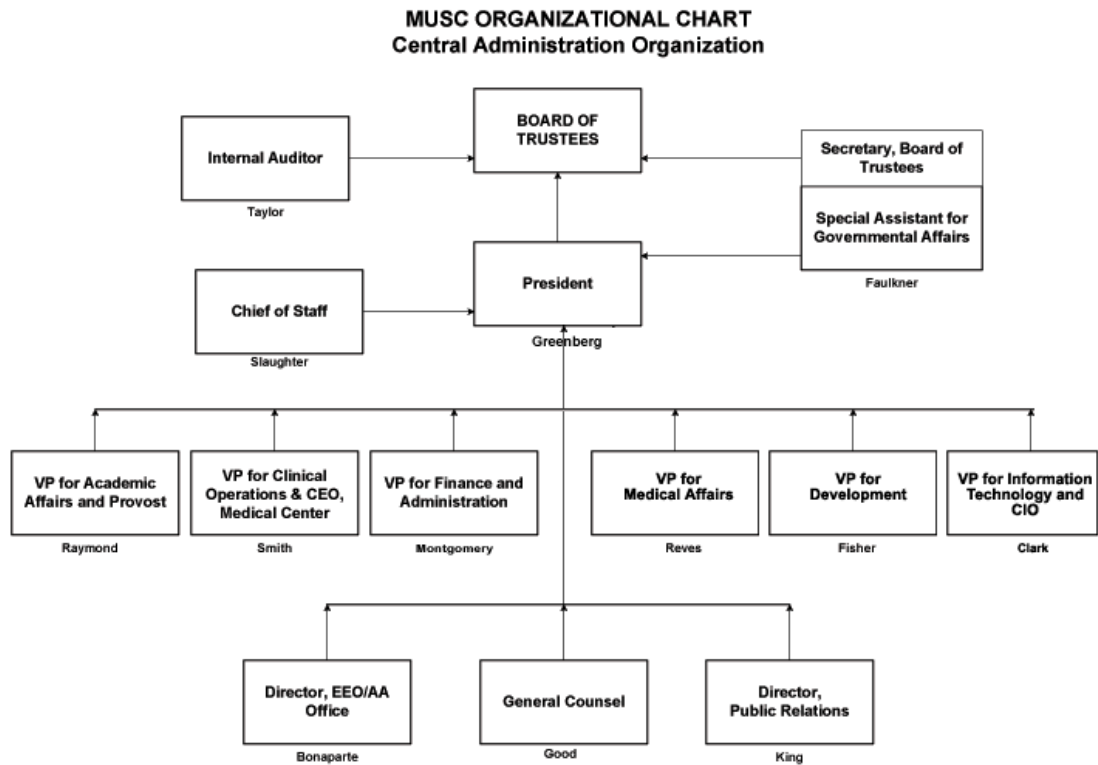
**10. Key strategic challenges (could include operational, human resource, financial, and community-related strategic challenges).**

- Continue to attract and retain talented, productive, and diverse faculty
- Launch operation in new Phase I hospital
- Implement digital clinical information system
- Plan and finance Phase II of new hospital
- Assure affordability of education
- Address substandard educational spaces
- Construct additional research space
- Build statewide collaborative programs
- Complete successful capital campaign
- Accommodate to reduced state support
- Continue to address residual account deficits
- Continue to address deferred maintenance

**11. MUSC's performance improvement systems.**

MUSC uses an integrated planning model to initiate and respond to evaluation processes. A Strategic Plan guides goals and initiatives, which are funded through an annual budget process that relies on outcomes assessment and plans that are regularly adapted to achieve the University's Mission.

12. Organizational Structure. {<http://www2.edserv.musc.edu/president/chart.htm>}



13. Expenditures/Appropriations Chart.

**Accountability Report Appropriations/Expenditures Chart**

**Base Budget Expenditures and Appropriations**

Major Budget Categories	FY 05-06 Actual Expenditures		FY 06-07 Actual Expenditures		FY 07-08 Appropriations Act	
	Total Funds	General Funds	Total Funds	General Funds	Total Funds	General Funds
Personal Service	\$221,363,214	\$55,424,349	\$214,255,674	\$62,810,072	\$267,737,854	\$70,936,519
Other Operating	\$204,253,555	\$15,854,060	\$243,763,871	\$31,119,163	\$229,114,624	
Special Items	\$3,115,675	\$539,088	\$3,249,217	\$539,088	\$3,761,958	\$1,051,829
Permanent Improvements						
Case Services						
Distributions to Subdivisions						
Fringe Benefits	\$53,413,814	\$14,089,209	\$52,772,415	\$16,080,494	\$42,042,288	\$17,493,549
Non-recurring	\$2,000,000	\$1,500,000	\$10,045,904	\$10,045,904	\$10,200,000	\$10,200,000
<b>Total</b>	<b>\$484,146,258</b>	<b>\$87,406,706</b>	<b>\$524,087,081</b>	<b>\$120,594,721</b>	<b>\$552,856,724</b>	<b>\$99,681,897</b>

**Other Expenditures**

Sources of Funds	FY 05-06 Actual Expenditures	FY 06-07 Actual Expenditures
Supplemental Bills	\$1,500,000	\$10,045,904
Capital Reserve Funds		
Bonds		



## 14. Major Program Areas Chart.

Activity Number	Activity Name	Description	Expected Results	Outcome Measures
573 - 584	Instruction: Colleges	The university provides first professional, graduate and undergraduate education in health profession and science programs.	Provide health and science education and training that prepares students to competently serve the state's health professions and sciences needs.	As a tertiary and quaternary educational institution that AHC's encompass, the majority of our students are enrolled as first professional or graduate students. The graduation rates for the various professional colleges are greater than 90% and almost without exception the students must pass licensure exams to graduate or to enter their profession. Graduate students have no professional program certification and their time to graduation is dependent not on credit hours but upon the consent of their faculty advisory committee. In both events, their "employment" is usually to a more advanced educational/training environment outside of MUSC called residencies or fellowships.
586	Research	The university provides an environment for life long learning and discovery both in health care and in the health sciences.	Advance the knowledge of health sciences for the citizens of South Carolina and the nation, in addition to keeping our instructional focus contemporary.	Amount of sponsored research and number of collaborative arrangements with other higher education institutions.
587	Public Service	The university provides non-instructional services benefiting individuals and groups within our community.	Improve our value to the state citizens by forming collaborative relationships and providing community services.	Students' hours of and faculty participation in community service (e.g. MUSC Gives Back, Operation Sugar), inclusion of student experiences in the community embedded in required courses, and staff community service efforts.
588	Public Service - Diabetes Center	The diabetes initiative develops and implements a comprehensive statewide plan of community outreach programs, health profession education, and diabetes surveillance.	Provide tools for the management of diabetes mellitus for the citizens of South Carolina.	Reduction in severe complications and cost burdens for South Carolinians who suffer from diabetes mellitus.
589	Administration	This activity supports the entire institution and includes executive management, fiscal operations, human resources, information services, public safety, risk management and academic support to include library services.	Improve the value of the university by providing a productive and effective infrastructure overseeing general university functions	Adoption of Best Management Practices, assessing performance relative to peer and national benchmarks with the goal of improved efficiency and effectiveness, and meeting national accreditation standards (in Risk Management and Public Safety)
590	Student Services	The university provides and supports programs to address student specific needs. Includes enrollment services, financial aid, student wellness center, office of diversity and other related services.	Improve the value of the university by contributing to the student's emotional and physical well-being and to their intellectual, cultural, and social development.	Student well being is assessed by a variety of measurements; includes student exit interviews, alumni surveys, and accreditation reports and on-site reviews.
591	Operation & Maint of Plant	The university operates plant facilities to manage the operation and maintenance of university buildings and grounds.	Improve the value of university by providing a healthy, safe and secure environment for students, faculty, staff, patients and visitors.	Campus safety reports, measure of maintenance to buildings, and reduction in deferred maintenance

592	Scholarships & Fellowships	The university provides opportunities for students to receive scholarships and fellowships which contribute in funding their education expense. In addition, the university administers state, federal, and donor grant and scholarship funds.	Assist students in meeting their financial obligation for advanced education and training.	Awards of scholarships and fellowships and increase in awards
593	Auxiliary (Parking)	The university operates a parking system which provides and manages parking for students, faculty, staff, patients and visitors.	Improve the value of university by providing adequate, affordable and accessible parking.	Customer surveys, number of customer concerns and comments, efficiency of daily parking operation (decrease in wait for service)
1565	Rural Dentist Incentive	Established with the goal of enhancing dental services for South Carolina citizens by insuring the location of licensed dentists in rural areas of the state and in the faculty at MUSC. Proviso 5M3. These funds are pass through to AHEC.	Increase the number of dentists who practice in rural and underserved communities of South Carolina and at MUSC's College of Dental Medicine.	Convene the Rural Dentist Board and establish policies, procedures and guidelines for the program's operation. Future long-term goals include numbers of incentives awarded and retention rates.
1566	Hollings Cancer Center	To set up and fund a statewide network of clinical cancer research and update the mobile health unit which will take part in the research effort. Proviso 73.17	A Statewide Research Network with ten members enabling individuals throughout the state to take part in the Hollings Cancer Centers Clinical Trials.	The HCC's clinical cancer center currently has 50 therapeutic enrollments on trials. We hope to increase to 120 in year one.
New	College of Dental Medicine	Additional funding for the proposed College of Dental Medicine Building	This building will house all activity related to the college	Promote growth for the College of Dental Medicine

### **Section III – Elements of Malcolm Baldrige Award**

#### **Category I – Senior Leadership, Governance, and Social Responsibility**

The Medical University’s continuous improvement efforts require robust, visionary, and pragmatic leadership. The President and his leadership team continuously examine and evaluate practices and procedures throughout the University and Hospital Authority to address the impact of internal and external factors which promote or impede on-going improvement. This is accomplished through attention to formal and informal feedback processes, the most obvious indicators of which are increasing numbers of caring, compassionate, ethical, and proficient health care professionals and creative biomedical scientists for the citizens of South Carolina and beyond.

#### **1.1 How do senior leaders develop and deploy MUSC’s vision and values throughout the leadership system, to all faculty and staff, to key suppliers and partners, and to students and stakeholders, as appropriate? How do their personal actions reflect a commitment to the organizational values?**

Under the authority of the Board of Trustees for the Medical University and the Hospital Authority, the President and his executive leaders set, deploy, and communicate short- and long-term goals and direction through a variety of processes.

The President conducts an annual agency head evaluation in compliance with the South Carolina Agency Head Salary Commission. This document reports on the President’s progress in achieving specific performance objectives which enables the President and Board of Trustees to agree on expected outcomes

and when these outcomes have been satisfactorily achieved. The number of performance objectives range from five to six annually. In addition, the President carries out a performance improvement effort consistent with the criteria of the Malcolm Baldrige National Quality Award. The process begins with the President submitting a planning document which specifies the performance objectives and continuous improvement effort to be accomplished during the year. At the conclusion of the year, the President prepares a written narrative describing his performance on each objective and the continuous improvement efforts and reviews them with the Board of Trustees. Finally, an Agency Head Evaluation Survey is completed by each member of the Board of Trustees and is submitted along with the written narratives.

The President employs several mechanisms to monitor and evaluate progress toward performance objectives and the larger strategic plan for the University and Hospital authority. He conducts weekly leadership meetings with vice presidents and his chief of staff to review and assess institutional direction and performance on a week-to-week and long-term basis. These meetings are typically two hours in length with half-day retreats on a quarterly basis and allow the executive leadership team time to share information, progress, and concerns. In addition, the President conducts monthly President's Council meetings attended by the vice presidents, faculty leaders, and other executive staff members. President's Council meetings also extend two hours in length, facilitate information dissemination, and serve as a formal administrative body for new initiatives reviews, institutional policy reviews, financial updates, and recommendations for action by the Board of Trustees. President's Council meetings also foster enterprise-wide collaborative working relations and serve as a venue to recognize challenges and accomplishments.

President's Council members are directly linked with program operations; they are charged with analyzing, formulating, and assessing improvement plans and evaluating the organization's performance on key measures. Key assessment area operations include the following:

The President conducts annual performance evaluations with President's Council members reporting to him. This process consists of written self-assessments of strengths and weaknesses and goal statements for the coming year. This process also includes a face-to-face meeting between the President and the Council member to discuss his or her degree of success in meeting expectations and action planning for addressing needs for improvement. The plans are reviewed and updated on an as-needed basis. In a parallel process, Council members also document the goals and accomplishments for their areas of responsibility. While self-assessments and listings of goals and accomplishments may overlap, the self-evaluation is a more personal assessment of the individual's performance during the past year.

A similar process is carried out between President's Council members and individuals reporting to them. Council members establish expectations for employees reporting to them through contractual language and position descriptions for which measurable ratings are applied on an annual basis. Individual and unit reviews and updates are accomplished through regularly scheduled and individually requested meetings. Formal evaluations are conducted at the end of each year to review success and opportunities for improvement.

Throughout the year, President's Council members work with colleges, departments, units and offices throughout the enterprise to provide guidance in day-to-day operations.

The flow of communication throughout the institutions is reinforced by the related councils and groups (e.g. Deans' council, Dean's group, and Service Excellence Teams) that reach area offices. The area councils, groups and teams meet regularly to review strategies, performance, and facilitate consistent communication. Local issues are discussed and feedback on institutional successes and concerns are addressed. In this way, the cycle of information continues to loop throughout the organization.

In addition, periodic Town Hall Meetings are hosted by the President and member of his executive leadership team to inform the community about current programs, future programs and opportunities, the financial state of the institution, and progress toward short-term and long-term goals.

### **1.2 How do senior leaders create a focus on action to accomplish the organization's objectives, improve performance, and attain your vision?**

At least annually, University leaders set short- and long-term goals for upcoming periods as well as compile significant accomplishments resulting from prior set goals and objectives. These are derived from a wide array of both formal and informal sources that include the GAPP process (see 2.1 below for details; <http://academicdepartments.musc.edu/vpfa/finance/budget/index.htm>), regular meetings of senior leadership (including the Deans' Council and President's Council), input from Faculty Senate and Student Government Association, special studies and plans (i.e., Hospital Replacement), open meetings with faculty and staff (Town Halls), and external forces requiring accommodation (i.e., available State funds, changing Federal rules/regulations, and local/national economies). All ultimately stem from the periodically updated University Mission and related vision and value statements.

These goals/accomplishments are compiled and drafted each July by senior leaders, and finalized each August by the University Board of Trustees. They then are assimilated into the University Strategic Plan as well as used in the Board's annual performance evaluation of the University President who, in turn, uses unit goals/accomplishments in the annual performance evaluations of the Vice Presidents and Provost. They are also widely disseminated internally (i.e., Board minutes, Town Meetings, web pages, and campus publications including the weekly newspaper, *CATALYST*) and externally (i.e., media releases/interviews, annual reports, presentations to Legislature and Commission on Higher Education). The updated versions are also the basis for annual legislative priorities set by the University.

While these remain the major frame of reference for critical decisions and follow up communications by senior leaders, the University also stays alert for unexpected opportunities that fall within Mission parameters, developing and processing these in a timely manner for Board ratification when appropriate. From time to time the key University leadership schedules a special retreat meeting with the Trustees to deal with goals and objectives in even more depth as well as insure that all parties are fully knowledgeable and in accord. The most recent of these was held this past June.

### **1.3 How do senior leaders promote and support an environment that fosters and requires: legal and ethical behavior; and, fiscal, legal, and regulatory accountability? How are these monitored?**

The President and his leadership team establish and promote a strong focus on ethical action through ongoing emphasis on the institution's mission of preserving and optimizing human life in South Carolina and beyond, and by providing an environment for learning and discovery through education of health care professionals and biomedical scientists, by research in health sciences and by provision of comprehensive health care. Essential to mission accomplishment are required standards of behavior for all MUSC employees. They include a commitment to providing excellence in patient care, teaching, and research in an environment that is respectful of others, adaptive to change, and accountable for outcomes. Each employee is expected to practice these standards of behavior for the benefit of colleagues, the betterment of MUSC, and the customers served by the institution. The mission statement and behavior standards are displayed throughout the institution on desktop computers screens, stationary and in training environments.

In addition there are the very specific role models that must be set by University leadership as required in law and internal policy. All MUSC senior leaders, including the Board of Trustees, are considered public officials and fully subject to extensive provisions of the State of South Carolina Ethics, Government, Accountability, and Campaign Reform Act as administered by the South Carolina State Ethics Committee

and its published Rules of Conduct. This law has been described as the strictest public ethics law in the United States and prohibits any and all public officials from acting under any form of unethical activity or undue external influence subject to prosecution by the Ethics Committee and SC Attorney General. Each public official is required to annually submit a full disclosure of economic interests which is a public document. In addition a University Compliance Office was established to guide and oversee institutional integrity and requires that a University Code of Conduct be signed by all faculty and staff as well as every member of the Board. This code of conduct was retroactively signed by all on employees at the time issued, and has since been a required part of new employee induction. It was an outgrowth of the complexities posed to an academic health sciences center by ethical challenges of rapidly growing research integrity, technology transfer, and information technology laws and policies. A University web site is devoted to these issues and even includes a training and compliance page with relevant information. Ethical behavior and all levels of expected accountability are additionally specified in most key University policy documents including the Faculty Handbook, University Bulletin, University Student Handbook, and Student Handbooks of the various colleges. At all levels, the University is committed to, and expects no less than, the highest standards of ethical behavior and accountability. Ongoing vigilance by responsible University officials is strengthened through audits and special investigations when circumstances necessitate, with follow up as appropriate within several hearings and/or appeals mechanisms that have evolved over the year to insure full compliance with State and Federal ethics laws and regulations.

#### **1.4 How do senior leaders create an environment for organizational, faculty, and staff learning?**

In addition to the student educational environment, there are many learning opportunities at MUSC for faculty and staff. For faculty, there are continuing education opportunities, professional training courses, sabbaticals, and research opportunities. Also, the University promotes the use of mentoring programs by senior faculty to help junior faculty attain higher professorial positions. Most if not all of the colleges detail the steps and requirement for promotion and tenure. For staff, an array of learning opportunities exists in skill enhancement courses, credit courses, and orientation sessions. In addition, there are a variety of career services, library information systems, and information technology, to name a few, that are available to faculty and staff alike. MUSC also has a Center for Academic Excellence which staff, students and faculty have available to improve their communication skills.

#### **1.5 How do senior leaders promote and personally participate in succession planning and the development of future organizational leaders?**

Succession planning is emphasized at all levels and units within the organization. There are a number of different avenues in academia that can lead to positions of senior leadership. One unique means at MUSC is the Trustees Leadership Academy which is designed to develop leaders in medical education. The goals of the program are to provide the technical skills necessary for major leadership/management roles needed in academic medicine. For the most part, academicians receive little, if any, training to equip them for managing administrative roles they are expected to perform. The purpose of this program is to promote and prepare for succession of future senior organizational leaders such as deans and department chairs.

Each year, a select group of potential leaders are recommended by their respective deans to participate in the training program. Last year was the first entering class and the number of requests to participate was so large that the program expanded from the anticipated 12 to 16 faculty and staff. This year, the demand has been even greater and the Class of 2008 has 22 individuals enrolled. A cross section of faculty and staff was selected to participate. Each candidate comes forward with a project designed to improve the academic aims of his or her college or administrative unit. In addition, the program consists of three long weekend retreats dealing with legal issues, financial management and administrative skills.

**1.6 How do senior leaders communicate with, empower, and motivate all faculty and staff throughout the organization? How do senior leaders take an active role in faculty and staff reward and recognition processes to reinforce high performance throughout the organization?**

Motivating employees to develop their full potential is important to the continued excellence of the University. The University is dedicated to training and developing its students to become the best health care providers; by extension therefore, this goal applies to every faculty and staff member.

Managers and supervisors encourage their staff to attend training programs focused in part on counseling and evaluating employees to meet and exceed performance standards, and by inference, to motivate and empower them. Communication training programs are designed to give supervisors and managers the necessary skills to encourage and motivate employees.

Bonus incentive programs and other recognition and rewards programs are designed to recognize top performers. These programs assist the University in motivating employees to develop and realize their full potential.

Senior leaders of MUSC routinely meet with employees and students in Town Hall and other public forum meetings to keep constituents informed of the latest events as well as to provide information of the campus community's needs. These meetings are used, in part, to help employees understand their role in helping formulate, but also in shaping and enhancing the effectiveness of the organization.

**1.7 How does MUSC evaluate the performance of its senior leaders and the governance board/policy making body? How do senior leaders use these performance reviews to improve their own leadership effectiveness and that of the board and leadership system?**

The South Carolina Budget and Control Board has established, through the Office of Human Resources, an Agency Head Performance Evaluation process that is used to evaluate the performance of the MUSC president of the institution. This process delegates overall responsibility for the performance evaluation to the MUSC Board of Trustees. The Board of Trustees works with the President in establishing the planning document upon which the President's performance will be evaluated, and the Trustees complete the evaluation at the end of the annual evaluation period. Both the planning document and the final results are submitted to Budget and Control Board's Agency Head Salary Commission for oversight purposes.

The Vice Presidents are evaluated by the President on an annual basis. That process is initiated by a self-assessment that covers key accomplishments of the past year, an assessment of strengths and weaknesses, and articulates specific goals for the coming year. The President discusses the self-assessment with each vice president and follows that meeting with a summary document that outlines the key points that emerge from the evaluation process.

The Vice President for Academic Affairs and Provost has an additional evaluation that is included in the annual faculty survey of their department chairs, college deans, and the Provost. The Office of Institutional Research and Assessment administers the Faculty Senate-designed survey and the specific responses regarding the Provost are submitted to the President. The results are incorporated into the annual evaluation discussion of the Provost and depending on the nature of the discussion, may be included in the Provost's Faculty Appointment Contract.

The Deans and the Associate Provosts are evaluated by the Provost on an annual basis. That process is initiated by a self-assessment that covers key accomplishments of the past year, an assessment of strengths and weaknesses, and articulates specific goals for the coming year. The provost discusses the self-assessment with each of his direct reports and follows that meeting with a summary document outlining the key points that emerge from the evaluation process. In addition, the Deans of every College and every Department Chair are evaluated every year by the faculty of their respective colleges. Each Dean meets

with each Department Chair in his or her college to review and share the results of the faculty assessment with the Department Chair.

**1.8 How does MUSC address and anticipate any adverse impacts of its programs, offerings, services, and operations? What are the key compliance related processes, goals, and measures? (Actual results should be reported in Category 7)**

The University's Strategic Plan provides for an avenue to assess "environmental" changes that could have an adverse impact on its overall mission and daily operations. This annual, and rolling five year Plan permits a serious review of likely changes and permits resource reallocation as needed and in a timely manner. An academic health sciences center is particularly vulnerable to reduction in federal funding as evident in the Balanced Budget Act of 1997, or in the limited funding from the National Institutes of Health, or from continued reduction in State funding. As a result, our institution has a variety of mechanisms to deal with adverse situations that may affect our operations; including hiring freezes as implemented several times over the past decade. Unfortunately, many of these measures may involve a reduction in force due to our limited operating margins.

**1.9 How do senior leaders actively support and strengthen the communities in which MUSC operates? Include how senior leaders determine areas of emphasis for organizational involvement and support, and how senior leaders, faculty and staff, and the organization's students contribute to improving these communities.**

The President and executive leadership team firmly support citizenship activities statewide and locally. Members of the executive leadership team are involved in civic organizations, advocacy organizations, task forces on health, and other community groups that can benefit from their expertise. The University and Hospital Authority provide outreach services through traveling clinics and mobile health vans, collaboration research with other universities, hospitals across the state. Moreover, MUSC is affiliated with various voluntary medical missions and the like at the national and international levels, thus contributing to community advancement in other areas of the United States and locations around the world.

MUSC Gives Back, a University Student Community Volunteer Program, increases the value of students' education at the University by promoting and encouraging community volunteer experiences that allow students to observe and address health care problems in the community they will ultimately serve. The College of Dental Medicine has an integrated student/faculty Community Outreach and Service program. Students and faculty participate annually in a variety of programs with student participation averaging 35 hours per third and fourth year student. Some of the programs include: Give Kids a Smile, Special Olympics, Overseas Mission Trips, East Cooper Community Center, and various dental extramural rotations.

The College of Graduate Studies encourages and provides many opportunities for students and faculty to be engaged in community outreach and service activities. Opportunities include: volunteering at the Charleston County Library, volunteering at the Diabetic Halloween Party and participating in the Sugar Free Fall Festival providing information that facilitates a healthy diabetic life style, collecting donations for the Jenkins's Orphanage and Crisis Ministries, and working with Habitat for Humanity.

The College of Health Professions also has a strong tradition of volunteerism as represented by the activities of its students. Last year, College of Health Professions' students logged more than 2,000 hours through activities sponsored by the MUSC Gives Back program. In addition, the Association of Black Health Professionals (ABHP) (housed in the college) raised funds for causes that included REACH 2010, College of Health Professions building memorial fund, and the ABHP Scholarship Fund.

The College of Pharmacy students also have a high level of participation in the activities sponsored by MUSC Gives Back. In the last academic year more than 70% of the students volunteered for community activities and logged in excess of 1000 hours.

The College of Medicine engages in a variety of outreach and service programs. These programs and activities are designed to provide patient-centered education about health care matters to the Charleston community and to provide service to populations in need. Activities have included: lectures, workshops, health care fairs and screenings, information booths at community gatherings, preventive services and health promotions, and activities specific to agency requests (e.g., Crisis Ministries, Habitat for Humanity, MUSC CARES, MUSC Gives Back).

The College of Nursing is heavily engaged with the community to provide a variety of service projects in which its students and faculty may be engaged such as MUSC Gives Back, REACH 2010, Health First, and, one of the college's most significant community outreach programs - the Hispanic Health Initiative.

In addition to the activities cited above, several colleges offer continuing education to their health care professionals. Among these are the College of Pharmacy and the College of Medicine.

As stated in its mission statement, the College of Pharmacy is dedicated to the lifelong learning of pharmacists throughout the state of South Carolina. The College of Pharmacy offers a variety of opportunities made possible both by programs directly produced by the College and by co-sponsorship with other organizations of programs relevant to pharmacists. The programs range from the relatively brief (1-2 hour) single topic "update" programs to comprehensive Disease Management Certificate programs. Additionally the televised Pharmacy Update series is available at the more than 20 statewide sites of the Health Communication Network.

The Office of Continuing Education in the College of Medicine offers continuing education activities including lectures, conferences, workshops, symposia, regularly scheduled Grand Rounds and other recurring events to licensed practicing physicians within the state of South Carolina, the clinical medical faculty of the MUSC College of Medicine, and physicians in Charleston and surrounding communities. These CE activities are also available to physicians participating in regional, national and international activities sponsored by the College of Medicine.

As noted above, all colleges participate in the MUSC Gives Back program. Overall, students contributed 12,467 hours over the past year (August 1, 2006 through July 31, 2007).

### **Section III –Category 2– Strategic Planning**

**2.1 What is MUSC's strategic planning process, including key participates, and how does it address:**

- a. Your organizations' strengths, weaknesses, opportunities and threats**
- b. Financial, regulatory, and other potential risks**
- c. Shifts in technology, student and community demographics, markets, and competition**
- d. Human resource capabilities and needs**
- e. The opportunities and barriers you described in the Executive Summary, question 4**
- f. Long-term organizational sustainability and organizational continuity in emergencies**
- e. Your ability to execute the strategic plan?**

The University just completed the third year of an ambitious initiative to combine strategic planning with budget development. The heart of this is the "Goals & Accomplishments Planning Package (GAPP)" which is included with and completed as part of the annual budget development process for every institutional unit.



GAPP is the foundation for a process conceived to establish a “living,” comprehensive, and budget-related Strategic Plan for the Medical University and its affiliates. The information generated is used in drafting the University Annual Report, in modifying the content of the rolling University Strategic Plan, and in compiling the yearly President’s Report of major goals and accomplishments to the University Board, S. C. Legislature, and the public. Another intentional and related outcome is the validity of results inherent from engaging a wide segment of the enterprise in establishing institutional priorities. Ultimately, these priorities drive the allocation of resources and leadership decisions.

Linking budgets to strategic plans, while common in the corporate sector, has proven difficult in higher education. A survey by MUSC of the 125 Association of American Medical Colleges’ schools concluded that only Northwestern University Feinberg School of Medicine actually links budgeting and planning. The "Northwestern Model" is the basis for the three-year implementation plan now underway at MUSC.

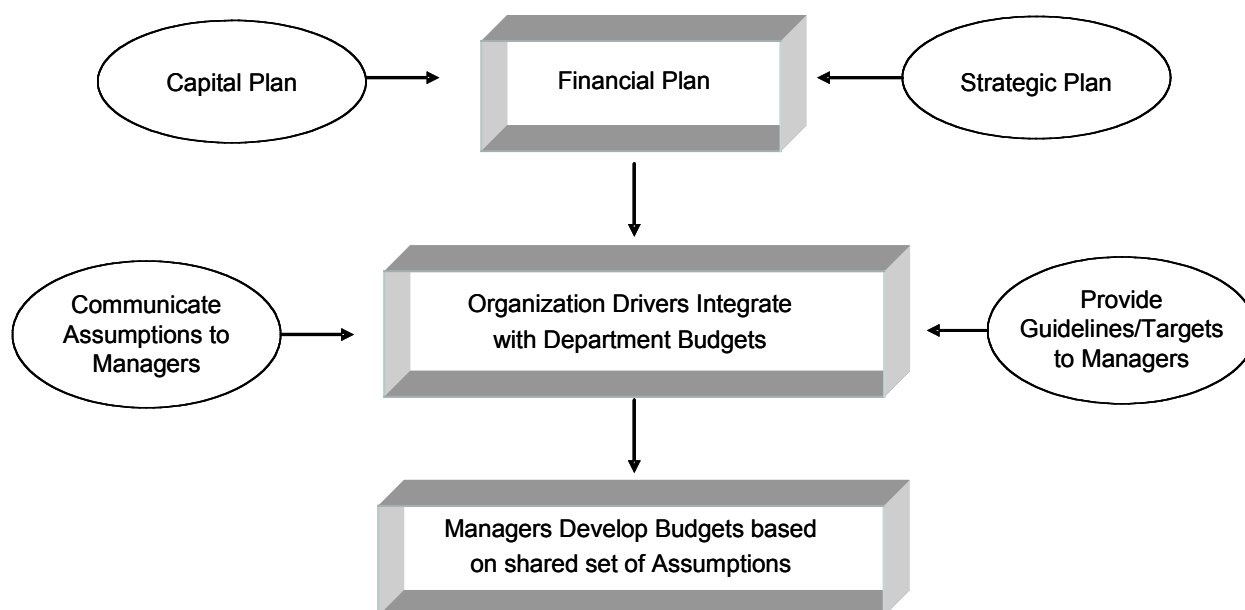
The first year focused on establishing the strategic goals for our academic and major administrative units. Year two focused on expansion to the remaining administrative units, articulation of completely new goals, delineation between goal-specific and goal-unrelated accomplishments, limiting numbers of goals submitted to a practical planning quantity, and establishing priority of strategic goals at both unit and University/Authority levels. In the final year of implementation, budget allocations for the subsequent fiscal year were based on a historic funding of existing programs, satisfactory accomplishments in meeting stated goals, and on winning the approval of new initiatives. These planning and budgeting co-processes will be under continual refinement to better fit the nuances of our governance system, management styles, and the organizational structure. They specifically address a wide range of essential future concerns including financial, regulatory, and other potential risks; shifts in technology, student and community demographics, markets, and competition; and institutional human resource capabilities and needs. Success of GAPP is critically important in building the rationale and consensus for major initiatives and advances at MUSC.

The annual eight-month process starts at the departmental or unit levels and proceeds to the very highest University levels. The following timeline was observed for the FY 2006-2007 Planning and Operational Budget:

Middle of February	Budget Analysts contact assigned units to discuss the Fiscal Year 2008 Budget Process. Includes reviewing the budget package, discussing the Time Line, assisting with completion of the package, etc. The Strategic Planning staff is available for assistance.
Late February	Distribute Planning and Budget package to Colleges and departments
Middle of March	Capital Budget package due back to Budget & Analysis Office
End of March	GAPP package due to Planning and Operational Budget package due to Budget & Analysis Office
March - April	Analysis of budget packages by the Budget & Analysis Office
Late April - Early May	Budget Hearings
Early May	Development of Budget Presentation by the Budget & Analysis Office
Middle of May	Budget Presentation review by the Chief Financial Officer and Vice President for Finance and Administration
Middle of May	Presentation of draft Fiscal Year 2008 Budget to the President

Late May	Budget Presentation review by the University Budget Committee
June	Presentation of draft Fiscal Year 2008 Budget to the Board of Trustees for tentative approval
Early July	Strategic Plan reviewed at President’s Retreat
Middle of July	Final Strategic Plan modifications presented to President’s Council
Early August	Presentation of the Fiscal Year 2008 Final Budget (adjusted for new funding) and modifications to the Board of Trustees for final approval

The following chart provides a process overview:



The Medical University of South Carolina exists in a volatile environment that includes State budgetary challenges, rapidly advancing technologies in health care and education, continually growing consumer expectations, constant regulatory changes, and even the environmental threats of hurricanes, earthquakes, and tornados posed by a low-lying coastal campus.

The most significant challenge faced is budgetary—specifically, the steadily dwindling budget portion drawn from State funding as well as the rapidly slowing growth to relevant programs of Federal support such as the National Institutes of Health. This has resulted in work started to prepare a financial plan which supports our strategic initiatives; eliminate unbudgeted deficit spending and develop long-term plans to retire old deficit accounts; develop time-line for reducing deferred maintenance by 30%; conduct feasibility study to replace campus; and implement an Enterprise Resource Planning System.

Less than 7 percent of MUSC’s operating budget comes from State appropriations. Tuition adds a few additional percentages, with all of the remainder earned through the hard work of faculty and staff and through private philanthropy. While an imperative to “pay our own way” puts great pressure on the institution, it does result in a great economic return for the State of South Carolina. For every \$1 of state investment, MUSC generates more than \$12 of direct economic activity. If one extrapolates the ripple effect of this impact in the housing, retail and service industries, the total economic impact is estimated to

approach \$3.5 billion. The inescapable reality is that the Medical University is one of the most significant contributors to the economy of South Carolina. The University expects to assume an even larger role in the fortunes of South Carolina as it shifts towards a “knowledge based” economy. Along with sister research universities, Clemson and the University of South Carolina, MUSC is aggressively recruiting scientists who will bring with them intellectual property that can be commercialized. One such start-up company, Argolyn Biosciences, was generated from research in the laboratory of Dr. Tom Dix in the College of Pharmacy. This year, Argolyn underwent a \$16 million round of venture capital financing, which is believed to be one of, if not the, largest venture capital deals for a South Carolina start-up.

The most significant opportunity for future achievement lies in relations with sister research universities Clemson (e.g., joint bioengineering program) and the University of South Carolina (e.g., joint pharmacy school), and the nearly completed Phase I hospital expansion.

Through the bioengineering alliance, Clemson has placed multiple faculty and graduate students on the MUSC campus, and plans are underway to build a joint facility in Charleston that will include engineering faculty and students from USC, Clemson, and MUSC. We are fortunate to have recruited into an endowed chair the former Senior Science Advisor to the National Institute of Biomedical Imaging and Bioengineering to spearhead this effort.

The South Carolina College of Pharmacy (SCCP) has been created by integrating existing separate colleges of pharmacy at USC and MUSC. The new school will continue to have educational and research activities on both campuses, while also adding an Upstate presence. The national accrediting body for pharmacy schools has given its initial approval and the first entering class has enrolled. Two endowed chairs have joined the pharmacy faculty to help establish the Drug Discovery and Development initiative that will be a central part of the new college. For the sake of the 2007 SACS Reaffirmation process, the MUSC campus of SCCP is considered a part of the MUSC enterprise.

We also have partnered with our sister teaching hospitals in Columbia, Greenville and Spartanburg through a newly created non-profit entity, Health Sciences South Carolina, to improve medical research, education, patient care and economic development. The Duke Endowment just made its largest health grant ever, a \$21 million award over three years, to this collaborative enterprise, and statewide programs are being developed through the state matching Endowed Chair Program. By partnering with our colleagues around the state, we are leveraging the resources of all of our institutions. This teamwork will help propel the state of South Carolina into a leadership position in the health sciences, giving renewed meaning to the MUSC motto: *Auget Largiendo*, “she enriches by giving.”

## **2.2 How do your strategic objectives address the strategic challenges you identified in your Organizational Profile? (Section II, question 10)**

The five key strategic objectives presented below are the priority items extracted from the longer list of strategic challenges as presented in Section II, Question 10. When combined with the overriding budgetary concerns, these challenges are recognized and addressed.

The attached Strategic Planning Chart summarizes the key strategies as well as the action plans associated with each. Being strategic in nature, many of these require immediate or year 01 actions as well as subsequent year actions necessary for completion. Following is a more detailed overview of the five key plans:

**Hospital Replacement (Phase I completion, and beginning of Phase II).** One of our most significant challenges over recent years has been to restore fiscal health to the University’s medical center. The Federal Balanced Budget Act of 1997 severely reduced payments to hospitals, and safety net hospitals like ours were some of the most adversely affected. We have steadily and firmly addressed this through an

innovative combination of organizational restructuring and operational improvements. These actions positioned the University to undertake a progressive replacement of its aging and largely outdated hospital facilities. Phase I of the new hospital, to be completed by the end of 2007 and opened in January 2008, is a 650,000 square foot, 160 bed state-of-the-art center for the diagnosis and treatment of heart, vascular and digestive diseases. It has been named the Ashley River Tower. Plans for Phase II are well underway, and we hope to launch construction within five years. This new educational/clinical laboratory opportunity has stimulated the ambitious goals of our medical center to become a national leader in clinical effectiveness and patient safety. Following are the goals and timelines to complete the process through the beginning of Phase II:

Accept Phase I on time/budget	1 yr
Increase clinical patient volume of 1%	1—3 yr
Increase clinical faculty by 50—100	1—3 yr
Create 3 Service Lines	1 yr
Service Line methodology in all major bsns units	1—3 yr
Enhanced margins resulting from Service Lines	2—4 yr
<i>US News &amp; World Report</i> ranking of 3 Service Lines	5 yr
Establish paperless medical record system	2 yr
Become national leader in “health outcomes”	3 yr
Create national model in “clinical effectiveness”	3 yr
Complete plans & make final build decision Phase II	3—5 yr

**Interprofessional Education/Research/Practice.** Today’s health care system is highly complex and involves the interaction and training of many different health care professions. The education system, however, is rooted in a tradition of discipline specific training. In order to maintain the highest quality of its graduates, our institution must adopt new and more inclusive approaches to training. To be effective today the health care, research, and related educational professionals must be equipped not only with their discipline specific knowledge and skill set, but must also be able to interact effectively with professionals from other health care, research, and education disciplines—and, such teamwork must start with training received while students. Recognizing this, MUSC has actively launched several major initiatives that include the statewide collaborative programs mentioned previously, a Teaching Academy, and Creating Collaborative Care (C<sup>3</sup>) which is the ambitious Quality Enhancement Plan (QEP) for the next decade that was approved this year by the Commission on Colleges, Southern Association of Colleges and Schools as part of MUSC’s reaffirmation of accreditation documentation. Following are the goals and timelines:

Continue building statewide collaborative programs	1—5 yr
Create statewide interprofessional curriculum	1—5 yr
Create statewide simulation collaborative	1—5 yr
Establish teaching academy	1—5 yr
Interprofessional curriculum per SACS QEP	5—10 yr
Classroom expansions/upgrades	1—10 yr
Additional interprofessional clinical learning sites	1—10 yr
Unified academic calendar	2 yr

**Future Research Needs.** MUSC has made truly significant strides over the past decade in doubling its external research funding support to \$ 190 million and becoming the state’s leading research university in context of such support. Based on this success and the continually growing capabilities of our research

team, MUSC has set an ambitious goal over the next decade of attaining the top quartile among all academic health science centers in total research funding. We feel this is more than justified by the unfortunate lead our state has in many serious diseases and other health conditions. The goals and timelines for this follow:

Add interdisciplinary research space	1—10 yr
Complete Drug Discovery Building	
Complete Design	Jan. 2008
Complete Construction	April 2010
Complete Bioengineering Building	
Complete Design	April 2009
Complete Construction	July 2011
Mixed Use Research Space w/City of Charleston	
Complete Design	April 2009
Complete Construction	July 2011
Patient oriented research tower	5—10 yr
Purchase specialized equipment	1—5 yr
Recruit 80 targeted research faculty	1—10 yr
Renovate/upgrade existing research space	2—6 yr
Obtain major programmatic grant support	1—5 yr
Clinical and Translational Science Award	2—4 yr
Renew Center of Biomedical Research Excellence (COBRE) grants	1—3 yr
Hollings Cancer Center: NCI P30	3—5 yr
Improve internal research support structure	1—4 yr

**Capital Campaign.** After several years of careful study, MUSC embarked this past year on the most extensive fundraising initiative in its history. The first capital campaign in almost 20 years is targeting a total of \$300M. With expected progressive declines in state support, this will be an essential component in responsible stewardship of the University missions and strategic goals followed to carry them out.

Following are the component goals and timelines:

Raise \$ 300 Million	1—4 yr
Campaign Kickoff	8 mos.
Implement Communication Plan	1—4 yr
Recruit Additional Staff	1—2 yr
Campaign Awareness Receptions	1—3 yr

**Statewide Collaborations**—As noted in the preceding narrative section, the University’s future potential will be significantly enhanced by more efficient and effective collaborations between existing organizations and entities throughout the State of South Carolina. Several examples of this follow.

- Health Sciences South Carolina. We have partnered with our sister teaching hospitals in Columbia, Greenville and Spartanburg through a newly created non-profit entity, Health Sciences South Carolina, to improve medical research, education, patient care and economic development. The Duke Endowment recently made its largest health grant ever, a \$21 million award over three years, to this collaborative enterprise, and statewide programs are being developed through the state matching Endowed Chair Program. By partnering with our colleagues around the state, we are leveraging the resources of all of our institutions. This teamwork will help propel the state of South

Carolina into a leadership position in the health sciences, giving renewed meaning to the MUSC motto: *Auget Largiendo*, “she enriches by giving.”

- **The South Carolina College of Pharmacy (SCCP).** SCCP was created by integrating existing separate colleges of pharmacy at USC and MUSC. The new school will continue to have educational and research activities on both campuses, while also adding an Upstate presence. The national accrediting body for pharmacy schools has given its initial approval and the first entering class has enrolled. Two endowed chairs have joined the pharmacy faculty to help establish the Drug Discovery and Development initiative that will be a central part of the new college. For the sake of the 2007 SACS Reaffirmation process, the MUSC campus of SCCP was considered a part of the MUSC enterprise.
- **CTSA Grant.** In recently launching the Clinical and Translational Science Awards (CTSA) program, a roadmap initiative established by the National Institutes of Health (NIH), MUSC is bridging the divide between scientific research and clinical care through a bold new initiative that promises to partner various areas of research and produce outcomes for the benefit of direct patient care. The CTSA program is considered by many to be the most significant strategic opportunity facing academic health centers in the last 50 years. By its participation, MUSC joins the ranks of a handful of top research hospitals ready to benefit from increased federal funding opportunities for collaborative and applied research between clinicians and scientists. At the core of the initiative is the realization that basic, translational and clinical investigators along with clinical practices, networks and industry must be brought together to improve the understanding and treatment of human disease. MUSC President Greenberg was quoted at a recent University Town Hall Meeting: *“The CTSA is the vehicle that the NIH is using to shape the future of clinical research, so it is critical that we position ourselves to compete successfully. Clinical and translational work is among the highest priorities at the Medical University and we see great opportunities with this new program to build upon our established successes.”*

A key element of this program and MUSC strategy is to capitalize on existing statewide collaborations so that MUSC research is shared and translated statewide through other teaching hospitals across the state and ultimately across the nation.

Health Sciences South Carolina	Ongoing
S. C. College of Pharmacy	Ongoing
CTSA Grant	Ongoing

**Overriding Strategic Objective.** A constant overriding concern, which might be considered a sixth key objective, is the ongoing as well as new budgetary challenges described earlier. These have been in constant play for the past decade; thus, dealing with them will be an integral component of each and every initiative undertaken to attain strategic objectives.

### 2.3 How does MUSC evaluate and improve its strategic planning process?

The primary University objective, as included in the University Mission Statement, is *to preserve and optimize human life in South Carolina and beyond -- in an environment for learning and discovery through education of health care professionals and biomedical scientists, research in the health sciences, and provision of comprehensive health care.* As the institution strives to build its resources and capabilities with rapidly advancing health and education discoveries and technologies, as well as make its own contributions

in related fields, the five current key strategic objectives/initiatives presented above in Section III.2.2 have the highest priority.

These five initiatives resulted from consideration of the summary results of the GAPP process which itself resulted in the following more extensive list of goals:

### **GOALS 2007-2008**

#### ***EDUCATION***

- Secure SACS reaffirmation of accreditation
- Begin implementation of Quality Enhancement Plan focused on interprofessional efforts
- Construct interprofessional clinical simulation laboratory
- Continue construction of Dental School building
- Continue integration of SC College of Pharmacy, including further development of Greenville site

#### ***RESEARCH***

- Secure \$200 million in extramural grants
- Submit application for Clinical and Translational Science Award
- Submit Core Grant for Hollings Cancer Center
- Recruit endowed chairs in approved Centers of Economic Excellence
- Complete construction planning for Drug Discovery Building
- Secure funding for additional Centers of Economic Excellence
- Begin implementation of “Light Rail” data transmission capacity with partner institutions
- Continue development of Health Sciences South Carolina and implementation of Duke Endowment grant

#### ***CLINICAL***

- Dedicate Ashley River Tower and begin clinical operations there
- Implement computerized physician order entry and other core clinical information systems
- Continue to grow hospital admissions by 7%
- Continue implementation of geographically distributed ambulatory care
- Continue implementation of initial clinical service lines and add four additional lines
- Continue MUSC Excellence initiative
- Maintain positive operating margin
- Launch marketing/branding campaign

#### ***GENERAL UNIVERSITY***

- Launch public phase of \$300 million fund-raising campaign
- Raise \$65 million in private support
- Continue construction of Bee Street garage
- Maintain positive operating margin
- Redesign website
- Continue MUSC Excellence initiative
- Grow MUSC Foundation total assets to more than \$300 million

**2.4 How does MUSC develop and track action plans that address its key strategic objectives? Include how MUSC allocates resources to ensure the accomplishment of action plans.**

The most updated versions are included on the University Strategic Plan Web Page, the President's Web Page (under reports to Board of Trustees), and the University Strategic Planning Web site. In addition, they are sent out as part of the annual Budget planning package in February of each year and elements are included in appropriate annual University reports such as the Financial Report and reported on in various University publications such as the weekly campus newspaper, "CATALYST". Action plan related allocation of resources is a byproduct of the GAPP process described in Section III.2.1 above.

### **2.5 How does MUSC communicate and deploy its strategic objectives, action plans and related performance measures?**

Communication is achieved through periodically updated information made available in the GAPP documents, the Strategic Planning Web site, Town Meetings, University publications, unit and departmental newsletters, departmental/unit presentations, and formal reports, both internally and externally, that include audits, news releases, and study results.

### **2.6 How does MUSC measure progress on its action plans?**

The GAPP section (VI) of the Budget package spells out the requirements for submitting progress towards completion of each goal as set the prior year which included metrics for success. This permits valid measurement of progress as well as necessary adjustments to those not yet achieved. Additional new goals and metrics each year are permitted, but a priority order ranking is required to assure that those with the very highest priority are recognized and acted on appropriately.

### **2.7 If MUSC's strategic plan is available to the public through its internet homepage, please provide an address for that plan on the website.**

The plan is available on the home page of the University Web site ([www.musc.edu](http://www.musc.edu)) under Strategic Plan (<http://academicdepartments.musc.edu/strategicplanning/>) as well as on the President's home page and the Report to Board of Trustees (<http://www2.edserv.musc.edu/president/reports.htm>). It is also discussed in the annual Financial Report and is referenced on several MUSC Web pages.

## **Section III – Category 3 – Student, Stakeholder, and Market Focus**

### **3.1 How does MUSC identify the student and market segments its educational programs will address? How does MUSC determine which student and market segments to pursue for current and future educational programs, offerings, and services?**

The primary customer of the University is the health professional student because the primary mission of the academic component of the University is to prepare students for health careers. The Deans of the six colleges and their staff monitor changing needs in the health care environment in making decisions on future educational programs, such as increasing enrollment in medicine and nursing to meet shortages, and offering programs in executive and online formats for working health professionals to receive advanced degrees. The University accepts students that have completed pre-requisite requirements at other institutions of higher education; therefore it maintains close relationships with feeder schools and the health professions advisors at those schools to provide current information on programs to prospective students. The University is responsible for developing curricula and educational experiences that meet the accreditation requirements for their various disciplines as established by external professional accrediting agencies.



**3.2 How does MUSC keep its listening and learning methods current with changing student and stakeholder needs and expectations (including educational programs, offerings, and service features)? How does MUSC determine the relative importance of the expectations to these groups' decisions related to enrollment?**

The University requires course and faculty evaluations and has converted these to an online format, therein providing more rapid and specific information on teaching effectiveness. Online surveys supplemented by focus group meetings have been initiated at the University-wide level to get broad based input on the effectiveness of student-support services. Alumni surveys have been instituted to incorporate the view of working graduates. Regular meetings between the student government association officers and the administration have been established to provide real-time feedback. A ten-year plan to foster interprofessional collaboration has been initiated to allow more faculty and student interaction across colleges, thereby meeting the expressed need of the students and the health care system for more effective team approaches to health care. Applications for admission have increased annually as an indication of the continued interest of prospective students in our educational programs. In 2006 over four thousand applications were received for the 977 positions available.

**3.3 How does MUSC use information from current, former, and future students and stakeholders to keep services and programs relevant, and provide for continuous improvement?**

Students serve on curriculum committees within their respective colleges, and in combination with the data received from multiple evaluation processes, have the ability to influence the design of educational experiences. Administration, faculty, and staff review results from focus groups and student surveys, and improvement processes are identified and incorporated into annual goals and objectives. For example, the University engaged a consultant to study the services needed for underrepresented students on campus, which led to a new Office of Student Diversity with a revised mission and operations to serve the needs of these students. The report also influenced the University to initiate a program of intercultural and interprofessional exchange in both the regular and extra curriculum. The interprofessional initiative, "Creating Collaborative Care" was designed based on input from faculty, students, and staff and will begin a process of broad organizational change. Understanding how students learn best and approach the learning experience is vitally important, so student feedback was incorporated into the new three-year educational technology upgrade plan.

**3.4 How does MUSC determine student and stakeholder satisfaction and dissatisfaction and use this information to improve?**

Satisfaction from students is measured through surveys, focus groups, and their active involvement in decision-making processes. In addition, consultant reports and external accreditation reports include feedback from students as well as opinions of experts, and the results are widely disseminated for discussion and planning. Policies are in place to allow students to report mistreatment or grieve decisions made about their performance and academic progress, and the results of the use of these policies are reviewed regularly by the administration to note trends, analyze causes, and implement improvements. College administrators hold group exit-interviews with graduating students to supplement online surveys and use this information to make curriculum changes or inform central services of problem areas. Each course and faculty is evaluated and the data reviewed to improve educational initiatives that may lead to faculty development programs and curriculum changes.

**3.5 How does MUSC build positive relationships to attract and retain students and stakeholders, to enhance student performance, and to meet and exceed their expectations for learning? Indicate any key distinctions between different student and stakeholder groups.**

Building positive relationships with students begins in the pre-enrollment period. The University provides excellent information and services to prospective students through its recruitment programs, admissions' offices (one in each college), and web sites. Student orientations are developed to ensure students recognize and use the support structures in place as they transition to become students in a health professional institution. By regularly asking students their opinions and giving evidence of the influence of their opinions, students feel their voices are heard and their feedback is being used for positive change. The open-door policy of faculty and administrators allows positive interactions. Additionally, the nature of professional education implies small faculty/student ratios and close mentoring of students in their development as professionals, encouraging positive relationships. The student government organization has a strong voice on campus, is well respected by the administration, and works collaboratively with the administration through regular and open communication. The Division of Education and Student Services provides essential support services to students to assist in their academic success. Included is the Center for Academic Excellence that provides group tutors, individual sessions on test taking and study skills, and board review programs for multiple disciplines. The Health and Wellness unit focuses on wellness, prevention, and treatment through its Student Health Services, Counseling Services, and Wellness Center. Each of the six colleges has student services and academic support staff as well to assist students in achieving success. The University has a very low attrition rate.

**Section III – Category 4 – Measurement, Analysis, and Review  
of Organizational Performance**

**4.1 – How does MUSC select which operations, processes and systems to measure to determine student learning, and for tracking organizational performance, including progress relative to strategic objectives and action plans?**

In large part, measures used to evaluate the effectiveness of the academic programs are those that have been cited in “best practices” documents in the higher education literature, those created by the legislature and administered by the S.C. Commission on Higher Education, and those established by the discipline-specific professional accrediting body.

The Associate Provost for Educational Programs coordinates the curricular issues among the colleges, and oversees the organization and implementation of new academic programs as they are generated by the faculty. Each college has an associate dean responsible for academic affairs who collaborates with this Associate Provost. This group ensures that faculty members who oversee their particular discipline coordinate reporting and assessment outcomes. As a group, they assist in guiding the Associate Provost in matters that affect each college as well as cross-college programs.

The Associate Provost for Institutional Research and Assessment oversees the effort to directly link college annual priorities with budgets, evaluating the stated outcomes as part of a small team. The Associate Provost also coordinates the collection of data relevant to accountability measures and is responsible for the submission of institutional reporting to state and federal agencies. This Associate Provost and his staff are responsible for federal and state reporting requirements, such as the annual Institutional Effectiveness Report as required by legislative mandate.

PACE (Personalized Assessment of Course Effectiveness), MUSC's course and instructor evaluation program is overseen by the Assistant Provost for Institutional Assessment, who coordinates with deans and other administrators to ensure timely reporting and analysis of all assessment results.

Regarding progress in attaining strategic objectives and action plans, MUSC relies on objective data to achieve its planning goals and to assess their attainment. Many central administration units work in conjunction with the Office of Integrated Planning and Assessment (OIPA) to gather and report data relevant to decision-making. OIPA assists with systematic evaluation of educational programs, faculty educational support services, administrative processes, and financial resources in order to identify the strengths and weaknesses of the institution. The office acts as repository for information that is used to support planning, policy formulation, and strategic decision-making. This includes, but is not limited to, national database comparisons such as Integrated Postsecondary Education Data Survey; discipline-specific peer information from national organizations such as the Association of American Medical Colleges. In addition, MUSC has established a relationship with eight peers for exchanging information. Specialty area information such as linking research awards with occupied research space can also be assessed.

#### **4.2 – How does MUSC use data/information analysis to provide effective support for decision making throughout the organization?**

The President utilizes an integrated planning model in which the University sets overarching priorities through the Strategic Plan to the colleges, the colleges determine specific goals relative to those priorities, and then the colleges report annually to the President and Provost on achievement of college-level and University goals. The Budget and Provost's offices jointly oversee this process and provide feedback to the departments. The accomplishment of annual college goals is reviewed as part of the next year's budget cycle. The University leadership has the ability to then re-align the Strategic Plan's goals based on college initiatives. To assist the President in managing the priorities and goals, guidance from monthly meetings of the President's Council as well as the Board of Trustees who meet quarterly is available.

#### **4.3 – What are MUSC's key measures, how are they reviewed, and how are they kept current with educational service needs and directions?**

Key measures pertaining to MUSC's academic programs center on the performance of the students which is assessed in an on-going way both during their matriculation in a college and following graduation. Using aggregate data from the colleges, the institution can mark overall progress in the student body by measuring retention, attrition, and graduation rates. In this way, the university can evaluate not only its overall performance, but also the performance of the individual colleges.

Some of the disciplines require their students to complete national board exams at various points in their educational program. The results of these exams are reported to the respective colleges and evaluated by the faculty. State and national licensing exams are administered post-graduation with results reported to the respective colleges. These results also provide data comparing state results with national scores.

Annual exit surveys are administered to each senior class in an effort to provide the university with timely information regarding each graduate's experience, their perception of the quality of the program, and their suggestions for improvement. In addition, alumni surveys are sent out periodically seeking feedback as to the adequacy of the graduates' education in preparing them for practice. Employers are also surveyed periodically seeking their opinions regarding the adequacy of the educational preparation of practitioners they employ.

All results are reported to the appropriate associate dean in each college who, in turn, provides the data and information to the college's curriculum committee. Results are also reported to the Associate Provost for Institutional Research and Assessment who includes pertinent information in state and national reports.

#### **4.4 - How does MUSC select and use key comparative data and information from within and outside the academic community to support operational and strategic decision making?**

MUSC has established a peer institutional group consisting of the following institutions:

- Medical College of Georgia
- Louisiana State University Health Science Center – New Orleans
- University of Mississippi Medical Center
- University of Nebraska Medical Center
- University of Oklahoma Health Science Center
- Oregon Health and Science University
- University of Texas Health Science Center – San Antonio
- University of California - San Francisco

In addition to the key internal measures reported in question 4.3 (above), these institutions will provide data and information regarding student body size, number of full- and part-time faculty, total employees, and total annual operating budget. With such information, MUSC can compare itself to the group and create a subset of aspirational peer institutions which it might choose to emulate.

#### **4.5 How does MUSC ensure data integrity, timeliness, accuracy, security and availability for decision making?**

Office of Integrated Planning and Assessment (OIPA) is responsible for the overall integrity of institutional data used for both internal and external reporting. This Office was recently reorganized to increase its scope of authority which will likewise increase both the accuracy as well as timeliness of data which flows from a wide array of internal and external sources. Of particular importance is establishing consistency in information reported as well as establishing and observing unified reporting periods. The directors of a number of administrative units, among them the Office of Enrollment Management and the Office of Student Financial Aid, are charged with the responsibility of providing timely and accurate data to the OIPA for annual reporting to state and federal agencies. Likewise, each college, through the appropriate associate dean, is responsible for reporting the key measures noted above to university administration for both internal and external reporting. The OIPA is also responsible for the completion of approximately 35 national surveys each year.

Current annual data are compared with data from previous reporting periods to identify both positive and negative results and their potential ramifications for the institution. In this situation, the OIPA will seek data verification from the reporting unit to assure accuracy. Once confirmed, the data will be reported to appropriate administrators and agencies.

#### **4.6 – How does MUSC translate organizational performance review findings into priorities for continuous improvement?**

The MUSC planning model as utilized by senior leadership, the support the model receives from the community and the institutional commitment to its mission result in continuous improvement.

The President utilizes an integrated planning model in which the University sets overarching priorities through the Strategic Plan to the colleges, the colleges determine specific goals relative to those priorities, and then the colleges report annually to the President and Provost on achievement of college-level and

University goals. The Budget and Provost's offices jointly oversee this process and provide feedback to the departments. The accomplishment of annual college goals is reviewed as part of the next year's budget cycle. The University leadership has the ability to then re-align the Strategic Plan's goals based on college initiatives. To assist the President in managing the priorities and goals, guidance from monthly meetings of the President's Council as well as the Board of Trustees who meet quarterly is available. The University community has fully accepted this new campus-wide process. Finally, the President is evaluated annually by the Board of Trustees and by the South Carolina Budget and Control Board on achievement and progress made relative to the Strategic Plan.

#### **4.7 How does MUSC collect, transfer, and maintain organizational and employee knowledge? How does MUSC identify and share best practices?**

MUSC's administration is very committed to receiving and sharing employee information and accomplishments. The Office of Public Relations publishes a free weekly newspaper, *The Catalyst*, which is distributed campus-wide and available to faculty, students, staff, and visitors at strategic locations. This publication highlights the accomplishments of employees and programs, and provides progress reports on various University projects.

The Office of the Vice President for Academic Affairs & Provost publishes an electronic newsletter, *Academic Affairs Update*, which is distributed campus-wide to faculty and staff. This publication features articles dealing primarily with the accomplishments and recognition of faculty.

Broadcast e-mail messages to all employees are another source of announcements from University administration. These messages are sent out on an as needed basis. Broadcast messages are also used daily as an academic link to share information about campus events including upcoming seminars, workshops, and "Town Hall" meetings.

To permit a meaningful exchange of thoughts and ideas, the President and the Vice President for Academic Affairs & Provost conduct periodic "Town Hall" meetings. Open to all faculty and staff, the meetings usually begin with a progress report and then move into an open forum allowing a sharing of information between faculty and administration.

The Deans' Council, chaired by the Vice President for Academic Affairs & Provost, is a monthly forum for an exchange of information among the deans of the colleges. This body is also responsible for reviewing and taking action on a variety of program proposals from the colleges and other administrative units. All organizational units (academic and support) have periodic meetings to share and discuss their activities in relation to their contribution to the University mission.

The President's Council meets monthly and serves as a decision-making body for proposals referred to it by the Deans' Council or one of the vice presidents. This group, consisting of vice presidents and other key administrators, also decides on agenda items for the periodic meetings of the Board of Trustees.

"Best Practices," as they relate to MUSC's academic programs, are identified through faculty and administration's participation in national professional organizations and accrediting bodies, and through their respective publications. With the exception of the College of Graduate Studies, all professional degree programs undergo periodic professional accreditation which provides another opportunity for a sharing of best practices with faculty participating on a site visit team.

## Section III – Category 5 – Faculty and Staff Focus

### **5.1 How does MUSC organize and manage work to enable faculty and staff to develop and utilize their full potential, aligned with the organization’s objectives, strategies, and action plans? How does MUSC evaluate and improve organization and HR processes?**

The University categorizes its employees into five divisions to assist in accomplishing its missions – faculty, unclassified administrative, classified, research grant, and temporary. Employees in each of these categories fill a unique role purpose in meeting the organizational needs of the University. Faculty provides teaching, research and/or clinical services to the University; and many also serve in key administrative roles.

Unclassified administrators provide higher-level administrative and professional services. Classified positions fulfill a huge array of functions from housekeeping, to maintenance, to administrative duties, to technical support scientific research and clinical operations. Research grant positions are paid from federal and private grants and contracts, and these positions are specifically designed to assist researchers in the fulfilling the experimental processes inherent in research activities. Temporary positions fulfill short- or longer-term needs as required.

The University is committed to excellent employee-employer relations that focus on creating an environment in which employees understand the ways their positions support the University in its mission to teach, provide clinical services, and conduct research. While each of these positions requires the employee to operate under its mission-oriented rules and regulations, the primary objective of all positions is to create a culture of collaboration throughout the work force as the University strives to meet the demands of a diverse and complex community.

Where appropriate, career ladders have been established to assist employees in developing the job skills, knowledge, and abilities necessary for advancement. For non-faculty positions, and in those areas without career ladders, a career-counseling program is being developed to ensure employees understand the tangible and intangible attributes of positions of interest at the University. This program will assist employees in advancing to higher levels of responsibility. Additionally, supervisors meet routinely with employees and are encouraged to identify specific training needs and develop training plans to enhance their skills and assist them in career advancement.

State classification and compensation policies govern many positions at the University; however, the University exercises all available flexibility within these rules to provide pay increases and incentives for good performance. Some divisions are developing specific pay-for-performance standards that will link the accomplishment of measurable goals and objectives to some portion of pay increases.

Reward and recognition programs are also in place and serve to foster an environment where excellence is recognized and valued. Many of these programs are peer reviewed, giving employees more ownership in the process of recognizing excellence and work above and beyond the expected norms.

### **5.2 How does MUSC evaluate and improve its organization and human resource related processes?**

The leadership of the Department of Human Resources (HR) participates in professional associations of higher education and industry as a way to stay current with leading HR practices. This information is used to enhance and improve the organization’s HR processes.

HR leadership routinely meets with key campus customers to determine the quality of service provided. As items of concern are identified by these groups, this information is reviewed and used to improve organizational effectiveness. Customer-service surveys were implemented in the past year, and the information gained in that process has been used to enhance and improve service.

HR leaders are evaluated based on specific goals and objectives. Additionally, employee-satisfaction surveys and quality/customer-service survey results are factored into the performance of the HR leadership to improve and enhance service.

### **5.3 How does MUSC achieve effective communication and knowledge/skill/best practice sharing across departments, jobs, and locations?**

Routinely throughout the year, performance, diversity, management/leadership, new employee orientation, and safety training are offered. The Department of Human Resources periodically conducts a training-needs assessment of the campus community and uses the information to develop additional training agendas for the coming year. Each division provides skill training on an “as needed” basis for its employees, but much of the skills training can be outsourced as needed.

Each individual attending training is given an opportunity to evaluate the effectiveness of the training received, whether it is a program provided by an outside resource or an internal staff member. This information is used to enhance and improve the training classes as appropriate.

Certain training programs such as new employee orientation and safety training are required programs that employees must attend before they are authorized to start work. Employees who work with hazardous chemicals and other substances require retraining on a routine basis and must pass a test before they are authorized to work with such substances. Other knowledge/skills gained from softer-skills training courses may be included in performance evaluations to encourage the use of such skills.

### **5.4 How does MUSC’s faculty and staff performance management system, including feedback to faculty and staff, support high performance work and contribute to the achievement of its action plans?**

All employees, except temporary ones, participate in a cyclical, formal performance-evaluation process, which encourages two-way communication between the employee and supervisor. Temporary employees participate in an informal review process.

The annual review process begins with the establishment of a planning document that outlines the goals and objectives for the year. The employee has input in creating the goals and objectives to ensure he or she not only has opportunity for feedback but also is involved in setting and shaping the standards against which the evaluation will occur. When the planning document is established, supervisors are encouraged to review position descriptions with employees to ensure they accurately reflect assigned responsibilities and can be used to set success criteria for the coming year.

Supervisors are encouraged to provide routine and timely feedback to employees throughout the year so that information in the final evaluation is not a surprise. While ensuring high performers know their work is appreciated, the continuing dialog is especially important to those employees who may not be meeting the expected standards. When it is determined that an employee is falling below expected performance levels, the supervisor engages in specific processes to provide the employee with additional supervisory support and resources to enhance his or her opportunities for reaching acceptable performance levels.

Customer-service and employee-satisfaction feedback, goals, and objectives—outlined in strategic initiatives for the University—and observable and measurable behaviors are used to establish performance standards and the criteria that define success. The final evaluations are often the basis for recognizing outstanding performance through established reward and recognition programs.

### **5.5 How does MUSC accomplish effective succession planning? How does MUSC manage effective career progression for all faculty and staff, throughout the organization?**

Modeled on the Emory University Woodruff Leadership Academy, the MUSC Office of the Provost and University Board recently instituted the Trustees Leadership Academy which offers comprehensive, formalized, leadership training each year for ten to fifteen carefully selected faculty members. This mentorship program requires a report on a college- and/or university-level issue; hence, this program is mutually beneficial to both the individual and the University, with knowledge gained while improving the University's operations.

**5.6 How does MUSC's faculty and staff education, training, and development address key organizational needs? How do you evaluate the effectiveness of this education and training? How does MUSC encourage on the job use of new knowledge and skills?**

Continual professional development of the faculty is key to the successful delivery of educational programs, the discovery of new knowledge, and the provision of optimal patient care at MUSC. The University has developed policies and programs to support and ensure the professional growth and success of its faculty. In addition, the University recognizes the achievements of its faculty through awards, promotion in rank, and other mechanisms.

Faculty have the opportunity to provide feedback annually on the support received for faculty development through a Department Chair Annual Evaluation conducted by the Provost's office. In addition, full-time and part-time faculty are required to develop a Faculty Appointment Contract which states specific salary remuneration based on productivity standards.

The Apple Tree Society exists to foster dialogue and activity related to the scholarship of health professions teaching through campus and national partnerships. The goals of this MUSC Society are to: expand the faculty development opportunities related to teaching on campus; to initiate programs that recognize and enhance the value of teaching as a scholarly activity; to explore and support innovative methods and technologies for teaching and learning; and to promote professional development of current and future educators.

The University has available several resources for faculty to develop research skills. The Office of Research Development offers a grant writing workshop four times a year. This office also assists faculty in identifying potential sources of external funding and works closely with faculty in preparing grant proposals for submission.

In recognition of faculty accomplishments the individual colleges, as well as the university, present annual awards in teaching, research, and service. These awards are very competitive underscoring the excellence of the faculty with respect to their achievements. The awards are sponsored by various groups. The university annual awards include:

- Developing Scholar Awards
- Outstanding Clinician Awards
- Teaching Excellence Awards (Developing Teacher, Educator-Lecturer, Educator-Mentor)
- Distinguished Faculty Service Awards

Faculty members are also supported in extensive travel to meetings and seminars of professional organizations and other venues where continuing education and professional development are included. A portion of these are required for continuing licensure or certification by clinical faculty.

For staff, a variety of avenues are available for staff development as well and these are detailed in 5.1 above.

**5.7 How does MUSC motivate faculty and staff to develop and utilize their full potential?**



Motivating employees to develop and use their full potential is an important goal of the University. The University is dedicated to training and developing its students to become the best health care providers; by extension therefore, this goal applies to all employees.

As a first step, managers and supervisors are encouraged to attend training on leadership development and supervisory skills. These training programs focus in part on counseling and evaluating employees to meet and exceed performance standards, and by inference, to develop and realize their full potential.

Communication training programs are designed to give supervisors and managers the necessary skills to encourage and motivate employees.

Managers and supervisors are encouraged to use the performance-evaluation process, a structured communication between employer and supervisor, as a tool to help motivate employees to meet their full potential. As part of the evaluation process, managers and supervisors are encouraged to conduct a needs assessment of the employee's knowledge and skills and abilities, and to develop appropriate training plans to assist employees in reaching their full potential.

Bonus incentive programs and other recognition and rewards programs are designed to recognize top performers. These programs assist the University in motivating employees to develop and realize their full potential.

#### **5.8 What formal and/or informal assessment methods and measures does MUSC use to obtain information on faculty and staff well-being satisfaction , and motivation?**

Annually, employee-satisfaction surveys are conducted at the division level to determine the well-being, satisfaction, and motivation of employees on campus. The information gained in these surveys is shared with managers and supervisors. As appropriate, performance standards directed at raising the level of employee satisfaction are included in manager and supervisor performance criteria.

Informally, most divisions conduct town hall meetings to encourage communication and the exchange of current information regarding the state of the University; but these meetings also provide valuable feedback on employee well-being. Feedback from these town hall meetings is shared with managers and supervisors and, where appropriate, specific assignments made to address concerns raised by employees. The president and his executive staff also conduct periodic town hall meetings for the same purpose.

Turnover rates are routinely monitored and shared with key administrators as one form of satisfaction measure. As turnover rates vary from established base-line data, Human Resources professionals evaluate this information to determine potential causes. If typical explanations cannot explain the turnover results, this information is provided to administrators so they can determine if employee satisfaction has declined.

Likewise, grievance information is monitored to determine not only the frequency of grievances from specific areas but also the subject matter of the grievances. Administrators are provided with these data and the outcome of the grievances, and encouraged to take appropriate steps when employee satisfaction may be at risk.

Faculty have a variety of avenues to express their concerns and being faculty, there is never a shortage of opinions. Faculty meetings at the university, college and department level, faculty newsletters from the Provost and other academic units and services, the ability to have pressing questions answered through MUSC's "Rumor Mill," as well as the more formal grievance procedures outlined in the Faculty Handbook, are all available to faculty members.

#### **5.9 How does MUSC use faculty and staff satisfaction assessment findings to identify and determine priorities for improvement?**

The State's EPMS process provides staff a formal means to identify and determine priorities. The Faculty Appointment Contract and the preceding process of obtaining written faculty evaluations are a primary means for identifying and determining priorities. Both of these processes require the employee to have a candid and productive discussion with his/her supervisor, and to establish mutual expectations for the coming year. It is inherent in the culture of research-focused institutions that continuous and life-long learning are essential and mandatory for maintaining an academic position.

Obviously, an individual's job priorities must be aligned with the University's Strategic Plan. The development and review of the University Plan involves many individuals across colleges and academic support areas. This process serves as a platform for individuals to express their views and to assist in the corporate decision of establishing the University's priorities.

#### **5.10 How does MUSC maintain a safe, secure, and healthy work environment? (Include workplace preparedness for emergencies and disasters.)**

The Department of Risk Management is assigned to and engaged in occupational safety, radiation safety, and insurance and risk assessment programs. This department handles professional liability concerns as well. The staff assigned to occupational and radiation safety programs routinely audits campus activities to ensure compliance with state and federal regulations to ensure University employees are working in a safe, secure, and healthy environment. This staff identifies potential hazards and makes recommendations to eliminate such hazards. This department also coordinates routine safety training and tracks the re-training needs of faculty and staff working in or around hazards materials.

The University also operates compliance committees to ensure all affected areas remain in compliance with federal and state regulations. This committee provides necessary oversight necessary and works with constituent groups to ensure the campus is a safe environment in which to work and learn.

A dedicated police department, the Department of Public Safety, operates 24/7 to ensure faculty, staff, patients, and visitors are safe to move around and work on this urban campus. This department coordinates efforts with Risk Management staff during inclement weather and other potentially catastrophic events.

The Department of Risk Management coordinates the severe weather plans for the campus and works with department representatives annually to update plans. (Emergency information is available at [www.musc.edu/emergency.shtml](http://www.musc.edu/emergency.shtml); severe weather procedures are available at [www.musc.edu/fanda/risk/severeweather.shtml](http://www.musc.edu/fanda/risk/severeweather.shtml)) Risk Management also coordinates business-continuity planning to ensure the campus is capable of working when an event that may disrupt normal business activities occurs.

### **Section III – Category 6 – Process Management**

#### **6.1 How does MUSC determine, and what are (list) key learning-centered processes that deliver educational programs, offerings, and student services?**

Educational programs are the domain of the professional schools, and the University maintains oversight through a variety of learning-centered processes. The Associate Provost for Education and Student Life meets monthly with two standing groups, University Education Infrastructure Committee and the Education Advisory Committee. The focus of many of their discussions is curricular change, student support services, and inter-professional student learning needs.

The University provides administrative and support services through three organizational divisions – The Office of Academic Affairs, the Office of Finance and Administration, and the Office of Information

Services. These services range from enrollment services, to financial aid, to student wellness. Each of these support programs uses one or more assessment tools appropriate to their diverse service and service objectives. These include both quantitative and qualitative measures.

Three professional colleges have single educational programs with unique accreditation standards (Dental Medicine, Medicine, and Pharmacy). Two colleges (Health Professions and Nursing) have multiple programs, each with its own specialty accreditation. Because of the nature of these medical disciplines, the colleges have primary responsibility for educational program assessments. Decentralization of many operational issues, including the comprehensive assessment of educational programs, is typical of academic health centers.

The only college lacking a specialty accreditation is the College of Graduate Studies. As part of their strategic plan, all training programs are evaluated within five years. The external site visitors meet with chairpersons, graduate course coordinators, faculty, students and postdoctoral fellows. They prepare a report consisting of recommendations for improvements and changes.

All but one College has its own Curriculum Committee that consists of faculty and students. The College of Health Profession has a Curriculum Committee but without student representation. Every Curriculum Committee meets at least monthly. They have the responsibility of assessing the effectiveness of their programs and in coordination with their Deans can alter the curriculum when improvements are agreed upon. It is the Curriculum Committees that are cognizant of changes that affect the educational element of their specialties and will incorporate changes as appropriate. In addition, they review national standardized licensing and test results, as well as internal examination results to assess the effectiveness of their educational programs.

Every college also reviews course grade distributions, graduation rates, specialty Board results (particularly those exams which are required for graduation), clinical competency assessments, and alumni surveys. Trends over time can result in changes to the curriculum or change the focus of student services.

The following lists the key University-based, learning-centered processes that add value to our students:

**On-Line Transcripts.** Students have 24-hour access to order their academic transcripts using Webadvisor. They can check the status of their request at any time.

**Web-based Applications.** One hundred percent of our students apply for admission on-line. The students benefit from being able to login 24 hours a day to complete their applications. The system also completes edit checks to ensure accurate completion.

**Web-based Application Progress Screen.** Students can track the process of their applications 24 hours a day and are notified if any paperwork is missing.

**On-Line Registration for Web- based Students.** Students do not need to come to campus to register for classes because registration for all classes can be completed on-line.

**Email Document Request.** The University system is set up to periodically check for missing paperwork in Financial Aid. If something is missing, a letter requesting the document is automatically sent directly to the student's email. The process substantially decreases the time required to complete a student's financial aid.

**On-Line Loan Counseling.** Counseling, a federal-government requirement for student loans, via the web significantly reduces the time required to complete loan counseling and can be completed at the student's convenience. This feature is particularly helpful when the student is away from campus.

To ensure the process is used, students are notified through email, websites, regular mail, publications, and college-information resources when new processes are developed or old ones enhanced. Systems may produce usage reports that are reviewed to measure effectiveness.

## **6.2 How does MUSC incorporate input from students, faculty, staff, stakeholders, suppliers, and partners for determining key learning-centered process requirements?**

The University engages in continual evaluation of processes to improve service and delivery. Changes can occur when that process identifies a problem or because of changing federal and state requirements, internal directives, and/or program changes. Once a demand, requirement, or weakness is identified, a collaborative approach is used to ensure the issue is addressed using the latest technology and incorporating suggestions from all affected constituents in the design of a new process. If the project is large enough in scope or encompasses many areas, a business plan may be created to develop the project fully. Currently, a process is in place whereby information technology proposals will be reviewed to ensure compatibility with existing systems and to purchase the most effective system to meet University needs. A broad-based University Information Management Council provides oversight to enterprise-wide decisions related to the use of new technologies to meet requirements for customers according to the mission of the University.

## **6.3 How does MUSC incorporate organizational knowledge, new technology, cost controls, and other efficiency and effectiveness factors, such as cycle time, into process design and delivery?**

All MUSC faculty decide when and where to apply various instructional technologies within their courses. Their application is then supported by a campus network infrastructure and instructional technology expertise that can provide assistance on demand. This infrastructure includes support for hardware, software, course management, and course materials development.

The responsibility for student access to and training in the use of technology rests with the individual colleges, the Office of the Chief Information Officer (OCIO), the Library, and the Director of Educational Technology Services and Distance Education.

Local, distributed, and distance delivery technologies are used to present a wide variety of classroom, clinical and laboratory instruction. These technologies enrich the students' learning experience both in and out of the classroom setting

The MUSC Library serves as an information-rich database and knowledge center, academic computing support unit, electronic education center, and leader in information planning. A service-oriented faculty and staff assist in the use of a variety of informational systems. An active program of individual, class and group instruction supports teaching, clinical care, research and community outreach.

The Center for Academic Research and Computing (CARC) is a group dedicated to identifying appropriate internet-accessible resources, data harvesting from these resources, and data aggregation for partnering with students, researchers and clinicians to address obstacles that limit the innovative potential of the university community.

The Medical University of South Carolina embraces a wide variety of cost-effective instructional technologies to enhance learning-centered processes throughout its curriculum.

## **6.4 How does MUSC systematically evaluate and improve learning-centered processes?**

For undergraduate, masters and first professional degree programs, the responsibility for managing the curriculum is vested in the program Curriculum/Program Committees in the individual colleges. The charge to these committees is to design the curriculum and specify course content for their respective academic programs. The curricula and courses comply with standards of accreditation for each accrediting body. These curriculum committees consist of faculty and students. The Colleges of Nursing and Pharmacy require a full faculty vote for curriculum changes. The College of Health Professions requires approval from both the program curriculum committee and college curriculum committee. The Colleges of Dental Medicine and Medicine require only approval by the Curriculum Committees.

For Doctor of Philosophy degree programs curriculum responsibility resides in the College of Graduate Studies with exceptions for the PhD in Nursing and the PhD in Biostatistics/Bioinformatics. The College of Graduate Studies' First Year Curriculum Steering Committee determines the curriculum design and course content for the integrated first year biomedical sciences curriculum. After the first year, graduate students select a mentor in a specific department/program and take courses offered by those departments and programs that are approved by each program director/department chair and the Advanced Curriculum Committee of the college. The members of these committees are faculty members representing each of the departments/graduate programs in the college. The curriculum for the PhD in Nursing and in Biostatistics/Bioinformatics falls under each program's Curriculum Committee in the College of Nursing and the Department of Biostatistics, Bioinformatics, and Epidemiology, respectively. Each of these program committees determines the curriculum design, course content, and sequence of courses.

All new programs must be approved by senior academic administrators prior to being submitted to the SC Commission on Higher Education.

Generally, there is no review of changes to courses or the various curricula by central administration. Of course, substantive changes to programs and/or courses are reported to the other deans, other senior administrators, and the Provost through the Deans' Council monthly meetings. Instead, each College established a committee to assess their respective programs. The committees evaluate their respective program(s) and learning outcomes at least annually. Curriculum or Assessment Committees of each College collect this information, collate the information into an annual report, and distribute the report to the faculty and administration within their respective Colleges.

### **6.5 What are MUSC's key support processes, and how do you evaluate, improve and update these processes to achieve better performance?**

MUSC is dedicated to providing outstanding academic support services for all students. Examples include:

- Academic Support Services: Center for Academic Excellence and Writing Center
- Student Programs: Student Activities, Housing, Office of Student Diversity
- Student Health and Wellness: Counseling and Psychological Services (CAPS), Student Health, Wellness Center
- Student Disability Services
- Library and Learning Resource Center
- Enrollment Management
- Computer Services

Students have a high rate of satisfaction with various student and academic support services as reported in Category 7.2 that follows. Multiple methods are used to assess the value these services provide.

### **6.6 How does MUSC's organization ensure that adequate budgetary and financial resources are available to support your operations? How does MUSC determine the resources needed to meet current budgetary and financial obligations, as well as new initiatives?**

Each fiscal year, the Medical University of South Carolina is required to submit an operating and capital budget to the Board of Trustees for approval. The Budget is submitted to the Board of Trustees prior to the start of the fiscal year, unless otherwise authorized by the Board of Trustees. The budget is approved in aggregate for all expenses up to the approved amount. MUSC is required to maintain documentation of the budget process in sufficient detail to allow the tracking of expenses at the unit level basis. If MUSC determines that expenses will exceed the Board aggregate amount of the approved budget, additional approval is required prior to expending funds in excess of the budget.

The following is an outline of the budgeting process for the Medical University of South Carolina. During the first quarter of the fiscal year, MUSC administration sets major priorities for the MUSC budget. The Budget Office prepares and distributes budget packages with a three year history to each college and major departmental unit. During the second quarter of the fiscal year, each unit prepares a budget package and submits new operating requests, “below the line” requests, capital requests, and academic charges to the Budget Office. The Budget Office analyzes budget packages and makes recommendations. During the third quarter of the fiscal year, each college and major departmental unit presents their budget proposal to the appropriate Vice President at the Budget Hearings. During the fourth quarter of the fiscal year, the budget is presented to the President and the University Budget Committee. The budget is also presented to the Board of Trustees for tentative approval at a special June meeting. The final budget is presented during August to the Board of Trustees for final approval. A budget to actual review is performed on a monthly basis and all significant variances are investigated and presented to the Vice Presidents for review.

### **Section III – Category 7 – Organizational Performance Results**

#### **7.1 What are MUSC’s performance levels and trends for key measures on student learning, and improvements in student learning? How do MUSC’s results compare to those of competitors and comparable organizations?**

One of the best measures of effective instruction for an academic health center is students’ performance on professional exams, and how well their research results stand up to external peer review. MUSC students perform admirably by both measures. The average pass rate was extremely high across all board or licensure exams for 2006. Students in the College of Graduate Studies averaged nearly 2 peer-reviewed publications each in 2006.

*Table 7.1-1 Program Licensure Examination Pass Rates*

<b>College</b>	<b>Program</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>
Dental Medicine	National Board Part I	94	100	98
	National Board Part II	98	100	100
Health Professions	Cardiovascular Perfusion	94	100	100
	Communication Sciences and Disorders	100	100	100
	Cytotechnology	100	100	100
	Anesthesia for Nurses	100	100	80
	Occupational Therapy	97	100	95
	Physical Therapy	98	84	73
	Physician Assistant	94	100	100
Medicine	USMLE Step 1	94	93	97
	USMLE Step 2	93	92	99
Nursing	National Council Licensure	86	97	92

	Adult Nurse Practitioner	80	83	100
	Geriatric Nurse Practitioner	100	100	----
	Neonatal Nurse Practitioner	100	100	100
	Pediatric Nurse Practitioner	100	100	100
	Psychiatric-Mental Health Nurse Practitioner	100	100	100
	Nurse Midwifery	100	100	100
	Family Nurse Practitioner	85	88	100
Pharmacy	NABPLEX	98	91	96

In addition, all educational programs are evaluated through the Division of PACE and Testing Services which manages the course and instructor evaluations. Results of the evaluations are distributed to the appropriate course director and instructor. Although PACE (Personalized Assessment of Course Effectiveness) was developed as an instructor's self-assessment tool, it has been used to review course effectiveness. MUSC's Board of Trustees has mandated that all courses will have an evaluation.

**7.2 What are MUSC's performance levels and trends for key measures on student and stakeholder satisfaction and dissatisfaction? How do MUSC's results compare with competitors and comparable organizations?**

Students have a high rate of satisfaction with various student and academic support services.

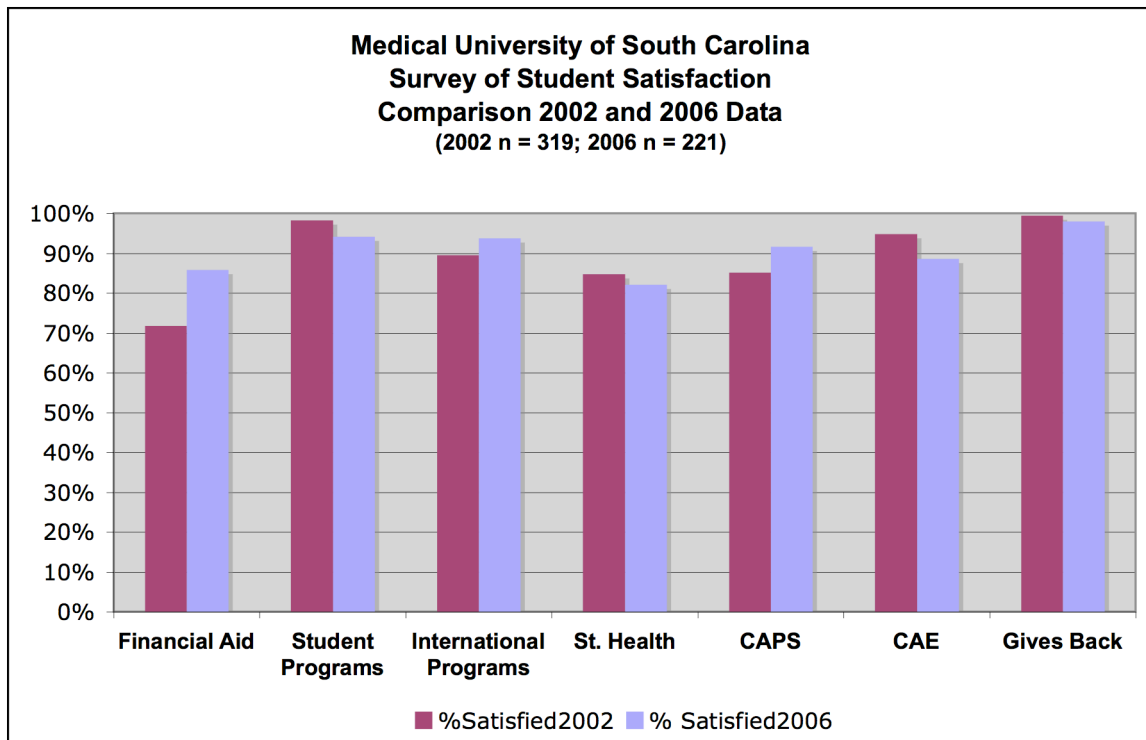
An annual study by the Association of American Medical Colleges reveals that our medical student rate support services are at or above national averages. The percentages below in Table 7.2-1 represent those who responded Very Satisfied and Satisfied, and does not include those with no opinion.

*Table 7.2-1 Association of American Medical Colleges National Survey*

AAMC Category	MUSC 2004	MUSC 2005	MUSC 2006	National Mean 2006
Tutorial Help	84.6%	89.3%	89.2%	56.9%
Personal Counseling	66.7%	72.4%	68.7%	56.8%
Financial Aid	69.2%	72.5%	70.1%	68.7%
Student Health	69.3%	84.5%	73.0%	63.0%
Library	89.7%	72.8%	85.2%	85.7%

Assessments of student satisfaction conducted in an online survey in 2002 and 2006 demonstrate similar satisfaction rates, with greatest improvements in the area of Financial Aid, where earlier problems were identified and addressed. See the data in Figure 7.2-2.

Figure 7.2-2 Student Survey Regarding Financial Aid and Other Services



An analysis of student satisfaction with services in 2006 indicates high levels of satisfaction with service and the competence and attitudes of the staff as shown in Table 7.2-3. Data are presented for all students and those students saying they had used the services of that facility.

Table 7.2-3 2006 Student Survey Regarding Support Services

<i>Level of Satisfaction with Service</i>		
Scale: 1 = Strongly disagree to 4 = Strongly Agree		
	Average Score	Average Score
	All	Used Service
Financial Aid	3.16	3.18
Student Programs	3.51	3.59
International Programs	2.96	3.67
Student Health	3.08	3.12
Counseling and Psychological Services (CAPS)	3.26	3.54
Center for Academic Excellence (CAE)	3.37	3.42
MUSC Gives Back	3.45	3.62

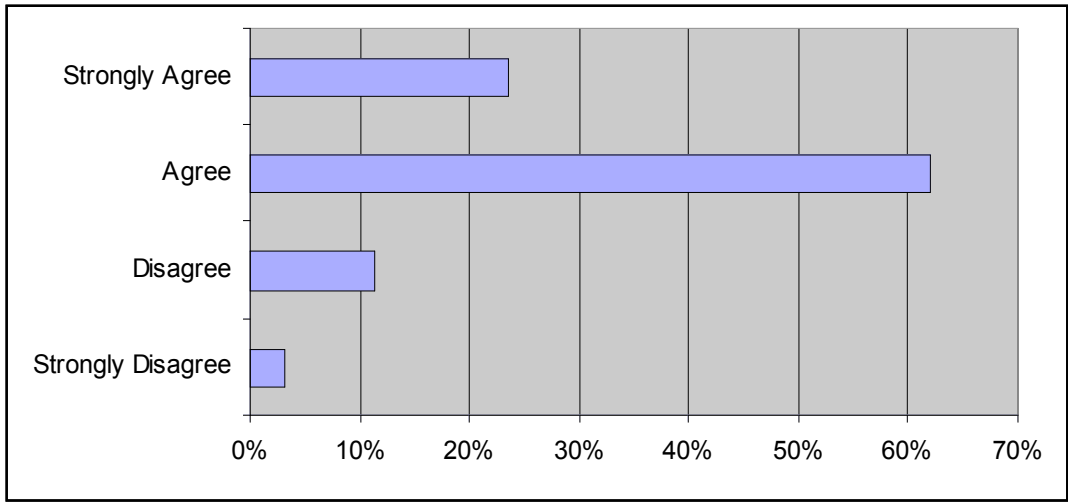


Admissions	3.39	3.42
Registration	3.31	3.34
Diversity	2.91	3.25
<b><i>Competent at Doing Job</i></b>		
	<b>Average Score</b>	<b>Average Score</b>
	<b>All</b>	<b>Used Service</b>
Financial Aid	3.10	3.10
Student Programs	3.54	3.60
International Programs	3.35	3.87
Student Health	3.13	3.16
Counseling and Psychological Services (CAPS)	3.45	3.61
Center for Academic Excellence (CAE)	3.52	3.55
MUSC Gives Back	3.58	3.68
Admissions	3.45	3.49
Registration	3.35	3.39
Diversity	3.12	3.30

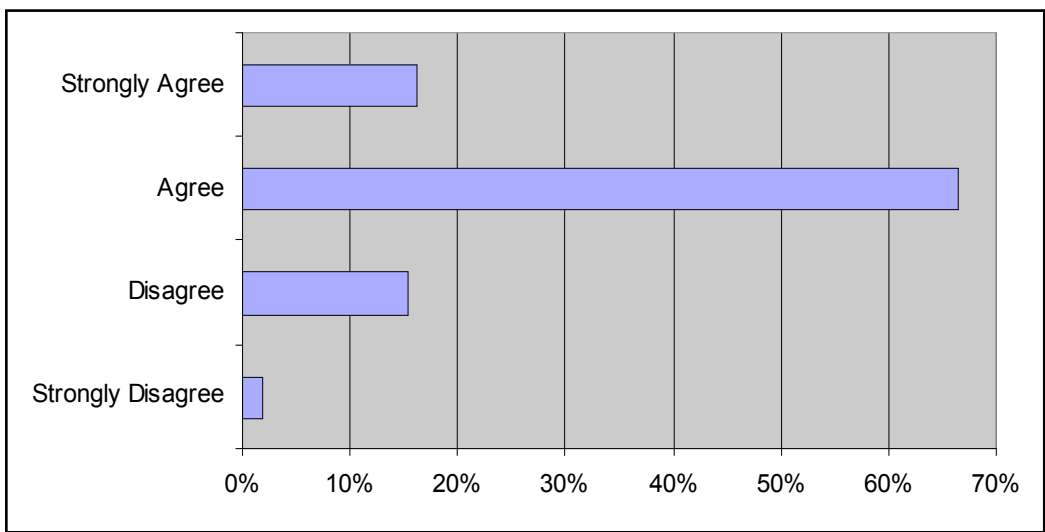
<b>Staff is Caring and Helpful</b>		
	<b>Average Score</b>	<b>Average Score</b>
	<b>All</b>	<b>Used Service</b>
Financial Aid	2.94	2.93
Student Programs	3.58	3.60
International Programs	3.38	3.87
Student Health	2.90	2.92
Counseling and Psychological Services (CAPS)	3.53	3.62
Center for Academic Excellence (CAE)	3.62	3.65
MUSC Gives Back	3.64	3.75
Admissions	3.43	3.47
Registration	3.28	3.31
Diversity	3.25	3.42

A survey of students in 2006 indicated a high level of agreement about the adequacy of educational/learning facilities and student-support services facilities as illustrated in Figures 7.2-5 and 7.2-6.

*Figure 7.2-5 Survey Regarding Adequacy of Educational/Learning Facilities*



*Figure 7.2-6 Survey Regarding Adequacy of Student Support Services Space*



**7.3 What are MUSC’s performance levels for key measures on budgetary and financial performance, including measures of cost containment, as appropriate?**

**Key Financial Performance Ratios:**

- Viability Ratio – the viability ratio is expendable net assets divided by long-term debt (total project related debt). Based upon the FY2006 Comprehensive Annual Financial Report, the University ratio was 84%.

- Return on Net Assets Ratio – the return on net assets ratio is the change in net assets divided by total net assets. Based upon the FY2006 Comprehensive Annual Financial Report, the University ratio was 12%.
- Physical Net Assets Ratio – the physical net assets ratio is physical net assets divided by total net assets. Based upon the FY2006 Comprehensive Annual Financial Report, the University ratio was 75%.
- Net Operating Revenue Ratio – Operating income (loss) + net non-operating revenues divided by operating revenues + non-operating revenues. Based upon the FY2006 Comprehensive Annual Financial Report, the University ratio was 9%.
- Net Tuition Dependency Ratio – the net tuition dependency ratio is net tuition and fees divided by total adjusted operating revenues. Based upon the FY2006 Comprehensive Annual Financial Report, the University ratio was 13%.

**Key Budgetary Measures:**

- Spending Rate Percentage – the spending rate percentage is operating expenses divided by operating revenues. Based upon FY2007 budgetary amounts, the University spent 99% of operating revenues.
- Budget to Actual - compares the original budget to actual expenses. Based upon FY2007 budgetary amounts, MUSC had a favorable variance of \$5.5 million.

**7.4 What are MUSC’s performance levels and trends for key measures on work system performance, faculty and staff learning and development, and faculty and staff well-being, satisfaction, and dissatisfaction?**

**Work System Performance.** Faculty performance is measured on an annual basis in a review of faculty goals conducted by the faculty member and department chair or division director. These annual goals, established at the beginning of each fiscal year, along with other activities and accomplishments, constitute the key measures for faculty performance. The results of student PACE (Personalized Assessment of Course Effectiveness) evaluations, produced at the conclusion of each course, also provide a valuable measure of performance by faculty in the classroom and clinical setting.

Unlike the evaluation of faculty, the annual review of staff performance centers on measures established by the job description created for the position being reviewed in accordance with State guidelines. Areas needing improvement are noted by the supervisor conducting the review and the staff member has an opportunity to note explanations or exceptions to the supervisor’s findings.

**Faculty and Staff Learning & Development.** Faculty and staff are encouraged and, in many cases, provided with the opportunity to pursue on-campus continuing education programs organized by various university departments such as the Human Resources Management and the Office of the Chief Information Officer. These programs are intended to reinforce existing skills or to introduce the employee to emerging technologies.

Faculty are encouraged, and generally expected, to attend local, state, and national professional meetings each year. These meetings may deal with education in general, be discipline specific, or focus on an area of professional specialization. Various departments within the University also schedule periodic seminars and classes open to all interested parties. Faculty and staff are also encouraged to take advantage of the MUSC Tuition Assistance Plan to further their education.

Faculty and staff have access to on-line information sources in their offices or at their work stations. Access to the University’s library is also provided to faculty and staff.

**Faculty and Staff Well-being, Satisfaction, and Dissatisfaction.** The assessment of faculty and staff well-being, satisfaction, and dissatisfaction is of on-going interest and concern of University administration. Although these conditions will be made apparent during the course of an annual review, administrators welcome and encourage such comments throughout the year to assure job satisfaction.

**7.5 What are MUSC’s performance levels and trends for key measures of organizational effectiveness/operational efficiency, learning-centered and support process performance?**

The priorities and annual plans of MUSC are guided by the University’s Strategic Plan, which was created collaboratively with students, faculty, and community leaders. This Plan provides an infrastructure for achieving successful assimilation of new information and business processes. One such process aligns the Plan’s goals with college and department initiatives, and then ties those plans to budget priorities.

The President utilizes an integrated planning model in which the University sets overarching priorities through the Strategic Plan to the colleges, the colleges determine specific goals relative to those priorities, and then the colleges report annually to the President and Provost on achievement of college-level and University goals. The Budget and Provost’s offices jointly oversee this process and provide feedback to the departments. The accomplishment of annual college goals is reviewed as part of the next year’s budget cycle. The University leadership has the ability to then re-align the Strategic Plan’s goals based on college initiatives. Results are reported to the Board of Trustees and to the South Carolina Budget and Control Board.

There are several areas of growth within the University that reflect the strength of its current budgeting system and financial condition. For instance, the University’s Operating Revenues and Net Assets increased significantly, its Operating Cash has remained stable, and externally funded research has grown. See Table 7.5-1.

*Table 7.5-1 MUSC Significant Financial Indicators FY 2004 to FY 2006*

<b>Significant Financial Indicators (\$M)</b>	<b>FY 2004</b>	<b>FY 2005</b>	<b>FY 2006</b>	<b>Variance</b>
Operating Revenues	\$263.8	\$286.3	\$298.5	13.2%
Operating Expenditures	\$363.5	\$391.8	\$416.7	14.6%
Annual Increase in Net Assets	\$51.7	\$63.7	\$39.6	-23.4%
Net Assets (Balance Sheet)	\$255.5	\$319.2	\$358.8	40.4%

The change in net assets is an important indicator that provides a picture of the overall financial condition during the current year. At June 30, 2006, total assets reported by the University were \$535.1 million and total liabilities were \$176.3 million. Net assets, which represent the residual interest in the University’s assets after liabilities are deducted, increased \$39.6 million in fiscal year 2006 from \$319.2 to \$358.8 million. Of this amount, \$41.9 million represents unrestricted net assets, which may be used to meet the University’s ongoing obligations.

Financial ratios are another method of explaining how MUSC has experienced phenomenal growth, while at the same time controlling expenditures and debt. All of the ratios cited show improvement since 2004. See Table 7.5-2.

*Table 7.5-2 MUSC Financial Ratios FY 2004 to FY 2006*

<b>Financial Ratios</b>	<b>FY 2004</b>	<b>FY 2005</b>	<b>FY 2006</b>
Expendable Net Assets	16%	14%	15%
Return on Net Assets	25.35%	24.94%	12.40%
Viability Ratio	78.22%	72.71%	83.89%

The University's daily operations are funded primarily from grants and contracts, sales of services, and State appropriations, which account for 79.7 percent of the total fiscal year 2006 revenues. In fiscal year 2006 the University's total revenues increased 4 percent or \$18.1 million over the previous fiscal year. See Table 7.5-3.

*Table 7.5-3 MUSC Major Revenue Sources FY 2004 to FY 2006*

<b>Major Revenue Sources (\$M)</b>	<b>FY 2004</b>	<b>FY 2005</b>	<b>FY 2006</b>	<b>Variance</b>
Federal Grants & Contracts	\$115.5	\$121.8	\$120.5	4.3%
State Appropriations	\$96.5	\$97.7	\$103.0	6.7%
Student Tuition & Fees	\$27.2	\$35.0	\$39.9	46.7%

MUSC is dedicated to providing support services that contribute to the educational climate and enhance student learning. These services include the Center for Academic Excellence, the Writing Center, Office of Student Diversity, Counseling and Psychological Services (CAPS), International Programs and Services, the Harper Student Center (which is dedicated to student programs, activities and wellness), Student Health Services, and the Library with an informatics laboratory and computer classrooms.

Students are informed about the variety of campus support services. Students can contact their Student Government representatives with concerns or suggestions for change. To gather feedback, support services offer the opportunity for student feedback including some on-the-spot surveys. Student feedback on support services is also available from exit surveys used by many MUSC programs.

As an example, Student Health Services (SHS) uses data from programs' exit surveys in addition to data from their own surveys. During the months of October and March, SHS surveys students using their services through anonymous submissions. Changes made as a result of students' surveys are disseminated to students via email as well as being communicated to the Student Government Association.

The enrollment (Table 7.5-4) and degrees granted (Table 7.5-5) charts demonstrate the high level and stability of the health education climate.

*Table 7.5-4 MUSC Enrollment\* September 2002 Through September 2006*

<b>College</b>	<b>Level</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>
Dental Medicine	<i>First Professional</i>	214	216	217	220	224
Graduate Studies	<i>Graduate</i>	214	218	247	238	210
Health Professions	<i>Undergraduate</i>	164	120	89	86	103

	<i>Graduate</i>	497	493	586	649	678
Medicine	<i>First Professional</i>	585	604	594	598	609
Nursing	<i>Undergraduate</i>	193	199	263	199	184
	<i>Graduate</i>	131	165	127	169	155
Pharmacy	<i>First Professional</i>	242	265	297	315	319
Nondegree Seeking	<i>Undergraduate</i>	0	3	1	0	2
	<i>Graduate</i>	23	22	13	26	18
<b>TOTAL</b>		2263	2305	2434	2500	2502

\* Enrollment figures are calculated after Fall Semester drop/adds and before CHE “frozen” file.

Table 7.5-5 MUSC Degrees Granted From 2002 through 2006

College	Degree(s)	2002	2003	2004	2005	2006
Dental Medicine	<i>DMD</i>	49	51	50	49	50
	<i>DMD/PhD</i>	0	0	0	0	0
	<i>Total</i>	49	51	50	49	50
Graduate Studies	<i>Master's</i>	11	22	32	15	29
	<i>Doctorate (PhD)</i>	26	20	18	20	20
	<i>Total</i>	37	42	50	35	54
Health Professions	<i>Bachelor's</i>	87	74	66	28	39
	<i>Master's</i>	190	171	154	193	239
	<i>Doctorate</i>	3	20	2	9	3
	<i>Total</i>	280	265	222	230	281
Nursing	<i>Bachelor's</i>	135	94	95	160	162
	<i>Master's</i>	47	52	57	47	43
	<i>Doctorate (PhD)</i>	0	0	1	3	5
	<i>Total</i>	182	146	153	210	205
Medicine	<i>MD</i>	127	124	136	123	140
	<i>MD/PhD</i>	2	4	2	11	4
	<i>Total</i>	129	128	138	134	144
Pharmacy	<i>Doctorate (PharmD)</i>	54	53	47	60	74
	<i>Total</i>	54	53	47	60	74
<b>Total</b>		731	685	660	719	808

Similarly, our faculty numbers (Tables 7.5-6 and 7.5-7) reflect a stable base for provision of our academic programs.

Table 7.5-6 MUSC Full-time Faculty From 2002 to 2006 by College

Year/ College	Medicine							Total
	Basic Sciences	Clinical Sciences	Pharmacy	Nursing	Dental Medicine	Health Professions	Library	
2002	187	603	45	54	49	74	39	1051

2003	194	633	49	53	47	73	37	1086
2004	206	683	45	50	48	81	34	1147
2005	218	718	43	48	46	83	33	1189
2006	228	741	45	50	45	76	35	1220

Note: Based on unit of primary appointment (as of November of each year)

Table 7.5-7 MUSC Part-time Faculty From 2002 to 2006 by College

	Medicine							
Year/ College	Basic Sciences	Clinical Sciences	Phar- macy	Nurs- ing	Dental Medicine	Health Professions	Library	Total
2002	6	84	2	36	27	9		164
2003	11	87	2	39	24	8		171
2004	9	108	3	53	22	6	1	202
2005	14	117	5	56	24	4	1	221
2006	20	131	2	63	24	5	2	247

Note: Based on unit of primary appointment (as of November of each year)

**7.6a What are MUSC’s performance levels for key measures related to leadership and social responsibility: a) accomplishments of the organizational strategy and action plans?**

Following is the most recent list of accomplishments in response to MUSC strategic and action plans as described in Section III Category 2, and measured as part of the GAPP process also described there.

**Education**

- Successful reaffirmation of accreditation site visit by Southern Association of Colleges and Schools (SACS)
- Developed a Quality Enhancement Plan focused on promoting interprofessional education, research, and patient care
- Began construction of James B. Edwards College of Dental Medicine
- Recruited Dr. Sothmann as dean of the College of Health Professions
- Achieved candidate status for accreditation of SC College of Pharmacy
- Finalized plans/financing for interprofessional Simulated Clinical Laboratory on campus and opened a sister laboratory in Greenville

**Research**

- Completed schematic design of the Drug Discovery Building
- Completed a feasibility study for the Cancer Genomics/Bio-Engineering Building
- Implemented the Duke Endowment grant to Health Sciences South Carolina
- Secured funding for three new Centers of Economic Excellence in Stroke, Tobacco Control, and Hospital Design
- Secured initial funding for “Light Rail” data transmission capacity for academic linkages
- Exceeded a record \$190 million in extramural grant funds
- Secured renewal of General Clinical Research Center grant and initiated a multi-institution Clinical and Translational Science Award
- Recruited Dr. Moskowitz to head Health Sciences South Carolina

### Clinical

- Grew hospital admissions by 7%
- Maintained positive operating financial margins in hospital and faculty practice
- Maintained construction of Ashley River Tower ahead of schedule
- Continued implementation of hospital electronic clinical information systems
- Completed implementation of outpatient electronic health records
- Recruited new Digestive Disease Center Director and Chairman of Surgery
- Created four service lines and implemented service line management
- Expanded physician work force by 34 MDs
- Continued to pursue Veterans Administration/MUSC joint facility model

### General University

- Entered initial phase of \$300 million, 5-year, institution-wide Capital Campaign
- Raised \$63 million in private funds
- Increased MUSC Foundation total assets to more than \$270 million
- Transitioned computer support personnel into an MUSC-affiliated organization
- Opened pilot University Childcare project
- Established MUSC campus as smoke-free
- Began construction of Bee Street Garage
- Continued to maintain positive operating margin
- Completed successful review by OFCCP

#### **7.6b What are MUSC's performance levels for key measures related to leadership and social responsibility: b) stakeholder trust in senior leaders and the governance of the organization.**

This is highly intangible and difficult to quantify precisely; however, the University and its senior leadership fully comply with sets of State laws and procedures enacted specifically to insure such trusts. Under the Ethics, Government Accountability, and Campaign Reform Act, all University Trustees and administrative officers are considered public officials and subject to strict conflict of interest laws as well as filing an Annual Statement of Economic Interests which is open and available to the public. MUSC additionally requires each to sign and live by a strict University Code of Conduct. Also pertinent is the fully open nature of all State business as required in the State Freedom of Information Act which is considered by many to be the strictest in the nation. There have never been any violations of any of these by any senior MUSC leader.

One measure of trust by student stakeholders might be the numbers of applicants each year for each and every academic program, with numbers substantially exceeding available slots and constantly growing. A clear indicator of trust from vendors is their continuing active, aggressive competition to do business with the institution. The ever increasing numbers of both inpatient and out patient visits as well as numbers of patients served document their trust in the institution and its leadership.

#### **7.6c What are MUSC's performance levels for key measures related to leadership and social responsibility: c) fiscal accountability; and, regulatory, safety, accreditation, and legal compliance.**

The University and its components are subject to the widest possible array of regulatory (Federal, State, and local), safety, accreditation, and legal compliances requiring substantial ongoing vigilance and staff time/attention on compliance issues as well as staying abreast of constant changes. The ultimate indicator of success in this arena is the fact that there have been no significant negative findings or results over the past five years in any accreditation, inspection, investigation, or audit including the Annual Audited Financial Statement from the external audit firm of KPMG. In addition, MUSC adheres to budgetary and



procurement codes and numerous state and federal regulations that are appropriate for any State of South Carolina agency.

The following chart of the major accreditations required for the University and its affiliates clearly documents one aspect of the extensive parameters of accountability associated with an academic health sciences center. This list does not include a variety of accreditations required to provide accredited health services, safety, and licenses necessary to support these academic programs.

*Table 7.6-1 Accrediting Agencies for MUSC Academic Programs*

<u>Unit</u>	<u>Program</u>	<u>Accrediting Body</u>	<u>Last Accredited</u>	<u>Next Accreditation</u>
<u>MUSC</u>				
-	<u>University-wide</u>	<u>Commission on Colleges of the Southern Association of Colleges &amp; Schools</u>	<u>1996</u>	<u>2007</u>
<u>College of Dental Medicine</u>				
-	<u>College-wide</u>	<u>American Dental Association</u>	<u>2003</u>	<u>2010</u>
<u>College of Health Professions</u>				
-	<u>Anesthesia for Nurses</u>	<u>American Association of Nurse Anesthetists, Council on Accreditation of Nurse Anesthesia Educational Programs</u>	<u>1999</u>	<u>2009</u>
-	<u>Physician Assistant</u>	<u>Accreditation Review Commission on Education for the Physician Assistant (ARC-PA)</u>	<u>2004</u>	<u>2007</u>
-	<u>Cardiovascular Perfusion Technology</u>	<u>Commission on Accreditation of Allied Health Education Programs (upon recommendation of the Accreditation Committee for Perfusion Education)</u>	<u>1999</u>	<u>2009</u>
-	<u>Cytology and Biosciences</u>	<u>Commission on Accreditation of Allied Health Education Programs</u>	<u>2003</u>	<u>2010</u>
-	<u>Occupational Therapy</u>	<u>American Occupational Therapy Association</u>	<u>2003</u>	<u>2012</u>
-	<u>Physical Therapy</u>	<u>American Physical Therapy Association, Commission on Accreditation in Physical Therapy Education</u>	<u>2002</u>	<u>2010</u>
-	<u>Speech Language Pathology</u>	<u>Council on Academic Accreditation, affiliated with the American Speech-Language-Hearing Association</u>	<u>2005</u>	<u>2013</u>
-	<u>Health Administration</u>	<u>Commission on Accreditation of Healthcare Management Education</u>	<u>2005</u>	<u>2011</u>

<u>College of Medicine</u>				
-	<u>College-wide</u>	<u>American Medical Association Council on Medical Education, and Association of American Medical Colleges, Liaison Committee On Medical Education</u>	<u>2005</u>	<u>2012/2013</u>
<u>College of Nursing</u>				
-	<u>College-wide</u>	<u>Commission on Collegiate Nursing Education</u>	<u>2005</u>	<u>2010</u>
-	<u>Nurse Midwifery</u>	<u>American College of Nurse-Midwives</u>	<u>2004</u>	<u>2013</u>
<u>College of Pharmacy</u>				
-	<u>College-wide</u>	<u>Accreditation Council for Pharmacy Education</u>	<u>2003</u>	<u>2007</u>
<u>Other Programs</u>				
-	<u>Professional Psychology (IPSY) through Dept. of Psychiatry</u>	<u>American Psychological Association</u>	<u>2002</u>	<u>2008</u>
-	<u>Dietetics (DIETI) through Digestive Disease Center</u>	<u>American Dietetic Association, through the Commission on Accreditation for Dietetics Education</u>	<u>2000</u>	<u>2009</u>

**ATTACHMENTS**  
**MUSC BALDRIGE PLAN**

Strategic Plan – 2007

<b>Program Number and Title</b>	<b>Supported Organization Strategic Planning Goal/Objective</b>	<b>Related FY 07-08 &amp; Beyond Key Action Plan/Initiative(s)</b>	<b>Key Cross References for Performance Measures*</b>
I. A&B Education and General	Successfully open Phase I of the new hospital (Ashley River Tower) and move onto Phase II hospital replacement (with a spin off objective of becoming national leader in clinical effectiveness and patient safety)	Accept Phase I occupancy on time and on budget; increase clinical patient volume and outreach market share; grow clinical workforce; achieve service line management; establish paperless medical record; become national leader in health outcomes; create a national model in clinical effectiveness; become clinical effectiveness national model; and complete plans/decisions for Phase II.	Ch 2.2, 2.3 Ch 7.2, 7.3, 7.5, 7.6a
I. A&B Education and General	Integrate interprofessional education, research, and practice	Continue building statewide collaborative programs; create statewide interprofessional curriculum and simulation collaborative; establish teaching academy; interprofessional curriculum per SACS QEP; classroom expansions/upgrades; additional clinical learning sites; and unified academic calendar.	Ch 2.2, 2.3 Ch 7.1, 7.2, 7.4, 7.5, 7.6a
I. A&B Education and General	Meet future research needs including new research buildings, specialized equipment, renovations/upgrades of existing facilities, and additional research faculty	Complete design and construction of the Drug Discovery Building, the Bioengineering building, Mixed Use Research Space with City of Charleston, and Patient Oriented Research Tower. Also, purchase specialized equipment; recruit targeted research faculty; renovate/upgrade existing space; renew COBRE grants; achieve NCI P30 designation for Hollings Cancer Center; and Clinical and Translational Science Award.	Ch 2.2, 2.3 Ch 7.3, 7.4, 7.6a
I. A&B Education and General	Conduct successful \$ 300 Million MUSC Capital Campaign	Raise \$ 300 Million by end of 4 years; kick off Campaign; implement communication plan; recruit additional staff; and conduct campaign awareness receptions.	Ch 2.2, 2.3 Ch 7.3, 7.6a
I. A&B Education and General	Statewide Collaborations	Advance Health Sciences South Carolina; complete consolidation of the S. C. College of Pharmacy; and grow the CTSA program.	Ch 2.2, 2.3 Ch 7.1, 7.2, 7.4, 7.5, 7.6a

- Key Cross-References are a link to the Chapter III Category 2 (Strategic Planning) and Category 7 (Organizational Performance Results). These references provide a Ch number that is included in the 2<sup>nd</sup> and 7<sup>th</sup> Categories of this document