A. UNMC will be learning centered in education

Goal 1 - Develop innovative health science educational models that take into account the new and evolving technologies and student interaction. CSFL – Dele Davies

Major milestones to be achieved during 2013-14

1 - Enrich the learning environment for UNMC students across all colleges, while contributing innovative methods of education to the nation.

Major milestones to be achieved during 2013-14

1) UNMC create concept videos / modules for e-learning and other innovative teaching by June, 2014.
   a. A concept module was created by Dr. Howard Liu and Tom Birk along with an instructional manual.
   b. Established a relationship with UNO College of Communication, Fine Arts and Media and developed a database of actors who can participate in acting for some of the e-modules.
   c. Establishing and formalizing a working relationship with the College of Information Science and Technology at UNO (Dr. Deepak Khazanchi) for production of games (gamification) for use within e-learning modules and courses.
   d. Piloted the cost of making a module and established reasonable estimates for all the components.
   e. Request for proposals from faculty for creation of e-modules and one or two courses on August 19, 2013, with a deadline for submissions of September 30, 2013.
   f. A campus wide announcement of Request for Applications (RFA) for UNMC E-leaning modules and courses led to several proposals being submitted. As a result, four new interdisciplinary e-courses and 20 new e-modules were selected for funding (http://www.unmc.edu/news.cfm?match=11829). These courses and modules are currently under production and will be ready over the next 4-6 months. Each course module is being produced with expectation of consistency in style, teamwork and student involvement and consideration of flipped classrooms, https://unmc.edu/cce/elearn_team.htm.
   g. One of the courses being developed will also be produced as a MOOC on Health Literacy. This course will be on course and the deadline is April, 2014.
   h. Partnerships have been established with two UNO Colleges (Information Science and Technology – for IT student support for e-Learning laboratory and for help with gamification within modules) and (Communications, Fine Arts and Media – for Actors for e-modules).

2) Create training sessions led by the Associate Deans of Education, leading education scholars and information technology experts to train faculty in the support and evaluation of courses, teaching platforms and concept modular video production for e learning – December, 2013.
   a. Seventeen sessions have been held with the curriculum committees, COD faculty, basic science departments in the COM, at the Alumni Retreat, E-Learning Committee, Chamber of Commerce, etc.
   b. A 6 minute video was recorded by Dr. Davies on the background and why we are doing the e-modules and courses and placed on the webpage.
c. Created an e-learning center in the library with secure access, staffing and some equipment for faculty to make modules.
d. Held an e-learning symposium titled “impact of MOOCs on Higher Education” held on August 21, 2013, with 200 attendees on site, and over 100 streamed in from campuses including UNL, UNO and UNK.
e. 22 sessions have been held with the curriculum committees, COD faculty, basic science departments in the COM, at the Alumni Retreat, E-Learning Committee, Chamber of Commerce, etc.
f. E-learning laboratory has been established in the library that is staffed from 9:00 am to 3:30 pm every day by UNO IT students to train and support faculty and students.
g. A MOOC Faculty Development symposium was held on campus on 8/23/2013 with over 200 participants either on site or via offsite streamlining. Participants included UNMC, UNO and UNL faculty.

3) Create a forum for a meeting of expert faculty and interested trainees, who have been specifically trained in educational delivery to exchange and promote scholarly work related to teaching including instructional video and online programs – December, 2013.
   a. A campus wide e-learning steering committee has been established consisting of all associate deans for education or equivalent, director of faculty development, library, educational instruction experts and a student to guide our e-learning process.
   b. A campus wide e-learning steering committee has been established consisting of all associate deans for education or equivalent, director of faculty development, library, educational instruction experts and a student that meets monthly to guide our e-learning process.
   c. A new faculty learning collaborative interested in e-Learning has been established where interested faculty meet monthly. So far attendance and participation has been excellent with more than 20 faculty attending each of the two sessions held.
   d. An e-Learning Webpage has been Established www.unmc.edu/cce/elearn
   e. Dr. Davies was a Panelist Presenter on the MHEC 9th Annual Policy Summit titled “Rise of the MOOCs: Foreshadowing of The Coming Transformation of Higher Education?” held on November 18, 2013, at the Omaha Hilton.
   f. The Student Senate will be updated and asked to become formally involved.

4) Create an external advisory board of national experts on e-learning that meets annually to guide UNMC goals – December, 2013.
   a. No Update.
   b. An External Advisory Committee has been established (Drs. Prober, Senior Associate Dean, Stanford U College of Medicine, Dr. Ray Schroeder, Associate Vice Chancellor for Online Learning, U of Illinois, and Dr. Brad Fenwick, Senior VP, Elsevier Journals). The first face to face committee meeting will be in Omaha in June, 2014.

Leaders: H. Dele Davies, Howard Liu, Gerald Moore, Tom Birk

Measurable Outcomes:
  1) Each College at UNMC will produce at least one online concept videos / modules.
  2) One College or two partnering together will develop at least one full course based on concept videos/ modules.
  3) At least two concept videos / modules that are inter-professional in scope will be created.
  4) At least one college will implement a concept video / module that is integrated with a flipped classroom in one course with student evaluations.
5) Develop at least one additional rural, primary care, online and medical care in the home IPE experience.

**Goal 2 - UNMC will expand and sustain educational initiatives in China. CSFL – Dele Davies**

**Major milestones to be achieved during 2013-14**

1. Establish a campus-wide Steering Committee for China Initiatives (SCCI) to develop, promote and integrate educational initiatives in China – September, 2013.
   a. Chancellor Maurer has established a committee where some preliminary discussions were held about overall visions and goals for which we plan a full committee meeting early October.
   b. Meetings were held by UNMC Committee members (Drs. Ward, Davies, Zheng, Sitorius and Mr. Leuenberger and Salzinger) in November to formulate the steps needed for a joint family medicine and a Rehabilitation Education Program between Tongji University and UNMC.
   c. Dr. Michael Sitorius attended the Family Medicine Symposia in Shanghai Tongji University, and another in Xi’an as part of the process to develop the family medicine collaboration. Chancellor Maurer gave the opening presentation for the Tongji symposium.
   d. Both Dr. Sitorius and Dr. Meyer are having ongoing engagement discussions based on the SSUHSI (Shanghai- Sino US Health Science Initiative) agreement signed on October 2011 to move the process along.
   e. Dr. Meyer has travelled to China to sign an MOU for development of the Rehab Education Program with Tongji University.

2. Determine if the current structure, funding mechanism, and personnel mix are appropriate to provide the requisite administrative support for the China Initiatives – December, 2013.
   a. Creating a legal entity in China which can be used to conduct our business and employ personnel to provide administrative support for our activities.
   b. Deloitte has been retained as a consultant to help with this.
   c. An NGO representing UNMC is being established in the World Free Trade Zone in Shanghai, and office space has been identified.

3. Inventory all educational initiatives (and accompanying MOUs) underway with partners in China to identify possible synergies across units and consolidate MOUs as possible – March, 2014.
   a. This activity is 80% completed.
   b. This inventory activity is completed by Fred Salzinger and Deb Thomas.
   c. Opportunities for consolidation are being examined.

4. Create a UNMC-wide umbrella vision and accompanying branding strategy for the China educational initiatives that expresses the value of the initiatives for UNMC, Nebraska, and China – March, 2014.
   a. A retreat will be scheduled in January.
   b. This process has been assisted by Deloitte and a report submitted. A retreat is planned for January to engage the Steering Committee members and other key partners in further enhancement of this.

5. The Steering Committee will evaluate opportunities, identify funding mechanisms and communicate with executive-level personnel at partnering institutions in China as needed.
   a. No Update.
   b. Chancellor Maurer and a team including Dr. Zheng and UNMC researchers and faculty visited Beijing (for meetings with the China Scholarship Council and an annual Joint Research Symposium) and Shanghai in October, 2013, to discuss ongoing mechanisms for executive-level
An agreement to establish the joint family medicine department was signed during this trip.


**Measurable outcomes:**
- Partner with Tongji University to start up the first rehabilitation education program in China offered at “985” classified academic institution.
- Establish a cooperative steering committee with Tongji University to develop strategies to create a joint medical school.
- Establish a Department of Family Medicine in China.

**B. Increase prominence as research health sciences center**

**Goal 1: Develop resources to expand community-based research to improve health outcomes and the social determinants of health. CSFL Jennifer Larsen**

**Major milestones to be achieved during 2013-14**

1. Strengthen the primary care practice research network to be capable of conducting comparative effectiveness and other practice research – December, 2014.
   a. Identified potential sites to “reinvigorate” the network.
   b. Surveyed and identified potential topics.
   c. Established an extra day focused on PBRNs at the Fall American Academic of Family Practice workshop in Nebraska City (October).
   d. Identified potential benefits participants will look for.
   e. Have not identified a financial partner (i.e., clinical enterprise) to provide any funding for a CER project.
   f. Plan to finalize practices and have a meeting to establish a potential protocol.
   g. Gave the Nebraska City presentation with good feedback about potential benefits and barriers to participation.
   h. Have asked for but have not found a “point person” in primary care for the network.
   i. Have identified a list of practices that expressed interest in participating and setting up a time and a place for an organizational meeting.
   j. Submitted a proposal and received $40,000 grant from Nebraska Medical Association to support the project.
   k. Submitting a $150,000 Rural Futures Institute pilot grant to support the project - due 12-18-13, expected response April, 2014.
   l. The CON Faculty Practice Committee is actively exploring formation of a new PBRN with the Nebraska Nurse Practitioners Association.
   m. Report on the state of the Center for Primary Care.

2. Identify a CER project and study design - December, 2013.
   a. No Update.
   b. Potential project areas have been prioritized but no final project topic will be determined until organizational meeting with practice sites.

3. Identify the role of available students based on chosen sites and study topic - March, 2014.
   a. No Update.
b. Will be determined once the final study sites are identified—almost all sites being considered are training sites.

4. Hold three regional forums/focus groups to identify topics and concerns for stakeholders across the state – June, 2014.
   a. Other regional public health entities already have done this so we are gathering that data from them.
   b. Have held two—the Academy of Family Medicine annual meeting and the fall workshop—the planned practice site meeting will be the third that will prioritize the topic.
   c. Separately, the Center for Health Disparities had a community forum focused on the health of black males.
   d. If we receive funding from the submitted Clinical/Translational COBRE, we will establish a community advisory board that will not only identify and prioritize topics but help design research to address them.
   e. The new director for the Buffett Early Childhood Center is identifying and prioritizing topics to address with respect to children in Douglas County as well as across the state.
   f. UNMC CON co-hosted with the Nebraska Action Coalition a forum of Douglas County stakeholders to identify priority health issues and concerns – priority topics identified included mental/behavioral health, improved provider collaborations/communications for team care; substance abuse.

5. Develop a database of existing resources; create a web page and a toolbox for investigators on the social determinants of health – December, 2013.
   a. Group activated and beginning to identify existing resources.
   b. Web site design being updated with Public Affairs to provide a place for those resources.
   c. Mary Cramer has identified the existing resources that will be linked to a redesigned web page – the process has just started.
   d. There is a desire for but no current database of community-based research or partners; discussing how to accomplish this and keep it up without being all manual entry that likely won’t be sustainable.

6. Conduct research focused on the social determinants of health and other programs in Nebraska – June, 2014.
   a. No Update.
   b. Projects are being proposed for submission through the Rural Futures Institute.
   c. College of Public Health is already actively conducting research in this area with 7 ongoing projects and 6 publications to date.

Leaders: Chris Kratochvil, Paul Paulman, Mary Cramer, Gary Cochran, Terry Huang.

Measurable outcomes:

1. Initiate a research study with the primary care practice research network.
2. Initiate one new study on the social determinant of health and recommend future plans as a result of these efforts.

**Goal 2: Expand research collaborations between medicine and engineering to develop technologies that could lead to new funding, such as NSRI.** CSFL Jennifer Larsen

**Major milestones to be achieved during 2013-14**

1. Facilitate interactions between UNL and UNMC – December, 2013.
a. Have invited proposals/protocols not funding in the previous Bioengineering RFA to submit to the NRI Collaborative grant due in November.
b. Regenerative medicine has included UNL faculty on the web site and in their regular seminar series.
c. Five of 15 proposals submitted to NRI collaborative grant program from UNMC campus alone were bioengineering collaborations.
d. Ken Bayles and Tim Wei are working toward a new R01.
e. Nora Sarvetnick has provided space on the regenerative medicine floor for UNL investigators involved in collaborations.
f. There has been significant collaboration with UNL. Their faculty represent half of the attendees at the Regenerative Medicine Retreat and are listed on the Regenerative Medicine website as part of the project.
g. A second Regenerative Medicine retreat is being planned for January 22nd to follow up from the first strategic alliance retreat – this will focus on scientific partnerships.
h. Regenerative Medicine Program has provided and equipped both office and laboratory space for UNL Engineers.
i. Three UNL faculty, Drs. Pannier, Lim and Kidambi, now have courtesy UNMC appointments and more are being arranged (Drs. Wei and Riley).
j. The most recent regenerative medicine recruit, Dr. Jingwei Xie starting in January, is an engineer himself and will partner with UNL Engineers to work on tissue regeneration and drug delivery.
k. Regenerative Medicine has started a summer internship program for UNL engineering undergraduates: one participated last summer and program will expand next summer.

2. Track outcomes of existing bioengineering RFA grants and number of new DoD applications – December, 2013.
   a. Most DoD applications unrelated but we are tracking outcomes of previous bioengineering projects.
   b. Total of 22 task orders in first year of NSRI for total of $9 million.

3. Develop a process, by which engineering students or faculty could “shadow” a clinician to identify new ideas for health technologies – April, 2014.
   a. Set up appointment with Dean of College of Engineering to discuss what would be required and identify candidate(s).
   b. No bioengineering students currently interested but have discussed process for “credentialing” students on this campus.
   c. However, Regenerative Medicine has started a summer internship program as described above.

4. Apply for a bioengineering graduate training grant – April, 2014.
   a. VCR leadership had preliminary discussion with Iowa State although lead is just starting a sabbatical.
   b. Nora Sarvetnick planned meeting with Dean, College of Engineering and Ram Mahato, new Chair, Pharmaceutical Sciences.
   c. Discussed possible collaborative training program with Texas A and M as they don’t have one currently.
   d. Inadequate number of funded faculty in this area to apply in this timeframe but continue to develop collaborations that can result in successful application.
   e. MOU developed with UNO to work on collaborations in the area of biomedical informatics and technology.
   f. Collaborative bioengineering proposals were submitted for EPSCOR funding focused on “big data” and “neuroscience” (linked to UNO and UNL).

Leaders: Paula Turpen, Chris Kratochvil, Tim Wei
Measurable Outcomes:

1. Increase number of collaborative bioengineering grants submission – 2 were submitted 2013-done.

C. Advance the community/global partnerships for health

Goal 1: Implement telehealth and other medical-technology applications. CSFL Bob Bartee

Major milestones to be achieved during 2013-14

1st Quarter Progress:
- 53 nursing homes now signed up for telepsychiatry services.
- Obtained Dougherty Foundation grant to provide interactive consultation devices to link UNMC faculty with preceptors.

2nd Quarter Progress

1) Identify the services and sites for telehealth – September, 2013.
   a. The Daugherty Foundation Grant was received in October.
   b. Infrastructure being installed.
      - Clinical unit plans moving forward.
      - Genetics – launched/pilot program launched endocrine – significant funding received, launched in February. Virtual tumor board will launch in February.
      - Neurology working on contract for M.S.G. plan launched in February.

2) Resolve the reimbursement issues and other administrative needs – June, 2014.
   a. Legislation drafted to update Nebraska’s telehealth law – to be introduced January, 2014.

Leaders: Rod Markin

Measurable Outcomes:

1) Providing patient care through a telehealth network in six additional sites by June, 2014.
2) Provide patient care services through telehealth monitoring in the home – June, 2014.
3) Obtain reimbursement for telehealth services.

Goal 2: Develop a Regional Based Medical School at the University of Nebraska Kearney with a focus on Interprofessional Education. CSFL Bob Bartee

Major milestones to be achieved during 2013-14

1st Quarter Progress:
- Internal working group established.
- Initial discussion held with local stakeholders.
- Jeff Harrison, M.D. assigned by COM to lead feasibility study.
2nd Quarter Progress

1) Feasibility study to determine resources available to the community.
   a. Met with teaching faculty in North Platte, Kearney, Grand Island and Hastings, great excitement to participate.
   b. Met with CEOs and CMOs of North Platte, Kearney, Grand Island and Hastings, high degree of interest and willingness to participate.
   c. Met with students, high degree of interest in program.
   d. Met with clerkship faculty at UNMC. Great need identified for more clinical sites for training. High degree of interest.

2) Identify and recruit the pertinent stakeholders, including providers, community leaders and others needed.
   a. Met with State Senators in region. No further action.

Leaders: Bob Bartee, Jay Moore

Measurable Outcomes

1. An assessment, including operational issues to meet the requirements of the LCME.

D. Create a culturally competent organization

Goal 1 – Promote retention, engagement and mentorship of diverse faculty, staff and students. CSFL – Dele Davies

Major milestones to be achieved during 2013-14

1. Identify and train mentors and form community connections for minority faculty to improve engagement, retention and career redevelopment.
   a. Appointed Rowen Zetterman, MD, as the new director for faculty mentorship on campus, Susan Swindells, as the new director of equity, and Howard Liu, MD, as the director of faculty development programs. All three will be working together to help in this area, but playing different roles.
   b. Met with Sade Kosoko-Lasaki, associate vice-president for health sciences, multicultural and community affairs to promote opportunities for engagement of minority students and faculty between UNMC and Creighton Health Sciences.
   c. Rowen Zetterman, MD, the new director for faculty mentorship on campus has been conducting meetings with all deans and chairs to determine mentoring needs on campus. Currently developing concrete plan for mentorship for all faculty, but with special emphasis on minority faculty.
   d. Susan Swindells, the new director of equity has hosted two meetings of faculty women around the issue of mentorship.
   e. Dr. Davies held a minority faculty “Conversations with the Vice Chancellor” to identify issues of interest to minority faculty to encourage engagement on campus, and retention.
   f. A taskforce is scheduled to meet in January, 2014, to perform a SWOT analysis of issues impacting recruitment and retention of a diverse faculty to make recommendations as to changes needed.
2. An annual calendar of multi-cultural and welcoming events.
   a. The diversity committee is working on this.
   b. UNMC HR had a Fall Learn @ Lunch Series “Innovation: Putting Diversity of Thought to Work” that included three sessions focusing on diversity, inclusion and innovation in the workplace.
   c. There is an annual welcoming event planned for February, 2014, with Susan Swindells, director of equity.
   d. A Culture is Fest event is scheduled for April, 2014.

3. Develop a UNMC Diversity Plan and report on use of Diversity Allocation Fund.
   a. No updates.
   b. Five Faculty Diversity Awards were presented with the awards specified to be used to support scholarly activity.
   c. Three UNMC faculty members were awarded travel funds to attend the AAMC sponsored Minority Faculty Development and Grant Writing workshop.
   d. Diversity funds were used as a cost share for a program sponsored by the Health Resources and Services Administration’s Bureau of Clinical Recruitment and Service with the goal of increasing the recruitment and retention of disadvantaged health professions faculty.

Leaders: Dele Davies, Rowen Zetterman

Measurable outcomes

1) Increase the retention of existing faculty and the number of new minority faculty by five.

E. Advance biomedical technologies to improve health, diversify UNMC revenues and create economic growth in Nebraska.

Goal 1: Develop the Biomedical Innovation Accelerator program linked to new funding streams to enhance commercialization of faculty research. CSFL Jennifer Larsen

Major milestones to be achieved during 2013-14

1. Establish a UNMC Biomedical Innovation Accelerator (BIA) by establishing a structure with internal and external advisory members, a roster of “ad hoc” members with special expertise- September, 2013.
   a. Dr. Dixon has identified “faculty”/participants and expanding expertise as identified or needed.
   b. The list of BIA advisors has grown to include UNL faculty with FDA experience as well as former biotech executives.
   c. A first meeting will be set in January, 2014.

2. Establish a committee to determine the feasibility of creating a micro or venture investment fund to support the advanced development of new technology that comes through the BIA, leveraging state venture funds – September, 2013.
   a. The BIA will determine whether a micro or venture investment fund would be needed.
   b. The BIA will determine the feasibility of creating the investment fund at the visit above.
3. Develop online, programmatic materials to help educate faculty, students and staff on technology commercialization – March, 2014.
   a. The course objectives have been approved by the Graduate Council.
   b. Description of the course has been widely circulated.
   c. Course to be initiated this Fall if any students enroll with plan to convert to on-line curriculum after trial semester offering in person.
   d. The first Bioscience Entrepreneurship course was delivered this Fall. Five students signed up - and it looks like all five will complete the course. Student feedback will be evaluated and plans for possible expansion of the course (into a certificate program) will be discussed.

Leaders: Mike Dixon, Ken Bayles

**Measurable Outcomes:**


**F. Strengthen employee loyalty, satisfaction and wellness**

**Goal 1 - Improve the identification of issues impacting employees, and create training and development programs and management tools designed to address those issues.**  CSFL John Russell

**Major milestones to be achieved during 2013-14**

1. Refine employee survey results to quantify employee engagement level – December, 2013.

   a. Executive Summary with unit detail survey results were communicated personally with each Dean or Unit leader. Leaders will share information received with direct reports and proceed accordingly to improve engagement (extent to which employees are motivated to contribute to organizational success).
   b. Survey results were summarized on the Human Resources website.
   c. Newly hired employee development specialist will work with managers to develop department training strategies based on engagement survey results.

3. Revised training and development programs to address survey findings:
   a. The 2013-2014 Management Series included Employee Engagement session to discuss campus survey findings and management understanding of what drives engagement at UNMC.
   b. The 2014 Foundations for Success workshop series will introduce participants to employee engagement topics and survey findings.

4. Leverage technology to deliver management training to identified audience – May, 2014.
   a. No update.
   b. No update.
5. Enhanced performance evaluation and performance management processes:
   a. Committee is working to develop online performance evaluation for staff (office service group) in
      ADIS. In addition, Performance Evaluation/Management training for Managers will be delivered in
      February/March, 2014. COM is in the process of finalizing online performance evaluation for COM
      Faculty in ADIS and plans to launch in Spring, 2014
   b. No update.

Leaders: Carmen Sirizzotti, Linda Cunningham

**Measurable outcomes:**

2. Revised training and development programs to address survey findings.
4. Maintain employee turnover at current low levels.

**Goal 2 - Increase faculty and staff awareness of, engagement with, and access to health and wellness activities. CSFL John Russell**

**Major milestones to be achieved during 2013-14**

1. Develop and implement three health promotion initiatives centered on increasing health activity levels and
   improving nutrition – one by December, 2013 and the other two by June, 2014.
   a. Implemented the UNMC Decathlon (Feb 4 – April 14, 2013). We are in process of

2. Re-establish and activate the UNMC Campus Wellness Council – September, 2013
   a. Establishing the new council and will have their first meeting in September, 2013
   b. Holding off on establishing a new council until the vendor has been chosen for the University-
      Wide, Comprehensive Wellness Program (this vendor selection was scheduled for October but
      has been postponed until after the first of 2014).

3. Implement a five year health promotion plan and timelines based on HRA results – March, 2014.
   a. This is somewhat dependent on Central Administration’s timeline in getting a vendor selected
      for the University-Wide, Comprehensive Wellness Program that the University President has
      requested. Questions for the RFP will be discussed on Sept. 21, 2013.
   b. The vendor selection meeting for late October was postponed until after the first of the year.

4. Promote participation in the Health Risk Assessment program to increase participation – December, 2014
   a. Will promote prior to benefits open enrollment (Nov. 18 – Dec. 6, 2013).
   b. Promoted in the UNMC Today, Mid-Week Management Briefing and emails from Central
      Administration. Participation levels have not yet been provided by Wellstream.

5. Develop and implement a University-Wide level vehicle for providing evidence based guidelines and
   standards, for review for proposed modifications to the University Health Insurance Program – March, 2014.
   a. This will be included in the Comprehensive Wellness Program RFP.
   b. See 2 (b).
6. Expand and renovate the Center for Healthy Living to provide better facilities for faculty, staff and students.
   a. Preliminary architectural plans have been prepared; meetings have been conducted with the student president, the medical student leading the planning, other student representatives, the Vice Chancellor of Business & Finance and the Senior Vice President of the NU Foundation. A list of enhancements, along with their impact, have been given to the NU Foundation Senior Vice President.
   b. Project has exceeded expected fund raising target and will be reviewed to reduce costs.

Leaders: Jayme Nekuda

Measurable outcomes:

1. Future modification of employee insurance coverage based on employee input and evidence based health care protocols.
2. Continue three health promotion initiatives centered on increasing health activity levels and or improving nutrition.
3. Improve attendance at wellness promotion activities.
4. Increased participation in Health Risk Assessment.

Goal 3 - Advance engagement of the branding initiative and sustainability initiatives by Human Resources and Public Relations. CSFL John Russell

Major milestones to be achieved during 2013-14

1. Implement and evaluate the Step campaign initiative – September, 2013.
   a. Step campaign promotional materials finalized for program launch in September.
   b. The “Step Up” campaign was launched in October, 2013 (posters, Jobs@ website and recruitment materials).

2. Continue to advance the concept of vitality through promotional events – through June, 2014 ongoing.
   a. See goal 2, paragraph 1.
   b. Vitality concept fully included in Step campaign.

3. Continue to promote sustainability through regular communications in UNMC Today and campus events.
   a. At least one sustainability related article has appeared in UNMC Today each week. Energy curtailment projects in planning stages include, “Flip the Switch” and “Shut the Sash.”
   b. Efforts are underway to improve communication and cooperation with the student population.
   c. One sustainability article is appearing in UNMC Today each Tuesday, along with 2 “feature” stories. LiveGreen assisted with Spirit Week, providing recycle containers and mugs instead of Styrofoam cups. Have instituted a single use battery recycling program, increased the capacity to recycle plastic and metal (most commonly requested suggestion from students and staff) and continue to work on Shut the Sash.
   d. The LiveGreen website has been updated to make it more user friendly, and links are often included in UNMC Today stories to ‘advertise’ the information contained on the site. The committee now includes a GSA and Student Senate representative.

   a. One program will be held this Fall and two are planned for Spring, 2014, including an Earth Day theme.
b. Jon Fech from the UNL Extension office presented “Fall Garden and Lawn Tips” on October 24th. At least 35 people attended, and 12 watched the presentation from their desktop. The archived presentation is available for viewing on the LiveGreen website.

Leaders: John Russell, Bill O'Neill, Campus Sustainability Committee, Melanie Stewart, Chair

**Measurable outcomes:**

1. Improved scores on the relevant questions in the biennial employee survey.
2. Continued reduction in energy consumption and improved survey responses.

**G. Position UNMC to prosper during healthcare reform**

**Goal 1: Position UNMC, COM, UNMC-P & PPA, TNMC for Success under Healthcare Reform. CSFL Bob Bartee**

**Major milestones to be achieved during 2013-14**

1. Identify and implement new relationships in the clinical arena that will benefit UNMC’s missions.
   a. Regional provider network advancing.
   b. TNMC has approved a letter of intent for the formation and operations of a regional provider network.
   c. Levi Scheppers has been appointed as the head of the ACA project.

2. Reduce costs; identify and fill gaps in our clinical services – June, 2014.
   a. Deloitte plan is being implemented.
   b. Deloitte has engaged to assist in reducing costs and One Team has been created to oversee the process.

3. Develop an agreement on the new organizational structure for the combined TNMC/UNMC clinical enterprise – September, 2013.
   a. Organizational structure announced – formal agreement progressing.
   b. Deloitte has been engaged to assist in this project and One Team has the responsibility to propose a process to implement and make recommendations to project sponsors.

4. Establish UNMC's role in state wide planning and alignment initiatives for health care reform including Medicaid and telehealth legislative issues.
   a. UNMC well represented on workgroup to implement LR 22.
   b. UNMC hosted statewide stakeholders conference October, 2013, attended by 275 people.
   c. UNMC is actively presented on the committee established by LR 22 to propose the future structure of health care in Nebraska. The representatives are Rowen Zetterman, Chris Kratochvil and Cory Shaw.

5. Deloitte submitted proposal to clinical enterprise review sponsors.

6. One Team concluded 1st phase of review and will roll out recommendations to leaders and employees.

Leaders: Cory Shaw, Carl Smith, Bob Bartee, Glenn Fosdick, Brad Britigan
Measurable Outcomes:

1. Establish two new strategic relationships with other institutions which advance UNMC’s missions.
2. Have a revised operating structure that optimizes performance and facilitates relationship with other clinical organizations.

H. Implement the building of a healthier Nebraska initiative

Goal 1: Healthier Nebraska – Implement the cancer center and ambulatory clinical expansion. CSFL Don Leuenberger

Major milestones to be achieved during 2013-14

   a. On target.
   b. Delayed until March, to obtain a lower price as a result of established best pricing based upon fully completed bid documents.

2. Demolition of Swanson to begin Spring, 2013.
   a. Demolition to be completed by the end of October.
   b. Completed.

3. Complete design and construction drawings.
   a. On target to be completed by 12/31/2013.
   b. To be completed January 31, 2014

   a. Site preparation scheduled for October to December, 2013.
   b. Complete.
   d. The work started on December 1. Overall construction on schedule.

5. Arrange financing of donor pledges and TNMC.
   a. Phase of financing donor pledges completed.
   b. Clinical portion will be presented to the Board of Regents in March, 2014.

Leaders: Don Leuenberger, Ken Hansen, Ron Schaefer, Deb Thomas, Pam Bataillon and Fred Salzinger

Measurable Outcomes:

1. Meeting the timelines of the project.

Goal 2: Develop/Enhance clinical and research programs in cancer for the new Cancer Center Project. CSFL Don Leuenberger

Major milestones to be achieved during 2013-14

1. Establish priorities and plans for the growth and development of cancer research and clinical programs - September, 2013.
   a. Recommendations from the advisory committee are expected by 9/30/2013.
   b. The following recruitments have identified lead candidates with whom negotiations have begun:
i. Chief of surgical oncology
   1. Offer extended
ii. Chief of hematopathology
iii. Chief of bone marrow transplantation
   c. Presentations made to the Cancer Foundation leadership and proposals have been prioritized.
   d. Letters of offer have been made for each of the above although the Chief of bone marrow transplantation offer was revoked.
   e. Additional discussions around other areas of strategic need, genomics and clinical informatics, a high priority among those.

2. Evaluate the causes for reduced clinical trial enrollment and develop tactics to increase participation – December, 2013. (Jennifer Larsen)
   a. No updates.
   b. Barriers that are being addressed include the following:
      I. Process to request and obtain timely access to radiology films and histopathology slides or specimens required by many trials.
      II. Change in insurance offered to hospital employees to allow participation in clinical trials and discussion briefly with Central Administration about U of Nebraska employee insurance which currently does not.
      III. EPIC processes for clinical trials management have been improved with new version but remain a barrier.

3. Increase federally-funded clinical translational research (CTR) in the Cancer Center. (Jennifer Larsen)
   a. No updates.
   b. Discussions around need for increased research pharmacy support.
   c. Proposal submitted for Research representation in the leadership of the new combined enterprise.
   d. Initiative to develop research interest groups and collaborative graduate training programs (including clinical post-doctoral fellows) that would enhance collaborative interactions and research.
   e. Proposal moving forward to expand the tissue being banked for research.

Leaders: Jennifer Larsen, Brad Britigan, Glenn Fosdick, Carl Smith, Ken Cowan, Julie Vose

**Measurable Outcomes:**

1. Recruit clinical faculty members with expertise in CTR in areas of high priority to the Cancer Center in FY2014 and additional faculty in the next three years per the approved plans – part one, June, 2014.
2. Recruit basic science faculty members in areas of high priority to the Cancer Center and other areas in FY2014 and additional in the next three years per the approved plans – part one, June, 2014.
3. Increase enrollment of patients on clinical trials with an emphasis on investigator-initiated and cooperative group therapeutic clinical trials to 15% per year for the next 3 years.
4. Increase federally funded CTR programs in the Cancer Center by 10% per year for the next three years.
5. Advance genomic research to advance personalized medicine.

**Goal 3: Implement the UNMC College of Nursing and Allied Health Professions expansion in the new Health Science Education Building at the University of Nebraska Kearney.** CSFL Don Leuenberger

**Major milestones to be achieved during 2013-14**

a. The final of three design development meetings was conducted by RDG on September 11, 2013.
b. The “intermediate design review” (IDR) is scheduled w/ the UNK, UNMC, central administration facilities personnel, and RDG on September 23, 2013.
c. Design development is scheduled to be complete in October.
d. This step has been completed.

   a. Construction documents are scheduled to be completed to go to bid in February, 2014.
   b. No change.


4. Develop plans for new curricular and research opportunities and strategies to be implemented as part of the project. – June, 2014.
   a. Nursing and Allied Health will be meeting with the IPE committee on campus to discuss ways to capitalize on the Kearney initiative to expand interprofessional education on that campus and throughout UNMC.
   b. Meeting held, additional meetings to be held in early 2014.

   a. No update.
   b. No update.

6. Develop and expand regional partnerships, particularly to increase clinical education support for students – January, 2015.
   a. No update.
   b. No update.

Leaders: Julie Sebastian, Kyle Meyers

Measurable outcomes:

Goal 4: Implement the UNMC College of Nursing expansion in the new Nursing Education Building at the University of Nebraska, Lincoln. CSFL Don Leuenberger

Major milestones to be achieved during 2013-14

1. Finalize the site on the University of Nebraska, Lincoln campus.
2. Complete the preliminary architectural drawings.
3. Raise the matching funds required by the Unicameral.

Leader: Julie Sebastian

Measurable outcomes: