

**The University of Texas Health Science Center at San Antonio**

**Compact with The University of Texas System  
FY 2006 through FY 2007**

## I. Introduction: Institution Mission and Goals

*The primary goals of the University of Texas Health Science Center at San Antonio are to:*

- *educate health care providers and scientists*
- *engage in biomedical and clinical research to improve the health of mankind*
- *provide state-of-the-art clinical care*
- *enhance community health awareness*
- *address health disparities\**

### Mission Statement

The mission of the University of Texas Health Science Center at San Antonio is to serve the needs of the citizens of Texas, the nation, and the world through programs committed to excellence and designed to:

- educate health professionals for San Antonio and the entire South Texas Community and for the State of Texas to provide the best possible health care, to apply state-of-the-art treatment modalities, and to continue to seek information fundamental to the prevention, diagnosis, and treatment of disease.
- play a major regional, national and international role as a leading biomedical education and research institution in the discovery of new knowledge and the search for answers to society's health care needs.
- be an integral part of the health care delivery system of San Antonio and the entire South Texas community, as well as an important component of the health care delivery system of the State of Texas and the nation.
- serve as a catalyst for stimulating the life science industry in South Texas, culminating in services and technology transfer that benefit local and state economies.
- offer continuing education programs and expertise for professional and lay communities.

Including a total of 1,494 full-time and part-time faculty; 3,186 staff members, and 2,837 students, all of whom are housed on six campuses, UTHSCSA is one of the six health science centers within the UT System. In keeping with its mission, UTHSCSA admits a diverse student body into five different professional schools including Allied Health Sciences, Dental, Biomedical Graduate Studies, Medical and Nursing.

## II. Major Ongoing Short-Term and Long-Term Priorities and Initiatives

### **SHORT-TERM INITIATIVE: ENHANCEMENT OF EXCELLENCE IN EDUCATION**

#### **PRIORITY: #1**

**Goal 1.1- Develop and sustain the quality and capacity of the faculty and the student learning experience by establishing *the Academic Center for Excellence in Teaching (ACET)*. (Note: *The name of the teaching center has been changed. In prior versions of the Compact, it was referred to as the Center for Effective Learning and Teaching.*)**

#### **Objective:**

- Create a center for learning and teaching to provide "umbrella" support for the five schools in order to ensure that they encourage intellectually rigorous teaching and scholarship in health care professional education that inspires students to become outstanding care providers and future academic leaders.

**Strategies:**

- Design the framework for the center including appointment of a director; identify the specific areas of focus, menu of programs, services to be sponsored, and methods to certify teaching expertise.
- Review and analyze the current programmatic instruction and methods of delivery.
- Review current methods of instruction for the various academic programs and evaluate the effectiveness of each method.
- Plan/implement course offerings, technical assistance, and a small grants program.
- Work with each school to create an individual strategy designed to enhance teaching and scholarship and to offer additional career enhancements for the faculty.

*\*Revisions to the Compact are presented in bold, italic type throughout the document.*

**Resources:**

- Designate 10% of funds from the newly approved tuition increase to create the center.
- Reallocate additional funds where appropriate.

**Progress Measures:**

- Progress report submitted annually by the director of the center including information regarding upward evaluation by clients, performance of students, and results of accreditation processes.  
**Progress: To date, Faculty Planning Committee for the Teaching Center completed a study of priorities for faculty and an action plan for implementation.**
- Timelines, developed by May 2005, detailing organization and implementation plans for specific activities of the center. **Progress: Pending finalization.**

**Major Obstacles:**

- Cultural change necessary to integrate researchers and clinicians.
- Availability of space in which to house the Center and its staff.

**Goal 1.2- Faculty Recruitment & Retention****Objective:**

- Retain and recruit a diverse faculty of exceptional quality for all schools.

**Strategies relevant to all schools:**

- Ensure that all searches for new faculty are competitive and nationwide.
- Decrease the difference between the mean faculty compensation at UTHSCSA and comparable figures for equivalent positions at peer schools.
- Provide the faculty with annual incentive payments that are merit based and tied to standards of performance in teaching, patient care, and research as articulated in the mission statement.
- Provide training opportunities for faculty in order to enhance teaching, clinical, and research skills.
- Develop specific strategies designed to increase funding for the HSC and to support recruitment of a diverse faculty.

**Additional strategies:**

- Provide merit based annual incentive payments tied to mission-based performance in teaching, patient care, and research. (Medicine)
- Recruit, in 12-months, at least one new faculty member who has NIH funding. (Nursing)
- Increase the number of 12-month faculty contracts in order to compete more effectively with other schools of nursing in Texas. (Nursing)
- Implement a peer review process in which faculty members apply for awards of merit, and peers determine the award recipients. (Nursing)

**Resources:**

- Revenue derived from the recently approved tuition increase. (All schools)
- General revenue, enhanced clinical revenue, research grants and gifts. (HSC)

**Progress Measures relevant to all schools:**

- Reduction in the difference between the mean faculty compensation at UTHSCSA and comparable figures for equivalent positions at peer schools. **Progress: All schools have evaluated salary differentials using comparisons with national faculty salary survey data. The Dental School has implemented an Academic and Clinical Faculty Incentive Program. The Medical School continues to develop a faculty performance-based compensation plan. The Graduate School did a comparison study of faculty salaries with the AAMC faculty salaries for basic sciences.**
- Evaluation of faculty searches in terms of success/failure in recruitment and in retention and comparison of current data to that of the previous two years. **Progress: Data are being collected through the end of FY05 to assess this measure.**
- Evaluation of faculty in terms of defined measures of clinical, research and scholarly productivity. **Progress: Data are being collected through the end of FY05 to compare with baseline measures.**
- Evaluation of diversity among faculty. **Progress: The School of Medicine is seeking ways to locate a wider diversity of candidates for unfilled/new positions. The School of Nursing is advertising faculty positions in a broader range of journals than previously.**

**Additional Progress measure:**

- Increase in number of 12-month contracts for faculty. (Nursing) **Progress: The School of Nursing is working on means of providing salary to convert current 9-month contract faculty to 12-month contract faculty.**

**Major Obstacles for all schools:**

- Inadequate start-up dollars to hire new faculty and/or senior, funded research faculty.
- Inadequate space for each recruiting activity.

**Additional Major Obstacles specific to Nursing:**

- Insufficient financial resources to attract funded senior research faculty.
- Insufficient financial resources to increase the number of 12-month contracts for faculty.

**Goal 1.3- Student Access and Success: Cultivating An Effective Learning and Professional Environment**

**Objectives:**

- Increase enrollment and retention of diverse, top-quality students.
- Follow the NIH Roadmap with regard to interdisciplinary graduate education.

**Strategies for each school:**

- Allied Health Sciences
  - Create two student centers designed to welcome students and assist them in acclimating to the School: a virtual center on-line, a physical center at the School.
  - Establish early acceptance programs for qualified students coming from regional feeder schools.
- Dentistry
  - Increase the number of elective courses in order to allow students to explore a variety of future career choices, pursue individual research interests and acquire teaching experience.
  - Encourage students to participate in dual degree options and Research and Teaching Training Honors Programs.

- Explore funding opportunities in order to expand the dental academic career program, D9STAR.
- Graduate School
  - Appoint a faculty committee to develop and expand the range and scope of graduate programs so that they reflect the nature and complexity of contemporary biomedical science, the nature and scope of faculty research interests, and current mandates from federal/private funding agencies, such as the NIH Roadmap.
  - Finalize the program components for the MS/PhD program.
  - Develop financial resources for the DDS/PhD and MD/PhD programs.
- Medicine
  - Create an Office of Professionalism and Diversity that is charged with enhancing professionalism and humanism among students and faculty.
  - Create a Teaching Academy within the school and under the umbrella of the HSC Academic Center for Excellence in Teaching, the goal of which is to support teaching and learning.
  - Redesign the medical curriculum so that it emphasizes self-directed learning, integrates basic sciences with clinical training, and encourages use of technology.
  - Expand the activities of the Regional Academic Health Center (RAHC) in order to offer experiences in border health to more students.
  - Implement the new Clinical Skills Center.
- Nursing
  - Implement clinical course offerings for nurse practitioner majors in the summer in order to decrease time needed to graduate.
  - Implement curriculum changes at all levels and assess related outcomes.
  - Institute an interview as part of the screening process for admission.
  - Provide web-based format for all masters' level core courses.
  - Offer a Psych/Mental health degree preparation at the MS level.
  - Partner with the VA to develop a model curriculum for certification as a Clinical Nurse Leader.

**Resources for all schools:**

- Revenues derived from the newly approved tuition increase.
- Reassignment/reallocation of staff, where appropriate.
- Leveraging of funds, where possible, including student fees, training grants and other resources.

**Additional resource for Dental, Graduate, Medical:**

- New resources designated for initiating new degree programs including dual degree programs.

**Progress measures relevant to all schools:**

- Improved student profile when figures are evaluated for diversity and number of students recruited, retained and graduated. **Progress: The School of Allied Health has nearly completed early acceptance agreements with UT Brownsville and Prairie View A&M. The Graduate School of Biomedical Sciences has \$9M in federal grants pending review to support an increase in under-represented minorities at the graduate level in biomedical sciences. Graduate School has also obtained \$200k from UT System to jointly host a summer internship program for disadvantaged science students at UTSA for the next two years. The School of Nursing is working to obtain approval for an LVN to BSN program through the Laredo Extension Campus (LEC).**
- Increase pass rates for licensure and certification. **Progress: The School of Medicine is holding the ministep 1 exam later in the year, is adding several Step 1 prep sessions, and has implemented its own clinical skills practice exam for test preparation. The School of Nursing is referring more students to review courses for exam preparation. The School of Allied Health is studying means of improving students' results on the national board examinations in Deaf Education and Hearing Science as well as Physical Therapy.**

**Progress measures specific to Allied Health Sciences:**

- By summer 2004, student welcome centers will be established. **Progress: Completed.**
- Number of applicants will increase by 10% by fiscal year 2006. **Progress: Pending.**
- By October 2004, initiate an early acceptance agreement with Prairie View A&M. **Progress: Continuing development.**

**Progress measure specific to Dentistry:**

- In fiscal year 2006, implement a year-round curriculum designed to offer a wide array of electives that will enrich students' education. **Progress: The Dental School has introduced a new policy that, starting with entering students in 2004, students will have mandatory summer clinic sessions between year 2 and 3 and between year 3 and 4. Further planning on converting to 12-month curriculum is nearly finalized.**

**Progress measure specific to Graduate School:**

- Track requests to the Coordinating Board for new programs or changes to existing programs. **Progress: A faculty committee at the Graduate School of Biomedical Sciences is working on recommendations for new interdisciplinary programs, with expectation that new programs might be presented to the Coordinating Board in September 2006 at the earliest. Programs in neuroscience and bioinformatics are top prospects.**

**Progress measures specific to Medicine:**

- In Spring 2005, implement the Clinical Skills Center to enhance the pass rates of medical students on the new NBME Step 2 Clinical Skills examination. **Progress: Construction of a new Clinical Skills Center has been completed, equipment installed, and a director for the program hired.**
- Develop teaching sites for the RAHC throughout the Valley. **Progress: A new teaching site was established with an area ophthalmologist.**

**Major Obstacles for all schools:**

- Ability to secure new and/or reallocated funding.
- Physical space to support these activities.
- Identification of faculty who are willing to participate in these activities.
- Increased integration of Graduate School with teaching programs in the other schools.
- Competition among peer institution for qualified minority students.

**SHORT-TERM INITIATIVE: EXPANSION OF SUCCESS IN RESEARCH ACTIVITIES**

**PRIORITY: #2**

**Goal 2.1- Increased Funded Research and Training Grants from all Sources**

**Objectives:**

- Increase funding for research dollars from NIH and other extramural sources and expand research programs which focus on identified thematic areas.
- Increase faculty research productivity.

**Strategies:**

- Institutional
  - Assure that UTHSCSA has the financial capacity and physical space to support new research activities including RO1's and to promote programmatic/thematic research and training grants.

- Recruit a Vice President for Research whose responsibility it will be to facilitate institutional research efforts.
- Modernize the IRB to facilitate enhanced productivity.
- Develop a Clinical Studies Web Site.
- Increase the number/quality of invention disclosures through our Office of Technology Ventures.
- Increase the amount of income generated from intellectual property and accelerate the movement of technology to the marketplace.
- Allied Health Sciences
  - Hire at least one new research faculty in each of the next two years.
  - Increase extramural funding by 10% a year in the next two years.
- Dentistry
  - Organize and promote development of thematic research areas.
  - Expand clinical research programs through special training opportunities in order to address the increasing emphasis of NIH on clinical research.
- Graduate School
  - Develop an Institutional Postdoctoral Training Center/Office to enable the research faculty to recruit, retain and finance postdoctoral research fellows who reflect quality and greater diversity.
  - Support and encourage interdisciplinary, collaborative research initiatives and sharing of core facilities with interested colleagues in all five schools.
  - Increase the number of individual and group pre- and post-doctoral training grants awarded to faculty or groups thereof.
- Medicine
  - Actively seek additional NIH funding awards by recruiting known research faculty in order to improve the national ranking of the school.
  - Identify opportunities to develop and expand centers of excellence for translational research.
  - Allocate resources for research using Mission Aligned Planning process (MAP™) and other data to align support with research efforts.
  - Expand support for collaborative research through continued development of the Medical Education Research Fund, San Antonio Life Sciences Institute (SALSI) and ERC activities.
  - Expand research opportunities and training for junior physician faculty/students/residents, both on main campus and RAHC, and mentor faculty for research success.
  - Create a plan for ongoing maintenance and upgrade of research facilities.
- Nursing
  - Increase funding applications and success rate for sponsored research.
  - Secure new faculty members who have existing external research funding.
  - Brief faculty on research development and translate research instruments to include more culturally diverse subjects.

**Resources for all schools:**

- Grant and contract awards.
- Funds generated from recent tuition increases, where appropriate.
- Incentive plans, including optimizing the use of institutional F & A dollars.

**Resources for the Health Science Center:**

- Existing funds that can be reallocated.
- UTHSCSA resources available to faculty on a competitive basis: 1) SALSI grants; 2) New Investigator Funds; 3) Pilot Projects; 4) Faculty Enrichment; and 5) Presidential Research Enhancement Fund.
- Incentives for invention disclosures, patents and revenue sharing.

**Progress Measures for all schools:**

- Increased number of research and training grants applied for, and awarded. **Progress: A Vice President for Research was appointed in October. New or expanded collaborations have been developed with the San Antonio Institute for Molecular and Cellular Primatology, Central Texas Retreat on Aging, BorderPlex Council, and Center for Research in Musculoskeletal Diseases to advance establishing strong thematic centers for research.**
- Increase in the proportion of faculty with active funding. **Progress: Quantitative data are being collected after close of FY05 to assess progress on this measure.**
- Increase in the number of publications and national presentations. **Progress: Quantitative data are being collected after close of FY05 to assess progress on this measure.**
- Increase in number of invention disclosures, patents, and income from intellectual property. **Progress: Quantitative data are being collected after close of FY05 to assess progress on this measure.**

**Major Obstacles for all schools:**

- Competition for talented faculty and post-docs nationwide.
- Limited availability of faculty start-up packages.
- Funding necessary to upgrade and maintain existing laboratories/equipment.

**SHORT-TERM INITIATIVE: EXPANSION OF EXCELLENCE IN CLINICAL AREAS**

**PRIORITY: #3**

**Goal 3.1- Enhance clinical programs in order to ensure excellence in patient care**

**Objectives:**

- Become the provider of choice for many clinical programs in South Texas and beyond, by offering outstanding, efficient and safe patient service.
- Provide care to those most in need.

**Strategies:**

- Allied Health Sciences
  - Implement a faculty practice.
- Dentistry
  - Establish faculty development programs to enhance clinical skills.
  - Recruit dentists with broad training who can function in a general practice setting.
- School of Medicine
  - Finalize plans for the new Medical Arts and Research Center (MARC) building.
  - Improve and expand patient service at all ambulatory facilities by streamlining customer service via the Vice President for Patient Services at the University Physicians' Group (UPG) and developing patient safety initiatives which focus on the electronic medical record.
  - Continue strategic redesign of UPG's infrastructure.
  - Recruit UPG Vice President for Medical Staff/Associate Dean for Clinical Affairs.
  - Enhance relationships with University Hospital, the VA, CTRC, Christus Santa Rosa and other area health care institutions.
- Nursing
  - Expand clinical service and contracts in primary care settings.
  - Expand Faculty Enrichment program to encourage more clinical practice programs and increase collaboration with MD's in clinical practice.
  - Increase clinical practice and research by outreach to underserved communities through support for both research and practice efforts under MESA Funding.

**Resource for Dental and Nursing:**

- Increased productivity of clinical faculty as a result of incentive systems.

**Resources for Medical:**

- Increase in clinical revenue.
- Consider various mechanisms for funding the new ambulatory building.
- Increased productivity of clinical faculty as a result of incentive systems.

**Progress Measure for Allied Health:**

- Adoption of faculty practice plan for Allied Health by Spring 2005. **Progress: UTHSCSA Allied Health Partners Faculty Practice Plan was approved by Board of Regents. Currently, the Low Vision Center of the Practice Plan is actively treating patients.**

**Progress Measures for Dental:**

- Billing and collection data for Dental practice plans. **Progress: Data are being collected through the close of FY05 for assessment of progress.**
- Dental school faculty development programs put into place. **Progress: Faculty development programs in the Dental School have been expanded including setting aside one hour each Friday morning during the academic year to have presentations – inviting high caliber speakers for these sessions – to faculty (and students) on new advances in dentistry. Dental Continuing Education credit is awarded for these sessions.**

**Progress Measures for Medical:**

- Billing and collection data for Medical practice plans. **Progress: Data are being collected through the close of FY05 for assessment of this measure.**
- Adoption of formal plan for the new ambulatory building. **Progress: The Project Planning Schedule has been developed with key milestones. Proposals from architectural and design firms are undergoing review.**

**Progress Measure for Nursing:**

- Dollars in Faculty Enrichment plans and number of faculty with contracts at the Nursing School. **Progress: Faculty Enrichment Plan policies have been revised to encourage greater participation by the nursing faculty.**

**Major Obstacle for Allied Health, Dental, and Nursing:**

- Assuring that efficient and effective clinical operations are in place and functioning.

**Major Obstacles for Medicine:**

- Aligning the faculty culture with the need for clinical productivity and responsiveness.
- Successful recruitment of clinical faculty, as needed.
- Assuring that efficient and effective clinical operations are in place and functioning.

**SHORT-TERM INITIATIVE: ORGANIZATIONAL EFFECTIVENESS AND PRODUCTIVITY**

**PRIORITY: #4**

**Goal 4.1- Improve the fiscal infrastructure and support services at all levels in order to enhance the goals and priorities of the Health Science Center.**

**Objectives:**

**Administration, Business Affairs, and Information Technology**

- Upgrade the PeopleSoft administrative system to allow web access and phase in the student module. (HSC)
- Define and develop opportunities to better address compensation and classification issues related to non-faculty positions. (HSC)
- Meet the April 2005 deadline for the Security Rule component authorized under the Health Insurance Portability and Accountability Act (HIPAA). (HSC)
- Limit use of the social security number as personal identification to those uses permitted or required by applicable law or University policy. (HSC)
- Develop a feasibility study for the capital financing plan to fund the construction of the MARC project and a new parking and auxiliary services structure for the main campus. (Medical)

#### **Outreach Activities**

Enhance K-16 pipeline activities and early admission agreements with key feeder schools. (All schools)

Increase alumni donations. (All schools)

#### ▪ **Capital Campaign for Health Science Center**

- Conduct a successful capital campaign to secure adequate support for the endowment and construction of a major research tower.
- Secure the lead campaign gift or pledge.
- Increase membership in the President's Council and the Ambassadors' Circle of the Children's Cancer Research Institute.
- Conduct a comprehensive assessment of potential donors' interest in the health science center.

#### **Resources for Health Science Center:**

- Existing funding augmented by new dollars from local and federal sources.
- Re-allocation of existing funding.

#### **Progress Measures:**

- Obtain Web access on People Soft and convert student information system. **Progress: Use of new PeopleSoft Student Administrative component continues as planned and Student/Financial Aid system has been successfully implemented.**
- Implement the security component of HIPAA. **Progress: UTHSCSA remains on schedule to achieve HIPAA Security Rule compliance by April 2005.**
- Deploy software updates for security vulnerabilities automatically, by January 2005. **Progress: Centrally managed anti-virus and patch management protection continues to be enhanced, but further progress is pending release of production quality software by Symantec and BigFix.**
- Eliminate social security numbers on all documents, as prohibited by law. **Progress: Of the 21 actions required by BPM 66 to be implemented by 1/30/05, 20 have been implemented and the final requirement is expected to be completed by the end of fiscal year 2005.**
- Prepare a recommendation for salary adjustments in the Classified Pay Plan to improve compensation. **Progress: The review of all classification salary ranges has been completed and recommendations for changes are being considered.**
- Develop programs to reward employees with merit raises based on performance. **Progress: UTHSCSA has implemented merit-based salary increase programs for faculty and staff and for clinical and research faculty.**
- Prepare budget estimates, analysis of revenue streams and final projections for capital financing for the MARC project. **Progress: Projections are pending final space requirements of signature programs, final construction estimates, and final equipment requirements.**
- Completion of an assessment of potential donors' interest in the health science center. **Progress: On-line Internet giving via donor credit cards was activated at the end of December 2004. Plans are being developed by the school development officers and**

**the President's Council's program coordinator to conduct e-mail solicitations of new and current donors.**

- Conduct a successful capital campaign to secure support for the construction of a research tower and development activities to secure increased endowment. **Progress: Additional funds raised since end of FY04 for endowment = \$1,998,605, others: \$10.8 million.**
- Secure a lead gift/pledge of \$25 million or more for the capital campaign. **Progress: A detailed written Campaign Plan has been prepared and reviewed with numerous constituencies. The Capital Campaign's volunteer leaders have been recruited.**
- Increase in annual membership to the President's Council and Circle. **Progress: 18 new members have been recruited for the President's Council and 21 new members have been recruited for the Ambassador's Circle since September 2004.**
- Increase in the number of contacts of high school and college students. (All schools) **Progress: Each school has engaged in activities to increase their interactions with high school and college students in the greater San Antonio area and in South Texas. The number of contacts will be assessed quantitatively after all data are collected for FY05.**
- Increase the number of early admission agreements with key feeder schools. **Progress: The Dental School has trained advisors at UTEP regarding the newly established early admissions agreement with UTEP. The Dental School also has collaboratively drafted an early admissions program with Midwestern State University that is currently under review.**
- Increase in alumni donations. (All schools) **Progress: Four of the five schools are working on developing systems to more completely identify and communicate with their alumni regarding donations.**

**Major Obstacles:**

- Lack of funds to deploy fully vendor provided software updates. (HSC)
- Increased, effective communication to enhance recognition of the HSC by the community. (HSC)
- Generating funding and engaging the faculty in outreach and access programs. (All schools)

**SHORT-TERM INITIATIVE: COMMUNITY AND INSTITUTIONAL RELATIONS**

**PRIORITY: #5**

**Goal 5.1- Increase collaborations with *the University of Texas at San Antonio* (UTSA).**

**Objective:**

- Develop more educational, research, and other types of collaborative efforts with UTSA.

**Strategies:**

- Plan and carry out effective joint research, degree and other programs.
- Expand the existing cross campus cost efficient delivery of services relationship.

**Resources:**

- Funds from the UT System.
- Contributions from each institution, grants and fundraising.

**Progress Measures:**

- Increase in the number of education, research and other types of collaborative efforts with UTSA. (All schools) **Progress: SALSJ funded 9 new proposals (at \$1.1 million combined), one of which was for education and the remaining were research proposals ranging across a broad spectrum. The School of Allied Health Sciences and the School of**

Medicine are working on development of an interdisciplinary doctoral degree in Communication Science with UTSA. The School of Medicine is developing a five-year plan for a Women's Health Curriculum that will involve joint teaching by UTSA and HSCSA faculty. A grant has also been received to establish a National Center for Women's Health on the HSCSA campus.

**Major Obstacles:**

- Perceived cultural differences between the two institutions.
- Limited availability of funds for both short-term and long-term projects.

**Goal 5.2- Increase development of the Laredo Extension Campus (LEC)**

**Objective:**

- Provide a progressive health professional educational service in an underserved area.

**Strategies:**

- Provide continuing education for health professionals.
- Continue environmental health training and education (STEER).
- Strengthen student health careers pipeline activities.
- Provide training for dental students and residents.
- Develop a regional learning center in fiscal year 2006.
- Provide infrastructure support for community/population based education.
- Promote selected Allied Health educational activities.

**Progress Measures:**

- Increase in numbers of educational activities in Allied Health. **Progress: A partnership between the School of Allied Health Sciences and Texas A&M has been developed for a collaborative offering of a Physicians Assistant Program through the LEC. The Memorandum of Understanding has been submitted to all parties.**
- Increase in numbers of virtual and Web courses offered. **Progress: Medical School and Nursing School are providing limited continuing education programs. School of Nursing is proposing a LVN to BSN program with Texas A&M University.**

**Major Obstacle:**

- Insufficient funding from the state.

**LONG-TERM INITIATIVE: CULTIVATION OF OUTSTANDING ACADEMIC ENVIRONMENT**

**PRIORITY: #1**

**Goal 1.1- Create an infrastructure that develops and supports an environment which attracts a diverse group of faculty/staff and students and enhances their success.**

**Strategies for all schools:**

- Encourage academic productivity through financial incentives and recognition through promotion and tenure.
- Develop collaborative models for joint projects that integrate the work of schools and individual departments and identify potential funding support.
- Develop initiatives designed to promote "professionalism" in each school and to create a welcoming and respectful academic environment.
- Consider diversity to be an issue of fundamental importance to both the student admissions and faculty recruitment processes.

**Resources:**

- HSC budgets limited resources strategically.
- Refining the administrative structure and budgetary process.

**Progress Measures for all schools:**

- Increased recruitment and retention of faculty as measured by open and/or internal searches.
- Rankings of scholarly achievement as demonstrated by research grants, appointments to prestigious academic bodies, successful recruitment and matriculation of students, publication, and successful technology transfer.
- Increase in unrestricted funds that enable the HSC to be competitive in attracting and retaining top quality academic talent. (HSC)

**Major Obstacles:**

- An existing institutional ethos that does not encourage multidisciplinary and inter-school collaboration. (All schools)
- Willingness to make difficult decisions regarding allocation of resources. (All schools)

**LONG-TERM INITIATIVE: SERVICES TO THE COMMUNITY****PRIORITY: #2****Goal 2.1- Enhance and solidify the role of UTHSCSA in South Texas****Objectives:**

- Ensure reliable telecommunications service to areas in South Texas.
- Use the Regional Academic Health Center (RAHC) and Laredo Extension Campus (LEC) as models for the development of meaningful programs for community constituencies.
- Ensure that UTHSCSA is represented at important healthcare and health professional functions in the 38-county region of South Texas.

**Strategies:**

- Create a network infrastructure in South Texas to deliver reliable telecommunications services including video, voice, data, and computer systems.
- Work with existing South Texas partners to coordinate health programs, develop/monitor calendar of health-related events in a 38 county region.
- Co-sponsor international seminars, symposiums, and continuing education programs for health professionals.
- Partner with federal and state agencies in grants and contracts to provide educational training and activities, i.e.-emergency medical services.
- Expand the number and variety of community-based health professionals and institutions participating in the pipeline program (e.g., the MedEd Program.)

**Resources:**

- Reallocation of funding as well as faculty and staff time.
- PUF/LERR Funds, where appropriate.
- Administrative staff who routinely travel throughout the 38-county region to maintain visibility and to ensure knowledge of local activities.
- Staff at sites that are in operation in Harlingen, McAllen, Edinburg, and Laredo form the baseline for expansion activities.

**Progress Measures:**

- Installation of common carrier circuits by summer 2005.
- Increased enrollment and graduation of students from South Texas.
- Identification of potential partnerships with local stakeholders to address health care issues.
- Increased number of health care organizations seeking consultations/information.
- Increased number of health professional students seeking remote clinical rotations, selectives, and/or electives in South Texas.
- Increase in the number of program participants, and the number/percentage of applicants to a professional school accepted, enrolled and graduated.

**Major Obstacles:**

- Funding new initiatives and sustaining ongoing funding needs.
- Limited staff and funds to cover clinical training and education for health care professionals and related health initiatives.
- Limited funding for remote student housing.
- Difficulties in hiring/contracting faculty.
- Participation by the Office of Telecommunications of the UT system is critical to the success of the fail-safe ring for South Texas.

**LONG-TERM INITIATIVE: ORGANIZATIONAL EFFICIENCY**

**PRIORITY: #3**

**Goal 3.1- Construction of New Buildings**

**Objective:**

- Design and construct new buildings to meet the needs of the institution.

**Strategies:**

- Ensure that designs for new building are structurally sound and meet the occupants' needs.
- Represent the best value in construction costs versus future maintenance costs.
- Incorporate energy features that are both efficient and environmentally sound.

**Resources:**

- Reallocation of existing resources.
- Tuition Revenue Bonds, PUF/LERR funds.
- Requests to legislature for funding.

**Progress Measures:**

- Diminished needs for leased space.
- Increase in qualified faculty, students and staff that reflect diversity.
- Increase in funding through grants.

**Major Obstacle:**

- Lack of recent success in obtaining funds.

**Goal 3.2- Improve the position of the UTHSCSA with regard to deferred maintenance, emergency preparedness and fire and life safety issues.**

**Objectives:**

- Install, test, and upgrade existing emergency, fire and life safety programs.

- Provide resources necessary to reduce the frequency of fires through education, and the magnitude of fires via the phased-in installation of automatic sprinkler systems.

**Strategies:**

- Request additional resources for emergency preparedness and deferred maintenance.
- Improve the knowledge of faculty/staff, and students about appropriate emergency responses.
- Allocate institutional funding each year to address deferred maintenance and fire/life safety systems.

**Resources:**

- Funding from the legislature and PUF/LERR Funds.
- Additional knowledgeable emergency, fire, and life safety professionals.
- Capital expense resources to address safety and deferred maintenance needs.

**Progress Measures:**

- Increase the percentage of new employees who participate in safety training programs to 100%, and achieve 25% participation of current staff through new web-based technology, by fiscal year 2006.
- By fiscal year 2006, decrease of 5% in rate of occupational injury, decrease by 5% the worker's compensation premium rate, and increase the annual workplace safety evaluations to 100%.
- Install automatic sprinklers within 36 months of the completion of the new research tower complex.
- Implement fire safety remediation plan over 10 years.

**Major Obstacles:**

- Lack of funding.
- Construction costs inflated by 5% annually.
- UT System retaining more risk with higher insurance deductibles.

**III. Future Initiatives of High Strategic Importance**

***NOTE:** The HSCSA was asked by the System to review, and change if needed, its future initiatives for this Compact Update. Because the HSCSA is in the process of conducting long-term, institutional strategic planning and is committed to aligning our strategic planning and the Compact, at this time, no changes have been made to the future initiatives as submitted in the original Compact document. We anticipate that our institutional planning process will be completed by the end of February 2006. Appropriately, any changes to our future initiatives will be incorporated into the Compact after our planning process is complete to ensure alignment.*

**INITIATIVE: CONTINUED CULTIVATION OF OUTSTANDING ACADEMIC ENVIRONMENT**

**PRIORITY #1**

**Objective 1.1: The HSC Library will expand its role in knowledge management.**

**Strategies:**

- Obtain input from major stakeholders through strategic planning activities.
- Set priorities for implementation of knowledge management as identified above.
- Foster interdisciplinary collaborations by facilitating the development of unlikely partnerships.
- Work with the schools to integrate library and information management into academic programs.

**Resources:**

- Availability of resources for expertise, funding, faculty/staff, and physical space is currently unknown.

**Progress Measures:**

- Completed needs assessment of users.
- Summary of strategic planning results, including prioritized action items.
- Increase in collaborative activities between the library and others.
- Increased integration of information management in academic programs.

**Major Obstacles:**

- Involvement of the institution, overcoming resistance to change.
- Escalating costs of information acquisition and storage.
- Ability to obtain resources: expertise, finances and personnel

**INITIATIVE: INCREASING EVIDENCE OF CLINICAL EXCELLENCE**

**PRIORITY #2**

**Objective 2.1:** The School of Medicine will build an Academic Group Practice that serves the community and offers state-of-the-art clinical services which support the School's missions of teaching, research, and patient care.

**Strategies:**

- Institute the "Patient First" initiative to measure and improve patient satisfaction.
- Develop new tools for measuring performance in key service quality indicators.
- Develop a care team model to optimize use of physician time.
- Improve management of patient appointments in order to enhance access, decrease the number of missed appointments, and reduce wait times.
- Redesign medical records system to improve efficiency.
- Study the design of the facility in order to evaluate if the number of exam rooms is adequate and to determine the efficiency of flow for patients and staff.
- Modify practice name to reflect ties to the University of Texas.
- Develop a marketing plan with a specific differentiation strategy for the practice.
- Budget funds for marketing and execute the plan.
- Conclude planning process for new ambulatory campus.
- Conclude construction of new ambulatory campus.

**Resources:**

- Financing required to be determined for ambulatory clinical campus.
- School of Medicine will determine additional physician and staff resources.

**Progress Measure:**

- Milestones to be established; UPG will monitor achievement toward objectives.

**INITIATIVE: DEFINE THE SCOPE OF THE ROLE OF UTHSCSA IN SOUTH TEXAS**

**PRIORITY #3**

**Objective 3.1:** Define the activities of the UTHSCSA, South Texas initiatives, RAHC and Laredo Extension Campus (LEC) in the Lower Rio Grande Valley; develop a system to ensure

**that these activities are aligned with the missions of the institution; develop additional clinical sites for medical student rotations.**

**Strategies:**

- Require each UTHSCSA medical student to complete at least one clinical rotation at an approved clinical site in the 7 border counties of South Texas.
- Broaden health profession education programs at the RAHC and LEC to support an environment of excellence in teaching for students/residents and faculty.
- Broaden both the clinical research and basic research programs at the RAHC in order to support excellence in research for students, residents and faculty.
- Develop a business plan that ensures that the UTHSCSA will have the resources required to sustain the quality of its education and research programs at the RAHC and LEC long term.
- Inventory all School of Medicine activities in the Lower Rio Grande Valley.
- Align activities to specific missions of the UTHSCSA.
- Establish extensive listing of approved remote clinical training sites, clinical faculty, and preceptors.

**Resources:**

- Faculty time.
- Funding streams from the State of Texas.
- Grants and contracts.
- Faculty practice to be explored.

**Progress Measures:**

- Increased number of UTHSCSA medical students participating in remote clinical experiences in the Texas-Mexico border region.
- Sustainable financial models created with stable funding.
- Tracking recruitment of excellent clinical faculty to the RAHC.
- Tracking recruitment of excellent basic and clinical research faculty to the RAHC.
- Expansion of health profession education programs at the RAHC and LEC.
- Development of basic and clinical research activities at the RAHC.

**Objective 3.2: The Dental School will engage in a planning process to determine what role it should play in addressing oral health disparities in South Texas.**

**Strategies:**

- The School will initiate a comprehensive planning process to determine where it can best invest assets in order to improve the oral health of all South Texas residents, especially those who are most needy.
- The School will develop a long-term plan for clinical education programs in South Texas.

**Resources:**

- Staff support required to conduct the inventory of activities and to develop business plans.
- Leveraged revenue sources.
- State appropriations needed in partnership with local foundations.
- Possible federal and/or national foundation grants.
- Other financial resources unknown at this time.

**Progress Measures:**

- Comprehensive planning documents developed.
- Advocacy by South Texas communities.
- Make the clinical education program for dentistry a HSC legislative funding priority.
- Oral Health Disparities Planning Document.

- Documented inventory of activities.
- Documented business plans.

**Objective 3.3: Provide appropriate training and education for community response to natural and man-made disasters in South Texas.**

**Strategy:**

- Acquire recognition as the regional health professional institution that provides emergency response training, education, and resources to a bi-national geographic region in the event of natural or man-made disasters.

**Resources:**

- Federal and state funds.

**Progress Measure:**

- Increase in number and variety of emergency response training measures as a response to natural and man-made disasters.

**IV. Other Critical Issues Related to Institutional Priorities**

**A. Impact of Initiatives:**

- Enrollment Management: (See pages 3-4.)
- Diversity: (See pages 1-5, 9-10.)
- Community and Institutional Relations: (See pages 1, 8-14.)
- Finances: (See pages 7-8.)
- Facilities: (See pages 4-8, 10.)
- Other infrastructure issues: (See pages 6-11.)

**B. Unexpected Opportunities or Challenges/Crises:**

**Opportunities:**

- Obtaining state general revenue funding for indigent care.
- Revising the higher education funding formula to recognize excellence in education, research and clinical services.
- *Including higher education employees in the across-the-board, cost-of-living raise for state employees.*
- *Obtaining Tuition Revenue Bond funding for the HSCSA Research Tower, Faculty Office Building and Clinical Research Building.*

***NOTE: "Opportunities" included in the initial Compact that were deleted in this update and the reason for the deletions are as follows; 1) A fourth formula was added to fund Graduate Medical Education (GME), and, as a consequence, the HSCSA received \$3 million for support of its GME program. 2) Funding for faculty and staff compensation and benefits was not deleted from the opportunities list inasmuch as higher education employees were excluded from the across-the-board raise for state employees. However, the HSCSA has addressed this critical need for upward adjustment of employee salaries in part through internal reallocation of HSCSA funds to support a modest funding pool for employee merit raises. 3) The HSCSA did receive an additional \$5 million for the coming biennium--\$3 million of which was designated for support of our South Texas programs.***

### **Challenges and Crises:**

- Changes in state regulations regarding faculty-student ratios and/or curricular requirements for licensure and certification.
- Continued vulnerability of our clinical partners.
- Dependency on community support for our primary care residency program in South Texas.
- ***Need to obtain incremental funding to support the continued growth of the RAHC, particularly for the impact of the Edinburg Research facility coming on-line and maturing during the coming biennium.***
- Lack of sufficient resources for competitive recruitment of premier faculty, especially for attractive start-up funds for research activities of new faculty members.
- Funding for faculty and staff compensation and benefits.
- ***Need to obtain Tuition Revenue Bond and/or PUF funding to address HSCSA's 300,000+ square feet space deficit.***
- ***Critical need for funding for fire and life safety and deferred maintenance.***
- Potential reduction of federal funding for research.
- Unanticipated call-up of faculty and students for national service in the military or for other federal initiatives.

***NOTE: One "challenge" presented in the initial Compact was, "The elimination of the Section 56 State Relief Fund." This "challenge" has been deleted since Section 56 support was rolled into recurring General Revenue funding. Consequently, this potential "challenge" was favorably resolved.***

### **V. System and State Priorities**

- Increase student access and success. (See pages 2-4.)
- Collaborate with institutions in the UT System, particularly academic-health institution collaborations. (See pages 4-5, 8-9.)
- Increase external research funding. (See pages 4-5, 8, 12.)
- Increase tangible marks of academic and health care excellence. (See pages 1-4, 6-7, 11-13.)
- Improve development and alumni relations. (See pages 7-8.)

### **VI. Compact Development Process**

In developing the original draft of this Compact, UTHSCSA wished to ensure widespread participation from all interested parties on campus. To this end, each member of the Executive Committee was responsible for coordinating the involvement of faculty, staff and students in his/her respective area. Most units selected a representative group of faculty, staff and student leaders to draft their individual documents. Specifically, the Dental School extracted information from its own strategic planning document to identify and address issues for the next 18-24 months. During the preparation of the draft, various Deans also requested input from the faculty assembly of their respective schools. The Executive Committee members met individually with their department heads. Members of the Executive Committee compiled information, submitted their drafts, and met with the President to refine the document. In addition, members of the Faculty Senate of the Health Science Center reviewed the draft. The President solicited input from the Executive Vice President for Academic and Health Affairs, the Executive Vice President for Business and Chief Financial Officer, and the members of the entire Executive Committee. Then, the President compiled the final version of the Compact.

The preliminary draft update and progress report to the Compact were identified during the process of collecting baseline data and progress updates from constituents across the HSC campus. This process included discussions with all five Deans, several Vice Presidents, and numerous faculty and staff. The President, in consultation with the Vice President for Academic Administration, reviewed and finalized the preliminary draft update submitted in May 2005.

*Because of the limited focus of the sections to be reviewed for this Compact Update per directive from the System (extensive updates to Section II of our Compact in May 2005 were determined by the System to eliminate the need to further revisions to that section), the Compact review and decisions to make the revisions presented here primarily involved various administrators and key staff. Representatives from all major sectors of the HSCSA campus community are involved in the development of the institutional strategic plan and in the alignment of the Compact and the strategic plan. As noted above, we expect this intensive planning and alignment process to be completed by February 2006.*

**VII. System Contributions**

- Support the request of the HSCSA for Tuition Revenue Bond Priorities. (*pending*)
- Support the LERR request submitted by the HSCSA. (*to be addressed at the August Board of Regents' meeting*)
- *Assist HSCSA in acquiring funding support for deferred maintenance.*
- Provide HSCSA with funding support for faculty recruitment and retention packages.
- Advocate market-competitive compensation funding for both faculty and staff.
- *Support funding through PUF for reducing the significant space deficit at HSCSA.*

***NOTE:*** *Items identified in the initial Compact as potential System contributions that were actualized (and therefore were deleted from this update) include: 1) support for HSCSA legislative priorities for enhanced funding during the legislative session, and 2) for state-wide legislative initiatives to improve the application of formula funding in order to sustain growth at the HSCSA.*

## VIII. Appendices

### A. Budget Summary:

The University of Texas Health Science Center at San Antonio  
Operating Budget  
Fiscal Year Ending August 31, 2005

	FY 2004 Adjusted Budget	FY 2005 Operating Budget	Budget Increases (Decreases) From 2004 to 2005	
			Amount	Percent
<b>Operating Revenues:</b>				
Tuition and Fees	\$ 14,306,729	17,759,519	3,452,790	24.1%
Federal Sponsored Programs	94,650,062	105,759,934	11,109,872	11.7%
State Sponsored Programs	5,567,200	3,793,750	(1,773,450)	-31.9%
Local and Private Sponsored Programs	58,376,481	66,810,647	8,434,166	14.4%
Net Sales and Services of Educational Activities	1,000,000	3,000,000	2,000,000	200.0%
Net Sales and Services of Hospital and Clinics	-	-	-	-
Net Professional Fees	89,148,104	89,363,697	215,593	0.2%
Net Auxiliary Enterprises	2,260,000	2,278,064	18,064	0.8%
Other Operating Revenues	15,442,227	14,553,245	(888,982)	-5.8%
<b>Total Operating Revenues</b>	<b>280,750,803</b>	<b>303,318,856</b>	<b>22,568,053</b>	<b>8.0%</b>
<b>Operating Expenses:</b>				
Instruction	187,402,598	191,551,640	4,149,042	2.2%
Academic Support	19,774,090	23,559,236	3,785,146	19.1%
Research	113,837,808	98,848,137	(14,989,671)	-13.2%
Public Service	-	21,215,091	21,215,091	-
Hospitals and Clinics	57,846,190	74,519,918	16,673,728	28.8%
Institutional Support	28,867,790	23,310,931	(5,556,859)	-19.2%
Student Services	2,994,448	2,419,169	(575,279)	-19.2%
Operations and Maintenance of Plant	19,022,622	21,651,019	2,628,397	13.8%
Scholarships and Fellowships	125,000	886,769	761,769	609.4%
Auxiliary Enterprises	2,488,858	2,438,227	(50,631)	-2.0%
<b>Total Operating Expenses</b>	<b>432,359,404</b>	<b>460,400,137</b>	<b>28,040,733</b>	<b>6.5%</b>
<b>Operating Surplus/Deficit</b>	<b>(151,608,601)</b>	<b>(157,081,281)</b>	<b>(5,472,680)</b>	<b>3.6%</b>
<b>Nonoperating Revenues (Expenses):</b>				
State Appropriations & HEAF	138,393,231	143,334,618	4,941,387	3.6%
Gifts in Support of Operations	4,916,525	5,802,025	885,500	18.0%
Net Investment Income	21,762,589	20,934,499	(828,090)	-3.8%
Other Non-Operating Revenue	-	-	-	-
Other Non-Operating (Expenses)	-	-	-	-
<b>Net Non-Operating Revenue/(Expenses)</b>	<b>165,072,345</b>	<b>170,071,142</b>	<b>4,998,797</b>	<b>3.0%</b>
<b>Transfers and Other:</b>				
AUF Transfers Received	-	-	-	-
AUF Transfers (Made)	-	-	-	-
Transfers From (To) Unexpended Plant	-	-	-	-
Transfers for Debt Service	(10,379,657)	(10,195,297)	184,360	-1.8%
Other Additions and Transfers	10,109,866	11,147,375	1,037,509	10.3%
Other Deductions and Transfers	(9,024,866)	(8,827,375)	197,491	-2.2%
<b>Total Transfers and Other</b>	<b>(9,294,657)</b>	<b>(7,875,297)</b>	<b>1,419,360</b>	<b>-15.3%</b>
<b>Surplus/(Deficit)</b>	<b>\$ 4,169,087</b>	<b>5,114,564</b>	<b>945,477</b>	<b>22.7%</b>
<b>Total Revenues</b>	<b>\$ 445,823,148</b>	<b>473,389,998</b>	<b>27,566,850</b>	<b>6.2%</b>
<b>Total Expenses and Debt Service Transfers</b>	<b>(442,739,061)</b>	<b>(470,595,434)</b>	<b>(27,856,373)</b>	<b>6.3%</b>
<b>Surplus (Deficit)</b>	<b>\$ 3,084,087</b>	<b>2,794,564</b>	<b>(289,523)</b>	

Note: Operating Budget Highlights with a glossary of terms are included on Page 1.

## B. Statistical Profile:

### UT HSC - San Antonio

ENROLLMENT	<i>fall</i>	2000	2001	2002	2003	2004
Undergraduate						
Allied Health		341	418	379	347	
Nursing		421	485	528	528	
Graduate/professional						
Allied Health		134	153	146	205	
Biomedical Sciences		272	277	320	314	
Dental		402	396	404	397	
Medical School		824	829	822	816	
Nursing		149	151	129	128	
Total		2,543	2,665	2,728	2,754	

DEGREES AWARDED	<i>academic year</i>	99-00	00-01	01-02	02-03	03-04
Undergraduate						
Certificates						
Allied Health		55	157	213	212	155
Baccalaureate awards						
Allied Health		143	131	42	64	
Nursing		236	168	220	238	
Graduate/professional						
Allied Health		37	33	48	50	
Biomedical Science		52	55	46	60	
Dental		107	104	103	112	
Medical		196	195	193	194	
Nursing		46	56	46	31	
Total graduate/professional		438	443	436	447	

GME PROGRAMS	<i>academic year</i>			02-03	03-04
Accredited GME resident programs				53	54
Residents in GME accredited programs				700	648

RESEARCH	<i>fiscal year</i>	2000	2001	2002	2003	2004
Federal research expenditures		\$58,600,224	\$66,852,477	\$83,760,708	\$86,854,337	\$89,661,741

FACULTY / STAFF	<i>fall</i>	2000	2001	2002	2003	2004
All instructional staff		not counted	1,393	1,404	1,405	1,774
Classified employees		2,338	2,572	2,695	2,611	2,662
Administrative/professional employees		431	549	521	523	524
Student employees		323	607	551	440	480

PATIENT CARE	<i>fiscal year</i>	1999	2000	2001	2002	2003
Hospital days		201,745	123,266	224,311	202,000	224,366
Clinic visits		832,255	915,725	854,046	834,000	1,110,429
Un-sponsored charity care (charges)		\$94,385,418	\$60,729,594	\$60,602,900	\$70,149,189	\$77,586,366

ENDOWMENT	<i>as of</i>	8/31/99				8/31/04
Endowment total value		\$252,852,000				\$278,385,000

**C. Institution-Specific Information:**

- Dental School surveys students after the completion of each course to assess their opinions regarding the effectiveness of the course.
- School of Allied Health Sciences survey their graduates regarding their levels of satisfaction about the learning environment.
- School of Nursing annually surveys incoming students on their knowledge and needs in technology.
- Student Services surveys a sample of students every other year on their levels of satisfaction for all support services.

**D. Links to Web Resources:**

(Institutional data profiles are currently under development.)