

UT Southwestern Medical Center at Dallas Compact for FY 10 – FY 11

Mission: The mission of UT Southwestern Medical Center is to improve the health care in our community, Texas, our nation, and the world through innovation and education. We will educate the next generation of leaders in patient care, biomedical science, and disease prevention; conduct high-impact, internationally recognized biomedical research; and deliver patient care that brings UT Southwestern's scientific advances to the bedside -- focusing on quality, safety, and service.

Top 5 Priorities for FY 10 – FY 11:

1. Develop an academic health care system that is at the vanguard of quality, safety and innovation in patient care.
2. Build upon the vitality of our basic research through recruitment and advance the university's position as a leading biomedical research institution.
3. Ensure curricula in all of our schools that best prepare our students to be successful health-care professionals, investigators, and educators.
4. Develop robust programs in health care policy and health services research and develop programs focused on the health care issues of underserved.
5. Enhance diversity in our faculty and across the medical center and optimize the use of our resources, both financial and human capital.

I. Performance Summary Table and Analysis

Indicator	Past		Current	Goal	Explanation
	2003	2007	2008	2011	
Enrollment Growth (grad/prof)					
Health Professions	173	172	177	195	Closing the Gaps target
Biomedical Sciences	525	1,123	1,153	1145	Closing the Gaps target
Medical	867	909	923	910	Closing the Gaps target
All Sponsored Research Expenditures	\$277,956,511 (2003) \$341,110,600 (2007)		\$371,101,500 (2008)	\$393,998,623	Non-federal funding will decrease in FY 2009 and FY 2010.
Federal Sponsored Research Expenditures	\$177,133,099 (2003) \$191,686,904 (2007)		\$201,479,983 (2008)	\$223,998,623	Growth in FY 2009 NIH budget of 3% and estimated 1% growth in FY 2010 and 2011. VA research will increase by \$5 million/year through FY 2011. Estimate includes a projected increase due to ARPA.
Administrative Costs		5.76% (FY03) 4.53% (FY07)	3.92% (FY08)	<= 5%	LBB target maintain 5% or less
Patient Satisfaction in Hospitals		97.4% (2007)	St Paul 60% (2008) and ZLUH >95% (2008)	>95%	Maintain >95% patient satisfaction in ZLUH and improve satisfaction in UH St Paul
United States Medical Licensing Examination Licensure Passage Rate for Medical Students		99.7% (2003) 97.1% (2007)	98.02% (2008)	=> 95%	Maintain 95% or greater passage rate
Number of Clinical Residents Completing Residency to Become Board Eligible		375 (2006)	378 (2007)	400	Continue to successfully train Board eligible clinical residents
Referral Clinical Visits		414,196 (2003) 533,510 (2007)	568,737 (2008)	588,207	Successfully expand clinical practice

**UT Southwestern Medical Center at Dallas
Compact for FY 10 – FY 11**

II. Update Strategic Initiatives from the 2008 Compact

a. Completed Initiatives

	Impact (Metrics)	Analysis	Goal	Evaluation of initiative success
1. Completion of electronic medical record (EMR)	Improved electronic collection of patient data	Progress in implementation and training have been successful	Use of EMR in all ambulatory clinics	EMR has been successfully deployed to all ambulatory clinics
2. Enhancement of existing, and development of new, clinical product lines	Success of new product lines	Improve digestive disease expertise	Continue successful product lines	Completed expansion of expertise in metabolic syndrome; started new program in inflammatory bowel disease
3. Complete Phase 1 of Enterprise Resource Planning (ERP)	Improved institutional capabilities	Implementation in hospitals completed June 2009	Complete ERP implementation in 3 years	Successfully completed hospital implementation
4. Implement processes necessary to improve patient satisfaction Phase 1	Improved patient satisfaction	Completed centralized access for primary care for employees and new patients	Ease of patient contact and registration	Successfully implemented central phone and email access for employees and new patients
5. Explore a UT Southwestern Medical School presence in Austin	Improved residency programs	Evaluate feasibility for UT Southwestern to sponsor residency programs in Austin	Increase presence in Austin	Initial addition of residency programs and successfully meeting benchmarks

b. Ongoing Initiatives

	Impact (Metrics)	Analysis	Goal	Next Steps
1. Reassess planning for Phase 1 of University Hospital St. Paul master plan and future use of Sprague Bldg, Aston Bldg, and University Hospital - Zale	Review Programmed use of space for 195 bed tower	Finalized plan for reprogramming of space	Complete plan based on recommendations of committee	Philanthropic funds to fill-out funding
2. Implement the multi-faceted plans of the Clinical and Translational Sciences Award (CTSA) to enhance and increase clinical trials	Increase in clinical trials	Improve clinical trial capabilities	Increase infrastructure/ expertise in trials	Continue implementation of IT support for clinical research (e-Velos)
3. Implement processes necessary to improve patient satisfaction Phase 2	Improved patient satisfaction	Improve patient experience with centralized phone access and registration systems	Ease of patient contact and registration	Implement plans for recalibration of guest and patient services
4. Children's Medical Center Pediatric Research Institute on 2 floors North Campus Phase 5	Increase funding for pediatric research	Increased funding by \$10 M per year	Complete Institute and strengthen research	Continue detailed end user planning
5. Continue Phase Two of Enterprise Resource Planning (ERP)	Improve institutional capabilities	On schedule. Added student services	Complete ERP implementation in 3 years	Begin fit-gap analysis and design of Phase 2. Begin preliminary plans for Phase 3 for HR/payroll, and student component

**UT Southwestern Medical Center at Dallas
Compact for FY 10 – FY 11**

III. New Strategic Initiatives

Initiative, Rationale, & Strategy	Expected Impact (Metrics)	Goal	Specific Steps in 09-10, 10-11
Completion of strategic planning analysis for seven campus priorities.	Strategic Plan ready for implementation	Complete Strategic Plan aligned priorities	Campus planning committees meet; draft plan completed
Completion of financial analysis for new University Hospital and seek approval of Board of Regents.	New University Hospital analysis phase complete	Approval by Board of Regents	Financial analysis complete; review by System for submission to BOR
Assume oversight of Austin-based GME program in collaboration with Seton Healthcare Network.	Improved residency programs	Successfully meet benchmarks for success	Meet with Seton Health Care and evaluate GME programs; set benchmarks for success

IV. UT System Strategic Plan Initiatives

a. New Clinical Programs/Products

Cancer: Lung cancer, neuro-oncology, hematopoietic malignancies/BMT, and GI oncology targeted for substantial new development in FY2008-2010. 14 new faculty have been recruited in these areas to date.

Heart, Lung, and Vascular Disease: New programs in ablative electrophysiology and endovascular stenting initiated in FY2007. They have expanded and are expected to continue to grow due to physician outreach activities. Heart and lung transplant, already among the best programs in America, will be expanded through growth of feeder programs in pulmonary hypertension and heart failure.

Neurosciences: Major priority is the establishment of an ischemic stroke program to complete preeminence in hemorrhagic stroke (aneurysm). More recruitment required.

Digestive Diseases: Further expansion of medical and surgical bariatric program to complement growing research expertise in metabolic syndrome as well as a new program in inflammatory bowel disease has occurred

Solid Organ Transplantation: Liver transplant program implemented with 24 transplants performed to date. Program certification will be obtained in the next 12 - 18 months; kidney transplant program has increased the number of transplants to more than 70 during this fiscal year with plans for substantial growth over the next two years. Additional faculty recruitments will be necessary in nephrology.

Spine Center: A multi-disciplinary Spine Center was opened in December of 2007. The spine center is comprised of Neurosurgery, Orthopedics, Anesthesia pain management and Physical Medicine and Rehabilitation.

b. Information Security Plan

In accordance with the UT System 2006 Information Security Action Plan, the university has designated a chief information security officer, created the Information Security and Privacy Steering Committee and is in full compliance with the plan. The university's action plan includes information security: 1) risk management, 2) policy and standards development, 3) monitoring and testing, 4) incident response management, 5) information security management support, and 6) awareness and training. Reporting guidance, metrics, and timelines are established and published. The institutional compliance officer monitors the plan through inspections and verification of reported information.

**UT Southwestern Medical Center at Dallas
Compact for FY 10 – FY 11**

V. Summary of STARS and special PUF investments

a. Summary of investments:

	FY 05	FY 06	FY 07	FY 08	FY 09	Description/Metrics of Impact
STARS Program	\$1,500,000	\$3,000,000	\$1,500,000	\$2,830,000	\$1,170,000	Recipients involved in 30 new and ongoing grants and sponsored research projects

VI. New Faculty Positions Projected to 2012

Field	FY 06	FY 07	FY 08	FY 09	FY 10	FY 11	FY 12	Total FY 06 – FY 12
Medical/Health	7	115	86	80	80	80	80	528

Comments: Does not reflect any faculty that may added for Austin programs.

VII. Status of Campus Strategic/Long-Range Plan: The Six-Year Plan, strategic planning document, is updated every two years with a mid-term review in odd numbered years. The Six-Year Plan Mid-Term review (2008-2014) was completed in April 2009.

VIII. Campus Consultation to Develop Compact: The Six-Year Plan is a rolling strategic plan updated every two years by broad-based committees composed of faculty, staff, and student committees appointed by the president. The committees review and offer input to the Compact as they make recommendations on institutional priorities.

**UT Southwestern Medical Center at Dallas
Compact for FY 10 – FY 11**

IX. Budget

**The University of Texas Southwestern Medical Center at Dallas
Operating Budget
Fiscal Year Ending August 31, 2009**

	FY 2007 Actual	FY 2008 Adjusted Budget	FY 2009 Operating Budget	Budget Increases (Decreases) From 2008 to 2009	
				Amount	Percent
Operating Revenues:					
Tuition and Fees	\$ 13,371,831	13,747,363	15,396,537	1,649,174	12.0%
Federal Sponsored Programs	197,031,027	236,315,293	215,659,831	(20,655,462)	-8.7%
State Sponsored Programs	2,491,119	6,911,814	3,792,765	(3,119,049)	-45.1%
Local and Private Sponsored Programs	205,661,073	193,558,030	264,234,595	70,676,565	36.5%
Net Sales and Services of Educational Activities	3,079,355	8,312,656	9,375,794	1,063,138	12.8%
Net Sales and Services of Hospital and Clinics	301,765,953	309,706,563	360,157,681	50,451,118	16.3%
Net Professional Fees	353,044,955	315,248,350	312,536,353	(2,711,997)	-0.9%
Net Auxiliary Enterprises	17,446,513	20,011,708	18,571,641	(1,440,067)	-7.2%
Other Operating Revenues	13,743,460	29,819,564	27,904,390	(1,915,174)	-6.4%
Total Operating Revenues	1,107,635,286	1,133,631,341	1,227,629,587	93,998,246	8.3%
Operating Expenses:					
Instruction	431,872,613	472,267,609	498,851,450	26,583,841	5.6%
Academic Support	21,409,628	29,085,209	30,516,488	1,431,279	4.9%
Research	269,261,782	296,627,865	287,805,772	(8,822,093)	-3.0%
Public Service	49,813,872	77,878,477	79,765,886	1,887,409	2.4%
Hospitals and Clinics	293,705,078	303,596,928	344,181,379	40,584,451	13.4%
Institutional Support	54,448,444	47,030,140	50,073,833	3,043,693	6.5%
Student Services	3,835,388	2,939,874	3,346,038	406,164	13.8%
Operations and Maintenance of Plant	51,858,009	69,674,839	76,637,259	6,962,420	10.0%
Scholarships and Fellowships	524,925	621,257	623,664	2,407	0.4%
Auxiliary Enterprises	14,940,495	17,707,881	18,314,185	606,304	3.4%
Depreciation and Amortization	64,186,894	68,679,500	70,766,051	2,086,551	3.0%
Total Operating Expenses	1,255,857,128	1,386,109,579	1,460,882,005	74,772,426	5.4%
Operating Surplus/Deficit	(148,221,842)	(252,478,238)	(233,252,418)	19,225,820	-7.6%
Budgeted Nonoperating Revenues (Expenses):					
State Appropriations & HEAF (Non-capitalized)	152,322,146	174,223,147	174,816,574	593,427	0.3%
Gifts in Support of Operations	47,982,405	74,100,597	52,547,459	(21,553,138)	-29.1%
Net Investment Income	66,125,228	78,282,319	72,376,195	(5,906,124)	-7.5%
Other Non-Operating Revenue	-	-	-	-	-
Other Non-Operating (Expenses)	-	-	-	-	-
Net Non-Operating Revenue/(Expenses)	266,429,779	326,606,063	299,740,228	(26,865,835)	-8.2%
Transfers and Other:					
AUF Transfers Received for Operations	-	-	-	-	-
AUF Transfers (Made) for Operations	-	-	-	-	-
Transfers for Debt Service - Interest	(20,460,714)	(25,755,031)	(24,675,907)	1,079,124	-4.2%
Total Transfers and Other	(20,460,714)	(25,755,031)	(24,675,907)	1,079,124	-4.2%
Budget Margin (Deficit)	97,747,223	48,372,794	41,811,903	(6,560,891)	-13.6%
Reconciliation to Change in Net Assets:					
Net Non-Profit Health Corp Activity	-	1,469,927	-	(1,469,927)	-100.0%
Net Inc./(Dec.) in Fair Value of Investments	134,032,583	-	-	-	-
Interest Expense on Capital Asset Financings	-	-	-	-	-
Capital Approp., Gifts and Sponsored Programs	13,606,550	7,559,528	7,559,528	-	0.0%
HEAF (Capitalized)	-	-	-	-	-
Additions to Permanent Endowments	10,450,556	8,975,826	8,975,826	-	0.0%
Transfers for Debt Service - Principal	(30,053,588)	(37,459,150)	(44,779,477)	(7,320,327)	19.5%
Reverse Transfers for Debt Service (System Only)	-	-	-	-	-
Transfers and Other	40,346,536	25,143,626	110,275,000	85,131,374	338.6%
SRECNA Change in Net Assets	\$ 266,129,860	54,062,551	123,842,780	69,780,229	129.1%
Total Revenues and AUF Transfers	\$ 1,374,065,065	1,460,237,404	1,527,369,815	67,132,411	4.6%
Total Expenses (Including Transfers for Interest)	(1,276,317,842)	(1,411,864,610)	(1,485,557,912)	(73,693,302)	5.2%
Budget Margin (Deficit)	\$ 97,747,223	48,372,794	41,811,903	(6,560,891)	
Reconciliation to Use of Prior Year Balances					
Depreciation	-	68,679,500	70,766,051	-	-
Capital Outlay	-	(31,889,200)	(31,147,939)	-	-
HEAF (Capitalized)	-	-	-	-	-
Transfers for Debt Service - Principal	-	(37,459,150)	(44,779,477)	-	-
Budgeted Transfers	-	-	-	-	-
Use of Prior Year Balances	-	47,703,944	36,650,538	-	-

**UT Southwestern Medical Center at Dallas
Compact for FY 10 – FY 11**

X. Data Summary

<i>fall</i>	2000	2001	2002	2003	2004	2005	2006	2007	2008
Undergraduate enrollment	241	221	193	184	191	198	189	191	162
Health Professions	239	215	169	146	134	121	116	119	103
Biomedical Sciences	2	6	24	38	57	77	73	72	59
Graduate/professional	1,264	1,333	1,444	1,565	2,082	2,152	2,207	2,204	2,253
Health Professions	65	100	134	173	185	186	172	172	177
Biomedical Sciences	375	420	472	525	1,049	1,067	1,110	1,123	1,153
Medical School	824	813	838	867	848	899	925	909	923
Total enrollment	1,505	1,554	1,637	1,749	2,273	2,350	2,396	2,395	2,415

<i>academic year</i>	99-00	00-01	01-02	02-03	03-04	04-05	05-06	06-07	07-08
Undergraduate degrees									
Certificates	5	9	5	0	5	4	57	161	7
Baccalaureate	103	106	104	70	61	50	49	44	46
Graduate/profl degrees/certs									
Health Professions	29	33	32	31	66	68	74	72	68
Biomedical Sciences	73	65	63	59	77	93	92	106	248
Medical	184	203	201	189	204	211	217	226	219
Total grad/profl	286	301	296	279	347	372	383	404	535

<i>academic year</i>				02-03	03-04	04-05	05-06	06-07	07-08
Accredited resident prgs				78	79	77	77	77	82
Residents in accredited prgs				1,149	1,210	1,234	1,177	1,122	1,201

* Decrease in residents because of closure of the John Peter Smith Residency Program

<i>fiscal year</i>	2000	2001	2002	2003	2004	2005	2006	2007	2008
Federal research exp	\$109,165,343	\$131,820,109	\$155,257,992	\$177,133,099	\$200,887,545	\$202,057,099	\$196,622,021	\$191,686,904	\$201,479,983

<i>academic year</i>	2000	2001	2002	2003	2004	2005	2006	2007	2008
Faculty	1,425	1,475	1,526	1,588	1,695	1,730	1,790	1,892	1,953
Administrative		124	132	145	187	327	331	431	468
Other, Non-Faculty		3,697	3,883	4,051	4,568	6,752	6,902	6,945	7,468

<i>fiscal year</i>	2000	2001	2002	2003	2004	2005	2006	2007	2008
Hospital Admissions	n/a	n/a	n/a	n/a	n/a	7,832	13,361	14,905	
Hospital days	379,770	399,136	411,288	407,991	418,638	429,146	438,519	479,632	
Outpatient visits	1,528,751	1,775,500	2,064,987	1,959,288	2,132,792	2,163,809	1,693,209	1,709,034	
Un-sponsored charity care - physicians only	\$211,953,613	\$234,938,900	\$256,968,945	\$281,998,363	\$312,465,011	\$324,443,991	\$371,341,317	\$368,610,465	\$368,610,465

* 2005 Hospital admissions data is for January 2005 - August 2005.

Note: The overall decline in the amount of un-sponsored charity care by faculty reported in FY 06-07 is the result of physician UPL payments which offset the amount of un-sponsored charity c

<i>as of</i>	8/31/2000	8/31/2001	8/31/2002	8/31/2003	8/31/2004	8/31/2005	8/31/2006	8/31/2007	8/31/2008
Endowment total value	\$713,253	\$644,909	\$608,888	\$656,221	\$804,305	\$980,022	\$1,143,426	\$1,434,560	\$1,368,760
(in \$ thousands)									