iPlan
2009 Strategic Planning Comment Summary
June 30, 2009

Dear Colleague:

I am pleased to provide you with this copy of strategic planning comments received to date from the UMDNJ-Robert Wood Johnson Medical School (RWJMS) web-based tool: iPlan. As you know, the goal of the RWJMS Strategic Planning Process for 2009 is to engage all segments of the RWJMS community in a discussion leading to a shared articulated vision. In support of this goal, iPlan was open between May 21 and June 12 to solicit input from all members of the RWJMS community to the questions:

1. What can we do best?
2. How should we differentiate ourselves from other schools and competitors?
3. How can we collectively establish priorities and make go or no-go decisions?
4. How can we attract, keep and foster the efforts of the best people?

within the context of the mission areas of: community health, clinical practice, research and education. This document organizes and compiles all the comments received during this process.

As a key School leader, I would ask you to review and share these comments as you work with the faculty, staff, residents, and students in your department/committee/or institute to develop for your particular entity (e.g. the Admissions committee, the Medicine department, the Surgery department, the Child Health Institute of New Jersey, the Cancer Institute of New Jersey, etc.) a shared response to the strategic questions and a list of measurable one and three year objectives.

Remember, the exact process that you use to engage the members of your department/committee/ institute is up to you. The whole point is to engender discussion. You should try and achieve consensus in your grouping by some process. As a reminder, the timetable for completion of your stage of the process is August 17, 2008 when your reports to include the one and three year strategic objectives and answers to the strategic questions are due to Bonnie Baloga-Altieri, PhD, RN, CAB 1400 or balogab@umdnj.edu. This information will then be made available for review by the entire RWJMS community via the RWJMS website.

In the fall of this year external consultants, skilled in facilitating input from minority or new/different voices within the school community, will commence the parallel process of soliciting inputs from cross disciplinary focus groups. Using the outputs from both your efforts and those of the cross disciplinary groups, a small writing committee will create a consensus document to be posted on-line for feedback from the RWJMS community.

Thank you for your leadership within this important process. If you have any questions regarding this process please contact me at 732.235.6029 or tallia@umdnj.edu.

Sincerely,

Alfred F. Tallia, MD, MPH
Professor and Chair, Family Medicine
Chair, Strategic Planning Steering Committee
Comment Summary for Strategic Planning Question:

“What we can do best?”
Question: What we can do best?
Mission: Community Health
Priority: Critical
Comment: Expand our efforts to eliminate disparities in access, service utilization, quality of care, and health outcomes experienced by individuals and families living in New Brunswick, Central New Jersey, and other communities served by RWJMS and affiliated health care facilities.

Question: What we can do best?
Mission: Community Health
Priority: Critical
Comment: Get released from the clutches of UMDNJ.

Question: What we can do best?
Mission: Community Health
Priority: Very Important
Comment: Create a Community Advisory Board that provides ongoing recommendations about how we can best serve their needs.

Question: What we can do best?
Mission: Education
Priority: Critical
Comment: Holistic assessment of medical school applicants
**Question:** What we can do best?

**Mission:** Education

**Priority:** Critical

**Comment:** Our primary mission is education, but success in that mission depends on our ability to address the other missions of RWJMS.

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**Question:** What we can do best?

**Mission:** Education

**Priority:** Critical

**Comment:** Integrate life span clinical input/applicability into a MUCH streamlined and less-siloed MS1-2 curriculum.

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**Question:** What we can do best?

**Mission:** Education

**Priority:** Critical

**Comment:** Recognize geriatrics as a neglected core content area for training.

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**Question:** What we can do best?

**Mission:** Education

**Priority:** Critical

**Comment:** Provide adequate and appropriate space to conduct medical student lectures, not just lip service that we do so.
Question: What we can do best?

Mission: Education

Priority: Critical

Comment: Ensure that ALL lecture space has been updated to take full advantage of the electronic capabilities soon to be offered to our medical students (e.g., video/audiotaping for hand-held playback, etc.).

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Question: What we can do best?

Mission: Education

Priority: Critical

Comment: The primary role of a medical school is to teach and the students are the end product. Often times this is forgotten.

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Question: What we can do best?

Mission: Education

Priority: Critical

Comment: The primary role of a medical school is to teach and the students are the end product. Often times this is forgotten. In order to prepare medical students well they need to be exposed to patient care, research, and community health.

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Question: What we can do best?

Mission: Education

Priority: Critical

Comment: When hiring new department chairs, choose candidates for whom medical and graduate education is a central mission, not an unwelcome distraction from research and their biotech companies.
**Question:** What we can do best?

**Mission:** Education

**Priority:** Critical

**Comment:** When hiring new faculty, choose candidates for whom medical and graduate education is a central mission, not an unwelcome distraction from research.

**Question:** What we can do best?

**Mission:** Education

**Priority:** Critical

**Comment:** Strengthen and provide increased support to our Patient-Centered Medicine longitudinal curriculum and related educational programs with medical students, residents, and faculty.

**Question:** What we can do best?

**Mission:** Education

**Priority:** Critical

**Comment:** Make plans to move the entire medical school to New Brunswick. This will enhance the interaction of the students with the clinical faculty and also the basic science faculty with the research faculty. It will increase the feeling that RWJMS is a single institution.
Question: What we can do best?

Mission: Education

Priority: Critical

Comment: Get more research faculty involved in teaching. Concentration on teaching especially for basic science faculty has led to a perspective that is stuck in “old” perspectives. The new HHMI report emphasizes that medical students need to be well versed in the scientific basis of medicine. This requires faculty who understand these perspectives.

Question: What we can do best?

Mission: Education

Priority: Critical

Comment: Become independent of UMDNJ

Question: What we can do best?

Mission: Education

Priority: Important

Comment: Incorporate more evidence-based CME programs

Question: What we can do best?

Mission: Education

Priority: Important

Comment: Involve QI staff on CME committee and vice versa
Question: What we can do best?
Mission: Education
Priority: Important
Comment: Increase the number of sponsored CME activities.

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Question: What we can do best?
Mission: Education
Priority: Very Important
Comment: Provide multiple avenues to medical school: pipeline programs for disadvantaged students, programs for non-traditional applicants.

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Question: What we can do best?
Mission: Education
Priority: Very Important
Comment: Broaden our perspectives regarding the appropriate prerequisites for medical school.

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Question: What we can do best?
Mission: Education
Priority: Very Important
Comment: We have excellent faculty/teachers here at RWJMS. We need to nurture the best and make them accountable to the Office of Education instead of individual departments where other priorities may come first.
**Question:** What we can do best?

**Mission:** Education

**Priority:** Very Important

**Comment:** Adjust the schedule to enable all students to be able to work with/learn from the same clinician over a three year period.

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**Question:** What we can do best?

**Mission:** Education

**Priority:** Very Important

**Comment:** Ensure that our faculty who provide education at the medical student, resident or CME level, are rewarded appropriately (time, money, recognition).

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**Question:** What we can do best?

**Mission:** Patient Care

**Priority:** Critical

**Comment:** We are the main clinical care center for complex patients in central NJ.

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**Question:** What we can do best?

**Mission:** Patient Care

**Priority:** Critical

**Comment:** Get a truly integrated multi-specialist group practice that we are not ashamed of; recruit dynamic leadership that will ensure BOTH heads-rolling financial accountability for admin. AND patient-centric accountability for the docs.
Question: What we can do best?

Mission: Patient Care

Priority: Critical

Comment: Train students for the future as primary care case managers.

Question: What we can do best?

Mission: Patient Care

Priority: Critical

Comment: Provide high quality culturally and linguistically appropriate clinical care to our increasingly diverse population by addressing emerging accreditation requirements and standards from organizations such as the National Quality Forum, Joint Commission, and National Committee for Quality Assurance.

Question: What we can do best?

Mission: Patient Care

Priority: Critical

Comment: Divorce ourselves from UMDNJ.
Question: What we can do best?

Mission: Patient Care

Priority: Critical

Comment: The medical school has been largely ineffective in procuring the necessary market share that is required to truly gain leverage over RWJ Hospital. This is because the administration lacks the vision to undertake the expansion that is necessary to displace the private sector physicians. The medical school needs to establish satellite primary care offices throughout central New Jersey in order to create a more robust referral pattern for UMG specialists. You need to spend money to make money (i.e., University of Pittsburgh). Also, most of the faculty practices need to escape the money pit (black hole) that is the CAB building.

Question: What we can do best?

Mission: Patient Care

Priority: Very Important

Comment: Have anchor physicians in each of our clinical arenas (physicians who are there a substantial amount of the time).

Question: What we can do best?

Mission: Research

Priority: Critical

Comment: Enhance our already nationally prominent resources in environmental research. Encourage and incent collaborations with clinical departments and basic scientists. Break down barriers to collaboration with School of Public Health.
Question: What we can do best?

Mission: Research

Priority: Critical

Comment: This is a comment on behalf of the Department: We in DEOM/EOHSI are leaders in shaping public policy at the state and national levels on environmental health issues. Compared with outside competitors we are in the top tier of environmental health research and training programs.

Question: What we can do best?

Mission: Research

Priority: Critical

Comment: This comment is on behalf of the Department: Address the poor reputation of UMD in bureaucratic areas. Impediments to writing and executing grants need to be addressed on a UMD-wide basis. A review of all policies and procedures at the UMD level should ask the question: how does this rule or regulation enhance, facilitate, or expedite the faculty’s pursuit of excellence in teaching, clinical service, or research? Policies/procedures driven purely by “compliance” should be revised in areas such as purchasing, human resources, or contract management. Sign-offs should move to New Brunswick to reduce excessive time taken to approve routine matters.

Question: What we can do best?

Mission: Research

Priority: Critical

Comment: Ensure the community mission area, helps inform research through better partnering with central NJ tech, pharma, and healthcare service providers
Question: What we can do best?

Mission: Research

Priority: Critical

Comment: We need the best and clear web pages of each researcher and their area of work.

Question: What we can do best?

Mission: Research

Priority: Critical

Comment: Try to instill a more positive attitude in the support structure - human resources, purchasing, physical plant - try to get them to realize that their actions directly impact the missions of the medical school.

Question: What we can do best?

Mission: Research

Priority: Critical

Comment: Expand our primary care practice-based research efforts by developing transdisciplinary collaborations both within and external to UMDNJ-RWJMS.

Question: What we can do best?

Mission: Research

Priority: Critical

Comment: Eliminate departmental structures related to research. Faculty with similar research interests should be housed together. Teaching assignments should be independent of research interests.
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<td><strong>Mission:</strong></td>
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<td><strong>Priority:</strong></td>
<td>Critical</td>
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<tr>
<td><strong>Comment:</strong></td>
<td>We are uniquely positioned to collaborate both inter-divisionally and with other higher education institutions. Such collaboration should be promoted and recognized.</td>
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<td><strong>Priority:</strong></td>
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<tr>
<td><strong>Comment:</strong></td>
<td>Get rid of departments and instead form research clusters whose directorship rotates every five years.</td>
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<td><strong>Priority:</strong></td>
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<td><strong>Comment:</strong></td>
<td>Split off from UMDNJ.</td>
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<td><strong>Comment:</strong></td>
<td>Reward a broader definition of scholarship than NIH funded activity.</td>
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Comment Summary for Strategic Planning Question:

“How we should differentiate ourselves from other schools & competitors?”
Question: How we should differentiate ourselves from other schools & competitors?

Mission: Education

Priority: Consider

Comment: Several members of the education group met on June 11 to discuss these topics, below are some of the group's comments: Both diversity and quality of our students and residents was considered a strength. The flexibility of our current UME curriculum is a positive. Our “pipe-line’ programs are a strength. Our academic support programs for learners are a strength. The community service mission is considered a significant strength and the opportunities it provides all members of our community are important. Our proximity and established relationships with other institutions, especially Rutgers and Princeton, are seen as a real strength. We have well established and mature relationships with our major educational affiliates (UMCP, JSUH, etc.). Voluntary faculty commitment has been excellent. Some developments in UMG are considered a strength for education, including the adoption of EMR and opportunities to educate students/residents in this important technology.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Education

Priority: Consider

Comment: Create a third year medical school curriculum that is mostly out-patient based, with the fourth year more in-patient.
**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** Change our name to Rutgers Medical School. After all of these years, many local residency programs I’ve interviewed at STILL think we’re Rutgers Medical School. Even when they know we’re RWJMS, they still call us Rutgers Medical School. Say UMDNJ-RWJMS and people think we’re UMDNJ in Newark and they associate us with scandal. Regardless of who we’re really affiliated with, I’d rather be associated with a good football team and a well respected university than the city of Newark. Also, I’d imagine that more pharm companies would be willing to donate to “Rutgers” than a school named after Johnson and Johnson.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** Get the highest Step 1 Board scores in the nation. Teach closer to the Boards. Emphasize quality teaching. Facilitate self-directed learning.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** Market the dual degree options.
Question: How we should differentiate ourselves from other schools & competitors?

Mission: Education

Priority: Critical

Comment: Market the opportunities for medical students to tailor their education.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Education

Priority: Critical

Comment: Market student scholar options.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Education

Priority: Critical

Comment: Maintain and continue to develop diverse clinical training opportunities.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Education

Priority: Critical

Comment: We need to improve our relationships with SPH since they currently house many of the faculty we use (and could additionally use) to teach epidemiology and statistics. Bureaucratic hurdles need to be lowered. Sharing of research grant funds and ICR also need to be made smooth and transparent.
**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** Shed the albatross of central UMDNJ admin’s continuing fire alarm responses towards NJ Medical School at the continuing detrimental expense of RWJMS investment.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** Flexibility of curriculum is somewhat unique. Opportunities to develop new curricular elements, such as Medicine and technology. New technology/mobility initiative is significant. Breadth of clinical learning opportunities under one roof: transplant, etc., differentiates us within the State.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** This school is sorely deficient in the area of simulation. This is an effective teaching strategy as it pertains to the instruction of the physical exam (detecting the abnormal), clinical decision making, and procedures. Other institutions are light years ahead of us (Miami, Pittsburgh, etc.).
**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** Students are not receiving the necessary instruction in clinical skills during the first two years of medical school. As a result, they are ill-prepared for the clerkship experience. I believe that there is not enough emphasis placed on clinical reasoning and the development of basic approaches to common clinical problems. One potential solution to this problem that can be incorporated into the new curriculum is to create a practical exam in addition to a written exam for each organ system block. For instance, at the end of the cardiovascular block they would complete a written test to assess their medical knowledge as well as a GRADED mini-OSCE that would determine their proficiency in interviewing and clinical reasoning (evaluation of chest pain, syncope, etc.), physical exam skills (performing maneuvers and tested on the identification of murmurs), and interpretation of ancillary diagnostic studies (EKGs, CXRs, etc.). This would force students to dedicate the necessary time that is required to achieve a certain aptitude in these essential disciplines. Currently, physical diagnosis takes a back burner to pathophysiology, pathology, and pharmacology.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** The classroom facilities in the MEB are atrocious and antiquated to say the least. Third world countries provide better in-classroom media resources (built in LCD projectors, speakers, simulation, internet capability, smart boards, etc.) to their medical students and residents. My wife, who is a public high school biology teacher, has more technology at her disposal than I do. The least that they could do is repair the leaking pipes and faulty ventilation in MEB 108B that always seem to act up during residency recruitment days.
**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Critical

**Comment:** RWJ’s preclinical curriculum is still largely based on the antiquated ideals of the Flexner report. RWJ needs to become innovative and replace the misguided and ineffective instruction of PhDs with physicians who truly understand what is essential in the education of clinicians. This requires the hiring of true clinician educators who are proficient in multiple disciplines and small group (classroom) instruction. This would provide for a smoother transition from the preclinical to the clinical years.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Important

**Comment:** Grow interdepartmental CME (e.g., FM & Ob-Gyn, Psych & Neurology)
**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Important

**Comment:** Obtain data from hospital partners and state re: quality gaps for CME.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Important

**Comment:** Initiate point-of-care CME.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Very Important

**Comment:** Market the “Distinction” programs.

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**Question:** How we should differentiate ourselves from other schools & competitors?

**Mission:** Education

**Priority:** Very Important

**Comment:** We have strong potential to deliver excellent inter-professional educational experiences to students. This can be done effectively in collaboration with Rutgers and other UMDNJ programs (e.g., SPH and SHRP).
Question: How we should differentiate ourselves from other schools & competitors?

Mission: Patient Care

Priority: Consider

Comment: Organize our health care into teams to respond to patient problems, rather than by departments (i.e., make ourselves patient-centered).

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Patient Care

Priority: Consider

Comment: Combine clinical departments into units for more coherent health care delivery: primary care (family medicine, general internal medicine, maybe parts of OB-GYN, peds, geriatrics); maternal-fetal-pediatric care; neurology-psychiatry, etc.).

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Patient Care

Priority: Critical

Comment: Advertise more on media. Create a good brand name.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Patient Care

Priority: Important

Comment: Give feedback to our healthcare providers (staff, nurses, physicians, others) about our patient population, what they want, how they see us, on a regular basis (i.e., frequently).
Question: How we should differentiate ourselves from other schools & competitors?

Mission: Patient Care

Priority: Very Important

Comment: Create a large primary care base in support of our patient care, education and research needs.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Research

Priority: Critical

Comment: Encourage research collaborations.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Research

Priority: Critical

Comment: 1. Our environmental research is already recognized nationally. 2. We need to devote resources to making sure it continues to flourish and make us distinctive. 3. The resources can be both financial and administrative. 4. The administration needs to expedite agreed upon retention increments and out of cycle increases to maintain morale. 5. Morale is key because the 5 last years of changed admin. procedures by Newark for contracting and purchasing and timely hiring have had a devastating impact on faculty and staff perceptions of how our system does not work for the benefit of the individual faculty entrepreneur.
Question: How we should differentiate ourselves from other schools & competitors?

Mission: Research

Priority: Critical

Comment: Resurrect the idea of specific vehicles for cross-departmental/discipline work - e.g., the ex-Gerontologic Institute needs to be re-vitalized and INTERNALLY supported.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Research

Priority: Very Important

Comment: To establish an academic Department of Radiology with 7 Tesla MRI. This will also give a strong impetus to clinical research/educational activity in other departments including our Department of Neurology.

Question: How we should differentiate ourselves from other schools & competitors?

Mission: Research

Priority: Very Important

Comment: This comment is on behalf of the Department: EOHSI and DEOM are world leaders in environmental health research and training. One way to further differentiate ourselves is to build on integration and collaboration with other entities in RWJMS and UMD. We have many collaborative programs with clinical departments of the medical school, but there would be much to gain from a greater engagement with the Chandler Health Center in terms of the National Children’s Study, on which we are nationally known senior investigators. Also, response to other federal research priorities for minorities and under-served populations, such as environmental justice grants, could benefit from collaboration between Chandler and DEOM/EOHSI. Unfortunately, at the moment, UMD is differentiated from competitors by its growing reputation for being difficult to contract with. This differentiation needs to be reduced.
Comment Summary for Strategic Planning Question:

“How we can collectively establish priorities & make go or no-go decisions?”
**Question:** How we can collectively establish priorities & make go or no-go decisions?

**Mission:** Education

**Priority:** Consider

**Comment:** Must clarify mission/vision and focus on the customer (students/residents). Get customer input and develop collective choices, but decision must ultimately come from the top. Having choices clearly presented and justified with budget considerations is important. This was done for curriculum reform initiative and has worked well. Must develop measurable goals and establish realistic (but challenging) expectations. Align resource commitments with these expectations.

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**Question:** How we can collectively establish priorities & make go or no-go decisions?

**Mission:** Education

**Priority:** Critical

**Comment:** There seems to be administrators that have too much power, that is they control too many critical offices and then they micromanage the offices not allowing the capable people that they have hired to manage and make decisions. All of this slows down the progress of the school.
Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Education

Priority: Critical

Comment: It is absolutely necessary to judge the success of changes to the first two years of the medical school curriculum not by test grades, board scores, and grades provided by a single clerkship director in the clinical years, but instead by polling the clinical faculty on their impressions. I have noticed as more non-clinical electives are being offered, and student are increasingly pulled from clinic and inpatient rotations for lectures and other activities, the very basics of patient care and evaluation are being sacrificed. Also, the increase in mandated lecture time detracts from the imperative that student become responsible for their own clinical education. The use of student evaluation is not effective for this purpose, as each student tends to be graded based upon comparison to their peers. Instead the clinical faculty should be annually polled to see if they believe students are truly prepared. This is even more important as clinical exposures are also being reduced among the residents and many first time experiences are delayed until clinical practice after graduation, and that clinical practice is continually in flux.

Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Education

Priority: Critical

Comment: Interactive committee process, interactive committee meetings, good information evaluated with clear guidelines
Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Education

Priority: Critical

Comment: Try including the faculty in decisions and letting them be informed of what is being planned. People need to plan for their future and do not need surprises or rumors. If you are planning to get rid of all the basic science departments then say so. Do not hide behind a “blue ribbon panel.”

Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Education

Priority: Critical

Comment: Use ALL of the tuition dollars in support of medical student education (and not also resident education, graduate education, research, etc.).

Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Education

Priority: Important

Comment: Place staff from CCOE on RWJMS campus.

Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Patient Care

Priority: Critical

Comment: Primary care will drive the near-term prioritization of health care reform, yet the school is woefully under-resourced in this area, beyond its community health center.
Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Patient Care

Priority: Critical

Comment: We should have a clinical effectiveness committee (or similar) to address issues of EMR, billing, scheduling, standards of practice, etc.

Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Patient Care

Priority: Critical

Comment: I’m having a hard time using this tool.

Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Research

Priority: Critical

Comment: Divorce ourselves from UMDNJ and align with Rutgers.

Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Research

Priority: Critical

Comment: I wish I knew. The current system is not transparent.
Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Research

Priority: Very Important

Comment: This comment is on behalf of the Department: We need to find those programs and initiatives that provide the most benefit for the broadest constituency. A pre-requisite is to enhance our collective school-wide awareness of what different units really do and what their plans are near, medium, and long-term future. We need to identify and incentivize strategic strengths within RWJMS and UMD as a whole. Perhaps this could become part of chair’s meetings or a separate council that reports to the President. This will facilitate collaborative, large-scale, grants among the players. We recently failed to do this for the Clinical and Translational Science Award.

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Question: How we can collectively establish priorities & make go or no-go decisions?

Mission: Research

Priority: Very Important

Comment: Combine the basic science departments into just a few units that can better support the research activities.
Comment Summary for Strategic Planning Question:

“How we can attract, keep & foster efforts of best people?”
Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Consider

Comment: Clear goals/expectations, quantify outcomes...the best will respond to a challenge with appropriate support. Develop a system of acknowledgments. Celebrate our collective successes more openly. Foster linkages and facilitate mission accomplishment via technology. Emphasize diversity and align recruitment/retention with diversity and other mission goals. Recruit selectively to accomplish the mission, not in response to a short term need. Enhance faculty affairs efforts and reward participation and excellence in development. Enhance recognition and acknowledgement for voluntary faculty. Embrace the concept of a positive work environment. OVERALL: MUST ENHANCE THE VALUE OF THE BRAND.

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Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Critical

Comment: There should be tangible rewards (not awards) for excellence in teaching independent of promotion and tenure, similar to what is available on the research side.

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Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Critical

Comment: Divorce ourselves from UMDNJ and align with Rutgers.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Critical

**Comment:** Hire professors whose primary focus is to teach during the first two years of medical school. This will attract quality faculty that are interested in teaching, as well as educate students better.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Critical

**Comment:** Upgrade the facilities in the Piscataway campus. The lecture halls don’t attract people to the school. There also needs to be more space in general to study and socialize in Piscataway. Construct an additional floor to the building, or get rid of all of the offices in the Teaching Labs and behind the East and West Lecture Halls and convert all of that into study spaces. A great space to build would be on top of the V rooms where the Cognitive Skills offices are, on the other side of the Research Tower. Upgrade the campus!

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Critical

**Comment:** Reduce the cost of tuition, as a “state school” should both be a cheaper option, as well as a reasonable option for prospective medical students.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Critical

**Comment:** Protect time for Committee members. The Admissions Committee is labor intensive. One hour interviews preceded by online application review and a comprehensive report. Meetings are held three of four Tuesday afternoons a month.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Critical

**Comment:** Value the participation of Committee members.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Critical

**Comment:** The need for a faculty development PROGRAM in education is critical. We should develop a faculty institute that gives certificates of completion for a certain # of credits.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Critical

**Comment:** In this environment, the school must look at different financial models that allow for a more entrepreneurial spirit among the faculty. The financial rewards of practice outside of the schools current structure pull too many good people away.
Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Critical

Comment: Move the basic science campus from Piscataway to New Brunswick to enhance our educational opportunities and research coordination, while saving time and money.

Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Critical

Comment: Provide uniform "benefits" to all employees (e.g., allowing part-time employees to obtain parking passes).

Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Critical

Comment: Pay more attention to staff development by providing structured and progressive skills training.
Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Critical

Comment: Faculty development and mentorship is non-existent, particularly in the department of medicine. Young faculty are deterred from pursuing additional advanced degrees that would largely benefit the medical school due to a lack of funds for tuition reimbursement. I am currently paying out-of-pocket for a Masters in Medical Education.

Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Critical

Comment: There is absolutely no recognition given to the educational and teaching achievements of the clinician educators who are largely responsible for the development of the excellent medical students that this school produces year in and year out. This medical school is only concerned about two things: research and the bottom line.

Question: How we can attract, keep & foster efforts of best people?

Mission: Education

Priority: Critical

Comment: The medical school needs to develop a REAL incentive plan to enhance the productivity of the clinical faculty. It is apparent that most UMG faculty realize that they receive the same salary whether they are seeing 5 patients or 10 patients in an afternoon setting. This sloth and inertia needs to be eradicated, and the only way to do this is to dangle a carrot in front of their face to enhance their productivity and hence the revenue stream into the medical school.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Critical

**Comment:** Create individual tracts with distinct incentives (RVUs) to foster and develop the distinct skill sets of individuals. For instance, create a clinician-educator tract and a clinician-scientist tract. Promotion should largely be based on their achievements in the areas of education, patient care, research, and administration. Robert Wood Johnson’s current strategy of only promoting faculty based on research productivity is antiquated and has had deleterious consequences on the medical school. In fact, such a strategy has led to the appointment of department chairs and administrators who are deficient in leadership, management, and organizational skills that are essential for the further evolution and improvement of this institution. As a result, the school has reached a state of stagnation due to the provincial and myopic views of these individuals.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Important

**Comment:** Do a needs Assessment of Faculty re: faculty skills (e.g., research skills).

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Important

**Comment:** Improve operational procedures (streamlined processes) of CME.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Important

**Comment:** Ensure full operation of updated ACCME criteria for our CME activities.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Education

**Priority:** Very Important

**Comment:** Faculty must be mentored and rewarded for educational activities to include support for attending educational conferences and training programs. Promotions criteria for those following a track as educators should be identified and disseminated.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Patient Care

**Priority:** Consider

**Comment:** There seems to be very little interaction between the people who make decisions and the people who work day in and day out on the floor. None of my staff has ever met a single Dean, Director, etc. Even initiatives like this seem fairly cold and stand-offish if you don’t know the person who is creating it. I will probably be the only person in my Division who completes this. Simple “Thank You’s” such as Company Picnics, Holiday Parties, etc., which would let employees mingle with each other and higher ups would make them feel as if they are part of a bigger team than the small divisions in which they work. Good people don’t stay at places they don’t love because they have choices, bad people stay because they don’t have any.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Patient Care

**Priority:** Critical

**Comment:** The relationship with Robert Wood Johnson University Hospital needs to become more coherent in terms of the academic mission of a contemporary medical school. The history of RWJUH as first Middlesex General, a county hospital, and later RWJUH is a community hospital with narrow views and goals. This presents as a major barrier to recruiting/retaining talented physicians and researchers.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Patient Care

**Priority:** Critical

**Comment:** I have never seen morale so bad among clinical faculty and physicians as it is now. The medical school risks loss of the best and most ambitious. Excellent clinical role models for residents and students are being undervalued, forced to work excessive hours as a result of diminished resident work schedules, paid substantially less than their colleagues in the community, and are not being promoted because clinical programs are not as valued as research - yet these physicians’ clinical demands are increasing, leaving little time for academic pursuits. Attention to this problem should be considered an emergency.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Patient Care

**Priority:** Critical

**Comment:** Pay the faculty enough money to attract the best and brightest. Working at RWJ and training at RWJ should be seen as highly desirable and reputable.
Question: How we can attract, keep & foster efforts of best people?

Mission: Patient Care

Priority: Critical

Comment: As the only health sciences university in NJ, it is mandatory that the School’s priority be Education. Community health, environmental, and disease-specific research could be differentiating. The main weakness in patient care is lack of programatic coordination between the School and RWJUH in several patient care sub-specialties. Also difficulty with access to specialized care. To recruit and retain, you need to nurture sense of ownership, provide resources and implement incentive plans.

Question: How we can attract, keep & foster efforts of best people?

Mission: Patient Care

Priority: Critical

Comment: Morale is declining rapidly - the best people leave and morale further declines.

Question: How we can attract, keep & foster efforts of best people?

Mission: Research

Priority: Critical

Comment: Put in place a new union contract with the AAUP.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Instead of renewing faculty contracts at the end of the period they should be renewed on a rolling basis. For instance, a 3 year contract should be renewed every year, i.e., every year you would get a new 3 year contract. That way, if a contract will not be renewed or will be changed the individual will have 3 years notice not the current 1 year. If we can’t predict 3 years in advance what the status of a contract renewal will be, then we are not good at our job of evaluating and mentoring faculty.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Create a viable and functional electronic collaborative environment that includes live video conferencing capabilities from the individual office computer that works (unlike vTel).

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Divorce ourselves from UMDNJ and align with Rutgers.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Implement a speedier Human Resources system for promotions/reclassifications.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Eliminate bumping rights. It is a waste of time interviewing, selecting, and orientating new staff when at any time someone from another department who is being laid off can bump into the position if they merely have seniority. Each department and each supervisor selects a person not only based on qualifications but also for their needs and who they feel will fit/complement their work group and environment.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Provide attractive start-up packages for new faculty. Reward success; the salary incentive program for generating external PI salary support is a good start. Support Core Facilities needed by researchers.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** First, change the attitude that the school can save money by having people leave. You cannot keep good people with that viewpoint. Next, try to match offers. Third, appreciate the people who are not looking to leave. Fourth, provide pay equity to those who have stayed and worked to improve the school. Fifth, provide competitive start-up packages to new faculty.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Raise salaries, as we are falling behind on a national level. This comment is on behalf of the Department.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Harmonization of rules, regs, and policies (IRB) between Rutgers and UMD needs to be a fact. Sharing of ICR also needs to be smoothed. Likewise, the hospital needs to see itself as a partner in research rather than being a cost center.
Question: How we can attract, keep & foster efforts of best people?

Mission: Research

Priority: Critical

Comment: This is critical and we have not been successful over the last few years. I have made many comments above speaking to problems with increasing systematic unfriendliness from changes in Newark processes and policies. Newark’s mission needs to become research-friendly and value academic success and competition above bureaucratic reform.

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Question: How we can attract, keep & foster efforts of best people?

Mission: Research

Priority: Critical

Comment: Create a formalized faculty development/mentorship program that actively fosters and guides junior faculty’s efforts in research.

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Question: How we can attract, keep & foster efforts of best people?

Mission: Research

Priority: Critical

Comment: The amount of bureaucracy and paperwork has become so burdensome that serious researchers search for easier systems in which to work.

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Question: How we can attract, keep & foster efforts of best people?

Mission: Research

Priority: Critical

Comment: Too little of the indirect costs from grants is available to stimulate future research.
Question: How we can attract, keep & foster efforts of best people?

Mission: Research

Priority: Critical

Comment: Restraints on reimbursement, particularly meals, makes it difficult to host outside experts and consultants in an attractive manner -- they can go elsewhere.

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Question: How we can attract, keep & foster efforts of best people?

Mission: Research

Priority: Critical

Comment: Money is the most important criterion. The State, and UMDNJ Central Admin. needs to be convinced of this. RWJMS must be able to fully fund basic science faculty salaries, otherwise the departments will spiral down to nothing. This applies equally to Education. Basic science faculty are not going to devote themselves to Education if they have to spend their whole time trying to get hard-to-obtain research dollars to pay 50% of their salaries.

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Question: How we can attract, keep & foster efforts of best people?

Mission: Research

Priority: Critical

Comment: We can help clinical faculty meet their research goals by improving on efficiency of clinical operations as Dr. Scardella has begun to do. By making “patient time” more efficient, physicians will spend time reading and writing rather than scheduling patients and performing other clerical tasks.
**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Increase start-up packages. Support young faculty in these difficult times instead of terminating appointments for not obtaining funding in a given period of time. Eliminate unrealistic and outdated expectations of research progress. More time is needed now for obtaining funding. There are no existing support structures for new faculty to help with this issue.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** Obtain leadership that knows how to manage a research institution. The current show is failing.

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**Question:** How we can attract, keep & foster efforts of best people?

**Mission:** Research

**Priority:** Critical

**Comment:** This can’t be done when the school is broke. The State needs to either invest or shut it down.