State Accountability Report
Based on the Malcolm Baldrige Performance Excellence Criteria

Accountability Report Transmittal Form 2011-2012

Agency Name: Medical University of South Carolina

Date of Submission: September 15, 2012

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Section I. Executive Summary

1. MUSC’s stated purpose, mission, and values.

Chartered in 1824, the Medical University of South Carolina has expanded from a small private college for the training of physicians to a state university with a medical center and six colleges for the education of a broad range of health professionals, biomedical scientists and other health related personnel. Since its inception the University has awarded more than 26,000 degrees. MUSC is a publicly supported academic health center with colleges of Dental Medicine, Graduate Studies, Health Professions, Medicine, Nursing, and Pharmacy, and a referral and teaching hospital as well as area clinics. The University has Board-approved Mission, Value and Vision Statements, abbreviated versions of which follow:

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

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

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

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

Vision Statement. Once distinguished primarily in the educational arena, the University now is recognized for patient care, biomedical research, and community service. Looking toward the future, the University is poised to make even greater contributions including:
• Making educational offerings more broadly available with special attention to incorporating innovative technology to support an interprofessional educational environment that is increasingly diverse and emphasizes high standards of personal conduct;
• Meeting the burgeoning demand for additional clinical services by expanding hospital facilities, and eventually by replacing the current hospital, continuing to supply the most advanced referral center care, with an emphasis on patient safety, clinical innovation, and operational efficiency;
• Building additional areas of scientific leadership with support from the endowed chairs program and with sister research universities’ collaborations to leverage resources for the greatest possible scientific and economic impact;
• Improving the campus by purchasing additional land; constructing modern, efficient, and attractive buildings; and facilitating traffic flow and parking without sacrificing any of the integration of the various mission components;
• Above all, maintaining our commitment to work for the public we serve to assure a healthy start for the children of South Carolina, help seniors achieve quality and longevity in their lives, and eliminate health disparities at all ages (build hope, improve lives, and serve society).

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

• MUSC College of Medicine Ranked 4th in the Top 10 Most Popular Medical Schools by US News.
• MUSC launched the Master of Science in Clinical Research degree in India, Singapore and England.
• The new Center for Innovation and Entrepreneurship was established.
• MUSC added new endowed chair holders, Drs. Pat Woster, Richard Drake and Chanita Hughes-Halbert.
• U.S. News & World Report ranked MUSC as the state’s #1 hospital and named it as one of the country's best hospitals (top 50) in the treatment of ear/nose/throat disorders, nephrology, cardiology and heart surgery, and gastroenterology. MUSC is also “high-performing” in treating cancer, gynecologic disorders, orthopedics and rheumatology. Programs for diabetes and endocrinology, neurology and neurosurgery, pulmonology, geriatrics and urology also were considered high-performing.
• MUSC’s Ashley River Tower was ranked among the 20 most beautiful hospitals in the world.
• MUSC Children’s Hospital was again ranked in the top 20 hospitals for children’s heart programs in U.S. News Media Group's 2012-2013 edition of America’s Best Children’s Hospitals, along with a first-time top 50 ranking for the pediatric gastroenterology program.
• Etta Pisano, M.D., MUSC vice president for medical affairs and dean of the College of Medicine, received the gold medal award from the American Roentgen Ray Society (ARRS), the society’s highest honor awarded to recipients for distinguished service to radiology.
• Peter Kalivas, PhD, professor and co-chair of the Department of Neurosciences, received the South Carolina Governor’s Award for Excellence in Scientific Research.
• MUSC led the development of Carolina eHealth Alliance (CeHA) that connects 11 emergency departments of all major Charleston-area hospitals through a patient health information exchange that links electronic medical records, saving critical time and reducing costs.
• MUSC became a tobacco-free campus and led a successful effort to allow all public higher education institutions in SC to prohibit the use of tobacco products, if they choose to do so.

• U.S. News and World Report’s 2013 edition of America's Best Graduate Schools ranked 11 MUSC graduate programs in top 100 spots: Pharmacy, 26th; Nursing, 50th; Medicine-Drug and Alcohol Abuse, 10th; Medicine-Primary Care, 49th; Medicine-Research, 57th; Medicine-Statistics, 58th; Health Professions-Health Care Management, 29th; Health Professions-Nursing Anesthesia, 26th; Health Professions-Occupational Therapy, 21st; Health Professions-Physical Therapy, 51st; Health Professions-Physician Assistant, 25th.

• The South Carolina Hospital Association (SCHA) and NC Prevention Partners recognized MUSC as a Gold Apple Hospital for providing the highest standard of excellence for healthy food environments offered to employees, patients and visitors.

• The MUSC trauma program has been verified as a Level 1 Trauma Center, the highest level any trauma program in the country can achieve, by the American College of Surgeons (ACS). MUSC is the first hospital in South Carolina to achieve this rating.

• The Hollings Cancer Center at MUSC and South Carolina State University received a landmark grant, exceeding $800,000, from the National Institutes of Health-National Cancer Institute to establish the South Carolina Cancer Disparities Research Center (SC CaDRe) which will have as its mission investigating cancer disparities and training future researchers in the field. It is among the first of its kind in the country to support cancer disparities research that includes Sea Island residents.

• A collaboration between the College of Medicine and the South Carolina College of Pharmacy (SCCP) was awarded a $10.5 million research grant from the National Institutes of Health. Funding for the Center of Biomedical Research Excellence (COBRE) in Oxidants, Redox Balance and Stress Signaling began in September 2011 and the project period runs through August 2016.

• Scientists and researchers from across the globe convened at MUSC’s new bioengineering building to mark the first international symposium regarding cardiovascular regeneration. In addition, MUSC President Dr. Ray Greenberg and Dr. Rafael Beyar, CEO and Director General of Rambam Health Care Campus, signed a memorandum of understanding for further collaboration among the medical university and the Technion-Israel Institute of Technology and the Rambam Health Care Campus, located in Haifa, Israel.

• MUSC Department of Psychiatry and Behavioral Sciences joined the National Network of Depression Centers (NNDC), which links together more than 20 leading medical centers across the country working to improve the lives of those struggling with depression.

• MUSC dedicated two new buildings of laboratory complex for biomedical research—one for bioengineering and one for drug discovery. The complex was named after U.S. Rep. James E. Clyburn (D-SC) for his long-standing efforts to correct health disparities in South Carolina and for his support of biomedical research.

• MUSC was awarded a five-year, $2.8 million grant from the US Department of Health and Human Services (Maternal and Child Health) to create a statewide program called South Carolina Leadership Education in Neurodevelopmental and Related Disabilities (SC LEND). This is the first LEND award for South Carolina.

• Lisa Saladin, Ph.D., was appointed the permanent position of dean of the MUSC College of Health Professions (CHP).

• Louis J. Guillette Jr., Ph.D., reproductive biologist, endocrinologist and professor at MUSC was a recipient of a $100,000 award in environmental science by the Heinz Foundation.
3. Key strategic goals for the present and future years.

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

I. INTERPROFESSIONAL/INTERDISCIPLINARY

**Goal:** MUSC will be a leader in interprofessional/interdisciplinary (IP/ID) practices by building on existing activities and fostering an environment that rewards innovative and integrated education, research, and patient care.

MUSC has been at the forefront of the national and international efforts to institutionalize Interprofessional/Interdisciplinary (IP/ID) education, research, and clinical care. In 2007, our leadership in this effort was enhanced by our 10-year educational Quality Enhancement Plan, Creating Collaborative Care (C3). Its guiding statement—Learning Together; Transforming Health—expresses an ambitious agenda to be reached through collaborative means. The University’s goal is to be a national and international leader in IP/ID education, research, clinical care and thereby transform health. Among other benefits, IP/ID efforts will better prepare the future workforce of South Carolina. The objectives and strategies emphasize a three-stage process of assessment, implementation, and evaluation of IP/ID initiatives. While implementing this process and as a consequence of it, we also aim to create long-lasting IP/ID resources within MUSC, across our mission. Health care and biomedical research will be more effective when we work together, open to each other’s perspectives, eager to look for solutions we could not find on our own. We want MUSC faculty, staff, and students to serve as exemplary collaborators when working with patients and colleagues.

II. TECHNOLOGY/INNOVATION

**Goal:** Provide an environment that promotes the application, development, and transfer of technology, fosters and rewards innovation, cultivates human capital, and responds to emerging priorities to advance health care, education, and research.

Innovation is discovery put to use. It begins with a novel idea and proceeds through implementation. Novel ideas lead to change, and change challenges established structures and approaches. For important advances to occur in health care, education, and research, MUSC needs to foster a culture that enables, encourages, and rewards innovation. The primary goal of academic technology transfer is to ensure that research benefits the public. As a leading biomedical research institution, MUSC can play a prominent role in improving health care and driving the economy of South Carolina and the region, by transferring new technologies and innovations to the patient community through commercialization and entrepreneurship. Accelerating the transfer of new technologies and innovations facilitates improved health care, provides new revenue opportunities, and enhances the University’s impact and visibility at regional, national, and global levels. MUSC already has a wide variety of existing technologies and resources available to promote innovation. However, new technologies and approaches demand constant evaluation and incorporation to assure that programs can access and leverage state-of-the-art resources.

III. ENTREPRENEURIALISM

**Goal:** Create and sustain a culture, with both pathways and infrastructure that will support University-wide entrepreneurialism. Cultivate opportunities to explore new portals and partnerships, public and private, while promoting an ethical framework for pursuits.

Entrepreneurship will bring nontraditional economic resources and visibility to MUSC, contribute to public welfare and economic development in South Carolina and beyond, and demonstrate the successful application of University research to health care needs. Entrepreneurial activity demands encouragement, incentive, recognition, and coordination to flourish and grow. For our endeavors to be successful, a shift in culture at every level is needed. A culture of ethical entrepreneurialism facilitates
the development of high quality innovations and technological advances in the fields of health, education, and research, while maintaining fairness, teamwork, core values, and ethical principles. To realize these goals, we look to intersections—across professions and disciplines, with other research centers, and with experienced entrepreneurs. Essential to building and maintaining these relationships at MUSC will be the creation of the Center for Medical Innovation and Entrepreneurialism. The Center will serve as a gateway for partner engagement as well as a resource for our entrepreneurial health and biomedical scientists. Only through cultural change within the institution and renewed engagement with external partners will MUSC truly become an entrepreneurial university.

IV. GLOBALIZATION

Goal: To improve the health of people in South Carolina and globally through the development of collaborative global partnerships in education, clinical care and research.

The faculty, staff, and trainees at the Medical University of South Carolina are currently actively engaged in collaborative global partnerships in the areas of education, public health, clinical care, and research. To date, our globalization efforts have improved the quality of life of individuals, locally, nationally and globally, provided valuable skills and knowledge to participants, generated scientific evidence, created additional revenue, enhanced our ability to recruit students, fellows, residents and faculty who share an interest in global health, and elevated the reputation and visibility of the Medical University worldwide. Our students benefit from exposure to and participation in global efforts. In order to build on these achievements and to capitalize on the diverse opportunities available to expand our global efforts, MUSC has chosen to make globalization a strategic priority. Becoming a more comprehensive global resource will require a university-wide cultural shift. In keeping with cultures around the world, this shift will require a strong family-centered culturally sensitive focus with keen attention to closing the gap on health inequities and an understanding of human needs across the age span. University personnel may require an increased awareness of the benefits of a global focus, training in techniques, policies, and procedures to expand their work to global entities, and support to carry out their work in near and distant environments in ways that require creative thinking.

4. Key strategic challenges (i.e., educational, operational, human resource, financial, and community-related strategic challenges).

- Reductions in Medicaid reimbursement.
- Loss of nearly half of state appropriations over the past three years.
- Loss of State Fiscal Stabilization Funds (SFSF).
- Endowment pay-outs still reduced by investment losses in economic downturn.
- Reduced NIH budget, which is the leading source of research funding to MUSC.
- Constrained private sector funding for research because of financial pressures.
- An increasingly fierce competitive market for talent, leading to challenges in retaining key leaders (clinical, research, administrative).
- Heavy debt service related to new construction.
- Large amount of deferred maintenance.
- Need for replacement of aging academic facilities in the Colleges of Pharmacy and Nursing.
- New accreditation/regulatory standards requiring program changes and improved evaluation systems.

5. How the accountability report is used to improve organizational performance.

The Accountability Report creates an opportunity for key leaders from across the institution to review and discuss the various initiatives on campus that are currently contributing directly to
improving future organizational performance. This occurs through the following initiatives:

- **Institutional Effectiveness.** In 2012, MUSC opened an Office of Institutional Effectiveness (OIE). This office was initiated to assure that MUSC was effectively measuring and assessing relevant data and information correlated to its mission of providing top quality education outcomes as well as correlated research and clinical outcomes (particularly as they relate to the education mission). It was also tasked with assessing and assuring that the support from administrative areas of the institution were adequate, capable, and of sufficient quality. This will be an on-going endeavor of the University with the appointment of a full-time faculty member and a full-time staff member.

- **Strategic Planning.** In 2010, the President initiated a comprehensive strategic analysis of where MUSC needed to focus its energy and resources over the next five years (2010-2015). Committees made up of key institutional leaders were brought together to concentrate on four focus areas. These committees developed action plans to initiate the work needing to be done in these focus areas. MUSC is in the early stages of bringing resources and staffing together to develop the focus areas that were determined to be paramount to MUSC’s on-going success - Entrepreneurialism, Interprofessional/Interdisciplinary Education, Globalization, and Technology/Innovation.

- **The MUSC Excellence Program.** Each college and unit at the University has established clearly defined and universally understood, accepted, and pursued goals. These goals are formatted into “Pillar Goals” that revolve around People, Service, Quality, Growth, and Finance. Leadership, faculty, and staff are held accountable to these pillar goals through annual surveys that empirically assess the quality or quantity of the various measures that are set to reach stated pillar goals.

### Section II – Organizational Profile

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

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

   Programs leading to undergraduate degrees (BS), master’s degrees (MS), and doctoral degrees (MD, DMD, PharmD, DHA, DPT, DNP, and PhD) are provided primarily through the traditional lecture format, enhanced with small-group instruction, and supplemented with on-line resources, and clinical and laboratory experiences. The delivery of courses/degrees through distance technology is significantly increasing in the colleges of pharmacy, nursing, and health professions.

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

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

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

3. Operating locations.

The University campus is located in Charleston. The institution maintains a presence on the campus of the University Center in Greenville but does not offer any onsite degree programs at this time. The South Carolina College of Pharmacy has campus locations in both Charleston and Columbia. Through the MSCR (Masters in Clinical Research)-Global program in the College of Graduate Studies, MUSC has an international presence in England, Singapore and India. The Medical University Hospital Authority operates a number of ambulatory care clinics throughout the state of South Carolina.

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

Table 2.4-1. Full-time and Part-time MUSC Employees

<table>
<thead>
<tr>
<th>Employees/Year*</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Full-time</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Classified</td>
<td>1493</td>
<td>1493</td>
<td>1533</td>
</tr>
<tr>
<td>Faculty</td>
<td>1096</td>
<td>1175</td>
<td>1228</td>
</tr>
<tr>
<td>Post-Docs</td>
<td>143</td>
<td>143</td>
<td>159</td>
</tr>
<tr>
<td>Research grants</td>
<td>452</td>
<td>468</td>
<td>453</td>
</tr>
<tr>
<td>Residents</td>
<td>633</td>
<td>641</td>
<td>702</td>
</tr>
<tr>
<td>Students</td>
<td>199</td>
<td>180</td>
<td>121</td>
</tr>
<tr>
<td>Students &amp; temps</td>
<td></td>
<td></td>
<td>93</td>
</tr>
<tr>
<td>Unclassified non-faculty</td>
<td>31</td>
<td>33</td>
<td>36</td>
</tr>
<tr>
<td><strong>Total Full-time</strong></td>
<td>4047</td>
<td>4133</td>
<td>4325</td>
</tr>
<tr>
<td><strong>Part-time</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Classified</td>
<td>46</td>
<td>51</td>
<td>41</td>
</tr>
<tr>
<td>Faculty</td>
<td>233</td>
<td>253</td>
<td>259</td>
</tr>
<tr>
<td>Post-Docs</td>
<td>2</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Research grants</td>
<td>53</td>
<td>58</td>
<td>54</td>
</tr>
<tr>
<td>Residents</td>
<td>4</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Temps &amp; students</td>
<td>462</td>
<td>591</td>
<td>609</td>
</tr>
<tr>
<td>Unclassified non-faculty</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total Part-time</strong></td>
<td>800</td>
<td>957</td>
<td>968</td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td>4847</td>
<td>5090</td>
<td>5293</td>
</tr>
</tbody>
</table>

*2010 data as of 7/9/2010; 2011 data as of 8/1/2011; 2012 data as of 7/20/2012
5. The regulatory environment under which the University operates.

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

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

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

7. MUSC’s key suppliers and partners.

<table>
<thead>
<tr>
<th>Bank of America</th>
<th>MUSC Foundation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ameresco Inc.</td>
<td>MUSC Foundation for Research Development</td>
</tr>
<tr>
<td>Dell Marketing LP</td>
<td>NBM Construction Company Inc.</td>
</tr>
<tr>
<td>M B Kahn Construction Company Inc.</td>
<td>South Carolina Electric and Gas Company</td>
</tr>
<tr>
<td>Manhattan Construction Company</td>
<td>SCANA Communications Inc.</td>
</tr>
<tr>
<td>Medical University Hospital Authority</td>
<td>University Medical Associates</td>
</tr>
<tr>
<td>Stevens &amp; Wilkinson</td>
<td>US Bank</td>
</tr>
</tbody>
</table>

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

The University is one of three research universities in South Carolina. The University of South Carolina in Columbia and Clemson University engage in research endeavors similar to those at the University. These two institutions, therefore, would be considered key competitors for research funding. With respect to medical education training, the University of South Carolina School of Medicine and the newly established University of South Carolina School of Medicine-Greenville would serve as key competitors for students desiring to pursue their MD degrees.

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

The University is unique among institutions of higher education in South Carolina in that it is devoted exclusively to health sciences education and research. In addition, it is the only university in the state to maintain a tertiary care hospital and ambulatory care facilities on its campus. It is this atmosphere of inter-professional education and training, along with convenient access to patient care that provides this institution with a competitive edge in recruiting students and faculty. With the recent completion of the University’s Ashley River Tower hospital, patients have been admitted to a sophisticated health care facility with technologically advanced health care in the most efficient and effective manner in comfortable surroundings.

In addition to teaching and patient care, the University has committed significant resources to the development of state-of-the-art research facilities on its campus. Over the past few years, the
renovation of existing buildings and the creation of new research facilities have been instrumental in the University’s success in recruiting world-class research scientists which, in turn, has allowed the institution to surpass other state research institutions in its level of funding, particularly from the National Institutes of Health. Furthermore, the NCI-designation of the Hollings Cancer Center, the only cancer center in the state to receive this prestigious moniker, has further enhanced cancer-based research and increased the acquisition of extramural funding. MUSC completed and dedicated (October 2011) the James E. Clyburn Research Center, which is a laboratory complex for biomedical research comprised of two new buildings, one designated for research in bioengineering, the other for drug discovery. The complex houses a diverse array of investigators which includes scientists from different departments, centers and colleges all across the MUSC campus, working alongside representatives from private industry and the state's three research universities: the Medical University of South Carolina, Clemson and the University of South Carolina. It is a collaborative research environment unlike any other in the state or nation, and reflects a new approach to biomedical investigation in which people from different backgrounds, disciplines, institutions and parts of the world work together to solve our most vexing health problems.

10. MUSC’s performance improvement systems.

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

11. Organizational structure. [http://www.musc.edu/president/organization.html]

The Deans of the colleges report to the Vice-President for Academic Affairs and Provost.
### Accountability Report Appropriations/Expenditures Chart

#### Base Budget Expenditures and Appropriations

<table>
<thead>
<tr>
<th>Major Budget Categories</th>
<th>FY 10-11 Actual Expenditures</th>
<th>FY 11-12 Actual Expenditures</th>
<th>FY 12-13 Appropriations Act</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total Funds</td>
<td>General Funds</td>
<td>Total Funds</td>
</tr>
<tr>
<td>Personal Service</td>
<td>$193,655,149</td>
<td>$ 32,271,593</td>
<td>$235,682,023</td>
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<tr>
<td>Other Operating</td>
<td>$316,699,418</td>
<td>$ 11,952,577</td>
<td>$309,848,585</td>
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<tr>
<td>Special Items</td>
<td>$  3,250,133</td>
<td>$  540,004</td>
<td>$  3,250,133</td>
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<tr>
<td>Permanent Improvements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Case Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distributions to Subdivisions</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Fringe Benefits</td>
<td>$  76,233,676</td>
<td>$  9,288,594</td>
<td>$  89,647,305</td>
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<tr>
<td>Non-recurring</td>
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<tr>
<td>Total</td>
<td>$589,838,376</td>
<td>$ 54,052,768</td>
<td>$68,428,046</td>
</tr>
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#### Other Expenditures

<table>
<thead>
<tr>
<th>Sources of Funds</th>
<th>FY 10-11 Actual Expenditures</th>
<th>FY 11-12 Actual Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplemental Bills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital Reserve Funds</td>
<td></td>
<td>$  4,877,511</td>
</tr>
<tr>
<td>Bonds</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 13. Major Program Areas Chart

<table>
<thead>
<tr>
<th>Program Number and Title</th>
<th>Major Program Area (Brief)</th>
<th>FY 10-11 Budget Expenditures</th>
<th>FY 11-12 Budget Expenditures</th>
<th>Key Cross References for Financial Results*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instruction Colleges (Activity no. 573-584)</td>
<td>Provide health and science education and training which prepare students to competently serve the state's health professions and science needs.</td>
<td>State: $18,264,954.00</td>
<td>State: $17,362,158.00</td>
<td>7.1, 7.2, 7.3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Federal: $31,293,868.00</td>
<td>Federal: $42,589,815.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other: $72,725,619.00</td>
<td>Other: $70,199,169.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total: $122,284,441.00</td>
<td>Total: $130,151,142.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of Total Budget: 20.08%</td>
<td>% of Total Budget: 20.72%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research (Activity no. 586)</td>
<td>Advance the knowledge of health sciences for the citizens of South Carolina and the nation, in addition to keeping our instructional focus contemporary.</td>
<td>State: $3,511,520.00</td>
<td>State: $3,337,953.00</td>
<td>7.1, 7.2, 7.3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Federal: $97,909,716.00</td>
<td>Federal: $133,251,560.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other: $58,019,016.00</td>
<td>Other: $56,003,464.00</td>
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<tr>
<td></td>
<td></td>
<td>Total: $159,440,252.00</td>
<td>Total: $192,592,977.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of Total Budget: 26.18%</td>
<td>% of Total Budget: 30.66%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administration (Activity no. 589)</td>
<td>Improve the value of the university by providing a productive and effective infrastructure overseeing general university functions.</td>
<td>State: $18,389,666.00</td>
<td>State: $16,944,354.00</td>
<td>7.1, 7.2, 7.3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Federal: $780,852.00</td>
<td>Federal: $1,062,711.00</td>
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<tr>
<td></td>
<td></td>
<td>Other: $145,539,492.00</td>
<td>Other: $140,483,524.00</td>
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<tr>
<td></td>
<td></td>
<td>Total: $164,710,010.00</td>
<td>Total: $158,490,589.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of Total Budget: 27.05%</td>
<td>% of Total Budget: 25.23%</td>
<td></td>
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</tbody>
</table>

*Key Cross-References are a link to the Category 7 - Business Results. These References provide a Chart number that is included in the 7th section of this document.*

**Below: List any programs not included above and show the remainder of expenditures by source of funds.** Public Service, Diabetes Center, Student Services, Operation & Maintenance of Plant, Scholarships & Fellowships, Auxiliary (Parking), Rural Dentist Incentive, Hollings Cancer Center, College of Dental Medicine Bldg., and Below-the-Line items.

<table>
<thead>
<tr>
<th>Remainder of Expenditures</th>
<th>FY 10-11</th>
<th>FY 11-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>State:</td>
<td>$13,886,628.00</td>
<td>$13,165,137.00</td>
</tr>
<tr>
<td>Federal:</td>
<td>$10,015,564.00</td>
<td>$13,630,818.00</td>
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<tr>
<td>Other:</td>
<td>$138,674,572.00</td>
<td>$120,149,241.00</td>
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<tr>
<td>Total:</td>
<td>$162,576,764.00</td>
<td>$146,945,196.00</td>
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<tr>
<td>% of Total Budget:</td>
<td>26.70%</td>
<td>23.39%</td>
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</table>
Section III – Elements of Malcolm Baldrige Award
Category I – Senior Leadership, Governance, and Social Responsibility

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

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

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

The President conducts an annual agency head evaluation in compliance with the South Carolina Agency Head Salary Commission. This document reports on the President’s progress in achieving specific goals and when these outcomes have been satisfactorily achieved. The number of performance objectives ranges from five to six annually. In addition, the President carries out a performance improvement effort consistent with the criteria of the Malcolm Baldrige National Quality Award. The process begins with the President submitting a planning document which specifies the performance objectives and continuous improvement effort to be accomplished during the year. At the conclusion of the year, the President prepares a written narrative describing his performance on each objective and the continuous improvement efforts, and reviews them with the Board of Trustees. Finally, an Agency Head Evaluation Survey is completed by each member of the Board of Trustees and is submitted along with the written narratives.

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

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

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

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

Throughout the year, President’s Council members work with colleges, departments, units, and offices throughout the enterprise to provide guidance in day-to-day operations. The flow of communication throughout the institutions is reinforced by the related councils and groups (e.g., Deans’ Council, Dean’s group, and Service Excellence Teams) that reach area offices. The area councils, groups, and teams meet regularly to review strategies and performance, and facilitate consistent communication. Local issues are discussed, and feedback on institutional successes and concerns are addressed. In this way, the cycle of information continues to loop throughout the organization.

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

1.2 How do senior leaders create a sustainable organization with a focus on action to accomplish the organization’s mission, strategic objectives, improve performance, and attain your vision?

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

These goals/accomplishments are compiled and drafted each July by senior leaders, and finalized each August by the University Board of Trustees. They then are assimilated into the University Strategic Plan as well as used in the Board’s annual performance evaluation of the University President who, in turn, uses unit goals/accomplishments in the annual performance evaluations of the Vice-Presidents and Provost. They are also widely disseminated internally (i.e., Board minutes, Town Meetings, web pages, and campus publications including the weekly newspaper, The Catalyst) and externally (i.e., media releases/interviews, annual reports, presentations to Legislature and Commission on Higher Education). The updated versions are also the basis for annual legislative priorities set by the University.
While these remain the major frame of reference for critical decisions and follow up communications by senior leaders, the University also stays alert for unexpected opportunities that fall within Mission parameters, developing and processing these in a timely manner for Board ratification when appropriate. From time to time the key University leadership schedules a special retreat meeting with the Trustees to deal with goals and objectives in even more depth as well as ensure that all parties are fully knowledgeable and in accord.

The expanding MUSC Excellence initiative offers a new collaborative opportunity for the various University entities to work both within and among themselves, while identifying common issues that can be cascaded down each portion of their respective parts of the University organization.

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

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

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

1.4 How do senior leaders create an environment for organizational and workforce learning?

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

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

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

As in many vital change initiatives, opportunities for young faculty and staff participation abound in the MUSC Excellence activities. The entire University benefits, and junior faculty and staff gain experience and exposure. This opens them for the next formal steps in leadership development, as described above. This exposure can be an important part in identifying and supporting home-grown leaders within the University.

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

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

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

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

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

Various organizational elements use annual employee and staff surveys to focus on problems relating to work conditions, group morale, individual job satisfaction, effectiveness or inadequacies of employee recognition, and reward programs. Targeted responses are begun and formal and informal measurements are obtained to document real progress or remediate shortfalls in planning or execution.

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

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

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

The Vice-President for Academic Affairs and Provost has an additional evaluation that is included in the annual faculty-completed survey package to rate their Division Directors, Department Chairs, college Deans, and the Provost. The Center for Academic Research and Computing administers an online, Faculty Senate-designed survey; the specific responses regarding the Provost are submitted to the President. The results are incorporated into the annual evaluation discussion of the Provost and, depending on the nature of the discussion, may be included in the Provost’s Faculty Appointment Contract.

Each year the Deans and the Associate Provosts are evaluated by the Provost. That process is initiated by a self-assessment that includes key accomplishments of the past year, an assessment of strengths and weaknesses, and a list of specific goals for the coming year. The Provost discusses the self-assessment with each of his direct reports and follows that meeting with a summary document outlining the key points that emerge from the evaluation process. In addition, the Dean of each College and every Department Chair and Division Director are evaluated annually by the faculty of their respective colleges using an online survey tool. Each Dean meets with each Department Chair in his or her college to review and share the results of the faculty assessment with the Department Chair.

For the past five years in the College of Medicine, an elaborate annual evaluation and goals setting occur with Departmental chairs and Center directors using the College of Medicine’s Pillar Goals linked to measured, departmental performance goals in the areas of People, Service, Quality, Growth and Finance. This process has furthered the effectiveness of the annual evaluation by increasing the
number of objectively measurable goals for individual leaders and departments.

1.8 What performance measures do senior leaders regularly review to inform them on needed actions?

Performance according to plan is the hallmark of the MUSC Excellence initiatives. Along with faculty, employee and trainee surveys and measurements—some new and some with substantial longitudinal history—senior leaders are better able to track needs and address remedies. The MUSC Board of Trustees has been briefed on these processes and can be kept abreast of such information more easily and with strong confidence in the measurements being monitored and reported.

1.9 How does MUSC address and anticipate any adverse impacts of its programs, offerings, services, and operations? What are the key compliance related processes, goals, and measures?

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

1.10 How do senior leaders actively support and strengthen the communities in which MUSC operates?

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

MUSC Gives Back, a University Student Community Volunteer Program, increases the value of students’ education at the University by promoting and encouraging community volunteer experiences that allow students to observe and address health care problems in the community they will ultimately serve. This program increases student interaction with the community, and increases cross-college collaboration and interprofessional education and/or experiences. All six colleges participate in the MUSC Gives Back program. Overall, MUSC students provided over 60,000 service hours over the past four years. In fact over the past year interprofessional teams of students have provided care to over 1,000 un- and under- insured patients through the CARES clinic. Furthermore, through our service-learning program “Junior Doctors of Health”, MUSC students teach wellness principles to elementary school students and provide them age-appropriate information about careers in health care.

The College of Dental Medicine has an integrated student/faculty Community Outreach and Service program. Students and faculty participate annually in a variety of programs with student participation averaging 35 hours per third and fourth year student. Some of the programs include: Give Kids a Smile, Special Olympics, Overseas Mission Trips, East Cooper Community Center, and various dental extramural rotations.
The Graduate Student Association (GSA) of the College of Graduate Studies at MUSC serves as a liaison between students and faculty, as well as the Medical University as a whole. A major goal of the GSA has been to increase involvement in the community, specifically improving awareness and excitement about scientific research. They have made strides in accomplishing this mission by judging local high school science fairs and helping with local college student research days. Their G.R.O.W.S. (Graduate Students Reaching Out With Science) Program introduces middle-school students of Charleston County to opportunities in scientific research, to discuss various applied sciences, and to allow graduate students the opportunity to share their passion for research and knowledge of science with the community.

The College of Health Professions also has a strong tradition of volunteerism as represented by the activities of its students. Last year, the College of Health Professions’ students logged more than 4500 hours through activities sponsored by the MUSC Gives Back program. In addition, the Student Health Professionals United in Recognizing Diversity (housed in the college) elected to raise funds and support CAMP HAPPY DAYS – Kids Kickin’ Cancer through planned activities, while Rehabilitation Program students supervised disabled children participating in a therapeutic horse-back riding program, SC Special Olympics, and organized the ninth annual ALS HOPE Walk/Run to donate to the SC chapter of the ALS (Lou Gehrig’s disease) Association.

The College of Pharmacy students also have a high level of participation in the activities sponsored by MUSC Gives Back. In the last academic year, more than 70% of the students volunteered for community activities and logged in excess of 3000 hours. On most Monday nights beginning in September, pharmacy students assisted a pharmacist in filing prescriptions and counseling underserved patients at the Harvest Free Medical Clinic in North Charleston, at the Crisis Ministries’ Wednesday Night Clinic for homeless populations, and at the MUSC student run health clinic, CARES. Additionally, College of Pharmacy students generated funds to supply the Carolina Youth Development Center, an umbrella organization to support neglected and abused children living in foster care, with ten car loads of Christmas gifts and clothing.

The College of Medicine engages in a variety of outreach and service programs. These programs and activities are designed to provide patient-centered education about health care matters to the Charleston community and to provide service to populations in need. Activities have included: lectures, workshops, health care fairs and screenings, information booths at community gatherings, preventive services and health promotions, and activities specific to agency requests. Medical students also sponsor and manage two community free health clinics serving the homeless and under-insured, Crisis Ministries’ Wednesday Night Clinic, and the CARES Clinic.

The College of Nursing is heavily engaged with the community to provide a variety of service projects in which its students and faculty may be involved, such as Tri County Community Health and Wellness Fair, Health First, and, one of the college’s most significant community outreach programs - the Hispanic Health Initiative.

In addition to the activities cited above, several colleges offer continuing education to their health care professionals. Among these are the College of Pharmacy and the College of Medicine. As provided in its mission statement, the College of Pharmacy is dedicated to the lifelong learning of pharmacists throughout the state of South Carolina. The College of Pharmacy offers a variety of opportunities made possible both by programs directly formed by the College and by co-sponsorship with other organizations of programs relevant to pharmacists. Their programs range from the relatively brief (1-2 hour) single topic "update" programs to comprehensive Disease Management Certificate programs. Additionally the televised Pharmacy Update series is available at the more than 20 statewide sites of the Health Communication Network.

The Medical University of South Carolina Office of Continuing Medical Education is committed to
supporting the lifelong learning process of physicians by providing high quality educational opportunities designed to advance the quality and safety of patient care in South Carolina and to advance physician competence and enhance practice performance. The Office of Continuing Medical Education in the College of Medicine offers CME activities which include regularly scheduled series (grand rounds, case conferences, tumor boards, etc.), regional, national and international conferences and symposia. Enduring materials include Internet activities, accessed through our website, DVD packages and printed materials following academic detailing visits to physician practices. Our target audience includes: (1) the clinical medical faculty, residents and fellows of the College of Medicine of the Medical University of South Carolina, (2) practicing physicians and other health professionals in surrounding communities and the state of South Carolina and (3) practicing physicians and health care professionals participating in regional, national and international activities sponsored by the College of Medicine at the Medical University of South Carolina.

Section III – Category 2 – Strategic Planning

2.1 What is MUSC’s strategic planning process, including key participants, and how does it address:

a. MUSC's organizations’ strengths, weaknesses, opportunities and threats
b. Financial, regulatory, and other potential risks
c. Shifts in technology, student and community demographics, markets, student and stakeholder preferences, and competition
d. Human resource capabilities and needs
e. Long-term organizational sustainability and organizational continuity in emergencies
f. MUSC's ability to execute the strategic plan

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

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

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

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

The annual eight-month process starts at the departmental or unit levels and proceeds to the very highest University levels. The following timeline was observed for the FY 2012-2013 Planning and Operational Budget: The following chart provides a process overview:

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>January 11, 2012</td>
<td>Component fees information request sent to Units</td>
</tr>
<tr>
<td>January 21, 2012</td>
<td>Component fees information due from Units</td>
</tr>
<tr>
<td>January 27, 2012</td>
<td>Academic charges request for out-of-state students sent to Colleges</td>
</tr>
<tr>
<td>February 3, 2012</td>
<td>Distribution of capital and operating &amp; planning budget packages</td>
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<tr>
<td>February 26, 2012</td>
<td>Academic charges for out-of-state students due from Colleges</td>
</tr>
<tr>
<td>March 17, 2012</td>
<td>GAPP instructions due from Planning Office to Budget &amp; Analysis Office</td>
</tr>
<tr>
<td>March 17-31, 2012</td>
<td>Budget analysts contact (and, if needed, meet with) assigned units to discuss (e.g., reviewing the budget package, discussing the time line, assisting with completion of the package, etc.) the Fiscal Year 2012 Budget Process.</td>
</tr>
<tr>
<td>March - April 2012</td>
<td>Analysis of budget packages performed by Budget &amp; Analysis Office</td>
</tr>
<tr>
<td>April 8, 2012</td>
<td>Academic charges for in-state and out-of-state students presented to Board</td>
</tr>
<tr>
<td>April 1-20, 2012</td>
<td>Vice-Presidents' budget meetings (internal)</td>
</tr>
<tr>
<td>May 12, 2012</td>
<td>Capital and operating &amp; planning budget packages to Budget &amp; Analysis Office</td>
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<tr>
<td>May 2012</td>
<td>Development of budget presentation by Budget &amp; Analysis Office</td>
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<tr>
<td>May 24, 2012</td>
<td>Review of budget presentation by CFO and VP of Finance &amp; Administration</td>
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<tr>
<td>May 28, 2012</td>
<td>Review of budget presentation by University Budget Committee</td>
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<tr>
<td>June 2, 2012</td>
<td>Presentation of draft FY 2012 budget to President</td>
</tr>
<tr>
<td>June 25, 2012</td>
<td>Presentation of draft FY 2012 budget to Board's Finance</td>
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</table>
The Medical University of South Carolina exists in a volatile environment that includes State budgetary challenges, rapidly advancing technologies in health care and education, continually growing consumer expectations, constant regulatory changes, and even the environmental threats of hurricanes, earthquakes, and tornados posed by a low-lying coastal campus.

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

About 5% of MUSC’s operating budget comes from State appropriations. Tuition adds a few additional percentages, with all of the remainder earned through the hard work of faculty and staff and through private philanthropy. While an imperative to “pay our own way” puts great pressure on the institution, it does result in a great economic return for the State of South Carolina. For every $1 of state investment, MUSC generates more than $12 of direct economic activity. If one extrapolates the ripple effect of this impact in the housing, retail and service industries, the total economic impact is estimated to approach $3.5 billion. The inescapable reality is that the Medical University is one of the most significant contributors to the economy of South Carolina. The University expects to assume an even larger role in the fortunes of South Carolina as it shifts towards a “knowledge based” economy. Along with sister research universities, Clemson University and the University of South Carolina, MUSC is aggressively recruiting scientists who will bring with them intellectual property that can be commercialized.

The most significant opportunity for future achievement lies in relations with sister research universities Clemson University (e.g., joint bioengineering program) and the University of South Carolina (e.g., joint pharmacy school), and the completed Phase I hospital expansion.
Through the bioengineering alliance, Clemson University has placed multiple faculty and graduate students on the MUSC campus, and plans are underway to build a joint facility in Charleston that will include engineering faculty and students from USC, Clemson, and MUSC. We are fortunate to have recruited into an endowed chair the former Senior Science Advisor to the National Institute of Biomedical Imaging and Bioengineering to spearhead this effort. A major achievement in this area has been the recent completion of the Bioengineering building in August 2011, which will house the South Carolina Bioengineering Alliance and provide 100,000 sq. ft. of research space.

The SC College of Pharmacy (SCCP) has been created by integrating existing, separate colleges of pharmacy at USC and MUSC. The school will continue to have educational and research activities on both campuses, while also adding an Upstate presence. The national accrediting body for pharmacy schools had extended the merger initial accreditation and just this past year granted SCCP full accreditation. Two endowed chairs have joined the pharmacy faculty to help establish the Drug Discovery and Development initiative that will be a central part of the college. In addition, the new Drug Discovery building was completed in August 2011.

We also have partnered with our sister teaching hospitals in Columbia, Greenville and Spartanburg through a non-profit entity, Health Sciences South Carolina, to improve medical research, education, patient care and economic development. By partnering with our colleagues around the state, we are leveraging the resources of all of our institutions. This teamwork will help propel the state of South Carolina into a leadership position in the health sciences, giving renewed meaning to the MUSC motto: *Auget Largiendo*, “she enriches by giving.”

2.2 How do your strategic objectives address the strategic challenges you identified in your Executive Summary? (Section I, Question 4).

The four key strategic objectives presented below describe in detail the approaches that will be taken to directly address the strategic challenges as presented earlier. The Strategic Planning Chart (in the appendix) summarizes the key strategies, as well as the action plans associated with each. When combined with the overriding budgetary concerns, these challenges are recognized and addressed.

I. INTERPROFESSIONAL/INTERDISCIPLINARY

**Goal:** MUSC will be a leader in interprofessional/interdisciplinary (IP/ID) practices by building on existing activities and fostering an environment that rewards innovative and integrated education, research, and patient care.

**Objective 1:** Foster existing initiatives and develop new opportunities that encourage interprofessional/interdisciplinary integration and experiences.

**Strategies**

*Identify, assess, and analyze models*

- Evaluate existing campus and community models of IP/ID collaboration and disseminate successful program elements through education and publication across the University, state, and nation.
- Determine the beneficial and constraining impacts of infrastructure on IP/ID effectiveness.
- Create a framework of success criteria to assess current IP/ID programs and initiatives.

*Implement and Disseminate*

- Ensure that systems of evaluation, including promotion and tenure, reward IP/ID collaboration.
- Facilitate acquisition of IP/ID skills through continuing education opportunities for students, staff, and faculty.
• Create new models and expand shared clinical and research resources for IP/ID education, practice, and research.
• Improve the quality and safety of patient care through the development of IP/ID teams.
• Increase the frequency of and venues for communication about IP/ID collaboration.
• Create a University-wide educational database to maximize efficiencies and increase IP/ID opportunities.

Evaluate outcomes using predetermined metrics, such as course evaluations, satisfaction surveys, clinical outcomes, publications, grants, and financial contributions, both qualitative and quantitative

Objective 2: Develop opportunities within and outside the institution and create partnerships with others to establish IP/ID collaboration as an ongoing University commitment.

Strategies
• Secure private and public sources of funding.
• Encourage the development of Centers of Excellence that promote IP/ID activities.
• Develop and launch new degree programs that promote or require IP/ID collaboration for best outcomes, which include cross-college and cross-University courses and research opportunities.
• Unify the leadership of IP/ID initiatives within central administration.
• Seek funding to create endowed chairs for programs that promote or require IP/ID collaboration for best outcomes.

II. TECHNOLOGY/INNOVATION

Goal: Provide an environment that promotes the application, development, and transfer of technology, fosters and rewards innovation, cultivates human capital, and responds to emerging priorities to advance health care, education, and research.

Objective 1: Maximize the use of resources and technologies to advance health care, education, and research at MUSC and throughout South Carolina.

Strategies
• Identify, communicate, implement, and continuously evaluate existing and novel technology platforms and approaches.
• Provide professional development and training in the use of new technologies.
• Develop core capabilities that offer advanced, comprehensive technologies and special services to the University and broad health sciences communities.
• Provide resources that support administration and implementation of technologies to ensure agility, functionality, inter-operability, and quality.

Objective 2: Create and nurture an environment that fosters innovation.

Strategies
• Provide substantial and tangible incentives to encourage and reward the discovery and application of new technologies and approaches throughout the University enterprise.
• Enhance MUSC’s impact and visibility by communicating discoveries and developing collaborations at the local, state, national, and global levels.
• Develop new and strengthen existing centers of expertise dedicated to the application and translation of novel technologies and approaches.
• Encourage innovative teaching methods that adapt to emerging learning patterns and are collaborative, interactive, and interdisciplinary.

Objective 3: Accelerate and capitalize the transfer of new technologies and research advances.

Strategies
- Enhance infrastructure to support and streamline administrative, business, legal, and regulatory aspects of commercialization and entrepreneurship.
- Provide mentoring resources for advice and assistance in all aspects and phases of technology transfer.
- Engage industry and technology communities to identify opportunities for advice, business development, and financial support.

**Objective 4:** Identify and sustain new revenue streams that adapt to changing biomedical economic environments.

**Strategies**
- Pursue new economic opportunities through partnerships with communities, foundations, and other public or private organizations.
- Provide responsive and rapidly adaptive pathways to implement entrepreneurial pursuits for the good of the patient, community, and University.
- Identify, communicate, implement, and continuously evaluate existing and novel technology platforms and approaches.
- Provide professional development and training in the use of new technologies.
- Develop core capabilities that offer advanced, comprehensive technologies and special services to the University and broad health sciences communities.
- Provide resources that support administration and implementation of technologies to ensure agility, functionality, inter-operability, and quality.

### III. ENTREPRENEURIALISM

**Goal:** Create and sustain a culture, with both pathways and infrastructure that will support University-wide entrepreneurialism. Cultivate opportunities to explore new portals and partnerships, public and private, while promoting an ethical framework for pursuits.

**Objective 1:** Stimulate the spirit of entrepreneurialism and incorporate a system of incentives.

**Strategies**
- Promote cultural change across the University (UMA, MUHA, MUSC).
- Create policies and standards to encourage the ethical conduct of entrepreneurialism.
- Strengthen incentives for entrepreneurialism by making it a criterion for recognition, promotion, and tenure.
- Enhance revenue generation through a combination of improved efficiencies, new funding streams, and philanthropy.
- Encourage collaborations across disciplines both within and outside the University to foster entrepreneurship.

**Objective 2:** Develop Center for Medical Innovation and Entrepreneurialism

**Strategies**
- Provide and coordinate resources and infrastructure to promote entrepreneurial endeavors within the University.
- Recruit an experienced leader to guide the center’s initiatives, including the upfront development of a business plan.
- Provide educational and mentorship opportunities in entrepreneurialism.
- Leverage the expertise of our peer institutions and partner with industry.

### IV. GLOBALIZATION

**Goal:** To improve the health of people in South Carolina and globally through the development of collaborative global partnerships in education, clinical care and research.
**Objective 1:** Build an infrastructure that supports collaboration, coordination, and a commitment to sustainable globalization activities highlighting the unique strengths of MUSC.

**Strategies**

a. Elevate the existing Center for Global Health in the College of Medicine to a University Center for Global Health in order to facilitate and coordinate interprofessional/interdisciplinary global initiatives on campus. This will require the engagement of an experienced leader in global health to develop a sustainable business plan. The following are specific goals and activities to be achieved by the Center.

  i. Coordinate the global health resources at MUSC and disseminate MUSC global health outcomes.
     - Conduct and maintain an inventory of global activities in the university.
     - Connect relevant resources to achieve synergy and reduce redundancy.
     - Identify and understand the needs of global and local partners.
     - Identify successful models in existence internally and externally and explore the use of these models.
     - Collect and disseminate outcomes related to global health activities across the enterprise.
     - Coordinate university response to global health crises.
     - Serve as a resource for training and project management.
  
  ii. Develop creative, sustainable funding sources for global health initiatives.
     - Develop collaborations with private, nonprofit and philanthropic business partners for economic development for global health initiatives.
     - Support MUSC faculty, staff and students in the production of proposals for research, programs, and philanthropic funding.

b. Advance the culture of the university to embrace global initiatives.

  - Incentivize MUSC academic and clinical entities to encourage recruitment and retention of faculty, staff and trainees with global interests.
  - Incentivize and reward faculty, staff and trainees for participation in global initiatives.
  - Incorporate global activities into performance evaluations when appropriate.
  - Broaden promotion and tenure criteria to include global activities as optional criteria.
  - Increase global perspectives in health language and culture within the university.

**Objective 2:** Position MUSC to be recognized as a leader in global health initiatives.

**Strategies**

- Integrate global health education into MUSC curriculum.
- Support the outreach of education, specialized clinical services, and research globally.
- Promote education about global health at local and global levels.
- Develop collaborative agreements with other top global health centers.
- Promote research on health inequalities, disparities and social determents in health.
- Promote evidence-based interventions that reach underserved populations.
- Build collaborations with other institutions and communities across South Carolina.

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

The current MUSC Strategic plan extends from 2010 through 2015. This plan emphasizes areas necessary for continued growth while remaining consistent with the university’s mission to educate students and to preserve and optimize human life in South Carolina and beyond.

In 2012 the university implemented a standardized approach to help improve its ability to evaluate and improve its strategic planning process. Specifically, it adopted a plan to better synthesize its strategic initiatives (globalization, entrepreneurialism, innovation, and interprofessionalism), its
mission, and its accountability management platform (MUSC Excellence), so that each college and central administrative unit can characterize its goals in relation to these initiatives. Each central administrative unit (including the Provost’s office and Deans’ Offices for each college) now maps its goals in the integration grid shown below. The unit characterizes its goals in terms of how each goal relates to MUSC Excellence Pillars (reflected by columns) and how each goal relates either to the mission or to one of the four strategic initiatives (reflected by rows). Each unit is required to have at least one goal for each MUSC Excellence Pillar; the unit must determine for itself how it plans to optimally contribute to advancing the university’s mission and/or strategic initiatives. Through use of the grid, each unit can better reflect on how its goals relate to the overall strategic plan for the university. In the example below (for the SC College of Pharmacy at MUSC), there are six goals listed. Three goals contribute to advancing the university’s mission (goals 1, 2, and 5) and three goals contribute to advancing the university’s strategic initiatives (goals 3, 4 and 6).

<table>
<thead>
<tr>
<th>Administrative Unit: College of Pharmacy Dean’s Office</th>
<th>Excellence Pillars</th>
</tr>
</thead>
<tbody>
<tr>
<td>People</td>
<td>Service</td>
</tr>
<tr>
<td>Create an environment that is conducive to high morale and productivity, reinforcing that MUSC is the right place to be</td>
<td>Provide high quality services to students, patients, families, each other and our community with compassion, respect, dignity and pride</td>
</tr>
<tr>
<td>MUSC Mission</td>
<td>1: Attract and retain high quality employees</td>
</tr>
</tbody>
</table>

By examining these grids from all units in toto, the Office of the President can conduct a gap analysis to determine which strategic initiatives are receiving focused attention by constituent units. In the figure below (hypothetical data shown), each colored block represents a constituent unit that employs the integration grid above to characterize its annual goals (e.g., violet=Provost’s Office; red=College of Dental Medicine). Through this mapping process, it becomes clear the degree to which each unit at the university has goals that advance the university’s mission and strategic initiatives.
For example, in the figure to the right, the university’s mission is addressed in 20 different goals by constituent units; the globalization initiative is addressed in 11 different goals. Innovation is addressed in five goals. As a result, the President’s Office can review each year whether more or fewer resources or emphasis should be placed on each initiative.

Measurable outcomes and milestones have been defined for the four strategic initiatives, and progress will be reported quarterly by this committee to the administration of MUSC. Evaluation of the strategic planning process will occur by measuring the degree of success in achieving our objectives. Furthermore, our structure for strategic planning at MUSC is three-tiered. Each college and support unit has a strategic plan that incorporates the directions of the overall University plan, and then each area has annual operational plans that are developed from there. Additionally, we have established Subject Matter Experts, who were part of the more than 80 people integrally involved in the Strategic Plan development, and they serve to assist any college or unit in plan implementation. This ensures that all metrics are aligned with the University's initiatives, and it allows central administration to know when any variance takes place, and what appropriate actions are needed.

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

**GOALS 2012-13**

**Education**
- Seek approval of a Masters in Science in Health Informatics
- Begin conversion of nurse anesthesia program to doctoral level
- Successfully renew medical school accreditation
- Successfully complete the Interim Review of university accreditation
- Recruit a new dean for the College of Graduate Studies
- Launch the Certificate in Biomedical Sciences
- Transition Bioengineering PhD from dual to joint degree with Clemson
- Begin renovations of nursing school
- Explore expansion of clinical education sites
Research
- Recruit a new chair for Biochemistry
- Recruit a leader for Genetics
- Recruit a leader for new Public Health Department
- Recruit a new leader for Biomedical Informatics
- Complete renovation of Microbiology/Immunology laboratories
- Launch Applied Neurosciences Institute
- Launch Center for Innovation and Entrepreneurship
- Continue recruitment of SmartState chairs

Clinical Service
- Recruit new hospital CEO
- Open and fully occupy new Mount Pleasant outpatient facility
- Improve hospital operating margin
- Prepare to add additional capacity in Ashley River Tower
- Recruit chairs for Orthopedics and Family Medicine
- Continue to build affiliations with other health care providers
- Continue implementation of new electronic health record system

General University
- Implement new institutional effectiveness program
- Implement new Responsibility Centered Management funds flow
- Refine conflict of interest policies
- Continue to grow private fund-raising, including for new hospital
- Renovate space in Clinical Sciences and Walton Research buildings
- Recruit legal counsel for hospital and associate legal counsel for University
- Explore options for new data center
- Implement diversity training and review diversity plans

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

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

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

Communication is achieved through periodically updated information made available in the GAPP documents, the Strategic Planning Website, Town Meetings, University publications, unit and departmental newsletters, departmental/unit presentations, and formal reports, both internally and externally, that include audits, news releases, and study results.
2.6 How does MUSC measure progress on its action plans?

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

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

The plan is available on the home page of the University Website (www.musc.edu) under Strategic Plan (http://academicdepartments.musc.edu/strategicplanning) as well as on the President’s home page and the Report to Board of Trustees (http://academicdepartments.musc.edu/president/reports.html). It is also discussed in the annual Financial Report and referenced on several MUSC web pages.

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

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

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

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

The University enhances traditional course delivery methods with state-of-the art learning technologies, including an electronic learning management system (MoodleRooms), distance education technologies, an online system for capturing lecture content (Tegrity), audience response systems, plagiarism detection software (Turnitin), and online administration of exams. The MOX system allows students to access course materials on their mobile devices. The University requires course and faculty evaluations using an online format, therein providing more rapid and specific information on teaching effectiveness. Online surveys supplemented by focus group meetings at the university-wide level provide broad-based input on the effectiveness of student-support services. Alumni surveys incorporate the view of working graduates. Regular meetings between the Student
Government Association officers and the administration provide real-time feedback and planning. A ten-year project to foster interprofessional collaboration (now in its fifth year) allows more faculty and student interaction across colleges, thereby meeting the expressed need of the students and the health care system for more effective team approaches to health care. Surveys and other forms of feedback from students and faculty document the project’s success. Applications for admission have increased annually as an indication of our success and the continued interest of prospective students in our educational programs. In 2012, over 5,844 applications were received for the 1,110 positions available.

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

Students serve on curriculum committees within their respective colleges, and in combination with the data received from multiple evaluation processes, have the ability to influence the design of educational experiences. Administration, faculty, and staff review results from focus groups and student surveys, and improvement processes are identified and incorporated into annual goals and objectives. The interprofessional project, “Creating Collaborative Care,” was designed based on input from faculty, students, and staff, and continues to have broad impact on the organization in both the formal curricula and co-curricular activities. This initiative led to collaboration between students and administration to continue the Interprofessional Leadership Society for students. In 2012, 26 students completed the required number of interprofessional activities to receive designation as a fellow on their transcript. Understanding how students learn best and approach the learning experience is vitally important, so student feedback continues to be incorporated into the educational technology upgrade plan. In response to student feedback, state-of-the-art venues in the new Drug Discovery and Bioengineering buildings are used as classrooms and provide secure online testing capabilities. New relaxation space is under construction in the Education Center and Library building.

Some colleges use exit interviews to obtain feedback from graduates. The College of Pharmacy uses a national survey and the College of Medicine uses the Association of American Medical College’s (AAMC) annual survey of graduates for objective feedback and comparison with other schools across the nation. Units within Education and Student Life (ESL) also use the AAMC data as a national benchmark against which to assess the quality of services provided. In 2012, ESL surveyed Deans, Associate Deans and other key stakeholders about their satisfaction with services and the value placed on core services. Online end-of-course surveys (containing core items used by all colleges) and college-specific focus groups also permit timely responses to issues and questions that may arise within an academic year. Each academic program, student support unit, and administrative unit identifies and assesses outcomes annually and compiles the results in its institutional effectiveness report. Assessment results are analyzed and changes are made based on the analysis in a process of continuous quality improvement.

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

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

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

Building positive relationships with students begins in the pre-enrollment period. The University provides excellent information and services to prospective students through its recruitment programs, admissions’ offices (one in each college), and Websites. New student orientation ensures students recognize and use the support structures in place as they transition to become students in a health professions institution. By regularly asking students their opinions and giving evidence of the influence of their opinions, students see their voices are heard and their feedback is being used for positive change. The open-door policy of faculty and administrators allows positive interactions. Additionally, the nature of professional education results in small faculty/student ratios and close mentoring of students in their development as professionals, encouraging positive relationships. The Student Government Association has a strong voice on campus, is well respected by the administration, and works collaboratively with the administration through regular and open communication. The division of Education and Student Life (ESL) provides essential support services to students to promote their academic success. Included is the Center for Academic Excellence that provides group tutors, individual sessions on test taking and study skills, and board review programs for multiple disciplines. The health and wellness units focus on wellness, prevention, and treatment through its Student Health Services, Counseling and Psychological Services, and Wellness Center. Online tools have been developed that enhance efficiency and give students access to information on financial aid, wellness, counseling needs, and calendars of events using interactive technologies. In 2012, an expanded series of educational sessions about financial literacy was well received by students and college administrators. To promote an inclusive learning environment, diversity training is provided to all students and selected faculty and staff with positive outcomes demonstrated on surveys. Educational technology enhancements that allow lecture content to be captured and viewed later by students has been well received and students have indicated that it has enhanced learning. In 2012, 96% of student respondents reported satisfaction with ESL services. Results of the Student Satisfaction Survey are distributed to the colleges’ Deans, allowing them to compare their students’ responses with those from the overall student body. Each of the six colleges has student services and academic support staff as well to assist students in achieving success. The University has a very low attrition rate. The Associate Provost for Education and Student Life chairs several committees to ensure an effective interface among the colleges and between the academy and Student Life. Furthermore, Student Life personnel are focused on optimizing students’ learning outcomes and view themselves as teachers through the co-curricular activities offered.

3.6 How does MUSC’s student and stakeholder complaint management process ensure that complaints are resolved promptly and effectively?

MUSC has a series of procedures in place to ensure student and stakeholder complaints are promptly and effectively resolved. The policies are well publicized in the University Bulletin, Student Handbook, and in student handbook/manuals published by the six colleges and programs within the colleges. In general, student complaints fall within three areas: academic performance; ethics and
misconduct; and student life. The exact nature of the procedure and the unit within the university responsible for addressing the complaint is dependent upon the nature of the complaint.

Student complaints related to academic matters are handled through policies within the individual colleges with each Dean serving as the penultimate decision-maker and ultimate appeal resting with the Vice-President for Academic Affairs and Provost. Student complaints about alleged misconduct of other students are addressed through a university-wide honor code and applied by honor councils within each college. The honor council maintains a website with summary information regarding the status of written complaints under the honor code which was updated in 2012 with input from students and approval by the Associate Deans for Education.

In the realm of professionalism, ethics and misconduct, we have several policies including: English fluency, intellectual property research code of conduct, the computer use policy, the sexual harassment policy for students and trainees, and the University honor code. We also have guidelines for students’ use of electronic communications, especially social networking sites, and a website informing students of copyright laws, associated sanctions, and legal methods for peer to peer sharing (especially music), in compliance with the HEOA P2P requirements. We encourage students to be good stewards of our environment through an environmental sustainability initiative. Again, the administrative office responsible for administering each policy is dependent upon the nature of the policy. For example, complaints related to potential sexual harassment are managed by the Office of Gender Equity per written policy. Complaints related to potential discrimination or adults with disabilities are handled through the Equal Employment Opportunity/Affirmative Action (EEO/AA) Compliance office.

In the student life arena, a series of policies inform and protect students including the severe weather plan, student policy for alcohol and other drug abuse prevention and intervention, the MUSC student policy for alcohol and beverage serving, and the student arrest policy. In 2012, we launched a Behavioral Intervention Team to help ensure a consistent, and effective university-wide method of responding to students who exhibit problematic behavior that may represent a threat to the student and/or others. The Associate Provost for Education and Student Life has responsibility for reviewing and applying these policies.

In addition, each college has the equivalent of an Associate Dean for student affairs whose role is to foster open communication with students, and receive student complaints and identify solutions. Each dean’s office maintains a log of written student complaints and their resolutions. The Associate Deans for student affairs meet quarterly with the Associate Provost for Education and Student Life to foster collaboration across colleges and promote uniform methodologies for addressing student concerns. Lastly, MUSC prides itself on having an open door policy across the institution and at every level encourages students to come forward with their concerns.

Section III – Category 4 – Measurement, Analysis, and Knowledge Management

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

In large part, measures used to evaluate the effectiveness of the academic programs are those that have been cited in “best practices” documents in the higher education literature, those created by the legislature and administered by the SC Commission on Higher Education, and those established by the discipline-specific professional accrediting body. In addition, MUSC created the Office of Institutional Effectiveness (OIE) to monitor the annual progress of all academic programs, ensure that those programs are meeting the standards of our accrediting body (Southern Association of Colleges
and Schools; SACS), assist in the process of Continuous Quality Improvement (CQI) by promoting the establishment of learning objectives with measurable outcomes for each program, and assist in developing resolutions for “closing the loop” when those learning objectives are not being met.

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

The university’s course and instructor evaluation program is administered online using E*Value, a commercial software package. This process is overseen by the Assistant Provost for Education, who coordinates with Deans and other administrators to ensure timely reporting and analyses of all assessment results.

Regarding progress in attaining strategic objectives and action plans, MUSC relies on objective data to achieve its planning goals and to assess their attainment. Traditionally, many central administration units have worked in conjunction with the OIPSM to gather and report data relevant to decision-making. The OIPSM has assisted with systematic evaluation of educational programs, faculty educational support services, administrative processes, and financial resources in order to identify the strengths and weaknesses of the institution. The office has acted as a repository for information that has been used to support planning, policy formulation, and strategic decision-making. This includes, but is not limited to, national database comparisons such as Integrated Postsecondary Education Data System and discipline-specific peer information from national organizations such as the Association of American Medical Colleges. However, many of these responsibilities were transitioned into the Office of Institutional Effectiveness (OIE) as of March 2012. And, one of the major goals of the OIE is to provide information that is valuable for institutional strategic planning. In addition, MUSC has established a relationship with eight peers for exchanging information. Specialty area information such as linking research awards with occupied research space can also be assessed.

4.2 How does MUSC select, collect, align, and integrate data/information for analysis to provide effective support for decision making and innovation throughout the organization?

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

4.3 How does MUSC keep its measures current with educational service needs and directions?

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

All results are reported to the appropriate Associate Dean in each college who, in turn, provides the data and information to the college’s curriculum committee. Results are also reported in state and national higher education reports.

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

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

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

These institutions will provide data and information such as student body size, number of full- and part-time faculty, total employees, and total annual operating budget. With such information, MUSC can compare itself to the group and create a subset of aspirational peer institutions, which it might choose to emulate.

4.5 How does MUSC make needed data and information available? How does MUSC make them accessible to its workforce, students, and stakeholders?

Data and information are made available through the university’s Website, the weekly campus newspaper, email, and on-campus posters (as appropriate). The university’s Website houses a large amount of information that is readily accessible to all. In addition to displaying the entire University Bulletin, the university’s Website serves as a resource to students for information from the Office of Enrollment Management covering many areas including annual number of degrees awarded, Office of Student Financial Aid, all academic programs, and the Office of Student Programs detailing available student activities and services. The Office of Public Relations creates a daily broadcast email containing timely announcements of events and services. Human Resources Management posts its policies and job listings, and provides access to one’s payroll information (password protected) among other offerings. The Catalyst, the weekly free campus newspaper, is available as a paper document and also online along with a searchable archive. Letters from the University President discussing topics of current interest to the workforce and students are posted online and/or sent by mass email. Most information on the university’s Website is available to the public; a few areas are password-protected. Of course, access to email also serves as a vital daily communication link for the workforce and students.

The University has a campus-wide alert system to be used in the event of dangerous situations that would impact the MUSC campus. To provide the MUSC Community with relevant, timely information regarding campus-related emergencies, MUSC University Risk Management and the MUSC Marketing Departments offer students, faculty, and staff the opportunity to receive text message alerts on their mobile devices. Desktop alerts to MUSC networked computers only and email alerts would also be disseminated.
4.6 How does MUSC ensure data integrity, timeliness, accuracy, security and availability for decision making?

The Office of Integrated Planning and Space Management (OIPSM) has primarily been responsible for the overall integrity of institutional data used for both internal and external reporting. Reorganized in late 2007 this Office has increased both the accuracy and timeliness of data that flow from a wide array of internal and external sources. Of particular importance has been establishing consistency in information reported as well as establishing and observing unified reporting periods. The directors of a number of administrative units, among them the Office of Enrollment Management and the Office of Student Financial Aid, are responsible for providing timely and accurate data to the OIPSM for annual reporting to state and federal agencies. Similarly, each college, through the appropriate Associate Dean, is responsible for reporting a variety of academic measures on students’ performance to University administration for both internal and external reporting. The OIPSM has also been responsible for the completion of approximately 35 national surveys each year. As of March 2012, the Office of Institutional Effectiveness (OIE) has accepted the majority of these responsibilities. The OIE has three major goals: (1) To standardized a continuous quality improvement process that assists programs in meeting standards of effectiveness identified by the university and by their own accrediting organizations, (2) To maintain the university in excellent standing with its accrediting organizations, and (3) To provide information valuable for institutional strategic planning.

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

4.7 How does MUSC translate organizational performance review findings into priorities for continuous improvement?

The MUSC planning model as utilized by senior leadership, the support the model receives from the community, and the institutional commitment to its mission result in continuous improvement. The President utilizes an integrated planning model in which the University sets overarching priorities through the Strategic Plan to the colleges, the colleges determine specific goals relative to those priorities, and then the colleges report annually to the President and Provost on achievement of college-level and University goals. The Budget and Provost’s offices jointly oversee this process and provide feedback to the departments. The accomplishment of annual college goals is reviewed as part of the next year’s budget cycle. The University leadership then has the ability to realign the Strategic Plan’s goals based on college initiatives. To assist the President in managing the priorities and goals, guidance from monthly meetings of the President’s Council as well as the six annual meetings of the Board of Trustees is available. The University community has fully accepted this campus-wide process. Finally, the President is evaluated each year by the Board of Trustees and by the South Carolina Budget and Control Board on achievement and progress made relative to the institution’s Strategic Plan.

4.8 How does MUSC collect, transfer, and maintain organizational and employee knowledge (knowledge assets)? How does MUSC identify and share best practices?

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

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

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

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

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

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

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

### Section III – Category 5 – Workforce Focus

**5.1 How does MUSC organize and manage work to enable its workforce to develop and utilize their full potential, aligned with the organization’s objectives, strategies, and action plans and promote cooperation, initiative, empowerment, innovation, and its organizational culture?**

The University categorizes its employees into five divisions to assist in accomplishing its missions: faculty, unclassified administrative, classified, research grant, and temporary. Employees in each of these categories fill a unique purpose in meeting the organizational needs of the University. Faculty provide teaching, research and/or clinical services to the University; and many also serve in key administrative roles. Unclassified administrators provide higher-level administrative and professional services. Classified positions fulfill a huge array of functions from housekeeping, to maintenance, to administrative duties, to technical support of scientific research and clinical operations. Research grant positions are paid from federal and private grants and contracts, and these positions are specifically designed to assist researchers in fulfilling the experimental processes inherent in research activities. Temporary positions fulfill short- or longer-term needs as required.

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

Where appropriate, career ladders have been established to assist employees in developing the job skills, knowledge, and abilities necessary for advancement. For non-faculty positions, and in those areas without career ladders, supervisors meet routinely with employees and are encouraged to identify specific training needs and develop training plans to enhance their skills and assist them in career advancement.

State classification and compensation policies govern many positions at the University; however, the University exercises all available flexibility within these rules to provide pay increases and incentives for good performance.

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

MUSC executive leadership has approved a campus-wide pay for performance program that provides a clear link between employee performance and pay increases. Performance evaluations in many areas have clear linkages to MUSC Excellence initiatives, objectives and Pillar Goals in the key areas of People, Service, Quality, Finance, and Growth. Organizational priorities and objectives are aligned with individual departmental goals. Many employees also have specific action plans related to these goals.

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

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

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

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

Through the annual training needs assessment, required core training and ongoing Human Resources training, knowledge and skills are enhanced across campus. Through the MUSC Excellence initiative, communication boards and Websites highlight and recognize best practices across campus. Reward and recognition programs, excellent customer satisfaction scores and many other benchmark goals are routinely communicated and shared.

5.3 How does MUSC’s workforce performance management system, including feedback to and from individual members of the workforce, support high performance work and contribute to
the achievement of its action plans?

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

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

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

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

An electronic performance appraisal tool, SuccessFactors, automates the review process providing reminders to supervisors of the need to establish planning stage documents, review and update position descriptions as needed and formally rate employee performance annually. As part of the final review process, employees have the option in SuccessFactors of providing supervisors with a self-evaluation of their performance. The self-evaluation provides additional opportunities for supervisors and employees to discuss employee performance.

The pay for performance program is based on data from the performance management system. Feedback and scores from the evaluation are used to support high performance work through higher pay increases. Action plans are included as a part of employee evaluations and ongoing feedback to support departmental goals and areas needing attention.

5.4 How does MUSC accomplish effective succession planning? How does MUSC manage effective career progression for your entire workforce, throughout the organization?

As part of the MUSC Excellence initiative, the Leadership Development Institute Team holds quarterly Leadership Development training sessions. The goal is to develop leaders’ skills that enable the achievement of organizational goals. And, align leader competencies with organizational values and focus, improve individual leadership performance and rekindle passion and commitment in all employees.

Modeled on the Emory University Woodruff Leadership Academy, the MUSC Office of the Provost and University Board instituted the Trustees Leadership Academy during fiscal year 2006-07, which offers comprehensive, formalized, leadership training each year for ten to fifteen carefully selected faculty members. This mentorship program requires a report on a college- and/or university-level issue; hence, this program is mutually beneficial to both the individual and the University, with knowledge gained while improving the University's operations. Due to budgetary constraints, the program is presently on hiatus.
5.5 How does MUSC’s development and learning system for leaders address the following:

- **Development of personal leadership attributes.** The training needs assessment conducted annually assists in determining courses that are needed or requested to enhance the development of skills and personal attributes such as customer service courses.
- **Development of organizational knowledge.** Key areas of the organization offer training courses to customers across campus in order to develop and enhance the knowledge of various services such as human resources, finance and grants accounting.
- **Ethical practices.** Ethical practices are addressed in the MUSC learning system through mandatory training which includes topics such as the Code of Conduct. This Code of Conduct establishes guidelines for professional conduct for those acting on behalf of MUSC. Participants include executive officers, faculty, staff, other individuals employed by MUSC, and volunteers using MUSC resources or facilities. This Code of Conduct outlines MUSC’s expectations of proper conduct and what professional conduct MUSC values. The mandatory training also provides resources to report violations of the code of conduct. Compliance and Conflict of Interest issues are also addressed in MUSC training.
- **Its core competencies, strategic challenges, and accomplishment of action plans.** Core competencies are expressed in many areas in the performance appraisal behavioral standards section and may include key expectations such as a commitment to customer service expectations; outstanding attitude; accountability for actions; pride in appearance; information sharing and collaboration and teamwork. Each employee is required to confirm during the application process that he or she acknowledges organizational core competencies and will conform to the behavioral standards of the institution.

5.6 How does MUSC assess its workforce capability and capacity needs, including skills, competencies, and staffing levels?

Each department assesses its staffing needs and staffing levels annually through the budget review process. Many areas evaluate provision of services to determine gaps in workforce skills and capabilities. Feedback from customer satisfaction surveys and employee satisfaction surveys highlight key staffing and training needs. These are taken into consideration as leaders develop annual budgets.

5.7 How does MUSC recruit, hire, and retain new employees?

MUSC uses a variety of recruitment tools to attract new employees including the following: online posting of job opportunities, placement of advertisements in newspapers, journals and higher education Websites, targeting minority focused sites and journals for underrepresented positions and visiting college campuses. Departments provide input to Human Resources recruiters on specialized advertisements and Websites as needed for difficult to fill positions.

The hiring process is outlined in the Human Resources policy manual. It includes specific information on the selection process, the screening of applicants, and outlines the pre-employment requirements such as background checks, pre-employment physical, drug screening, and compliance related checks. Hiring salaries are based on market data and internal comparisons. The interview process includes many MUSC Excellence strategies such as behavioral-based interview questions and peer interviewing.

Retention is an ongoing process that starts when an employee is hired and continues through techniques such as 30- and 90-day feedback sessions with new employees, performance appraisal feedback and employee satisfaction feedback. Market studies are also conducted routinely to ensure that MUSC is compensating employees at appropriate salary levels.
5.8 How do MUSC’s workforce education, training, and development address key organizational needs? How does MUSC encourage the job use of new knowledge and skills?

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

Faculty have the opportunity to provide feedback annually on the support received for faculty development through a Department Chair Annual Evaluation administered online by the Center for Academic Research and Computing. In addition, full-time and part-time faculty are required to develop a Faculty Appointment Contract which states specific salary remuneration based on productivity standards.

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

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

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

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

Distinguished Faculty Service Awards Faculty members are also supported in extensive travel to meetings and seminars of professional organizations and other venues where continuing education and professional development are included. A portion of these activities is required for continuing licensure or certification by clinical faculty. For staff, a variety of avenues is available for staff development as well and these are detailed in section 5.1, above.

5.9 How does MUSC evaluate the effectiveness of its workforce and leader training and development systems?

The performance management system and other feedback mechanisms assist the organization in evaluating the effectiveness of training programs. Each year a training-needs assessment is conducted to provide information for the development of training programs. Programs are offered through the Department of Human Resources Management, either by in-house trainers or trainers selected for their expertise in a particular topic. Employees complete an evaluation form at the completion of each training session. These evaluation forms are used to make the training more useful and effective.

Within each department, managers are required to complete a performance evaluation on each
employee annually. This evaluation tool is designed to provide a mechanism for managers to identify the on-going development needs of their staff.

5.10 What formal and/or informal assessment methods and measures does MUSC use to obtain information on workforce well-being satisfaction, and motivation?

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

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

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

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

Faculty has a variety of avenues to express their concerns. Faculty meetings at the university, college and department level, faculty newsletters from the Provost and other academic units and services, the ability to have pressing questions answered through MUSC’s “Rumor Mill,” as well as the more formal grievance procedures outlined in the Faculty Handbook, are all available to faculty members.

5.11 How does MUSC use workforce satisfaction assessment findings to identify and determine priorities for improvement?

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

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

5.12 How does MUSC maintain a safe, secure, and healthy work environment? (Include workplace preparedness for emergencies and disasters.)
The Department of Risk Management is assigned to and engaged in occupational safety, radiation safety, and insurance and risk assessment programs. This department is responsible for professional liability concerns as well. The staff assigned to occupational and radiation safety programs routinely audits campus activities to ensure compliance with state and federal regulations to ensure that University employees are working in a safe, secure, and healthy environment. This staff identifies potential hazards and makes recommendations to eliminate such hazards. This department also coordinates routine safety training and tracks the re-training needs of faculty and staff working in or around hazards materials.

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

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

The Department of Risk Management coordinates the severe weather plans for the campus and works with department representatives annually to update plans. (Emergency information is available at www.musc.edu/emergency.shtml; severe weather procedures are available at http://academicdepartments.musc.edu/vpfa/operations/Risk%20Management/emergency/weather/.) Risk Management also coordinates business continuity planning to ensure the campus is capable of working when an event that may disrupt normal business activities occurs.

Section III – Category 6 – Process Management

6.1 How does MUSC determine, and what are the organization’s core competencies, and how do they relate to MUSC’s mission, competitive environment, and action plans?

The organization’s “core competencies” or areas of strategically important capabilities are related to its designation as a free-standing academic health center. It offers entry level and advanced practice programs in the health professions and, in some cases, the only programs of their kind in South Carolina. MUSC is engaged in clinical practice and research in the health sciences aimed at improving the health of the citizens of SC and beyond. These competencies are reflected in the mission and strategic plan of the University. Progress on meeting the goals related to these core areas is identified, and outcomes measured are monitored as part of the MUSC Excellence program and the annual budget review for administrative and student support units. Individual faculty and staff identify goals related to the overall goals of the University and are accountable for their performance as part of their annual review and contract renewal process. These competencies and related goals are developed by the senior leadership in concert with the various levels of leaders at all levels of the University. These competencies guide the nature of the University's external collaborations such as those with Clemson University and USC.

6.2 What are MUSC’s key work processes?

The key work processes that produce student and stakeholder value are:

• Teaching and creating a positive learning environment.
• Curriculum and program design that leads to certification/licensure and meets accreditation requirements.
• Scholarly productivity and creating an environment that promotes scholarship.
• Administrative systems that are efficient and effective.
• Fiscal accountability and allocation of resources to meet strategic goals.
• Adherence to agency and government requirements/regulations.
• Creation of new knowledge through scholarship and research.

6.3 How does MUSC incorporate input from students, faculty, staff, stakeholders, suppliers, and partners for determining key work process requirements?

The University engages in continual evaluation of processes to improve service and delivery. The University Faculty Senate serves as a liaison between the faculty and the administration and addresses policies and issues related to the key work processes, particularly as related to creating a positive environment for their work as educators and scholars. The Faculty Senate also addresses issues of resources and administrative systems. The President and Provost participate in Town Hall meetings throughout the year to keep a pulse on faculty issues. The Student Government Association plays the same role for students at the university level. College-level faculty and student governance models exist as well, focused on issues related to their college or departments. The Associate Provost for Education and Student Life meets regularly with the Student Government Association officers and represents their views at higher-level administrative meetings. The Associate Provost conducts an annual student satisfaction survey and incorporates student input into the goals and activities of that unit. Deans and department chairs receive feedback from faculty via an anonymous survey distributed annually. The Associate Provost for Research oversees the research support infrastructure and incorporates the needs of researchers into the goals and activities of those units. Deans of each college incorporate listening methods such as rounding, town meetings, and communication blogs to maintain input. The Deans meet monthly to foster communication across colleges. An annual employee satisfaction survey is administered for student support and administrative services, and employee satisfaction outcomes/goals are identified by the units.

Changes occur when these improvement processes identify a problem or when there is a change in federal or state requirements, internal directives, and/or program requirements. Once a demand, requirement, or weakness is identified, a collaborative approach is used to ensure the issue is addressed using the latest technology and incorporating suggestions from all affected constituents in the design of a new process. If the project is large enough in scope or encompasses many areas, a business plan may be created to develop the project fully. For example, a process is in place whereby information technology proposals are reviewed to ensure compatibility with existing systems and purchase of the most effective system to meet University needs. Additionally, the University Information Management Council is currently being restructured to provide broad-based oversight to enterprise-wide decisions related to the use of new technologies to meet requirements for customers according to the mission of the University.

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

The University provides administrative and support services through three organizational divisions: Office of Academic Affairs, Office of Finance and Administration, and Office of Information Services. Each of these support programs establishes goals/outcomes and uses one or more assessment tools appropriate to its diverse service and service objectives. These include both
quantitative and qualitative measures, and the results are used to guide changes designed to improve outcomes. The results of the changes are assessed in the subsequent years in a process of “closing the loop” and ensuring continuous quality improvement.

Three professional colleges have educational programs with unique accreditation standards (Dental Medicine, Medicine, and Pharmacy). Two colleges (Health Professions and Nursing) have multiple programs, each with its own specialty accreditation. Because of the nature of these disciplines, the colleges have primary responsibility for educational program assessments. Although decentralization of many operational issues, including the comprehensive assessment of educational outcomes, is typical of academic health centers, in March 2012 the new Office of Institutional Effectiveness (OIE) was established and each academic program submitted student learning outcomes to the OIE along with the results of assessments designed to measure the outcomes. Academic programs also provided evidence of changes made to improve its educational outcomes, demonstrating “closing the loop” in a process of continuous quality improvement.

The only college lacking a specialty accreditation is the College of Graduate Studies, which submits (to the Office of Institutional Effectiveness) learning outcomes, results of assessments, and changes made to improve outcomes; thereby documenting its continuous quality improvement process annually.

All of the Colleges have Curriculum Committees that consist of faculty and students. Every Curriculum Committee meets at least monthly. These committees have the responsibility of assessing the effectiveness of their programs and in coordination with their Deans can alter the curriculum when improvements are agreed upon. It is the Curriculum Committees that are cognizant of changes that affect the educational element of their specialties and incorporate changes, as appropriate. In addition, they review national standardized licensing and test results as well as internal examination results to assess the effectiveness of their educational programs.

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

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

MUSC measures Total Cost of Ownership as part of a required business plan for all proposed financial and administrative systems. The business plan normally requires five (5) years of investment and operational projections. IT governance for financial and administrative systems is vested in the Financial and Administrative Information Committee (FAIC). This committee has membership from Finance, Operations and Information Technology. The committee evaluates technology proposals based upon the proposed business plans, which include a Return on Investment calculation.

6.5 How does MUSC systematically evaluate and improve work processes?

Teaching effectiveness is evaluated by student and peer evaluations, and annual review by Department Chairs. The learning environment is evaluated periodically by faculty and annually by student surveys as well as reviews required by the multiple professional and institutional accreditation agencies as described below.

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

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

All new programs must be approved by senior academic administrators prior to being submitted to the MUSC Board of Trustees and the SC Commission on Higher Education. Generally, there is no review of changes to courses or the various curricula by central administration. Of course, substantive changes to programs and/or courses are reported to the other Deans, other senior administrators, and the Provost through the Deans Council monthly meetings. Each College or program within the college where applicable has a committee that assesses its respective programs and learning outcomes at least annually. The MUSC Excellence Initiative identifies key goals related to service, people, quality, finances and growth. Measurable outcomes are identified and data are collected to assess how well each unit and the academic division as a whole is meeting its goals. Goals for 2012 were identified and measurements collected. The MUSC Excellence goals include measures of the learning environment and educational outcomes. The MUSC Excellence Program also includes leader and staff training on key aspects of service and quality, and evaluations of leaders are tied to accomplishment of these broad goals as well as their individual goals. A Steering Committee and multiple task groups oversee the project. To supplement processes imbedded in each college and the university-wide MUSC Excellence Program, the new Office of Institutional Effectiveness (OIE) was established to assist academic programs, student support units, and administrative units in their continuous quality improvement (CQI) efforts. MUSC appreciates and embraces the value of adopting standardized procedures across the university. The Office of Institutional Effectiveness developed standardized templates to be used by the academic programs, student support units, and administrative units to record outcomes, assessment tools, results of assessments, and changes made based upon results. Each academic program, student support service unit, and administrative unit submitted evidence of the assessment process for the 2010-2011 academic year to document a full assessment cycle demonstrating how programs and units used assessment data to make improvements in their outcomes for 2011-2012. In addition, the university has invested in a commercial assessment program (TaskStream AMS) to assist with CQI efforts and documentation in the future.

6.6 What are MUSC’s key support processes, and how do you evaluate, improve and update these processes to achieve better performance?

MUSC is dedicated to providing outstanding academic support services for all students. Examples of these services include:
6.7 How does MUSC’s organization ensure that adequate budgetary and financial resources are available to support its operations? How does MUSC determine the resources needed to meet current budgetary and financial obligations, as well as new initiatives?

Each fiscal year, the Medical University of South Carolina is required to submit an operating and capital budget to the Board of Trustees for approval. Budget highlights are normally submitted to the Board of Trustees prior to the start of the fiscal year, unless otherwise authorized by the Board of Trustees. The budget is approved in aggregate for all expenses up to the approved amount. MUSC is required to maintain documentation of the budget process in sufficient detail to allow the tracking of expenses at the unit level.

MUSC’s budgeting system changed (effective July 2012) to a Responsibility Center Management (RCM) System. RCM Budgeting provides enhanced transparency in the budgeting process while striving to maintain simplicity. Organizational units under RCM are either (1) Academic Responsibility Centers (ARCs), which is comprised of the six colleges and an Auxiliary unit made up of the Wellness Center, Bookstore and Vending, or (2) Administrative & Support (A&S) units, which is currently comprised of forty-five (45) facility, financial or administrative units.

The following is an outline of the budgeting process for the Medical University of South Carolina. In the early part of each fiscal year, MUSC A&S budgets are developed and communicated to the campus. A&S budgeted expenditures are allocated to the ARCs based upon one of eight allocation methodologies. An advisory committee (Recharge Committee) has been created to evaluate and make recommendations regarding funding and operations of A&S units.

During the second quarter of the fiscal year, the MUSC Budget Officer prepares budget packages with a three-year history for each ARC. These budget packages are distributed to the ARCs in early January. Each ARC prepares a budget package and submits their operating budgets, capital requests, as well as proposed changes to tuition and fees. The Budget Office analyzes the budget packages and makes recommendations to Senior Administration. Each college and major departmental unit presents its budget proposal to the appropriate Vice President in March and April. In May, the compiled
budgets are presented to the Vice Presidents and the President. The completed budget is presented at the August Board of Trustees meeting for final approval. A budget to actual review is performed on a monthly basis and all significant variances are investigated and presented to the Vice Presidents for review.

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

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

One of the best measures of effective instruction for an academic health center is students’ performance on professional exams, and how well their research results stand up to external peer review. MUSC students perform admirably by both measures. The average pass rate was extremely high across the vast majority of board or licensure exams for 2011. Students in the College of Graduate Studies averaged nearly two peer-reviewed publications each in 2011.

Table 7.1-1 Program Licensure Examination Percentage Pass Rates

<table>
<thead>
<tr>
<th>College</th>
<th>Program</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Medicine</td>
<td>National Board Part I</td>
<td>98.6</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>National Board Part II</td>
<td>93</td>
<td>98</td>
<td>100</td>
</tr>
<tr>
<td>Health Professions</td>
<td>Cardiovascular Perfusion</td>
<td>95.4</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Communication Sciences and Disorders</td>
<td>100</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Anesthesia for Nurses</td>
<td>100</td>
<td>96</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Occupational Therapy</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Physical Therapy</td>
<td>94</td>
<td>100</td>
<td>98.3</td>
</tr>
<tr>
<td></td>
<td>Physician Assistant</td>
<td>100</td>
<td>94</td>
<td>93</td>
</tr>
<tr>
<td>Medicine</td>
<td>USMLE Step 1</td>
<td>92</td>
<td>86</td>
<td>91</td>
</tr>
<tr>
<td></td>
<td>USMLE Step 2 Clinical Knowledge</td>
<td>96</td>
<td>98</td>
<td>97</td>
</tr>
<tr>
<td></td>
<td>USMLE Step 2 Clinical Skills</td>
<td>98</td>
<td>96</td>
<td>97</td>
</tr>
<tr>
<td>Nursing</td>
<td>National Council Licensure</td>
<td>89</td>
<td>94</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Adult Nurse Practitioner</td>
<td>75*</td>
<td>N/A</td>
<td>90</td>
</tr>
<tr>
<td></td>
<td>Geriatric Nurse Practitioner (Track Closed)</td>
<td>----</td>
<td>----</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Neonatal Nurse Practitioner (Track Closed)</td>
<td>100*</td>
<td>100</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Pediatric Nurse Practitioner</td>
<td>100</td>
<td>88</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Psychiatric-Mental Health NP (Track Closed)</td>
<td>50</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Track</td>
<td>First Time Takers</td>
<td>2009</td>
<td>2010</td>
<td>2011</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>-------------------</td>
<td>------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>Nurse Midwifery (Track Closed)</td>
<td>100*</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Family Nurse Practitioner</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Pharmacy</td>
<td>NAPLEX</td>
<td>98</td>
<td>92</td>
<td>95.1%</td>
</tr>
</tbody>
</table>

* Five or fewer students taking the test. Nursing: The accrediting organization, ANCC, will only report on first time takers for the Adult Nurse Practitioner and the Psychiatric Mental Health NP. If three or less persons tested, the organization will not submit a report.

In addition, all educational programs are evaluated through the use of E*Value, an online system of evaluating courses and instructors. The E*Value system is managed by the Office of the Associate Provost for Education and Student Life, and the specific colleges. A set of core questions is required and each college may add additional questions to meet its needs. Results of the evaluations are distributed to the appropriate course director and instructor, and academic Deans in each college. An overall score of students’ evaluation of faculty is reviewed by administration and incorporated in the MUSC Excellence Program as an outcome measure.

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

The University monitors students’ satisfaction with student and academic support services annually, as determined by both institution-specific surveys and by national surveys. Although historically MUSC has scored at or above the mean for all schools in most areas related to student support services assessed on an annual survey administered to graduating students in the College of Medicine by the Association of American Medical Colleges, the 2012 results (shown in the table below) reveal a more mixed pattern. Specifically, MUSC scored above the mean for all schools in two areas, essentially at the mean in two areas and below the mean in two areas. Of particular concern are students’ perceptions of Student Health Insurance. The low level of satisfaction with student health insurance led us to benchmark it against the benefits offered by other schools and the comparison was favorable to MUSC. These findings led us to take steps to better educate students about the comparability of the MUSC plan. We will continue to monitor the AAMC indicators and make changes to improve performance on these outcomes.

Table 7.2-1 represents those who responded either Very Satisfied or Satisfied, and does not include those with no opinion, from Association of American Medical Colleges National Survey Results

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Health Insurance</td>
<td>40.9%</td>
<td>41.5%</td>
<td>50.7%</td>
<td>56.6%</td>
<td>32%</td>
<td>52%</td>
</tr>
<tr>
<td>Personal Counseling</td>
<td>72.0%</td>
<td>72.1%</td>
<td>76.7%</td>
<td>86.7%</td>
<td>88%</td>
<td>70%</td>
</tr>
<tr>
<td>Financial Aid</td>
<td>68.9%</td>
<td>74.2%</td>
<td>66.7%</td>
<td>71.5%</td>
<td>74%</td>
<td>75%</td>
</tr>
<tr>
<td>Student Health</td>
<td>79.0%</td>
<td>74.8%</td>
<td>73.9%</td>
<td>81.5%</td>
<td>67%</td>
<td>73%</td>
</tr>
<tr>
<td>Library</td>
<td>84.7%</td>
<td>89.1%</td>
<td>87.6%</td>
<td>82.6%</td>
<td>85%</td>
<td>86%</td>
</tr>
<tr>
<td>Student Mental Health</td>
<td>54.0%</td>
<td>51.0%</td>
<td>64.3%</td>
<td>91.5%</td>
<td>80%</td>
<td>70%</td>
</tr>
</tbody>
</table>
Academic and student support services are provided to MUSC students through the Division of Education and Student Life (ESL). ESL endeavors to achieve at least a 90% rate of agreement on the institutional indicators shown below (Figure 7.2-1). Results showed that ESL achieved this goal in 2012, as it has for the past five years.

**Figure 7.2-1. Rate of Agreement by Students**

*2012 Student Satisfaction Survey*

The basis of consistent success on these indicators is the performance of each of ESL’s constituent service units. A review of each service unit’s performance on their key indicators shows that Education and Student Life is doing extremely well meeting and exceeding students’ expectations for student support services. Further, ESL is demonstrating that its continuous quality improvement efforts are working. The key indicators of performance for each unit/service are the percentage of students who agree that (1) the service met my needs; (2) the staff are competent; and (3) staff are caring and helpful. For each indicator, the target value is ≥ 90% agreement rate. In the following figures, the target rate is delineated by a red line.

Because ESL assesses these indicators annually, we can track trends and evaluate whether changes made result in expected improvements (see Figure 7.2-2 on the following page). For example, in 2009, the Financial Aid Office had relatively low rates of students agreeing (80%) that the service met their needs (dotted black line in Figure 7.2-2). Changes to staffing were made to address this concern, and in 2010, rates of agreement improved to 92%. Importantly, these gains have been sustained for 2011 (92%) and 2012 (92%).

Another example of success is Student Health Services (solid black line in Figure 7.2-2). To address lower than target rates of agreement to “Student Health Services met my needs” in 2011 (88% of students agreed), we indexed student satisfaction ratings with staff members’ annual evaluations, and we provided skills training to Student Health Services staff to improve customer service. These changes were associated with improvements (a 5% point increase to a 93% agreement rate) by students in 2012.
Focusing only on 2012 data above, results showed that all units except one exceeded the 90% target rate of agreement (range=89% to 99%). Counseling and Psychological Services (CAPS) had the lowest rate of agreement to this question (89%), which has remained stable over time. Importantly, 100% of students who were mandated to receive CAPS services (typically due to behavioral issues such as substance abuse) agreed that CAPS met their needs.

While tracking trends is a key component to continuous quality improvement in ESL, for the purpose of easy interpretation, the results on the other two primary indicators (staff are competent, figure 7.2-3 and staff are caring and helpful, figure 7.2-4) are presented below for 2012 rates of agreement.

Figure 7.2-3. Percentage of students in 2012 reporting that staff in each unit are competent. All units met or exceeded 90% target rate of agreement.
Figure 7.2-4. Percentage of students in 2012 reporting that staff in each unit are caring and helpful. All units except Financial Aid met or exceeded the 90% target rate of agreement.

In addition to the service units shown in the prior figures, ESL also provides several other opportunities and programs to MUSC students. Similar to the unit targets, we expect to achieve ≥ 90% rates of satisfaction from students for these other programs and opportunities.

Figure 7.2-5 (below) shows that for all services/programs except one, at least 90% of students reported satisfaction. The single program that did not achieve the 90% satisfaction rate, Interprofessional Activities, is the institution’s Quality Enhancement Plan. This program is constantly evolving to be of greatest relevance to all MUSC students to enable them to practice and/or conduct biomedical research in an interprofessional environment.
Summary: In summary, ESL is successful in meeting students’ needs and is devoted to continuous quality improvement, which is informed by data collected on student’s satisfaction. The academic and student support services provided by ESL meet students’ needs and are provided by competent, caring, and helpful staff. As a result, a very high percentage of MUSC students report that they made the right choice in selecting MUSC for their training and that ESL has contributed to their academic success.

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

Key Financial Performance Ratios:

- **Viability Ratio.** The viability ratio is expendable net assets divided by long-term debt (total project related debt). Based upon the FY2011 Comprehensive Annual Financial Report, the University ratio was 52%.

- **SRECNA Margin.** The Statement of Revenue, Expense and Changes in Net Assets (SRECNA) margin indicates the excess margin (or deficit) by which adjusted operating revenues cover the increase (decrease) in net assets. Based upon the FY 2011 Comprehensive Annual Financial Report, the University ratio was 11.9%.

- **Return on Net Assets Ratio.** The return on net assets ratio is the change in net assets divided by total net assets. Based upon the FY2011 Comprehensive Annual Financial Report, the University ratio was 10.95%.

- **Days of Operating Cash.** The Days of Operating Cash ratio indicates the number of days the institution can operate without any new cash flow. It is a relative indication of current financial solvency. Based upon the June 30, 2011 Cash Reports, the University maintained 65 days of Operating Cash.

Key Budgetary Measures:

- **Spending Rate Percentage.** The spending rate percentage is operating expenses divided by adjusted operating revenues. Based upon FY2011 budgetary amounts, the University spent 99.8% of operating revenues.

- **Budget to Actual.** Compares the original budget to actual expenses. Based upon FY2011 budgetary amounts, MUSC had a favorable variance of $7.8 million or 1.29%.

7.4 What are MUSC’s performance levels and trends for key measures of workforce engagement, workforce satisfaction, the development of your workforce, including leaders, workforce retention, workforce climate including workforce health, safety and security?

**Work System Performance.** Faculty performance is measured on an annual basis in a review of faculty goals conducted by the faculty member and Department Chair or division director. These annual goals, established at the beginning of each fiscal year, along with other activities and accomplishments, constitute the key measures for faculty performance. The results of E*Value course and instructor evaluations, produced at the conclusion of each course, also provide a valuable measure of performance by faculty in the classroom and clinical setting.

The annual review of staff centers on measures established by the job description created for the position being reviewed and on measurable Excellence goals that each major division and college establishes for its area. The supervisor conducting the review assesses the employee’s performance in completing assigned job duties and the staff member has an opportunity to add explanations or
exceptions to the supervisor’s findings. The success in meeting the established goals of each unit is generally measured through customer service and employee satisfaction survey results. Employees have 30% to 70% of their evaluations based on goal attainment depending on their job categories.

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

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

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

**Faculty and Staff Well-being, Satisfaction, and Dissatisfaction.** The assessment of faculty and staff well-being, satisfaction, and dissatisfaction is an on-going interest and is of concern to University administration. Although these conditions will be made apparent during the course of an annual review, administrators welcome and encourage such comments throughout the year to assure job satisfaction. The initiation of our Excellence program across all segments of the campus is well underway and has led already to higher patient and staff satisfaction responses.

Patient and employee satisfaction is measured through customer satisfaction and employee satisfaction surveys. These tools help to engage customers and employees at all levels of the organization. Customers provide specific feedback regarding the service provided by employees and employees provide specific feedback regarding their satisfaction with the working conditions at MUSC. When areas of concern are identified by survey results, action plans are developed and methods identified through which conditions may be improvement or identified problems resolved.

7.5 What are MUSC’s performance levels and trends for key measures of organizational effectiveness/operational efficiency, and work system performance?

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

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

There are several areas of growth within the University that reflect the strength of its current budgeting system and financial condition. For instance, the University’s Operating Revenues and Net Assets increased significantly, its Operating Cash has remained stable, and externally funded research has grown. See Table 7.5-1.
The change in net assets is an important indicator that provides a picture of the overall financial condition during the current year. On June 30, 2011, total assets reported by the University were $610.1 million and total liabilities were $327.9 million. Net assets, which represent the residual interest in the University’s assets after liabilities are deducted, increased $63.8 million in fiscal year 2011 from $518.4 million to $582.2 million. Of this amount, $71.8 million represents unrestricted net assets, which may be used to meet the University’s ongoing obligations.

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

The University’s daily operations are funded primarily from grants and contracts, sales of services, Tuition and Fees, and State appropriations, which account for 74% of the fiscal year 2011 revenues. See Table 7.5-3.

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

Students are informed about the variety of campus support services at orientation, as well as through emails and website postings. Students can contact their Student Government representatives with concerns or suggestions for change. To gather feedback, support services offer some on-the-spot surveys and exit surveys.

As an example, Student Health Services (SHS) uses data from program exit surveys in addition to data gathered from an annual, anonymous online survey conducted by the Division of Education and Student Life.

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

Table 7.5-4 MUSC Enrollment* September 2008 through September 2011

<table>
<thead>
<tr>
<th>College</th>
<th>Level</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Medicine</td>
<td>First Professional</td>
<td>225</td>
<td>235</td>
<td>255</td>
<td>279</td>
</tr>
<tr>
<td>Graduate Studies</td>
<td>Graduate</td>
<td>182</td>
<td>159</td>
<td>152</td>
<td>241</td>
</tr>
<tr>
<td>Health Professions</td>
<td>Undergraduate</td>
<td>127</td>
<td>90</td>
<td>59</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Graduate</td>
<td>675</td>
<td>670</td>
<td>678</td>
<td>696</td>
</tr>
<tr>
<td>Medicine</td>
<td>First Professional</td>
<td>642</td>
<td>670</td>
<td>697</td>
<td>695</td>
</tr>
<tr>
<td>Nursing</td>
<td>Undergraduate</td>
<td>189</td>
<td>177</td>
<td>174</td>
<td>171</td>
</tr>
<tr>
<td></td>
<td>Graduate</td>
<td>154</td>
<td>174</td>
<td>200</td>
<td>239</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>First Professional</td>
<td>314</td>
<td>315</td>
<td>320</td>
<td>315</td>
</tr>
<tr>
<td>Non-degree Seeking</td>
<td>Undergraduate</td>
<td>3</td>
<td>0</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Graduate</td>
<td>21</td>
<td>24</td>
<td>21</td>
<td>14</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>2532</td>
<td>2514</td>
<td>2560</td>
<td>2679</td>
</tr>
</tbody>
</table>

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

Table 7.5-5 MUSC Degrees Granted from 2008 through 2011

<table>
<thead>
<tr>
<th>College</th>
<th>Program</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Medicine</td>
<td>DMD</td>
<td>50</td>
<td>56</td>
<td>54</td>
<td>51</td>
</tr>
<tr>
<td></td>
<td>DMD/PhD</td>
<td>4</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>MSD</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>54</td>
<td>57</td>
<td>55</td>
<td>54</td>
</tr>
<tr>
<td>Graduate Studies</td>
<td>Master’s</td>
<td>25</td>
<td>30</td>
<td>22</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Doctorate (PhD)</td>
<td>30</td>
<td>32</td>
<td>17</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>55</td>
<td>62</td>
<td>39</td>
<td>37</td>
</tr>
<tr>
<td>Health Professions</td>
<td>Bachelor’s</td>
<td>53</td>
<td>64</td>
<td>64</td>
<td>53</td>
</tr>
<tr>
<td></td>
<td>Master’s</td>
<td>196</td>
<td>212</td>
<td>215</td>
<td>188</td>
</tr>
<tr>
<td></td>
<td>Doctorate</td>
<td>122</td>
<td>70</td>
<td>56</td>
<td>61</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>373</td>
<td>346</td>
<td>335</td>
<td>302</td>
</tr>
<tr>
<td>Nursing</td>
<td>Bachelor’s</td>
<td>126</td>
<td>140</td>
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<td>112</td>
</tr>
<tr>
<td></td>
<td>Master’s</td>
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<td>58</td>
<td>40</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Doctorate (PhD)</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>187</td>
<td>201</td>
<td>156</td>
<td>153</td>
</tr>
<tr>
<td>Medicine</td>
<td>MD/MHA</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>MD</td>
<td>130</td>
<td>126</td>
<td>131</td>
<td>156</td>
</tr>
<tr>
<td></td>
<td>MD/PhD</td>
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<td>5</td>
<td>4</td>
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56
<table>
<thead>
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<th>Pharmacy</th>
<th>Total</th>
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<th>131</th>
<th>135</th>
<th>164</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctorate (PharmD)</td>
<td>78</td>
<td>78</td>
<td>77</td>
<td>78</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>78</td>
<td>78</td>
<td>77</td>
<td>78</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL 884 875 797 788

* Degrees granted from December (of the previous) to August (of the designated) year.

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

**Table 7.5-6 MUSC Full-time Faculty from 2008 to 2011 by College**

<table>
<thead>
<tr>
<th>Year/College</th>
<th>Basic Sciences</th>
<th>Clinical Sciences</th>
<th>Pharmacy</th>
<th>Nursing</th>
<th>Dental Medicine</th>
<th>Health Professions</th>
<th>Library</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>153</td>
<td>929</td>
<td>46</td>
<td>50</td>
<td>47</td>
<td>71</td>
<td>35</td>
<td>1331</td>
</tr>
<tr>
<td>2009</td>
<td>147</td>
<td>937</td>
<td>39</td>
<td>50</td>
<td>47</td>
<td>63</td>
<td>33</td>
<td>1316</td>
</tr>
<tr>
<td>2010</td>
<td>171</td>
<td>894</td>
<td>40</td>
<td>41</td>
<td>49</td>
<td>64</td>
<td>32</td>
<td>1291</td>
</tr>
<tr>
<td>2011</td>
<td>174</td>
<td>918</td>
<td>43</td>
<td>39</td>
<td>56</td>
<td>67</td>
<td>33</td>
<td>1330</td>
</tr>
</tbody>
</table>

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

**Table 7.5-7 MUSC Part-time Faculty from 2008 to 2011 by College**

<table>
<thead>
<tr>
<th>Year/College</th>
<th>Basic Sciences</th>
<th>Clinical Sciences</th>
<th>Pharmacy</th>
<th>Nursing</th>
<th>Dental Medicine</th>
<th>Health Professions</th>
<th>Library</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>11</td>
<td>145</td>
<td>3</td>
<td>58</td>
<td>33</td>
<td>7</td>
<td>3</td>
<td>260</td>
</tr>
<tr>
<td>2009</td>
<td>11</td>
<td>141</td>
<td>3</td>
<td>27</td>
<td>33</td>
<td>9</td>
<td>3</td>
<td>227</td>
</tr>
<tr>
<td>2010</td>
<td>14</td>
<td>128</td>
<td>4</td>
<td>26</td>
<td>34</td>
<td>5</td>
<td>3</td>
<td>214</td>
</tr>
<tr>
<td>2011</td>
<td>16</td>
<td>152</td>
<td>3</td>
<td>30</td>
<td>33</td>
<td>4</td>
<td>2</td>
<td>240</td>
</tr>
</tbody>
</table>

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

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

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

**Education**

- MUSC College of Medicine Ranked 4th in the Top 10 Most Popular Medical Schools by US News.
- MUSC launched the Master of Science in Clinical Research degree in India, Singapore and
MUSC became a tobacco-free campus and led a successful effort to allow all public higher education institutions in SC to prohibit the use of tobacco products, if they choose to do so.

U.S. News and World Report’s 2013 edition of America's Best Graduate Schools ranked 11 MUSC graduate programs in top 100 spots: Pharmacy, 26th; Nursing, 50th; Medicine-Drug and Alcohol Abuse, 10th; Medicine-Primary Care, 49th; Medicine-Research, 57th; Medicine-Statistics, 58th; Health Professions-Health Care Management, 29th; Health Professions-Nursing Anesthesia, 26th; Health Professions-Occupational Therapy, 21st; Health Professions-Physical Therapy, 51st; Health Professions-Physician Assistant, 25th.

Lisa Saladin, Ph.D., was appointed the permanent position of dean of the MUSC College of Health Professions (CHP).

Louis J. Guillette Jr., Ph.D., reproductive biologist, endocrinologist and professor at MUSC was a recipient of a $100,000 award in environmental science by the Heinz Foundation.

Clinical

U.S. News & World Report ranked MUSC as the state’s #1 hospital and named it as one of the country's best hospitals (top 50) in the treatment of ear/nose/throat disorders, nephrology, cardiology and heart surgery, and gastroenterology. MUSC is also “high-performing” in treating cancer, gynecologic disorders, orthopedics and rheumatology. Programs for diabetes and endocrinology, neurology and neurosurgery, pulmonology, geriatrics and urology also were considered high-performing.

MUSC’s Ashley River Tower was ranked among the 20 most beautiful hospitals in the world.

MUSC Children’s Hospital was again ranked in the top 20 hospitals for children’s heart programs in U.S. News Media Group's 2012-2013 edition of America’s Best Children’s Hospitals, along with a first-time top 50 ranking for the pediatric gastroenterology program.

MUSC led the development of Carolina eHealth Alliance (CeHA) that connects 11 emergency departments of all major Charleston-area hospitals through a patient health information exchange that links electronic medical records, saving critical time and reducing costs.

The South Carolina Hospital Association (SCHA) and NC Prevention Partners recognized MUSC as a Gold Apple Hospital for providing the highest standard of excellence for healthy food environments offered to employees, patients and visitors.

The MUSC trauma program has been verified as a Level 1 Trauma Center, the highest level any trauma program in the country can achieve, by the American College of Surgeons (ACS). MUSC is the first hospital in South Carolina to achieve this rating.

Research topics

The new Center for Innovation and Entrepreneurship was established.

MUSC added new endowed chair holders, Drs. Pat Woster, Richard Drake and Chanita Hughes-Halbert.

Etta Pisano, M.D., MUSC vice president for medical affairs and dean of the College of Medicine, received the gold medal award from the American Roentgen Ray Society (ARRS), the society’s highest honor awarded to recipients for distinguished service to radiology.

Peter Kalivas, PhD, professor and co-chair of the Department of Neurosciences, received the South Carolina Governor’s Award for Excellence in Scientific Research.
• The Hollings Cancer Center at MUSC and South Carolina State University received a landmark grant, exceeding $800,000, from the National Institutes of Health-National Cancer Institute to establish the South Carolina Cancer Disparities Research Center (SC CaDRe) which will have as its mission investigating cancer disparities and training future researchers in the field. It is among the first of its kind in the country to support cancer disparities research that includes Sea Island residents.

• A collaboration between the College of Medicine and the South Carolina College of Pharmacy (SCCP) was awarded a $10.5 million research grant from the National Institutes of Health. Funding for the Center of Biomedical Research Excellence (COBRE) in Oxidants, Redox Balance and Stress Signaling began in September 2011 and the project period runs through August 2016.

• Scientists and researchers from across the globe convened at MUSC’s new bioengineering building to mark the first international symposium regarding cardiovascular regeneration. In addition, MUSC President Dr. Ray Greenberg and Dr. Rafael Beyar, CEO and Director General of Rambam Health Care Campus, signed a memorandum of understanding for further collaboration among the medical university and the Technion-Israel Institute of Technology and the Rambam Health Care Campus, located in Haifa, Israel.

• MUSC Department of Psychiatry and Behavioral Sciences joined the National Network of Depression Centers (NNDC), which links together more than 20 leading medical centers across the country working to improve the lives of those struggling with depression.

• MUSC dedicated two new buildings of laboratory complex for biomedical research—one for bioengineering and one for drug discovery. The complex was named after U.S. Rep. James E. Clyburn (D-SC) for his long-standing efforts to correct health disparities in South Carolina and for his support of biomedical research.

• MUSC was awarded a five-year, $2.8 million grant from the US Department of Health and Human Services (Maternal and Child Health) to create a statewide program called South Carolina Leadership Education in Neurodevelopmental and Related Disabilities (SC LEND). This is the first LEND award for South Carolina.

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

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

One measure of trust by student stakeholders might be the numbers of applicants each year for each and every academic program, with numbers substantially exceeding available slots and constantly growing. A clear indicator of trust from vendors is their continuing active, aggressive competition to do business with the institution. The ever-increasing numbers of both inpatient and outpatient visits as well as numbers of patients served document their trust in the institution and its leadership.
7.6c MUSC's performance levels for key measures related to leadership and social responsibility: fiscal accountability; and, regulatory, safety, accreditation, and legal compliance.

The University and its components are subject to the widest possible array of regulatory (Federal, State, and local), safety, accreditation, and legal compliances requiring substantial ongoing vigilance and staff time/attention on compliance issues as well as staying abreast of constant changes. The ultimate indicator of success in this arena is the fact that there have been no material findings or results over the past five years in any accreditation, inspection, investigation, or audit including the Annual Audited Financial Statement from the external audit firm of KPMG. In addition, MUSC adheres to budgetary and procurement codes and numerous state and federal regulations that are appropriate for any State of South Carolina agency. The following chart of the major accreditations required for the University and its affiliates clearly documents one aspect of the extensive parameters of accountability associated with an academic health sciences center. This list does not include a variety of accreditations required to provide accredited health services, safety, and licenses necessary to support these academic programs.

Table 7.6-1 Accrediting Agencies for MUSC Academic Programs

<table>
<thead>
<tr>
<th>Unit</th>
<th>Program</th>
<th>Accreditng Body</th>
<th>Last Accredited</th>
<th>Next Accreditation</th>
</tr>
</thead>
<tbody>
<tr>
<td>MUSC</td>
<td>University-wide</td>
<td>Commission on Colleges of the Southern Association of Colleges &amp; Schools</td>
<td>2007</td>
<td>2017</td>
</tr>
<tr>
<td></td>
<td>College of Dental Medicine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>College-wide</td>
<td>American Dental Association</td>
<td>2010</td>
<td>2017</td>
</tr>
<tr>
<td>College of Health Professions</td>
<td>Anesthesia for Nurses</td>
<td>American Association of Nurse Anesthetists, Council on Accreditation of Nurse Anesthesia Educational Programs</td>
<td>2009</td>
<td>2019</td>
</tr>
<tr>
<td></td>
<td>Physician Assistant</td>
<td>Accreditation Review Commission on Education for the Physician Assistant (ARC-PA)</td>
<td>2007</td>
<td>2012</td>
</tr>
<tr>
<td></td>
<td>Cardiovascular Perfusion Technology</td>
<td>Commission on Accreditation of Allied Health Education Programs (upon recommendation of the Accreditation Committee for Perfusion Education)</td>
<td>2009</td>
<td>2019</td>
</tr>
<tr>
<td></td>
<td>Occupational Therapy</td>
<td>American Occupational Therapy Association</td>
<td>2003</td>
<td>2012</td>
</tr>
<tr>
<td></td>
<td>Physical Therapy</td>
<td>American Physical Therapy Association, Commission on Accreditation in Physical Therapy Education</td>
<td>2010</td>
<td>2018</td>
</tr>
<tr>
<td>Program</td>
<td>Accreditation Body</td>
<td>Start Year</td>
<td>End Year</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>------------</td>
<td>----------</td>
<td></td>
</tr>
<tr>
<td>Speech Language Pathology</td>
<td>American Speech-Language Hearing Association</td>
<td>2005</td>
<td>2013</td>
<td></td>
</tr>
<tr>
<td>Health Administration</td>
<td>Commission on Accreditation of Healthcare Management Education</td>
<td>2011</td>
<td>2017</td>
<td></td>
</tr>
<tr>
<td>College of Medicine</td>
<td>American Medical Association Council on Medical Education, and Association of American Medical Colleges, Liaison Committee On Medical Education</td>
<td>2005</td>
<td>2012/2013</td>
<td></td>
</tr>
<tr>
<td>College of Nursing</td>
<td>Commission on Collegiate Nursing Education</td>
<td>2010</td>
<td>2020</td>
<td></td>
</tr>
<tr>
<td>Nurse Midwifery</td>
<td>American College of Nurse-Midwives</td>
<td>2004</td>
<td>2013</td>
<td></td>
</tr>
<tr>
<td>College of Pharmacy</td>
<td>Accreditation Council for Pharmacy Education</td>
<td>2009</td>
<td>2012</td>
<td></td>
</tr>
<tr>
<td>Professional Psychology (IPSY) through Dept. of Psychiatry</td>
<td>American Psychological Association</td>
<td>2008</td>
<td>2013</td>
<td></td>
</tr>
<tr>
<td>Dietetics (DIETI) through Digestive Disease Center</td>
<td>American Dietetic Association, through the Commission on Accreditation for Dietetics Education</td>
<td>2009</td>
<td>2014</td>
<td></td>
</tr>
</tbody>
</table>

7.6d MUSC’s performance levels for key measures related to leadership and social responsibility: organizational citizenship in support of key communities.

Technology is transforming organizational citizenship relations and the way in which care is delivered. The rural parts of our state have the dual misfortune of high rates of disease with relatively limited access to primary, much less specialty care. Recently, however, we have begun to make in-roads into removing geography as a limitation in terms of access to the best care possible. Telemedicine networks have been established to allow specialists at the Medical University to be connected instantaneously with their colleagues around the state and jointly care for patients with life-threatening conditions. Today, a patient in Kingstree, or Hartsville, or Dillon can have the same access to stroke specialists at MUSC, as do patients in downtown Charleston. In addition, we are working with colleagues at all Charleston area hospitals to create one of the few functioning community-wide clinical health information exchanges in the country. The local exchange allows emergency department caregivers to share information on patients who have been seen elsewhere, thereby improving the efficiency, safety, speed and quality of care delivered. In another example, Dr. Neal
Axon, one of MUSC’s hospitalists, soon will be leading a statewide effort, in partnership with the South Carolina Hospital Association and others to improve transitions of care from the hospital to community setting, with the goal of lowering readmissions. Another innovation is being led by Dr. Gerard Silvestri, who is using telemedicine to allow our lung cancer multi-specialists to consult with physicians throughout our state.
### Strategic Planning for 2010-2015 *

<table>
<thead>
<tr>
<th>Program Number and Title</th>
<th>Supported Agency Strategic Planning Goal/Objective</th>
<th>Related FY 09-10 and beyond Key Agency Action Plan/ Plan/Initiative(s) And Timeline for Accomplishing the Plan(s)</th>
<th>Key Cross References for Performance Measures*</th>
</tr>
</thead>
</table>
| I. A&B Education and General | **I. INTERPROFESSIONAL/INTERDISCIPLINARY**  
Goal: MUSC will be a leader in interprofessional/interdisciplinary (IP/ID) practices by building on existing activities and fostering an environment that rewards innovative and integrated education, research, and patient care. | **Objective 1:** Foster existing initiatives and develop new opportunities that encourage interprofessional/interdisciplinary integration and experiences.  
**Objective 2:** Develop opportunities within and outside the institution and create partnerships with others to establish IP/ID collaboration as an ongoing University commitment. | Ch 2.2, 2.3 Ch 7.2, 7.3, 7.5, 7.6a |
| I. A&B Education and General | **II. TECHNOLOGY/INNOVATION**  
Goal: Provide an environment that promotes the application, development, and transfer of technology, fosters and rewards innovation, cultivates human capital, and responds to emerging priorities to advance health care, education, and research. | **Objective 1:** Maximize the use of resources and technologies to advance health care, education, and research at MUSC and throughout South Carolina.  
**Objective 2:** Create and nurture an environment that fosters innovation.  
**Objective 3:** Accelerate and capitalize the transfer of new technologies and research advances.  
**Objective 4:** Identify and sustain new revenue streams that adapt to changing biomedical economic environments. | Ch 2.2, 2.3 Ch 7.2, 7.3, 7.5, 7.6a |
| I. A&B Education and General | **III. ENTREPRENEURIALISM**  
Goal: Create and sustain a culture, with both pathways and infrastructure that will support University-wide entrepreneurialism. Cultivate opportunities to explore new portals and partnerships, public and private, while promoting an ethical framework for pursuits. | **Objective 1:** Stimulate the spirit of entrepreneurialism and incorporate a system of incentives.  
**Objective 2:** Develop Center for Medical Innovation and Entrepreneurialism | Ch 2.2, 2.3 Ch 7.2, 7.3, 7.5, 7.6a |
| I. A&B Education and General | **IV. GLOBALIZATION**  
Goal: To improve the health of people in South Carolina and globally through the development of collaborative global partnerships in education, clinical care and research. | **Objective 1:** Build an infrastructure that supports collaboration, coordination, and a commitment to sustainable globalization activities highlighting the unique strengths of MUSC.  
**Objective 2:** Position MUSC to be recognized as a leader in global health initiatives. | Ch 2.2, 2.3 Ch 7.2, 7.3, 7.5, 7.6a |

* Key Cross-References are a link to the Chapter III Category 2 (Strategic Planning) and Category 7 (Organizational Performance Results). These references provide a Ch number included in the 2 and 7 Categories of this document.