



STRATEGIC PLAN 2012-2017

May 14, 2012

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The Strategic Planning Process

The University of Vermont College of Medicine Strategic Plan is a living document that is revised as needed, providing both long-term guidance and a framework for short-term decision making. The Strategic Plan that was developed in 2005 was adapted with the arrival of Dean Morin in 2007, and a complete review at the five-year mark was done to develop the Strategic Plan 2012-2017.

The Strategic Plan is prepared by the Senior Associate Deans and approved by the Dean. However, this final product represents considerable on-going effort that includes input by a large fraction of the faculty as well as many staff and students in the College. It is integrated with the Strategic Plans of our parent University and our clinical Academic Medical Center partner Fletcher Allen Health Care. Most recently we have begun to incorporate our newer clinical partners Eastern Maine Medical Center in Bangor; St. Mary's Hospital in West Palm Beach, Florida; and Danbury Hospital in Connecticut in the process.

The Dean's Office has overall responsibility for providing the venues for strategic planning. Candidate Strategic Initiatives and Action Plans have been, and continue to be, proposed in a number of ways: by the Dean and the four Senior Associate Deans or others in the Administration; as recommendations of standing or *ad hoc* faculty committees; and by individual or groups of faculty, staff or students who feel there is an important unmet need or opportunity. Proposed initiatives are reviewed and vetted by the Dean and Senior Associate Deans, and then brought to the College of Medicine Advisory Council (COMAC) made up of the Department Chairs and key education and research leaders (Appendix A – list

of membership). After this discussion and any needed data gathering and analysis, the resulting initiatives and action steps are shared and discussed with the broader faculty using one or more of several mechanisms: Chairs discuss the issues at regular departmental faculty meetings; the Dean discusses the issues at the annual meeting set up with each department; the Dean discusses the issues at the periodic full faculty meetings of the College; and detailed notices and documents are made available electronically both as email and on the College of Medicine web site. Elements that require a formal vote of the faculty (including changes to governance, such as the College of Medicine Bylaws) are communicated electronically, discussed during feedback sessions, and reviewed at full faculty meetings prior to the formal vote. Some initiatives, such as a merger of departments and rewriting of the Faculty Handbook, also require review and approval by the Faculty Senate, University administration and the Board of Trustees.

At least annually, the College of Medicine Strategic Plan is reviewed in full with the University Provost. Initiatives with financial implications are reviewed with the Chief Financial Officer of the University. Initiatives with curricular or research implications (e.g., Changes in Courses the College offers for undergraduates or Core Research laboratories) are discussed at the Provost's Deans Council or with the Vice President for Research as appropriate. In addition, focused discussions occur frequently with the administration at other Colleges, such as the joint effort between the College of Medicine and the College of Nursing and Health Sciences to develop a simulation laboratory in collaboration with Fletcher Allen.

Similarly, the Strategic Plan is integrated with that of Fletcher Allen, which is annually reviewed and updated. The Dean plays a significant role in this process, as do the clinical Department Chairs and the Senior Associate Dean for Clinical Affairs who also serves as President and CEO of the University of Vermont Medical Group, the Faculty Practice. The Fletcher Allen Board of Trustees, on which the Dean sits, reviews this updated plan. The Dean and the Fletcher Allen CEO meet frequently to discuss resources, initiatives, and priorities.

Recently, the College has named a Faculty Strategic Planning Committee to ensure regular review of the Strategic Plan, its initiatives, action steps, metrics and results (Appendix B - list of membership). The Dean has appointed Committee members who collectively are broadly knowledgeable about the College and its teaching, research, clinical, and service activities. They have been charged with regularly reviewing the Strategic Plan, including gathering appropriate input and advising the Dean on revisions and updates prior to the annual review.

Vision and Mission

The Vision of the University of Vermont (UVM) is to be among the nation's premier small research universities, preeminent in our comprehensive commitment to liberal education, environment, health, and public service.

In support of this vision, the mission of the UVM College of Medicine is to educate a diverse group of dedicated physicians and biomedical scientists to serve across all the disciplines of medicine; to bring hope to patients by advancing medical knowledge through research; to integrate education and research to advance the quality and accessibility of patient care; and to engage with our communities to benefit Vermont and the world.

To accomplish this mission we have identified four key goals:

GOAL 1: EDUCATION

To continuously improve the quality of our educational programs

GOAL 2: RESEARCH

To capitalize on our strengths and opportunities for investment to expand our research

GOAL 3: COLLABORATION

To expand and enhance collaborations to better fulfill our missions and serve Vermont and Vermonters

GOAL 4: ADMINISTRATION

To strengthen administrative structures and policies that enrich our culture and enhance our ability to adapt to change

Diversity Statement *(adopted August 2012)*

The University of Vermont College of Medicine values diversity as a driver of excellence. We actively seek diversity and inclusion within our academic community of students, faculty, and staff, as well as those we serve through teaching, research, patient care and community engagement.

Recognizing the limited ethnic and racial diversity of Vermont, we will actively seek students, faculty and staff to develop an academic community that is more diverse than the population of our State. We believe the ethnic and racial diversity of our College is an asset in teaching, research and patient care, and we strive to develop culturally competent students and graduates who reflect and understand the increasingly diverse populations they will serve here in Vermont, across the nation and around the world.

In alignment with the mission of the University of Vermont and the College of Medicine to serve the citizens of Vermont, we seek to educate and provide physicians for the state of Vermont. We will work to encourage Vermonters to pursue careers in medicine, and actively recruit and educate Vermonters who are more likely to stay and practice in the state. We aim to provide the opportunity for exposure to a faculty and to patient populations that are more diverse than the population of our state by developing clinical training sites outside of Vermont.

We define ethnic and racial diversity in alignment with the University of Vermont ALANA (African, Latino/a, Asian, and Native American) classification. We embrace diversity in its broadest forms, encompassing and exploring the dimensions of not only racial and ethnic diversity, but also gender, gender identity, sexual orientation, religion, socioeconomic background, and life experience. We strive to provide an education and a culture that is accepting and supportive of this broader diversity. We are guided by the tenets in *UVM: Our Common Ground* and are committed to creating a culture that supports and encourages respect for every individual and celebrates our diverse backgrounds.

Core Values

The College of Medicine is committed to the values expressed by the University of Vermont in OUR COMMON GROUND:

The University of Vermont is an educationally purposeful community seeking to prepare students to live in a diverse and changing world. We who work, live, study, teach, do research, conduct business, or participate in the University of Vermont are members of this community. As members, we believe in the transforming power of education and agree to help create and foster an environment where we can discover and reach our true potential. We aspire to be a community that values:

RESPECT. We respect each other. We listen to each other, encourage each other and care about each other. We are strengthened by our diverse perspectives.

INTEGRITY. We value fairness, straightforward conduct, adherence to the facts, and sincerity. We acknowledge when things have not turned out the way we had hoped. As stewards of the University of Vermont, we are honest and ethical in all responsibilities entrusted to us.

INNOVATION. We want to be at the forefront of change and believe that the best way to lead is to learn from our successes and mistakes and continue to grow. We are forward-looking and break new ground in addressing important community and societal needs.

OPENNESS. We encourage the open exchange of information and ideas from all quarters of the community. We believe that through collaboration and participation, each of us has an important role in determining the direction and well-being of our community.

JUSTICE. As a just community, we unite against all forms of injustice, including, but not limited to, racism. We reject bigotry, oppression, degradation, and harassment, and we challenge injustice toward any member of our community.

RESPONSIBILITY. We are personally and collectively responsible for our words and deeds. We stand together to uphold our common ground.

In addition, the College of Medicine is particularly committed to:

VERMONT AND VERMONTERS
PERSONAL AND FISCAL RESPONSIBILITY
OUTSTANDING SCHOLARSHIP
DIVERSITY AND INCLUSION

OVERVIEW OF THE COLLEGE: 2007 to 2012

Education

Since 2007, the College has admitted the most academically prepared and diverse student body in our history. Increasing both the academic preparedness and the diversity of the class, in an environment where the number of seats available in US medical schools has increased substantially, is a remarkable accomplishment. It is also a challenge in an environment where the exponential increase in student debt is of national concern.

Nationally, there is an inverse correlation between medical student tuition and state and institutional support for a public medical school. Among public medical schools, UVM is below the 5th percentile for state and university support and consequently has appeared in the top tier for tuition and the resulting student debt. Over the past five years, the College has limited increases in tuition to a median of 2.5% per year in order to lessen the financial burden on our students, while public medical schools as a group were increasing by an average of 7% per year. As result, the College now ranks 32nd for public medical school tuition and fees, the very middle of the pack.

Unfortunately, our student debt continues to rank between fifth and seventh among public medical schools. This incongruity is due to a combination of a reduction in UVM scholarship funds, the acceptance of an increasingly more diverse class with fewer resources, and a greater borrowing relative to cost among our medical students. Since 2000, the Freeman Medical Scholars Program, generously funded by the Freeman Foundation, provided nearly \$2 million annually to the College for medical student scholarships—our largest external support for scholarships. In 2008, the global financial challenges had a significant impact on the Foundation and they made the difficult decision to end the Program after supporting the Class of 2012. Since then, raising money for scholarships has been the College's number one philanthropic priority. Support for 10 new endowed scholarships has been completed, and medical student scholarships are the College's first priority at \$25,000,000 in the coming capital campaign of the new UVM Foundation. A new Director of Medical Student Financial Aid is being recruited, who will work to make sure that no student is prevented from attending for lack of financial means, while helping to ensure that student borrowing is prudent and necessary.

Our medical students receive most of their clinical education at Fletcher Allen Health Care, our primary academic and teaching partner, as well in clinical clerkships and specialty rotations at other sites. In 2008, when Maine Medical Center decided to end the long-standing clinical teaching arrangement with the College after 2011, we began searching for new training sites that would offer our students a high-quality, diverse clinical experience. We have been successful in developing clinical teaching sites at three hospitals: Danbury Hospital in Connecticut, St. Mary's Medical Center in West Palm Beach, Florida, and Eastern Maine Medical Center in Bangor, Maine.

Educational space on campus has also undergone a transformation since 2007. We have consolidated all of our student support teams including Admissions, Student Affairs, Curriculum, and the office of the Senior Associate Dean for Medical Education in the Given Courtyard, a new and innovative 150-person office building in the heart of our campus. We also completely renovated our largest lecture hall, Carpenter Auditorium, into a 250 seat state-of-the-art teaching facility. In early 2011, in collaboration

with Fletcher Allen and the College of Nursing & Health Sciences, we opened the Clinical Simulation Laboratory — 9000 square-feet of space to serve all levels of learners, including medical students, nursing and physical therapy students, medical residents, physicians and nurses across the region, community EMTs and Vermont National Guard members.

Graduate education is also thriving at the College. University efforts had been underway for years to consolidate individual departmental graduate programs into University-wide programs to create larger, integrated programs of higher quality that could attract better students, faculty and the resulting national prominence. In 2012, the College successfully led the process by merging all of its departmental graduate programs into two University-wide programs and laying the groundwork for next steps of outlining a core curriculum and defining areas of research emphasis.

Research

The College has been successful in growing its research activity. Annual external research awards totaled \$66 million in 2007, and by 2010 research funding peaked at over \$89 million, including nearly \$15.9 million in ARRA funding, of which the college received more than its proportionate share. In 2011, despite a declining availability of federal research funding the College received \$77.5 million, a figure still 17% above 2007. These numbers do not include approximately \$4 million in clinical trials which the College administrates but, runs through Fletcher Allen accounts. In order to build upon our strengths, the College added two major research themes, clinical-translational science and healthcare delivery, to the five that have existed in our Strategic Plan since the mid-1990's: cardiovascular, neurobehavioral, pulmonary, immunology and infectious diseases, and cancer.

To help develop the neurobehavioral sciences area, a merger between the basic science Department of Anatomy & Neurobiology and the clinical Department of Neurology was initiated by the College and approved by the UVM Board of Trustees. Substantial resources have been set aside for the recruitment of a new chair and the development of a department focused on translational research. In addition, an NIH IDeA Center of Biomedical Research Excellence (CoBRE) application in Behavior, Health and Neuroscience with major contributors from the Department of Psychiatry has been submitted.

Rebuilding of the Vermont Cancer Center (VCC) is another key initiative at the College, and both the University and Fletcher Allen have committed to pursuing a path that will lead to reapplying for NCI designation in the future. Claire Verschraegen, MD, a national leader in phase 1 clinical trials, was recruited as the Clinical Care and Research Co-director of the VCC as well as Division Chief of Hematology Oncology in the Department of Medicine. Gary Stein, PhD, has been recruited as the Basic Science Research Co-director, and will also serve as Chair of the Department of Biochemistry. Dr. Stein will also bring a team of basic science investigators with translational interests. In addition, head and neck cancer surgeon Marion Couch, MD, PhD, was recruited as Division Chief of Otolaryngology and is also serving as Interim Chair of the Department of Surgery. These recruitments have moved the rebuilding of the VCC forward dramatically and several additional recruitments are planned.

The College has made significant investments in improvements to the research infrastructure: Renovated lab space in the Given Building (10,000 sq. ft.) and expanded new space at the Colchester Research Facility (35,000 sq. ft.) supports investigators in cardiovascular medicine, pulmonary medicine, cancer, and immunology and infectious disease. The University is also partnering with the State of Vermont in

construction of the new State Health Department that will house a shared BSL3 facility, a key component of the immunobiology and infectious disease research area. Recent major investments in core facilities include a new NexGen sequencer within our Advanced Genomic Technologies Core, a 3- Tesla MRI magnet solely devoted to research, and a new Transmission Electron Microscope and a Storm Ultra-Resolution Light Microscope for our Microscopy Imaging Core.

Collaboration

The nation has embarked upon health care reform, and the State of Vermont is leading the nation in that reform, electing a Governor on a platform of developing a single payer system that provides universal access and constrains cost increases. Over the past five years, the College has been expanding our capacity to support the healthcare delivery research needs of the State of Vermont. We have grown the Vermont Child Health Improvement Program dramatically. We have recruited two bioinformaticists, a healthcare economist and a healthcare data analyst, and, with the State's financial backing, have developed a set of servers to house the dataset of all of the insurance health claims for all the citizens of the state of Vermont. Housed next to it is the electronic health record of Fletcher Allen, containing records on the 60% of the population of Vermont for which Fletcher Allen Partners provides care. These datasets uniquely support development of an effort by the University, IBM, and Fletcher Allen to use the IBM platform, developed at the Watson Laboratories, to analyze this dataset in order to project how changes in healthcare delivery or payment reform will affect the clinical and financial outcomes of health care delivery in the State of Vermont.

The College is intimately engaged with the newly-launched University of Vermont Foundation, and is in the final planning stages of setting a new seven-year capital campaign. Alumni from the College participate on the Foundation governing body, with additional collaborative efforts creating opportunities to reach new donors in support of the College's missions. Fletcher Allen Health Care is also developing its philanthropic activities. The College, the UVM Foundation and Fletcher Allen have begun a process to investigate how to better integrate their development activities.

The College is engaged with Fletcher Allen Partners and its developing network of hospitals in Vermont and northern New York to incorporate them into our teaching and research programs. In addition, collaborations with Fletcher Allen and the College of Nursing and Health Sciences are underway in interprofessional education to train the health care providers of the future in the teamwork which allows each profession to operate at the top of its capability and manage a population most efficiently.

Administration

Between 2000 and 2007 the College of Medicine had four Deans and two periods with interim deans, which delayed decisions around other leaders in the College. Starting in 2006, recruitments of four Senior Associate Deans were successfully completed, along with transitions in a number of departments.

- Paul Taheri, MD, MBA - Senior Associate Dean for Clinical Affairs. Dr. Taheri, who had earned an MBA and been assistant dean for academic business development at the University of Michigan, was recruited in 2006 in anticipation of reorganization of the practice plan.
- Brian Cote, MBA – Senior Associate Dean for Finance and Administration. Mr. Cote was promoted in 2008 from associate dean, taking on expanded responsibilities through the elimination of executive

dean and associate dean positions.

- Ira Bernstein, MD - Senior Associate Dean for Research. Internal candidate Dr. Bernstein was appointed in 2009, after a national search, based on his experience as a clinical and translational investigator, work that is central to our research enterprise.
- William Jeffries, PhD - Senior Associate Dean for Medical Education. Dr. Jeffries was recruited in 2009, after a national search, with extensive experience in medical education including being the editor of a textbook on medical education, and principal driver of the development of a substantial branch campus at Creighton University.

In 2006, new leaders were named to succeed interim leadership in the Departments of Radiology, Medicine and Surgery, and in 2010 Thomas Peterson, MD, was appointed Chair of Family Medicine. In 2012, Gary Stein, PhD, was recruited as Chair of Biochemistry and Co-director of the Vermont Cancer Center. Dr. Stein, from the University of Massachusetts, is an outstanding leader and investigator who will join the College with about 30 new people including four faculty members. It will be the biggest single recruitment of investigators in the history of the University of Vermont. National searches are also underway for leaders of Neurological Sciences and of Pathology.

In 2008, in response to a 20% cut in State support, the College made the necessary cuts in 90 days and did so with an accelerated strategic planning process. Current and future spending was reviewed and evaluated for centrality to our mission, excellence, and value. Based on this analysis, selected cuts were made out of ongoing operations, preserving the ability to invest in the future.

The documents which govern the College and set the rules and administrative structures under which the faculty work had not undergone major revisions in decades. Plans were set in motion in 2010 to completely redraft the College Faculty Handbook, the Faculty Standards and the College Bylaws, all of which were approved by the faculty in 2011 at the largest meeting in the history of our College, 325 members attending. A renewal of the Affiliation Agreement between the University and Fletcher Allen was also due in 2010, which was an opportunity to reorganize the governance and finance of the Practice Plan. The new Faculty Handbook outlines four pathways for faculty development and aligns faculty titles across the pathways. The length of time to achieve tenure was extended from seven to nine years, and a component of tenured faculty salary is dependent upon productivity. The new Faculty Standards document outlines requirements for promotion, both overall standards and within each pathway. Revisions to the Bylaws include improvements to quorum calls and methods of voting, as well as revamped policies that give educators more centralized control of the curriculum and of the Student Guidelines. The 2010 affiliation agreement with Fletcher Allen reorganized the practice plan and renamed it The University of Vermont Medical Group, with a new financial basis, governance, compensation plan and benefits. Subsequently, 145 physicians who had been operating under an independent set of rules were transitioned to fulltime faculty status, a goal of the College for more than 30 years. As results of the changes described above, virtually all of the rules and administrative structures under which the faculty work—including the standards by which the faculty are hired, promoted, tenured, and compensated—develop their careers and receive their current and post- retirement benefits, have changed. These changes have reinforced the culture of responsibility and productivity in the College of Medicine, and have resulted in an increased nimbleness and adaptability that will allow the College not only to survive but to thrive.

STRATEGIC PLAN 2012-2017

Goal 1: Education

To continuously improve the quality of our educational programs

Objectives/Metrics

1. Improve the qualifications of our student body by maintaining or increasing student preparedness, increasing diversity, becoming more proficient at identifying applicants with key professional attributes, and increasing number of students with multiple acceptances who chose UVM.
2. Support the highest quality instruction to our students by increasing faculty development programs for expertise in scholarly teaching and the scholarship of teaching.
3. Decrease the financial burden on our students by restraining increases in tuition, reducing growth of debt, and establishing scholarship as a philanthropic priority.
4. Ensure that the Vermont Integrated curriculum continues to be a state-of-the-art means for educating new physicians by ensuring that modern teaching methods and technology are always supported, especially by improving our educational facilities by enhancing utilization of the Clinical Simulation Laboratory and expanding team-based learning space.
5. Support clerkship training by ensuring equivalency among training sites, supporting the development of highly-qualified affiliate faculty, disseminating online learning tools, and developing clinical campuses or long-term agreements
6. Expand and enhance PhD educational programs by consolidating programs, establishing a new curriculum, developing integrated research themes, and increasing national recognition.

Goal 2: Research

To capitalize on our strengths and opportunities for investment to expand our research

Objectives/Metrics

1. Identify and build upon our strengths by obtaining external support for the Center for Clinical and Translational Science, reorganizing Cardiovascular Research and increasing its philanthropic support, and establishing the Department of Neurological Sciences.
2. Build our cancer center by recruiting key faculty and young investigators, increasing NCI funding, developing a cancer consortium, and preparing to regain NCI designation.
3. Improve our infrastructure for research by allocating and upgrading lab space, supporting core facilities, and creating partner laboratories with State of Vermont.
4. Pursue new opportunities and funding sources by reviewing COBRE opportunities and building on our expertise to develop a healthcare delivery research and education program.

Goal 3: Collaboration

To expand and enhance collaborations to better fulfill our missions and serve Vermont and Vermonters

Objectives/Metrics

1. Pursue collaborations in healthcare delivery research by developing analytic reports for the State, and exploring a collaboration with IBM and other partners.
2. Better align the College, the University and Fletcher Allen by maximizing engagement of of the University of Vermont Medical Group, utilizing the Fletcher Allen Partners network to advance education and research, and partnering to significantly increase philanthropy.
3. Develop education on teamwork, technology and population science with Fletcher Allen and the College of Nursing and Health Sciences to train the health care providers of the future.

Goal 4: Administration

To strengthen administrative structures and policies that enrich our culture and enhance our ability to adapt to change

Objectives/Metrics

1. Revitalize senior leadership in the College of Medicine by recruiting and retaining highly qualified department chairs, center directors and deans.
2. Maintain a balanced long-term 5 to 6 year financial plan that is consulted for all hiring, major equipment purchases and physical plant improvements, updated regularly with new commitments, investments and metrics.
3. Review and renew governance documents by establishing cyclical review process and examining Faculty Handbook, College of Medicine Bylaws, Faculty Standards, and other key College of Medicine mechanisms such as FTARS (the formula by which General Fund dollars for teaching and research are distributed to departments) and the allocation of responsibility and authority between Departments and Centers.
4. Grow philanthropic income by integrating College of Medicine priorities into the University capital campaign, restructuring the relationship with Fletcher Allen, recruiting additional fundraisers, and appointing College of Medicine philanthropists to UVM Foundation.
5. Better align the College, the University and Fletcher Allen by setting regular meetings of the CEO, President and Dean.

Appendix A

UVM College of Medicine Advisory Council

As of May 14, 2012

Dean, UVM College of Medicine	Frederick Morin, MD
President and CEO Fletcher Allen Health Care	John Brumsted, MD, Professor of Obstetrics, Gynecology & Reproductive Sciences
Senior Associate Dean for Medical Education	William Jeffries, PhD, Professor of Pharmacology
Senior Associate Dean for Research	Ira Bernstein, MD, Professor of Obstetrics, Gynecology & Reproductive Sciences
Senior Associate Dean for Clinical Affairs	Paul Taheri, MD, MBA, Professor of Surgery President & CEO, UVM Medical Group
Senior Associate Dean for Finance & Administration	Brian Cote, MBA
Chair, Department of Anatomy & Neurobiology	Rodney Parsons, PhD, Professor
Chair, Department of Anesthesiology	Howard Schapiro, MD, Associate Professor
Chair, Department of Biochemistry	Paula Tracy, PhD, Professor and Interim Chair
Chair, Department of Family Medicine	Thomas Peterson, MD, Professor
Chair, Department of Medicine	Polly Parsons, MD, Professor
Chair, Department of Microbiology & Molecular Genetics	Susan Wallace, PhD, Professor
Chair, Department of Molecular Physiology & Biophysics	David Warshaw, PhD, Professor
Chair, Department of Neurology	Robert Hamill, MD, Professor
Chair, Department of Obstetrics, Gynecology & Reproductive Sciences	Mark Phillippe, MD, Professor
Chair, Department of Orthopaedics and Rehabilitation	Claude Nichols, MD, Professor
Chair, Department of Pathology	Ronald Bryant, MD, Associate Professor and Interim Chair
Chair, Department of Pediatrics	Lewis First, MD, Professor
Chair, Department of Pharmacology	Mark Nelson, PhD, Professor
Chair, Department of Psychiatry	Robert Pierattini, MD, Professor
Chair, Department of Radiology	Steven Braff, MD, Professor
Chair, Department of Surgery	Marion Couch, MD, PhD, MBA, Associate Professor and Interim Chair
Director, Vermont Cancer Center	Claire Verschraegen, MD, Professor of Medicine Director of Hematology/Oncology
Associate Dean for Admissions	Janice Gallant, MD, Associate Professor of Radiology
Associate Dean for Faculty Development	Robert Low, PhD, Interim Professor of Molecular Physiology & Biophysics
Associate Dean for Patient Oriented Research	Richard Galbraith, MD, PhD, Professor of Medicine
Associate Dean for Public Health	Jan Carney, MD, MPH, Professor of Medicine
Associate Dean for Student Affairs	Scott Waterman, MD, Professor of Psychiatry
Assistant Dean for Communications and Planning	Carole Whitaker
Assistant Dean for Diversity and Inclusion	Tiffany Delaney, MA, Interim
Assistant Dean for Facilities Administration & Projects	Susan Ligon
Executive Assistant to the Dean	Maura Randall
Director Medical Development, UVM Foundation	Sarah Koblin, Interim

Appendix B

UVM College of Medicine Faculty Strategic Planning Committee

As of May 14, 2012

Chair

Russell Tracy, Ph.D., Professor of Pathology

Membership

Robert Althoff, M.D., Ph.D., Assistant Professor of Psychiatry

Christopher Berger, Ph.D., Associate Professor of Molecular Physiology & Biophysics

Leah Burke, M.D., Professor of Pediatrics, Genetics

Jason Botten, Ph.D., Assistant Professor of Medicine, Immunobiology

Sylvie Doublet, Ph.D., Professor of Microbiology & Molecular Genetics

Elise Everett, M.D., Assistant Professor of Obstetrics, Gynecology & Reproductive Sciences

Christopher Grace, M.D., Professor of Medicine, Director of Infectious Diseases Division

Ted James, M.D., Associate Professor of Surgery

Charlotte Reback, M.D., Assistant Professor of Family Medicine

Benjamin Suratt, M.D., Associate Professor of Medicine, Pulmonary Disease & Critical Care Medicine

Michael Toth, Ph.D., Associate Professor of Medicine, Cardiovascular Medicine

Daniel Weiss, M.D., Ph.D., Associate Professor of Medicine, Pulmonary Disease & Critical Care Medicine

Charge

To review the strategy of the College, with a particular focus on:

- future directions in, and funding of, research
- advancing educational quality across our multiple sites
- incorporation of Fletcher Allen partners into our academic mission

Appendix C
Updates to Document

August 2012:

Updated Statement on Diversity and Inclusion Adopted August 2012