



LONG SCHOOL OF MEDICINE STRATEGIC PLAN FY2023-2027

*MISSION - MAKING LIVES BETTER THROUGH EDUCATION,
RESEARCH, HEALTH CARE AND COMMUNITY ENGAGEMENT*

STRATEGIC PLANNING PROCESS

Health Care

X •š o]•Z Æš v Z}µœ•]v • u vÇ o]v] o • «vP• • %œ Ÿ
 XProvide œ (}œ %œ Ÿ vš• Á]šZ}µš8 šZÀ]•]š•Ÿ}œµ]Z • eÀ]œšµ o Á
 consults, and home visits (making use of APPs) X
 XPlacing •%œ] o]•š• š • š d-Hil(Country, DeZavala, Gateway) may diminish
 šZ u v (}œ •%œ] ošÇ Á]•]š• š šZ D Z }œ <Ç o ^ o X
 XEstablish phone or online access to nurses š} šœ] P oo• v š} }+ œ u] o
 •š o]•Z %œ Ÿ vš• }(hd, WX
 X t}œ I Á]šZ h, š}]u%œÁ}LOSing create more in- %œ Ÿ vš •%œ X

^šœ š PÇ ĩW ' }Pœ %œZ] Æ%œ v•]}v Ç Establishing ze]wcPhios thAroughout] o •]š •X
 the }u uµv]šÇ Z • v À œÇ + ŸŸHP }vœ Á]š •U]v œœ ŸvP vthÁ %œ Ÿ vš•
 pœ Ÿ v]v]v œ •]vP šZ vµu œ X(œ (œœ o• š} •%œ] o]•š•

XProceed with Phase 2 expansion of the De Zavala Clinic v Z]œ (µošÇ v •š + (}œ
 exp v•]}v X
 XCreate u}œ o]v] %œ]šÇ š šZ D Z Ç u}À]vP • o š µœ
 Gateway and the Brain Health Building

a C•ù` 51D•€07 >-141A>c 0 Tw 3.152 0 Td [()-207.446J EMC .006 T5 -3.033 -1.2F019A>-4

i r d r P

X }vŸvμ Ā o}%u vš }(šZ

X À o}‰ CE o Ÿ}v•Z]‰• Á]šZµš u(µ]bš Ç %}‰}CE © CE u v P u v š } (K %‰ Ÿ v š• v v Z v š Z]CE š CE v•]Ÿ}v š} Z}u CE X

Strategy 3: •š o]•Z %‰ CE}À] CE 8 o]tñe}v•š Á}CEÆ %‰ Ÿ foš u}CE + Ÿ À }v š CE š v P}Provider•v š Á}CEI•]u‰ CE}À }CE]v Ÿ}v }(CE U]u‰ CE}À standardized protocols and out }u v <µ o]š Ç u š CE] •U š Z Ç]u‰ CE}À %‰ Ÿ v š CE XUse š Z v o Ç Ÿ to]v š Ÿ CE Ç %‰ CE}À] CE P CE}µ‰• š Z š .š Á]š Z š Z of UTHP X
XExecute 8 o] Ÿ between these groups and UTHP to enhance access and promote referrals X
XSelect š Z %‰ CE}‰ CEfor%data ž hñe]ng, CE <µ]CE]v P ••••u-of-use,}(• }u‰ Ÿ]o]š Ç Á]š Z À CE]}µ• DZ•U v }•š X

Strategy 4: Analyze the short-term and long-term Department (HOPD) rates at UT Health sites X}v À CE Ÿ v P š Z D Z /u and the Mayo Center to HOPD, (}CE Æ u‰ o U Á}µ o Z À %CE}u]Ÿ À }u]o]]š‰ š }v š Z CE À v } (š Z W CE Ÿ v U š Z CE CE v P Ÿ À }v• <µ v • š}Z Z CE Ÿ]v B•[KW‰ CE•š are higher U]v P (µ CE š Z CE .v v] o µ CE v v] Ÿ }š Z Z CE Ÿ v v B•Ÿ À }v• <µ v of HOPD rates is that it will increase the Medicare expenses for our K %‰ Ÿ v š•U u]v P]š u}CE]8 to reach shared savings X

XEstablish a Task Force to Á}CEI Á]š Z š Z v o Ç Ÿ conduct the analysis of }v À CE Ÿ %P](]o]Ÿ • š} ,KW v] v Ÿ (e] and long-term Z}CE š .v v] o]u‰ oš J •• Á•••]v P š Z CE %‰ µ š Ÿ v š Z }‰•}š µ v Ÿ o o}•• of GME support X

METRICS of SUCCESS - /• š Z v o Ç Ÿ • v š CE CE %‰}CE Ÿ v P <µ o]š Ç v }•š }uµv] Ÿ}v• Á]š Z Z}•‰]š o]•š• } µ CE CE]v P]v CEHasothě number of µ CE }u‰ CE }uµv]š Ç %‰ CE}À] CE 8 o] š •]v CE • M , • š Z v µ u CE }š haredK }À CE • Á]v P• (CE}u š Z š Z K M h d D ^ Z , }‰ v v Á Z š CE]š • u]••}v• }À o P}CE]š Z u• CE š (}CE š Z D ^ Z , M Á %‰}•]š HOPD will be implemented in appropriate clinic o} Ÿ}v•M /•]š .v v] o o Ç v .] o M

GOAL 4: CREATE A SUSTAINABLE PRACTICE

Strategy 2: À o µalšnew v AE ij•Ÿo]v] o %o CE}P CE u• š} v•µ CE µ š }Á v•š CE
v •µ•š]v X dZ] š CE u µ•š .v v] b h d} % CE CE š Ÿ CE v š P] e LSOM š foš }ll š Z
clinical programs and th š v .š u µ•š •µ•š]v o X

X Z À] Á o o o]v] to make sure they can generate self-µ•š]v]vP CE À v µ X
}v•] CE }%o%o}CE š µv]š Ç }•š•]v š Z]• CE À] Á X
X Similarly, new and µ CE CE v š o]v] o }%o CE Ÿ}v••Z}µ o CE À] Á š
Ÿ À] š Ç strategy(v .š š }LSZU (µ o .oo]vP µ o Ÿ}v•o d
v X

^š CE š P Ç ĩW v•µ CE }v Ÿ v µ]v P UTHP Á v (š Ÿ CE]µ š CE Ÿ X o

X h• (CE Ÿ}v }(š Z u CE P]v P- v % CE š o š Ç š Z CE d Ÿ Ÿ •%]š o
clinical enterprises in needed h d ,W]v (CE •š CE µ š µ CE X
X •š o]•Z <µ CE š CE o UTHP leaders tip to plan for infrastructure investment
which will inform the annual µ P š %o CE} ••X
X Generate business plans to assist in decision- u l]vP }v]v À •Ÿ v P]v]v (CE •š CE µ š µ
X © CE] µ Ÿ e-based care contract revenues, including TIPPs, š} š Z v Ÿ Ÿ • š Z š
P v CE š š Z]u X]oo µ P u v š š Z]o]š Ç }(š Z • •• v Ÿ o]v (O
grow, prosper, and ensu CE š Z •µ ••} (µ š µ CE h d ,^ v À}CE•X

METRICS of SUCCESS - CE (µ o š Ç v •š + © CE]Ÿ}v CE š É À o CE Ÿ}w•P M o CE CE %o Á
]u %o CE}À]v P M CE o}••• %o CE %o Ÿ v š À}o µ u CE •]v P]v •µ •]]
approved by the UTHP AE µ Ÿ À]CE š}CE M /• š Z u CE P]v (CE}u d /WW ^ © CE] µ š
]š M t Z š (CE Ÿ}v v u}µ v š }(š Z u CE P]v }(š Z h d D ^ Z,]•]v À •š]

Vision: UT , o š Z]o o š Z %o CE u] CE Z o š Z CE %o CE }
}u u µ v]Ÿ • }(v š CE o v ^}µ š Z d AE •

METRICS OF SUCCESS - Infrastructure, usage of cores should increase, and support should be clearly listed in the

GOAL 4: GROW CLINICAL AND TRANSLATIONAL RESEARCH THAT LEVERAGES OUR EXPANDING CLINICAL FOOTPRINT

- Strategy**
- íX Enhance processes for in-
 - îX Enhance processes for in-
 - ïX Enhance processes for in-
 - ôX Provide mentorship for junior translational scientists and pair them with successful P
 - óX Increase central support of
 - ôX Provide mentorship for junior translational scientists and pair them with successful P

]v({CE u š] • U /U v v oÇš] • • %o CE š }(//d•X

METRICS OF SUCCESS - Success will be measure by the number of faculty users of the above cores XThe number of %o μ o] and grants that acknowledge b]] v]]vPU o]]v] o }CE]]]v({CE u]}•š Ÿ•čres in a manuscript(1) funded on an external gran8 or contrac Á]oo ••The• X number of bio-• u%o • }oo š v šZ]CE μ• P Ç]vÁÁ•Ÿ•š}CE••μCE}•X h d The successful Á o}%o u v š }(u šZ} • š} vZ v š v oÇŸ • v šZ %o% intelligence will also be measured X

Strategy ð Xč À CE P šZ hd , ošZ DμoŸ]•]%o]v CE promote āinical CE Z ,}%o CE • CE Z v μŸo]š Ÿvcs]Q Ÿe 1981 CE 535 P 2002 => 102nteligerā o šCE] o• š} }+ CE îX Match bsic CE • CE Z CE•]v •%o].]• • š} îX CE š v À]P š}CE š} •šCE uo]v %o%CE}A

ð X

EDUCATION

Mission - We are committed to providing a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population. We are committed to providing a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population.

GOAL 1: BROADEN OPPORTUNITIES ON THE PATHWAY TO MEDICAL PRACTICE THAT DEEPEN OUR CONNECTION TO OUR COMMUNITIES

Strategy 1a: We will provide a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population.

Strategy 1b: We will provide a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population. We will provide a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population. We will provide a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population.

Strategy 1c: We will provide a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population. We will provide a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population. We will provide a high-quality, evidence-based education that prepares our graduates to meet the needs of our communities and to advance the health of the population.

METRICS OF SUCCESS -