



Blueprint for Academic Excellence in the USC SOM

USC SOM Strategic Plan

2009 - 2010

6 MARCH 2009

I. Vision, Mission, and Goals

A. Executive Summary and Mission Statement

Vision Statement

The USC SOM will be a highly regarded community-based medical school recognized for the quality of its educational, research, and service programs and their relevance to the needs of the citizens of South Carolina.

The SOM had its strongest entering class in history, significantly increased its research productivity, and expanded its clinical services.

Mission Statement

The mission of the USC SOM is to improve the health of the people of the state of South Carolina through medical education, research, and the delivery of health care. Allocation of resources reflects the health care needs of South Carolina with respect to healthcare providers and focused research as well as the requirements for accreditation by all appropriate organizations.

Education: Medical and graduate education are conducted in a highly personal atmosphere which emphasizes a balance between scientific disciplines, humanistic concerns, and societal needs and results in highly competitive, competent, caring graduates.

Medical student national board scores and residency match were excellent in 2007. Applications to the Ph.D. program more than doubled this year.

Research: Research in the basic biomedical sciences, in the clinical sciences, and in the delivery of health care is conducted to promote excellence in medical education, the development and application of new knowledge, and will be recognized as such by external entities.

Faculty maintained a strong presence in publications, and grant applications, and extramural expenditures were all up significantly in 2007-2008.

Service: Faculty members, both in the course of teaching and in order to maintain superior clinical skills, provide comprehensive outpatient and inpatient services to patients, consult with other physicians, other health care professionals and health care agencies throughout the state to improve the health of the state's citizens, and provide professional service to USC, the SOM, granting agencies, governmental organizations, professional societies, and the public.

Clinical services were expanded in needed areas (neurology, neurosurgery, pulmonary, and infectious disease). Faculty are heavily involved in professional services throughout the institution and nationally.

Goals

Educational

To provide educational programs of excellence for medical, graduate, and undergraduate students that are conducted in a highly personal atmosphere, utilize the latest in methodology and technology, and emphasize a balance between scientific discipline, humanistic concerns, and the needs of SC.

1. Address any past areas noted for improvement by the LCME reviews and prepare for LCME reaccreditation.
2. Explore ways to provide an innovative medical education curriculum to include exploring the use of innovative technology in the undergraduate curriculum.
3. Increase underrepresented minority recruitment of students and faculty.
4. Assess the outcome of elective time in the M-III year.
5. Expand the use of ultrasound technology in the medical student curriculum.
6. Expand collaborations between educational programs of the USC SOM, the main campus, MUSC, and GHS.
7. Expand student scholarships.
8. Expand faculty development programs.
9. Continue to demonstrate the quality of the education program and commitment to the mission of the SOM through numerous outcome measures from Board Scores to Student Residency choices.
10. The Office of Medical Education and Academic Affairs will be productive in the areas of research and other scholarly activity in medical education.
11. Improve USC SOM graduate education programs.
12. The Ph.D. Program in Biomedical Science will review its program size and continue to adjust student enrollment to match number of mentors, job market, applicant quality, and research resources.
13. The Ph.D. Program in Biomedical Science will review and modify, as needed, the core interdisciplinary biomedical science curriculum.
14. The Ph.D. Program in Biomedical Science will enhance its student recruitment process, by completing written recruitment materials (brochure and CD) and more numerous visits to targeted undergraduate colleges.
15. First- and second-year doctoral students in the Ph.D. Program in Biomedical Science will express satisfaction with program course work.
16. The Ph.D. Program in Biomedical Science, in collaboration with the Office of the Associate Dean for Basic Science, will continue long-range plans to ensure stable funding of stipends for doctoral students enrolled in year's three to five of the program.

17. The Ph.D. Program in Biomedical Science, in cooperation with the Associate Dean for Basic Science will work to develop a cooperative graduate program in Biomedical Science with other units of the University. The Vice President for Research and Health Sciences will be involved.
18. The Biomedical Science Graduate Committee will review and adjust as appropriate the number of students enrolled in the Master's Program in Biomedical Science in accord with the number and nature of positions available nationally for master's degree-prepared science graduates and the availability of research mentors.
19. The Biomedical Science Graduate Program will update its student recruitment process, including revision of written recruitment materials and computer website information and visits to targeted undergraduate colleges.
20. The SOM Office of Graduate Studies will continue implementation of a current applicant/student/graduate database for the Master's Program in Biomedical Science similar to that of the Ph.D. Program, including information regarding student satisfaction with the program, time to employment following degree receipt, and employer satisfaction.
21. Students enrolled in the Master's Program in Biomedical Science will express satisfaction with program course work.
22. Graduates will demonstrate clinical competency in communications skills, critical thinking skills, counseling and psychosocial assessment skills, and professional ethics and values as defined by the American Board of Genetic Counseling.
23. Graduates will possess the ability to apply, conduct, and/or synthesize research in clinical genetics and genetic counseling within their professional practices.
24. Course work and clinical rotation experiences will continually strive to maintain focus on the most important aspects of training genetic counselors and incorporating advances in clinical genetics, as needed.
25. At the time of their graduation, students will express satisfaction with the Master's Program in Genetic Counseling and the level of preparation provided for genetic counseling practice.
26. Graduates and their employers will express satisfaction with graduates' preparation in the program for eventual clinical practice.
27. Graduates will achieve certification by the American Board of Genetic Counseling within two examination cycles of graduation.
28. Graduates will provide a significant proportion of the genetic counseling services in South Carolina and the southeastern United States.
29. On average, students of the Master's Program in Nurse Anesthesia will express satisfaction with didactic instruction in their program.
30. On average, graduates from the Master's Program in Nurse Anesthesia will pass the National Certification Examination in Nurse Anesthesia on their first attempt at a rate at or above that for all nurse anesthesia students nationally.

31. In collaboration with the American Association of Nurse Anesthesia (AANA) and the South Carolina Association of Nurse Anesthetists (S.C.A.N.A.), the Master's Program in Nurse Anesthesia will enhance its recruitment process in order to increase the overall number of applicants to the program and to improve the quality of the applicant pool.
32. The Master's Program in Nurse Anesthesia will continue investigating the feasibility of expanding the program to additional training sites.
33. The Master's Program in Nurse Anesthesia will collaborate with personnel in the SOM Office of Medical Education and Academic Affairs and the SOM Alumni Office to continue to collect data about alumni satisfaction with the program, alumni employment, and employer satisfaction with program graduates.
34. Graduates of the 2006-2007 (and continued for 2007-2008 and 2008) Master's Program in Rehabilitation Counseling will assess positively the quality of their professional preparation in the program.
35. Program faculty and staff will continue to develop an effective alumni tracking system in collaboration with personnel in the USC SOM Alumni Office and the Office of Medical Education and Academic Affairs.
36. Program graduates will continue to achieve success on national Rehabilitation Counseling certification examinations and state Licensed Professional Counselor licensing examinations at or above national and state pass rates, respectively.
37. The Master's Program in Rehabilitation Counseling and the Certificate of Graduate Study in Psychiatric Rehabilitation will continue to recruit and admit five distance education students in the 2005-2006 academic year (and will continue to be assessed for AY 2006-2007 and 2007-2008).
38. The Master's Program in Rehabilitation Counseling will continue to enhance its student recruitment activities.
39. Faculty will actively work with agencies employing Program graduates to explore potential places for rehabilitation counseling and graduates within their agencies. This exploration will include pay rates and career ladders.
40. Continue to participate in the training of professionals in South Carolina agencies through the development of training contracts, offering of continuing education training options, and professional development contracts.

Research

To promote and conduct discipline-specific as well as multidisciplinary biomedical science, clinical science, and health services research in focused areas of special need in SC.

1. Develop a progressive research agenda as part of USC SOM Strategic Plan.
2. Foster research with USC SOM Research Development Fund as vehicle for dispersal of seed grant funds to faculty.
3. Increase the number of proposals for extramural funding by 5% over 2006-2007 levels and increase extramural funding by 5 % over 2006-2007 levels.

4. Increase the number of scholarly publications by 5% from previous calendar year.
5. Expand clinical research base through development of clinical programs.

Service

To provide comprehensive outpatient and inpatient services to patients in SC in consultation with other physicians, other health care professionals, and health care agencies, and to provide professional service to USC, the SOM, granting agencies, governmental organizations, professional societies, and the public.

1. Improve the structure and function of University Specialty Clinics.
2. Implement the USC SOM-PHA Billing Compliance Plan.
3. Continue to develop Primary Care services within USC SOM.
4. Expand specialty services in University Specialty Clinics.
5. Upgrade USC SOM clinical facilities.
6. Expand relationships between University Specialty Clinics and Palmetto Health.

Administrative

To provide and support quality facilities, equipment, faculty, and staff necessary to achieve the USC SOM educational, research, and service goals.

1. Expand fundraising activities in the SOM.
2. Increase foundations/corporations giving to the SOM.
3. Increase planned giving to the SOM.

B. Goals, Initiatives, and Action Plans

Educational

1. Address any areas noted for improvement by the LCME reviews and prepare for LCME reaccreditation.

Initiative: The SOM will engage in extensive self-study and preparation for LCME reaccreditation.

Action Plan: LCME accreditation site visit completed February 11, 2009. Official report expected June 2009. **Goal modified** to address any areas noted for improvement by the LCME. Indicator: successfully address areas needing improvement.

2. Explore the use of innovative technology in the undergraduate curriculum. **This goal is continued from previous Blueprint.**

Initiative: Charge the Office of Curricular Affairs and Faculty Support to explore the use of innovative technologies, such as audience response systems, in the undergraduate curriculum.

Action Plan: Streaming media pod casts will be expanded to the M1 curriculum and an audience response system will be used in several M1 and M2 courses starting in the fall of 2009. Indicator: report of the Office of Curricular Affairs and Faculty Support.

3. Increase underrepresented minority recruitment of students and faculty. **This goal is modified from previous Blueprint.**

Initiative: Charge the Office of Admissions and the Office of Minority Affairs to continue to develop programs to track and recruit underrepresented minority students and faculty to the SOM.

Action Plan: Increase the number of competitive medical student applications submitted by underrepresented minority students through the annual Minority Pre-Medical Conference, the "Nurturing the Pipeline" initiative with two historically Black colleges, and assuring that admission and scholarship offers are made as early as possible following Admission Committee vote and Dean approval, providing a separate second-look visit, and facilitating increased contact between medical students and possible matriculants. The Office of Admissions and the Office of Minority Affairs will participate in the AAMC Faculty Forward initiative of which the USC SOM is one of 25 schools nationally studying the working environment in Academic Medicine and developing best practices for recruiting and retaining faculty. Indicator: report of the Office of Admissions, the Office of Minority Affairs, and the Office of CME and Faculty Development.

4. Assess the outcome of elective time in the M-III year. **This goal is modified from previous Blueprint.**

Initiative: Charge the Office of Medical Education and Academic Affairs to work with the Curriculum Committee and clerkship directors to develop a plan to incorporate elective time into the M-III curriculum.

Action Plan: For the 2008-2009 academic year, third-year students will have four weeks of elective time. Elective time needs to be assessed as to the quality of the electives, student satisfaction and effects on subject examinations and Board scores. Indicator: report of the Office of Medical Education and Academic Affairs.

5. Expand the use of ultrasound technology in the medical student curriculum. **This goal is continued from previous Blueprint.**

Initiative: Explore opportunities for the expansion of using ultrasound technology in both basic science courses as well as clinical rotations.

Action Plan: The number of ultrasound laboratory sessions for the M1s and M2s has been increased and the Department of Surgery has introduced an ultrasound OSCE in their clerkship. Additional uses of ultrasound in the curriculum will be pursued. Indicator: report of the Office of Medical Education and Academic Affairs.

6. Expand collaborations between educational programs of the USCSOM, the main campus, MUSC, and GHS. **This goal is continued from previous Blueprint.**

Initiative: Develop a plan as part of the LCME self-study to initially increase class size from 85 to 100 students per year. The plan should consider an increase in the number of students completing their clinical years three and four in the GHS from 25 to 40 per year.

Action Plan: The AAMC expansion template has been submitted to the LCME and was part of the LCME site visit in February 2009. Official approval for class expansion should be received in June 2009. Ultrasound OSCEs are now being administered in Greenville. Discussions are underway with the Moore School of Business to create business/management courses for medical students. Indicator: report of the Office of Medical Education and Academic Affairs.

7. Expand student scholarships. **This goal is continued from previous Blueprint.**

Initiative: Charge the Office of Development to identify resources for additional scholarships from development initiatives with a particular focus on scholarships for underrepresented minority students. Continue to pursue NIH training grants.

Action Plan: The Dargan Scholarship due to the efforts of Fundraiser Steering Committee is close to being fully endowed. A graduate school track record is being established to position the University to apply for NIH training grants. Due to the budget shortage these activities have been slowed significantly. Indicator: report of the Office of Development and the Associate Dean for Basic Science and the Director of Graduate Studies.

8. Expand faculty development programs. **This goal is continued from previous Blueprint.**

Initiative: Charge the Office of CME and Faculty Development to initiate new programs in the areas of faculty teaching skills and/or clinical research.

Action Plan: The Office of CME completed its re-accreditation process this year and is awaiting an official report. Through the Office of CME and Faculty Development, the USC SOM has joined 24 other medical schools in the AAMC's Faculty Forward initiative to study and develop best practices for the working environment of academic medicine. Indicator: report of the Office of CME and Faculty Development.

9. Continue to demonstrate the quality of the education program and commitment to the mission of the SOM through numerous outcome measures from Board Scores to Residency choices. **This goal is modified from previous Blueprint.**

Initiative: Charge the Office of Medical Education to track all student outcomes with respect to National Board Scores, Residency Matching, survey of students and graduates of the quality of their education, assessment of graduates by their residency directors, and Board Certification rate of graduates.

Action Plan: all relevant data of the quality of the education program and student and graduate outcomes will be shared with the curriculum committee annually so that appropriate changes can be made to the curriculum as needed. Data from this academic year shows that students and graduates are pleased with their education and outcome measures demonstrate that students and graduates are

at or above the national averages for virtually all measures. Indicator: report of the Office of Medical Education.

10. The Office of Medical Education and Academic Affairs will be productive in the areas of research and other scholarly activity in medical education. **This goal is continued from previous Blueprint.**

Initiative: Expand medical education research collaboration and research opportunities especially with other USC SOM departments, USC health professions schools, and GHS.

Action Plan: Submission of at least two articles or abstracts for publication and one grant concerning medical education. For this academic year, four articles, two abstracts, and two education grants were submitted by faculty in the Office of Medical Education and Academic Affairs. Indicator: report of the Office of Medical Education and Academic Affairs.

11. Improve USC SOM graduate education programs. **This goal is continued from Blueprint.**

Initiative: The doctoral program in biomedical sciences at the School of Medicine has now combined with similar programs in the Departments of Biology, Chemistry, and Psychology, the College of Pharmacy, and the School of Public Health to form the University of South Carolina Integrated Biomedical Sciences Graduate Program. In this, the School of Medicine has taken the lead role and will be the largest participant in the program. Funding has come from the component schools and from the Provost and the Graduate School.

Action Plan: The first students were admitted in fall 2008. A new web site for information and electronic application has been established and a brochure and poster are in preparation. A record number of applications have been received for the new program which will admit approximately 24 students (as opposed to 8-10 in the former School of Medicine) program. These students will have the opportunity to work in more than 80 laboratories (as opposed to about 25 in the former School of Medicine program). New courses are being developed for the core curriculum.

A new admissions committee has been set up and applications are being reviewed. Databases of applicants, matriculants and alumni of the combined programs are being set up.

The Graduate Directors of the component departments/schools have set a goal of submitting a predoctoral training grant early in calendar 2009 when the program has been established and the first students admitted.

Because of the large number of minority students in South Carolina and their underrepresentation in biomedical graduate programs nationwide, the graduate programs of the component departments/schools have set up a post-baccalaureate education program to prepare minority students for graduate school and the South Carolina Initiative for Minority Education to support these students once in graduate school at the University of South Carolina. Both of these programs are already supported by five-year NIH grants.

12. The Integrated Biomedical Science Ph.D. Program will review its program size and continue to adjust student enrollment to match number of mentors, job market, applicant quality, and research resources. **This goal is continued from previous Blueprint.**

Initiative: The number of students admitted was determined by the Graduate Directors of the integrated program and the size of the available stipend budget. The latter was greatly increased because of administration funding of the new program. For Fall 2008, the program received almost 200 applications. Approximately forty applicants were interviewed, either personally or by phone. Twenty six accepted our offer. This included a record seven minority students (two Hispanics and five African Americans).

Action Plan: In fall 2009, the University of South Carolina School of Medicine Biomedical Sciences Ph.D. program will continue to be the largest part of the University Integrated Biomedical Sciences Graduate Program which will admit approximately 24 students. The actual number will depend on budget restrictions. A steering/admission committee of the integrated program has been formed. This consists of the Graduate Directors of the participating departments and schools. The steering committee will continue to review program size and resources. In 2009, the steering committee will prepare and submit an NIH training grant application.

13. The Ph.D. Program in Biomedical Science will review and modify, as needed, the core interdisciplinary Biomedical Science curriculum. **This goal is continued from previous Blueprint.**

Initiative: The Graduate Directors continued to review the curriculum. The new Ethics course was added in the fall of 2007 (Course Director: Dr Edie Goldsmith) and the Interdisciplinary Laboratory course (Course Director: Dr Troy Baudino) was revised in 2008. As a result of the integration of the School of Medicine Graduate Programs with those of Psychology, Exercise Science, Biology, Biochemistry, and Pharmacy, a complete review of the core curriculum has been undertaken. A revised cell biology course taught by faculty from across the campus started in spring 2009. A new course, Research in Biomedical Science, intended to familiarize our new students with research in the university was added in fall 2008.

In association with the Moore School of Business, a new dual degree consisting of the PhD in Biomedical Sciences and a Professional Master of Business Administration is being assessed for potentially starting in the fall of 2009.

Action Plan: The Biomedical Science Graduate Committee will continue to assess and revise the core interdisciplinary Biomedical Science curriculum as needed. New courses will be discussed. New course data for the core of the central program and for the individual departments will be discussed and approved and will be posted on the program's website.

14. The Ph.D. Program in Biomedical Science will enhance its student recruitment process, by completing written recruitment materials (brochure and poster) and more numerous visits to targeted undergraduate colleges. **This goal is continued from previous Blueprint.**

Initiative: Because of the integration of the School of Medicine Graduate Program into the USC Integrated Biomedical Science program, a new web site was created and efforts were made to get greater prominence on major search

engines. As a result, the Biomedical Science Graduate Program now routinely ranks in the top eight biomedical science programs on a Google search. A new brochure featuring the research of the more than 90 faculty participating in the integrated program is under development. A poster has been designed and is being printed. It, along with the brochure, will be sent to undergraduate colleges nationwide. The faculty has also been promoting the new program when visiting other schools.

Action Plan: The Biomedical Science Graduate Committee will complete work on new recruitment materials. The Graduate Director will make visits to surrounding colleges to publicize the USC SOM Graduate Program.

15. First- and second-year doctoral students in the Ph.D. Program in Biomedical Science will express satisfaction with program course work. **This goal is continued from previous Blueprint.**

Initiative: At the conclusion of the academic year, 75% of first- and second-year doctoral students will express satisfaction regarding the quality of doctoral course work, in the range of “good” to “excellent,” on SOM Office of Curricular Affairs and Faculty Support forms designed for that purpose.

Action Plan: All students expressed satisfaction with the program. The Graduate Directors need to obtain data on the other courses required of our students including those offered by other departments. A web-based mechanism will be developed to ascertain overall satisfaction at the end of the first semester and the first year.

16. The Ph.D. Program in Biomedical Science, in collaboration with the Office of the Associate Dean for Basic Science, will continue long-range plans to ensure stable funding of stipends for doctoral students enrolled in year’s three to five of the program. **This goal is continued from previous Blueprint.**

Initiative: The integration of the School of Medicine Graduate Program with those in the biomedical field on the main campus resulted in a request to the USC Administration for financial support. The building of a better integrated program will lead to the development of a training grant proposal. The support of minority students currently comes from individual grants and the Sloan Foundation. In addition potential minority applicants are supported through the PREP grant with the Biology Department. An IMSD proposal to the NIH has been funded that supports minority students in the graduate program as well as undergraduate and summer students. The submission of an NIH training grant application will occur in 2009.

Action Plan: The Associate Dean for Medical Education and Academic Affairs, the Associate Dean for Basic Science, and the Director of the Biomedical Science Graduate Program will work collaboratively with chairs of SOM basic science departments and personnel at SOM affiliated institutions to ensure that long-term, stable funding continues to be available to support doctoral students in years three to five of the Ph.D. Program in Biomedical Science. Cooperation will continue with the Department of Biological Sciences to obtain funds to support minority graduate students.

17. The Ph.D. Program in Biomedical Science, in cooperation with the Associate Dean for Basic Science will work to develop a cooperative graduate program in Biomedical Science with other units of the University. The Vice President for

Research and Health Sciences will be involved. **This goal is continued from previous Blueprint.**

Initiative: The new integrated program is now in its second year and is actively students.

Action Plan: Appropriate members of the School of Medicine and the University will work together to outline a University wide graduate program in Biomedical Science.

18. The Biomedical Science Graduate Committee will review and adjust as appropriate the number of students enrolled in the Master's Program in Biomedical Science in accord with the number and nature of positions available nationally for master's degree-prepared science graduates and the availability of research mentors. **This goal is continued from previous Blueprint.**

Initiative: The Biomedical Science Graduate Committee will review the enrollment plan addressing the number of students enrolled in the Master's Program in Biomedical Science.

Action Plan: The number of students admitted was determined by the Graduate Directors. For fall 2008, the program received 56 applications. Eight applicants were interviewed. Six accepted our offer. The Graduate Directors will continue to monitor the number of faculty who are able to support MBS Students and adjust the number of admissions accordingly.

19. The Biomedical Science Graduate Program will update its student recruitment process, including revision of written recruitment materials and computer website information and visits to targeted undergraduate colleges. **This goal is continued from previous Blueprint.**

Initiative: The Biomedical Science Graduate Committee will complete work on new recruitment materials, which will include a printed brochure. The Graduate Director will make visits to surrounding colleges to publicize the USC SOM Graduate Program.

Action Plan: Because of the integration of the School of Medicine Graduate Program into the USC Integrated Biomedical Science program, a new web site was created and efforts were made to get greater prominence on major search engines. As a result, the Biomedical Science Graduate Program now routinely ranks in the top eight biomedical science programs on a Google search. A new brochure featuring the research of the more than 90 faculty participating in the integrated program is under development and a poster have been designed and printed. These will be sent to undergraduate colleges nationwide. The faculty has also been promoting the new program when visiting other schools.

20. The SOM Office of Graduate Studies will continue implementation of a current applicant/student/graduate database for the Master's Program in Biomedical Science similar to that of the Ph.D. Program, including information regarding student satisfaction with the program, time to employment following degree receipt, and employer satisfaction. **This goal is continued from previous Blueprint.**

Initiative: The SOM Office of Graduate Studies will update and modify its database as required.

Action Plan: The graduate office now tracks the student satisfaction with the program (also the students meet annually and individually with the graduate director). We keep records of the placement of our students. Determination of employer satisfaction where appropriate needs to be put into effect.

21. Students enrolled in the Master's Program in Biomedical Science will express satisfaction with program course work. **This goal is continued from previous Blueprint.**

Initiative: At the conclusion of each semester, 75% of master's degree students will express satisfaction, in the range of "good" to "excellent," regarding the quality of graduate course work on SOM Office of Curricular Affairs and Faculty Support forms designed for that purpose.

Action Plan: Interviews were held with all students at the end of their first semester. A web-based mechanism will be developed to ascertain overall satisfaction at the end of the first semester and the first year.

22. Graduates will demonstrate clinical competency in communications skills, critical thinking skills, counseling and psychosocial assessment skills, and professional ethics and values as defined by the American Board of Genetic Counseling. **This goal is continued from previous Blueprint.**

Initiative: Graduates in the Class of 2008 will successfully complete didactic course work and clinical rotation experiences with an average grade of 3.0 or more.

Action Plan: All six students graduated with an average grade of 3.0 or more.

23. Graduates will possess the ability to apply, conduct, and/or synthesize research in clinical genetics and genetic counseling within their professional practices. **This goal is continued from previous Blueprint.**

Initiative: All graduates will complete the Master of Science research requirement, demonstrating the ability to apply, conduct, and synthesize research in clinical practice.

Action Plan: All six graduates completed the thesis research requirement.

24. Course work and clinical rotation experiences will continually strive to maintain focus on the most important aspects of training genetic counselors and incorporating advances in clinical genetics, as needed. **This goal is continued from previous Blueprint.**

Initiative: 2007-2008 courses and clinical rotations, as well as the instructors and clinical supervisors, will be assessed as "good" to "excellent" on relevant SOM forms by at least 75% of students.

Action Plan: Course and faculty evaluations assessed in range of good to excellent by students consistently.

25. At the time of their graduation, students will express satisfaction with the Master's Program in Genetic Counseling and the level of preparation provided for genetic counseling practice. **This goal is continued from previous Blueprint.**

Initiative: At the time of graduation, in exit interviews and on exit assessment forms, 75% of 2007 and future graduates will express satisfaction, in the range of “good” to “excellent,” with the quality of didactic program content and with their opportunities to develop sufficient clinical competencies to make application for certification by the American Board of Genetic Counseling.

Action Plan: All 2008 graduates expressed overall satisfaction with didactic and clinical curriculum content, per exit interview and graduate survey data.

26. Graduates and their employers will express satisfaction with graduates’ preparation in the program for eventual clinical practice. **This goal is continued from previous Blueprint.**

Initiative: 75% of graduates and 75% of their employers will express, on SOM alumni and employer satisfaction forms after graduates’ completion of the program, satisfaction, in the range of “good” to “excellent,” with the quality of graduates’ preparation for clinical practice.

Action Plan: Survey of graduates and employers in fall 2005 noted overall satisfaction with graduates’ preparation.

27. Graduates will achieve certification by the American Board of Genetic Counseling within two examination cycles of graduation. **This goal is continued from previous Blueprint.**

Initiative: 80% of graduates will have achieved certification as genetic counselors by the American Board of Genetic Counseling within two examination cycles after their dates of graduation.

Action Plan: 2007 American Board of Genetic Counseling Examination pass rate 100% on general examination, 94% genetic counseling examination; next examination offered in 2009.

28. Graduates will provide a significant proportion of the genetic counseling services in South Carolina and the southeastern United States. **This goal is continued from previous Blueprint.**

Initiative: More than half of genetic counselor positions in South Carolina will be held by graduates of the SOM Master’s Program in Genetic Counseling, and more than half of program graduates currently in practice will hold positions in the southeastern United States.

Action Plan: 70% (14/20) positions in South Carolina held by USC graduates; 61% (58/95) of practicing graduates hold positions in southeastern United States.

29. On average, students of the Master’s Program in Nurse Anesthesia will express satisfaction with didactic instruction in their program. **This goal is continued from previous Blueprint.**

Initiative: At the conclusion of 2008, students in the Master’s Program in Nurse Anesthesia will express satisfaction with the quality of program course work, in the range of “good” to “excellent,” on SOM Office of Curricular Affairs and Faculty Support forms designed for that purpose.

Action Plan: For 2008, the average overall rating by students of thirteen courses in the Master’s Program in Nurse Anesthesia was 4.33 on a 5-point scale

(1=poor, 2=marginal, 3=average, 4= good, 5=excellent). Report of the Academic Director for the program.

30. On average, graduates from the Master's Program in Nurse Anesthesia will pass the National Certification Examination in Nurse Anesthesia on their first attempt at a rate at or above that for all nurse anesthesia students nationally. **This goal is continued from previous Blueprint.**

Initiative: Annual National Certification Examination in Nurse Anesthesia data will reveal that members of the 2008 graduating class from the Master's Program in Nurse Anesthesia passed that examination at a rate at or above that of all nurse anesthesia students nationally.

Action Plan: For the class of 2008, 26 of 28 (93%) anesthesia program graduates passed the National Certification Examination on the first attempt; the national average was 93%. Two 2008 anesthesia graduates passed the exam on the second attempt. The Council on Accreditation notified the program in November 2008 that our 2007 pass rate exceeded both the mandatory threshold of 74% and the preferred pass rate of 84%. Report of the AANA on National Certification Examination.

31. In collaboration with the American Association of Nurse Anesthesia (AANA) and the South Carolina Association of Nurse Anesthetists (S.C.A.N.A.), the Master's Program in Nurse Anesthesia will enhance its recruitment process in order to increase the overall number of applicants to the program and to improve the quality of the applicant pool. **This goal is continued from previous Blueprint.**

Initiative: Comprehensive plans for student recruitment will continue during the 2008 academic year. The goals of this expanded recruitment effort will be to continue to increase the visibility of the program in the state and region, increase communication with hospitals and graduate nurses, and increase awareness of professional opportunities in nurse anesthesia.

Action Plan: The clinical skills training and simulation experience have been expanded and improved with the recent opening of the Center for the Advancement of Health & Patient Safety at the Richland campus. The target number of thirty qualified matriculants was achieved from an applicant pool of 111. For applicants, the average verbal GRE was 477, the average and quantitative GRE was 569. For matriculants, the average verbal GRE was 505 and the average quantitative GRE was 616. All matriculants had the required minimum one year of critical care nursing experience.

32. The Master's Program in Nurse Anesthesia will continue investigating the feasibility of expanding the program to additional training sites. **This goal is continued from previous Blueprint.**

Initiative: The PPN chair, the Clinical Director, and the Academic Director of the Master's Program in Nurse Anesthesia initiated a series of negotiations to expand the program by adding Greenville Hospital System University Medical Center as an additional required clinical site. A grant was submitted to HRSA NEPR program to support distance education infrastructure for this expansion.

Action Plan: The current pool of clinical training sites now provides adequate numbers and varieties of anesthesia cases to satisfy certification requirements for all students. Report of the Academic Director of the program.

33. The Master's Program in Nurse Anesthesia will collaborate with personnel in the SOM Office of Medical Education and Academic Affairs and the SOM Alumni Office to continue to collect data about alumni satisfaction with the program, alumni employment, and employer satisfaction with program graduates. **This goal is continued from previous Blueprints and is ongoing.**
- Initiative: In collaboration with personnel in the SOM Office of Medical Education and Academic Affairs and the SOM Alumni Office, the Master's Program in Nurse Anesthesia will continue its current alumni tracking, alumni employment, and employer satisfaction data collection efforts.
- Action Plan: All 2008 graduates obtained employment in their area of training. Surveys of satisfaction of graduates and employers were conducted for the upcoming accreditation in spring of 2009. Report of the Academic Director of the program.
34. Graduates of the 2006-2007, 2007-2008, and 2008 Master's Program in Rehabilitation Counseling will assess positively the quality of their professional preparation in the program. **This goal is continued from previous Blueprints and is ongoing.**
- Initiative: Program graduates will assess the quality of their professional preparation, in the range of "good" to "excellent," on forms designed for that purpose. Surveys were distributed with only a 10% return rate.
- Action Plan: Results of the survey of graduates. The Graduate Survey was revised in 2008 to better reflect the changing professional roles of rehabilitation counseling. A database was compiled to better track graduates over the past three years. The new Graduate Survey will be distributed in June 2009 to graduates of the past three years at its regular time in March. Results will be available in September, 2009.
35. Program faculty and staff will continue to develop an effective alumni tracking system in collaboration with personnel in the USC SOM Alumni Office and the Office of Medical Education and Academic Affairs. **This goal is continued from previous Blueprints and is ongoing.**
- Initiative: Program faculty and staff will work collaboratively with personnel in the USC SOM Alumni Office and the Office of Medical Education and Academic Affairs to continue an effective alumni tracking system. This system will assist faculty to continue to assess effectively job placement rates, certification and licensure status, and continuation of education of program graduates.
- Action Plan: The database has been developed and information pertaining to new students and graduates has been entered. Data on graduates of Program over past three years was entered prior to the end of the Spring semester. Project **was** completed by June 2008. However, changes in the Graduate Schools data collection system has made some of the new process redundant. Modifications to the existing system will be made to avoid duplication of effort. Report of the Academic Director of the program.
36. Program graduates will continue to achieve success on national Rehabilitation Counseling certification examinations and state Licensed Professional Counselor licensing examinations at or above national and state pass rates, respectively. **This goal is continued from previous Blueprints and is ongoing.**

Initiative: 2005 and future graduates of the Master's Program in Rehabilitation Counseling eligible for the Certified Rehabilitation Counselor Examination and/or for state licensure as a Licensed Professional Counselor will achieve scores on relevant certification and licensure examinations at or above the average scores achieved by applicants for certification nationally or by applicants for licensure in South Carolina.

Action Plan: Approximately 38% of graduates in years 2007 and 2008 have taken the national certification exam or the counselor licensure exam in South Carolina or North Carolina. Of those graduates taking the exams, 90% passed on the first testing and the remaining passed on the second examination. Report of the Academic Director of the program.

37. The Master's Program in Rehabilitation Counseling and the Certificate of Graduate Study in Psychiatric Rehabilitation will continue to recruit and admit five distance education students in the 2005-2006 academic year and future AY. **This goal is continued from previous Blueprints and is ongoing.**

Initiative: Students will be actively recruited through the Extended Campus Program and related recruitment activities.

Action Plan: The MRC program has admitted students in 2006-2007. The Certificate Program admitted eight students in 2007-2008. All but one of these students are completing more than half their programs in distance education format. An additional 20 students are expected to be admitted by Fall, 2008. These students were primarily distance education students. This pattern is expected to continue through 2010 due to the availability of new scholarships. Recruitment efforts have been developed to increase the number of students completing their degrees on campus. Report of the Academic Director of the program.

38. The Master's Program in Rehabilitation Counseling will continue to enhance its student recruitment activities. **This goal is continued from previous Blueprint and ongoing.**

Initiative: Program faculty will continue to participate in University and School of Medicine-wide recruitment activities.

Action Plan: Quality and quantity of applicant pool. Several courses have been developed at the Undergraduate and Ph.D. level to increase enrollment in Certificate programs and ultimately the MRC Program. These courses are in the Graduate School approval process. In addition, two graduate certificate programs have been developed under funding from the South Carolina Vocational Rehabilitation Department and the South Carolina Department of Mental Health. These new programs will substantially increase enrollment and are expected to draw more students to the campus for their coursework. Space was added in spring, 2008 to include areas for clinical practice and additional teaching space. Plans for the expansion of new curriculum expansion have been resumed with plans to expand course offerings substantially by June 2009. Two Graduate Certificate Programs will be enter the approval process, a 60 credit hour Masters of Arts degree will be proposed, and a collection of undergraduate courses will be developed.

39. Faculty will actively work with agencies employing Program graduates to explore potential places for rehabilitation counseling and graduates within their agencies.

This exploration will include pay rates and career ladders. **This goal is continued from previous Blueprint and ongoing.**

Initiative: Increase education of agency personnel about the role and function of rehabilitation counselors through presentations, the distribution of written material, and faculty and student involvement in community service activities. Program will establish a contractual arrangement with State agencies for rehabilitation curriculum development and staff training services.

Action Plan: Faculty has continued to be actively involved in staff training activities in agencies around the state. Staff training has been offered to employees of South Carolina Vocational Rehabilitation Department, South Carolina Department of Mental Health and three local Mental Health Centers, and Lexington Richland County Alcohol and Drug Abuse Centers. Contractual arrangements exist with SCVRD, DMH, and the South Carolina Commission for the Blind.

40. Continue to participate in the training of professionals in South Carolina agencies through the development of training contracts, offering of continuing education training options, and professional development contracts. **This goal is continued from previous Blueprint and ongoing.**

Initiative: Meet with agency staff to discuss training needs, develop curricula, and negotiate training schedules.

Action Plan: Established contracts and agreements. Three training contracts were developed with the South Carolina Department of Mental Health, one with South Carolina Vocational Rehabilitation Department, and one with the South Carolina Commission for the Blind.

Research

1. Develop a progressive research agenda as part of USC SOM Strategic Plan. **This goal is continued from previous Blueprint.**

Initiative: Charge a Task Force on Research Expansion to conduct strategic planning process for basic and clinical research incorporating significant faculty participation and input. Topics to include strategies for faculty recruitment, increased collaboration between basic science and clinical researchers and between SOM and main campus researchers, increased collaboration between USC SOM, MUSC, GHS and MCG researchers, efficient utilization of basic science and clinical research space, replacement and upgrade of research equipment.

Action Plan: Utilize strategic planning task force to develop plans for research expansion at the USC SOM. Indicators: Report of Task Force Chair. Progress: Interim report has been provided by Chair of Research Task Force. Goal will be retired when Task Force Report is provided.

2. Foster research with USC SOM Research Development Fund as vehicle for dispersal of seed grant funds to faculty. **This goal is continued from previous Blueprint.**

Initiative: Use USC SOM Research Development Fund as vehicle for dispersal of seed grant funds to faculty for development of new research proposals. Focus

support on (a) innovative collaborative grant applications and (b) translational research to foster basic science – clinical science collaboration.

Action Plan: Call for research proposals from School of Medicine faculty and fund best applications that will result in innovative collaborative grant applications (such as program projects) to extramural agencies. Indicators: Funding from Research Development Fund. Progress: Four Research Development Fund proposals were awarded for a total of \$80,000. This level of funding is significantly reduced from previous years, but there are no plans to retire the Research Development Fund or this goal.

3. Increase the number of proposals for extramural funding by 5% over 2006-2007 levels, and increase extramural funding by 5% over 2006-2007 levels. **This goal is modified from previous Blueprint.**

Initiative: Support faculty involvement in program projects and center grants. Support recruitment of new junior faculty. Recruit funded investigators in Basic Sciences and Clinical Sciences departments.

Action Plan: Assist in developing collaborative faculty projects, providing central administrative funds as appropriate when available. Assist departments in recruitment of funded investigators, providing central administrative funds as appropriate when available. Indicators: Number of proposal submissions and amount; Level of extramural funding. Progress: Number of applications increased, with 175 in 2006-2007 and 224 in 2007-2008. Total proposal requests for FY 2007-2008 was \$52,104,556 compared with the previous fiscal year amount of \$48,735,238. Based on total awards, research and contract awards increased from \$34,883,041 in the previous year to \$39,838,549 this past year. Target increases in this goal have been reduced given severe reduction in institutional funding.

4. Increase the number of scholarly publications by 5% from previous calendar year. **This goal is continued from previous Blueprint.**

Initiative: Encouragement of faculty to submit publications by Department Chairs, and placement of requirements for publications in teaching and research award programs, and both tenure and promotion and appointment and promotion guidelines.

Action Plan: Track number of scholarly publications an calendar year basis. Indicators: Number of scholarly publications. Progress: The total for calendar year 2007 was 460. The total for calendar year 2008 was 210, which represents a 54% decrease. However, the number for 2007 was an anomaly, as prior years averaged about 225. In addition, 40 books/chapters were published, and faculty gave 240 academic presentations in 2008. Target increase in this goal has been reduced given severe reduction in institutional funding.

5. Expand clinical research base through development of clinical programs. **This goal is continued from previous Blueprint.**

Initiative: Develop new subspecialty divisions or departments with associated research and scholarship programs.

Action Plan: Work jointly with Palmetto Health Richland and/or Dorn VA Medical Center to establish new subspecialty divisions or departments. Utilize state CoEE Endowed Chairs program to assist in recruitment of division chiefs or

department chairs. Indicators: Written plan or Pro Forma for creation of new division or department; Recruitment division or department chairs. Progress: Previous strategic planning for expansion of geriatric services and research has led to successful award of state CoEE Endowed Chair and FEI awards from Provost and faculty searches are underway. Division of Neurosurgery currently attempting recruitment of first Ph.D. faculty researcher. Anticipate this goal will continue for several years into the future.

Service

1. Improve the structure and function of University Specialty Clinics. **This goal is continued from previous Blueprint.**

Initiative: The Chief Operating Officer has been integrated into the practice plan and is providing oversight, direction and guidance for all clinical departments. His primary focus is to align all business and clinical functions of the SOM clinical departments in order to achieve optimum effectiveness and efficiency including centralize management for two additional clinical departments (which will bring to 8 units that are using a common server). Customer service excellence seminars will continue to be offered to all clinical departments.

Action Plan: Patient care fee-for-service and contractual revenues increased 8% in FY 2008. Customer service excellence seminars were held with representation from a majority of the clinical departments. The Department of Orthopedic Surgery converted to the central MIS system for a total of 6 departments on the centralized system. Computer-based training center and electronic help desk services were also implemented.

2. Implement the USC SOM-PHA Billing Compliance Plan. **This goal is continued from previous Blueprint.**

Initiative: Continue to update and implement the billing compliance plan. Assure that 100% of faculty, residents, and staff have successfully completed the annual billing compliance training. Promote ongoing clinical department involvement in their respective billing compliance activities.

Action Plan: 100% of faculty, residents, and staff completed the annual billing compliance training and continue to participate in the billing compliance plan.

3. Continue to develop Primary Care services within USC SOM. **This goal is continued from previous Blueprint.**

Initiative: Continue to recruit faculty in USC primary care departments. Develop at least 1 geographically separate primary care office for USC.

Action Plan: Successfully recruited 4 additional primary care faculty in the Departments of Family and Preventive Medicine, Internal Medicine and Pediatrics. Plans have been developed for the founding of a separate primary care office for USC, but have been delayed due to funding.

4. Expand specialty services in University Specialty Clinics. **This goal is continued from previous Blueprint.**

Initiative: SOM plans to recruit a Chair in Orthopedics and a Division Director and faculty for the Academic Division of Cardiology. Also will recruit for faculty positions in Ob/Gyn- Generalist and MFM, Surgery - Trauma Surgeon, Neurology

- Intensivist, Pulmonology - ICU. Will implement a revised plan to increase internal referrals to our specialist faculty and improve external referrals to USC. Action Plan: Successfully recruited 16 additional specialty faculty in the Departments of Internal Medicine, Neuropsychiatry and Behavioral Science, OB/GYN, Ophthalmology, Surgery and Pediatrics. Successfully recruited a Chief of Cardiology and in the process of recruiting an Orthopedics and Neurology Chair. The specialty departments delivered over 178,000 patient visits during 2008 resulting in a combined revenue increase of 9%.

5. Upgrade USC SOM clinical facilities. **This goal is continued from previous Blueprint.**

Initiative: Further explore the feasibility and desirability of shared space for the Neuro Science Institute initiative. Continue to evaluate optimal avenue of space acquisitions including new construction or purchase of existing buildings. Develop a process to evaluate and secure primary care office locations geographically separate from the existing campus.

Action Plan: Procured separate office space for the division of Neurosurgery. Also built out space for the future Department of Neurology including a future stroke center. Transitioned the Educational Trust Office and its accounting activities to Medical Park 1. Secured additional square footage for the continuing Medical Education Office. Finalized co-located all Office of Information Technologies to approximately 6,000 square feet in MP1.

6. Expand relationships between University Specialty Clinics, Dorn VA and Palmetto Health. **This goal is continued from previous Blueprint.**

Initiative: Begin the process of updating the Affiliation agreement. Develop a more inclusive and integrated partnership with PH in clinical services, education and research.

Action Plan: Completed a new affiliation agreement with Palmetto Health and successfully joint recruited with the VA a Chief of Cardiology. Expanded pulmonary services to include a comprehensive Pulmonary Division that is housed in 8 Medical Park.

Administrative

1. Expand fundraising activities in the SOM. **This goal is continued from previous Blueprint.**

Initiative: Develop and implement a training program for faculty on grateful patient giving.

Action Plan: 35 faculty and staff members received training in medical philanthropy focusing on grateful patient giving.

2. Increase foundations/corporations giving to the SOM.

Initiative: Identify and qualify 10 foundations/corporations to cultivate and solicit.

Action Plan: 118 foundations and corporations made contributions.

3. Increase planned giving to the SOM.

Initiative: Identify, cultivate, and solicit 15 individuals for planned gifts.

Action Plan: 32 individuals were identified and solicited for planned gifts.

C. Summary of International Dimensions

1. Expand International Medicine elective opportunities for M-IV students.

Initiative: Establish formal relationships (MOU) with hospitals, clinics, and other institutions for educational, service, and research opportunities for university faculty and students. Establish a MOU with at least one institution regarding International Medicine opportunities for USC faculty and students. Report from the Associate Dean for Medical Education and Academic Affairs.

Action Plan: Fourth-year medical students continue to complete electives in global medicine at various sites around the world. A \$200,000 endowment for student travel to the sites of their global electives has now been in the endowment. Thus, \$1000 travel scholarships are available to the students. Discussions are underway with several international sites to establish ongoing partnerships for education, service and research.

2. Develop collaborations with international scientists.

Initiative: A number of initiatives were started with International scope: 1) Use of Ultrasound in education and diagnosis in Haiti. 2) An Exchange Scholar is currently visiting from Khajikistan (Khorog State University) supported by Junior Faculty Development Program from American Council for International Education and pursuing research in Microbiology 3) An Iraqi scientist is currently pursuing Immunology research at the SOM. She is supported through Iraq Scholar Rescue fund from Institute for International Education. 4) Faculty from SOM visited India to develop collaborations with the Industry and Academia. An MOU is being drafted to pursue collaborations between NIH CAM Center at the SOM with Himalayan Pharmacy Institute on rare herbal products found in the Himalayas and their immunomodulatory properties 5) A scientist from Japan will be visiting SOM to pursue research in Immunology supported by Japanese Government Scholarship from May, 2009.

Action Plan: Establish formal relationships (MOU) with universities and other research opportunities for medical school faculty and graduate students. Establish a MOU with at least one institution regarding research collaborations for USC faculty and students. Report from the Associate Dean for Basic Science.

III. Unit Statistical Profile

A. Instructional (Items 1-9 will be provided to each unit by the Assessment and Compliance Office at ipr.sc.edu)

1. Number of applications for Fall 2005, Fall 2006, Fall 2007, and Fall 2008 admission by level.

	Fall 2005	Fall 2006	Fall 2007	Fall 2008
Undergraduate	0	0	0	0
Masters	124	135	118	123
Certificate	6	5	12	6
First Professional	1,214	1,700	1,940	1,960
Doctoral	40	32	30	43
TOTAL	1,384	1,872	2,100	2,132

2. Number of admissions for Fall 2005, Fall 2006, Fall 2007, and Fall 2008 by level.

	Fall 2005	Fall 2006	Fall 2007	Fall 2008
Undergraduate	0	0	0	0
Masters	19	28	32	22
Certificate	5	3	7	3
First Professional	104	120	146	145
Doctoral	10	12	12	26
TOTAL	138	163	197	196

3. Freshmen retention rate for classes entering Fall 2004, Fall 2005, Fall 2006, and Fall 2007. **Not applicable to the SOM.**

4. Number of majors enrolled in Fall 2005, Fall 2006, Fall 2007, and Fall 2008 by level (headcount and FTE).

	Majors				Student Headcount				FTE			
	05	06	07	08	05	06	07	08	05	06	07	08
Undergraduate	0	0	0	0	0	0	0	0	0	0	0	0
Masters	4	4	4	4	97	106	112	106	97	120	126	125
Certificate	1	1	1	1	1	3	9	4				
First Professional	1	1	1	1	319	312	315	318	319	312	315	318
Doctoral	1	1	1	1	39	46	39	56	39	76	73	89
TOTAL	7	7	7	7	456	467	475	484	498	508	514	532

5. Number of graduates in Fall 2007, Spring 2008, and Summer 2008 by level.

	Fall 2007	Spring 2008	Summer 2008
Undergraduate	0	0	0
Masters	4	41	5
Certificate	2	0	1
First Professional	0	76	0
Doctoral	1	2	1
TOTAL	7	119	7

6. Four-, Five-, and Six-Year Graduation rates for three most applicable classes.
Not applicable to the SOM.

7. Total credit hours generated (regardless of major) for Fall 2007, Spring 2008, and Summer 2008.

	Fall 2007	Spring 2008	Summer 2008
Undergraduate	N/A	N/A	N/A
Masters	N/A	N/A	N/A
Certificate	N/A	N/A	N/A
First Professional	N/A	N/A	N/A
Doctoral	N/A	N/A	N/A
TOTAL	N/A	N/A	N/A

8. Number of faculty by title (tenure-track by rank, research by rank, etc.), as of Fall 2006, Fall 2007, and Fall 2008.

	Fall 2006	Fall 2007	Fall 2008
Tenure-Track Faculty			
Professor	36	31	29
Associate Professor	19	21	24
Assistant Professor	16	17	13
	Fall 2006	Fall 2007	Fall 2008
Research Faculty			
Professor	5	3	2
Associate Professor	6	5	6
Assistant Professor	15	13	16
	Fall 2006	Fall 2007	Fall 2008
Clinical Faculty			
Professor	33	26	26
Associate Professor	44	48	39
Assistant Professor	79	65	69
Instructor	6	3	3
	Fall 2006	Fall 2007	Fall 2008
Instructors	4	4	6
Lecturers	0	0	0
Visiting Faculty	0	0	0
Adjunct Faculty	52	17	25

9. Total continuing education units (standard University CEUs or Institutional CEUs) generated for Fall 2006, Spring 2007, and Summer 2007. (Please refer to policy RACM 1.04). **Not applicable to SOM.**

B. Research and Creative Accomplishments

10. Numbers of publications in calendar year 2008 by category (e.g., books, book chapters, refereed articles, non-refereed publications).

Books and Book Chapters – 2008 - 40
 Refereed and Non-refereed Publications – 2008 - 210

11. Number of research paper presentations at national or international conferences in calendar year 2008.

Paper Presentations – 2008 - 240

12. Number of performances and/or juried exhibitions at national or international venues in calendar year 2008.

Performances/Juried Exhibitions - 0

13. Summary of sponsored research activity to include grant applications submitted and awarded, arranged by sponsoring agency in Fiscal Year 2008 and to date in Fiscal Year 2009.

Source: USCERA

Grants	Federal	Private/Industry/Non-Profit (not all submissions went through USCeRA)	State/Local	Total
Submitted '08	29,253,595	6,660,617	16,190,344	52,104,556
Awarded '08	22,524,899	13,022,805	2,461,627	39,838,549

14. Total extramural funding processed through SAM in FY 2008 and Federal extramural funding processed through SAM in FY 2008. (Provided by SAM at <http://sam.research.sc.edu/awardrpt.html> or <https://sam.research.sc.edu/uscera>. Contact SAM Office at 777.7093 for guidance if needed).

\$39,707,393 (the amount per the SAM By Source and By Purpose reports for FY 2008 show 39,838,549)

15. Total research expenditures per faculty for FY 2008.

\$158,197 (total amount per the SAM By Source and By Purpose reports for FY 2008 would be 158,719)

16. Amount of sponsored research funding per faculty member for FY 2008 (by rank, type of funding: e.g, federal competitive versus non-competitive, state, etc., and by department if applicable).

Faculty Rank (Tenured, Clinical or Research Positions)	Total Number of Faculty	Number of Funded Faculty	Percentage Of Faculty Funded	Total Grant Awards	Grant Amount per (total) Faculty Member
Professor	66	38	57.6%	\$28,721,476	\$435,174
Associate Professor	76	25	32.9%	\$6,270,276	\$82,504
Assistant Professor	109	20	18.3%	\$4,846,797	\$44,466
All Faculty	251	83	33.1%	\$39,838,549	\$158,719

17. Percentage of unit faculty with sponsored research activity for 2008 (by rank and type of activity).

Funding Type	Number of Funded Faculty	Percentage Of All Funded Faculty** (83 from Table 16)	Total Grant Awards	Grant Amount per Funded Faculty Member
Federal	50	60.2 %	22,524,899	\$450,498
NIH	35	42.2 %	8,443,155	\$241,233
Private/Industry/Non-profit	39	47.0 %	14,720,867	\$377,458
State/Local	12	14.5 %	2,461,627	\$205,136

18. Number of faculty serving as co-investigators in cross-unit grant applications in FY 2008.
24 as listed by USCERA
19. Number of faculty cross-appointed in Centers and/or institutes in FY 2008.
3 as listed by USCERA
20. Number of patents, disclosures, and licensing agreements in calendar year 2008.
Patents (PPAs - 2, Applications – 1, Issued – 6); Disclosures – 0; Licensing Agreements - 0
21. Number of proposals submitted to external funding agencies during calendar year 2008 (by type and by department if applicable).
224 as listed by USCERA

C. Faculty Hiring

22. Number of full-time faculty hired in AY 2008-09 by department (if applicable), and by rank.

In AY 2008-2009, the SOM has or expects to hire 8 Instructors, 14 Assistant Professors, 3 Associate Professors, 3 Professors, and 1 Librarian.

23. Number of post-doctoral scholars (Ph.D., non-faculty hires) in FY 2008.

8

24. Anticipated losses of faculty by year for the next five years. Please supply reasons for departure if known (e.g., TERI period end, conventional retirement, resignation). Please describe planned hiring over the next five years by department (if applicable).

The School of Medicine has no specific planned/anticipated losses other than those at the end of the TERI process and known planned resignations/relocations.

AY 2007-2008 – 2 (TERI/Retired) and 1 resignation
AY 2008-2009 – 1 (TERI/Retired) and 3 resignations
AY 2009-2010 – 5 (TERI/Retired)
AY 2010-2011 – 0 (TERI/Retired)
AY 2011-2012 – 0 (TERI/Retired)
AY 2012-2013 – 0 (TERI/Retired)

In general the School of Medicine does not intend to net hire (hire more faculty than leaves) in the next few years unless it can be shown that there are adequate external funds for such positions, and or should additional "A" funds become available. Depending upon changes in clinical productivity expectations and or other funding available for compensation, there may be a few unanticipated departures of clinical and or basic science faculty within the current 2008-2009 and next few years.

25. Number of Faculty Excellence Initiative (FEI) applications submitted in AY 2007-2008; number approved.

8 submitted; 4 approved

26. List Center of Economic Excellence endowed chair applications submitted for AY 2008-2009; note those approved.

1 submitted; 0 approved

27. Number of Centenary Plan (CP) applications submitted in AY 2007-2008; number approved. **Not applicable.**