

LMU-DCOM Strategic Plan 2024-2029 Report

Report Approved:

09/11/24 by the LMU-DCOM Dean's Council

***Mission DO Program:** To prepare outstanding osteopathic physicians who are committed to the premise that the cornerstone of meaningful existence is service to humanity. The mission of the Doctor of Osteopathic Medicine (DO) program at LMU-DCOM is achieved by:

- Graduating Doctors of Osteopathic Medicine;
- Providing a values-based learning community as the context for teaching, research and service;
- Serving the health and wellness needs of people within both the Appalachian region and beyond;
- Focusing on enhanced access to comprehensive health care for underserved communities;
- Investing in quality academic programs supported by superior faculty, staff and technology;
- Embracing compassionate, collaborative patient-centered care that values diversity, public service and leadership as an enduring commitment to professionalism and the highest ethical standards.
- Facilitating the growth, development and maintenance of graduate medical education

**Mission statement last revised: 11.13.18 revision of the Strategic Planning Committee; 4.3.19 LMU-DCOM Dean Approval; 5.3.19 LMU Board of Trustee Approval*

The DO Program Goals:

Goal #1: The DO program has a written mission and strategic plan, and maintains full accreditation from AOA-COCA and other accreditors.

Goal #2: The DO Program will have leadership and senior administrative staff with the knowledge, skills, time, and support necessary to achieve the goals of the osteopathic medical education program and to ensure the functional integration of all programmatic components.

Goal 3: The DO Program has sufficient financial resources readily available to meet the needs of the COM and to achieve the COM mission, consistent with its projected and authorized class size.

Goal 4: The DO program has modern facilities, equipment, and resources available to faculty, staff, students, alumni and community to achieve educational, curricular, and research goals.

Goal #5: The DO program provides a professional, respectful, non-discriminatory, and intellectually stimulating academic and clinical environment.

Goal #6: The DO program curriculum prepares future clinicians to serve the community with high quality patient-centered healthcare.

Goal #7: The faculty possess the credentials, knowledge, and skills to carry forth the mission of the DO Program.

Goal #8: The DO program faculty, students, and post-graduate trainees have opportunity to participate in research, grants and/or scholarly activities contributing to the advancement of knowledge in medicine.

Goal #9: The DO program recruits, admits, and holistically supports students.

Goal #10: The DO Program supports the development and maintenance of community-based graduate medical education programs and prepares students to be competitive for placement into GME programs.

LMU-DCOM Strategic Plan 2024-2029 Report

Goal #11: The DO program assesses programmatic and individual student outcomes using data to continuously improve all aspects of the COM.

LMU-DCOM Strategic Plan 2023-2028

LMU-DCOM SWOT

STRENGTHS (internal factors) – resources or experiences (financial, physical, human, processes)

- Learning, research and work facilities
- Stability – evolutionary stability with faculty
- Student-centered collaborative spirit by administration, faculty, staff, and students
- Student support services
- Willingness to change – not at the expense of the student
- Involvement in strategic conversation
- Scenic environment
- Potential for growth - expansion options – land, capital
- Hospital and physician partners
- Students and alumni
- Research opportunities
- Community support
- Distributive model – 3rd and 4th year students are at a distance
- Remote learning capability
- Multi-level health related majors and professional schools at LMU
- Communication within school and between campuses
- DO/MBA degree
- Supportive university culture

WEAKNESSES (internal factors) – resources or experiences (financial, physical, human, processes)

- Difficulty recruiting to rural setting for faculty/staff/students - Jobs for spouses
- No teaching hospital adjacent to medical school
- Not all core sites have affiliated residency programs or resident presence
- Recruiting qualified faculty and staff
- Information services connection and support
- Grant funding
- Size of staff
- Lack of practice opportunities for clinical faculty
- Travel associated with attending some required core rotations
- Limited student engagement
- Local primary care physician shortage
- Loan disbursement procedures (tuition and cost of living)

OPPORTUNITIES (external factors) – market trends, economic trends, funding, demographics, relationship with partners, political, environmental and economic regulations

- Opportunities to expand core sites and GME – health systems
- Improvement engagement with adjunct clinical faculty
- Political connections
- Telling the LMU-DCOM story to greater community
- Expand Interprofessional collaboration
- Promote LMU as a health care educational leader
- Scholarships
- External granting and funding opportunities
- Healthcare systems engagement
- Engagement of alumni as preceptor/partners
- CME growth - grants and partnerships
- Community engagement
- Expand life-support skills training revenue
- Research – Educational and CME
- Student preparation in research process

LMU-DCOM Strategic Plan 2023-2028

- Change in demographics
- Socialization between campuses
- Expand Alumni engagement
- Training faculty/staff for leadership positions
- Additional dual degree programs
- Exposure to rural healthcare system to enhance clinical skills
- Potential to promote innovative teaching and assessment strategies at a regional level
- Recruit and retain individuals of diverse background by creating a sense of belonging

THREATS (external factors) - market trends, economic trends, funding, demographics, relationship with partners, political, environmental and economic regulations

LMU-DCOM
Strategic Plan 2023-2028

Goal #1: The DO program has a written mission and strategic plan, and maintains full accreditation from AOA-COCA and other accreditors								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
1.1 DCOM's mission describes the DO program outlining program planning and assessment and is consistent with LMU's mission.	1.1a Identify additional DCOM programs that need strategic plans and/or consultation.	Annually	Senior Associate Dean IPE, Simulation and Accreditation	Zoom technology, development resources, baseline data	100% of programs identified and contacted; plans created if needed. List all programs. At least 3 consults held with other program plan owners.	DCOM Masters program strategic plan developed and approved by Dean's Council 11/6/23. Between 12/23 and 06/24, began consulting with the Anatomical Donation Program on their plan. OT/PT programs have been moved into the College of Math, Science and Health Professions in order to better integrate with pipeline programs.	Met	
	1.1b Work with Goal Leads to refine and improve measurable targets for all goals for the DO Program 2024-2029 plan.	Annually	Senior Associate Dean IPE, Simulation and Accreditation; Strategic Planning and Compliance Committee (SPCC)	LMU-DCOM (DO) program plan from 2023-2028	90-100% of all targets are measurable in the 2024-2029 DO Strategic Plan.	90-100% of all targets are measurable; Strategic plan approved by LMU-DCOM Deans Council 11/06/23.	Met	
	1.1c Obtain Board of Trustees approval for missions statement changes as needed.	Annually	Dean/CAO	LMU Board approval	Board approval communication received.	Changes were not submitted/made in 2023-24.	Met	
1.2 Maintain full accreditation from the American Osteopathic Association (AOA) Commission on Osteopathic Accreditation (COCA), the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), and other professional and/or degree programs under LMU-DCOM as applicable.	1.2a Review NEW accreditation standards; conduct an internal review and create an internal snapshot.	Annually	Dean/CAO; Senior Associate Dean of IPE, Simulation and Accreditation; COCA Goal Leads (Deans)	Prior self-study documentation and new data findings from multiple sources	100% of documentation has been updated and included in an internal snapshot for the year; AOA COCA gives clearance to proceed with Orange Park and Knoxville applications.	Documentation has been updated concurrently with the continued development of the Knoxville Planned Class Size Increase and Orange Park Additional Location applications.	Met	
	1.2b Complete all required AOA and American Association of Colleges of Osteopathic Medicine (AACOM) progress reports.	Annually	Dean/CAO; Senior Associate Dean of IPE, Simulation and Accreditation	Data/documentation from DCOM departments	Ensure 100% of reports are completed, submitted and accepted. Obtain AOA COCA approval on applications/to proceed.	Both the Knoxville Planned Class Size Increase (PCSI) and the Orange Park Additional Location applications are on track and will be reviewed at the COCA 8/29/24 meeting.	Met	
	1.2c LMU accreditation is maintained at the regional level (SACS-COC).	Annually	Dean/CAO, President	President's Office for documentation	SACS-COC accreditation document verifying continued accreditation is available upon request.	https://www.lmunet.edu/debusk-college-of-osteopathic-medicine/do/about/accreditation#URA Documentation continues to be submitted to LMU Institutional Effectiveness for the SACS-COC 5th-year interim report.	Met	
	1.2d Maintain 3-year accreditation-Level 3 Accreditation with Commendation as Category 1-A Continuing Medical Education (CME) sponsor.	Every 5 years	CME Director	CME office resources	Ensure AOA CME Document Survey meets all requirements and Accreditation is maintained.	LMU-DCOM received Five-Year Continuing Accreditation with Commendation in November 2022 as an AOA Category 1 Sponsor.	Met	
	1.2e Explore other program development opportunities at graduate and post-graduate levels, i.e., DO, public health, physical therapy, occupational therapy, etc.	Annually	Dean/CAO of LMU-DCOM	Accreditation documentation; feasibility study(ies)	100% of professional programs have received and/or maintained accreditation from the program specific entity. At least one additional program is considered/investigated for potential development. Number of new applications submitted. Refer to other DCOM program strategic plans.	DCOM received 10 years of Accreditation with Exceptional Outcome on December 9, 2022. Both the Knoxville Planned Class Size Increase (PCSI) and the Orange Park Additional Location applications are on track and will be reviewed at the COCA 8/29/24 meeting. OT/PT programs have been moved into the College of Math, Science and Health Professions in order to better integrate with pipeline programs.	Met	
1.3 Confirm LMU Board of Trustees (BOT) is represented by a physician.	1.3a Review Board of Trustee list.	Annually	Dean/CAO		At least 1 physician is on the LMU Board of Trustees; preferably at least 1 osteopathic physician.	There are currently four (4) physicians on the Board (MDs).	Met	
	1.3b Make recommendations for potential members.	Annually	Dean/CAO			Recommendations have been made by the LMU-DCOM Dean/CAO.	Met	
1.4 Develop and implement methods for collecting data and decision driven improvements across departments at DCOM. (CIPES)	1.4a Develop action plan tracking identification guidelines for more accurate item selection and record taking.	Spring 2024	Data and Quality Assurance Manager; Senior Associate Dean, IPE, Simulation and Accreditation	Committee Meeting Minutes; Action Plan Tracking Database	Identification and record taking guidelines developed.	This pilot yielded minimal utility due to the refinement of DCOMs strategic planning and accreditation efforts. In July 2024, the Deans Council unanimously voted in favor of discontinuation.	Met	
	1.4b Train administrative staff in the use of guidelines.	Spring 2024			One hundred percent (100%) of admins have been trained and are utilizing the new guidelines.		Met	
	1.4c Generate a semesterly report for review of progress and then an annual report.	Summer 2024, Fall 2024			Semesterly and annual reports generated.		Met	

LMU-DCOM
Strategic Plan 2023-2028

Goal #2: The DO Program will have leadership and senior administrative staff with the knowledge, skills, time, and support necessary to achieve the goals of the osteopathic medical education program and to ensure the functional integration of all programmatic components.

Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations For Improvement (IF NOT MET)
2.1 Dean is qualified for the position by education, training, and experience to provide effective leadership in education, scholarly activity, and patient care.	2.1a Qualifications verified upon hire.	Annually	Human Resources	Personnel File; performance reviews	This will be verified whenever a new Dean is appointed.	Verified upon hire.	Met	
	2.1b AOA or ABMS board certification verified annually.	Annually	Dean	Board certification verification	Verified annually	Verified within last 12 months based on expiration.	Met	
2.2 Dean is employed full time with no conflicting, secondary employment.	2.2a Executed employment contract.	Annually	Human Resources	Employment contract	Employment contract executed annually.	Currently under contract/contract active.	Met	
2.3 DCOM employs the Academic and Administrative leadership needed to accomplish the mission of the medical school. Assistant/Associate Deans have proven experience in teaching, educational design and evaluation, scholarly activity, and academic leadership in a medical education setting appropriate for the position.	2.3a Review leadership and reporting structure in LMU-DCOM organizational chart and revise as needed.	Annually	Dean's Council; Dean/CAO; Chief Operating Officer; Department Chairs, Directors of Operations	Administrative support; Needs assessments reflect appropriate leadership structure	Organizational chart is reviewed, revised, and disseminated prior to the start of fall semester.	Reviewed quarterly and as needed.	Met	
	2.3b All DO/MD medical licenses are verified.	Annually	Assistant/Associate Dean of Clinical Affairs, Assistant/Associate Deans of Clinical Medicine; Rotations Director	Board certification verifications	One hundred percent (100%) MD/DO board certifications are verified annually.	Verified within last 12 months; monitored monthly.	Met	
	2.3c Revise position profiles to reflect changes.	Annually	Program/Division/Department Heads	COO, Directors of Operations, Human Resources	One hundred percent (100%) of revised profiles are submitted to HR.	Reviewed within last 12 months and all revisions sent to HR.	Met	
	2.3d Conduct annual faculty/staff evaluations.	Annually	Department Chairs, Assistant/Associate Deans, Dean	Evaluation instruments, administrative support	One hundred percent (100%) of all evaluations completed and submitted to HR.	Completed Q1 annually; 100% complete.	Met	
	2.3e Conduct annual faculty workload assessment.	Annually	Assistant/Associate Deans of Academic Affairs, Basic Medical Sciences, Clinical Affairs and Clinical Medicine and Clinical education; Department Chairs; Assistant Dean of Assessment and Faculty Development; Director of Assessment Services	Faculty Adequacy Model	Faculty adequacy model complete; adjustments to faculty pool made.	Completed for 23-24 in October of 2023. Newest version to be completed in October 2024.	Met	
	2.3f Review faculty and staff performance for promotion and/or rank advancement.	Annually	Dean/CAO; Senior Associate Dean	COO, Assistant/Associate Dean, Department Chairs	Recommendations are sent to Faculty Rank/Promotions Committee.	Performance reviewed in annual evaluations Q1. 4 faculty applied for and were granted rank promotion (1 to Assoc Professor, 3 to Professor).	Met	
2.4 Accreditation standard complaint policies and procedures are in place and published.	2.4a Accreditation standard complaint procedures are maintained on the DCOM website.	Annually	LMU Webmaster; CIPES Data and Quality Assurance Manager	DCOM website	One hundred percent (100%) functionality and accuracy verified through annual website audit.	Confirmed link active and accurate.	Met	
	2.4b Accreditation standard complaint procedures are followed and feedback used to improve existing systems and processes.	Annually	Dean's office, LMU Webmaster, CIPES Data and Quality Assurance Manager	Web-based submission link	Complaint reports reflects 0% of complaints filed not addressed appropriately.	All complaints received have been addressed.	Met	

LMU-DCOM
Strategic Plan 2023-2028

Goal 3: The DO Program has sufficient financial resources readily available to meet the needs of the COM and to achieve the COM missions consistent with its projected and authorized class size.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
3.1 Review and revise LMU-DCOM budget to reflect administrative, curricular and research needs and ensure it meets the Title IV requirements of the Higher Education Act.	3.1a Document and maintain flowchart demonstrating budget development process and where ultimate approval lies.	Annually	Dean, Associate Deans, Directors of Operations, VP Finance	Flowchart	One hundred percent (100%) complete. Budget process flowchart has been reviewed/approved for next AY.	One hundred percent (100%) complete. Budget process flowchart has been reviewed/approved for next AY.	Met	
	3.1b Review LMU-DCOM Program annual budgets.	Annually	Dean; Division/Department Heads; Directors of Operations	Budgets-trailing 3 years; list of all people with budgetary management and oversight. LMU Finance.	One hundred percent (100%) complete. Budgets have been approved by LMU Finance.	One hundred percent (100%) complete. Budgets have been approved by LMU Finance.	Met	
	3.1c Review and update Budget authority.	Annually	Dean	Prior FY budget authority list and Finance SW platform	One hundred percent (100%) complete - updated list from Dean submitted to finance.	One hundred percent (100%) complete -updated list from Dean submitted to finance.	Met	
	3.1d Conduct annual independent audit confirming financial viability and evidence of resolution of concerns cited in the audits management letter.	Annually	Dean; LMU VP Finance	Audit and management letter	Financial viability confirmed by auditor. Less than two (< 2) concerns noted in audit related to DCOM.	Audit is underway.	Met	Audit is in progress with Finance Department.
	3.1e Keep expenditures under budget through stewardship of funds.	Annually	Dean; Department Heads; other budget managers; Directors of Operations	Budget outcomes report prior year	Prior fiscal year reports show 80% of cost centers were under budget.	Prior fiscal year reports show 80% of cost centers were under budget.	Met	
	3.1f Meet with LMU Vice President of Finance on a regular basis to review budget.	Annually	Dean/VP; Chief Financial Officer		Dean meets once per quarter with VP of Finance.	Dean meets once per quarter with VP of Finance.	Met	
3.2 Maintain the financial viability of LMU-DCOM through collection of tuition, seeking of grant funds and other fundraising activities.	3.2a Collect tuition for osteopathic medical students.	Fall/Spring Semester	Executive Director of Student Financial Services	Admissions data	One hundred percent (100%) of tuition is collected and seats are filled in DO program.	One hundred percent (100%) of tuition was collected and seats were filled in DO program.	Met	
	3.2d Increase unrestricted donations by building a broad base of annual support (LMU 6.1).	Annually	Director of Development Health Sciences Division; VP of Advancement; Assistant Director of Alumni Services and Annual Fund; Assistant VP for Advancement	University Advancement fundraising data UA Mailing Calendar DCOM student philanthropy project data (via iModules and other platforms)	- Number of personal visits and calls by Director of Development, Health Sciences - Number of solicitations and donations via Founders Day of Giving outreach to DCOM constituents - Number of emails, social media posts and direct mail solicitations sent to DCOM constituents - DCOM Faculty/Staff Giving rate - Number of DCOM student fundraising projects supported, and total dollars raised	DCOM Employee Giving: (Met) - In FY23-24, 30.7% of DCOM employees gave to LMU. - This is an increase of 3.4 percentage points over FY22-23 DCOM Total Giving: (In progress) - In FY23-24, a total of \$49,821.08 was given to DCOM (Note: This total excludes DCOM grants which are reported separately in 3.2B). - Number of individual emails, text messages and letters: 1,501 - Supported DCOM student fundraising projects, and recognized student success in fundraising through stories, social media and print - Also provided iModules and training for DCOM students and faculty advisers for fundraising initiatives - Number of bulk emails: 34,320 - Number of general solicitations mailed: 2,860 - Number of medical office visits to DCOM alumni: 106	Met	- Increase the use of voicemail and text system to improve response rates for DCOM alumni solicitations and events - Refine general emails and mailings to focus on targeted groups and social projects - Refine focus of solicitations to highlight impact of giving - Expand faculty/staff visits to DCOM offices, to encourage giving
	3.2e Increase endowment giving for student scholarships, faculty development, research, endowed chairs, continuing education, and the physical plant (LMU 6.2).	Annually	Director of Development Health Sciences Division; VP of Advancement; Assistant Director of Alumni Services and Annual Fund; Assistant VP for Advancement	Minutes of LMU Awards Committee and LMU-DCOM Awards Committee LMU gift records	- Results of LMU-DCOM Awards Committee process - Dir. of Development, Health Sciences scholarship donor portfolio and call logs - Roster of LMU-DCOM donors recognized in the Honor Roll of Donors, through press releases and LMU publications - Roster of LMU-DCOM donors invited to the scholarship Donor Appreciation Banquet and LMU Donor Gala at Homecoming	- UA VP for Advancement (VPUA) and Dir. of Development, Health Sciences Division both work closely with LMU-DCOM Awards Committee. VPUA compiles list of DCOM donor-funded endowed scholarships to add to NextGen Scholarship Manager software, to be awarded by DCOM Awards Committee each spring. - LMU-DCOM Donors were recognized in the Honor Roll of Donors, through press releases and publications - LMU-DCOM donors were invited to the LMU Donor Gala at Homecoming	Met	- Work to expand corporate and major donor outreach in the Orange Park, Florida market to support the launch and growth of LMU-DCOM Orange Park - Work with DCOM Director of Alumni Services and CME to increase sponsors and donor support of annual CME event - Increase focus on research as a targeted fundraising priority in FY24-25
	3.2f Continue targeted fundraising to meet identified priorities and new opportunities (LMU 6.3).	Annually	Director of Development Health Sciences Division; VP of Advancement; Assistant Director of Alumni Services and Annual Fund; Assistant VP for Advancement	Travel, postage and direct mail budget	Number of calls, visits and donations cultivated by Dir. of Development, Health Sciences from individuals, corporate partners and foundations who demonstrate interest and/or capacity to support LMU-DCOM projects.	- Total number of visits and calls: 208 - Director of Development Health Sciences Division has 167 total prospects on major gifts moves list - LMU-DCOM alumni classes 2011-2014 gave at a higher overall rate than later classes. These classes gave at the following rates in FY23-24 - Class of 2011 giving rate was 9.4% - Class of 2012 giving rate was 4.9% - Class of 2013 giving rate was 3.5% - Class of 2014 giving rate was 4.9% - UA developed fundraising initiatives to support the Women of Service Lincoln's Cupboard food pantry	Met	Continue to support WOS Lincoln's Cupboard, and Lincoln's Closet, with fundraising projects for the benefit of LMU-DCOM and all students.
	3.2g Provide support for the University by accurately recording gifts and maintaining alumni and demographic information using appropriate technology and software (LMU 6.4).	Annually	Assistant VP for Advancement; Post Grant Awards Manager; DCOM Director for Alumni Service and Continuing Education	LMU donor records and charitable receipt records	- Charitable contributions processed for LMU-DCOM designations by University Advancement - Charitable gift receipts provided to LMU-DCOM donors (records maintained by University Advancement) - Number of records updated by LMU-DCOM Director for Alumni Services and Continuing Education - National Change of Address (NCOA) reports obtained through mailing house processes - Number of AccuData searches conducted - Number of Alumni web updates submitted through alumni website - Results of UA prospect research	- UA processed all LMU-DCOM charitable contributions using the Salesforce platform, and provided charitable gift receipts (email and/or print) to LMU-DCOM donors - UA worked with Direct Mail Services to obtain National Change of Address (NCOA) reports for bulk mailings, and uploaded these updates directly to Salesforce platform to ensure current mailing address info - UA is working with AlumniFinder/AccuData to process data screening on all LMU alumni records (including LMU-DCOM alumni records), to ensure current cell number and email address on file - LMU Post Grants Awards Manager processes all LMU-DCOM grants in Colleague system - UA and LMU-DCOM Alumni Services completed all daily address, phone and email updates received through the iModules Update My Info pages	Met	
	3.2i Market and promote the University creatively, and engage students, alumni, and the community at large via mass communication, publications, social media, and advertising (LMU 6.6).	Annually	LMU Executive Director of Marketing and Public Relations; DCOM Director of Marketing and Public Relations (TBD)	DCOM newsletter; annual report; press releases; Marketing materials, software and media platforms employed.	# DCOM specific press releases, #DCOM social media posts and usage stats.	July 1, 2023 – June 30, 2024 Press releases: 50 Facebook (LMU-DCOM): •358 posts made •Reach 236.3K (57.3% increase) •Content interactions 36.2K (16.5% increase) •Followers 7.4K (net follows increase of 20.5%) Instagram (@lmadcom): •288 posts made •Reach 116.3K (245% increase) •Content interactions 61.5K (100% increase) •Followers 4.7K (net follows increased by 445 accounts) LinkedIn (LMU account - not DCOM specific and only lets us go back to 8/31/2023) •351K impressions •19,512 followers (new follows increased by 3,767) 1 issue of DCOM Insights published and distributed to alumni list	Met	LMU-DCOM LinkedIn page is now active with DCOM specific content.

LMU-DCOM
Strategic Plan 2023-2028

Goal #4: The DO program has modern facilities, equipment, and resources available to faculty, staff, students, alumni and community to achieve educational, curricular, and research goals.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
4.3 DCOM has facilities for the program of instruction that enables the authorized class size of students and faculty to pursue the mission, curriculum, and scholarly activity.	4.1a Expand so that our clinical sites have better knowledge and access to the resources available to them at LMU.	Annually	Assistant Dean of Assessment and Faculty Development, LRC Committee Chair, Assistant Dean of Clinical Medicine, Associate Dean of Clinical Affairs, Medical Librarian	Needs assessment data. Multiple sources as follows: LRC Technology survey, IS Technology survey, Preceptor Needs Assessment.	Five percent (5%) increase in agreement with statement: "I was able to fully access DCOM online medical library resources from my core/required rotation sites" on the OMSIV HSL Technology Survey.	No change from last year as this survey is administered every other year.	Met	
	4.1b Assess and provide resources necessary to rectify Core clinical rotation sites who score less than 1 SD below the mean (outliers).	Annually	Director of Academic Assessment, Associate Dean of Clinical Affairs, Assistant Dean of Clinical Medicine	Student evaluation of clinical site data; Annual Core Rotation Site Survey - facilities items.	All rotation sites scoring within 1 SD of the mean on the Annual Core Rotation Site Survey - facilities items.	All sites were within one standard deviation of the mean.	Met	
	4.1c. Assess current facilities for adequacy in conjunction with projected enrollment and programs	Annually	Dean/CAO, COO, Directors of Operations, Associate Dean of Clinical Affairs, Associate Dean of Academic Affairs	Needs survey of faculty, staff, and students	>85% agreement with sufficient space and resources to support each domain of learning, scholarly activity, and clinical training .	This is not a question in our most recent needs survey of DCOM faculty, staff. Student opinion survey from Fall 2023 (~400 respondents) indicated 75.5% satisfaction with Classroom Facilities (19.2% neutral); 74.8% satisfaction with Laboratory Facilities (24% neutral); 56% satisfaction with Study Areas/Lounges (18.3% neutral); 75.8% satisfaction with General Conditions of Buildings and Grounds (20% neutral); and 48.8% satisfaction with Library Services and Facilities (42.4% neutral). Of the respondents (~16), 50% of faculty/staff disagreed that learning spaces are adequate while only 12.5% disagreed that the classroom buildings are in good condition. 73.4% agreed that Science laboratory facilities are well-equipped and in good condition. 70-75% average agreement with adequate office space, office equipment and office technology. Classroom technology dissatisfaction was 25%. IS support satisfaction was high (>85% on average).	Not Met	Revise goal or needs assessment/survey; increase faculty/staff response rate.
4.2 Adequate technological systems, policies, and procedures are in place for the safety of faculty, staff, and students.	4.2a DCOM website links to all LMU policies and procedures associated with technological safety and helpdesk procedures.	Annually	Information Services, DCOM Facilities and Resources Committee; CIPES Data and Quality Assurance Manager	Annual website audit; Facilities Committee meeting minutes	Web audit completed; 100% of all links are functional and display most current information.	New process implemented with continuous evaluation of website for accuracy and being fully operational.	Met	
4.3 Physical security systems, policies, and procedures are in place for the safety of faculty, staff, and students including but not limited to emergency and natural disasters.	4.3a DCOM website links to all LMU policies and procedures associated with physical safety and security procedures.	Annually	IS, Chief of Police, Campus Police and Security, COO, Directors of Operations; DCOM Facilities and Resources Committee; CIPES Data and Quality Assurance Manager	Annual website audit; Facilities Committee meeting minutes	Web audit completed; 100% of all links are functional and display most current information.	New process implemented with continuous evaluation of website for accuracy and being fully operational. Was met, but currently reviewing with new University website design rollout.	Met	
4.4 DCOM ensures access to information technology to support its mission.	4.4a Migrate SimCapture (aka B-Line) Software to the a cloud based system in Harrogate and Knoxville. (CIPES)	Annually	CIO; IS staff; CIPES staff	Laerdal	One hundred percent (100%) transition of software and data at both sites is complete.	Submitted in budget requests. Cloud functionality is not currently at a level sufficient to support operations based on meeting with Laerdal.	Not Met	Continue to meet with Information Services and Laerdal and assess functionality.
	4.4b Upgrade all classroom technology in MANS equivalent to DCOMK.	Annually	CIO; IS staff	Various technology vendors	One hundred percent (100%) upgrade is completed in MANS and DCOM lecture halls.	All classroom technology in MANS was upgraded equivalent to DCOMK. Additional updates are continuous and ongoing.	Met	Requires ongoing updates.
	4.4c Upgrade wireless controllers and network access controls in DCOM, MANS and DCOMK.	Annually	CIO; IS staff	Vendor TBD	One hundred percent (100%) upgrade is completed.	Upgrade on wireless controllers and network access controls was complete in DCOM, MANS, and DCOMK. Additional updates are continuous and ongoing.	Met	Requires ongoing updates.
4.5 DCOM ensures access to learning resources to support its mission.	4.5a Raise funds to purchase Mobile Simulation Vehicle. (CIPES)	Annually	Director of Life Support Training; Director of Development Health Sciences Division; Mobile Simulation Unit Committee	Grants; Funding from Private Organizations and Foundations	Mobile Simulation Unit Fully Funded; Unit production and equipment contracted.	This has been discontinued and we are no longer pursuing this as an initiative.	Not Met	Remove from future strategic plan(s).
	4.5b.Pilot in-situ clinical skills training at core clinical rotation sites. (CIPES)	Annually			At least two (2) in-situ trainings completed; > = 90% of learners A/SA that the training was satisfactory overall.	At least 2 trainings completed but only one assessment; 87% of respondents agreed or strongly agreed that they would recommend the workshop to other programs.	Not Met	4.5b Modify results to more closely align with the post-workshop survey question(s).
4.6 Identify, maintain, and deliver databases, electronic resources, journals, books, in medical library for faculty, staff, and students	4.6a.Integrate LWW Clerkship based on the 2021-2022 Student Survey suggestions.	Spring 2024	Associate Dean of Clinical Affairs, Medical Librarians (DCOM-K and DCOM-H); Electronic Resources Librarian (Cedar Bluff); Learning Resource Committee (LRC); LMU DCOM faculty; Assessment Office	Library resources; Survey and assessment data	Increased student utilization of LWW Clerkship (>10%).	The library subscription to LWW Clerkship started in September 2022. The most accurate comparison would be September 2022 through June 2023 and September 2023 through June 2024. There were 4,637 accesses of ebooks in the LWW Clerkship database in the first timeframe increasing to 5,896 for the second timeframe. That is a 27.15% increase, which exceeds the target.	Met	Goal needs to change to reflect usage of COMBANK, Lecturio, etc.
	4.6b.Provide >5 library resource training sessions for faculty, staff, and students each calendar year	Annually	Medical Librarians (DCOM-K and DCOM-H); LMU DCOM faculty	Library resources and budget	More than five library instructional sessions held yearly for student orientations and faculty development.	Two (2) library instructional sessions were held for student orientations and faculty development. An additional five (5) planned for rest of year.	Met	

LMU-DCOM
Strategic Plan 2023-2028

Goal #5: The DO program provides a professional, respectful, non-discriminatory, and intellectually stimulating academic and clinical environment.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
5.1 Provide ongoing development of professional behaviors in students, faculty, and staff.	5.1a Implement required professional behavior training to students annually.	Annually	Student Services, Curriculum (FMHC, 4th Friday), Career Services	Attendance verification; syllabus	Course approved, implemented; 100% attendance achieved.	Professionalism lectures on 4th Fridays and as part of FMHC continue.	Met	
	5.1b Implement required faculty and staff with professional behavior training annually.	Annually	Faculty Development	Attendance verification; faculty development schedule	One hundred percent (100%) faculty/staff attendance.	Faculty and Staff all reviewed a Baylor College of Medicine Video. Training regarding social media and professionalism was also provided via a live panel discussion.	Met	Live session next year
5.2 Recruit and retain qualified, mission-appropriate diverse students, faculty, staff, and senior administrative staff.	5.2a Meet with recruitment staff from each program within DCOM to review their recruitment strategies and make suggestions to diversity recruitment efforts (DEI 1.2a).	Spring 2024	Admissions Dept of OP, Admission Dept of PT, DEI committee	Meeting minutes	Consultations held with all qualifying programs (MS, PhD, DO, PT, OT) and recommendations made.	Associate Dean of Inclusion and Engagement is now a standing member on the DO and MS admissions committees. The established pipeline programs help to ensure that the admissions committees are recruiting and retaining diverse students. There were three students from Hampton University who matriculated into the DO program and two Oakwood University students who matriculated into the MS program.	Met	
	5.2b Identify the various organizations, conferences, and/or events relevant to each department (DEI 1.2b).	Spring 2024	Admissions Dept of OP, PT, and DO	Number of organizations, conferences and/or events identified for each program	Two (2) organizations identified for each program (10).	For the DO program only - The national annual meeting of the Student National Medical Association (SNMA) was held in March 2024 and the regional meeting of the Latin Medical Student Association (LMSA) was held in February 2024. The school served as a platinum sponsor for the LMSA meeting. For the MS and DO program- the Annual Biomedical Research Conference for Minority Students (ABRCMS) will be held in November 2024, The Science, Technology and Research Symposium (STaRS) was held in April 2024 at Georgia Gwinnett College.	Met	
	5.2c Encourage recruitment staff to attend the identified various organizations, conferences and/or events relevant to their department to establish long-term relationships (DEI 1.2c.).	Fall 2023	Admissions Dept of OP, PT, and DO	Number of organizations, conferences and/or events attended for each program	At least one (1) Program representative attends each of the identified organizational meetings/conferences.	OMS II and III students attended the national annual meeting of the Student National Medical Association. OMS I and II students and a staff member attended the regional meeting of the Latin Medical Student Association. A faculty and staff members attended and participated in the STaRS at Georgia Gwinnett College.	Met	
	5.2d Develop pipeline programs with HBCU, Hispanic serving programs, and Native serving programs (DEI 1.2g).	Spring 2024	Assistant Dean of DEI	Number of pipeline programs established.	Two (2) new programs established.	There are two programs that have been established with HBCUs (Hampton University and Oakwood University). Another program Georgia Gwinnett College (HSIs is in the final stages of approval).	Met	
	5.2e Fundraising or identifying donors to create scholarships that support diverse students for each department within DCOM (DEI 1.4b).	Spring 2024	Assistant Dean of DEI, University Office of Advancement	Scholarships created	Two (2) Scholarships created.	Two students- one from Knoxville and one from Harrogate received the diversity scholarship.	Met	
	5.2f Establishment of affinity groups to help support faculty and staff (DEI 2.5a)	Spring 2024	DCOM Administration	Group meeting minutes	Establish two (2) faculty affinity groups.	Faculty and staff have established monthly meetings with DCOM administration at both campuses in order to discuss pertinent concerns and issues affecting them. Affinity group still needs to be developed.	Not Met	Identify an affinity group for faculty and staff during the monthly meetings that would interest both faculty and staff.
	5.2g Provide opportunities for faculty/staff to attend conferences (DEI 2.5b).	Continuous	DCOM Administration	Attendance at meeting	Provide support for faculty to attend meetings.	Faculty and staff have been supported to attend the following meetings: AAMC, TOMA, OMED, AACOM.	Met	
	5.2h Develop a mentoring program for junior faculty members (DEI 2.5c).	Continuous	Director of Faculty Development	Mentoring program	100% junior faculty have mentors.	The Office of Faculty Development has an established on-boarding process for new faculty hires that includes a checklist of tasks as well as training modules located on the LMS. All faculty have access to a myriad of training modules that include topics that pertain to teaching, accessibility, wellness, research, and OPP integration. These modules are always available for faculty to create individualized learning plans or reinforce previous learned topics. Course directors are tasked with providing mentoring to new faculty who are teaching within their courses. There are tasks on the checklist that are the responsibility of the course directors.	Met	
5.3 Mitigate faculty, staff, and student exposure to infectious and environmental hazards.	5.3a Provide education on prevention of exposures.	Annually and as needed	Research, Operations, Student Services	Health and Safety Resources Manual annually; Provide CITI training	One hundred percent (100%) students faculty staff attest to having read the safety guidelines.	100% of students attested to reading the Clinical Rotations Manual for AY 24-25 which outlines the procedure for needlesticks or bloodborne pathogen exposure. The Office of Clinical Education continues to review the BBP exposure procedure with students at annual rotation site visits which occur biannually.	Met	N/A

LMU-DCOM
Strategic Plan 2023-2028

Goal #5: The DO program provides a professional, respectful, non-discriminatory, and intellectually stimulating academic and clinical environment.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
	5.3b Publicize procedures for care and treatment after exposure annually.	Annually	Research, Operations, Student Services	Health and Safety Resources Manual annually	One hundred percent (100%) students faculty staff attest to having read the safety guidelines.	100% of students attested to reading the Clinical Rotations Manual for AY 24-25 which outlines the procedure for needlesticks or bloodborne pathogen exposure. The Office of Clinical Education continues to review the BBP exposure procedure with students at annual rotation site visits which occur biannually.	Met	N/A
5.4 Support and maintain programs for student, faculty, and staff mental health and wellness and fatigue mitigation.	5.4a Provide students with access to mental health counseling.	Annually	LMU Counseling, Student Services	Reports; see targets	Mental Health counseling utilization report; StudentLife by Empathia Utilization report.	Students continue to be provided access to mental health counseling.	Met	N/A
	5.4b Provide students with monthly wellness and/or fatigue mitigation programming.	Annually	Student Services	Student Activities Coordinator, wellness budget; Promote Health and Safety Resources Manual Annually through Blackboard	Attendance and programming calendar.	% of students participating in wellness activities determined.	Met	N/A
	5.4c Promote mental health awareness, wellness, and fatigue mitigation with faculty and staff.	Annually	Human Resources, Faculty Development	Offer consistent programming for faculty and staff; Promote Health and Safety Resources Manual annually; Need faculty development sessions on these items; incorporation of self-care and wellness activities each semester	Attendance and programming calendar.	To promote mental health awareness, wellness, and fatigue mitigation with faculty and staff at LMU-DCOM, the Faculty Development department offered during the 2023-2024 AY three live virtual workshops made available to all faculty and staff. Additionally, Faculty Development department created a Wellness Wednesday communication that were distributed monthly to LMU-DCOM faculty and staff utilizing webinars from the Empathia StudentLife resources and LifeMatters EAP. Communication was created to provide resources for wellness in the classroom as well as in personal life. These sessions were also available on demand as faculty and staff had access to archived webinars. Other sources include AAMC. Nineteen communications went out to faculty and staff, with 6 sessions directly meeting goal 5.4c.	Met	N/A

LMU-DCOM
Strategic Plan 2023-2028

Goal #6: The DO program curriculum prepares future clinicians to serve the community with high quality patient-centered healthcare								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
6.1 Review and refine the four-year curriculum that addresses the basic biological, behavioral and clinical sciences to meet the missions for LMU-DCOM.	6.1a Review, Map, and develop courses to correlate with COMLEX blue print.	Biannually	DO Curriculum Committee; Associate Dean of Academic Affairs; Associate Dean of Clinical Affairs; Assistant Dean of Clinical Medicine; Assistant Dean of Basic Medical Sciences; Departmental Chairs; Learning Resource Committee (LRC)	Curriculum mapping report for OMS I and II.	The End of Course Reports (EOCR), Course mean target of 82% or higher.	Courses have met or exceeded the target mean.	Met	None
	6.1b Explore external standards for curricular assessment and development, including national standardized tests.	Annually	Associate Dean of Academic Affairs; Associate Dean of Clinical Affairs; Assistant Dean of Clinical Medicine; Assistant Dean of Basic Medical Sciences	BMS budget; Clinical Budget; curricular mapping tool; Comprehensive Osteopathic Medical Self-Assessment Examination (COMSAE); NBOME COMAT, Lecturio	Curricular content is aligned with National Board of Osteopathic Medical Examiners (NBOME) blueprint, Association of American Medical Colleges (AAMC) curriculum inventory, and American Association of Colleges of Osteopathic Medicine (AACOM) competencies, Program Outcomes Report.	Curriculum committee approved the course syllabus to reflect the curricular alignment with NBOME, AAMC and AACOM. Curriculum committee minutes are available upon request. COMBANK, Uworld and Lecturio are provided to the students. COMSAE is administered to assess readiness before the COMLEX exams. COMAT is given during the clinical years.	Met	None
	6.1c Identify areas where DEI could be incorporated into the curriculum or extracurricular activities (DEI 3.3c.).	Spring 2024	Assistant Dean of Curricular Innovation, Assistant Dean of DEI.	Annual mapping and assessment of curriculum	Curricular map has been reviewed and mapped for DEI 100%. 100% of student activities have been reviewed and mapped for DEI.	The curriculum has been mapped for DEI topics. In the OMSI year, 9 of the 12 courses are mapped to DEI. In OMSII year, 7 of the 16 courses are mapped to DEI. In OMSIV, all 13 courses are mapped to DEI topics. The OIE had planned activities that highlight and support people from diverse backgrounds. These activities include DEI 3rd Monday moments that were conducted regularly throughout the academic year. There were sessions on racism, LGBTQ+ and physical disabilities discrimination. The OIE conducted Cultural Connect that was held in April 2024. During these extracurricular activities, the OIE provided informational sessions about different heritages as well as provided panels with clinicians from various backgrounds. The OIE also supported programming activities from student organizations (LMSA, SNMA, SAGE, REACH, CDMA, Best Buddies) that promote and recognize minoritized populations.	Met	None
	6.1d Map out the areas where DEI is found in the curriculum and in extracurricular activities (DEI 3.3a).	Spring 2024	Assistant Dean of Curricular Innovation, Assistant Dean of DEI.	Annual mapping of the curriculum; inventory of activities from student organizational groups	Curricular map has been reviewed and mapped for DEI 100%. 100% of student activities have been reviewed and mapped for DEI.	The curriculum has been mapped for DEI topics. In the OMSI year, 9 of the 12 courses are mapped to DEI. In OMSII year, 7 of the 16 courses are mapped to DEI. In OMSII and OMSIV, all 13 courses are mapped to DEI topics. The OIE had planned activities that highlight and support people from diverse backgrounds. These activities include DEI 3rd Monday moments that were conducted regularly throughout the academic year. There were sessions on racism, LGBTQ+ and physical disabilities discrimination. The OIE conducted Cultural Connect that was held in April 2024. During these extracurricular activities, the OIE provided informational sessions about different heritages as well as provided panels with clinicians from various backgrounds. The OIE also supported programming activities from student organizations (LMSA, SNMA, SAGE, REACH, CDMA, Best Buddies) that promote and recognize minoritized populations.	Met	None
6.2 Review and refine curriculum for Pre-clinical Medical Education (OMS I, OMS II).	6.2a Review end of course reports and data for improvements.	Biannually	DO Curriculum Committee; Associate Dean of Academic Affairs; Associate Dean of Clinical Affairs; Assistant Dean of Clinical Medicine; Assistant Dean of Basic Medical Sciences	End of course summary, COMLEX level I score reports	Increase 1st time COMLEX Level I pass rate to national average or better.	1st time COMLEX level I passrate below national average (85.4%). 24-25 Testing cycle: COMLEX Level I pass rate (prelim data) is above national average (95%).	Not Met	COMSAE scores to assess readiness before the COMLEX exams (Ongoing)
	6.2b Review system/course syllabi and identify self-directed learning.	Per Semester	DO Curriculum Committee; Associate Dean of Academic Affairs; Associate Dean of Clinical Affairs; Assistant Dean of Clinical Medicine; Assistant Dean of Basic Medical Sciences	Preclinical course syllabi, EOCR	Refinements made to courses each year. Syllabi are reviewed and approved biannually by the curriculum committee prior to posting to LMS (Canvas).	Curriculum committee approved the updated course syllabus to reflect the inclusion of SDL in OMS I and OMS II courses. Curriculum committee minutes are available upon request.	Met	None
	6.2c Review student outcomes in MGA course and determine if Anatomy boot camp is meeting objectives.	Annually	Anatomy Faculty	Self-supporting tuition; anatomy faculty; Performance in MGA course of students in bootcamp	Accepted students' performance in Medical Gross Anatomy Course (DOSYS 701) reflects increased pass rates, Course mean target of 82% or higher.	Over the past 3 years, students who are participating Anatomy tend to have a higher pass rate than their peers who do not participate.	Met	None

LMU-DCOM
Strategic Plan 2023-2028

Goal #6: The DO program curriculum prepares future clinicians to serve the community with high quality patient-centered healthcare								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
	6.2d Integrate NBOME style questions into pre-clinical assessments	Annually	Basic Medical Science Faculty; Director of Assessment Services	Assessment team exam analysis report, course objective analysis report, EOGR	Cognitive complexity analysis of question items for OMS I & OMS II.	100% of Pre-clinical exams item are structured to integrate NBOME style questions.	Met	None
	6.2e Explore opportunities for integration of clinical content into OMS I curriculum and reinforce basic science content in OMS II curriculum.	Biannually	Assistant Dean of Basic Medical Science; Assistant Dean of Clinical Medicine; Associate Dean of Clinical Affairs; Course Directors	Pre-clinical course syllabi, course objectives	Course mean target of 82% or higher, COMLEX Level I scores.	Courses have met or exceeded the target mean. 1st time COMLEX level I passrate below national average (85.4%). 24-25 Testing cycle: COMLEX Level I pass rate (prelim data) is above national average (95%).	Not Met	COMSAE scores to assess readiness before the COMLEX exams (Ongoing)
	6.3 Review and refine curriculum for Clinical Medical Education (OMS III, OMS IV).	6.3a Review student evaluation of preceptor/site and student performance.	Annually	DO Curriculum Committee; Clinical Department Chairs; Associate Dean of Clinical Affairs; Assistant Dean of Clinical Medicine	Web resources; distance technology; annual site reports; End of rotation student eval of preceptors; preceptor evaluation of student	Meet or exceed national mean for individual COMAT exams. Meet or exceed mean national first time pass rates for COMLEX Level II exams.	Average COMAT score for all OMS-III courses (101.1) exceeded the national mean (99.9). 24-25 Testing cycle: COMLEX Level 2 first-time pass rate (98.9%, prelim data) is above the national average (95.7%).	Met
	6.3b Review, improve and include self directed learning into the clinical rotation curriculum.	Annually	Rotation Chairs; Associate Dean of Clinical Affairs; Assistant Dean of Clinical Medicine	Including but not limited to Lecturio, TrueLearn COMBANK, Uworld, UpToDate, GIBLIB, student end of course evaluation.	Meet or exceed mean national mean for COMAT exams.	Average COMAT score for all OMS-III courses (101.1) exceeded the national mean (99.9).	Met	None
	6.3c Refine goals and objectives for all clinical rotations; post updated syllabi to align with DCOM mission and program outcomes.	Annually	DO Curriculum Committee; Associate Dean of Academic Affairs; Assistant Dean of Basic Medical Sciences; Associate Dean of Clinical Affairs; Assistant Dean of Clinical Medicine	Rotation syllabi	Standardized verbiage across syllabi for common objectives, specific measurable objectives based on rotation.	Curriculum committee approved all the updates to rotation syllabi. Curriculum committee minutes are available upon request.	Met	None
6.4 Integrate OPP throughout Clerkship Curriculum.	6.4a Verify, review OPP component in syllabi.	Annually	Chair of OMM; OMM faculty; Clinical Faculty	DO Curriculum Committee; 4th Friday Didactics	Course syllabi reflect the presence of OPP in the 3rd and 4th year clinical courses.	Curriculum committee approved the syllabi that included OPP. Curriculum committee minutes are available upon request.	Met	None
	6.4b Deliver OPP modules during core rotations.	Annually	Chair of OMM	Clinical Skills Workshop (CSW); 4th Friday Didactics	OPP integration in all four (4) years of the curriculum; 95% first time pass for OMM sessions in the Clinical Skills Workshop.	Greater than 95% first time pass rate for OMM session. CSW assessment report available upon request.	Met	None
6.5 Evaluation of clinical training sites.	6.5a Maintain most current database of training sites.	Biannually	Chief GME/Rotations Officer; Assistant Dean of Clinical Medicine; Associate Dean of Clinical Affairs, Clinical Education; Clinical Rotations Coordinators	Database software for scheduling and monitoring rotations	Training site statistics reflect at least 120% of rotation slots for students.	More than 100% training sites are available to students. E-Value, COCA report available upon request.	Met	None
	6.5b Execute affiliation agreements with all clinical teaching sites and preceptors.	Biannually	Clinical Relations Coordinator	eValue database	Affiliation agreements are signed to accommodate at least 120% of rotation slots needed on core rotations. One hundred percent (100%) of preceptors have complete Clinical Adjunct Faculty application.	120% of rotation slots are available on core rotations. 100% of preceptor completed Clinical Adjunct Faculty application. E-Value, COCA report available upon request.	Met	None
	6.5c Identify site coordinator at each site.	Annually	Director, Clinical Education	Site coordinator agreements	One hundred percent (100%) of core sites are staffed with a coordinator.	100% of core site have coordinator. Coordinator list available upon request.	Met	None
6.6 Implement undergraduate Osteopathic Principles and Practice (OPP)/Anatomy Scholars Program/Research Scholar.	6.6a Hire new scholars for OPP, Anatomy, and Research program.	Annually	Anatomy Chair and faculty; Osteopathic Manipulative Medicine (OMM) chair and faculty; Research Directors and Assistant Dean of Research	Number of scholars per class	Up to eight (8) scholars in OPP, Anatomy or Research are contracted annually.	For current year we have 4 OPP scholars (1 in Harrogate and 3 in Knoxville) and 2 anatomy scholar in Knoxville.	Met	None
	6.6b Develop the OPP/Anatomy curricular structure.	Annually	Anatomy Chair and faculty; OMM faculty	Budget		Anatomy and OPP syllabi is approved by curriculum committee and minutes are available upon request.	Met	None
6.7 Continue Masters of Science in Anatomical Sciences degree.	6.7a Track admission into LMU-DCOM and performance after admission.	Annually	Director, Anatomical Science Graduate Program; Associate Dean of Academic Affairs; Assistant Dean of Basic Medical Sciences; Assistant/Associate Dean of Students; Director of Educational Development and Assessment	Matriculation report	Matriculate report and student outcomes report reflect successful correlation between admitted MS students and completion of DO degree.	Masters students matriculated to DO Class of 2028 with a success rate of 100%. Admissions assessment report available upon request.	Met	None
6.8 Continue current PhD program	6.8a Continue the PhD in Anatomical education program.	Annually	PhD Program Director; Anatomy Chair	Number of applicants; Number of graduates	At least two (2) PhDs student enrolled each year per location (Harrogate and Knoxville).	For current year we matriculated 2 more PhD students (1 in Harrogate and 1 in Knoxville).	Met	None
6.9 Continue offering the DO/MBA program and investigate other dual degree options.	6.9a Improve and promote the DO/MBA program.	Annually	Senior Associate Dean; Dean	Number of applicants, Number of graduates with dual degree.	At least 20 students are accepted into the DO/MBA program.	20 students enrolled in DO/MBA program. MBA admission list available upon request.	Met	None

LMU-DCOM
Strategic Plan 2023-2028[illegible]

LMU-DCOM
Strategic Plan 2023-2028

Goal #7: The faculty possess the credentials, knowledge, and skills to carry forth the mission of the DO Program.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
7.1 Hire and retain faculty and chairs with terminal degrees in their respective field.	7.1a Continue to recruit, hire, train and retain full-time clinical medicine, including Osteopathic Manipulative Medicine (OMM), Basic Medical Science (BMS), and Interprofessional Education (IPE) faculty.	Daily	Dean/Chief Academic Officer, Chief Operating Officer, Assistant/Associate Dean of Clinical Affairs, Assistant/Associate Dean of Academic Affairs, Assistant/Associate Deans of Basic Medical Sciences, Chairs, Faculty	Budget allocations, Advertising, Faculty Development Opportunities, Faculty needs/satisfaction assessments; Enrollment, graduation and retainment of LMU-DCOM PhD students	One hundred percent (100%) of open positions are filled and 100% of faculty hold terminal degrees.	23 current open faculty positions and 100% of faculty hold terminal degrees.	Not Met	Continue active recruitment of faculty and support programs contributing to development of new faculty (e.g., Anatomical Education PhD). There will always be openings with turnover etc. Suggest revision of the goal to related to timeline to fill positions once posted for hire.
	7.1b Verify all department chairs, primary care leadership and OMM/OPP leadership possess and maintain the appropriate experiences and credentials.	Monthly	Directors of Operations, Chief Operating Officer, Assistant/Associate Dean of Clinical Affairs, Assistant/Associate Dean of Academic Affairs, Assistant/Associate Deans of Basic Medical Sciences	CVs; AOA and ABMS Website	One hundred percent (100%) of Chairs possess 5 years of teaching and academic leadership in a medical school setting. Clinical chairs are medically licensed and AOA or ABMS board certified. Primary care leadership is AOA or ABMS board certified in Primary Care (i.e., family medicine, internal medicine, pediatrics) discipline w minimum 5 years' experience. OPP/OMM leadership has a minimum of three years of full-time faculty experience, an active medical license, and active board certification from the AOBNNM or a Certificate of Special Proficiency in OMM (C-SPOMM).	100% of current chairs possess 5 years of teaching and academic leadership in a medical school setting.	Met	
	7.1c Create, implement, maintain, and review a credentialing database for need assessments and verification of faculty credentials.	Quarterly	Directors of Operations, Chief Operating Officer	The database itself; database reports; review findings	Fully functional and complete credentialing database that is searchable.	Database creation and development continues.	Not Met	Database created and shared between Directors; Development Continues.
	7.1d Involve Chairs, faculty, and staff as appropriate in recruitment process.	Daily	Dean/Chief Academic Officer, Chief Operating Officer, Directors of Operations, Assistant/Associate Dean of Clinical Affairs, Assistant/Associate Dean of Academic Affairs, Assistant/Associate Deans of Basic Medical Sciences, Chairs, Faculty	Advertising, Search committees	Search committee demonstrates representation of chairs and faculty.	Search committees consist of appropriate chairs, faculty, and staff members in the recruitment/search process.	Met	
	7.1e Develop and incorporate a faculty success plan in the faculty self-assessment process.	Spring 2024	Assistant Dean of Assessment and Faculty Development; Director of Assessment Services; Director of Faculty Development; Department Chairs; Deans of Pre-Clinical Academic Affairs/ Basic Medical Science; Deans of Clinical Medicine/ Clinical Affairs	Annual evaluations	Faculty success plans incorporated into annual review process.	Has been discussed, but not implemented to date.	Not Met	Administration will meet to discuss the feasibility of a faculty success plan, and if determined feasible, form a plan for implementation within the next academic year.
	7.1f Review allotted FTE for scholarly activity in all FT and PT faculty appointments during the 2023-2024 Faculty Adequacy Model process to ensure the reported FTE for research reflects the current amount of time faculty are allotting to research and alignment with program goals and objectives.	Annually	Dean/Chief Academic Officer, Chief Operating Officer, Assistant/Associate Dean of Clinical Affairs, Assistant/Associate Deans of Academic Affairs/Basic Medical Sciences, Assistant Dean of Research, Chairs, Faculty	Faculty self-evaluations (and success plans), Faculty workloads/adequacy modeling	Increased total and relative research/scholarly activity FTEs; statistical agreement between self-reported scholarly activity and documented FTE devoted to scholarly activity.	FTE breakdowns reviewed annually.	Met	
	7.2 Expand number of clinical adjunct faculty in database to support increasing number of students requiring rotation sites/clinical experiences.	Daily	Chief of Graduate Medical Education and Rotations; Assistant/Associate Dean of Clinical Affairs; Assistant/Associate Dean of Clinical Medicine; Clinical Chairs; Rotation Directors; Clinical Faculty; Directors of Student Medical Education	Clinical Adjunct Database; Online and physical clinical adjunct faculty applications	Clinical Adjunct Database contains > 2500 credentialed physicians in various disciplines to provide clinical training; ≥500 new applications annually.	4682 preceptors in e-value with 2,078 listed as Clinical Adjunct Faculty. 487 applications already in 2024 and 697 applications in 2023.	Met	

LMU-DCOM
Strategic Plan 2023-2028

Goal #7: The faculty possess the credentials, knowledge, and skills to carry forth the mission of the DO Program.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
7.3 Review and refine new Faculty-on-boarding program	7.3a Identify new faculty and complete new faculty on-boarding program/orientation within 90 days of hire.	Quarterly	COO, Directors of Operations; Assistant Dean of Assessment and Faculty Development; Director of Assessment Services; Director of Faculty Development; Director of Alumni Services and CME	Human Resources; Director of Faculty Development	One hundred percent (100%) of new faculty receive a new faculty orientation.	Onboarding process documented and accessible via PeopleAdmin and Faculty Development procedures.	Met	
	7.3b Assure 100% orientation completion for new preceptors.	Quarterly	Assistant/Associate Dean of Clinical Affairs; Assistant/Associate Dean of Clinical Medicine; Rotations Director; Directors of Student Medical Education; Director of Alumni Services and CME	Office of Clinical Education	One hundred percent (100%) of new preceptors are on-boarded with a preceptor specific orientation.	Preceptors are not required to complete an orientation with application submission. They are encouraged to complete a free 2-hr CME course which can be found at the following link: Developing a Productive Preceptor-Student Relationship LMU-DeBusk College of Osteopathic Medicine (lmu.net.edu). 6 preceptors have completed this course in the last year. Preceptors are also invited to attend the Preceptor Development Sessions offered through the Office of CME and Preceptor Development every 4th Friday of the 4-week rotation.	Not Met	Increase advertising of the 2-hr CME course for preceptors throughout the year. Continue the preceptor development courses. Recommend new assessment target of course completion in the AY rather than a % of new preceptors (i.e., Goal: 50 preceptors complete the orientation for new preceptors).
	7.3c Meet academic environment needs of incoming faculty.	Daily	Director of Assessment Services; Director of Faculty Development; Director of Alumni Services and CME; Assistant/Associate Deans of Academic Affairs/ Basic Medical Science; Assistant/Associate Dean of Clinical Affairs; Assistant/Associate Dean of Clinical Medicine; Department Chairs; Rotations Director	Assessment Office; Faculty Development Needs/Satisfaction Assessment Survey; Preceptor Development Needs Assessment Survey; CME surveys; Site visits	Faculty Development Needs/Satisfaction Assessment Survey response rate >65%; Preceptor Development Needs Assessment Survey response rate > 15%; Faculty evaluations; Preceptor reviews after each rotation; Site visits at least once a year.	2024 Faculty Technology Survey resulted in 43.8% response rate; 81% response rate for faculty development/needs survey; site visits are performed at least annually, Preceptor Development Needs Survey response rate was 9.7% (188 respondents).	Not Met	
7.4 Develop and deliver Faculty Development activities to advance faculty teaching and scholarly activity skills and abilities	7.4a Develop and expand programs for clinical, basic science and IPE faculty as requested (workshops and technology tips).	Quarterly	Chief Operating Officer, Assistant Dean of Assessment and Faculty Development Director of Assessment Services; Director of Faculty Development; Assistant Dean of DEI	Faculty expertise; Assessment questionnaires after faculty development workshops	Faculty development sessions are offered quarterly and evaluated for continued needs assessment. Including bias training at least annually (DEI 3.5c).	Monthly Faculty Development and DEI 3rd Monday Sessions conducted throughout each academic year; Faculty development sessions held regularly based on Faculty interest (e.g., averting remediation, engagement in the classroom, etc.); curricular retreats held twice a year; tech and development tips communicated via email frequently throughout the year.	Met	Recommend new assessment target of course completion in the AY rather than a % of new preceptors (i.e., Goal: 50 preceptors complete the orientation for new preceptors).
	7.4b Design a series of trainings that focuses on responding to the challenges and uses of DEI (DEI 3.5b).	Spring 2024	Assistant Dean of Assessment, Director of Faculty Development		At least 2 sessions conducted annually.	Monthly DEI 3rd Monday Sessions conducted throughout the academic year. Provided annual inclusion training.	Met	
	7.4c Update and maintain DCOM website to include latest resources available to faculty to support development.	Quarterly	Assistant Dean of Assessment and Faculty Development; Director of Assessment Services; Director of Faculty Development; Data and Quality Assurance Manager	Faculty development program(s); website	Up-to-date website with latest resources included.	Website is completely updated with all links accessible and consisting of latest resources.	Met	
	7.4d Maintain a preceptor development webpage.	Annually	Assistant/Associate Dean of Clinical Affairs; Assistant/Associate Dean of Clinical Medicine; Rotations Director; Directors of Student Medical Education; Data and Quality Assurance Manager	Webpage	Operational webpage utilized by preceptors.	There is a webpage for preceptor development (https://dcome.lmu.net.edu/) that is maintained by the Office of CME and Preceptor Development.	Met	
	7.4e Identify grants for Faculty Development.	Daily	Director of Health Research & Grants; Assistant Dean of Assessment and Faculty Development; Assistant Dean of Research	Human Resources; Emails and/or web postings; Office of Research	Communications regarding opportunities; at least 3 grants in development and/or submission.	7 external grant applications were submitted this year. In addition, several external student grants were submitted.	Met	
	7.4f Increase annual faculty development needs assessment survey response rate to drive programming and assure appropriate support of faculty in advancement.	Annually	Assistant Dean of Assessment and Faculty Development; Director of Assessment Services; Director of Faculty Development; Senior Associate Dean	Survey instrument; Rank and Multi-Year Appointment Committee	Sixty-five percent (65%) response rate on survey; rank advancement success rate.	After further efforts of collaboration and communication with faculty, including incentives for participation, the target was met and exceeded at 81% participation. Faculty responding were 77 (81% RR) compared to 40 in 2022-2023 (92% increase) and compared to 43 in 2021-2023 (79% increase); 4 faculty were approved for rank promotion (3 to Professor, 1 to Associate Professor).	Met	

LMU-DCOM
Strategic Plan 2022-2027

Goal #8: The DO program faculty, students, and post-graduate trainees have the opportunity to participate in research and/or scholarly activities contributing to the advancement of knowledge in medicine								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Target	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
8.1 Promote and support a culture of research and scholarly activity at LMU-DCOM that contributes knowledge to the biomedical and medical sciences, including osteopathic manipulative medicine and osteopathic principles and practices.	8.1a Ensure financial support for research and scholarship.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Deans of BMS; Assistant Dean of Research; Directors of Research (Harrogate and Knoxville); Research Coordinator; and Director of Health Sciences Research and Grants	BMS/Clinical Medicine budgets; Capital Budget; Research and Grants Committee; Research committee intramural funding awards; Research Department: Student Travel, Poster, Conference, and Publication fees paid. and Grants	The budget is reviewed quarterly to assess allocated funds for research (both locations) to ensure student needs are met and planning for future budget allocations (potential 10-20% increase each year due to needs). A needs assessment is conducted for the faculty yearly to meet Faculty research needs. Increase research support 10% to meet research growth for students, faculty, and staff.	We have met the quarterly assessing of research funds; however, moved to monthly review. The budget was reviewed monthly for Knoxville and we have modified to review Harrogate budget monthly as well. We are reviewing budget setup and infrastructure for Orange Park. We were able to increase our budget for 2024/2025 to fit the increased research needs. A needs assessment was conducted for faculty research needs and research support increase of 10% was met.	Met	
	8.1b Encourage all new faculty and students to be active in research projects and scholarly activities in the biomedical and clinical sciences, including osteopathic manipulative medicine and osteopathic principles and practices.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research; Directors of Research (Harrogate and Knoxville); Research Coordinator; and Director of Health Sciences Research and Grants	BMS Research budget; Research Dedicated FTEs; Faculty startup fund allocations; Intramural Grant funds; DCOM scholars program; Extramural Grant Funds; Faculty/Staff Development Workshops; Student Research Workshops; Dean's Hours (OMS I-IV), Fourth Friday Didactic Presentations; Research Webpage; Research CANVAS	Meeting presentations, journal publications, internal and/or external grantsmanship; at least one (1) submission per year per faculty with research support.	COCA documentation and DCOM Quarterly Newsletter aligns with faculty and students actively patriating in research with outcomes being presentations/posters, journal publications, internal funding, and/or external funding. We have seen a continuous increase in productivity for research outcomes.	Met	
	8.1c Identify space, equipment and funding opportunities for research from external sources.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Directors of Operations; Assistant Dean of Research; Directors of Research; (Harrogate and Knoxville), Lab Assistant/Managers, and Director of Health Sciences Research and Grants	BMS/Clinical Med budgets; Yearly Capital budget requests; Facilities/Equipment (Faculty Assessment Needs); External Grants Research Department Tracking	Square footage assigned research space in both locations; External funding applications and/or awarded (Applications 5-10/year with award of 2/year, increasing each year); Established agreements and/or collaborations with external entities; Increasing number continuously over next 5 years.	Square footage is assigned for research space and we are looking for more ways to organize spaces to best fit needs of collaboration. 7 Faculty Extramural grant applications were completed- one with AACOM and one was extended with AACOM. Other grants applied for included Walmart Foundation, HRSA, ARC, Allen Foundation, etc. We continue to establish agreements and or collaborations with other Hospitals, Organizations like AACOM, local organizations (senior centers, KARM, etc.).	Met	
	8.1d Ensure a representative of LMU-DCOM is appointed to the Lincoln Memorial University's Committee on Scholarly Activity (COSA).	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research	COSA meeting minutes and attendance record	LMU-DCOM representative shows at least a 90% attendance record to COSA meetings.	100% attendance by Assistant Dean of Research to all COSA meetings.	Met	
	8.1e Provide information regarding research and scholarly activity opportunities and support services at LMU-DCOM to faculty, staff and students.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Directors of Operations; Assistant Dean of Research; Directors of Research; (Harrogate and Knoxville), Lab Assistant/Managers, Research Coordinator, and Director of Health Sciences Research and Grants	OMS I student orientation mid-semester of 1st year; Dean's hour(s); LMU Research Day(s); Fourth Friday Didactic presentations; Workshops/Information Sessions for Faculty, staff, and students; Weekly Faculty Staff communications; Schedule of events, news, and funding opportunities on DCOM Research Webpage and CANVAS	Twice yearly presentations on numbers of faculty, staff, and student participation in research to the BOD and monthly reports to Dean's Council; Number of faculty, staff, and student publications, presentations, and deliverables (monthly to Dean's Council); general communications; Monthly Research Department Meeting; Four Research faculty development sessions a year. Three Student research information sessions per year. Research Department implementation of Quarterly Newsletter, updates of Research Webpage, and Research Canvas Page.	All was completed. Presentations to Board, Dean's Council Monthly Reports with written reports. Monthly Research Department meetings occurred and all Faculty Development Research sessions occurred with ~25-30 attendees. Student sessions were held, DCOM Research Quarterly Newsletter was sent out, and the CANVAS and Research Webpage have been maintained.	Met	
	8.1f Increase recognition of research and scholarly projects and programs within and outside of LMU.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Directors of Operations; Assistant Dean of Research; Directors of Research; (Harrogate and Knoxville), Lab Assistant/Managers, Research Coordinator, and Director of Health Sciences Research and Grants	BMS/Clinical Budget; LMU Research Day; Weekly Communication, Research Webpage, Research CANVAS, and Quarterly Newsletter. Research Department Records: Publications; Presentations at local, regional, and national conferences; collaborative activities, Intramural Funding Faculty/Students	Research Department implementation of Quarterly Newsletter, monthly/daily updates on the Research webpage, and Research CANVAS. Increase 10% for presentations at local, regional, and national conferences; for students and faculty.	Recognition of research and scholarly projects have been announced in Quarterly Newsletters, Email, and Webpage. A >10% increase has occurred over the year as seen in our COCA documentation, Dean's Council Reports, and Quarterly Newsletters.	Met	
	8.1g Encourage collaborations between LMU-DCOM and research groups in LMU-CVM, Department of Math and Science, CAHA, and other schools within the LMU community.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research; Assistant Dean of Clinical Medicine; Directors of Research; Research Coordinator, Director of Health Sciences Research and Grants	Intra & extramural funding opportunities; LMU Research Day; Roundtable Research Discussions Monthly (Research Department).	Ten to twenty percent (10-20%) of DCOM co-authored presentations, publications, grant applications, and other deliverables will be with investigators/scholars from LMU-DCOM and other schools within LMU.	An increase above 10% has been seen with DCOM and collaborations throughout the LMU Community.	Met	

LMU-DCOM
Strategic Plan 2022-2027

Goal #8: The DO program faculty, students, and post-graduate trainees have the opportunity to participate in research and/or scholarly activities contributing to the advancement of knowledge in medicine								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Target	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
	8.1h Ensure exposure to research opportunities in all years of medical training for LMU-DCOM students.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research; Assistant Dean of Clinical Medicine; Directors of Research; Research Coordinator, Director of Health Sciences Research and Grants	Preclinical and clinical DCOM curricula; Students Intramural/Extramural Awards; Scholars programs; Required curricular activities with research exposure (e.g., peer-reviewed publication, and/or journal clubs, Fourth Friday Didactics etc.); Research Department Data including students participating in elective research rotations; intramural student research support funding; abstracts, presentations, publications.	Fill all OPP/Anatomy Scholar positions including the addition of a research scholar program (2 Harrogate, 2 Knoxville). 10% yearly increase in OMS III and IV students participating in research electives; 5-10% yearly increase in intramural student funding for spring and summer awards.	All OPP Scholar positions were not filled as number of applications and qualified candidates decreased. The Harrogate positions were not filled and the Knoxville positions were filled. The anatomy Scholar Positions were filled. Applications were not received for Research Scholar although we had several students that were interested; however, did not complete the application. A significant increase in research electives occurred this year (~30 research electives). Student Intramural funding was similar to last year.	Not Met	Assessment Target was partially met. Academic success and COMLEX track is the priority for students/scholars. As a result, some applicants were not considered. Loss of OPP Faculty and bandwidth of Knoxville faculty could have been underlying issues. New Research Scholar position could have been announced earlier and will announce earlier for 2024-2025 year. Metric should stay as we undergo learning/growth opportunities and make sure student are set up for success academically.
8.2 Identify areas of research and scholarly activities for faculty, staff, and students that will benefit and support the mission and goals of LMU-DCOM	8.2a Identify ways to support research and scholarship for faculty, staff, students and residents.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research; Assistant Dean of Clinical Medicine; Directors of Research; Research Coordinator, Director of Health Sciences Research and Grants	Dedicated faculty FTE and Protected time for research and scholarly activity; BMS/Clinical budget; Research and Grants Committee; Development of collaborative opportunities; Notification of extramural funding opportunities, Student Research Opportunities with Scholar Programs (Anatomy, OPP, and Research Only)	Prioritize funding with a focus on rural health, underserved, Appalachian region-specific issues increase 5-10%.	Funding has been prioritized to focus on rural health, underserved, and Appalachian reason. With student intramural grant funding, there was an increase >5-10% External funding is underway for collaboration with rural area hospitals and medical schools.	Met	
	8.2b Identify and communicate grant opportunities and other sources of funding.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research; Assistant Dean of Clinical Medicine; Directors of Research; Research Coordinator, Director of Health Sciences Research and Grants	NIH All of Us, NIH Funding, Foundational Funding (East TN Foundational Funding, Trinity, Walmart, etc.), and professional society grants.	Continuous search to identify grant opportunities with communication (monthly and as needed) via Research CANVAS, Website, Quarterly Newsletter, and email. Searches will include local, regional, and national opportunities with Research Department Tracking. Research Department identifying faculty to match research grants and meetings to encourage participation in the application.	A continuous search to identify grant opportunities is being explored by the Assistant Dean of Research and all in the Research Department. Communication via CANVAS, Quarterly Newsletters, email, etc. is being communicated. A tracking tool has been developed; however, it needs to be utilized more effectively.	Met	
	8.2c Establish and strengthen partnerships with other Colleges of Osteopathic and Allopathic Medicine, regional consortia, state and local organizations.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research; Directors of Research; Chief of GME; Faculty department chairs; Faculty	Regional and national conferences (e.g., AOA ARH; ORAU)	Minimum 10-15 organizations.	We continue to establish and strengthen our partnerships with other Colleges, regional consortia, and state local organizations such as AACOM, AOA, ARH, TOMA, VCOM, NOVA, Grow Oakridge, KARM, Covenant, Tennova, UT, Oakridge Senior Center, etc.).	Met	
	8.2d Foster and promote research and/or scholarly activity that includes or incorporates osteopathic manipulative medicine (OMM) and osteopathic principles and practice (OPP).	Annually	Assistant Dean of Research; Assistant Dean of Clinical Medicine; Research Directors; Chair of OPP	All faculty; OPP scholars; facilities (e.g., OPP lab, basic science labs, clinical/functional assessment labs), OMM Scholar Clinic	Ten percent (10%) of total research. Required Research projects/scholarly activity for all OPP Scholars with tangible outcomes of presentations and/or publications. Encourage collaborations between OPP, Anatomy, Research Scholar, and integrating OMM Scholar Clinic.	Increase in 10% of total research with inclusion of OPP Research has been met included an extramural grant from AACOM with 3D Modeling, OPP Scholars, student clinic, and sports clinics with LMU.	Met	
8.3 Encourage and support research and scholarly activity by faculty, staff, students, and post-graduate trainees	8.3a Review library support to ensure that it meets the research needs of LMU-DCOM faculty, staff, and students.	Annually	Medical Librarian; Learning Resources Committee; Assistant Dean of Research; Directors of Research	Library budget; Learning Resource Survey	Yearly needs assessment for journals, databases, and interlibrary loans.	Yearly needs assessment was conducted by the Medical Librarians and reported out to faculty.	Met	
	8.3b Maintain policies and procedures for processing LMU-DCOM faculty, staff, and student requests for research needs	Annually	Assistant Dean of Research; Assistant Deans of BMS, Directors of Research	DCOM Research Budget; Research Needs Requests/Survey, Research Department Database	Policies are maintained on the Research Webpage and CANVAS. All research needs are reviewed on a quarterly to yearly basis.	Policies have been maintained on the Research Webpage and Canvas. Research needs were and continued to be reviewed quarterly. Updates were made in June and approved by all parties for the 2024-2025 year.	Met	
	8.3c Provide research start-up funding packages for new faculty.	As hired	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research; Assistant Deans of BMS.	BMS Budget; Funding determined annually	Increase the number of research startup funds for new faculty as needed. Annual report of new faculty start-up funds utilized.	Research startup funds were increased for new faculty to 5 New Faculty Positions in Harrogate at (\$30K) and 3 New Faculty Positions in Knoxville at (\$30K).	Met	
	8.3d Provide consultation to faculty,	Annually/	Assistant Dean of Research; Director	Research Department Database;	Continuous search to identify grant	Continue to identify grant opportunities and communicate via the	Met	

LMU-DCOM
Strategic Plan 2022-2027

Goal #8: The DO program faculty, students, and post-graduate trainees have the opportunity to participate in research and/or scholarly activities contributing to the advancement of knowledge in medicine								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Target	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
	staff, students, postgraduate trainees, and affiliated GME members in research design and analysis, as well as grant acquisition opportunities.	as needed	of Health Sciences Research and Grants; Research and Grants Committee; Directors of Research, Research Coordinator; Assistant Dean of Clinical Medicine	Roundtable Monthly Discussions, Student/Faculty/Staff Research Workshops	opportunities with communication (monthly and as needed) via Research CANVAS, Website, Quarterly Newsletter, and email. Searches will include local, regional, and national opportunities with Research Department Tracking, Four Faculty Development Research sessions per year. Three Student Research sessions per year. Individual and Group consultations are provided continuously.	mechanisms mentioned. Research Department established better tracking mechanisms through excel and are monitoring monthly for improvements. Faculty Development and Students sessions were created and delivered. Individual and group consultations were provided for faculty and students. The research department is also assisting our preceptors and residents in research consultations.		
8.4 Develop and implement an evaluation system that recognizes the importance of research to the mission of LMU-DCOM	8.4a Provide faculty, and staff as appropriate, with protected time for research and other scholarly activities.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Deans of BMS; Assistant Dean of Research; Assistant Dean of Clinical Medicine; Department Chairs; Promotion and Multi-Year Appointments Committee	Research Department Database: number of faculty/staff devoted to research; Presentations by LMU-DCOM faculty, staff, and students at local, regional, and national meetings; Publications in peer-reviewed scholarly journals; Annual faculty and staff evaluations	Contracts containing dedicated FTEs to research; End-of-year evaluation request of time for research dedicated time. Increasing scholarly activity and research by 10% each year. Increasing our OPP research each year (5-10%) as well as increasing our focus on rural health (5-10%).	A 5-10% increase in research has been met as seen in our COCA documentation and quarterly newsletters for all research, OPP, and rural health.	Met	
	8.4b Incorporate research and scholarly activity in the annual faculty success planning and evaluation process.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research; Assistant Dean of Clinical Medicine; Department Chairs; Promotion and Multi-Year Appointments Committee	Faculty evaluations containing scholarly activities	Thirty faculty members have continuously participated in scholarly activities over the last 3 years including (Abstracts, Presentations, Publications, and Grant Awards). Increasing the number of faculty and scholarly activities by 10%.	The number of Scholarly activity has increased by 10% over the last 3 years as seen in our COCA documentation and Quarterly Research Newsletters.	Met	
	8.4c Ensure faculty and staff awareness of the incentive pay policy to encourage extramural funding applications.	Annually	Dean/Chief Academic Officer; Chief Operating Officer; Assistant Dean of Research, Directors of Research; LMU Office of Research Grants and Sponsored Programs (ORGSP)	New Faculty Orientation, Faculty Development Workshops, Faculty Needs Assessment; Research Webpage, and Canvas.	Faculty needs assessment evaluation to ensure 90-100% awareness.	Awareness of incentive pay was/is discussed in our Faculty Development sessions, Grant Development sessions, ORGSP sessions, as well as during initial application review with Director of Grants.	Met	

LMU-DCOM
Strategic Plan 2023-2028

Goal #9: Students. The DO program recruits, admits, and holistically supports students								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
9.1 Recruit and select qualified applicants from diverse backgrounds to the LMU-DCOM osteopathic medical education program	9.1a Increase completion rate of applications for prospective students from the Southern Appalachian region.	Annually	Assistant Dean of Admissions; Director of Recruitment and Outreach	Budget	Identify and contact 100% of in-progress applicants from the Southern Appalachian region to encourage application completion.	100% of in progress applicants from the Southern Appalachian region and beyond were contacted and encouraged to complete their applications.	Met	
	9.1b Increase engagement with prospective students from diverse backgrounds raise the visibility of LMU-DCOM.	Annually	Director Public Relations and Marketing for Health Sciences; Assistant Dean of Admissions; Director of Recruitment and Outreach; Director of Student Life; Associate Director of Student Life; Student Activities Coordinator; LMU-DCOM DO student ambassadors and specialty student club members	Budget; Public Relations Budget	Send at least 2 admissions staff members to the Diversity in Osteopathic Medicine Career Fair (Choose DO); Identify and build relationships with a minimum of 2 new HBC's in collaboration with the Assistant Dean of Diversity, Equity, and Inclusion.	Attended Diversity in Osteopathic Medicine Career Fairs. Collaborated with the Assistant Dean of Diversity, Equity and Inclusion regarding HBC's. Recruited at schools with diverse student populations.	Met	
	9.1c Conduct onsite and/or virtual interviews for prospective students.	Annually	LMU-DCOM faculty and staff	Budget	Interview 1200 applicants.	We interviewed 1,519 applicants.	Met	
	9.1d Develop and present the Osteopathic Medical Education Awareness Conference (OMAC) to local community.	Annually	Assistant Dean of Admissions	Budget	Add at least 1 new presentation to provide a wider range of topics for participants.	The Osteopathic Medical Awareness Conference was held in October on the Harrogate campus with over 100 in attendance.	Met	
	9.1e Participate and/or exhibit in national and regional conferences and health professions events.	Annually	Director of Recruitment and Outreach; LMU-DCOM faculty/staff	Budget	Attend minimum of 40 events per academic year, combination of in-person and virtual.	Participated in over 40 events. (Virtual and in person.)	Met	
	9.1f Monitor entry data and admission criteria, including Medical College Admission Test (MCAT), grade point average (GPA), and demographic factors.	Annually	Assistant Dean of Admissions; Assessment Office; Dean of Students	Admissions reports; Assessment Data	Enroll 459 students.	We enrolled 459 students.	Met	
	9.1g Assist students with military scholarships, including Health Professions Scholarship Program (HPSP).	Annually	Assistant Dean of Admissions; LMU Office of Financial Services; Dean of Students; Invited military scholarship personnel	Orientations; Email; Invited presentations	Host at least 1 presentation for students interested in HPSP.	We had representatives from HPSP on campus for OMAC and for Accepted Students Day. They have also presented through virtual presentations.	Met	
9.2 Publish and follow academic standards policies and procedures	9.2a Implement tracking system for student advancement, including student promotion, filing of grievances/appeals, retention, graduation.	Annually	Dean of Students; Director of Academic Support; Director of Students and Academic Advancement	Student Handbook; Course Syllabi	Research and identify a minimum of 3 vendor options for potential tracking systems to best fit DCOM needs.	Working with LMU to implement Student Management System - Target X. Roll out set for Oct 1 per Deb Moyer.	Not Met	Working with LMU to implement Student Management System - Target X. Roll out set for Oct 1 per Deb Moyer.
	9.2b Implement student tracking system for United States Medical Licensing Examination (USMLE) licensure examinations in addition to Comprehensive Osteopathic Medical Licensing Examinations (COMLEX).	Annually	Dean of Students; Dean of Basic Medical Sciences; Dean of Curricular Innovation; Director of Academic Support; Director of Students and Academic Advancement	Student Handbook; Email; Blackboard Organization; Veerabridge	Research and identify a minimum of 3 vendor options for potential tracking systems to best fit DCOM needs.	Have created internal tracking system for COMLEX/USMLE as well as implemented readiness standards for both. Will roll into SMS when implemented.	Met	Will roll into SMS when implemented. See 9.2a.
9.3 Publish and follow policies and procedures regarding transfer or admissions with advanced standing.	9.3a Create transfer course equivalency form for student applications.	Annually	Assistant Dean of Admissions; Dean of Students; Registrar		One hundred percent (100%) of transfer students have completed transfer course equivalence form for approval.	Process in place.	Met	
9.4 Maintain accurate, secure, and confidential database for official student record keeping.	9.4a Train faculty and staff on policies regarding student record keeping, including but not limited to the Student Concern Form and FERPA.	Annually	Dean of Students; University Legal Services		One hundred percent (100%) of faculty staff complete FERPA training and receive links to Student Concerns Form.	Working with LMU to implement Student Management System - Target X. Roll out set for Oct 1 per Deb Moyer.	Not Met	Working with LMU to implement Student Management System - Target X. Roll out set for Oct 1 per Deb Moyer.
9.5 Provide academic counseling resources and services to support student learning and advancement.	9.5a Increase availability of individual and group-based academic support activities for students.	Annually	Director of Academic Support; Dean of Students; Director of Students and Academic Advancement		Add at least 1 additional group-based academic support workshop.	One additional group-based academic support workshop added in Spring 2024 semester.	Met	N/A
9.6 Provide career counseling resources and services.	9.6a Increase availability of career counseling workshops for students years 1 through 4.	Annually	Director of Career Services; Associate Director of Career Services; Senior Associate Dean; Director of Alumni Services and CME; Assistant Director of Alumni Services	Student Handbook; Orientations; Email; Ongoing workshops	Add at least 1 additional group-based career services workshop for OMSI and OMSII students.	Series for OMS I and II in development, but not completed in this AY.	Not Met	Sessions set to occur in November of 2024.
	9.6b Provide opportunities to connect Alumni with students years 1 through 4 and offer mentoring regarding career development.	Annually	Director of Alumni Services and CME; Chief Information Officer; University Advancement	Budget; Social Media; fundraising	Add at least 1 additional Alumni Services guest speaker event.	Eleven (11) sessions were held in AY 2022-2023. Held 9 sessions of the DO Seminar Series for AY2023 - 2024.	Not Met	Continue to host at least one session during each month of the AY.

LMU-DCOM
Strategic Plan 2023-2028

Goal #9: Students. The DO program recruits, admits, and holistically supports students								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
9.7 Provide financial aid and debt management counseling.	9.7a Present mandatory financial aid and debt counseling sessions to matriculating students.	Annually	LMU Office of Financial Services; invited guest speakers	Budget; Interview Day; Orientations; Graduation Requirement	One hundred percent (100%) of students complete mandatory sessions.	100% of students completed mandatory sessions.	Met	N/A
	9.7b Offer group and individual financial aid and debt counseling meetings to students.	Annually	LMU Office of Financial Services	Student Handbook; Orientations, LMU Website	Add at least 1 additional financial aid and debt counseling sessions for students.	Financial aid and debt counseling sessions added to OMS-I, OMS-II, and OMS-III years.	Met	N/A
	9.7c Conduct loan exit interviews with graduates, recessed, and dismissed students.	Annually	LMU Office of Financial Services; Dean of Students		One hundred percent (100%) of students attend exit loan interviews.	100% of students attended an exit loan interview.	Met	N/A
9.8 Provide student access to confidential mental health services 24 hours a day, 365 days a year.	9.8a Increase knowledge of and accessibility to available mental health services, including service locations and hours.	Annually	LMU Office of Counseling Services; Dean of Students; Director of Students and Academic Advancement	Student Handbook; Orientations; Email; Ongoing workshops; LMU Website	Partner with at least 1 student club/organization to provide 1 additional mental health awareness workshop to students.	One additional mental health awareness workshop offered through DCOM Strong.	Met	N/A
9.9 Provide student access to physical health services.	9.9a Increase knowledge of and accessibility to available diagnostic, preventive, and therapeutic health services.	Annually	Director of Operations; Dean of Students; Medical Director, Student Health Center; Dean of Clinical Affairs	Student health fees; Student Handbook; Orientations; Email; LMU Website	Locate contract agreement with Summit Medical to ascertain services and to ensure 100% of students have access to services.	Unable to confirm contract.	Not Met	While the Summit Medical contract was unable to be executed, contracts with two other healthcare providers were confirmed for Orange Park. Update assessment target to "Maintain agreements with medical providers in all locations necessary to ensure 100% of students have access to services."
9.10 Any health professional engaged in a physician-patient relationship must recuse from the academic assessment or promotion of the student receiving those services.	9.10a Require committee members to recuse themselves from Student Progress Committee and other evaluative activities should a conflict of interest be present.	Annually	Chair of Student Progress Committee; Dean of Basic Medical Sciences; Dean of Clinical Affairs	Student Progress Committee Minutes	100% of SPC meeting agendas include an opportunity for recusals.	Included in all agendas and minutes.	Met	N/A
9.11 Require student health insurance.	9.11a Track student health insurance requirements.	Annually	Assistant Dean of Admissions; Director of Students and Academic Advancement; Rotations Manager; Dean of Students	CastleBranch	One hundred percent (100%) of students provide proof of student health insurance.	All students have health insurance.	Met	N/A

LMU-DCOM
Strategic Plan 2023-2028

Goal #10: The DO Program supports the development and maintenance of community-based graduate medical education programs and prepares students to be competitive for placement into GME programs.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
10.1. Support the development and maintenance of the continuum of osteopathic education.	10.1a The Graduate Medical Education Committee shall meet at least quarterly to monitor Graduate Medical Education (GME) development.	Quarterly	Chief of GME and Rotations; Graduate Medical Education Committee (GMEC)	Budget; work with local, state and regional health systems to identify GME opportunities, develop feasibility studies and navigate the accreditation process	Four (4) meetings annually.	The Committee met on the following dates: 6.13.23 9.12.23 12.12.23 3.12.24 6.11.24	Met	
	10.1b Develop a Suite of Services for GME Development and Maintenance.	Quarterly programming	Chief of GME and Rotations; GMEC; Medical Librarian, Center for IPE and Simulation, Life Support Training Director, Director of Alumni Services and CME	Budget, library resources, IS resources, event registration and communication platforms	Event registrations, library usage data, and program and course completion data tracking implemented.	Procedure Workshops have been completed for Johnston Memorial Hospital IM and FM residency programs and for Norton Community Hospital IM program. Programming/lecture was delivered for Johnston Memorial Hospital IM/FM programs by Dr. Keagy for their weekly didactics. Library access, including UpToDate, has been provided to Covenant Health FM program, Tennova IM program, Riverside Regional Medical Center IM program, and is being processed for Lifepoint Health residency programs. AHA certification (BLS, ACLS) has been provided to Tennova North IM residency program.	Met	
	10.1c Develop marketing materials that describe LMU-DCOM GME development resources.	July 2022	Chief of GME and Rotations; GMEC; Director of PR and Marketing for Health Sciences	Printing budget, web presence/IS resources	Will work with the PR department to better develop marketing tools to distribute at conferences (OMED, TN Rural Health Conference, etc.) that outlines the services we have available to developing and established GME programs.	Marketing by word-of-mouth to programs has been most effective.	Not Met	Will work with the PR department to better develop marketing tools to distribute at conferences (OMED, TN Rural Health Conference, etc.) that outlines the services we have available to developing and established GME programs. Will attend conferences targeted at residency program directors and staff.
	10.1d Provide accredited Continuing Medical Education (CME) programs that include clinical and preceptor development with resources targeting preceptors, adjunct faculty, clinical sites, GME partners, alumni, residency program staff and faculty, and health care professionals by identifying, developing and delivering high-quality programming, addressing clinical practice gaps, and clinical faculty development with integration of Osteopathic Principles and Practice (OPP).	Annually	Director of Alumni Services and CME, Preceptor Development Committee, Clinical Education office	Educational grants, Learning Management Systems including, but not limited to, EthosCE and MediaSite, Clinical faculty, Information Technology (IT) support, OMM faculty	Deliver at least five (5) CME programs annually; review results of annual needs assessments, completion of programs and analysis of outcomes data; maintain AOA accreditation as a Category 1 CME sponsor.	LMU-DCOM provided 15 CME individual CME programs during AY 23-24. We also accredited 25 individual CME programs for partner institutions, including AdventHealth Ocala, CHI St. Vincent Arkansas Neurosurgery Institute, Community Health Systems, and the SW VA GMEC. The 2023 Preceptor Development Needs Assessment Survey was conducted in September/October, 2023, with 188 respondents (1990 surveys sent). LMU-DCOM was awarded Five-Year Continuing Accreditation with Commendation status as a Category 1 CME sponsor in November 2022.	Met	
	10.1e Develop and attend need-based accredited Continuing Medical Education (CME) Conferences and events.	At least 4/year	Director of Alumni Services and CME; GME Program leadership; LMU-DCOM faculty and staff leadership; LMU-DCOM Alumni	Budget	Documented and delivered CME programs with a target of delivering at least four (4) programs annually.	LMU-DCOM provided 15 CME individual CME programs during AY 23-24. We also accredited 25 individual CME programs for partner institutions, including AdventHealth Ocala, CHI St. Vincent Arkansas Neurosurgery Institute, Community Health Systems, and the SW VA GMEC.	Met	
	10.1f Incorporate the teaching and assessment of Entrustable Professional Activities (EPA) into the clinical curriculum.	Quarterly	Asst. Dean of Basic Medical Science, Asst. Dean of Clinical Education; Rotation Chairs; Director of Alumni Services and CME; Center for IPE and Simulation (CIPES)	Budget for programming	Baseline attendance acquired for annual preceptor training on EPAs; attendance reports from trainings; assessments on rotation evaluations.	Preceptor Development topics have included: - Introduction to Precepting - Setting Expectations and Giving Feedback - Communicating With Millennial and Gen Z Learners - Teaching Clinical Reasoning - Strengthening Your Teaching Toolkit - Precepting Pearls - Resolving Conflicts - SOAP/Match Mentoring - Motivating Unengaged Medical Students on Rotations - Understanding Student Learning Styles - Giving Negative Feedback - Clinical Resources for the Busy Preceptor EPA workshops are incorporated into EPC 1-4 curriculum. EPAs continue to be evaluated on rotation evaluations.	Met	
	10.1g Conduct Faculty Development Training to help students through the GME application process and understand current trends.	Annually	Director of Career Services; Associate Director of Career Services	Careers in Medicine; AACOM resources; faculty; IS; alumni; specialty colleges	Placement outcomes with target goal of 98% placement rate annually.	Placement rate for 2024 is 98.8% (as of 8.26.24). Faculty development topics include: - Tips for Writing Letters of Recommendation - SOAP/Match Mentoring	Met	
	10.1h Collaborate with affiliated Graduate Medical Education (GME) programs to monitor continuity of undergrad to graduate education.	Quarterly	Chief of GME and rotations; Curriculum Sub-committee	Academic Services and Assessment; Library Services	GME staff member is hired and serves on Curriculum Committee.	While the current assessment target is not met, will adjust goal.	Not Met	Because of restructuring, additional GME staff member is not required at this time. Will adjust goal.

LMU-DCOM
Strategic Plan 2023-2028

Goal #10: The DO Program supports the development and maintenance of community-based graduate medical education programs and prepares students to be competitive for placement into GME programs.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
10.2 Provide a mechanism to assist new and existing graduate medical education (GME) programs in meeting the requirements for accreditation by the Accreditation Council for Graduate Medical Education (ACGME).	10.2a Work with affiliated graduate medical education programs to determine needs and provide resources.	Annual needs assessment First Target assessment for April 2025	Graduate Medical Education Committee (GMEC), new and existing GME program representatives	Conduct/analyze results of needs assessment	Will conduct a formal needs assessment with affiliated Program Directors and Program Coordinators and Peer Appointed Resident Representatives.	Did not conduct formal needs assessment.	Not Met	Will conduct a formal needs assessment with associated Program Directors and Program Coordinators and Peer Appointed Resident Representatives.
	10.2b Provide library support and other resources to meet the needs of faculty in affiliated Graduate Medical Education (GME) programs and postgraduate trainees.	Annually	Medical Librarians (Harrogate and DCOMK); Chief GME/Rotations Officer; GMEC	Library staff; Library website and resources; LMU IRB; LMU-DCOM Research and Grants Committee	GMEC has formulated plan to meet stated needs.	Workshops are delivered by Medical Librarians to our GME partners providing information about resources including e-books, 285 databased (UpToDate, AccessMedicine, VisualDx, etc.), Pubmed, etc. Procedure workshops are provided to faculty and residents of GME programs. CME accreditation options are extended to GME programs. Currently 108 residents have access to our library resources.	Met	
	10.2c Support faculty members of affiliated GME programs in the Appalachian region and beyond.	Annually	GMEC, GME program leadership and coordinators Department of Clinical Education, Office of Career Services, Chief of GME/Rotations	Needs assessment	Formulate annual plan to meet stated needs.	Preceptor Development CME is offered every 4 weeks. Workshops are delivered by Medical Librarians to our GME partners providing information about resources including e-books, 285 databased (UpToDate, AccessMedicine, VisualDx, etc.), PubMed, etc. Procedure workshops are provided to faculty and residents of GME programs. CME accreditation options are extended to GME programs.	Met	
	10.2d Monitor the process for clinical and adjunct faculty credentialing and academic rank application.	Annually	Department of Clinical Education; LMU-DCOM Promotion and Multi-Year Application Committee (PMYAC)	Federation of State Medical Boards (FSMB) database; Verification Matters; DO Profiles; AOIA Credentials Database	One hundred percent (100%) of training sites are equipped with faculty and preceptors to train students.	Students have met all curricular requirements. Will continue to work to increase numbers of preceptors at training sites.	Met	
	10.2e Provide outcome-based learning resources and education to faculty, staff and residents.	Quarterly	Chief of GME and Rotations; GMEC; Health Science Librarians	Budget	One to three (1-3) faculty development programs have been delivered.	25 Faculty/ Staff Development sessions to on-campus employees. 15 Preceptor Development and CME programs/sessions. We also accredited 25 individual CME programs for partner institutions, including AdventHealth Ocala, CHI St. Vincent Arkansas Neurosurgery Institute, Community Health Systems, and the SW VA GMEC.	Met	
	10.2f Augment GME didactics with visiting LMU-DCOM faculty on-site and via distance learning, access to simulation, and American Heart Association courses and other resources.	Annually and as requested/ needed	Chief of GME and Rotations; GMEC; Director of Alumni Services and CME; CIPES staff; Assistant Director of CIPES	LMU-DCOM Faculty and residency faculty, staff and leadership	Will offer at least one educational program per quarter with attendance rosters. Continue to offer lecture support as needed to affiliated GME programs will informing them of our capabilities to support educational content.	We have provided lectures to Johnston Memorial Hospital and provided library resource education to many of our partners.	Not Met	Obtain attendance rosters for lectures given at partner institutions.
	10.2g Develop scholarly activity presentations, research funding opportunities, and mentorship.	Annually	LMU-DCOM Director of Research; Chief of GME and Rotations; GMEC; and other graduate and professional degree program directors	Budget	Greater than or equal to one (1) poster submitted to LMU research fair and Rural Health Association of Tennessee (RHAT) virtual poster fair.	One resident submitted to the Clinical Essentials of Medicine conference. Many residents submitted to the Rural Association of Tennessee (RHAT) conference.	Not Met	Change the conferences that are target goals.
10.3 Provide a mechanism to assist GME programs accredited by the ACGME in meeting the requirements of osteopathic recognition.	10.3a Develop an Osteopathic Recognition Task Force to educate and encourage the development of and aid programs to achieve and maintain Accreditation Council for Graduate Medical Education (ACGME) osteopathic recognition designation when feasible.	Biannually	Chief of GME and Rotations; OPP Subcommittee of GMEC; LMU-DCOM Osteopathic Manipulative Medicine (OMM) Department	OMM department support, library resources, budget for printed materials	Baseline acquired for number of sites that materials are given to and education provided for; meet with each affiliated program director annually and as needed to determine the readiness and needs to obtain osteopathic recognition.	Met with interested GME partners in the GMEC. Encouraged and offered assistance with Osteopathic Recognition. Encouraged and offered assistance with osteopathic didactics. Provided hands on training for Covenant Health Family Medicine Residency.	Met	
10.4 Demonstrate and publish publicly the placement of students in GME programs, including through the publication rates of its students.	10.4a. Produce well prepared students for residency.	Annually	GMEC, Chief of GME/Rotations, Office of Career Services	Results of data	Placement of graduates at rate of at least 98%.	The GME placement rates can be found at: https://www.lmunet.edu/debusk-college-of-osteopathic-medicine/do/student-outcomes Placement rate for 2024 is 98.8%.	Met	

LMU-DCOM
Strategic Plan 2023-2028

Goal #10: The DO Program supports the development and maintenance of community-based graduate medical education programs and prepares students to be competitive for placement into GME programs.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
	10.4b Prepare students for the residency application process.	Annually	Director of Career Services; Associate Director of Career Services; Director of GME and Rotations; Director of Alumni Services and CME	Careers in Medicine; Big Interview Medical; Alumni/Career Services Seminar Series; MATCHMaker Mentorship Program; faculty advisors; meeting technology; Blackboard; YouTube; Anthology alumni website; LMU-DCOM website	Placement outcomes, usage rates, programs delivered, alumni mentors engaged with target goal of 98% placement rate annually and target goal of at least 10% of total graduate population enrolled as alumni mentors.	Placement rate for 2024 is 98.8% (as of 8.26.24). We currently have 529 alumni enrolled as MATCHMaker mentors, which is 18.5% of our current alumni population.	Met	
	10.4c Prepare Graduate Medical Education (GME) accountability report to determine residency placement by specialty of DO graduates.	Annually	Assessment department; Office of Career Services; Chief of GME; Director of Alumni Services and CME	Budget	Produce and distribute findings of the GME accountability report annually with target goal of 98% placement rate.	The GME placement rates can be found at: https://www.lmunet.edu/debusk-college-of-osteopathic-medicine/do/student-outcomes Placement rate for 2024 is 98.8%.	Met	
10.5 Maintain relationships with alumni and solidify relationships with physicians (DOs and MDs) and other health care professionals, hospitals and other health care facilities serving in the Appalachian region and beyond.	10.5a Work with mapping vendor for licensure analysis to include tracking of licensure address, licensure specialty, service in rural area, service in underserved area, and service in Appalachia and beyond.	Annually	Director of Alumni Services and CME	Contract with National Center for the Analysis of Healthcare Data (NCAHD); budget	Identify 95% of alumni licensure data.	The Fall 2023 alumni tracking analysis located 99% of LMU-DCOM alumni. The Fall 2024 alumni tracking analysis also located 99% of alumni.	Met	
	10.5b Contact alumni including, but not limited to, through monthly email newsletters, social media outreach, offering engagement opportunities (including mentoring students and speaking to students), surveys, event invitations, live and virtual events.	Monthly and as needed	Director of Alumni Services and CME	Budget; Constant Contact, alumni website through Anthology, LMU-DCOM Facebook page	Review and analyze actions taken at least annually with target goal of at least one alumni communication per month.	The LMU-DCOM monthly email alumni newsletter is sent the last week of each month to all graduates. Additional emails are sent to targeted graduates regarding upcoming events, surveys, and additional information for particular class years as appropriate.	Met	
	10.5c Track attendance and participation in strategic state and national events, including, but not limited to, the American Osteopathic Association annual conference (AOA OMED), Tennessee Osteopathic Medical Association (TOMA), and Rural Health Association of Tennessee (RHAT).	Annually	Dean and Chief Academic Officer; Senior Associate Dean; Office of Clinical Education; Chief GME/Rotations Officer; Director of Alumni Services and CME; selected faculty and staff	Budget for registration and exhibit booth fees	Documentation of attendance and participation at appropriate meetings and other programs with target goal of attending at least five meetings annually.	The Office of Alumni Services held events at: - OMED 2023 - ACOI 2023 - ACOFP 2024 - AAO 2024 - TOMA 2024 Exhibits were also held at OMED 2023 and TOMA 2024	Met	
	10.5d Establish and maintain relationships between LMU-DCOM and affiliated health care systems and facilities.	Quarterly and as needed	LMU-DCOM faculty and staff leadership	Budget	Documentation of attendance and participation at appropriate meetings and other programs with target goal of attending at least five state/national meetings annually and visiting health system partners virtually and in-person.	The Office of Alumni Services held events at: - OMED 2023 - ACOI 2023 - ACOFP 2024 - AAO 2024 - TOMA 2024 Exhibits were also held at OMED 2023 and TOMA 2024	Met	
	10.5e Encourage and recruit DO alumni to precept medical students.	Quarterly	Office of Clinical Education; Chief GME/Rotations Officer; Director of Alumni Services and CME	Alumni newsletter/emails, updated alumni database	Twenty-five (25) alumni per year are newly recruited.	40 new alumni have been recruited as preceptors.	Met	

LMU-DCOM
Strategic Plan 2023-2028

Goal# 11: The DO program assesses programmatic and individual student outcomes using data to continuously improve all aspects of the COM.								
Objectives	Actions	Timeline	Responsibility	Resources/Data to Meet Target	Assessment Targets	*Results	*Met/Not Met	Recommendations for Improvement (IF NOT MET)
11.1 Oversee outcome measures to ensure program and academic quality.	11.1a. Ensure LMU-DCOM Program Outcomes align with NBOME Blueprint and Foundational Competencies for Undergraduate Medical Education.	Annually	Assistant Dean of Assessment	Program Outcomes minutes, Curriculum Committee minutes	A. LMU-DCOM Program Outcomes fully reviewed by the Program Outcome committee to identify variations with the NBOME Blueprint and the Foundational Competencies for UME (to be released in early 2024) with a report of suggested revisions shared with Curriculum Committee by May 2024.	The Foundational Competencies were still under review during early 2024 and were not available for review by the LMU-Program Outcomes committee.	Not Met	The final iteration of the Foundational Competencies is expected to be released in November 2024. The LMU Program Outcomes committee should use the spring semester 2025 to identify revisions to the LMU-DCOM Program Learning Outcomes to ensure that our outcomes align with the updated Foundational Competencies.
	11.1b Preclerkship action: Ensure changes identified in End of Course Reports are implemented in courses.	Biannually	Assistant Dean of Assessment, Chair of Curriculum Committee	Course Syllabi, Course Lecture list, End of Course Reports	A. One hundred percent (100%) of End of Course (EOC) Reports identify at least one improvement to the course to be implemented the following year. B. EOC template revised to provide a table for Course Directors to list course improvements identified in the prior report and related outcomes.	A. In 25/26 (96%) of 2023 -2024 OMS/II EOC reports, Course directors identified at least one substantial improvement to the course to be implemented the next year. B. The template was reviewed but not revised. Course directors have space within the template to identify improvements from the prior year and describe related outcomes.	Not Met	Recommend that a BMS and/or Clinical Dean meet with course directors who do not list improvements to support student learning or engagement within their EOC report to review the report and identify potential improvements (small or large).
	11.1c (will become d) Clerkship: Ensure changes identified in Annual Rotation Reports are implemented in rotation didactics.	Annually	Assistant Dean of Assessment, Chair of Curriculum Committee	Rotation Syllabi, Annual Rotation Reports	A. One hundred percent (100%) of Annual Required Rotation (ARR) Reports identify at least one improvement to the course to be implemented the following year. B. ARR template revised to provide a table for Course Directors to list course improvements identified in the prior report and related outcomes.	A. In 10/11 (91%) of 2023 -2024 Annual Rotation Reports, rotations directors identified at least one substantial improvement to the rotation to be implemented the next year. B. The template was reviewed but not revised. Rotation directors are asked to list changes implemented from the prior report and provide evidence of success or failure.	Not Met	Recommend that a Clinical Dean meet with rotation directors who do not list improvements to support student learning or engagement within their ARR report to review the report and identify potential improvements (small or large).
	11.1d (will become f) Develop and implement an early intervention method for tracking "at-risk" students.	Biannually	Assistant Dean of Assessment, Associate and Assistant Dean of Students, Assistant Dean of Curricular Innovation	Deans Council minutes	A. Develop a "Pathways to Success" for at-risk students. B. Develop a tracking procedure for at-risk students which merges data housed in Assessment/ Exam Services with data housed in Student Services.	A. Process for developing and supporting at-risk students is currently under development. B. LMU-DCOM is actively investigating software platforms to integrate data housed in Assessment/Exam Services and Student Services.	Not Met	Recommend finalizing a process for identifying and supporting at-risk students that delineates the roles of LMU-DCOM Student Affairs staff and course faculty. Purchase and implement a student management platform to allow for consistent tracking and data sharing to support students.