SPECIAL ARTICLES

Renewing Vision and Strategic Priorities for an Academic Unit

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Concepts of organizational change can be used to develop a renewed vision and strategic goals within an academic unit. In response to a thorough assessment of the Division of Pharmacy Practice and Administration at Ohio State University, a Vision and Strategy Group was formed, composed of junior and senior faculty members and a human resources consultant. The group used Kotter's 8 steps for organizational change to develop a renewed vision and strategic goals and objectives, as well as 1-year and 5-year action steps which were then approved by the faculty. Senior faculty members were appointed to lead the strategic areas of focus in collaboration with the division chair and other faculty members to achieve the vision and goals. Progress of specific goals and objectives was documented. The focused work of the group, use of the 8-step process for transforming organizations, and the assistance of a human resources consultant, led to the changes needed in an academic unit.

INTRODUCTION

Academic pharmacy has undergone enormous changes over the past decade. Doctor of pharmacy (PharmD) curricula have been extensively revised; educational outcomes of programs have been assessed; state funding has declined and research funding is difficult to obtain; student enrollment has increased in existing as well as new colleges of pharmacy; the need for experiential sites and preceptors has increased; faculty shortages exist at many colleges; opportunities for pharmacy practice and outreach have expanded; and, the diversity and number of faculty members to achieve the mission of teaching, research/scholarship, practice, and service has increased. This environment necessitates a critical assessment of activities to sharpen the vision and strategic priorities of pharmacy practice divisions and departments within colleges and schools of pharmacy. The purpose

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of this article is to briefly describe our background and existing vision and goals, and then share the process used by the Division of Pharmacy Practice and Administration at Ohio State University to enhance clarity of direction, and strengthen the interconnectedness among our teaching, research, practice, and service missions.

Ohio State University (OSU), a research-intensive institution, has established academic programs across the health sciences that include pharmacy, medicine, nursing, public health, dentistry, optometry, and veterinary medicine. The College of Pharmacy has approximately 60 faculty members in 4 academic divisions: Medicinal Chemistry and Pharmacognosy; Pharmaceutics; Pharmacology; and Pharmacy Practice and Administration. The college offers bachelor of science (pharmaceutical sciences), PharmD, master of science, and doctor of philosophy degree programs. In addition, pharmacy residency and fellowship programs are offered at the college and at the OSU Medical Center.

The Division of Pharmacy Practice and Administration has 29 faculty members in 3 academic tracks: tenure track, with primary focus on teaching and research; regular clinical track, with primary focus on teaching and practice; and auxiliary track, with primary focus in any area, eg, teaching, practice, or administrative work. The percentage of faculty positions in the tenure track, regular clinical track, and auxiliary track is approximately 50%, 25%, and 25%, respectively. We also have 1 faculty member on a research track fully supported by grants.

Division faculty members teach in all academic programs, conduct independent and collaborative research, provide patient care as well as service to the institution, and participate in outreach activities to support the profession and the community. Experiential education is also administered through the division. Partnerships have been established for shared faculty positions including those at the OSU Medical Center, Nationwide Children's Hospital, Columbus Neighborhood Health Clinics (for indigent care), Kroger Pharmacy, University Health Connection (clinic for OSU employees), and Lifecare Alliance/Cardinal Pharmacist Visitation Program (home care pharmacy).

Faculty outreach programs include medication therapy education and management, which are offered at assisted living, retirement facilities, K-12 schools, agriculture extension clinics, and churches.

EXISTING VISION AND GOALS

In 1999, the faculty of the Division of Pharmacy Practice and Administration held a retreat that led to the development of the shared vision "to be among the top 5 pharmacy practice and administration academic programs in the US, by providing leadership in the profession of pharmacy in the areas of teaching, research, scholarship, practice, and service." This was to be accomplished by:

- Generating and disseminating new knowledge through publications in refereed journals, and presentations at national meetings to improve health outcomes;
- Offering students a balanced learning experience that integrates knowledge with direct patient care skills in pharmacy practice;
- Maximizing learning by students, residents, and fellows;
- Demonstrating caring and high ethical and professional standards to our students;
- Recognizing and respecting the strengths and unique talents of the division faculty members;
- Promoting personal growth, productivity, and fulfillment for members of the division through a positive working environment that encourages individual initiatives and collaborations;
- Valuing diversity in classrooms, laboratories, and practice sites;

• Acquiring external funding to support research, teaching, and practice programs.

These goals were reviewed and reaffirmed at subsequent annual retreats; however, the need for a renewed vision and strategic goals surfaced at recent retreats.

DIVISION ASSESSMENT

Considering the enormity of changes over the past decade, in 2007, the division chair and college dean decided to conduct a thorough assessment of the division to identify strengths and areas in need of improvement. An organizational development consultant from the OSU office of human resources conducted the assessment, gathering organizational data through interviews with faculty members.

All 29 division faculty members were interviewed during May through June 2007. All participants were asked the same 11 subjective questions (Table 1) and were informed that anonymity of individual perceptions and comments would be maintained. A qualitative analysis of interview notes was performed by the consultant, with the goal of identifying common themes (ie, frequent responses) from the faculty. In July 2007 the consultant met with the division chair and dean to share findings and recommendations. The report was sent to all faculty members and was discussed at a division meeting in August 2007. Although there were no unexpected findings, a major recommendation from this report was that the division should consider renewing the existing vision and strategic priorities to deal with the dynamic changes and capitalize on the diverse strengths of its members, and develop specific metrics to document progress.

Table 1. Interview Questions Asked of All Faculty Members in the Division of Pharmacy Practice and Administration

- 1. How strong is the quality of teaching in the PPAD Division? Is the curriculum relevant, rigorous, and progressive? How might teaching in the division be enhanced?
- 2. How strong is research activity in PPAD? How does Ohio State compare to other institutions across the country? What ideas do you have for strengthening the division's research?
- 3. How strong is practice activity of PPAD and what are your suggestions for improvement?
- 4. How do you rate the quality of outreach activity in the division?
- 5. How strong is the sense of community among faculty, students, residents, fellows, and staff in PPAD? Any suggestions for improvement?
- 6. To what extent has a clear vision for the future and sense of collaboration been communicated and cultivated in PPAD?
- 7. In your opinion, what barriers exist to accomplishing the division goals?
- 8. What factors in the division add to your sense of engagement and satisfaction and what factors detract from a positive experience for you?
- 9. Share with me your opinion about the performance review process and any suggestions you may have for improving it.
- 10. Evaluate the relationship between the division and Department of Pharmacy at the Medical Center. Are there ways to enhance this relationship?
- 11. What 2 or 3 suggestions do you have to help PPAD grow? In what areas do you suggest focused, prioritized attention?

RESPONSE TO THE DIVISION ASSESSMENT

Responding to and managing change are challenging activities for any organization. A framework for managing organizational change has been proposed by Kotter¹ consisting of 8 steps that are useful in guiding transformation and change. The steps include: (1) establishing a sense of urgency (environmental realities, crises, or opportunities are used as impetus for change); (2) forming a powerful guiding coalition (forming a team capable of working together and possessing the power to lead change); (3) creating the vision (creating a vision and developing strategies to direct the change effort and achieve the vision); (4) communicating the vision (using available vehicles to communicate the new vision and strategies, and teaching new behaviors by the example of the guiding coalition); (5) empowering others to act on the vision (removing obstacles to change, and changing systems or structures that seriously undermine the vision); (6) planning for and creating shortterm wins (planning for performance improvements and creating those improvements); (7) consolidating improvements and producing still more change (hiring, promoting, and developing employees who can implement the vision); and, (8) institutionalizing new approaches (making connections between new behaviors and success of the organization, and developing the means to ensure leadership development and succession). The dynamic changes in pharmacy education, research, and practice coupled with the results of the Division Assessment provided the necessary "urgency" (step 1) to create the conditions for desired change among the members of this academic division.

According to Kotter, 1 "No one individual, even a monarch-like CEO, is able to develop the right vision, communicate it to large numbers of people, eliminate all the key obstacles, generate short-term wins, lead and manage dozens of change projects, and anchor new approaches deep in the organization's culture. A strong, guiding coalition is always needed – one with the right composition, level of trust, and shared objective." He also suggested that the first step in successful transformation by guiding coalition was to assemble a team of individuals with expertise, credibility, and leadership attributes. A Vision and Strategy Group was appointed in August 2007 by the division chair that included, in addition to the chair, 7 faculty members (3 tenure track, 3 regular clinical track, and 1 auxiliary track faculty members), the consultant who conducted the assessment. and the assistant dean for assessment and accreditation. The transformation needed to start with the assembly of a team that would help lead the division through this change process (step 2). The group included junior-level, mid-level, and senior-level faculty members. The purpose of the Vision and Strategy Group was as follows:

- create a vision and strategies that articulate the direction of the division and accompanying strategies;
- differentiate it from similar divisions/departments across the state and country;
- serve as focal point for allocating energy and resources; and,
- establish a collaborative vision that is "motivating to all."

The group members committed to meet every 2 to 3 weeks to address this charge. Initially, the consultant recommended that the first task of the group was to develop a vision for the division. The members, however, suggested that the professional collaboration and climate issues in the division needed to be addressed before moving forward with a vision. Consequently, initial conversations at meetings focused on efforts to enhance professional collaborations and a climate for collegiality and mutual respect. There was full agreement that a "code of citizenship" was needed. This effort could be viewed as step 5 of Kotter's framework, "Empowering Others to Act." While the vision had not yet been articulated, the guiding coalition realized that a major barrier to the success of a new vision was the organizational climate at the time. The team felt strongly that articulating the principles of a positive work environment would lay the essential groundwork for the renewed vision. Without this initial step, the group felt a renewed vision might not be achieved easily. After the group generated several drafts, the document was discussed with all faculty members at division meetings and revised based on feedback, before approval by the division faculty members as the code of citizenship (available upon request from the corresponding author).

Following completion of the code of citizenship, the Vision and Strategy Group concentrated on the future direction of the division. While the division had created a vision in 1999, a consensus emerged that the statement was too general and did not establish connectivity and synergies between teaching, research, practice, and outreach. The multiple strengths and focus areas of members of the division were identified as a challenge to the creation of a unifying vision statement that would represent all of the various interests of its members. However, the consultant assisted the group in shifting its thinking and instead view the diversity as a strength to be leveraged. For example, increased collaborations among the tenure- and clinical-track faculty members could strengthen translational research, and those between pharmacy practice and pharmacy administration faculty members could expand health services research.

A new vision with 3 strategic priorities and 3 points of interaction was created based on several focused faculty

discussions and a SWOT (strengths, weaknesses, opportunities and threats) analysis (step 3). This entire process was iterative in nature and evolved over approximately 8 months. During this interval the group continued to meet regularly every 2 to 3 weeks. In addition, progress was shared and feedback was gathered from the rest of the division using multiple strategies (step 4). First, small group discussions were held during regular division meetings. The purpose of these discussions was to encourage all members to voice their opinions and provide feedback on the draft vision. Members of the group also deliberately reached out to faculty members not in attendance at division meetings by scheduling individual appointments to gather further input and feedback. The final product of these discussions and their synthesis is shown in Figure 1. This illustration depicts how the division was able to capitalize on the diverse talents and strengths of the division and portrays the synergies as areas of distinction.

One of the final tasks of the group was to facilitate an all-faculty retreat with the intention of having the entire division participate in the process of planning for improvements (step 6). Strategic goals, objectives, and action steps to be achieved over a 1- and 5-year period were discussed during this retreat. The dialogue about the new vision and strategies provided a framework for a discussion of profiles for ideal faculty recruits (step 7). The new, clear vision enabled rich discussion and rapid consensus about the desired achievement-oriented (degrees, experiences, and other qualifications) and interpersonal skills of high impact candidates. The goals, objectives, and action steps for 1-year and 5-year periods were finalized by the group after the retreat and presented to the division faculty members for approval.

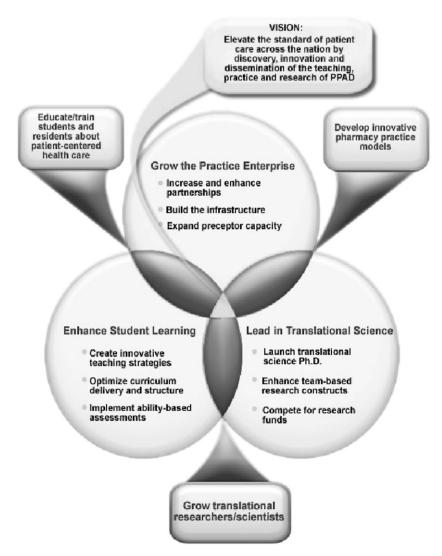


Figure 1. New vision and strategic priorities for the Division of Pharmacy Practice and Administration (PPAD) at Ohio State University.

To support the 3 areas of strategic focus, and to respond to the need for strengthened leadership, faculty members were appointed to lead each of the 3 strategic areas (steps 5 and 7). Directors for each area, who report to the chair, were appointed, effective October 2008. This new administrative structure supports step 8, the continued institutionalization of the vision, and maximizes the potential success and sustainability of this new vision and its strategic initiatives.

One year after the division faculty retreat and 9 months after the new goals and objectives and 3 new directors had been in place, progress had been made on each of the 3 strategic priorities: enhance student learning, lead in translational science, and grow the practice enterprise. Appendix 1 exhibits some of the goals, objectives, and progress. (A detailed set of goals and objectives with 1-year and 5-year action items is available on request from the corresponding author.)

In contrast to previous approaches to develop and sustain vision and goals, the division used an organizational change framework to guide the complex process of creating a renewed vision. The focused work of the Vision and Strategy Group, supported by the human resources consultant, and the use of the Kotter's transformational change framework were 2 key drivers to develop a shared vision and strategic priorities with a renewed commitment.

As indicated by Kotter, an effective vision should be imaginable, desirable, feasible, focused, flexible, and easily communicable. We believe our renewed vision meets these requirements. We also found that the process of creating a renewed vision and strategy goals was not easy; it required extensive teamwork over an almost 12-month

period to complete this work. Our work continues on achieving the short- and long-term goals.

The newly-created vision and strategies will enhance strategic faculty hiring, improve faculty productivity, align us effectively with the OSU Center for Clinical and Translational Sciences funded by the National Institutes of Health, create an optimal division administrative structure, and strengthen collaborations within the division, college, and across the campus. The 8-step process for transforming organizations was a useful framework for operationalizing the division-wide changes needed in our academic unit.

SUMMARY

The Division of Pharmacy Practice and Administration at OSU underwent substantial change over an 18-month period. A division assessment was utilized to identify and prioritize issues that needed to be addressed. The Vision and Strategy Group created a code of citizenship and a renewed vision, strategic goals, and action steps. The faculty members of the division were engaged in a process to define the attributes of the next faculty recruits to achieve our vision and goals. A new administrative structure with emphasis on strengthening leaders was implemented. The most significant outcome of these efforts has been a more engaged faculty with a sense of renewed commitment within the division.

REFERENCES

1. Kotter JP. *Leading Change*. Boston, MA: Harvard Business School Press; 1996: 1-186.

Appendix 1. Select Goals, Objectives, and Progress to Date for Enhancing Student Learning, Leading in Translational Science, and Growing the Practice Enterprise

Enhance Student Learning

Goals	Objectives	Progress
Create Innovative Teaching Strategies	Review the process for peer evaluation of teaching	 Identified a model program in another college on campus and invited their director to PPAD meeting for discussion Potential changes to the peer evaluation of teaching being crafted
	 Optimize exposure to and promote academic careers at all levels of education and training 	 Offered teaching workshops, roundtables, and mentoring program to residents and fellows Recruited PGY-2 academic pharmacy resident
		 Exposed students and faculty to opportunities offered by OSU Center for Clinical and Translational Science (CCTS)
2. Optimize Curriculum Delivery	 Collaborate on teaching of Pharmacology and Pathophysiology and Therapeutics 	• Completed first phase of collaborative teaching between 2 divisions for 2 nd year PharmD students
3. Implement Ability-Based Outcomes	 Encourage and teach faculty how to use ability-based assessments in their individual classrooms 	 Implemented 2 module capstone experiences Enrolled 10 fourth-year PharmD student preceptors in the pilot APPE evaluation process
	Lead in Translational Sci	ence
Goals	Objectives	Progress
1. Launch Translational	• Develop infrastructure for new	• Recruited 1 PharmD student into
Science PhD Program	graduate program	the PhD program
	 Optimize exposure to and promote 	 Established a funding model to
	academic careers at all levels of	provide program support
	education and training	Established an interdivisional oversight committee for
2. Enhance Team-Based	- Identify augment research teams	research education • Conducted inventory of research
Research Constructs	 Identify current research teams Plan optimal teams for future	interests and projects of all faculty members
Research Constructs	data gathering and proposal	• Faculty participated in CCTS
	submission	training programs to enhance
	Submission	translational scholarly pursuits
		• Initiated planning to enhance
		practice-based research network and
		brought in an outside expert/consultant
		for program review
3. Compete for Research	 Develop infrastructure for grant 	 Assisted faculty to submit proposals
Funds	submissions	to CCTS-based internal competitive
	 Develop process for systematic 	funding opportunities
	grant reviews	• Engaged faculty in CCTS grant
		application study sections
		 Launched an internal grant peer review process for faculty
		review process for faculty

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Appendix 1. (Continued)

Grow the Practice Enterprise		
Goals	Objectives	Progress
Increase and enhance partnerships	• Evaluate existing partnerships and develop new partnerships	• Determined similarities and differences among existing partnership contracts
	 Formalize the process for negotiating and implementing partnerships 	 Identified essential elements for negotiating partnership contracts
	 Track the outcomes of existing and new partnerships 	 Implemented a consistent format for documenting practice outcomes
2. Build the infrastructure	 Develop an action plan to support PPAD practices and practice partnerships (eg, funding, contract negotiation, marketing, business planning, reimbursement) 	• Identified the infrastructure needs of the practice faculty
	• Incentivize PPAD practicing faculty	• Implemented a bonus plan for faculty receiving >50% salary from practice sites
3. Expand preceptor capacity	 Identify current and desired preceptor capacity in the ambulatory/community and institutional settings Explore ways to increase preceptor capacity 	 Determined needs for experiential sites Developed a strategy to increase preceptor capacity at OSU Medical Center

Abbreviation: PPAD = Division of Pharmacy Practice and Administration