Medical Center Strategic Directions

In 2016, people from across the Medical Center collaborated to develop a new approach to sharpen our strategic focus and unify our work across patient care, research, and education. We focused on a strategy framework instead of a strategic plan to promote agility, a multidirectional approach towards new initiatives, and experimentation and innovation toward success.

Our strategy framework capitalizes on “distinctive capabilities” - capabilities we have because of (1) the interests, talents, and dedication of the over 30,000 people who comprise our academic medical center, (2) our bi-directional engagement with the community we serve, and (3) Vanderbilt’s broad array of assets that allow us to continue to grow and refine our regional, national, and international influence. The capabilities we seek to consistently leverage and enhance are:

- A collaborative culture
- Leadership in clinical care
- Basic and translational research
- Learning as a core competency
- Personalized medicine
- Population health
The strategy framework lets us chart paths toward our aspirations as a Medical Center:

**Vision**
*The world leader in advancing personalized health*

**Mission**
*Personalizing the patient experience through our caring spirit and distinctive capabilities*

The Medical Center (collectively Vanderbilt University Medical Center, Vanderbilt School of Medicine, and Vanderbilt School of Nursing) uses directionality as a metaphor for the strategy framework. Directions help us find our way by orientating ourselves along a specific path. Even when conditions around us change, a strategic direction lets us navigate a path forward towards our base or to new destinations and objectives. Building upon directionality as a value, our strategy framework identifies directions, or themes, that collectively define Medical Center Strategic Directions.

These themes allow us to adapt as we learn and the world around us changes. They enable us to measure – and accelerate – our progress. The three Medical Center Strategic Directions are:

- Make Diversity and Inclusion Intentional
- Design for Patients and Families
- Discover, Learn and Share

The Medical Center community comes together regularly to update the many ways we are all working to advance the themes encompassed by the strategic framework. In this update, we reflect on the challenges we face and our progress advancing our vision and mission. We consider all the changes – and opportunities – facing us as we turn towards the months and years to come within the context of our unique strengths and distinctive capabilities. This update includes a brief articulation of the intent and importance of each strategic direction, specific developments in the recent past reflecting significant progress, and near-term goals towards advancing the directions. We also include suggestions that reflect our desire to make Strategic Directions a “living compass” that continues to leverage intentionality and reorientation in refining our strategic framework.
Make Diversity and Inclusion Intentional

Our teams, programs, and communications will reflect the diversity of the populations we serve and intentionally practice inclusion in our processes and decisions.

Statement of Importance:

The populations we serve are increasingly diverse, and the people working at Vanderbilt represent this growing diversity. Diversity and inclusion are fundamental to our success in addressing growing health disparities in the populations we serve. Moreover, a diverse and inclusive workforce is more effective at crafting innovative solutions to the major challenges of health care and executing those solutions as a team.

In the last year, we strived to develop strategies to:

- Promote an inclusive culture that reflects, strengthens, and celebrates diversity across VUMC workstreams:
  - Racial Equity Task Force submitted final recommendations to VUMC and VUSM executive leadership, including 62 primary recommendations and 152 sub-recommendations organized around eight themes.
  - The Racial Equity Planning Committee was launched to develop a plan for implementing recommendations from the Racial Equity Task Force report
  - Employee Resource Groups reviewed modifications of the dress code to include cultural accommodations and remove outmoded language
  - Students, faculty, and staff served on a task force to navigate employee engagement and local government procedures to rename Dixie Place on Vanderbilt campus to Vivien Thomas Way
  - Office of Health Equity sponsored a VUMC-wide Juneteenth celebration, commemorating the emancipation of enslaved African Americans and honoring African American culture
  - Latinos Unidos en Vanderbilt (LUV, Hispanic Employee Resource Group) served as a focus group to discuss the importance of addressing the needs of our bilingual and ESL (English as a second language) patients within our apps and patient-facing tools
  - Office for Diversity Affairs celebrated a fourth installment of the “VUMC Hidden Figures” awards program, highlighting the accomplishments of four team members with 30+ years of service with VUMC.
  - Diversity Liaison Committee within the Office of Diversity Affairs expanded membership to include more departments throughout VUMC
  - Program for LGBTQ Health introduced new pronoun buttons for employees to wear to indicate their gender identity to colleagues and to signal safety to gender diverse patients
  - Human Resources developed digital learning modules on personalized care that includes content on structural competency related to underrepresented groups.
  - The African American Employee Resource Group hosted a series of Coffee Klatches to discuss the theme of being “the only one in the room” and extended outreach to include representation from other ERGs
• Enhance the diversity of our teams, faculty, and leadership at the institutional level:
  o Appointed Consuelo Wilkins, MD, MSCI as Senior Vice President for Health Equity and Inclusive Excellence for VUMC and Senior Associate Dean for Health Equity and Inclusive Excellence for VUSM
  o Recruited Karen Winkfield, MD, PhD, as the new Executive Director of the Meharry-Vanderbilt Alliance
  o Appointed Mamie Williams, MPH, MSN, RN, FNP-BC, as Senior Director of Nursing Diversity and Inclusion to dedicate intentional resources toward diversity, equity and inclusion initiatives in nursing
  o Appointed Kristy Sinkfield, MEd, as the new Associate Vice President for Diversity and Inclusion for the Office of Diversity Affairs
  o Recruited Peggy Valentine, EdD, former chair of the American Academy of Physician Assistants Minority Affairs Committee, as Vice President for Allied Health Education
  o Received approval and funding to launch and sustain an “Inclusive Excellence Scholars” program for recruitment of early-career faculty

• Develop the diversity of our teams, faculty, and leadership within departments:
  o Department of Radiology hosted its inaugural Diversity, Equity, and Inclusion (DEI) Week in July 2021 and announced a $1 million endowment for diversity and inclusion initiatives for the department.
  o Cardiologist Walter Clair, MD, MPH, professor of Medicine, assumed the role of vice chair for Diversity and Inclusion in the Department of Medicine with dedicated resources within the department to expand initiatives in diversity, equity, and inclusion, including a newly announced endowment
  o Department of Neurology Diversity Committee created provider profile cards with professional information and photo to enhance communication and understanding between patients and providers and established non-gender specific restrooms
  o Department of Urology partnered with Andre Churchwell, vice chancellor for equity, diversity and inclusion and chief diversity officer for Vanderbilt University, to modify its residency selection process to increase diversity in its training program to 25% underrepresented minorities, well ahead of the national average in this specialty
  o As part of her recruitment, appointed Karen Winkfield, MD, PhD, as the Director of Diversity and Inclusion for the Department of Radiation Oncology
  o Vanderbilt Diabetes Center collaborated with the Department of Molecular Physiology and Biophysics in the recruitment of three new faculty members from underrepresented groups
  o Vanderbilt Institute for Infection, Immunology and Inflammation (VI4) created a DEI committee to promote, enhance and improve DEI activities, including hosting a mini-symposium entitled Careers in STEM: Perspectives from Black Scientists and sponsoring a regular DEI seminar series
  o Vanderbilt Memory and Alzheimer’s Center (VMAC) hosted a workshop to address disparities and inequities within clinical research in addition to monthly one-hour “Lunch and Learn” seminars established by its Diversity, Inclusion, Equity, and Justice Committee
• Reinforce our commitment to recognizing the diversity of our community and developing services that promote equity and inclusiveness:
  o Representatives from Community Engagement and the Office of Health Equity developed a task force focused on engaging with community partners to address the need to translate COVID communications into Spanish, Arabic, and other languages and to combat vaccine hesitancy among English-As-a-Second Language (ESL) communities
  o Office for Diversity Affairs hosted two Black Lives Day of Commitment events in response to the murder of George Floyd and systemic racism in America, one on the main campus and one at One Hundred Oaks. VUMC colleagues knelt in memory and reflection of lives lost, gained education on health disparities, and made personal commitments to further education in their communities
  o VUMC continued its annual sponsorship of the Nashville PRIDE Festival, providing onsite medical services and affirming its commitment to the LGBTQ community.
  o The Vanderbilt Program for LGBTQ Health hosted the 3rd Southern LGBTQ Health Symposium in August 2021, further cementing its educational and leadership reach throughout the region
  o Initiated working group to make changes in eStar that will allow team members to document patients’ gender identity, regardless of their sex assigned at birth
  o Vanderbilt Diabetes Center partnered with Meharry Medical College in the submission of the competitive renewal of the Vanderbilt NIH-funded Diabetes Research Center and organized a Pilot and Feasibility Program for the southeastern United States that awarded seven pilot awards to address health disparities in diabetes and obesity
  o Vanderbilt Institute for Infection, Immunology and Inflammation held a virtual “MEGAmicrobe” event to foster interest in science and healthcare among elementary and middle-school students from underrepresented communities

• Affirm our commitment to research in health equity, outcomes, and implementation
  o Creation of new programs through the Office of Health Equity spanning research, education and community and population health.
  o Launched the Health Equity Graduate Certificate for medical students.
  o Tuya Pal, MD and Karen Winkfield, MD, PhD, successfully renewed the “Vanderbilt-Ingram Cancer Center, Meharry Medical College and Tennessee State University: Partners in Eliminating Cancer Disparities” grant through the National Cancer Institute, the longest-standing grant funded through the Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE) U54 program.
  o Formation of the Southeast Collaborative for Innovative and Equitable Solutions to Chronic Disease Disparities through an NIH 5-year, $12.3M grant led by Consuelo Wilkins, MD and Nancy Cox, PhD.
Design for Patients and Families

We will provide compassionate care personalized for patients and their families, wherever they are and whenever they need us.

Statement of Importance:

Historically, the processes that define the practice and execution of health care have been designed around the health care enterprise and its priorities, capabilities, and resources. When health care processes are designed around the needs of patients and their lifestyles, engagement and outcomes improve. **We will iteratively redesign health care to touch our patients and their families continuously, whenever or wherever they need us, to address their needs within the flow of their daily lives.** Furthermore, **defining personalized care offers us a clear competitive advantage—it builds a reservoir of positive memories that can generate loyalty over time.**

In the last year, we strived to develop strategies to:

- Create new programs tailored to the emerging needs of the patients we serve:
  - Expanding on the work of the former Vanderbilt Maternal Addiction Recovery Program and Team Hope, the departments of Pediatrics, Obstetrics and Gynecology collaborated to establish **FireFly**, a comprehensive clinical program for pregnant women with opioid use disorder and their infants. Funded through a $5.3 million cooperative agreement from the Center for Medicare and Medicaid Innovation with TennCare, enrollment began July 1, 2021.
  - To promote informed decision making, the department of Urology partnered with colleagues at UCLA to develop an online shared decision-making tool for men with newly diagnosed localized prostate cancer using data from the **CEASAR study**, a federally funded longitudinal study looking at long-term patient-reported outcomes in prostate cancer.
  - Continued to expand our comprehensive transgender health program.
  - The Transplant Center continues to develop the nation’s first laryngeal transplant program.
  - Created a new Department of Vascular Surgery with the recruitment of a world-renowned leader (**Daniel Clair, MD**).
  - Created the Clinical Genomics Program Management Office to accelerate clinical genomics implementation and integration into routine care.
  - Established a new [chaplain residency training program](#) to provide quality education for developing chaplains and better support the spiritual needs of patients, their families and Medical Center employees.
• **Enhance access to care in specialized clinics for the patients we serve:**
  - Department of Orthopaedic Surgery continues to expand its capacity to offer same-day access of appointments for any new patient or an established patient with an arising problem
  - Established the Vanderbilt Orthopaedic Injury Clinic that offers no-appointment after-hours care for orthopaedic issues
  - Opened Vanderbilt Oral Health, combining in new, convenient space VUMC’s dental and oral and maxillofacial surgery (OMFS) services
  - Established a comprehensive Vanderbilt Health Wound Center for management of chronic wounds not responding to conventional care
  - Department of Neurology utilized Vanderbilt Health Professional Solutions (VHPS) to further grow and scale its Teleneurology Program, providing health care through three new partner hospitals (Shelbyville, Tullahoma, Holston Valley)

• **Expand access to and use of new tools in personalized and precision medicine:**
  - Launched new in-house lab gene panels for cardiomyopathy, arrhythmia, and comprehensive cardiology
  - Integrated Epic Genomics Module and completed Tempus tumor genotyping data integration and began efforts to backfill non-Tempus data (Foundation Medicine, Guardant, BioReference Laboratories, SNaPShot)
  - Launched event-driven Clinical Decision Support’s (CDS) first alert for Hypertrophic Cardiomyopathy (HCM)
  - Genetic Testing Interpretation eConsult (GTIC) developed and expanding to all clinical services
  - Started phased approach to family history collection and the MeTree family history pilot
  - Developing VUMC guidelines for reclassification of patient genetic results
  - Building a reservoir of existing educational resources for the clinical genomics
  - Establishing stable funding for continued and expanded capabilities of the Undiagnosed Diseases Network.
  - Continuing discovery and translation enabled by BioVU, Center for Precision Medicine and Vanderbilt Genetics Institute.
• **Demonstrate leadership locally, nationally, and globally in clinical innovation and public health, including COVID-19:**
  
  o **Alex Jahangir MD, MMHC**, chief of the Orthopaedic Trauma Division, continues to lead as Chair of the Metro Coronavirus Task Force for metropolitan Nashville and Davidson County
  

  o VUMC continues to lead in all facets of care for COVID-19. For example, in FY21, we performed nearly 280,000 tests for SARS-CoV2, including both point-of-care RT-PCR and in-house laboratory PCR tests.

  o Engendered public trust by providing vital voices through media communication on COVID-19, including William Schaffner, MD, C. Buddy Creech, MD, MPH, and David Aronoff, MD (more).

  o **Jeremy Warner, MD**, Brian Rini, MD, and Yu Shyr, PhD, provide foundational leadership to the **COVID-19 and Cancer Consortium (CCC19)**, documenting outcomes including heightened mortality and racial disparities for COVID-19 patients with cancer.

  o Chris Lindsell, PhD, leads the Data Coordinating Center for the **Accelerating COVID-19 Therapeutic Interventions and Vaccines (ACTIV)** trials, a public-private partnership coordinated for the NIH designed to prioritize and speed the development of the most promising treatments.

  o **Vanderbilt Transplant Center** continues to have the largest heart transplant and combined heart-liver transplant program in the nation

  o **Anne Wagner, MD**, associate professor of Surgery, has joined Vanderbilt University Medical Center to serve as medical director of the Vanderbilt Burn Center

  o **Matthew Bacchetta, MD, MBA, MA**, associate professor of Thoracic Surgery, has assumed a new role as chair of the Department of Thoracic Surgery

  o **Shari Barkin, MD, MSHS**, chief of the Division of General Pediatrics and William K. Warren Foundation Professor of Pediatrics, has been elected to the National Academy of Medicine (NAM)

  o Program in temporomandibular joint (TMJ) replacement led by Luis Vega DDS continues to lead the nation

  o **Stacie Dusetzina, PhD**, was selected to serve on the Medicare Payment Advisory Commission (MedPAC); she is one of 17 members who collectively advise Congress on issues affecting the Medicare program, including matters related to access to care, quality of care, and other pressing issues affecting Medicare and its beneficiaries.

  o Keipp Talbot, MD, serves on the CDC’s **Advisory Committee on Immunization Practices (ACIP)** which is responsible for making vaccine recommendations, including recently developed COVID-19 vaccines (more).
Discover, Learn and Share

Our collaborative learning environment ensures that we remain nimble and distinctive as a national leader in biomedical discovery, health care, and education. As we create new research capabilities and innovate learning systems, we will make discoveries of value and develop the people to lead health care transformation. We will share our knowledge and connect our academic medical center seamlessly to the world to benefit our patients, the communities we serve and the health ecosystem.

Statement of Importance:

Vanderbilt is leading the charge in ushering in a new era of health and prevention, detection, and treatment of disease. Progress we could not have imagined a decade ago is now being realized with our research and made a reality for patients both within and beyond our catchment area. We are transforming interventions away from a model in which we see people for the first time when they begin experiencing symptoms to one that detects, manages, and perhaps eradicates disease before individuals even know they have them. The pace of innovation and the volume of data and information necessitate shifts in professional norms and learning approaches. Vanderbilt is leading in developing innovative and effective education and training programs for learners across the continuum of educational phases and across health professions to catalyze servant leadership and lifelong learning. Building better connectivity from all our programs to government and industry can create effective vehicles for societal change and allow our people, discoveries, and innovations to have far more significant impact. We will look at everything we do well and identify the best ways to make them generalizable and useful outside our walls.

In the last year, we strived to develop strategies to:

- Enhance our collaborative, inclusive and trans-disciplinary culture to convert ideas, discoveries, and services into meaningful innovation:
  - Advancing trans-disciplinary partnerships and collaborations to catalyze new directions and accelerate our ability to deliver our mission, including partnerships with GE Healthcare, Incyte Corp, Bayer, IBM Watson and Boehringer Ingelheim.
  - Empowering more novel and transformative research with Ancora Innovation in partnership with Deerfield Management (more).
  - Investing resources in technology transfer activities.
  - Developing anti-viral therapeutics (more) and prevention strategies (more).
  - Faculty and leaders from VUMC and Vanderbilt University collaborated to establish the Vanderbilt Innovation Network (VIN) working group to develop strategies for new ventures and to expand our innovation ecosystem
  - Increased relationships with third-party entities to support capital investment, facilities, and new capabilities to promote a bold, strategic risk-taking culture
• Exploring business models to attract life science companies to co-invest with VUMC and NashBio to substantially increase the scope, scale, and impact of BioVU (more)

• Strategy and Innovation Team is designing new avenues to deliver broader value more quickly by designing smaller, directed gatherings with the fewest people needed to achieve desired outcomes and results

• Improve the efficiency of the overall research enterprise through nimble capture and exchange of expertise, reagents, technologies, and shared resources:
  o Continued updates and enhancements to the “Research Enterprise Space Dashboard” to track research space and associated extramural support by department, division, and principal investigator
  o Draft development of a formal space policy with guidelines for implementation to optimize Footprint and functionality of research space
  o Further development of guidelines and recommendations for research rigor and reproducibility at Vanderbilt, including a transparency toolkit.

• Continue to lead internationally with our rapid leverage of basic, clinical, interventional, and population health research programs and core facilities to innovate in the causes, treatments, and prevention of COVID-19 and its evolving variants:
  o Continuation of web-based resources to keep the research community up to date on the continuum of COVID-19 research activities across the enterprise (more).
  o Ongoing use of a REDCap survey for faculty to rapidly share new COVID-19 and related research projects and initiatives with the community.
  o Productive engagement of COVID-19 research committees to review and propel interventional and non-interventional human participant investigations.

• Increase investment in neuroscience and behavioral health research and translation:
  o Leveraging new commitments and leadership in Vanderbilt Kennedy Center, Vanderbilt Brain Institute, Departments of Neurology, Psychiatry & Behavioral Sciences, Pediatrics, and Pharmacology, and Vanderbilt University Institute of Imaging Science.
  o Successful first-year launch of the institutional Vanderbilt Memory & Alzheimer’s Center with receipt of an NIA-funded P20 Alzheimer’s Disease Research Center planning grant.
  o National Institute of Aging grant ($31.7M) awarded to Timothy Hohman, PhD, to lead the Alzheimer’s Disease Sequencing Project Phenotype Harmonization Consortium
  o Warren Taylor, MD, received an NIH grant ($4.5M) to explore treatment for older adults with depression.
• Create programs and tools to advance learning opportunities and workforce engagement and to develop, share and recognize the contributions of individuals and teams to discovery and learning:
  o Entered the third year of the Catalyst Leadership Program and Defining Personalize Care Program with promotion of new “catalyst” leaders in several areas.
  o Continuing investment in the Vanderbilt Program in Research Administration Development, Programs in frontline and Mid-level Leadership Development.
  o Further development of core educational programming within Office of Student Research and enhancement of the Immersion Research Experience for medical students.
  o Recognizing high-impact publications and national awards monthly through “Celebrate” presentations at VUSM Executive Faculty meetings and annual Biomedical Science Impact Awards.
  o Continued review and refinement of academic performance metrics that align and connect people to our mission, including changes in practice, policy, and paradigms.
  o Expanded education and communication about SPI-Hub™, a program that provides indicators of journal scholarship expressed through metadata in 25 fields.
  o Recognizing and sharing new technology transfer activities (patents and licensed technologies) and spin-off companies monthly at VUSM Executive Faculty meetings.
  o Recognizing Strategic Direction advances monthly through Strategy Spotlight Share presentation at VUSM Executive Faculty meetings and Reporter articles.
  o Increased deployment of the Office of Research social media via Twitter @VUMCResearch.
  o Continued enhancement of StrategyShare features and events.
  o Supported Annual Research Staff Awards recognizing excellence in basic, clinical, and multi-disciplinary team research. https://www.vumc.org/oor/school-medicine-research-staff-awards
  o Vanderbilt’s Master of Science in Applied Clinical Informatics program (MSACI) received Approved Education Partner (AEP) accreditation by the Healthcare Information and Management Systems Society (HIMSS).
  o Vanderbilt’s Department of Biomedical Informatics (DBMI) and the School of Nursing also received HIMSS AEP approval.
Supporting VUMC Strategic Directions Moving Forward

Our three Strategic Directions serve as a guide in the ever-changing landscape of healthcare and discovery. Just as a compass is “coordinate independent” and gives direction regardless of location, our Strategic Directions enable us to find a path forward towards fulfilling our vision and mission - even as we find ourselves in new territory. VUMC Strategic Directions allow us to ask how our activities and programs reinforce our core values and credo behaviors and to make agile adjustments when realignment is needed.

In the next year, we will continue to develop capabilities and strategies to:

• **Leverage and enhance existing strengths in health equity and inclusion:**
  - Based on the success of VUMC’s gender-affirming services, explore opportunities to establish a center or institute devoted to comprehensive LGBTQ research and clinical care
  - Expand VUMC’s signature unconscious bias training to employees
  - Continue to grow translation services for ESL staff and patients and their families
  - Fund research and clinical fellowships specifically in health equity initiatives
  - Build upon and expand departmental initiatives throughout clinical and basic science units, including appointment of vice chairs and directors for diversity, equity, and inclusion
  - Increase engagement with and connections to local, state, and federal government to lead in a commitment to diversity, equity, and inclusion
  - Work with leadership to consider incorporating “equity” into our “Make Diversity and Inclusion Intentional” strategic direction
  - Consider how environment, climate change, and sustainability can be addressed in our operations to promote health and wellbeing for all patient populations we serve

• **Promote a welcoming and inclusive environment within the fabric of the organization:**
  - Enhance programmatic funding for efforts in diversity, equity, and inclusion for VUMC employees, including expansion of pipelines to create employment opportunities for underrepresented minorities
  - Create tracks for representation from employee resource groups and other special interest groups among executive leadership
  - Expand efforts in state-wide, regional, and community engagement for inclusion in VUMC-centered activities
  - Leverage partnerships with Employee Resource Groups (ERGs) to establish and sponsor cultural enrichment programs and to celebrate heritage months with activities, programs, lectures, and events
  - Supplement new employee orientation with a diversity, equity, and inclusion training module that includes an introduction to ERGs
• **Enhance mentoring, training, and career development programs that enable ongoing career progression & transitions:**
  o Developing approach to competency-based progression from UME to GME using multi-source assessment data.
  o Obtaining AMA Re-imagining Residency grant (1 of 8 nationally).
  o Selection of new scholars for the Discovery Scholars Program; scholars are supported with start-up supplement, two years of dedicated effort from a data science faculty member, four-year salary coverage, and intense mentoring
  o Redesign of the Interdisciplinary Graduate Program curriculum.
  o Launch of Inclusive Excellence Scholars Program to transform culture through recruitment of diverse faculty cohorts
  o Developing a new 5-tier Health Sciences career track for PhD-level staff advancement

• **Update computational, information technology, and biospecimen and data storage to meet the demands of and advance basic, clinical, and population research:**
  o Coordinating the Medical Center’s Data Science strategy and programs with the Vanderbilt Data Science Institute.
  o Further developing the HEAlish Data Science (HEADS) Center and clinical data science approaches for health care delivery.
  o Developing a deep-learning algorithm for artificial intelligence-assisted calcium scoring that determines cardiovascular risk across a range of computed tomography scans and in racially diverse populations (more).
  o Learning from VUMC leadership of the data and coordinating center for All of Us in the Center of Precision Medicine and continued collaboration with the federal All of Us Research Program.
  o Next phases of work to enable migration of BioVU to the cloud
  o Launch large scale biospecimen collection and storage
  o Increasing scope of biospecimen and image research use in Consent-to-Treat
  o Implementation of learnings into the health system through rejuvenation of a Clinical Evidence Management Committee
  o Continue development of the concept of ‘The Vanderbilt Inventory’ to identify all of the data sets to aggregate to inform “whole person” visualization of risk