2007-2008 Dentistry

Fiscal Health Dentistry.pdf

Mission

The mission of the Indiana University School of Dentistry is to promote optimal oral and general health of Indiana citizens and others through educational, research, patient care and service programs. Specific goals to be achieved are as follows

EDUCATION

- A. Recruit quality applicants and prepare them to become highly competent, critically thinking, life-long learning, ethical and socially responsible practitioners of general dentistry, dental hygiene and dental assisting
- B. Recruit quality applicants and prepare them to become outstanding practitioners of the dental specialties and other relevant postdoctoral disciplines through the graduate dental program
- C. Create graduates who demand and a program which provides the opportunity for career-long learning through continuing education

RESEARCH

D. Increase the knowledge base in all areas related to oral health through an extensive research program, including both faculty and students

E. Maintain and enhance the role of the School of Dentistry as a vital and productive member of the scholarly community in the Indiana University family

- F. Provide a broad spectrum of high quality patient services for reasonable fees as a principal means of furnishing clinical educational opportunities for students
- G. To maintain a clinical education system which simulates as closely as possible a contemporary, high quality practice of general dentistry, supported by the specialties as appropriate

H. Interact with the community by providing both school-based and outreach service and health education programs.

Goals and Objectives

- 1. Incorporation of digital radiography into the IUSD Patient Electronic Health Received
- ▼ Integrate digital radiology into the preclinical curriculum and begin clinical utilization of digital radiography

Campus Planning Theme: Teaching and Learning

Secondary Goals: Sub Unit:

Time Frame

Actions taken for 2007-2008:

The School of Dentistry purchased Emago, a digital image storage module that integrates with the current electronic health record. It has been installed and is in full operation. &enbsp; Current third and fourth year students have been given didactic lectures on the utilizationh of digital radiography and will be able to utilize it clinically when treating patients in the predoctoral endodontic clinic. &enbsp; IUSD currently has four clinics (Orthodontics, Oraduate Endodontics, and Graduate Periodontics) utilizing capturing digital radiographs.

Evidence of Progress for 2007-2008:

In the summer of 2008, the School of Dentistry implemented digital radiography in two newly renovated clinics. Purchasing this new equipment gives us the opportunity to do hands on evaluation of the most recent digital technology. In its along with the experiences gained at other comparable dental schools will help finalize the remaining choices for digital radiographic hardware schoolwide.

Activities planned for 2008-2009:

The Digital Radiology Implementation Committee will continue to develop and refine the plan to integrate digital radiography into the entire curriculum and plan for phasing in and purchasing the hardware necessary for digital radiography school wide.

- 2. Renovate Predoctoral Endodontic Clinic and Graduate Periodontic Clinic.
- 🗵 Remodel the predoctoral endodontic and graduate periodontic clinical space and replace outdated equipment

Campus Planning Theme: Best Practices

Secondary Goals:

Time Frame

Working with the University Architect, plans were finalized. Funds were identified from alumni and school resources. Both projects were started in the summer session of 2008

Evidence of Progress for 2007-200

Both renovation projects were completed by the end of August 2008. These projects yielded two state of the art dental clinics desperately needed by the school.

Activities planned for 2008-2009:

Completion of the renovations.

- 3. To review and revise the funding basis of the specialty MSD programs.
- 🗵 To examine the funding mechanisms that are in place for each individual program To determine if a change in funding practices is needed, and how that might be structured.

Campus Planning Theme: Best Practices

Secondary Goals:

Time Frame

This project has turned out to be rather more complex than originally envisaged. Immediately it transpired that, despite all students paying a uniform flat rate fee, individual departments have, over many years, each negotiated a fee remission or student fellowship that effectively reimburses the student, albeit to a minor degree. & enbsp; All this was set in place prior to the appointment of the incumbent CFO. & enbsp;

Evidence of Progress for 2007-2008:

The Associate Dean for Graduate Education has had the first of what will be several meetings with Dr. James Johnson and continues a dialogue with the IUSD CFO, Ms. Deborah Ferguson. & Contact is being made with the peer individuals in other schools in order to acquire the information related to their program funding structure.

Activities planned for 2008-2009

Having begun to understand the issues involved here, and the implications to departmental and the IUSD budgets of instigating reform, it is proposed to take several steps to first fully understand all facets of this problem. In the implication of the implicati

- nts will accept an active role as partners in improving the academic and social climate of IUSD and therefore accept life-time ownership of dental education
- Solution select active and responsible leaders who will work diligently on behalf of their constituents and IUSD. Students learn how to express their concerns openly, confidently, and professionally and learn the art of constructive criticism. Students graduate from IUSD with a commitment to the school because through their willingness to participate as active partners, they left the school in better condition for those students who will follow them.

Campus Planning Theme: Civic Engag

Secondary Goals:

Time Frame

- Student leaders met monthly with the Assistant Dean for Student Affairs to discuss innovations, concerns, and changes
- The Dean hosted monthly town hall meetings with the student body during which he fields questions, listens to concerns, entertains suggestions, and reports on actions taken by the administration in response to issues raised at past meetings
- · Leaders from several student organizations attended a variety of professional/leadership development symposia
- · Leaders of IUSD student organizations were encouraged to register with IUPUI.
- · Leaders of IUSD organizations were encouraged to submit proposals to the Council of Student Organizations

Evidence of Progress for 2007-2008:

- Student participation continued the shift from cynical and chronic complaints to professional and constructive criticism, and they frequently complimented staff, faculty, and administrators
- Student activism stimulated the installment of a crosswalk and a sidewalk at a dangerous crossing between IUSD and the parking lot.
- · Student leaders played a significant role in the Strategic Plan and the CCCR
- · Eight IUSD student organizations registered with IUPUI.

Activities planned for 2008-2009:

- Developing privileges such an honors clinic for students who complete competencies well before graduation
- · Register school organizations with IUPUI and submitting proposals via the newly configured Council of Student Organizations for student activity fee monies,
- · Discussing possible updates in clinical education such as including instruction on implants
- · Contributing to plans for a new facility
- · Work with the Administration on issues of space for the next academic year

5. IUSD will take a more active role in recruiting and supporting of diverse student body.

F) •To connect with and identify as many underrepresented minority students in the state of Indiana and introduce them to dentistry as a potential career

Campus Planning Theme: Campus Climate for Diversity Secondary Goals:

Sub Unit:

Time Frame

Actions taken for 2007-2008:

- The Coordinator for Diversity Support Services is actively participating in recruitment/educational fairs not only on the IUPUI campus, but in Indianapolis and the Gary area.
- In June of 2008 DSI: Indianapolis (Dental Summer Institute) was launched under the leadership of the Coordinator of the Diversity Support Services and the sponsorship of MICI AHEC (Metropolitan Indianapolis Central Indiana Area Health **Education Center)**
- Participation in the Urban Pre Dental Club&mbsp; continues to grow &mbsp; As an officially recognized campus organization, the club is able to take advantage of many opportunities that will further enhance and strengthen the program for current and future members. The partnership between IUSD and Crispus Attucks Medical Magnet High School continues to strengthen and thrive &robsp. The Coordinator of Diversity Support Services works &robsp, with the 9th grade and 10th grade &robsp, dental cohorts to encourage and foster their interest in dentistry.

Evidence of Progress for 2007-2008:

- From January 2008 to October 2008 the Coordinator of Diversity Support Services has:
- attended 17 professional/career fairs
- met with 102 prospective dental students in office
- - :traveled to Gary, Indiana 4 times
- hosted school groups in house 15 times
- launched the first DSI (Dental Summer Institute)\
- Membership has in the Urban Pre Dental Club has increased by 10-15 members since Dental Day 2008. anbsp: : :

Activities planned for 2008-2009

- In 2009 there will be one week of Dental Summer Institute offered for high school students but the college session will increase to two weeks. The hope is that it will grow to a 2 month program for unsuccessful dental school applicants
- Plans are underway to develop and roll out a dental summer camp experience at IU Northwest, where the new hosp; Coordinator of Diversity Support not be provided by providing the chair of the IUN chemistry department, the Gary School Corpo Northwest AHEC director to develop

6. Increase the overall research productivity of the IUSD Research Program.

🗵 - Increase the number of submitted/funded scientifically meritorious federal (e.g. NIH/NSF) grants by 50% - Shift the ratio of industrial contracts to federal grants from 4:1 to 1:1 by increasing federal support

Campus Planning Theme: Research, Scholarship and Creative Activity

Secondary Goals: Sub Unit:

Time Frame

- · Recruited three junior faculty with research as their main focus
- Expanded the research capabilities of the Oral Health Research Institute to accomodate increased demands by indus
- . Formalized the process and the funding of start-up accounts for new research faculty
- Supported two new faculty start-up research accounts
 Funded three Postdoctoral Research Fellows on competitive basis using ICR funds
- Provided funding for research supplies and biostatistical support for 20 MS candidates
 Provided funding for supplies and stipends for four PhD candidates
- Provided funding for 14 dental research stipends, supplies, travel and biostatistical support

Evidence of Progress for 2007-2008:

- 07-08 was a record year for research income with over 1 million dollars obtained in indirect cost recovery
- . Both our Signature Centers have been very active applying for and receiving external funding.
- 07-08 was a record year for LHSI, DRSP, MURI, UROP internal awards for student research funding (10 awards)
- Major Internal grant awards, including Service Learning Faculty Fellow award, RSFG award, ePort Integrative Department award, Commitment to Excellence and Aedvanced Study visiting fellow award, were obtained by our research faculty.

Activities planned for 2008-2009

Develop a compensation plan to incentivize and reward faculty for successful grant applications

- · Increase collaborations with other schools on the IUPUI campus and other Indiana research institutions
- Creating a new course for student researchers titled Research Methodology. The course will include information related to ethics, human research, bioresearch research, enbsp; research risk regulations
- 7. Promote translational research by cross-disciplinary interactions between clinicians, clinical researchers and basic scientists and maximize opportunities for existing clinical and research faculty at IUSD.
- Increase the number of faculty collaborations through interdisciplinary research with IUPUI schools and IUB faculty, especially the IU School of Medicine, IUPUI School of Science and School of Engineering and Technology. Increase the number of graduate students supported by NIH training programs

Campus Planning Theme: Research, Scholarship and Creative Activity

Secondary Goals: Sub Unit:

Actions taken for 2007-2008:

- Submitted highly competitive CTSI pre-doctoral training position by one of our doctoral students, includes funding for stipends, fringe benefits supplies.
- Obtained the expansion of the Office of Research Division of Clinical Trials to provide school-wide support for protocol development, IRB submissions and regulatory compliance oversight for research faculty and students in 08-09.
- Reorganized and upgraded equipment in the Bioresearch Facility to facilitate the inclusion of non-IUSD research faculty projects

Evidence of Progress for 2007-2008:

- · Awarded CTSI pre-doctoral training position by one of our doctoral students, includes funding for stipends, fringe benefits supplies
- Expanded the IUSD Office of Research to include a Division of Clinical Trials to further support faculty engaged in clinical research by providing support for protocol development, IRB submissions and regulatory compliance oversigh
- . Increased the census of the Bioresearch Facility by providing access to research faculty from other schools on the IUPUI campus

Activities planned for 2008-2009:

- · Actively pursue opportunities to engage the resources and training opportunities provided by the Indiana Clinical and Translational Science Institute (CTSI)
- . Utilize the CTSI resources and strengthen our collaborations with the Medical School and other schools on the IUPUI campus, Purdue University and other Indiana research institutions
- 8. Convene Task Force with broad representation (students, staff and faculty) to identify areas of highest need for attention at the school.
- 🗵 1. Develop implementation strategies, task list, performance indicators, responsible persons and target completion dates. 2. Present to IUSD for feedback, ask for responsible persons, follow up on progress and provide feedback loop to school. 3. Reevaluate in 1 to 2 years for effectiveness of program and desire to repeat.

Campus Planning Theme: Best Practices

Secondary Goals: Sub Unit:

Time Frame

Actions taken for 2007-2008:

- 1. Task force was convened, 3 goals identified, strategies and performance indicators drafted.
- 2. Presented to school and finalized.
- 3. Strategies implemented for the 3 goals (Communications, Curriculum and Facilities)

Evidence of Progress for 2007-2008:

- -&mbsp,&mbsp,&mbsp,&mbsp,&mbsp,&mbsp,&mbsp,&mbsp,&mbsp,&mbsp,&mbsp,&mbsp
- lnitiation and/or completion of various tasks in the table has occurred

Activities planned for 2008-2009

- Հուրեսը, Հուրեսը, Հուրեսը, Հուրեսը, Հուրեսը, Հուրեսը, Հուրեսը, Հուրեսը, Continue with task list and feedback information.

9. Doctor of Dental Surgery Curriculum Revision

▼ To evaluate, restructure and modernize the DDS Curriculum

Campus Planning Theme: Teaching and Learning

Secondary Goals: Sub Unit:

Time Frame

Actions taken for 2007-2008:

A Coordinating Committee for Curricular Renewal (CCCR) was formed that created an action plan for the process. A new document reflecting the current understanding of the competencies for a graduate of the DDS program was created.

Evidence of Progress for 2007-2008:

 Δετιλογική Απότους Απότο students are expected to master. This curriculum evaluation developed one of the most detailed pictures of the program's focus and will allow us to map competencies to specific teaching/learning practices and activities. &nb

Activities planned for 2008-2009:

- & nabsp. danbsp. Faculty Council approval of the revised document "Attributes of an IUSD Graduate
- * databage_datab

Fiscal Health

The IU School of Dentistry acheived another successful year in FY09, contributing an additional \$254k to our General Fund Balance Reserve. Our Reserve is now at \$2.6M which is \$1.6M above the 3% required Reserve for FY09. We do have significant infrastructure and building reneeds that are identified in our Planned Uses of Reserve . For FYOs, we experienced an increase in Tuition Rates of 10.0% of 70% for Res./NonRes., respectively. . We also experienced a net \$1.00 or 12.0% increase over PY in Clinical Income (net of Allowance). 3 is due to a renegotiated contract with Wishard, and the remainder is evidence of continuous improved billing and collection efforts. . [CR Income increased \$299k or 33.9% due to an increase in Clinical Industry trials and NIH Program project. . Additionally, we had \$1.4M savings in compensation primarily due to vacancies and timing of hirrings. State Appropriations increased \$133k or 0.9% offset by a \$400k or 5.7% increase in University Tax Assessments. These increases allowed us to support two major clinic renovation projects that were recently completed. Our Graduate Periodontic clinic and our Undergraduate Endodontic clinic are now state of the art, providing the students and patients with up to date equipment and comfortable modern facilities. We will continue to focus on student and patient resource needs as we address future infrastructure needs.

The Fund Balance for all other Non-General Funds increased \$2.5m in FY08, \$1.5m to cover the renovation costs listed above; the remainder reflects the transfer of ICR income to other research infirastructure reserves. The majority of this non GF activity represents our clinical and lab research facilities and their associated projects and contracts.

Through the support of the University Architect's office, we have recently engaged an architect to begin initial discussions and design for a future new Dental School structure. Enbsp; We are also in ongoing discussion/review with Wishard Health Services to renegotiate our annual contract. Enbsp This contract subsidizes us for the managemenet and operation of the Wishard Dental Clinics

Reallocation Plan

We are in the development and design phase for a new pre-doctoral, pre-clinical laboratory facility. This area is a significant key facility where the majority of the pre-clinical portion of our training and education is performed. This is where the dental students begin to work with their hands on projects that will allow them to transition into the clinical care of patients. the current facility is severly outdated and may become a near future recruitment barrier. We want to convert our current laboratory into a modern simulation laboratory consisting with oral structures. This will allow us to join over half the other dental schools around the country in this teaching approach. We have initiated fundraising for this \$2.5 to \$5.0M project, and thus far our total commitments in gifts and pledges are just over the \$1 million mark. We request \$500,000 in campus reallocation funds to help with this renovation and to provide leverage for further fundraising by showing campus support

Other Question(s)

- What are you doing to increase
 the number of undergraduate degrees your unit grants?
 the number of undergraduate degrees you grant to low-income students (Pell recipients)?
 the number of first-time full-time students who complete degrees in four years?
 the percentage of students completing courses successfully.
- a, b and c) Undergraduate Degrees. The only undergraduate degrees we offer are the AS and BS in dental hygiene. & boxp. We do not foresee increasing these classes at this time but it may be a consideration in the future depending on the results of a demographic study of oral health professionals now being conducted as part of the Indiana Oral Health Initiative with the support of a grant from HRSA.
- d) Course Completion. We have a very low attrition rate in all of our programs. We achieve that by very stringent admission requirements, rigorous admissions committee scrutiny and procedures, and early intervention systems which allow us to detect academic, personal or professional problems while they are still small and reversible
- e) Research Funding. The dental school has continued to devote substantial effort toward the growth of our research enterprise. , During the 2007-08 fiscal year we recruited three junior faculty with research as their main focus. , We provided \$100,000 in matching funding for our two Signature Centers, which have been actively and successfully pursuing external funding &robsp, In response to increased demands by industry, we greatly expanded the research capabilities of the Oral Health Research Institute by hiring additional staff and upgrading our research equipment. We also reorganized and uppgraded equipment in the IUSD Bioresearch Facility to expand our ability to support a wider range of research involving animals and facilitate the inclusion of non-IUSD research faculty projects. To enhance our ability to attract and retain high quality faculty researchers, we formalized the process and the funding of start-up accounts for new research faculty and funded the start-up packages for two new faculty. We expanded the IUSD Office of Research to include a Division of Clinical Trials Management to provide school-wide support for protocol development, IRB submissions and regulatory compliance oversight for research faculty and students . Using our ICR income we provided funding for three Postdoctoral Research Fellows on a competitive basis; research supplies and biostatistical support for 20 MS candidates, supplies and stipends for four PhD candidates, and 14 dental student research stipends, supplies, travel and biostatistical support. We are continually striving to increase interdisciplinary reserach collaborations with IUPUI and IUB faculty, especially the IU School of Medicine, IUPUI School of Science and School of Engineering and Technology as well as Purdue University , Finally, we are actively pursuing opportunities to engage the resources provided by the Indiana Clinical and Translational Science Institute (CTSI). , Notably, we were recently awarded a CTSI predoctoral training position for one of our doctoral students.
- 2. If you had to implement a budget reduction of 3-5% a) what would be your budget priorities and b) what strategies would you employ to walk the fine line of maintaining critical operations and investing in your future? Please describe how faculty will be involved in the decision making process

Budget Reduction

On a base of 33.7M (million \$\sigma\$), a 3-5% cut would equate to approximately 1.0M - 1.7 M. Since compensation accounts for up 26.4M or 78% of our base, this would seem to provide the greatest single opportunity to manage a reduction within a category. For example, 1-1.7M equals 3.8% to 6.8% cut in compensation. & hosp; Options we could consider within this category include. & hosp; 1) across the board salary freeze, & hosp; 2) freeze on new hires; 3) explore opportunities to merge or possibly eliminate some job responsibilities/jobs

Other base categoreis we could freeze or limit include: 1) :Capital Reserve - \$200k: 2) ICR Transfer - 498k: 3) Travel - 141k: 4) Various salary :supplements - 503k: 5) Administrative supplements - 192k

Since the dean is generally opposed to across the board freezes and other such measures it is more likely that he would make most his decisions on budget reduction using a blend of portions of the above measures in a strategic manner

We also have room to improve our collections on patient cases by requiring payment up front before completing any procedure, and being stricter as to offering/allowing discounts. , We could still file for insurance on behalf of , the patient with reimbursement then directly from the insurance company to the patient. Enbsp; This, however, could tread on the delicate balance between maximizing collections on the one hand, and imposing such inconvenience to the patients that we would lose some of them and with the the attendant income. Enbsp;

Finally, we already have plans to expand and professionalize our marketing efforts for our clinical services.

We currently meet with our IUSD Faculty Council Budgetary Affairs Council regularly twice a year but anticipate the possibility of working with them more closely or frequently as the next few months transpire and our budgetary guidelines become clearer

3. Please describe current commitments or plans that require multiple year funding, including the amount of funding required and the length of time the initiative's funding is required.

New Dental School Facility

IUSD is currently in the final stages of developing a conceptual plan for a completely new dental school facility. ¬sp; We anticipate having the completed plan and estimated cost for that facility by mid-March ¬sp; We anticipate paying for at least 50% of that facility with private donations and requesting permission for IU to sell educational bonds for the remainder, with both development and operational pl we look forward to seeing the final plan they will present to the IU Board of Trustees at their February Board meeting. ment and operational plans to retire the bond debt long term (20 or 30 years). &mbsp, The IUPUI Master Planners have been kept closely informed and involved in our developing conceptual plan and

4. How do you intend to use your reserves over the next four years? Please provide the information by fiscal year

Intended Use of Reserves

We currently have a reserve balance of , 2.8M or 7.8% of base (required reserve balance is 3.0% or 1.0M). We do not need to use the reserve towrd the current year state appropriation reduction (our share is 73.284k), since we should be able to cover this by managing within current year operations/savings. Long term we do not believe it is prudent to plan t ouse reserves for permanent reductions that may occur in future state appropriations; we would need to identify permanent base reductions or income increases to offset them.

According to the lastest Planned Uses of Fund Balance that we submitted as of the end of FY08, we listed the following major projects by FY

FY09

Cone Beam CT - 167k

Security System - 185k Digital Radiography - 50k

We are able to do each of these within the current year projection

FY10/11

Renovate SB05 Preclinical Laboratory - 4.5M

Additional Digital Radiography - 650k

Replace clinic Chairs/Equipment - 400k

Other issues to be determined: Oral Health Research Facility/New Building

&nbsn

While this does not relate closely to the base budget for the 2009-11 biennium, IUSD is currently in the final stages of developing a conceptual plan for a completely new dental school facility. We anticipate having the completed plan and estimated cost for that facility by mid-March. We anticipate paying for at least 50% of that facility with private donations and requesting permission for IU to sell educational bonds for the remainder, with both development and operational plans to retire the bond debt long term. The IUPUI Master Planners have been kept closely informed and involved in our developing conceptual plan and we look forward to seeing the final plan they will present to the IU Board of Trustees at their February Board meeting.

What are the current numbers and percentages of tenure-track faculty, clinical faculty, and lecturers in your school?
 Please describe your plan for allocating new faculty positions so as to influence the number and percentage in each category.

Faculty Numbers and Categories

Full Time:

Tenure/Tenure Track: &n

Climical:&mbsp;

Lecturer. . &nbs

It is our intent to maximize the number of full-time tenured/tenure track faculty by careful recruitment, selection and assignment of new faculty each time a faculty opening arises. While a significant percentage of clinical faculty will always be necessary to staff a school of dentistry, we would prefer to keep the percentage at less than 40%

6. How do you define return on investment for diversity efforts in your unit (e.g., numbers of faculty/staff/students recruited and retained, grants received for special studies, new teaching methods or courses, placement of graduates, program reputation)? What are you doing to improve your ROI?

IUSD defines return of investment on our diversity efforts in several ways. First we expect annual increases in the number of African American and Latino applicants to our academic programs, faculty positions, and staff openings. We expect similar increases both in the number of these applicants we interview and the number to which we extend offers of admission or employment. However, the number of African American and Latino applicants who actually accept these offers represents the most significant return of investment.

Other ways we define return of investment for diversity efforts include

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- ἀνφαπ, ἀνφαπ, ἀνφαπ, ἀνφαπ, ἀνφαπ, ἀνφαπ, ἀνφαπ, ἀνφαπ, ἀνφαπ;
 Graduation rate of our students,

Odmbsp; &mbsp; One year for Dental Assisting students, Oémbsp. & Two years for Dental Hygiene students, and Odinbsp; &mbsp; Four years for DDS students

**Operation of the past two years, IUSD has taken leading role in collaborating with Indianapolis Public Schools, especially Crispus Attucks Medical Magnet School IUSD faculty, staff, and students interact with IPS students during formal monthly meetings IUSD faculty, staff, and students also participate with members of the Urban Pre-Dental Club and an Explorers Post, organizations composed of high school students and undergraduates interested in careers in dentistry This year, IUSD staff have initiated efforts to form similar organizations in Gary and in rural southern Indiana. We would like to establish a stronger collaboration with Indiana University School of Medicine that would allow unsuccessful rural and urban DDS applicants to enter the IUSM MSMS program.