



REPORT ON CUSTOMER SERVICE

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Legislative Budget Board
and the
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Prepared
by the
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INTRODUCTION

Pursuant to §2114.002(c) of the Texas Government Code, this report reflects the University of Texas Medical Branch's measurements of the quality of service delivered to its various customers.

In its Compact with Texans, the University of Texas Medical Branch (UTMB) commits to “educating health science professionals and scientific investigators, caring for patients, and solving biomedical puzzles through scientific inquiry.”

In short, UTMB's three primary functions are education, clinical care, and research. Thus, its three primary, external customer bases are

- students in the four schools
- patients and their family members in the clinics, hospitals, and emergency room
- governmental and private organizations who provide funds for research

UTMB also has an internal customer base—its employees. This includes health care professionals, researchers, faculty, staff, and administrators.

The university polls each of these customer bases to gauge the extent to which it meets the goals for providing the following:

- instruction that prepares students, residents, and fellows to meet the evolving health needs of all segments of society
- innovative health care that is accessible, responsive, economical, efficient, and effective in meeting diverse health care needs
- public service by updating health care practitioner skills and knowledge to meet evolving needs
- research opportunities, both within the institution and in collaboration with other entities, which meet the highest standards of scientific inquiry
- institutional support and ancillary operations that are efficient and effective

STUDENTS

UTMB recognizes that students have a choice when selecting a university. Thus, in addition to providing a quality education that prepares them for their profession, it must ensure their experience is pleasant and satisfying. UTMB fulfills its mission of health science education in the four schools: the Graduate School of Biomedical Sciences, the School of Allied Health Sciences, the School of Medicine, and the School of Nursing. Each of the schools individually and the institution as a whole administer a number of surveys to the students. The following pages describe the scope and purpose of these surveys.

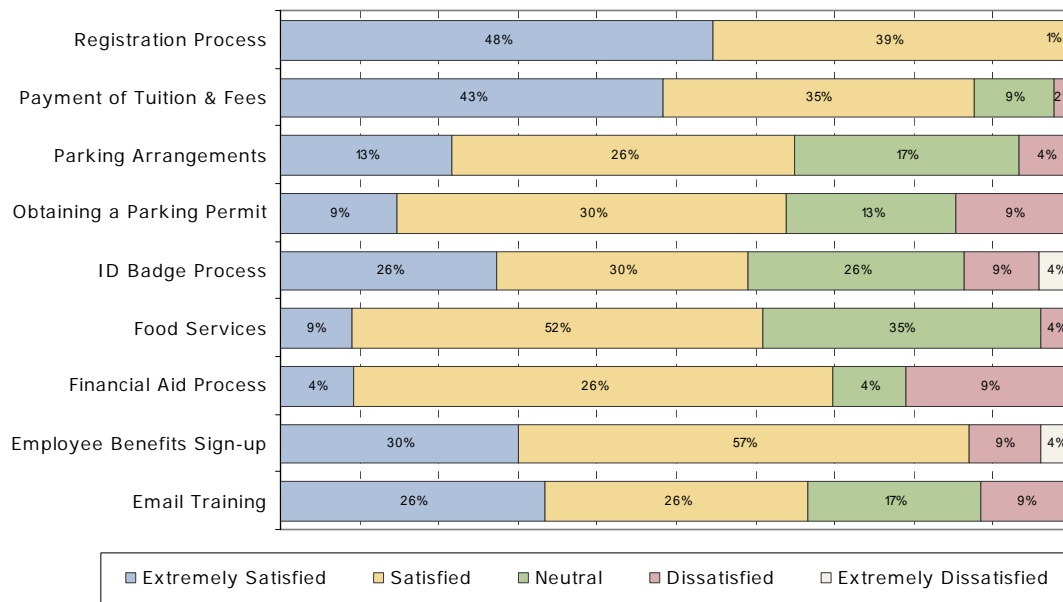
Graduate School of Biomedical Sciences (GSBS)

The Graduate School of Biomedical Sciences offers master’s and doctoral programs in most biomedical sciences. The school also offers advanced degrees in nursing, the medical humanities, and a combined MD/PhD program with the School of Medicine. The school uses the following instruments to gauge the satisfaction of students.

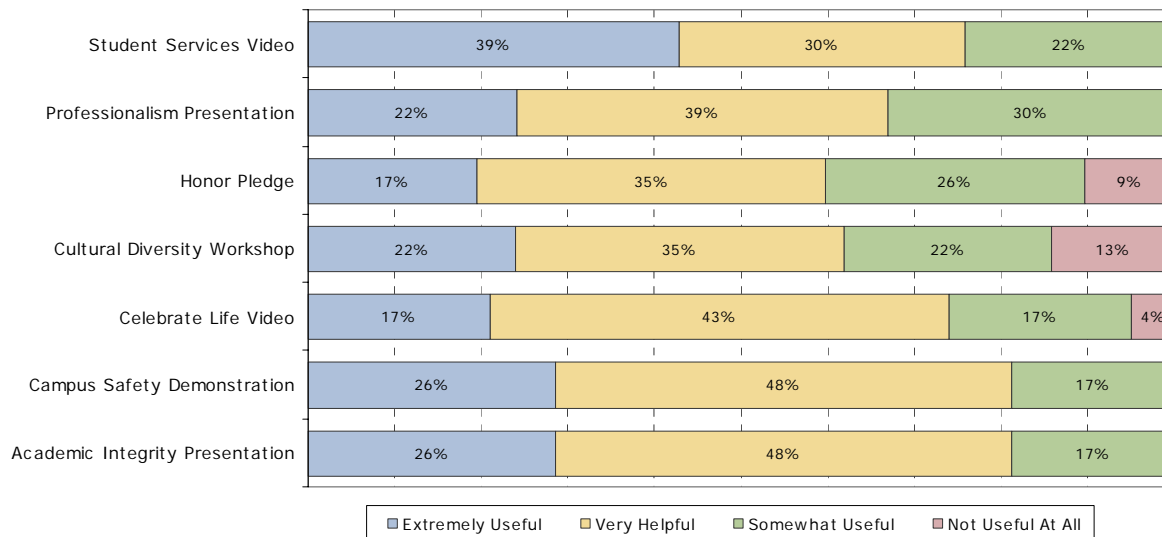
Zoomerang GSBS Orientation Evaluation

New students are surveyed approximately one month after orientation activities end. They are asked general questions about the orientation, asked to rate the usefulness of specific parts of the process, and given the opportunity to make specific suggestions for improvement. Twenty-three students completed the 2005 Orientation Evaluation, 91% of whom said they were “Very Comfortable” or “Somewhat Comfortable” about beginning classes. On a five-point scale ranging from 5 = “Extremely Satisfied” to 1 = “Extremely Dissatisfied,” 69% indicated they were “Extremely Satisfied” or “Satisfied” with the All-School orientation and 74% indicated they were “Extremely Satisfied” or “Satisfied” with the GSBS-specific Community of Scholars ceremony.

Satisfaction with individual elements of the All-school orientation are shown in the following chart. Responses of “Not Applicable” are excluded (therefore percentages will not add to 100).



The following chart summarizes the perceived usefulness of the listed items, all of which relate to particular processes and procedures students need. The responses were based on a four-point scale ranging from “Extremely Useful” to “Not at All Useful.” “Not Applicable” and “Did Not Attend” answers are excluded, therefore percentages will not add to 100.

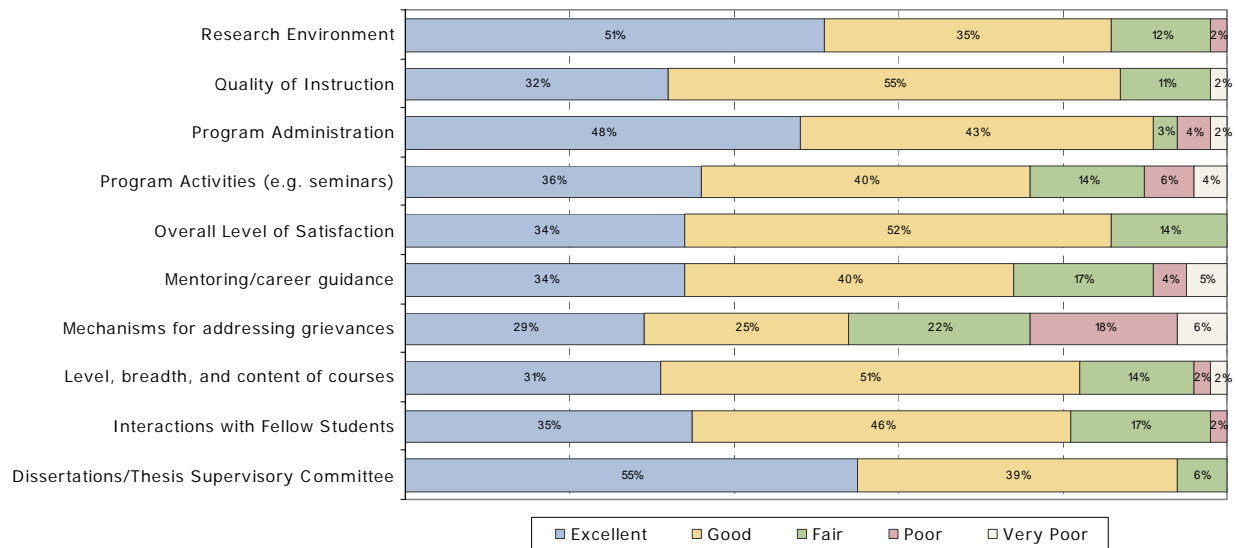


Student Experience and Satisfaction Surveys

GSBS conducts two surveys to measure its students’ perceptions of their experiences and their satisfaction with those experiences over the course of their studies. The surveys are similar in content, but they are administered at two separate times. The first is at the beginning of candidacy for a degree (generally at the end of their second year or in their third year); the second is at the conclusion of the requirements for graduation. The most current surveys combine data from the 2003–2005 academic years.

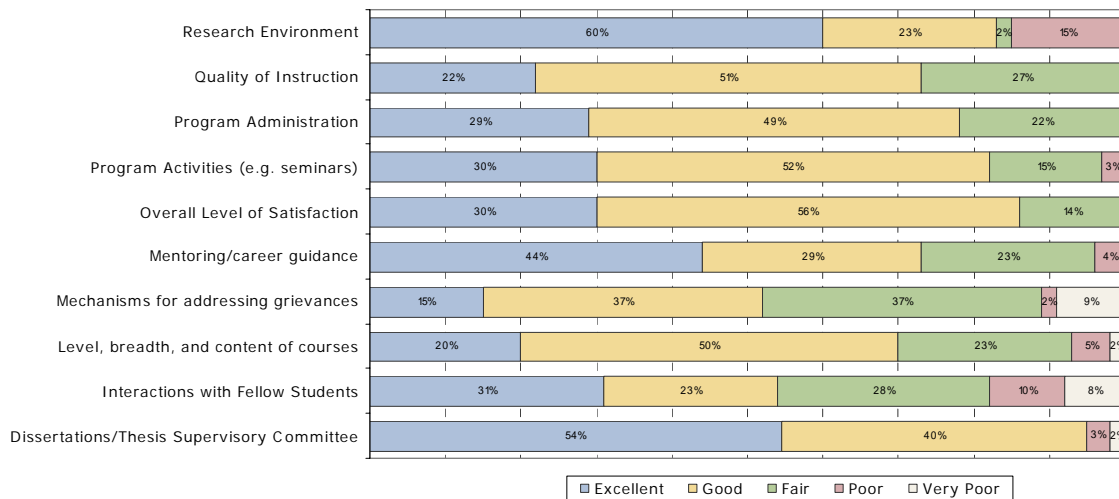
Candidacy Survey

The following chart summarizes the 106 students’ responses, based on a five-point scale ranging from 5 = “Excellent” to 1 = “Very Poor,” to the questions regarding the graduate experience characteristics on the Candidacy Survey for the 2003–2005 academic years. Eighty-six percent of those respondents reported an overall level of satisfaction with their program as satisfied to extremely satisfied and all individual areas of satisfaction surveyed were greater than 50% on the same scale, with most registering over 80% positive responses.



Exit Interview Survey

For the 2003–2005 academic years, 74 people completed the exit interview survey. Of these, 86% reported being “Very Satisfied” or “Satisfied” with their program overall and 79% reported they would recommend their program to prospective students. The following chart summarizes the 74 students’ responses, based on a five-point scale ranging from 5 = “Excellent” to 1 = “Very Poor,” to the questions regarding the graduate experience characteristics on the Exit Interview Survey. (Due to rounding errors, not all percentages add to 100.)



School of Medicine (SOM)

The School of Medicine offers a four-year curriculum leading to the doctor of medicine degree. Graduate medical education is offered in most specialties and continuing medical education programs provide ongoing learning. The SOM regularly collects and evaluates several types of data to assess student satisfaction with the medical school curriculum and the medical school experience.

Medical School Learning Environment Survey (MSLES)

The SOM's Curriculum Research Committee collects satisfaction-related data from every other cohort of medical students at three intervals. All students in cohorts matriculating in even-numbered years (e.g., 2004, 2006) are enrolled in the longitudinal study. These students are asked at matriculation (baseline expectations), at the end of Year 2, and during Year 4 to complete the Medical School Learning Environment Survey (MSLES), which is a standardized questionnaire. All medical students enrolled in the study (approximately 200 per class) therefore complete the MSLES three times. Response rates range from 95% to 100% of the entire class of students in each administration. The only students in the cohorts excluded from the voluntary data collection process are those who specifically decline to participate. In reviewing the data, the committee studies students' perceptions of the medical school learning environment and how they change with curricular refinements. The seven scales on the MSLES indicate student expectations about or experience with the UTMB school environment in terms of

- *Flexibility* of the school or, conversely, the degree of control imposed on students
- The extent to which *Student-Student Interaction* occurs
- *Emotional Climate*, which is the affective responses to the learning environment
- *Supportiveness* of students by faculty, administration, and staff
- *Meaningful Learning Experience*, which is defined as the relevance to students' perceived needs as future physicians
- *Organization*, which is the degree of coherence between different educational activities
- *Breadth of Interest*, which is the degree to which the environment fosters interest and activity in medicine in the broadest sense and allows for interest outside medicine

Clinical Preparedness Survey

Year 2 students in cohorts enrolled in the longitudinal study complete a clinical preparedness survey at the same time and under the same conditions as the MSLES. This survey asks students to indicate how well the first two years of medical school prepared them for the upcoming Year 3 clinical rotations. Year 4 students complete a similar survey also under the conditions described above for the MSLES. Students are asked to report, using a five-point scale, how prepared they feel for the tasks they will face as a resident. These include dealing with patient confidentiality, working on a team with interns and residents, taking a comprehensive medical history, performing a focused physical examination, planning diagnostic evaluations of patients' problems, and finding learning resources.

A volunteer sample of SOM graduates one year into their residency training completes a similar survey. Graduates are asked to indicate how well their UTMB medical education experience prepared them for postgraduate training in areas such as educating patients about their diagnosis, treatment, and follow-up; dealing with patient confidentiality; incorporating their knowledge of research results into clinical decision making; managing patients' conditions; critically evaluating research articles; and knowing the limitations of their knowledge and skills.

The SOM Curriculum Evaluation Committee and the SOM Curriculum Committee review these three “preparedness” data sets (Year 2 students, Year 4 students, and graduates) annually. In addition, they conduct comparative studies to investigate response differences in students and graduates from year to year.

Course Evaluation Information

The SOM Curriculum Evaluation Committee systematically collects, on behalf of the SOM Curriculum Committee, course evaluation information about the Year 1 and Year 2 courses and required Year 3 and Year 4 clerkships in the SOM curriculum. At the end of each course in Years 1 and 2, the Committee administers a standard set of questions via the Internet assessing course quality and alignment with curriculum standards. All students complete a similar survey as they finish the required clerkships. Completion of the survey is required of all students so response rates are excellent (98–100%) for each course. Course and clerkship directors and the Curriculum Committee use the course-level data generated from these surveys to evaluate and improve the courses. Sample questions related to course satisfaction include the following (responses to all questions are on a five-point scale):

- I was provided with adequate information on what I was expected to learn.
- I was provided with adequate information on evaluation methods.
- The course material was well sequenced.
- This course allowed me to integrate basic sciences and clinical medicine topics.
- The problem cases were helpful in mastering the material.
- The written exams were fair.
- The faculty course directors were accessible.

To facilitate interpretation of the closed-response question data by faculty and students, each course’s responses are reported next to an accounting of the course’s previous evaluation and responses to the same items across all courses in the previous academic year. In addition to the closed-response questions, students respond to open-ended questions about the course. Their copious written comments capture students’ opinions about course strengths and weaknesses that may not have been adequately tapped by the closed-response questions. Together, these quantitative and qualitative data have been particularly helpful to course directors for confirming and describing course strengths or weaknesses and planning improvements.

Facilitator Evaluations by Integrated Medical Curriculum (IMC) Students

All courses use an online method to complete evaluations of faculty facilitators. Most of the courses include formative as well as summative components. To allay any concerns of positive or negative bias, students cannot see feedback from their facilitators and the facilitators cannot see the feedback by students, even though they are anonymous, until both groups have completed all evaluation forms. In addition, each course coordinator also keeps a “Faculty Attendance Log.” The data collected in the log include when the facilitator began and ended each group session, if the facilitator notified the course in advance of an absence, who substituted for an absent facilitator, and documentation if the facilitator was absent without notification.

Copies of the online evaluations are distributed to the facilitators’ appropriate department chairs, and include quantitative data (a summary of checklist items), qualitative data (narrative comments), and a cover letter from course directors with details about the role of the facilitator.

In some instances there is feedback about specific faculty members, e.g., recognizing those who may have done a stellar job. All facilitators receive copies of their own feedback and the letter that was given to their chair.

Preliminary data analysis has been done with the data collected from the "Faculty Attendance Log." It includes the group time allocated, the average time used for all groups' individual sessions for each case, and the percent mean time used for all groups' individual sessions for each case. Additionally, it includes the difference between the allocated time and the actual time each facilitator used for each case session and the average of the differences for the entire module for each facilitator.

Year 3 and 4 Clerkship and Elective Faculty Feedback

These data are collected and disseminated on an internal basis by each department.

The Medical School Graduate Questionnaire (GQ)

The Medical School Graduate Questionnaire (GQ) is a national survey administered annually by the American Association of Medical Colleges (AAMC). It was first administered in 1978. In 1999 the format changed from paper and pencil to an online format. In 2003, questions regarding the need to obtain informed consent from students were raised nationally. All students are included in this survey. The confidential survey takes approximately 45 minutes to complete and individually identifiable student data are not released to medical schools.

The GQ is a retrospective survey in which students reflect on their four years of medical education. In 2004, 10,887 graduating medical students completed the survey. Responses were available for 153 UTMB June graduates for a response rate of approximately 94%. In 2005, 9,403 graduating medical students completed the survey. Responses were available for 52 UTMB June graduates for a response rate of approximately 30%. The UTMB GQ results are shared with SOM leadership and the Curriculum Committee and are used, for example, in the formulation of plans for revising Years 3 and 4 of the curriculum.

Graduate Medical Education (GME)

The report was created from the institutional MyUTMB House Staff Evaluation System. Each completing House Staff member is required to answer questions related to the UTMB Residency Program in which they trained during their residency or fellowship. Questions answered are related to curriculum, program director and faculty supervision, whether educational objectives were met, and overall preparation for graduation. The evaluations are compiled anonymously.

This evaluation assists the Associate Dean of GME and GME Committee in recognizing positive attributes as well as areas needing enhancements to improve the overall experience for House Staff. All completing House Staff are required to turn in the evaluation prior to leaving the program. Approximately 160 evaluations were collected between January and December 2005, with most submitted in June.

This report was presented to the GME Committee in November 2005. Any feedback that may have resulted from the findings given in the summary has been requested and when received will be analyzed.

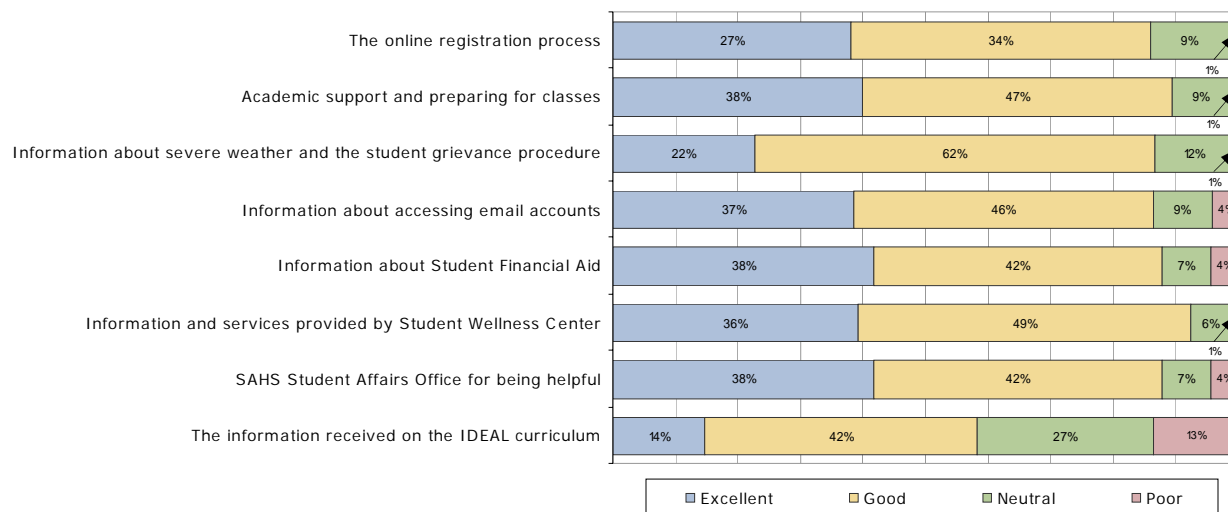
School of Allied Health Sciences (SAHS)

The School of Allied Health Sciences offers bachelor’s and master’s degrees and certificates through its many programs. The school collaborates with the Graduate School of Biomedical Sciences in offering a PhD in Rehabilitation Sciences. The following instruments are used to gauge the satisfaction of students in the SAHS.

Zoomerang SAHS Orientation Evaluation Survey

One hundred and thirty-seven students completed the Fall 2005 Orientation Evaluation Survey. Eighty-four percent rated the information they received prior to enrolling at UTMB as “Good” or “Excellent” and 75% said they were overall “Very Satisfied” or “Extremely Satisfied” with the SAHS Orientation Program. Eighty-one percent of the students were “Comfortable” or “Very Comfortable” about starting classes.

The chart below shows the students’ responses on other indicators using a four-point scale. “Not Applicable” answers are excluded, therefore percentages will not add to 100.



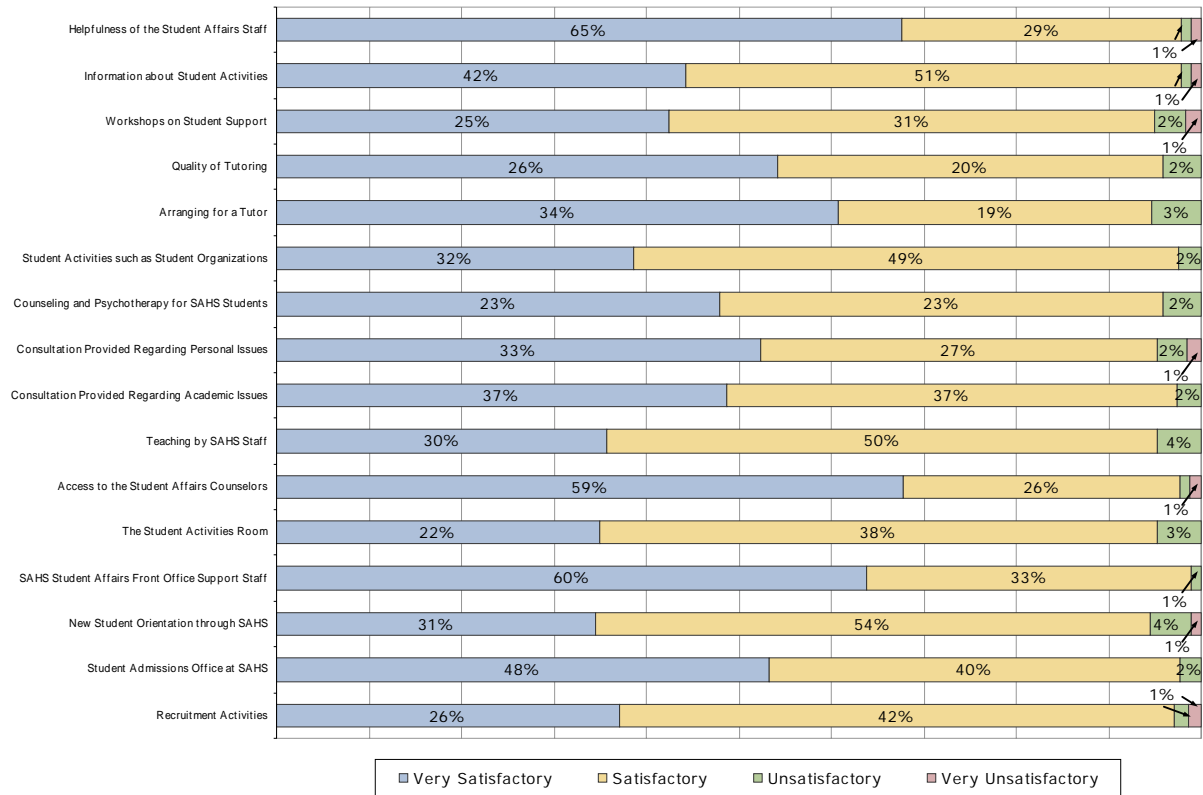
Zoomerang SAHS Student Satisfaction Survey—Office of Student Affairs

The SAHS Office of Student Affairs (OSA) strives to provide students with the support necessary to accomplish their academic and personal goals. Academic support services include study skills assistance, tutoring, and learning assessment. Counseling and support are provided to assist in the development of professional identity and self-esteem.

One hundred and eighty-seven students (46%) completed the SAHS Student Satisfaction Survey in the spring of 2006. The anonymous survey consisted of items to be rated on a scale from 1 to 5, where (1) was “Very Unsatisfactory,” and (5) “Very Satisfactory.” “Not Applicable” and “No Opinion/Neutral” answers are excluded, therefore percentages will not add to 100.

Ninety-six percent of the respondents chose “Very Satisfactory” or “Satisfactory” to rate the overall satisfaction with the SAHS Office of Student Affairs and Admissions. The chart below shows the responses to the items on the survey.

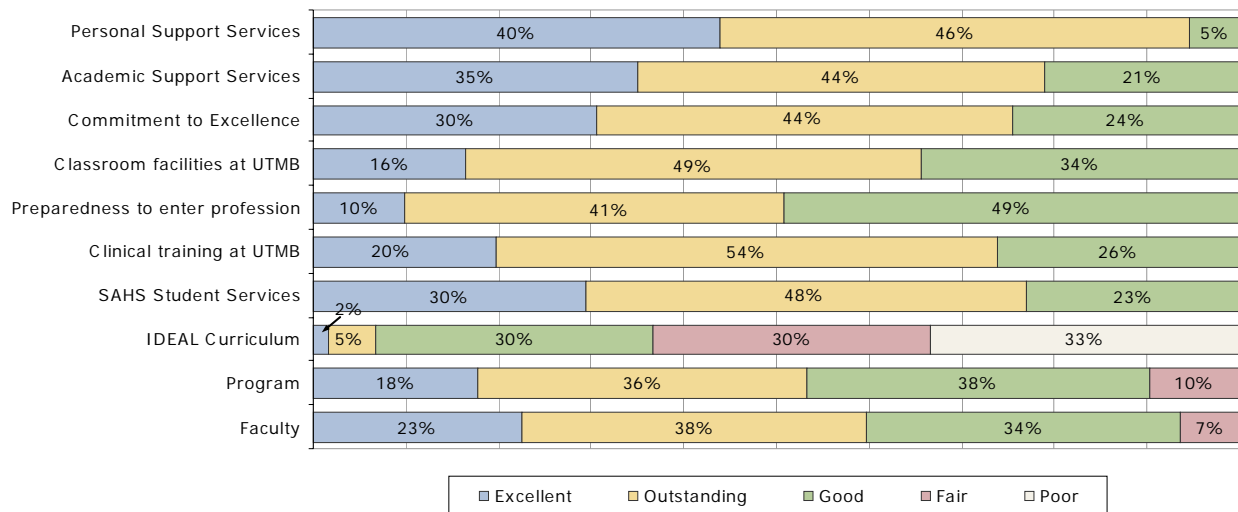
UTMB Report on Customer Service



2005 SAHS Graduation Survey

Sixty-one of the 72 students (85%) who attended the Commencement rehearsal in August 2005 completed the SAHS Graduation Survey. The survey consisted of questions that asked participants to rate items on a Likert scale, with options Excellent, Outstanding, Good, Fair, or Poor. (Due to rounding error, percentages may not add to 100.)

The chart below shows the responses to the items on the survey.



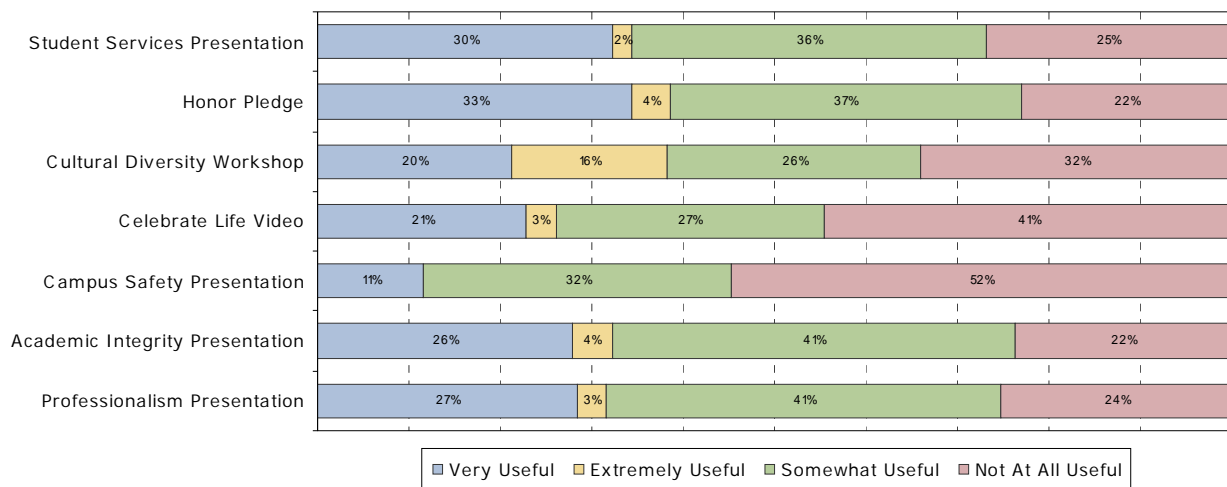
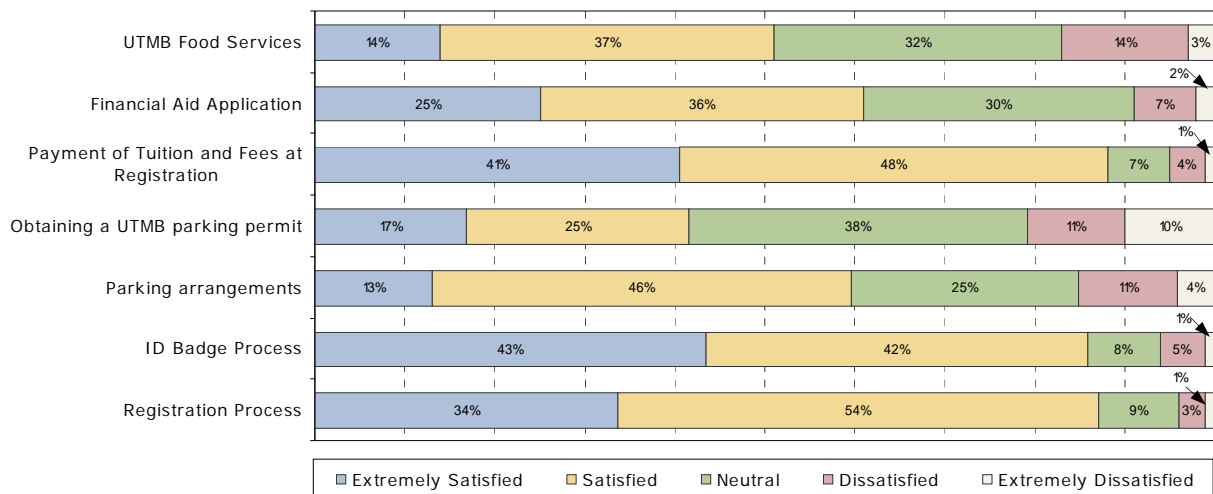
School of Nursing (SON)

The School of Nursing offers bachelor’s and master’s degrees (the PhD in Nursing is awarded by GSBS). Programs include a work-study plan for qualified UTMB employees who wish to pursue a degree in nursing. Continuing education opportunities are also available.

Zoomerang SON Orientation Evaluation

One hundred and fourteen students completed the Fall 2005 Orientation Survey. Fifty-nine percent indicated they were “Very Comfortable” or “Somewhat Comfortable” about beginning classes. Fifty-six percent of the nursing students reported they were “Extremely Satisfied” or “Satisfied” with the SON-specific orientation compared to 61% of the students who were “Extremely Satisfied” or “Satisfied” with the all-school orientation.

The students rated questions on either a five-point (1 being “Extremely Satisfied” and 5 being “Extremely Dissatisfied”) or a four-point scale, (1 being “Very Useful” and 4 being “Not At All Useful”). The results (excluding “Not Applicable” answers, so percentages do not add to 100), are summarized in the following charts. (Due to rounding errors, not all percentages equal 100.)



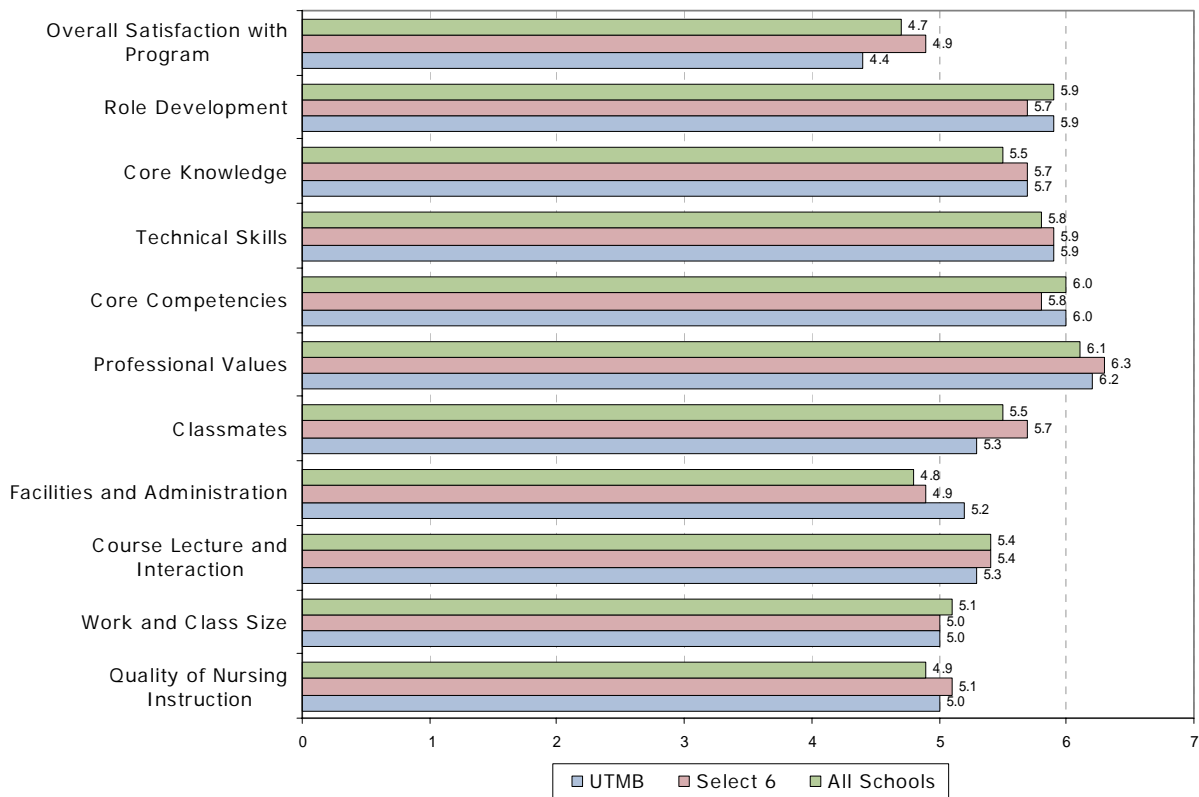
Nursing Exit Study

The American Association of Colleges of Nursing (AACN) Educational Benchmarking, Inc. (EBI) Nursing Exit Study is administered to baccalaureate generic and RN-BSN graduates by the AACN/EBI. The survey collects demographic, study habit, and academic information, as well as data regarding the individual's educational and clinical experience while at UTMB. The latter consists of 61 items that address 11 factors: Quality of Nursing Instruction, Work and Class Size, Course Lecture and Interaction, Facilities and Administration, Classmates, Professional Values, Core Competencies, Technical Skills, Core Knowledge, Role Development, and Overall Satisfaction with the Program. Each item is rated on a seven-point scale with 5.5 representing a 75% satisfaction level.

Each institution that participates in this survey receives its own summarized data and the comparative data for a group of six schools selected by the institution (which is labeled "Select 6"), and all participating schools.

The comparison group for UTMB consists of The University of Texas Health Science Center at Houston, Ohio State University, James Madison University, Johns Hopkins University, University of Wisconsin-Madison, and Arizona State University. These six were selected because of their classification as either a "medical school/center" or a "doctoral/research university-extensive."

Following is a chart that provides a summary of the comparative analysis of the 11 factors for 2005. SON exceeds or meets the benchmark institutions for 6 of the 11 items and is slightly lower on three items. There are two items rated lower than the comparison groups.



SON faculty and administrators review and use these data to improve students' educational experiences. 2005 is the fourth year UTMB has participated in the AACN/EBI survey. Longitudinal data indicate student responses remain relatively stable except for four items rated "slightly lower." Refinements in the curriculum and learning strategies are being implemented in response to these findings.

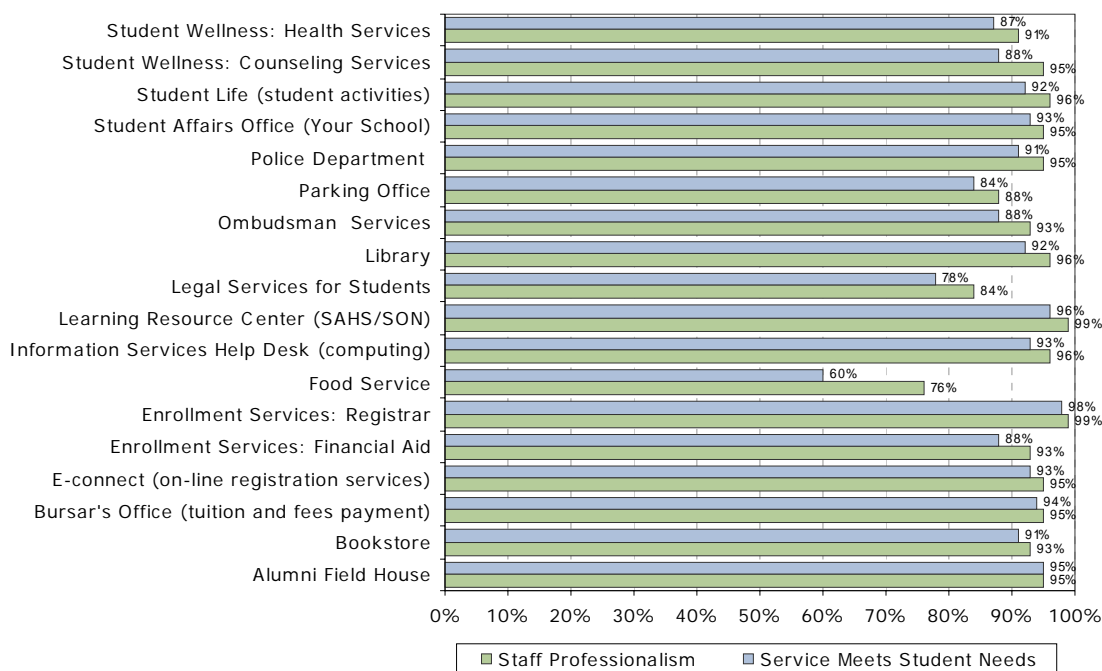
Thirty-nine Master's students completed the 2004–2005 exit survey, which is a 72% return rate. In response to the question, regarding "doctoral education plans," 51% indicated they planned to pursue a doctoral education. When asked, "to what extent did your nursing program fulfill your expectations," students rated the program 4.13 overall on a 5-point scale. When asked "how inclined are you to recommend your nursing program to a close friend," students rated the program 4.4 overall on a 5-point scale.

All Students

Student Government Association Survey (SGA)

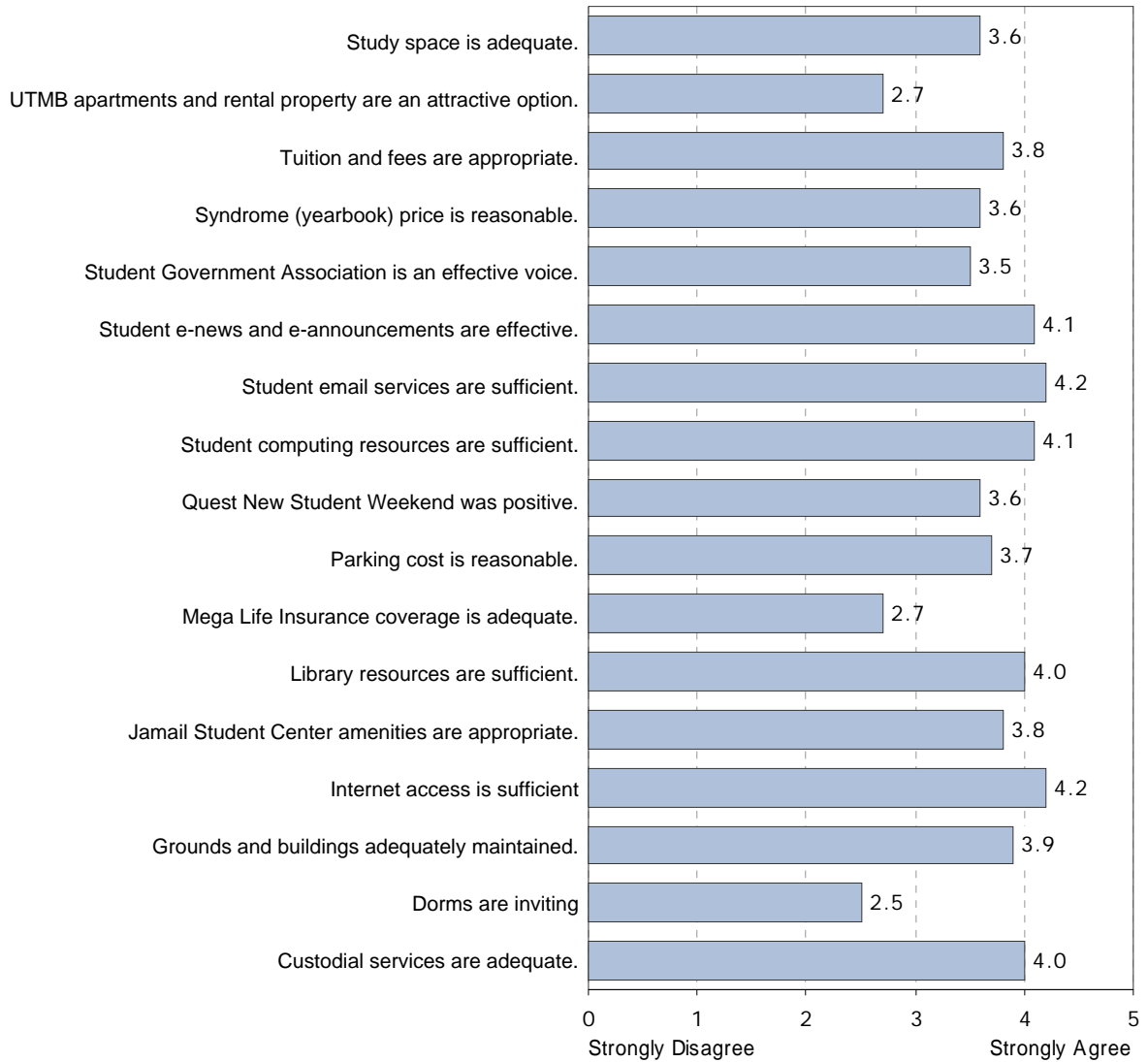
This online survey is sent to students each spring to assess students' satisfaction and needs. Results are sent to all departments and programs for use in assessment and improvement. Incentives are provided to students in order to improve response rate. Additionally, students are asked for written comments, which are categorized and addressed by each department.

The chart below details the level of customer-determined service quality and other relevant information received from the current students of all four schools. The data represent the percentage of students scoring an item as favorable for 2005 (defined as "Excellent," "Very Good," or "Good" for Staff Professionalism and greater than 80% for Service Meets Student Needs). Staff Professionalism is based on a five-point scale (5 = Excellent and 1 = Poor) and Service Meets Students Needs is based on a four-point scale (4 = 100–90% and 1 = less than 70%). Out of a potential 2,058 total students, 516 students or 26% responded.

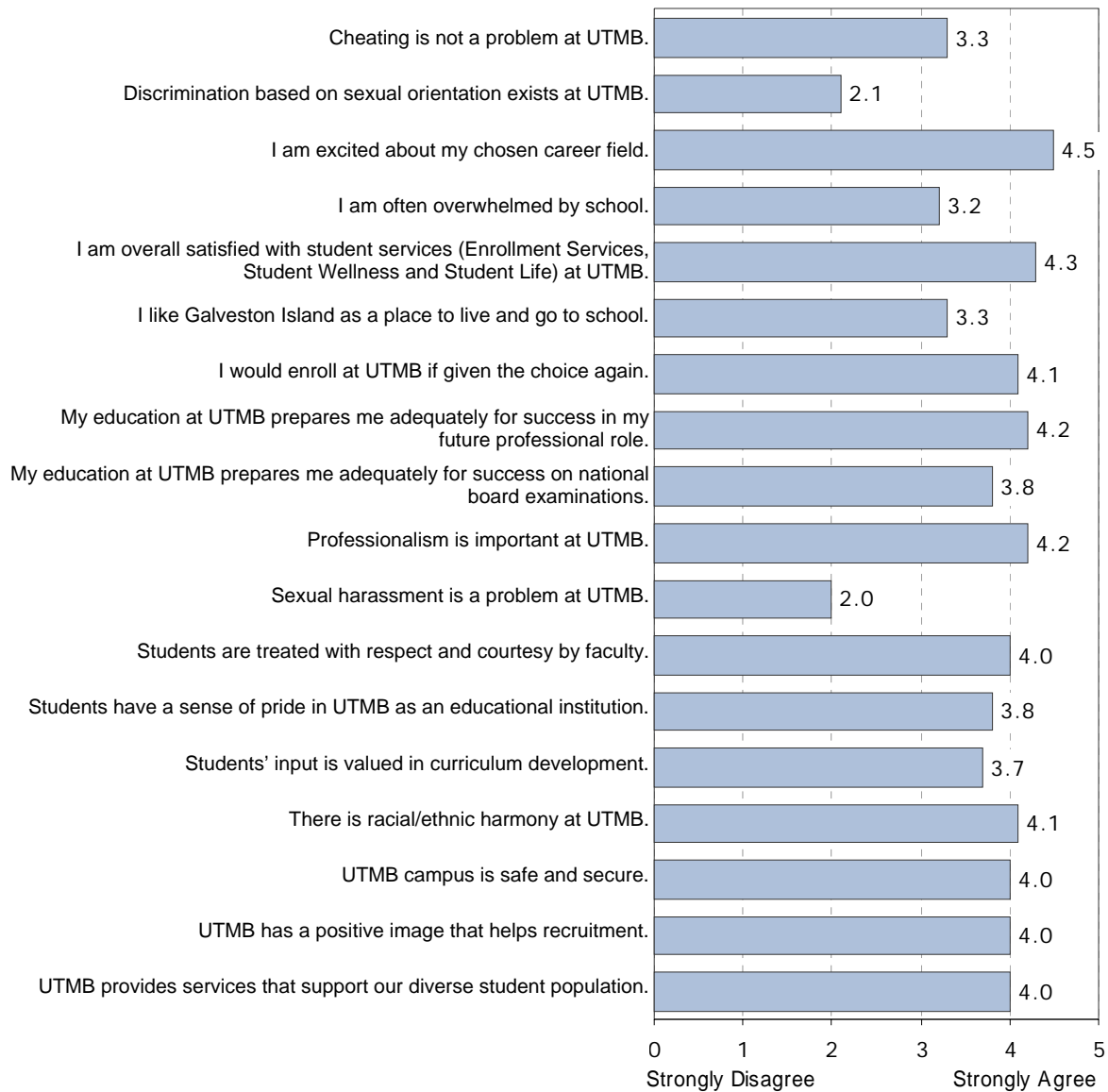


The following charts summarize the data collected in the “Around Campus” and “Student Opinion” portions of the survey, respectively. The numbers represent the mean value of the student opinions for each particular item with responses based on a five-point scale (5 = Strongly Agree and 1 = Strongly Disagree).

Around Campus



Student Opinion



The Student Government Survey is continually reviewed for improvement. Thus, the 2005–2006 survey had some changes in format and questions. The survey is piloted by Student Government Association representatives for their input.

Analysis of this survey reveals that students find the online survey easy to respond to and participation has increased. Also, 88% of students believe that they are treated with respect and courtesy and 93% believe that professionalism is important at UTMB. Eighty-nine percent of students think UTMB has a positive image and 83% feel a sense of pride in the university. These favorable ratings all reflect improvements over the 2002 results.

Overall, in 2005, students considered the quality of UTMB Student Services to be very good as noted by a rating of 4.28. However, each year an attempt is made to address any deficiencies identified.

Examples of changes made by Student Life based on responses to the 2005 survey findings:

- To better Communicate activities sponsored by Student Life and student organizations, Student Life: 1) bought a large flat-screen TV, had it mounted in the Jamail Student Center (JSC) cafeteria, and ran a PowerPoint presentation on it with advertisements for the various events; and 2) through a project called “Bizarre Holidays” Student Life staff members visit the SAHS/SON lobby once a month to have a little fun with students and advertise (with various activities, fliers, and the PowerPoint presentation on the laptop/projector) student activities.
- The two computers in the JSC cafeteria were too old and routinely were not working. Student Life leased two new computers through Atos, which includes the service package to keep them functioning well.
- In response to the request for more traditional programming, Student Life sponsored or co-sponsored an Etiquette Dinner, a summer reading project for new students with the author coming to speak to the student body in December, and a mechanical bull at the summer TGIT (social). Continued activities include an Intramural program, Game Night, Leadership Movies Series, bus trip to see the Houston Astros, and many more.

Almost half the respondents took advantage of the opportunity to provide written comments. These comments have been particularly useful when addressing student concerns since they suggest positive actions that may be taken to improve satisfaction.

Student Wellness

Student Wellness, which provides health and counseling services, continues to use a patient satisfaction survey that was initiated in February 2001 in the Student Health clinic. The Office of Research and Nursing Scholarship in the School of Nursing assisted with the development of the original form. The form was updated and changed to a web format in June 2005.

Students are offered the form online at the end of each visit. The responses are anonymous. There is also a free-form response section, where students are asked how services provided by Student Wellness services may be improved.

The survey responses are compiled quarterly. The number of responses for Fiscal Year 2005 is fewer than in prior years due to scanning errors in the first and third quarters. There were 149 responses for the second quarter and 172 responses for the fourth quarter (online responses) for a total of 321 responses included in the Fiscal Year 2005 report. The report for the first two quarters of Fiscal Year 2006 includes 441 responses.

The following table summarizes the responses of “Excellent” or “Very Good” for some of the key items from this survey.

Question	FY 05			FY 06 First 2 Quarters		
	Excellent/ Very Good	Total Responses	% E/VG	Excellent/ Very Good	Total Responses	% E/VG
How do you feel about the quality of the visit overall?	292	299	97.7%	427	440	97.0%
The personal manner (courtesy, respect, sensitivity, friendliness) of the person you saw.	297	304	97.7%	432	440	98.2%
The clinical skills (thoroughness, carefulness, competence) of the person you saw.	296	302	98.0%	428	439	97.5%

The students who responded found their Student Wellness experiences to be very positive. More than 97% indicated that they found the staff’s clinical skills and personal manner, as well as the overall quality of their visit, “Excellent” or “Very Good.” In fact, nearly all (752 of 753) students responding for the two reporting periods said that they would recommend Student Wellness to other students.

More detailed data are available in summary form by provider and by school. This information is used to make improvements in Student Wellness operations and to provide staff feedback on the students’ perceptions of the care they receive. A summary report is shared each year with the Student Wellness Advisory Committee and the Student Government Association. Beginning with Fiscal Year 2005, a summary report has also been posted on the Student Wellness web site.

Enrollment Services

Enrollment Services provides a fully integrated Financial Aid and Registrar’s Office to ensure a one-stop shop for student services. Each year Enrollment Services reviews the data from the Student Government Association (SGA) Survey to make improvements and enhancements to online services as well as to the delivery of services in a face-to-face environment.

The percentages of students who in the 2005 SGA Survey rated Enrollment Services as “Meets Students Needs” in various areas, are shown below:

E-Connect (the UTMB on-line student services)	93%
Enrollment Services: Financial Aid	88%
Enrollment Services: Registrar	98%

Even though the ratings were very high, Enrollment Services has taken the following action based on the individual comments of students, and posted this information on our website to ensure that the student body is aware of changes that have been made:

Phone calls and e-mails from students were not being answered in a timely manner. Enrollment Services (ES) staff have made a commitment to respond to phone calls and e-mails within two business days. ES continues to monitor the process and is currently responding within one business day.

The link to UTMB e-Connect is hard to find. A link was added to the UTMB home page.

The disbursement process for financial aid is not reliable. Enrollment Services has reviewed the Financial Aid disbursement process and made a number of changes, including working closely with Accounts Payable, Finance, and the Bursar's Office to ensure more reliable disbursement of funds. ES continues to monitor the processes and make improvements.

Enrollment Services Staff is not as professional or as knowledgeable as they need to be to meet student needs. Staff training has been enhanced, with three members participating in a week-long training program in San Antonio. Two members attended a one-day meeting in Houston. In addition, the weekly staff meetings include time to discuss issues the staff encountered, and how the issues were resolved, so the staff members learn from one another.

Enrollment Services also utilizes an Enrollment Services Advisory Committee comprised of students from each school, the Student Affairs Deans, the Director of Student Life, and the Associate Vice President for Student Services to review the services, and plan and approve changes in procedures for awarding of financial aid and for registrar services. The committee meets twice annually.

Office of University Advancement

Parents Program

Purpose – The Parents Program was created in 2004 for families of students to feel a strong connection with UTMB by providing information to them, inviting them to regional events, and giving them a voice as a member of regional parent committees. They are considered one of our strongest assets in recruiting our future premier students, as well as advocates in our Scholarship Campaign.

Surveys – At every event the parents are invited to attend, there are surveys for them to complete with information such as their address, student's name, which school they are attending, and most importantly for them to list ideas of parent programs they would like to see offered. Below is a sample of requests/ideas that have been fulfilled:

Requests	Actions taken
"Help potential families or new families to welcome them to UTMB"	<ul style="list-style-type: none"> ▪ Proud parents dinner at Open Gates annually in August during orientation week, which provides information to them about the campus and they are able to meet other parents of students from all different years. ▪ Parent/spouse luncheon is held during orientation week, with presentations from all four schools on curriculum and expectations, and campus tours. ▪ Welcome parent events are regional events held in the summer in Dallas, Austin, San Antonio, and Houston, where parents of current students welcome parents of incoming students.
"Reception for new parents with experienced parents to help answer questions"	
"How parents can support our students"	
"Tour of school and new facilities"	
"Social events"	

Requests

Actions taken

“Any program that I can give my service”

“Casual get togethers just for fun and to share parental concerns”

“Weekend activities”

“Would be glad to speak with parents of incoming students”

- Family Weekend is held annually in October and includes a welcome and presentations from Dr. Stobo, the Deans, presentations on our programs of excellence, receptions, and tours of each school.
- A parents’ handbook was created for the parents, which included information that the families had asked for such as curriculum calendar, essential telephone numbers, campus safety, frequently asked questions, hurricane preparedness, and volunteer opportunities for the students and parents
- Weekly emails are sent of UTMB news, as well as student news.

PATIENTS

UTMB offers services that range from primary health care to specialized diagnostic and treatment resources. Patients from the state, the nation, and the world come to the university for quality care.

John Sealy Hospital is the hub of UTMB's inpatient care complex. Other hospitals are the Children's Hospital, John Sealy Annex, Jennie Sealy Hospital, Rebecca Sealy Hospital, R. Waverley Smith Pavilion, and the Texas Department of Criminal Justice (TDCJ) Hospital (operated jointly by TDCJ and UTMB). UTMB also features a sophisticated emergency room and trauma center with associated treatment areas and a specially equipped neonatal ambulance.

Special care areas of UTMB hospitals include the infant special care unit, cardiothoracic surgery division with an extracorporeal membrane oxygenation regional center, neurological trauma center, burns service with human skin bank, cancer center, and renal service including kidney dialysis and renal transplantation program. A leader in transplant surgery, UTMB performs kidney, pancreas, liver, heart, lung, and heart-lung transplant procedures.

A top priority at UTMB is ensuring patients are satisfied with the care they receive at the medical branch hospitals. To this end, UTMB routinely assesses the satisfaction of inpatients, outpatients, and Emergency Room patients using the satisfaction measurement designed, managed, and analyzed by Press Ganey Associates, Inc. A nationally recognized patient satisfaction monitoring company, Press Ganey is the health care industry's foremost satisfaction measurement and improvement company serving more than 5,900 health care facilities and processing approximately seven million surveys annually.

UTMB recognizes that patients have a choice when selecting a health care provider. Thus, in addition to providing quality medical care, it must ensure their experience is pleasant and satisfying. A contributing factor to their overall satisfaction is how pleased they are with the physical space and amenities made available to them. For this reason, the patient surveys include a series of items related to both care and services.

The items in the Press Ganey survey are rated on a five-point scale with the results tabulated as the percentage of respondents who rate a given item "Good" or "Very Good."

Inpatients

All discharged patients, with the exception of newborns, are surveyed with the results tabulated and reported quarterly. For the quarter covering December 1, 2005, to February 28, 2006, 3,170 patients received surveys and 510, or 17%, of these patients responded. The following table lists the key indicators for inpatient satisfaction and their associated percentage of respondents who rated them "Good" or "Very Good."

Likelihood of recommending the hospital to others	88.8%
Skill of the nurses	90.5%
Skill of the physician	93.2%

With regard to overall satisfaction of the care and services provided, 89.1% of the respondents were satisfied based on the overall assessment of the hospital experience.

Outpatients

A random selection of 14% of all patients seen in the UTMB outpatient settings are surveyed and the results tabulated and reported on a quarterly basis. For the quarter covering December 1, 2005, to February 28, 2006, 12,204 patients received surveys and 1,860, or 14.6%, responded. The following table lists the key indicators for outpatient satisfaction and the associated percentage of respondents who rated them “Good” or “Very Good.”

Likelihood of recommending clinic to others	95.4%
Overall rating of care provider	94.6%
Care received during the visit	95.9%

With regard to overall satisfaction of the care and services provided, 95.9% of the respondents were satisfied based on the overall assessment of the clinic experience.

Emergency Room Patients

A random selection of 30% of the Emergency Room patients who are treated and released are surveyed and the results tabulated and reported on a quarterly basis. For the quarter covering December 1, 2005, to February 28, 2006, 3,735 patients received surveys and 330, or 8%, of these patients responded. The following table lists the key indicators for Emergency Room patient satisfaction and the associated percentage of respondents who rated them “Good” or “Very Good.”

Likelihood of recommending the hospital to others	72.7%
Overall assessment of the physicians	76.1%
Overall assessment of the nurses	79.6%

With regard to overall satisfaction of the care and services provided, 72% of the respondents were satisfied with the care provided based on the overall assessment of the care provided by Emergency Room physicians.

COMMUNITY

UTMB serves a broad spectrum of the “community” in a variety of ways. Employers and potential UTMB students; teachers and K–12 students; and community health system components including health facilities, providers’ service organizations, local health-related professionals, community-based health professions students, and regional academic health education programs are among those UTMB serves. The assessments of the success of the various programs and events are outlined below.

SON Baccalaureate Program Employer Satisfaction Survey

The School of Nursing (SON) collects information from the employers of its baccalaureate program graduates to assist in the evaluation and continued improvement of the undergraduate nursing program. To this end, employers are asked to assess the preparation of the SON graduate as well as provide information regarding the clinical focus, work setting, and type of position that the graduate holds. This data was last collected in 2003 as part of a three-year data collection cycle. The next collection will be in 2006.

SON Master’s Program Employer Satisfaction Survey

The School of Nursing (SON) mails a short survey to employers of nurses who have obtained a Master of Science in Nursing (MSN) at UTMB one year after graduation. Twenty-nine surveys were mailed to employers during January 2004. These surveys were concerned with MSNs who had graduated December 2003. Six surveys were returned for a 21% return rate. Of those, all responses to all questions were favorable. Of the six responses, 100% responded “yes” to the questions “Do you have confidence in the quality of our program based on the performance and contributions of this individual to your practice or organization?” and “Based on the performance of this individual, would you hire another graduate from our program?” Four of six responded above average and the remaining two responded average to the question “How do our graduates compare to other graduates you are familiar with?”

SON Open House

Open house is an information session for prospective students who are interested in the School of Nursing at UTMB. The open house session covers student life, enrollment services, the BSN, BACC2, RN-BSN, MSN, and RN-MSN programs. The open house session offers a tour of SON’s state-of-the-art simulation labs and biobehavioral lab. Representatives from several departments at UTMB present information to the prospective students. Open house is currently offered the first Friday of every other month. At the end of each open house, a brief nine-question evaluation regarding content and logistics is administered, then analyzed and reported by PulseSurvey II using Scantron. Typically the evaluations are overall very good.

East Texas Area Health Education Centers (AHEC)

In addition to providing health care services to patients and instruction to students, the University of Texas Medical Branch also provides special support to community health system components including health facilities, providers’ service organizations, local health-related professionals, community-based health professions students, and regional academic health education programs that use services provided by the East Texas Area Health Education Centers. Specific services include health careers promotion, community-based education

support, health care professional practice entry and support including continuing education services, health education for special populations, and community health systems support.

Each project and activity discussed below has varying levels of evaluation, which include customer satisfaction measures. These measures are gathered and used for modifying services at the local level in the 9 centers that cover 111 counties. These measures are customized for each project. Centrally, aggregate information is collected that indicates customer satisfaction through frequency with which AHEC services are accessed. Thus, the number of students, physicians, and health care professionals within the community who use these services is carefully tracked and monitored.

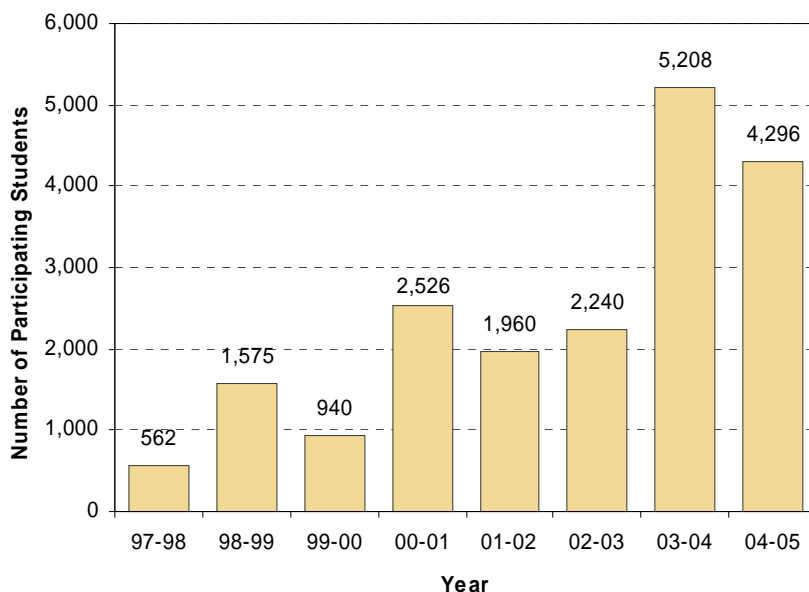
Health Careers Promotion

The objective of Health Careers Promotion is to attract underrepresented and disadvantaged individuals and prepare them for health professions education programs through health career awareness activities.

The customer satisfaction measures for these activities are woven into the evaluation of each project and program. Students, parents, and teachers provide feedback through survey forms and informal discussions regarding the quality and value of services. At the individual community level, methods and strategies are modified in response to the feedback.

The chart below refers to specific programming designed to better prepare candidates for health professions education programs that are described as enrichment programs. Each of the programs has a customer satisfaction and educational evaluation component. After analyzing the customer satisfaction and evaluation components, the determination was made to shift resources away from the “information-only” kinds of activities to the enrichment programs.

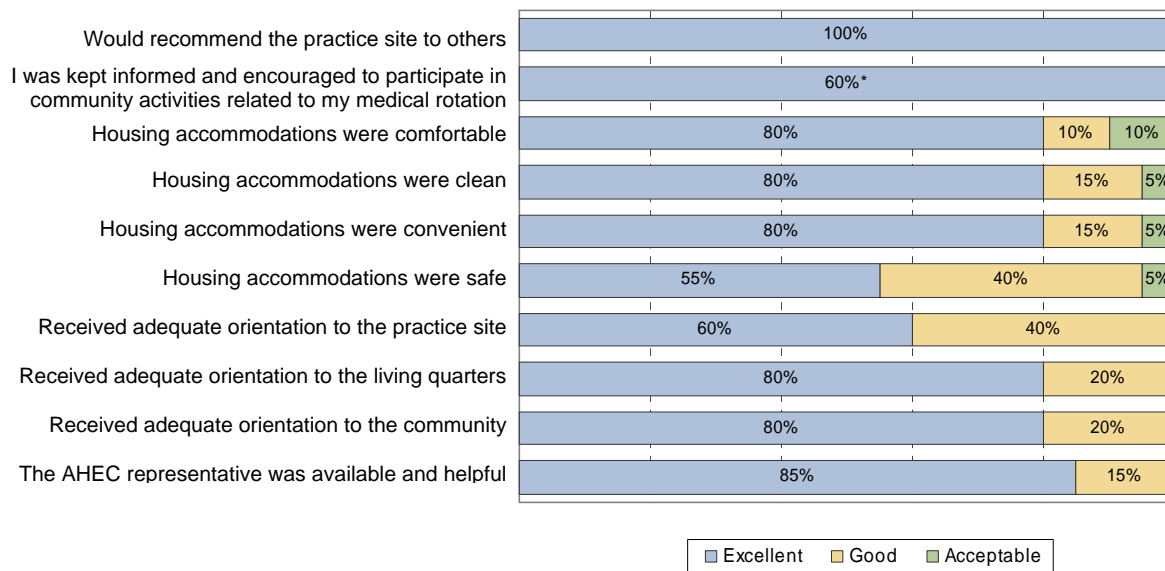
Health Careers Promotions: Students Participating in Enrichment Programs



Community-Based Education (CBE)

The objective of Community-Based Education is to establish, maintain, and advocate community-based training for health professions students with an emphasis on primary care and underserved populations. For FY05 the East Texas AHEC facilitated the placement of 923 health professions students in 16 disciplines from 21 campus partners, for a total of 142,545 training hours.

Students are surveyed for customer satisfaction at the end of their rotations. These surveys are generally developed and reviewed by individual centers. The following chart summarizes the AHEC analysis of customer satisfaction results from the FY 2005 surveys. The survey used a 5-point scale. "Not Applicable" responses are excluded.



*40% of the responses to this question were "Not Applicable."

Practice Entry and Support

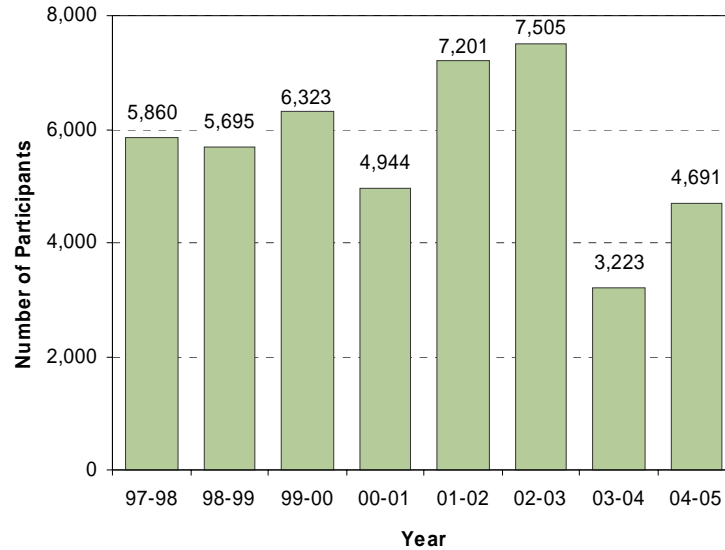
The objective of Practice Entry and Support is to establish and support programs that recruit and retain health professionals for underserved populations. For example, The Practice Management Technical Assistance program improves retention of primary care practices in rural East Texas by optimizing financial viability. Operations assessments are conducted on coding, billing, and collections; staffing ratios; HIPAA compliance; patient flow; and appointment scheduling. Post-assessment surveys conducted over the past four years indicate that customers were satisfied with the service and implemented recommendations that resulted in an average annual savings of over \$93,000 per clinic. Regional Recruiter services assist communities in recruiting and retaining health care providers. While formal customer service evaluations for this new service have not been conducted, initial feedback from clients has been favorable.

Continuing Education offerings are a large component of the Practice Entry and Support programming. Each offering is evaluated as to effectiveness and general customer satisfaction. Programs are adjusted and revised in response to the feedback at the local level.

Program-wide customer satisfaction is reflected in the participation (see chart below). Customer satisfaction surveys indicated satisfaction in the individual program offerings. Nurses have been

the largest group of participants. Reduction in rural hospital budgets and health workforce shortages adversely impacted participation in program offerings. As a result, the number of offerings was decreased and more critical audiences were targeted.

Practice Entry and Support: Continuing Education Participants

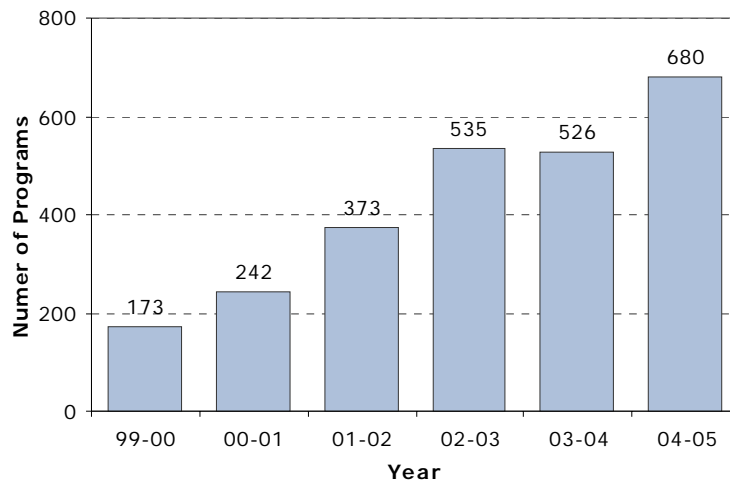


Health Literacy

The objective of Health Literacy is to foster healthy behavior development in individuals, groups, and communities.

These programs are evaluated and reviewed at the local community level. An increasing demand for health education programs is believed to be a reflection of customer demand and satisfaction with the services provided.

Health Literacy Programs



Community Health Systems Support

The objective of Community Health Systems Support is to facilitate community evaluation, discussion, and decision-making processes addressing access to primary health care.

There is not a formal mechanism for measuring customer satisfaction with these projects. The development of this program component is a response to community customers' requests for a recognized "neutral" party role to facilitate community processes to address community health system needs.

Office of Community Outreach (OCO)

A variety of evaluation tools is used to assess the efficacy of the Office of Community Outreach's (OCO) various community outreach programs. Examples of the range of performance measurements collected, analyzed, and used to evaluate and plan OCO programs include the following:

Traditional Pre- and Post-Tests

Traditional pre- and post-tests are used for science summer camps and K–8th grade professional development courses to measure the merits of the training provided. The following table indicates the percentage increase in knowledge gained from the course and the average evaluation score reflecting the respondent's opinion about the course providing value on a five-point scale from 5 = "Very Satisfied" to 1 = "Not Satisfied." These results are for Summer 2005.

Course	Results Pre- and Post-Test Measuring % Increase in Knowledge	Course Evaluation Using Five-Point Scale
Summer Science Camp I (7 th –8 th grade)	53%	4.8
Summer Science Camp II	47%	4.7

The following table reflects the overall score of all the students' satisfaction that the course provided value. This was based on a 1–10 scale with 10 reflecting the highest level of satisfaction.

Course	Results Pre- and Post-Test Measuring % Increase in Knowledge	Course Evaluation Using 10-Point Scale
K–8th Grade Teacher Professional Development Course	41%	9.3

Conference Evaluations

Conference evaluations include demographic measures as well as evaluation of the conference effects on attitudes and perceptions.

Conference	Perception of Conference Outcome	Change in Attitudes Toward Science and Math	Ethnicity of Girls Attending
Expanding Your Horizons (Target Audience: 8th–10 th grade girls), February 2005	97.4% indicated the conference taught them useful information about future careers	81% indicated their attitudes toward science and math had been positively changed	<ul style="list-style-type: none"> • 27% Caucasian • 31% African American • 24% Hispanic • 12% Asian • 6% Other

Satisfaction Surveys

This satisfaction survey is for County Contracts, and specifically the management/administration of the scheduling, eligibility screening, billing, and collections of patients covered under the UTMB County Contracts for Indigent Care program.

Course	Number of Members	Percent Responding to Survey	Percent Rating Service as Good (or Above Average) and Excellent
County Affairs Annual Customer Satisfaction Survey for FY 2005	57	41%	92%

Office of University Advancement

Isurus Survey

This survey was a referring physician perception study commissioned in late 2004 in preparation for the Community Physician Pilot project. The results of this research are qualitative and provide directional guidance about the market’s perspective on these issues. Therefore, this research is not “statistically” projectable and is intended for use on the basis of judgment.

Key Findings

- UTMB is generally seen as a good hospital with talented specialists and competent staff members.
- Proximity, established doctor relationships with specialists, and positive reputations of other Houston area hospitals emerge as UTMB’s key barriers to gaining more referrals.

Recommendations

- UTMB should devote effort to increasing awareness of their specialty areas. Many doctors cite lack of familiarity with UTMB’s specialties as one of the reasons why they do not refer to the hospital.
- UTMB can use events such as conferences, forums, and dinners to build relationships. Outreach efforts and relationship building are crucial to gaining more referrals.

- Given the barriers that exist to referring to UTMB (proximity, awareness, relationships, and competition), UTMB should work to create the most doctor-friendly experience possible.

How Consumers Think About AMCs

UTMB participated in a consumer perception study during Fall 2005 to help gauge awareness of and attitudes toward UTMB in the Houston/Galveston region.

The overarching purpose of this research was to identify how consumers meaningfully differentiate academic medical centers (AMCs) from community hospitals based on their perceptions and experiences, and determine how to best utilize the positive factors (and minimize the negative factors) to create the most meaningful differentiation for the AMCs in that market and build a strong brand.

Much of this survey focused on understanding how consumers view academic vs. community hospitals. Participants were given two general statements about each hospital type and then asked to respond to a series of questions about each.

- “Hospital X is typically located close to where you live. Private practice physicians who practice nearby admit patients to and provide patient care at Hospital X supported by Hospital X staff. Hospital X is not affiliated with a medical school and typically does not train new physicians or conduct medical studies.”
- “Hospital Y may or may not be located close to your home. Private practice physicians from a broad region typically refer their patients to primary care or specialist physicians at Hospital Y who admit patients and provide patient care. Hospital Y is affiliated with a medical school and many of its physicians are on the faculty. In addition to providing patient care, Hospital Y also trains physician residents and medical school students, and conducts medical studies.”

The Profiles and Attitudes Towards Healthcare (PATH) model is the only model available today that can identify the existence of “archetypes” among health care consumers. Identifying the archetypes through PATH profiling is useful in many types of healthcare business situations: image and advertising tracking; patient and member satisfaction measurement; product/service development; one-to-one marketing efforts; healthy community studies; and profiling insurer member bases.

At the group or population level, PATH profiling identifies the mix of health consumer “archetypes” within any population. Through this identification, the population is better understood in terms of health behaviors and priorities, its utilization of medical care, its prevalence of chronic disease, its financial risk in terms of future medical claims, the family dynamics of the primary insured that impact tiered pricing revenues, and insights that predict loyalty and retention.

Each archetype is associated with a greater or lesser prevalence of disease and high risk factors. Consumers with the Traditionalist, Ready User, and Naturalists archetypes (38% of the Texas population) report the highest rates of disease and co-morbidities and show the greatest demand for medical services and greater claims generation and therefore efforts to increase awareness of UTMB’s services should be directed toward this group.

Internet Queries

The Office of University Advancement (OUA), through its public affairs division, manages customer queries and service requests made via the Internet. A standard feature of every web page is a page footer; web page footers for all university sites are required to contain a contact email address. Staff in the public affairs office are charged with monitoring and responding to these queries, which number on average 400 per month or just under 5,000 messages (and corresponding responses) per year.

More than 80% of the inquiries made via the web come from customers outside the university. The balance comes from members of UTMB's internal community. Requests follow patterns and often can be addressed by a "frequently asked questions document" (one is offered online at <http://intranet.utmb.edu/faq/>).

OUA's service standard is to address each inquiry within one working day. Customer feedback has been extremely positive, as evidenced by a high number of "thank yous" and frequent surprise expressed at the speed and personalized nature of responses. (By dedicating a portion of staff time to this function, OUA has moved away from generalized "canned" responses.) In spite of the volume, customers seem pleased with the resolution and individual attention given to their specific requests.

UTMB Electronic Health Network (EHN)

In operating its clinical telemedicine, electronically mediated health, and related programs, the UTMB Electronic Health Network performs several evaluation processes for internal and external customers.

Online Telemedicine Instruction

EHN operates online courses that are used by both internal and external customers. Internal customers are UTMB providers who are required to take the course as part of becoming credentialed in telemedicine as a hospital privilege. External customers are persons interested in the field who take the course for a small fee to expand their telemedicine knowledge. Individuals taking the course complete an evaluation that is used for program improvement.

Total attendance numbers for a typical course:

Total # of customers registered for TH101 = 304

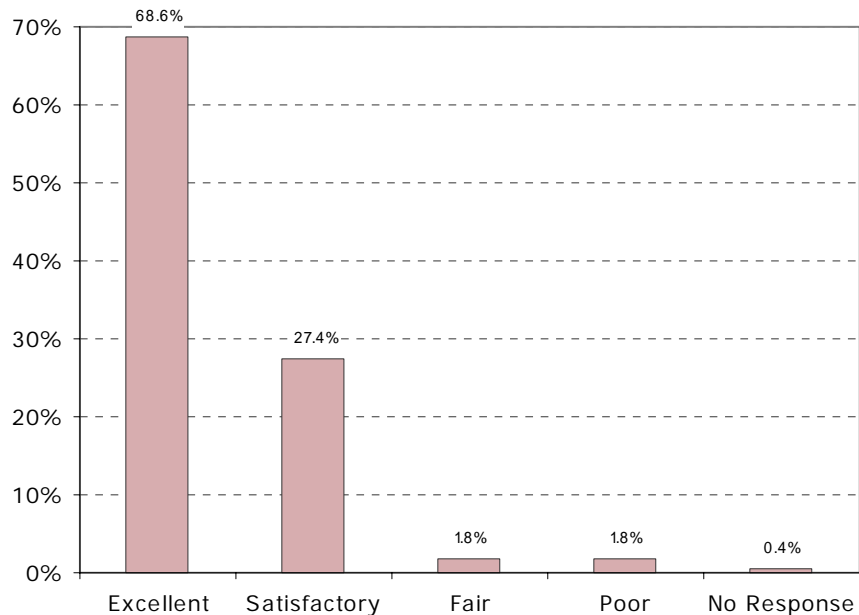
Total # of CME customers = 87, of which 55 completed course and received CME credit

Total # of CNE customers = 72, of which 48 completed course and received CNE credit

Total # non-CE customers = 145, of which 62 completed the course

Example of survey item analysis:

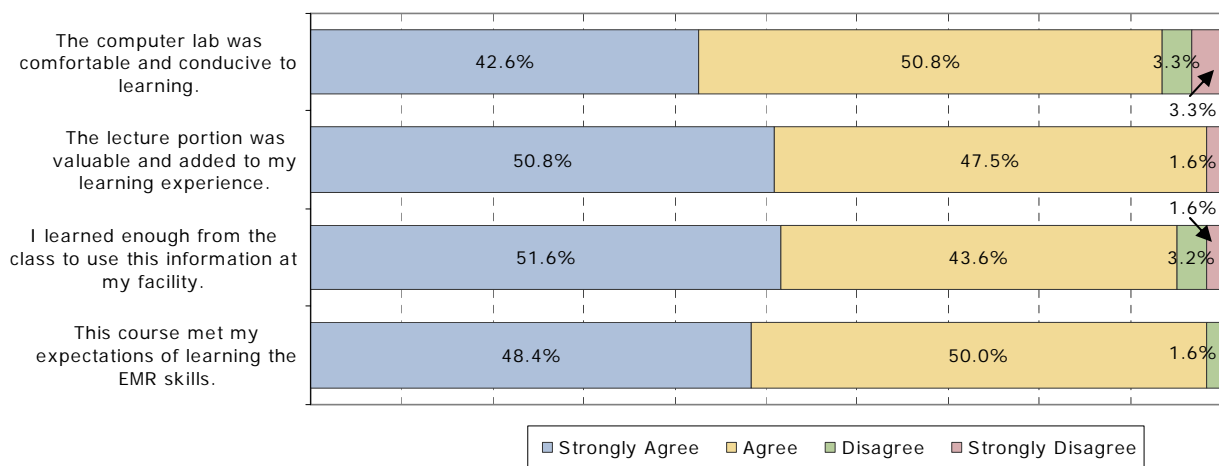
1. The objectives related to the overall purpose/goals of the activity: To introduce nurses to the basic principles of clinical practice in telemedicine/telehealth.



Clinical Technology School Programs

The EHN Clinical Technology School is a statewide program for educating experienced health care workers in the skills of the contemporary technology-equipped medical practice. Program assessments are performed for both in-person classes and online courses.

The following chart shows the results of 62 surveys returned January–December 2005. (Due to rounding errors, not all percentages add to 100.)



Electronic Medical Record (EMR) and Clinical Telemedicine Programs

An ongoing biannual survey is conducted of all EHN customers across the state to assess the quality of services. This is done through a contract with Press Ganey Associates of South Bend, Indiana, who conducts patient satisfaction and employee satisfaction surveys nationally. Press Ganey brings a wealth of experience in building and operating survey systems and provides

complete reporting as shown in the following table. The survey used a 5-point agreement scale to statements, with 5 being "Agree Completely" and 1 being "Disagree Completely," which was interpolated into satisfaction averages.

**UTMB ELECTRONIC HEALTH NETWORK
INFORMATION SERVICES REPORT for 12/01/2004-05/31/2005**

OVERALL ANALYSIS BY SECTION

	THIS PERIOD		PREVIOUS 3 MONTHS
	Mean	"n"	Mean
OVERALL INFORMATION SERVICES RATING	60.7	767	57.1
OVERALL EMR USE RATING	60.5	763	56.3
OVERALL DIGITAL MEDICAL SERVICES (DMS) RATING	62.7	392	58.2
OVERALL TECHNICAL SUPPORT FOR EMR RATING	61.0	749	58.0
OVERALL SUPPORT SERVICES FOR DMS RATING	58.1	372	57.8

QUESTION ANALYSIS

	THIS PERIOD		PREVIOUS 3 MONTHS
	Mean	"n"	Mean
OVERALL INFORMATION SERVICES RATING	60.7	767	57.1
OVERALL EMR USE RATING	60.5	763	56.3
Degree of comfort you have in using the EMR	74.0	760	68.3
Availability of the EMR when you need it	61.4	762	58.7
Ease with which you can understand EMR information	66.8	758	61.9
Level of trust in accuracy of EMR information	62.2	745	57.2
Ability to document patient records in a timely manner	55.4	726	51.7
Reliability of EMR equipment	51.1	730	51.8
Improvement in patient care since EMR has been in use	51.6	689	42.6
OVERALL DIGITAL MEDICAL SERVICES RATING	62.7	392	58.2
Ease of using DMS equipment	62.0	372	59.1
Technical capabilities of DMS equipment	66.3	369	63.8
Flexibility provided in terms of timing the clinic schedules	54.0	362	49.5
Ease of incorporating DMS visits in regular clinic schedules	56.6	365	49.9
Value of DMS to your unit	68.9	376	62.2
Reliability of DMS equipment	66.5	368	61.6
OVERALL TECHNICAL SUPPORT FOR EMR RATING	61.0	749	58.0
Adequacy of training provided on the EMR	51.8	741	45.7
Effectiveness of the Help Desk/Technical Support Specialists	62.9	706	61.6
Professionalism of the Support Representatives	69.4	684	68.7
Ability to solve problems	65.9	684	62.0
OVERALL SUPPORT SERVICES FOR DMS RATING	58.1	372	57.8
Adequacy of training provided by DMS Technical Support	51.8	366	50.3
Effectiveness of the Technical Support Specialist to call	60.3	337	60.1
Professionalism of the Support Representative (DMS)	65.4	336	66.0
Ability to solve problems (DMS)	62.2	337	62.4

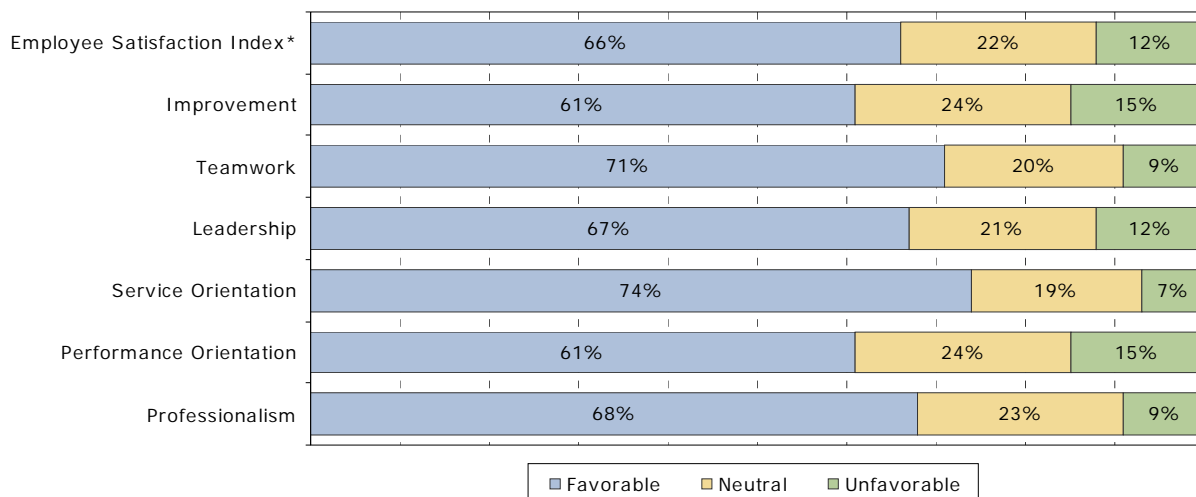
EMPLOYEES

Employees at UTMB fall in to several categories: faculty, administrative and professional, and classified. It is important that employees in each of these sectors are satisfied with their jobs—compensation, benefits, work environment--so that UTMB doesn't lose valuable employees and so that high-quality candidates can be drawn to UTMB.

You Count! Survey

Since the You Count! survey's inception in 2001, UTMB has successfully surveyed all benefit-eligible employees on an annual basis. Respondents are able to participate in the survey via paper or via the internet. During FY2005, a total of 12,638 employees were surveyed. Of those employees, 5,616 responded resulting in a 44% response rate. All benefit-eligible employees will continue to be randomly surveyed in subsequent fiscal years.

The survey dimensions are Improvement, Leadership, Performance Orientation, Professionalism, Service Orientation, and Teamwork. The following chart shows the FY2005 overall percentages along with the overall Employee Satisfaction Index.



*Overall average of all survey responses.

The goals of the survey are to

- Gather employees' opinions and suggestions regarding UTMB and the work environment
- Compare UTMB's attitudes against national benchmarks (Note: 36 items from the survey were comparable to WorkUSA®, Watson Wyatt's national benchmark norms. Hospital/Health Care Services industry norms were also used to provide benchmark information.)
- Identify organizational themes for the topic areas of Communication, Leadership, Trust, Commitment, and Perception of the Direction of UTMB

Primary Findings

- The Employee Satisfaction Index has increased 11 percentage points over the last five years.
- The employee participation rate has increased 9 percentage points over the last two years.

Top Organizational Strengths

- Quality of UTMB's services as an educational institution (86% favorable and 8 percentage points above FY2001 score).
- Quality of UTMB's services as a research institution (87% favorable and 8 percentage points above FY2001 score).
- UTMB's vacation, sick, and holiday leaves (82% favorable and 13 percentage points above FY2001 score).
- Satisfied with kind of work done in position (81% favorable and 7 percentage points above FY2001 score).
- Proud to work for UTMB (81% favorable and 11 percentage points above FY2001 score).

Top Opportunities for Improvement

- UTMB manages poor performers so that their performance improves (34% unfavorable; however, the score has improved three percentage points since the 2003 survey (37% unfavorable)).
- UTMB promotes the most qualified individuals (26% unfavorable; however, the favorable score is five percentage points above the national norm. The score is also a three-percentage-point improvement over the 2003 survey (29% unfavorable)).
- UTMB keeps my base salary competitive (31% unfavorable; however, the favorable score is seven percentage points above FY2001 score).
- UTMB recognizes good performance (23% unfavorable; however, the favorable score is 13 percentage points above FY2001 score).
- UTMB retains highly qualified individuals (19% unfavorable; however, the favorable score is eight percentage points above the national norm and 20 points higher than the 2001 survey score).

Conclusions

- UTMB's strengths combined with its commitment level create a work environment prepared for change and improvements.
- By analyzing survey feedback and implementing targeted action plans to improve employee satisfaction, UTMB has improved the Employee Satisfaction Index from 55% favorable in FY2001 to 66% favorable in FY2005.
- UTMB continues to develop area-specific action plans.

Possible Next Steps

- Continue to identify short-term and long-term plans for delivering the management leadership needs of employees.
- Continue to identify ways (e.g., process improvement) for increasing quality of delivery of services to external customers.

- Continue to examine recruiting and retention processes to identify means of increasing retention.
- Continue to develop area-specific plans.
- Implement new performance management process.

Analysis of Findings

UTMB entities are utilizing the results of the You Count! survey to develop and enhance programs and processes to improve employee satisfaction. The semi-annual surveys are being used to monitor our progress regarding these initiatives. For example, UTMB Business and Administration evaluated the results of the survey among its employees and is undertaking a course of action that includes training and development around those issues that indicated the highest levels of dissatisfaction, including Coaching for Improvement/Development, Communication, and Recognition. Executive Leadership continues to monitor Employee Satisfaction Index by area.

Complete institutional survey results from the You Count! survey may be obtained by request from the UTMB Human Resources Office.

UTMB Faculty Salary Study

752 full-time faculty who were employed with no breaks in service during the entire fiscal year of 2003 (9/1/2002–8/31/2003), who had at least a 50% faculty appointment, and who were appointed at 100% for the entire fiscal year were surveyed (52 from SON, 669 from SOM, and 31 from SAHS).

Criteria for Inclusion and Assumptions

- In the School of Medicine, when highest non-MD degree for a faculty record was blank, the highest non-MD degree was assumed to be a Bachelors.
- Faculty sociodemographic characteristics as reported within the UTMB HR system were assumed to be correct because of the opportunities provided to individual faculty members to scrutinize these data.
- Primary appointment was determined based in the primary appointment table within UTMB's HRMS system. If there was no primary appointment entry, then the highest percent appointment was used to allocate the faculty member to a particular school and department. If highest percent appointment was split equally across two job classifications (e.g., A&P and faculty), then the faculty position was used.

Variables

Variables for consideration were selected on the basis of compensable factors (factors that measure differences in skill, effort, or working conditions), the previous faculty salary study, and data available from official institutional data repositories (HR and Payroll databases).

Dependent Variables To Be Studied

Actual FY 2003 data

Regular pay

Total cash, calculated as the sum of the following:

Regular pay

Longevity (annual total)

Augmentation (additional pay not included in regular pay)
SIP (staff incentive plan)
SRA (additional compensation from practice plan funds)
NRM (nonrecurring merit)
Lump (annual total)

Statistically significant ($\leq .05$) differences (in either direction) in pay by group, with particular interest in females and underrepresented minorities (including APIs), observed in the data set were considered of interest.

Conclusion

In the schools of Nursing and Allied Health Sciences no evidence of statistically significant differences in regular pay nor in total cash were found for the studied ranks. In the School of Medicine, statistically significant differences in pay needing further investigation were found for 6 female faculty members and 1 Hispanic faculty member (one of the 6 females). SOM investigated and reported its findings to Dr. Stobo.

2005 UTMB Faculty Satisfaction Survey

In 2005 UTMB conducted a Faculty Satisfaction Survey to measure 2005 faculty satisfaction and compare data with the 2003 UT System survey and the prior UTMB satisfaction survey.

Faculty members employed at UTMB as of 9/1/2005 with 100% paid appointment, with at least 50% paid faculty appointment, were invited to participate in the survey. Data were collected from September 21–November 7, 2005, using an online survey. Out of 886 faculty members, 478 completed the survey, a response rate of 54%.

The survey consisted of 92 items on a five-point scale (favorable-unfavorable), 47 items on a yes/no scale, and 10 demographic items including gender, length of service, school, rank at hire, and tenure status. In addition, there were open-ended comment questions that were designed to obtain additional comments on career progress, career support, effort and compensation, work environment, and facilities; the most significant positive change that occurred at UTMB in the past year; and the most significant positive change that participants would like to see in the next year.

Key Findings

Almost half of respondents reported that they considered leaving UTMB in 2005, giving reasons such as non-competitive compensation, inability to meet career goals, and an unsupportive institutional atmosphere. Tenured faculty were more likely to say they considered leaving UTMB, and the results vary by school.

Women and underrepresented minority faculty are equally or more favorable than non-URM males in many areas, but females responded less favorably about diversity, recruiting minorities, harassment, APT process, and work support. Underrepresented minority faculty responded less favorably about diversity, harassment, fairness of APT decisions, compensation, and guidance from mentors.

Communication Plan/Next Steps for Deans

The results of the survey were distributed first to the President and Deans and then by stages to core committees and Faculty Senate, faculty, and the UTMB community.

The deans then

- Reviewed school results
- Selected one or two unique opportunities critical to the success of the school
- Shared the school results with faculty
- Developed a school survey action plan
- Shared the school action plan with faculty
- Determined as a group (AEC) any institution-wide opportunities and plan of action
- Established ongoing communication with faculty of institution-wide and school-specific actions

Office of University Advancement

Members of the university's internal community, the faculty and staff (and often students themselves) who interact with the public, provide services to them, and act as ambassadors for the university are important constituents.

A key component of engaging this important internal constituency is communication. UTMB recently asked itself "Are we doing an effective job conveying important information to them, in a fashion that is efficient, convenient, and accessible?"

University Advancement prepared a survey for UTMB's internal audience that was conducted in late summer and fall of 2005. There were more than 1,000 respondents to the survey, which was conducted online and in two printed forms (in the newsletter and distributed randomly via campus mail in hard copy).

Overview of Survey Results

The survey told OUA that UTMB has a generally well-regarded internal communication program in place, with most respondents giving UTMB high marks for communicating institutionally and keeping them well informed and in a timely fashion. Scores were not as high regarding news about department-level activities and events. The survey also showed that members of the community generally prefer electronic forms of communication (yet still routinely read UTMB's printed newsletter), with targeted communication to computer desktops, UTMB's Daily Announcements system, and UTMB's internal web portal being the most popular ways to get information.

Actions Implemented/Anticipated

There were some surprises in the survey, including a lower than expected use of the online version of the internal newsletter and a very low interest in departmental home pages. For the former, an overhaul of the site is planned built around reader feedback, and new enhanced marketing is planned for the new site (planned for FY 2006). Given the tool's popularity, OUA and its IT partners plan to continue to enhance the Daily Announcements system, and to this end have recently launched a related tool, an institutional events calendar built on some of the same core principles.

Given the campus receptiveness to targeted electronic communication, OUA staff members will also be seeking better and more efficient ways to target subsets of the university community using email, listservs, RSS, subscription services, and other mechanisms to push messages to customers.

SUMMARY

Recognizing that customers have a choice, UTMB must strive to ensure that all customer groups—both external and internal—are satisfied with the services provided.

UTMB has a number of processes in place that demonstrate a strong commitment to customer service:

- regularly monitoring patient and student satisfaction with a broad range of service-related factors
- utilizing customer feedback to plan and continually improve the way service is delivered
- providing customer groups with effective and efficient procedures specifically designed to accept and respond promptly to their comments and complaints

In the event that patients wish to express concerns or lodge a complaint, the Patient Services department provides a centralized and effective mechanism for the initiation, review, and when possible, resolution of patient complaints. Patients are notified of the services of this department through television announcements, patient brochures, or by referrals from staff members. This mechanism was established to encourage patients and their families to express concerns or complaints and identify opportunities to enhance patient care and service.

Similarly, students are provided with a mechanism to express concerns and complaints through the Ombudsman. The Ombudsman is a neutral third party designated to listen to and discuss student concerns, explain university policy, provide information, investigate university-related grievances brought forth by students, and help expedite solutions.

Not only does UTMB embrace customer service, but it is accountable to external groups that require evidence of that commitment as well. Both the Southern Association of Colleges & Schools (SACS) and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) regularly assess and evaluate the efficiency and effectiveness with regard to customer assessment, complaint handling, access, and service delivery as part of their accreditation process.

With these tools for measuring student, patient, and employee satisfaction, and the avenues for complaint where needs are not met, we are fulfilling our Compact with Texans as well as providing a comprehensive customer assessment approach that is broadly inclusive of all UTMB's customer groups.