Commitment to Excellence



Strategic Plan of the Illinois College of Optometry

October 2001

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Commitment to Excellence

The mission, goals, guiding principles, priority initiatives, and strategic objectives of the Illinois College of Optometry and all its parts.

October, 2001

Limitation of Effect

The Illinois College of Optometry is governed by its Articles of Incorporation and Bylaws. This strategic plan, "Commitment to Excellence," is not intended to be an amendment to the College's Articles of Incorporation or its Bylaws. To the extent in this plan is inconsistent with the Articles of Incorporation or Bylaws, the Articles of Incorporation or Bylaws will prevail.

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A Letter from the Chairman

October 2001

Dear Friends of the Illinois College of Optometry,

The Board of Trustees, under the able leadership of Dr. James Butler, Chairman of the Strategic Planning Committee, in cooperation with the college's administration has developed the latest version of the institution's strategic plan, the *Commitment to Excellence*.

This plan serves as a guide for all members of the ICO community in our continued pursuit of excellence.

The *Commitment to Excellence* is a "living document" for planning and the measurement of progress. This process must be ongoing if the institution is to remain vital and responsive to external influences.

The *Commitment to Excellence* reaffirms our mission, values and priorities and establishes specific objectives and action items. The plan also describes desired performance outcomes and establishes a systematic measurement system to monitor progress in meeting strategic and tactical performance targets.

Please join the Board of Trustees in support of the institution's strategic plan, the *Commitment to Excellence*.

Albert H. Rodriguez, Jr., O.D. Board of Trustees Chairman

THE MISSION OF THE ILLINOIS COLLEGE OF OPTOMETRY

Excellence in health care education, patient care, scholarly activity and development of leaders for the profession and society.

SPECIFICALLY....

The Illinois College of Optometry, is dedicated to:

Excellence in education, with an emphasis in eye and vision care along a continuum of professional competency.

Recruitment and education of a highly qualified and diverse student body.

Partnering with the health care, educational and rehabilitative communities to provide comprehensive health care services.

Contributing to the body of knowledge through scholarly activity.

Serve as a center of influence within the local community and the profession.

Act with accountability, integrity and respect.

THE MISSION OF THE ILLINOIS EYE INSTITUTE

Excellence in eye care and education.

THE MISSION OF THE INSTITUTE FOR ADVANCED COMPETENCY

Offering lifelong health care education.

THE MISSION OF THE RESIDENCY PROGRAMS

Offering advanced competency in eye care through education, scholarship and patient care.

THE STRATEGY STATEMENT OF THE ILLINOIS COLLEGE OF OPTOMETRY

ICO's strategy is to provide excellent education, patient care, scholarly activity, public service and a high level of service to students, patient, employees and alumni through the integration of performance management, strategic planning and outcome measurement. This strategy is employed to achieve a customer-oriented, results-driven, organized system of education and health care delivery focused on continuous quality improvement.

ABOUT STRATEGIC PLANNING

This document serves as a pattern or guide for the Illinois College of Optometry in our pursuit of excellence. It serves to illustrate our commitment to our students, patients, employees and alumni. It confirms our commitment to our institutional goals. As we enter the twenty-first century, this document sets our mission, values and priorities and identifies the measures by which to evaluate our success. Each section of the plan is organized by the time phases of current time to two or five years, two to five years and five to ten years.

This strategic plan is a living document. It guides our annual budgeting and the evaluation of performance. We will revise and update this plan as circumstances, internal and external, change.

PREFACE

Over the past four years, members of the Illinois College of Optometry community have witnessed the College's progress in meeting broad institutional goals and objectives initially articulated in "Prescription for Excellence" and in meeting specific performance targets described later in "Journey to Excellence."

The latest version of the strategic plan "Commitment to Excellence" continues the process of transformation of the institution outlined in the plans with further emphasis on measurement systems and quantified strategic and annual performance targets.

In preparing "Commitment to Excellence," the college affirmed its support of the National Institute of Health's <u>Healthy People 2010</u> goal to improve the visual health of the nation through prevention, early detection, treatment, and rehabilitation by insuring that institutional goals and objectives support the national initiative.

Charles F. Mullen, O.D. President

PRIORITY INITIATIVES

The initiatives and measures defined here reflect the critical issues facing the institution. A critical issue is defined as an issue that requires intervention in order for the institution to thrive in the future. The measures included here are so reflective of our performance that constant monitoring is required. In order to achieve success when approaching these complex issues, a level of consensus and teamwork is required of every ICO stakeholder. A priority initiative should not be interpreted as the only goal of a department or as replacing the mission of the institution.

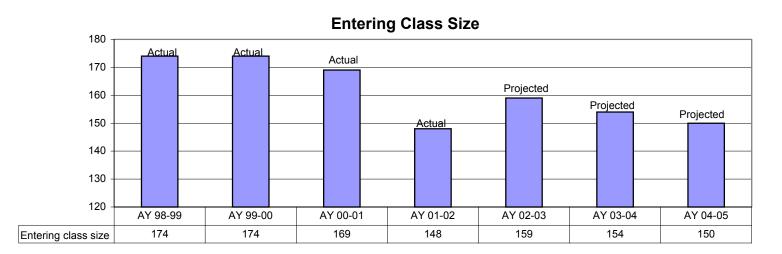
PHASE I: Position the college to enhance the recruitment and retention of the most highly qualified students.

(Current time to five years)

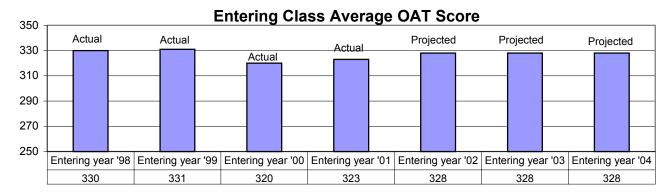
Optometry, like all health professions, has historically experienced cycles in the applicant pool, typically related to the economy. A significant predictor of the optometry, and ICO's, applicant pool is the number of students registering to take the Optometry Admissions Test (OAT). This number has declined 31.5% since 1996. ICO is highly dependent on tuition for operating funds and therefore our ability to select a highly capable entering class from the available applicant pool every year is critical to our success.

The total enrollment of optometry programs nationwide has increased by 15.7% in the past ten years, thus decreasing the margin between number of available candidates (qualified) and the number of seats available. As the number of qualified candidates decreases, programs have a choice – continue to "fill" seats and compromise the caliber of entering students or respond to the decline by maximizing efforts to recruit qualified candidates and, when necessary, adjust the entering class size to reflect and maintain admissions standards. ICO has carefully and strategically chosen to follow a quality (vs. quantity) philosophy in the selection of our entering classes. Therefore, in response to the nationally declining applicant pool, we have chosen to implement a plan of a voluntary reduction of the entering class size.

1. Achieve and maintain an optimum entering class size.

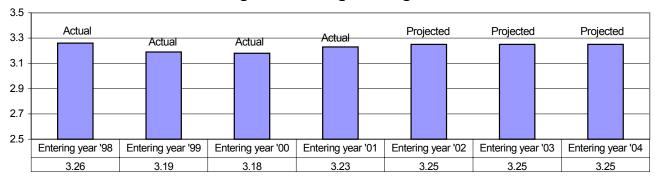


2. Maintain the quality of the student body by maintaining an entering class average OAT at 328 or better.

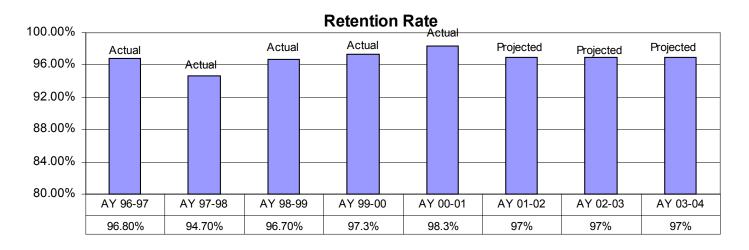


3. Maintain the quality of the student body by maintaining an entering class average undergraduate grade point average of 3.25 or better.

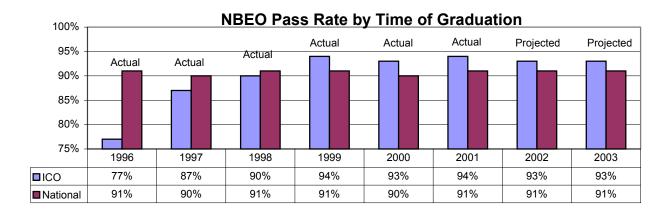
Entering Class Average Undergraduate GPA



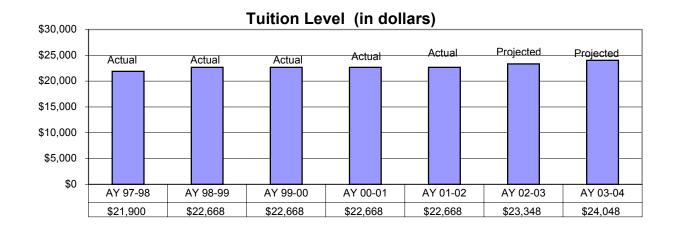
4. Maintain a student retention rate of at least 97%.



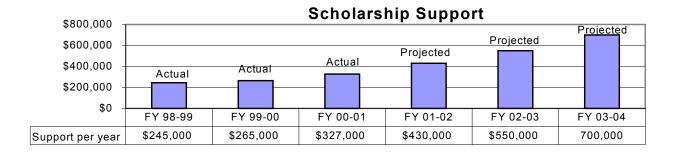
5. Continue to exceed the national average for the percentage of students that have passed all three parts of the National Board of Examiners in Optometry (NBEO) examinations by graduation.



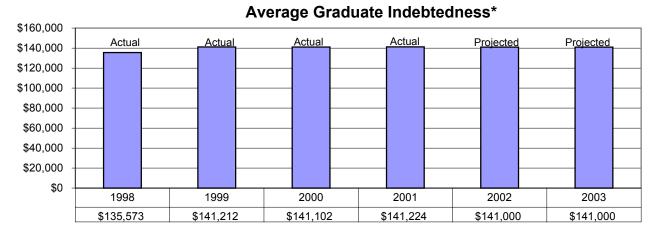
6. Maintain a tuition level that is competitive with other private schools of optometry.



7. Use tuition discounting as necessary to attract high caliber students.



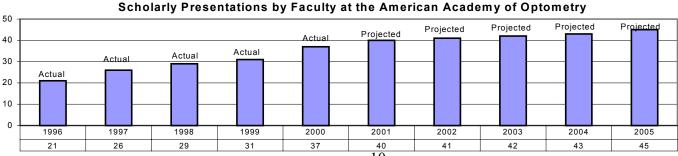
8. Maintain the average graduate indebtedness at the 1999 level (approximately \$141,000).



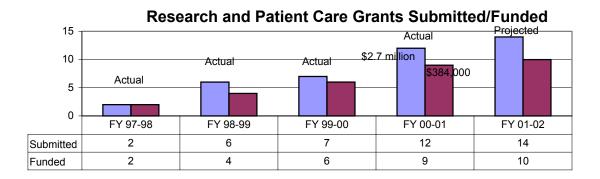
* Average debt at graduation for the students that borrowed. This amount includes undergraduate debt. Undergraduate debt is less than 5% of the total borrowed.

PHASE II: More effectively use resources to improve teaching and scholarly activity. (Two to five years)

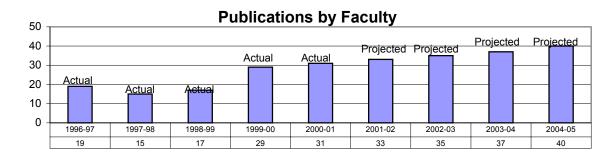
- 1. Develop and implement a patient care education and clinical practice model in order to maintain/enhance the quality of clinical education and to enhance the competitiveness of the patient care program in the marketplace. Goals for the restructuring of the campus-based clinical education program and formation of a faculty group practice plan are to
 - Create a Faculty Group Practice Plan (FGPP) that compliments the clinical education program.
 - Establish appropriate governance and management structures for the FGPP.
 - Enhance the clinical education of students to prepare them for clinical practice in a faster paced, performance driven patient care setting.
 - Maintain or enhance the existing clinical education outcomes.
 - Reduce the cost of the existing campus-based clinical education program.
 - Seek Graduate Medical Education (GME) funding to support the clinical education program.
- 2. Increase the number of scholarly presentations by faculty.



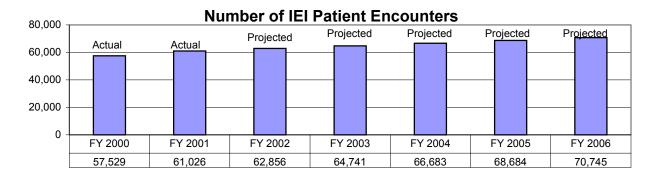
3. Increase the number of research and patient care grants submitted and funded.



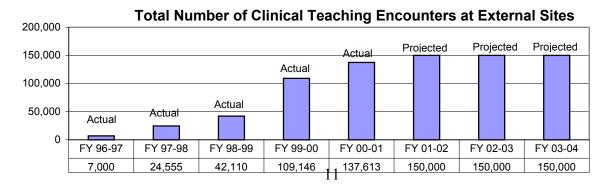
4. Increase the number of publications in refereed journals or books.



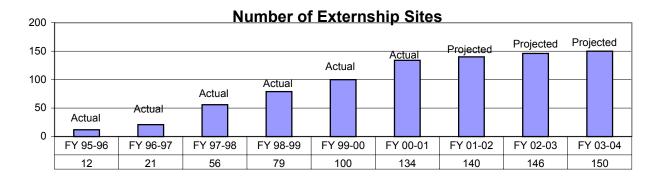
5. Increase the number of patient encounters in the Illinois Eye Institute (IEI).



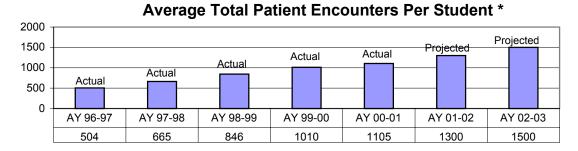
6. Maintain the number of clinical teaching encounters at the external sites of the Community-based Education Program.



7. Maintain the number of external sites.



8. Increase the average number of clinical teaching encounters for each student.



* This includes the Illinois Eye Institute and the Community-based Education program (satellite and external sites) encounters.

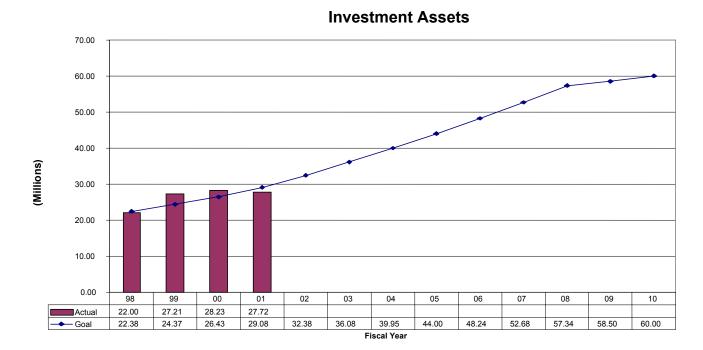
This does not include the Eyewear Center or screenings encounters.

- 9. Support optometry student and resident exposure to private practice optometry.
 - Develop a student summer clerkship program.
 - Develop a rotation in the private practice setting for the ICO campus-based residency program.
 - Develop a Primary Eye Care Residency in Private Practice program.
 - Continue to expand the externship program into private practice settings.

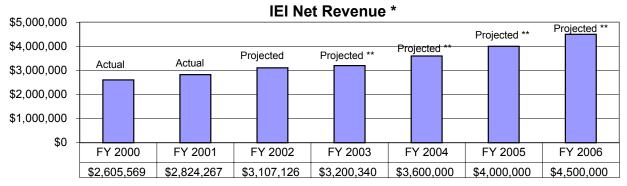
PHASE III: Ensure the long term financial stability of the institution while maintaining a competitive position for student recruitment, an effective and productive academic culture and an environment conducive to quality health care delivery.

(Five to Ten years)

1. Build the "endowment" (investment assets) of the institution to \$60 million by the end of fiscal year 2009-2010 in order to retire bond debt and establish a sustainable endowment.



2. Increase the patient care revenues of the Illinois Eye Institute in order to strengthen the educational mission.



- * "Net" revenue is gross revenue minus disallowances. Projections are based on 3% growth per year.
- ** Predicated on the implementation of the Faculty Group Practice Plan.
- 3. Decrease the institution's dependency on tuition.

THE MAJOR GOALS AND GUIDING PRINCIPLES OF THE ILLINOIS COLLEGE OF OPTOMETRY

Provide Excellence in Education and Scholarly Activity

- The structure of optometric education will be compatible with current modes of optometric practice while consistent with national trends within the profession.
- Students and faculty engaged in the educational process will be supported, and held accountable with performance expectations and outcome measures.
- Individuals engaged in scholarly activities will be supported and held accountable with performance expectations and outcome measures.
- Application of new information is as important as its discovery.
- The educational mission of the institution will be responsive to the optometric manpower needs of the region, nation and the world.
- Academic and clinical affiliation agreements will be fair and equitable to all and personnel from each institution will have equal recognition and influence in affiliated institutions.
- There will be a clear research strategy that is supported by the institution. We must strive to achieve the full potential of the special research opportunities available at ICO.
- Optometric training and scholarly activities are beneficial to patients when integrated with patient care and properly managed.

Provide Excellence in Health Care

- While ICO is a teaching facility, patient care is equal with education as its mission. Future optometrists must receive clinical experiences of high quality in the context of an efficient, high quality delivery system.
- Students are enthusiastic about participation in "real life" practice settings.
- The IEI will continue to enhance its approach to providing patient care.
- The quality of care at IEI must establish the benchmark for quality eye care in the local community.
- While ICO's mission and its core patient population are very different from those of
 most private managed health care companies, IEI will improve its effectiveness and
 efficiency by selectively adopting or adapting many managed care principles and
 practices.
- The genesis of the current revolution in American health care is a quest for value.
- Eye care systems will be comprehensive integrating visual, perceptual, medical, surgical, and rehabilitative elements.
- Eye care delivery systems will be structured so that therapeutic interventions are provided when they will have the greatest effectiveness.
- Information systems and strategic alliances are the organizational structure that will hold eye care systems together in the future.
- The IEI will establish itself as a major health care provider in the health care market.

Provide Excellence in Service as Defined by Our Students, Patients, Alumni and Employees

- ICO will adopt a consumer-orientated response to students, patients, alumni and employees.
- Effective communication is the cornerstone of the ICO consumer relationship and is an important factor determining consumer satisfaction.
- Students, patients, faculty and alumni define excellence according to the degree to which services received match their expectations.
- The Illinois College of Optometry's culture and routine practices involves the faculty and students in the decision-making process.
- Student applicants seek excellence and value in optometric education.
- ICO will be responsive to students' individual, educational and personal needs.
- ICO will enable faculty and clinicians to focus on education and patient care by reduction of excessive paperwork and administrative functions.
- ICO will strive to provide a highly motivated faculty and staff that is focused on the institution's mission.
- Empowered faculty and staff are more likely to pursue excellence and strive for productivity.
- The ICO workplace is committed to the principles of equal opportunity and free of discrimination and harassment.
- Productive employees have the "tools" and equipment necessary to provide quality educational and patient care services.
- We will establish a system of incentives and rewards that encourages and empowers staff at all levels to provide quality service that satisfies the needs of our consumers
- We provide a secure institutional environment.

Be a Center of Influence within the Profession and the Community

- Alliances and partnerships with a variety of educational and health care institutions are necessary for ICO to remain viable in the Chicago health-care market.
- It will be increasingly important to demonstrate to the public and the profession that ICO meets or exceeds all national, regional, and local standards for education, health care, and safety.
- It is important for ICO to foster the development of community and professional leaders.
- ICO will assume a greater role in post-graduate education including recognition of advanced competency.
- As a member of both the community and profession, ICO's faculty, staff and administrators will actively participate in community and professional activities.
- ICO will continue to support optometry student and resident exposure to primary care optometry in the private sector.

Be an Institution that is Characterized by Exceptional Accountability

- ICO provides a model of ethical behavior and integrity at the individual and organizational level.
- Board of Trustee members, ICO personnel and faculty will avoid potential conflicts of interest with other institutions, organizations, contractors, and vendors.
- Every person and every process at ICO will add value to the system and to the quality of
 education and patient care. This added value will be measurable in clear and
 understandable terms.
- Accountability will be a fundamental tenet underlying the ICO/constituent relationship.
- The climate at ICO will be one of quality, efficiency and cost savings.
- The ICO community will continue to strive to improve both quality and efficiency in providing education and health care.
- The culture of ICO will be characterized by ongoing quality improvement that is predicated on providing excellent education, patient care and research.

Guiding Principles of the Board of Trustees

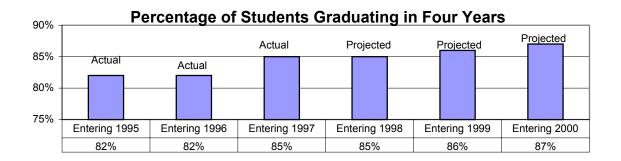
- The Board of Trustees will conduct its affairs in a manner that exemplifies the behavior it expects of members of the administration, faculty and student body.
- Individual Trustees will avoid even the perception of any personal or special interests.
- All board members will feel a responsibility to serve the institution as a whole and not any particular constituency or segment of the organization.
- The Board of Trustees will avoid micromanaging matters of administration.
- The Board of Trustees cannot delegate its fiduciary responsibility, collective or individual, for the academic integrity and financial health of the institution.
- The Board of Trustees is responsible for establishing the strategic direction for the institution through its insistence on and participation in comprehensive planning.
- From time to time, the Board of Trustees will examine its membership, structure and performance.
- ICO's governance should include input from principal internal stakeholders such as the full time faculty, nonacademic staff and students.
- Faculty, nonacademic staff and student involvement in the work of the board most appropriately occurs by membership on standing or ad-hoc committees of the board.
- Only the Board of Trustees has the sole responsibility to appoint and assess the performance of the president.
- The Board of Trustees sets institutional policy.
- Alumni organizations will be under the authority of the president.

DEPARTMENTAL STRATEGIC PLANS

Academic Affairs

Academic Program

Improve didactic instructional effectiveness. Increase the percentage of students graduating in four years.



Phase I: Current time to two years

- Continue providing quarterly faculty workshops and seminars on teaching strategies and methodologies
- Continue department chair classroom visits to provide instructor feedback on presentation effectiveness and course objective achievement for 50 % of didactic courses.
- Implement outcome models analysis for programmatic evaluation
- Diversify the range of pedagogical delivery methods
- Implement a peer evaluation and development process of didactic instructors
- Examine and identify laboratory exercises as "demonstration" exercises or "skills acquisition" exercises and reduce redundancy with lecture materials or material presented in other formats
- Encourage faculty with extensive experience in a course to develop self-study units to replace lectures hours in their areas of expertise

Phase II: Two to Five Years

- Develop a student ratings process to evaluate all courses and instructors each quarter that achieves at least a 50% student response rate
- Continue Department Chair visits to didactic courses each quarter reaching at least 75% of didactic courses each quarter
- Develop a teaching portfolio by faculty members
- Develop a faculty award that recognizes the teaching scholarship of one faculty member each year
- Develop criteria for a "Master Teacher" which can then be used for merit, as well as promotion and tenure, considerations
- Develop the teaching skills of these core faculty members by supporting the attendance of at least three faculty members each year to appropriate teaching related conferences

- Develop a day-long teaching conference to be held every year and attracting a nationally known speaker on teaching
- Develop a plan to recognize faculty members who engage in the scholarship of teaching

Phase III: Five to Ten years

• Continue to monitor and enhance the didactic instructional process

Increase the use of educational technology in the classroom and laboratories

Phase I: Current time to Two Years

- Identify technological methods to enhance teaching
- Develop an evaluative system to determine the impact on expanded technology and actual enhanced teaching
- Implement expanded technology into teaching processes
- Develop core faculty in the area of instructional technology (course work innovations, elective courses and CE)
- Continue to develop the faculty technology center.

Phase II: Two to Five Years

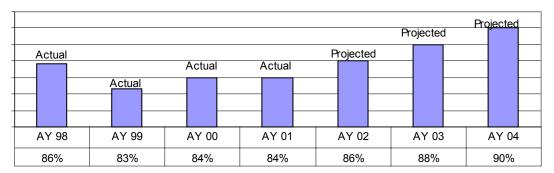
- Expand the use of informational technology to allow for off-campus educational instruction.
- Enhance the use of educational technology in the didactic program to expand self-directed leaning opportunities
- Identify new technological enhancements to enhance teaching
- Expand the faculty technology center, as needed
- Explore the use of personal computers in the classroom/laboratory

Phase III: Five to Ten Years

• Develop and implement a strategy to insure that the educational program maintains and progresses in the use of technology in teaching

Increase the effectiveness of clinical teaching. Increase the acceptance rate of graduates into residency programs for those who applied.

Acceptance Rate of Graduates into Residency Programs*



Phase I: Current time to two years

- Develop a peer evaluation to assess clinical preceptor models
- Identify effective preceptor models for clinical teaching
- Develop an outcomes model to assess preceptor's teaching
- Provide faculty seminars of clinical teaching models
- Implement a peer review committee to develop a program for faculty peer review in the clinical setting
- Develop a performance evaluation program incorporating self-evaluation and observer components
- Implement a peer review process for clinical faculty
- Develop a peer assessment model program, to be used initially on a voluntary basis
- Conduct a faculty conference on Peer Assessment
- Continue to assess the effect of a 5:1 clinical teaching model.
- Educate faculty on student assessment tools in the clinical setting

Phase II: Two to Five Years

- Finalize a peer assessment program to be used by 25% of the faculty each quarter
- Expand the use of peer assessment to impact on merit increases.

Enhance the residency programs

Phase I: Current time to two years

- Evaluate the number of residents and adjust as needed
- Strive to obtain the best residency candidates
- Develop programs and skills to promote residents to enter academic optometry and/or vision research
- Stimulate interest in and promote students to enter residency programs
- Develop and perform outcome measures of IEI-based residency programs
- Meet with Department of Veterans Affairs Network 12 local affiliates to discuss and resolve issues affecting relationship
- Review yearly the curriculum of IEI-based residency programs and implement any recommended changes
- Complete accreditation process for the two off-campus residency programs
- Develop a model to enhance residency programs in a cost control model
- Enhance the on campus residency programs by including a private practice rotation
- Explore the development of a practice management fellowship
- Explore alternate funding sources for residency programs

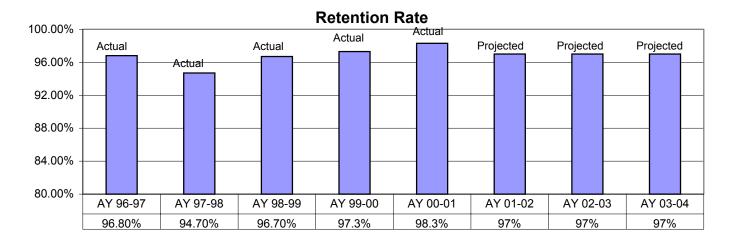
Phase II: Two Years to Five Years

- Obtain an affiliation with two additional Network 12 sites
- Develop a Low Vision Rehabilitation residency program

Continue to meet the standards set for academic institutions from the Accreditation Council on Optometric Education and the North Central Association for Colleges and Schools Commission on Institutions of Higher Education.

- Develop yearly reports for Accreditation Council on Optometric Education and North Central Association to maintain accreditation
- Complete the self-study process to prepare for the pending accreditation by the Accreditation Council on Optometric Education in 2002
- Review accreditation guidelines for all programs yearly and establish goals in strategic planning process
- Address recommendations of accrediting bodies such as the Accreditation Council on Optometric Education after accreditation visits

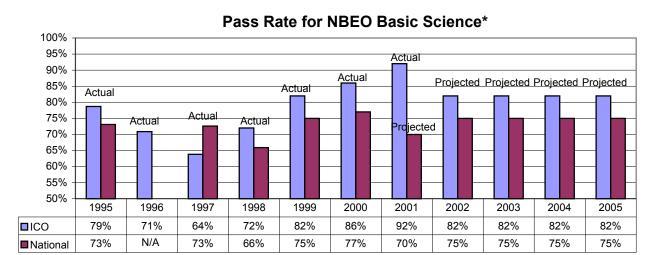
Maintain a student retention rate of at least 97%.

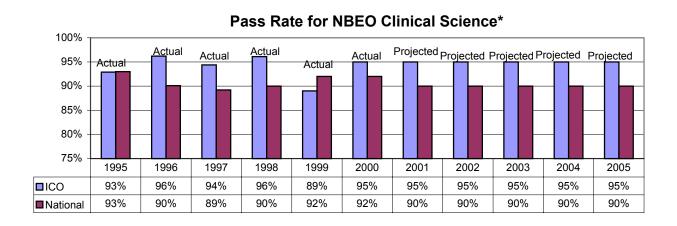


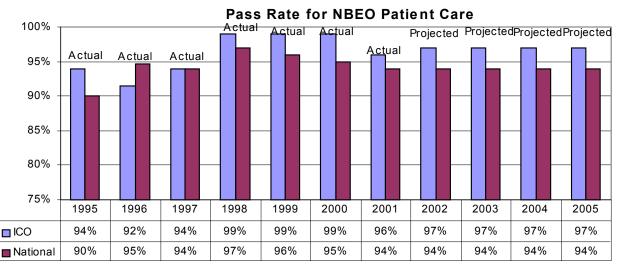
Phase I: Current time to Two years

- Review other academic programs use of specific programming for "at risk" students
- Develop models with the pros and cons for academic program to include specific programming for "at risk" students
- Implement programs (counseling, tutoring) for "at risk" students

Enhance student performance on the National Board of Examiners in Optometry examinations. Maintain the basic science pass rate for first time takers at least 82%. Maintain a pass rate of at least 95% for first time takers of the clinical science section. Maintain a pass rate of at least 97% for first time takers of the patient care section.







Phase I: Current time to two years

- Monitor NBEO results by specific topic content and compare to the curriculum
- Meet with student focus groups to discuss areas of the NBEO examinations content areas
- Develop the academic calendar in consideration of the National Board of Examiners in Optometry (NBEO) examination
- Monitor NBEO results for first time takers by area

Phase II: Two to Five Years

- Continue to monitor curriculum with national board content outline
- Reassess academic calendar with proposed changes to national board exam schedules
- Continue to monitor performance on the national board exam and modify curriculum if necessary
- Assess and develop academic strategy regarding national board of examiners proposed changes in exam content and format

Enhance the methods of assessment of student clinical and didactic performance.

Phase I: Current time to two years

- Reevaluate the clinical grading system
- Consult with faculty concerning their professional judgements about the efficacy of the currently used evaluative methods
- Explore student self assessment methodology for the evaluation of clinical performance.

Phase II: Two to Five Years

- Diversify the range of academic evaluative mechanisms applied to students beyond traditional quizzes and finals
- Examine the alternative evaluation schemes for the purpose of generating wider application and substitution for traditional examinations

Maintain concise academic and faculty policies

Phase I: Current time to two years

- Explore the feasibility of the consolidation of academic administration (registrar/student scheduling, academic support center, and academic administration assistants) to one location and cross train appropriate staff
- Develop a comprehensive formative teaching evaluation process that includes peer evaluation
- Enhance the faculty activity planning (FAP) process
- Yearly revise the merit criteria to be rank and experienced based
- Evaluate faculty salaries yearly to maintain consistency
- Edit and publish a new edition of the faculty handbook
- Develop and publish guidelines for post tenure review
- Define and implement faculty benefits of the professorial tract
- Develop the procedures for peer assessment; didactic and clinic teaching

- Continue to have faculty participate in policy making through Faculty Council meetings
- Continue with weekly academic administrative meetings
- Continue with monthly basic science and clinical education department meeting
- Reassess the Full Time Equivalent (FTE) formula which is applied to all major categories of faculty activity including classroom teaching, laboratory instruction, and clinical supervision
- Develop and implement faculty evaluations for all academic administrators, including the Dean
- Develop policies with faculty with the implementation of the Faculty Group Practice Plan
- Explore teaching ration effect on instructor performance

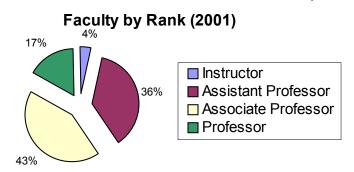
Phase II: Two to Five Years

- Implement post tenure review process for all faculty with contract tenure
- Implement the peer review process for faculty
- Review and revise clinical policies for faculty
- Implement any changes to the faculty FTE Model
- Implement all policy recommendations as developed for the implementation of the Faculty Group Practice Plan

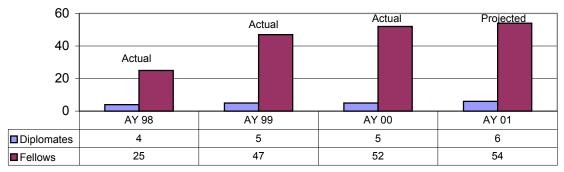
Phase III: Five to Ten Years

- Continue to monitor faculty welfare, retention and recruitment
- Monitor the impact on the academic culture the implementation of the faculty group practice plan

Enhance academic culture and professional development. Monitor the faculty profile by rank in order to assure balance in the recruitment of new faculty.



American Academy of Optometry Fellows/Diplomates



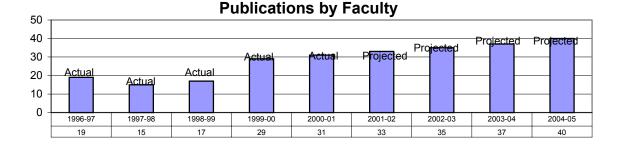
Phase I: Current time to two years

- Increase usage of faculty technology center
- Provide two seminars per year on clinical and didactic teaching topic
- Provide two joint rounds programs per year with the University of Chicago
- Enhance the Friday Faculty conference series
- Fund off campus seminars in the areas of assessment and teaching
- Increase travel funds commensurate with faculty participation in meetings
- Increase faculty participation in the AAO Diplomat programs
- Ensure consistent applications of these faculty development and travel policies
- Determine manpower needs for clinical and didactic program as class size is reduced
- Evaluate faculty numbers by rank to assure balance in the recruitment of new faculty
- Determine appropriate faculty numbers with specific attention directed to skills needed to address the changing curriculum
- Develop a template for yearly faculty scheduling that will incorporate 75% of the hours scheduled
- Adjust faculty office space to better serve the clinical and didactic needs of the college
- Adjust faculty scheduling to meet the needs of the Faculty Group Practice Plan
- Develop a policy by which available resources (time allocated and monies) would support faculty development through graduate school programs
- Implement an ongoing faculty professional leave program with outcome measures
- Enhance the institutions interaction in the optometric, health care, rehabilitation and education communities
- Promote faculty participation in optometric leadership organizations (AOA, ASCO, NBEO, AAO)

Phase II: Two to Five years

- Increase faculty memberships in organizations beneficial to the institution
- Determine appropriate number of individual participants
- Determine the applicable cost for the activity for manpower coverage, support staff services
- Establish a mentorship program by which "master" teachers will be encouraged to serve as mentors to other faculty
- Develop a faculty mentorship model that is independent of rank and leadership role

Increase the number of publications in refereed journals or book chapters.

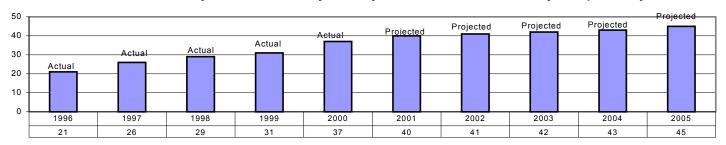


Phase I: Current time to Two Years

• Prepare a "publications manual" which will include the identification of the scholarly journals which are most frequently used by ICO faculty and other optometric faculty and practitioners

Increase the number of scholarly presentations by faculty

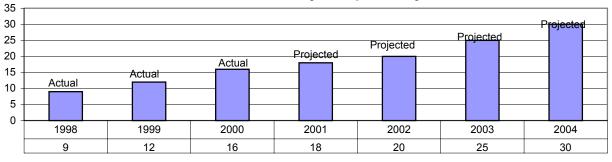
Scholarly Presentations by Faculty at the American Academy of Optometry



- Maintain faculty travel policy to encourage presentations of research and scholarly work at professional meetings
- Continue to support the faculty through development/mentoring

Increase the number of students participating in research, scholarly presentations and publications

Students Participating in Presentations at the American Academy of Optometry



Phase I: Current to Two Years

- Reevaluate current courses and placement in the didactic program to facilitate research activity among students
- Continue to fund students to present at professional meetings

Phase II: Two to Five Years

- Continue funding for student research activity
- Expand the research elective program
- Investigate developing "externships" that have a research component to them

- Explore and develop if feasible summer research programs
- Support ICO students to participate in research summer programs

Community Based Education

Enhance the community based education program by further developing the assessment of the quality of the student experience at each site and refining the program based upon this information.

Phase I: Current time to two years

- Fully implement the faculty adjunct appointment process for externship sites
- Review credentials of optometric staff at affiliated sites and externship sites and provide appropriate faculty appointment
- Expand the externship program to increase the off-campus sites to meet the needs for patient care exposure
- Evaluate the current private practice model for externships
- Expand the private practice externship sites as needed to fulfill the patient care experience needs.
- Complete site visits of at least 80% of the externship programs
- Monitor the cost effectiveness of all satellite patient care programs

Phase II: Two to Five years

- Develop outcome measures for the externship sites
- Provide manpower support for local affiliates, when possible, on an as needed basis
- Complete site visits of at least 95% of all externship programs
- Explore further expansion of the community-based education program into rehabilitation centers and pediatric special education sites.

Curriculum

Establish a continuous process of curriculum review and development.

Phase I: Current Time to Two Years

- Develop a curriculum model consistent with Graduate Medical Education (GME) funding requirements
- Evaluate and determine the appropriate number of credit hours as the curriculum is reviewed.
- Decrease core faculty teaching academic courses
- Maintain a standing Curriculum Committee to serve as an advisory group to the Academic Administration
- Develop working groups, advisory to the Curriculum Committee, to review 20% of the clinical education curriculum and course materials and 10% of the BHS curriculum and course materials each year
- Continue meeting with student advisory groups to assess to curriculum
- Develop criteria for course syllabi and have all syllabi reviewed by Department Chairs prior to the start of each academic quarter

Phase II Two to Five Years

- Develop an academic calendar one year in advance
- Develop a four-year cycle of examination review by the Committee for the Review of Examinations for all courses
- Develop 2 elective courses each academic year for the next 5 years to restructure, or supplement, the curriculum
- Develop student directed learning opportunities to help reduce traditional lecture and laboratory contact hours by 10% in the first and second years
- Have the faculty technology committee with the department chairs develop appropriate models for teaching
- Develop a technology plan that will facilitate student self-directed learning, make use of nontraditional ways of transmitting information to students, and help reduce traditional classroom contact hours
- Implement the self-study units

Institute for Advanced Competency

Assess the financial performance of the Institute for Advanced Competency (IAC) and take appropriate action to make the IAC operations as efficient as possible.

Phase I: Current time to Two Years

- Develop clinical skills laboratory courses based on feedback from the IOA
- Negotiate a long term contract with Cole Vision to provide CE to their doctors on a national basis
- Determine the feasibility of a certificate course in refractive surgery in conjunction with The Laser Center
- Negotiate a long term contract to grade tests for transcript quality credit for Eyecare 2002 and beyond
- Evaluate the proper balance between number of CE programs and profitability
- Incorporate oral therapeutic agents into the CE program in 2002
- Determine the role of injectables in the CE program
- Increase the corporate sponsorship of CE programs
- Determine the real cost of providing CE based on the FTE requirements and associated costs
- Complete the archiving process of past CE programs
- Computerize the operations of the IAC to minimize the FTE requirements of the IAC
- Develop a survey that would assess the quality and relevancy of all presentations given by the IAC
- Have IAC Faculty work in conjunction with ICO's Faculty Development Committee to improve lecture skills

Phase II: Two to Five Years

- Determine the role of advanced competency in the IAC
- Provide CE on the internet
- Develop a more national presence in providing CE
- Assess the role of CD's and Video Tapes with the IAC
- Incorporate on-site clinical programs at IEI in various specialty areas such as Low Vision, Contact Lenses, Glaucoma, and Retina

• Utilize the affiliation relationship with the University of Chicago Department of Ophthalmology to assist in providing CE as optometry expands its clinical privileges

Phase III – Five to Ten Years

• Develop a program that would integrate clinical education to practitioners and students on a year around basis

Learning Resource Center / Library (LRC)

Phase I: Current time to 2 years

Enhance access to and usage of vision science information by students, faculty, alumni, staff and administration.

- Learn the capabilities of the new Sirsi iBistro system
- Develop a training program on use of the new library system
- Provide access to ICO vision science collection and unique vision periodical search engine (VisionCite [VAL]) by alumni, the community and the nation.
- Develop a web presence for the LRC
- Provide easier access to electronic journals
- Provide access to healthweb eye resources
- Market VisionCite to the Alumni and other interested external individuals and organizations
- Survey the students on value of service
- Investigate Ariel for Interlibrary loan

Phase II: Two to Five years

Become a national resource center for vision science information.

- Evaluate the collection for relevance and currency
- Update lighting and lighting controls in the Lecture Center
- Improve display technology in the Lecture Center (Data projectors, visual presenters)
- Implement electronic reserves for non-copyrighted material

Phase III: Five to Ten years

Continue to take advantage of technological advances to further education, patient care and the access to information.

- Develop an action plan for telemedicine in the Lecture Center
- Utilize data ports in LRC to expand student access to the College network.

Media Production

Phase I: Current time to Two Years

Continue to provide a high level of service to the college community in a timely manner while controlling costs

- Maintain current vendor list for all out-sourced collateral material and evaluate new vendors and bids
- Provide assistance to faculty to improve teaching materials
- Maintain tracking system to reflect new methods of delivery and reflect total time to complete all projects
- Continue to assist in the development of *ICO Matters*, catalog layout, etc.

Adapt services of Media Production to fully utilize available technology to enhance teaching, patient care, and scholarly activity

- Assist in the organization, staffing, supervision, and operation of the Faculty Technology Center
- Upgrade computer design workstations
- Begin and continue seminars and classes to learn new software/hardware techniques
- Investigate the feasibility of migrating to filmless photography and purchase equipment as necessary

Phase II: Two to Five Years

Continue to provide a high level of service to the college community in a timely manner while controlling costs

- Maintain current vendor list for all out-sourced collateral material and evaluate new vendors and bids
- Provide assistance to faculty to improve teaching materials
- Maintain tracking system to reflect new methods of delivery and reflect total time to complete all projects
- Produce graphic standards manual
- Continue to assist in the development of *ICO Matters*, catalog layout, etc

Restructure the Media Production physical facilities to enhance delivery of current and future technologies

• Reconfigure old stat camera room to better utilize space

Adapt services of Media Production to fully utilize available technology to enhance teaching, patient care, and scholarly activity

- Continue to upgrade equipment as technology requires
- Continue seminars and classes to learn new software/hardware techniques
- Develop multi-media teaching tools with faculty
- Develop series of "How to" programs for faculty using new technology

Phase III: Five to Ten Years

Continue to provide a high level of service to the college community in a timely manner while controlling costs

- Maintain current vendor list for all out-sourced collateral material and evaluate new vendors and bids
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- Develop multi-media teaching tools with faculty
- Develop series of "How to" programs for faculty using new technology
- Investigate expansion of services to include new potential revenue streams (photo processing, CD ROMs, etc)
- Create patient information displays for IEI waiting room

Office of the Registrar

Phase I: Current Time to 2 Years

Improve the Office of the Registrar's services by insuring the efficient entry of student into their classes, the proper documentation of their progress and the accurate reporting of their achievements.

- Implement procedures which will allow faculty the ability to enter grades electronically.
- Automate the Continuing Education Program processes (registration, grades, transcripts and academic records).
- Automate the Residency Program processes (registration, grades, transcripts and academic records).
- Continue work to improve CARS (Administrative Computer System) functionality.
- Computer upgrade to Microsoft Office Suite 2000.

Improve the operation of the Registrar's office by satisfying the needs of our students in a professional, cooperative and timely manner.

- Improve customer service to students, alumni and external agencies by fulfilling requests for transcripts and enrollment verifications within 24 hours of receipt of requests.
- Obtain the services of the National Student Clearinghouse's Degree Verification Service to provide timely degree confirmations to state boards, prospective employers and external agencies.
- Continue to provide staff training in customer service, office procedures and institutional policies.
- Relocate Office of the Registrar to a secure area that will provide a confidential atmosphere for verbal communications with students.

- Update and maintain the Office of the Registrar web pages.
- Publicize all clinical and didactic schedules and schedule changes via the Intranet.
- Implement an e-mail notification system in order to disseminate information such as "last minute" schedule changes, call down notices, etc. in a timely manner.
- Create and implement the use of an electronic "sign-out" form to process clinic absences.

Phase II: Two to Five Years

Ensure the security and integrity of all academic records.

- Develop short and long term recovery plans in case of loss of access to the CARS System.
- Develop a system to assess student availability.
- Develop a formal Disaster Recovery Plan (re-creation of academic records) in case of fire, flood, theft, etc.
- Develop a formal Academic Records Management plan which includes the storage, retention and disposal of academic records.
- Document Imaging System implement a document management system to index, track and image academic records.
- Continue to provide staff training in customer service, office procedures and institutional policies.

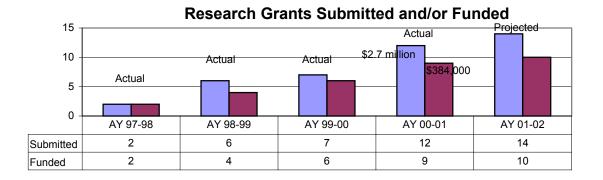
Phase III: Five to Ten Years

Strive to improve the efficiency and effectiveness of the Office of the Registrar.

- Continue involvement in professional associations such as National Association of CARS
 Users (NACU) and American Association of Collegiate Registrars and Admissions Officers
 (AACRAO).
- Continue training to keep abreast of new technology.
- Continue to provide staff training in customer service, office procedures and institutional policies.

Research

Develop a research strategy for basic science, clinical and instructional methodology research. Increase the number of grants submitted and funded.



Phase I: Current Time to Two Years

- Establish a research over-site committee to resolve conflicts regarding clinical research in the IEI
- Develop a policy for the utilization of outside consultants such as biostatisticians, grant development consultants and epidemiologists to augment larger research projects
- Implement a training program for the use of the SPSS Advanced Statistics
- Continue to support basic science research
- Explore alternate funding sources for research

Phase II: Two to Five Years

- Review current criteria for promotion relating to research and scholarly activities with assistance of the Faculty Promotions and Research Allocation committees
- Develop a master list of consultants and resources
- Establish a research education component to the faculty development program
- Conduct a symposium for faculty by clinical faculty who have successfully participated in funded clinical research on "How to Accomplish Clinical Research in a Clinical Setting"
- Present a faculty development program on clinical trials
- Develop and implement a formal training program in research methodology for clinical faculty
- Provide a program for faculty on development of the research proposals by the Research Allocation Committee and Institutional Review Board
- Develop core faculty (clinical and basic science) who are dedicated to research development
- Develop additional programs for collaborative research with outside institutions
- Develop a model for a research center of contact lenses
- Analyze current patient data base to determine feasibility of IEI's participation in multi center clinical trials
- Develop a policy (resources, fees) regarding research activities in the IEI
- Adjust faculty schedules to be more conducive for research and scholarly activity development
- Develop a model for research in Vision Rehabilitation
- Continue to support faculty participation in AOA summer research programs
- Present a program on survey research methods
- Establish a demographic profile of our clinical populations, faculty strengths, affiliations and education components
- Provide a program on clinical epidemiology for clinical faculty
- Develop a formula for the assignment of time released to faculty for the purpose of conducting independent research taking into consideration the level of development, their seniority, and the efficacy of previously allotted time
- Develop a mechanism to purchase released time by obtaining external funding
- Actively recruit for the OD/PhD program

Phase III: Five to Ten Years

- Develop a model for a pediatric research center for studies of developing vision-perceptionmotor systems of infants and young children to conduct epidemiological studies
- Develop appropriate faculty base in order to accomplish goal of research center
- Develop a research center for clinical education models and delivery of care models
- Develop a research center for primary care
- Develop a research model for human factors (VDT)
- Develop a research center for developmental disabilities service

Board of Trustees

Phase I: Current time to two years

Diversify and increase the number of Board of Trustees members.

• With a full complement of 15 trustees, evaluate the need for expansion of the number of trustees.

Contribute to the effort to build a sustainable "endowment" (investment assets) through development.

- Report Board of Trustee giving at each Board meeting with a goal of 100% participation.
- Assist in identifying affluent individuals.
- Train the trustees to make an "ask" for gifts.
- Send solicitation letters to ICO classmates.
- Provide individual counseling for trustees on contribution options.

Enhance the effectiveness of the Board of Trustees.

- Continue yearly evaluation of the president.
- Provide education and training session for BOT members to keep abreast of policy and regulations pertaining to the governance of institutions of higher education.
- Provide yearly seminars on the roles and responsibilities of BOT members.

Phase II: Two to Five Years

Continue to diversify and increase the number of Board of Trustee members.

- Strive to maintain the proportion of trustees who are under-represented minorities at 25%.
- Seek to increase the proportion of trustees who are female in order to be representative of the institution's constituencies.
- Ensure the diversity of the professional backgrounds of the Board of Trustees which may include

Governing board experience,

Health care administration,

Academic administration,

Finance,

Optometry,

Civic leadership,

Fund raising,

Clergy,

Rural representative,

Gubernatorial appointee, and

A non-academic ICO staff member.

Contribute to the effort to build a sustainable endowment through development.

Cultivate donors.

Enhance the effectiveness of the Board of Trustees.

- Revise and improve the new trustee orientation program.
- Continue in-depth self-assessments of board performance that coincides with comprehensive evaluation of the president every three years.

Phase III: Five to ten years

Ensure the diversity of the ethnic, gender and professional background of the trustees reflects the changing needs of the institution.

Become an integral part of the ICO culture of giving and donor recognition.

Continually provide training in order to improve board effectiveness and to keep abreast of the changing demands of external parties.

Community Advisory Board

Phase I: Current time to 2 years

Assist in securing funding to support the involvement of ICO and IEI with the local community (Vision of Hope and vision screening program at Douglas Community Academy).

Facilitate and strengthen mentoring opportunities for faculty, staff and students of the College with students of all ages residing in the community.

Organize activities that involve the local community, e.g. the Christmas Giving Tree project (Douglas Community Academy), the clothing drive (St. James Church)

Maintain membership at 12 to 14 members.

Phase II: Two to Five Years

Assist in the development of educational opportunities for prospective students through internships, training programs and other means such as a summer enrichment program for area high school students interested in a health profession career.

Continue collaboration effort toward common goals such as neighborhood improvement, appropriate use of real estate, etc.

Phase III: Five to Ten Years

Explore the development of joint initiatives between the IEI Professional Advisory Board (PAB) and the Community Advisory Board.

Compliance Program / Risk Assessment

Phase I: Current time to 2 years

Develop Compliance Program Policies

- Develop policies for compliance program records management
- Develop confidentiality agreements
- Develop policies for confidential reporting line management
- Develop a policy approval/clarification system
- Incorporate vendor and employee screening against Health and Human Services List of Excluded Individuals and Entities into contracting and screening procedures.
- Institute criminal background checks for employees as appropriate.
- Develop written protocol and procedures for quality improvement efforts.

Begin the development of the Compliance Program and introducing to employees

- Collect and review ICO policies.
- Identify and prioritize specific areas of risk.
- Develop risk-specific addendum to the Compliance Program Overview for training and communication purposes
- Implement an ongoing training program, which includes overview of compliance program and risk specific issues.
- Ensure the appropriate auditing activities are occurring.

Communication of compliance initiatives

- Develop a mechanism for vendor notification of specific ICO compliance efforts
- Solidify the internal incident reporting system
- Include targeted compliance items in the appropriate job descriptions.
- Begin regular reports to the Board of Trustees on compliance efforts.

Phase II: Two to Five Years

Continue to refine the compliance program by revising institutional policies in response to changes in ICO operations, laws, statutes, audit findings, patient, student and employee feedback, strategic planning, etc.

Ensure the training cycle continues.

Develop mechanisms to detect and inform employees of changes in federal, state and local regulations and laws.

Continually improve the implementation of the compliance program activities.

Phase III: Five to Ten Years

Establish a compliance program that supports every employee's continual efforts to comply with laws, statutes, etc and to prevent business errors.

Weave the monitoring of the emergence of new compliance trends or changes in the legal environment into every employee's daily work.

Ensure the training cycle continues.

Continue to refine business practices based upon audit findings, patient, employee and student feedback, changes in business practices, etc.

Facilities

Phase I: Current Time to Two Years

Continue to provide a safe and comfortable facility that is conducive to student life, the academic program and patient by maintaining and improving the facility

- Install fire louvers in lecture center
- Replace security camera feed
- Provide backup power for laser
- Renovate the Brady Hall cafeteria
- Replace Brady Hall lift station
- Renovate the Donor Wall
- Expand the application of the automated maintenance system (Medisys)
- Periodically assess space allocation and modify appropriate, in order to increase the effectiveness and efficiency of functions

Ensure campus safety measures and emergency preparedness plans are clearly documented, organized and communicated.

- Maintain OSHA compliant operating manual
- Revise the emergency preparedness plans
- Revise the fire safety plan
- Compile safety and security policies and procedures into a Safety and Security Management plan per Joint Commission standards.
- Formalize the Hazardous Materials management program to monitor hazardous waste disposal

Enhance building operations while controlling energy costs.

• Document the Utility systems management plan per JCAHO standards

Phase II: Two to Five Years

Continue planned facility maintenance programs

- Upgrade 1st and 2nd floor restrooms
- Renovate 3rd floor laboratories including ventilation systems (HVAC)
- Update lecture center lighting
- Replace domestic water pump
- Replace parking lot sweeper

Ensure ongoing campus safety and security

- Revise the operating policies according to changes OSHA workplace safety regulations
- Analyze the fire safety plan and revise to improve policies and procedures
- Improve safety management procedures
- Improve security management procedures
- Improve Hazardous material procedures

Continue to strive for efficiencies in building operations

• Improve utility management procedures

Phase III: Five to Ten Years

Continue planned facility maintenance

- Replace campus wall coverings
- Replace IEI exam room carpet
- Consider renovating parking structure to provide more spaces as appropriate
- Renovate the Indiana entrance
- Update ventilation (HVAC) equipment systems
- Upgrade electrical service
- Replace windows in Brady Hall
- Replace suspended ceilings
- Replace ground water pumps
- Replace Brady Hall office heat/cool fan coils
- Upgrade Brady Hall electrical system
- Produce the Residential Complex condition report
- Acquire a man lift
- Replace the utility tractor

Establish a facility maintenance program that is based on continual assessment and improvement of the safety and functionality of the campus

 Continually assess plans and processes for safety, emergency preparedness, utility management, etc and revise plans accordingly.

Faculty Group Practice Plan

Phase 1: Current time to 2 years

Develop Governance Structure

- Review powers matrix with Board of Trustees
- Review powers matrix with faculty
- Review articles of incorporation with Board of Trustees
- Review Bylaws with Board of Trustees
- Review Bylaws with Faculty
- Modify faculty employment model
- Develop service agreements between the FGPP and ICO

- Modify policies in the FGPP in the area of credentialing
- Review ICO Board of Trustees By-laws for congruency with the FGPP
- Begin implementation of governance structure

Develop the operational /management structure

- Determine operational /management structure for the FGPP
- Review the operational/management structure with Board of Trustees
- Determine the administration for the FGPP
- Determine and implement procedures for personnel hiring, scheduling, evaluation and compensation
- Develop marketing strategy for FGPP
- Establish financial procedures for expenditure accounting and contract management (e.g. leases, service contracts, etc.)
- Establish employee benefit packages
- Implement appropriate information systems management tools
- Establish policies for payer group/managed care contracting
- Establish fee schedules for professional services and materials
- Establish appropriate patient care practice guidelines and other quality improvement tactics
- Establish and monitor professional staff development and performance :
 - Continuing education
 - Credentialing and privileging
 - Utilization review
 - Peer review of quality of care
- Establish appropriate procedures for housekeeping and facilities maintenance

Develop financial structure

- Develop management service organization (I.S., patient financial reporting)
- Develop pro forma and assumptions
- Determine indirect costs allocation
- Determine the FGPP cost share of services provided by ICO
- Determine "Dean's Tax"
- Determine the direct costs of education
- Develop the financial systems to be used by the FGPP
- Determine the faculty compensation policy
- Present faculty compensation policy to Board of Trustees and approval
- Define financial reporting processes

Develop educational framework

- Complete entry to practice attributes
- Finalize the teaching models to be used in the FGPP
- Determine the timeline for restructuring of student /patient care experiences
- Determine the scheduling and course impact on the didactic program
- Develop timeline for didactic program changes in courses and schedule.
- Develop a faculty development program focusing on teaching strategies in various patient care models
- Determine the educational service agreement with the FGPP
- Determine the outcome measures to be used to assess the educational outcomes

- Initiate didactic scheduling and course changes
- Revise the assessment tools used to evaluate students, faculty, and the overall program
- Initiate the educational program for third and fourth year students within the FGPP
- Determine the advanced competency attributes for the residency programs
- Determine the clinical care models to be used by the residents
- Implement the clinical care models for the residents
- Determine the outcome measures to be used to assess the residency programs

Phase II: Two to Five Years

Assess and refine the governance structure

Review and revise service agreements Review and revise the employment agreements as needed

Review and revise operational and management structure

- Assess the operational policies and procedures in use with FGPP
- Revise policies as needed
- Review operational management structure
- Revise operational management as needed
- Enhance operating efficiencies of FGPP based on established performance outcomes

Refine the financial components of the FGPP

- Develop cost analysis of patient education (cost per patient encounter)
- Continue refining pro forma and assumptions
- Assess faculty compensation yearly

Assess and refine the educational program

- Complete outcome measures on all aspects of the educational program
- Implement and fully integrate first and second year students within the FGPP
- Modify the educational program based upon the outcome measures
- Review implementation and outcomes with accrediting groups.
- Develop yearly patient care/faculty/student schedules.

Phase III: Five to Ten Years

Maintain a fully integrated educational program within a cost effective FGPP

Assess and refine the governance, operational financial and educational components of the FGPP

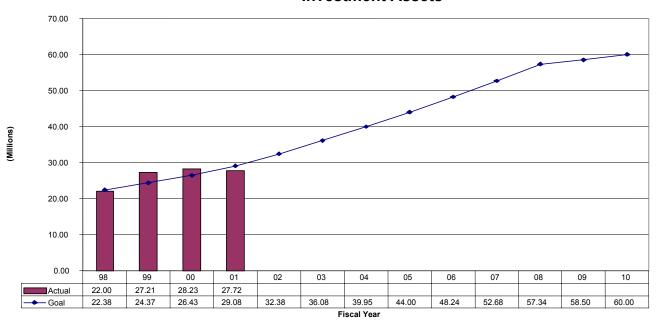
Financial Operations

Phase I: Current time to 2 years

Support the institution's priority initiatives that have a financial impact.

Grow investment asset pool in order to retire the bond debt of \$45 million and establish a sustainable invest earnings foundation.

Investment Assets



- Maximize investment return on operating, short-term, cash balances by utilizing appropriate investment tools and strategies
- Participate with Board of Trustees in selecting interest rate swap counter party
- Continue annual review of investment charter
- Build the investment assets to \$39.95 million by the end of fiscal year 2004.

Minimize financial risk by insuring the institution complies with all pertinent laws, standards and external party requirements

- Support Board of Trustees Finance/Audit committee in Request For Proposal (RFP) for the selection of a potential new auditor
- In cooperation with legal counsel close the open real estate issues

Review internal financial controls and assure adequacy of those processes.

Phase II: Two to Five years

Support the institution's priority initiatives that have a financial impact.

- Support the Faculty Group Practice with timely financial data and budgetary guidance
- Provide budget guidance during a season of declining class size
- Develop IEI and ICO accounts receivable management strategies
- Automate the annual salary review process

Continue to grow the investment assets

• Increase investment assets to \$48 million by the end of fiscal year 2006.

Compliance/Risk management

- Automate Business Office record management processes
- Inventory the on site vault and offsite warehouse documents

Phase III: Five to Ten years

Support the institution's priority initiatives that have a financial impact.

• Ensure the financial stability of the institution in order to support the strategic initiatives

Grow investment assets

- Adjust investment and debt management strategies at least yearly in order to take advantage of market fluctuations.
- Build the investment assets to \$60 million dollars by the end of fiscal year 2010 in order to retire the bond debt.

Compliance/Risk management

• Update Business Office financial reporting system.

Human Resources

Phase I: Current time to Two Years

Establishing and maintaining employee commitment is vital to organizational effectiveness. Relationships between family-friendly programs and valued work-related outcomes have received increasing attention in organizational studies. Human resource policies aimed at assisting employees with balancing work and family responsibilities are crucial in retaining a diverse and effective workforce.

- Expand opportunities for flexible scheduling, part-time opportunities and compressed work schedule
- Expand health and wellness programs
- Introduce attendance incentives
- Establish paid time off benefit reimbursement program
- Establish Employee Assistance Program
- Increase Employee Referral Award
- Establish casual business attire policy
- Clarify child adoption benefit

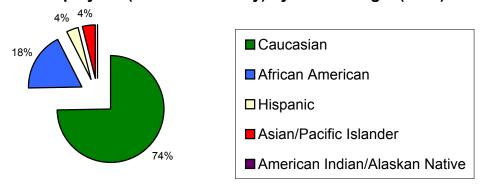
Provide proactive opportunities for self development for employees to raise level of motivation and work place satisfaction

- Facilitate mentoring opportunities
- Facilitate the ophthalmic technician certification for IEI support staff
- Provide training on regulatory standards/laws affecting job functions

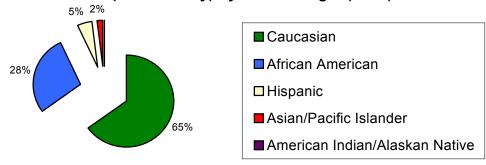
- Encourage community outreach initiatives
- More aggressively promote tuition reimbursement program

Provide a workplace committed to the principles of equal opportunity and free of discrimination and harassment

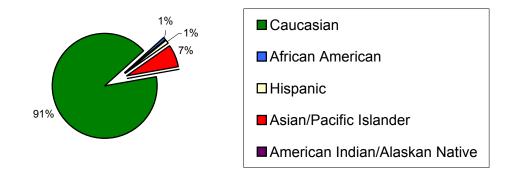
All Employees (Staff and Faculty) by Ethnic Origin (2001)



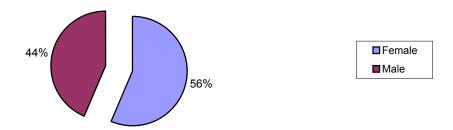
All Staff (Non-Faculty) by Ethnic Origin (2001)



All Faculty by Ethnic Origin (2001)



All Employees (Faculty and Staff) by Gender (2001)



- Maintain the 25% minority (ethnic origin) and 50% female gender diversity of all employees.
- Ongoing training in Diversity Awareness, Anti harassment and preventing
- Provide training the prevention of violence in the workplace
- Ongoing efforts to seek sources for recruiting qualified minority employment candidates
- Retain qualified and effective employees with turnover rate not to exceed 15% annually

Commitment to communicating job expectations to employees to encourage service excellence

- Maintain and communicate up-to-date and thorough job descriptions
- Continuous improvement of performance feedback mechanisms and quality of feedback
- Expand employee orientation program to incorporate organizational expectations and commitment to excellence

Phase II: Two to five years

Continue to enhance Work/Life Programs

- Increase level of life insurance coverage to three times regular compensation, with a maximum amount of \$300,000
- Introduce employee paid dependent's life insurance coverage
- Introduce employee paid disability coverage
- Develop a plan to increase current level of employer contribution to retirement plan in increments to a competitive level.
- Introduce Child and Elder Care Referral Services

Continue to provide a workplace committed to the principles of equal opportunity and free of discrimination and harassment

• Achieve and maintain 15% minority (ethnic origin) in exempt level positions

Continue to provide opportunities for self-development to raise level of motivation and work place satisfaction

- Introduce an employee incentive/bonus program
- Business Ethics Courses
- Increase Tuition Reimbursement maximum

Phase III: Five to ten years

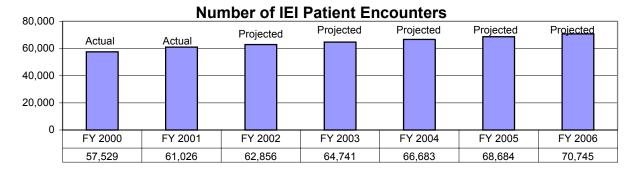
Implement increase of employer retirement contribution levels as outlined in Phase II

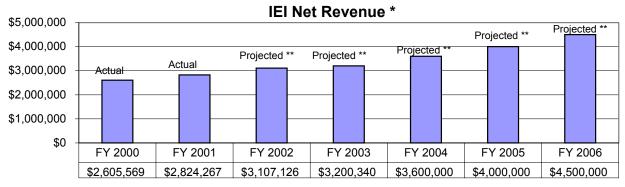
Become an Employer of Choice. Strive for listing in <u>Crain's</u> as one of the top 100 employers in Chicagoland

Illinois Eye Institute

Phase I: Current time to 2 years

Increase the census and revenue. Increase patient census from 61,000 in fiscal year 2001 to 71,000 in fiscal year 2006. Increase revenue from \$2.8 million in fiscal year 2001 to \$3.5 million by fiscal year 2006.





- * "Net" revenue is gross revenue minus disallowances. Projections are based on 3% growth per year.
- ** Predicated on the implementation of the Faculty Group Practice Plan.
- Enhance reimbursement with government-funded insurance programs
 Improve coding accuracy and efficiency
 Interact with organizations and legislators in order to increase reimbursement levels.
- Increase interaction with managed care organizations
 Expand involvement with University of Chicago Physicians Group
- Continue to obtain funding for eye care for the indigent population Expand criteria for Vision of Hope to include pediatrics.

Enhance state and local government funding.

Explore federal funding.

Enhance funding from private foundations.

• Revise IEI processes to increase operating efficiencies

Continue efforts to maintain a reasonable no show rate.

Create a more efficient process for updating insurance tables.

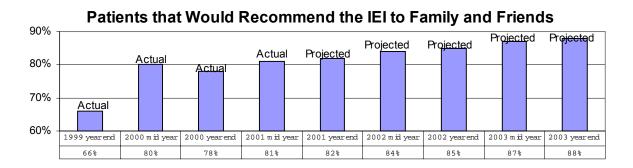
Decrease data entry errors.

Increase billing and collection efficiency.

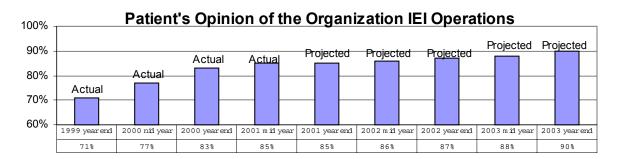
Enhance support and professional staff knowledge of insurance plans/coverage.

Enhance support staff training programs.

Increase patient satisfaction. Increase the percentage of patients that would recommend the IEI to family and friends.



Improve the patient's perception of the organization of the IEI processes.



- Enhance pre-registration services.
- Continue to enhance the patient's perception of the clinical care they receive.
- Institute processes to insure the consistency and timeliness of communications with patients.
- Improve the appointment scheduling procedure.
- Ensure timely follow-up phone calls.
- Continually educate support staff on insurance coverage, programs, etc.
- Support educational programs for patients to better understand their insurance coverage.
- Improve the timeliness of materials delivery (eyewear, contact lenses, etc.)
- Continually improve the courtesy of support staff, optometry students, attending optometrists, optometry residents, etc.
- Improve internal communications.

Enhance clinical education.

- Ensure that the optometry students and residents have an adequate number and mix of cases available.
- Formalize training on marketing and compliance topics as pertains to patient care.
- Develop a more efficient operating model in order to decrease student/doctor time spent on non-physician related activities.

Enhance relationship with our referring partners.

- Revise the phone tree to facilitate the scheduling of referrals directly with the appropriate department.
- Develop scripts and a training program for support staff for managing referrals.
- Develop a system to consistently provide referred patients with timely feedback.
- Communicate the patient satisfaction survey of referred patients to the referring party.
- Increase opportunities for interaction with referral sources including continuing education symposiums such as weekly or monthly grand rounds, etc.

Continually improve the quality of patient care provided in the Illinois Eye Institute. Institute/continue to develop quality of care assessment and monitoring systems provided by the professional staff.

- Continually revise the credentialing and privileging process in accordance with changing societal expectation, legislative and regulatory standards.
- Amend approved institutional practice guidelines as guidelines are revised, expire
- and renewed by professional organizations.
- Develop a system of peer review utilizing approved institutional practice guidelines.
- Formalize utilization review/resource management process.
- In conjunction with the Facilities and Security Departments, improve and maintain the
- physical plant and corresponding policies in order to maintain a safe and secure
- environment for patient care.

Improve the operational aspects of the Illinois Eye Institute that support patient care and education.

- Develop a system for more efficient management of diagnostic, therapeutic and sample medications (i.e. Pharmacy and Therapeutics policies and procedures).
- Develop a system for more efficient management of patient care materials (i.e. Materials Management program) including eye wear, contact lenses, forms, supplies, patient educational materials, etc.

Formalize the educational programs for support staff

- Continually improve communication skills.
- Consider formal course for all customer service associates in basic eye care office skills including diagnostic testing procedures, eye care terminology, medication basics, etc.
- Provide training to improve the communication skills between patients and staff, students and doctors that considers age and cultural differences.
- Revise the new employee orientation program.

Provide more opportunities available for patients to participate in clinical research.

- Improve the coordination of patient care delivery and clinical education program over the entire four year curriculum.
- Identify and reduce the barriers to conducting clinical research.
- In conjunction with Academic Administration, consider the formation of a clinical research committee to promote more clinical research such as clinical trials, etc.

Ensure compliance with regulatory standards.

- Agencies or regulatory bodies that may affect patient care may include, but are not limited to
 - Payers such as Health Care Financing Administration
 - Accreditation groups such as Joint Commission for the Accreditation of Health Care Organizations (JCAHO), Accreditation Council on Optometric Education (ACOE), Association of North Central Universities and Colleges
 - State of Illinois such as the Department of Professional Regulation, Optometric practice act, Grant funding sources, etc.
- Strive to keep abreast of passage of new or significant revision of standards or laws that affect patient care.
- Introduce the ICO/IEI Compliance program to faculty and staff.
- Begin the development of the Compliance program specific to patient care issues.
 - Develop risk-specific addendum to the compliance program that may include
 - Coding and billing,
 - Claim submission
 - Quality of care
 - Anti-kickback
 - Marketing
 - Confidentiality of information
 - Conflict of interest
 - Safety and security
 - Infection control (e.g. blood-born pathogens, universal precautions, etc.)

Establish and maintain an environment that compliments the incorporation of the Faculty Group Practice Plan (FGPP).

Establish management structure that compliments the operational and patient care initiatives of the FGPP

Phase II: Two to Five Years

Continue to increase patient census and revenues through patient care and research initiatives.

Continue to enhance activity among governmental and private insurance plans.

Continue to develop the Vision of Hope program for the poor and uninsured

Expand program to include surgical care

Increase activity pursuant to research grants and clinical trials

Become a Medicare Part A Provider.

Explore the development of an ambulatory surgi-center

Explore the incorporation of non-ophthalmic medical services for U of C ophthalmic surgical cases.

Explore Medicare facility reimbursement income.

Explore the development of new clinical partnerships with external stakeholders (e.g. the University of Chicago)

Explore Medicare funding for optometry students and residents through Graduate Medical Education (GME) funding.

Support the continued development of the FGPP

Phase III: Five to Ten Years

Through patient care and marketing tactics, provide both fiscal and educational support for the ICO.

Continue to support the healthcare needs of the community and the Chicago metropolitan area.

Continue to enhance the clinical education program and overall development of optometry through the implementation of new patient care technology, treatment protocols and research trials.

Information Systems

Phase I: Current time to 2 years

Expand the effective use of instructional technology

- Improve display technology in the lecture centers
- Update lighting and lighting controls in the lecture centers
- Expand Internet access bandwidth
- Select template system for Web-enhanced classes
- Implement Web technology to support Web-enhanced classes
- Determine feasibility of wireless networking in the lecture centers
- Assist in the acquisition and development of technology grants
- Develop multi-year plan for instructional technology

Update information technology infrastructure

- Adapt clinic operating system to better handle "managed care environment"
- Replace desktop monitors
- Replace or update Firewall
- Interface Bookstore system with One Card system
- Upgrade to Microsoft Office 2000
- Conduct security review utilizing third party expert
- Replace current voice mail system with Nortel Call Pilot
- Replace phone system management server
- Add One Card cash load station
- Determine remote access requirements
- Install panic alarms in the Illinois Eye Institute
- Begin replacement of desktop computers (three-year program)
- Reconfigure Computer Room after the removal of the BTI minicomputer
- Review telephony cable plant to determine expansion capabilities

Implement new information technology and systems

- Interface the new library system with the CARS system in the One Card System
- Adapt Compulink for faculty group practice

- Implement campus Intranet
- Provide phone bills via campus Intranet
- Implement proxy server to improve Internet security
- Adapt information technology to meet HIPAA (health information privacy law) requirements
- Implement CARS Financial and Administrative system document imaging
- Complete CARS RPA (Requisition, Purchasing and Accounts Payable system) implementation
- Implement CARS Financial and Administrative system budgeting
- Implement CARS Financial and Administrative system student Web information
- Implement Cognos query/report writer system to facilitate report generation
- Utilize data ports in the Learning Resource Center, lecture center and the Residential Complex to expand student access to the college network.

Phase II: Two to Five Years

Update information technology infrastructure

- Replace printers
- Replace network servers
- Upgrade phone system to next generation computer
- Move ICO Web server on campus
- Provide Residential Complex Internet access via campus network
- Upgrade desktop computers to Windows 2000 or Windows XP
- Review mission critical systems and determine upgrade or replacement strategy
- Replace Voice Forms with Interactive Voice
- Expand server connection bandwidth
- Complete implementation of multimedia presentation capability in the Boardroom
- Begin replacement of copiers (three-year period)
- Enhance Web applications to work with cell phones and Personal Digital Assistants
- Begin replacement of phone handsets (three-year period)

Implement new information technology and systems

- Implement computer training center
- Redesign computer labs to incorporate wireless technology
- Determine feasibility of IP telephony (integration of phone system with data network)
- Consider installing the Uniprint system on public printers to recoup printing cost
- Implement Compulink imaging modules
- Evaluate the feasibility of digital medical record
- Review telemedicine requirements and develop action plan
- Evaluate the feasibility of electronic asset tracking
- Determine the feasibility of logon systems security replacements

Phase III: Five to Ten Years

Continue to update and refine the information systems to incorporate changes in technology that support the mission and priorities of the institution.

Institutional Advancement: Development / Alumni Affairs / Public Relations

Phase I: Current time to 2 years

Improve alumni relations

- Complete the state chairman network.
- Hold receptions in regional locations and at major meetings for donor identification.
- Develop a website for alumni.
- Secure sponsorship for receptions.
- Increase reunion activity.
- Develop a separate alumni publication exclusive to their activities.
- Increase efforts to make alumni aware of the current applicant pool situation.

Increase annual giving to \$200,000 per year

- Conduct three to four mailings to alumni each year.
- Solicit Board, faculty and President's Advisory Council, so that there is 100% participation in giving.
- Use phonathon to secure pledges.
- Issue an ICO credit card.
- Board of Trustee members to solicit their ICO classmates.

Increase corporate/foundation giving

- Secure sponsorship for alumni, reunion and student activities.
- Market Corporate Giving Partnership Program.
- Approach corporations to endow chairs.
- Approach corporations to fund research.
- Initiate a corporate relations committee.

Increase the number of major gifts

- Visit donor prospects.
- Add research to the case statement.
- Mail Case statement and planned giving materials to select groups of alumni.
- Feature testimonials from major donors in <u>ICO Matters</u>.
- Properly train trustees and alumni council so they are able to make an "ask" for gifts.
- Ask major donors to assist in identifying other major donors.
- Present plaques and recognition awards to major donors.

Enhance planned giving

- Formalize guidelines for accepting planned gifts.
- Place articles on planned giving suggestions in <u>ICO Matters.</u>
- Present planned giving proposals to prospects.
- Create a planned giving section in the ICO Website.
- Host one estate-planning seminar a year.
- Increase the number of members of the *Legacy Society*.

Enhance marketing of ICO and communication with constituencies

- Produce four issues of <u>ICO Matters</u> a year.
- Produce an annual report.
- Increase communications to alumni via printed materials and website.
- Increase activity with media to promote ICO with the public, the community and the affluent of Chicago.
- Identify a celebrity spokesperson for ICO.
- Continue to communicate with alumni through continuing education.
- Consider internet continuing education

Improve donor relations

- Create an updated donor recognition wall.
- Market the donor recognition society.
- Develop an alumni area on campus. Include a photo backdrop in the area.

Phase II: Two to Five Years

Improve alumni relations

• Continue to refine the state chairman network

Increase corporate/foundation giving to \$500,000 per year.

Increase the number of major gifts to \$600,000 per year.

Increase planned giving to \$200,000 per year.

Continually improve donor relations

Continue to refine development efforts.

- "Institutionalize" the development process to ensure ongoing and consistent solicitations for gifts.
- Take advantage of new opportunities in development as they present.

Improve the marketing of ICO/ improve communications with constituencies

• Continue to develop innovative communication methods with the public, alumni, Chicago affluent, the community and the media.

Phase III: Five to Ten Years

Enhance alumni relations

- The alumni organization will be self-perpetuating and a solid network of state societies.
- A reunion program will be well established.

Realize annual giving, planned giving, corporate/foundation and donor cultivation efforts that will raise \$15 million for the "endowment."

Improve the marketing of ICO and communications efforts

• Achieve national recognition for the Illinois Eye Institute and the Illinois College of Optometry.

Incorporate improved donor relations into ICO culture

A well-established process for donor recognition will be in place and become an integral part
of ICO culture.

Professional Advisory Board (PAB)

Phase I: Current time to 2 years

Increase communication between the IEI and external stakeholders (physicians, community health and civic group leaders, etc) by continuing the quarterly meetings between the PAB and IEI administration

Continue to address issues of mutual concern between the PAB and IEI administration Continue the recruitment of community representatives to the PAB

Continue to utilize the PAB as a sounding board for marketing and patient care initiatives of the IEI

Maintain eight to ten members.

Phase II: Two to Five Years

Explore expanding the role of the PAB to include representation on committees and working groups

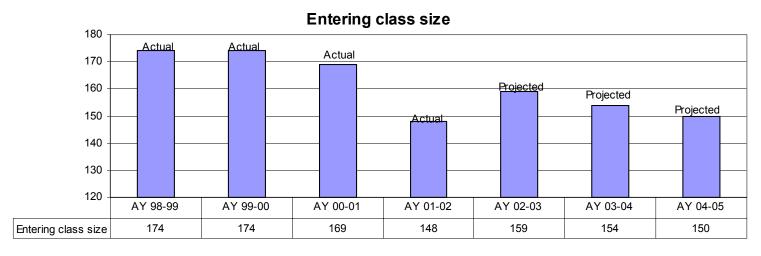
Phase III: Five to Ten Years

Explore the development of joint initiatives between the PAB and ICO Community Advisory Board

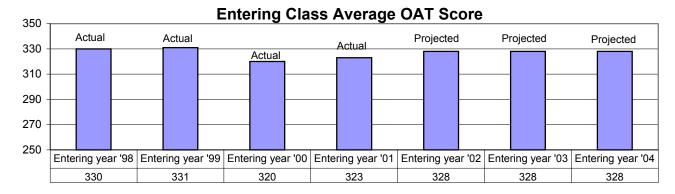
Student Affairs

Admissions / Recruitment

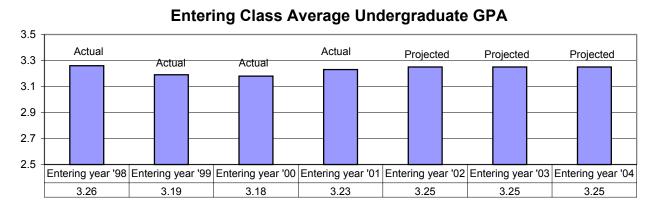
Maintain an optimum entering class size of 150.



Maintain the quality of the student body by achieving and maintaining an entering class average OAT at 328 or better.



Maintain the quality of the student body by maintaining an entering class average undergraduate grade point average of 3.25 or better.



Phase I: Current Time to Two Years

Increase the utilization of technology to increase efficiency and service in Admissions processing.

- Maximize a tracking system utilized for Admissions files and data (CARS "tickler") to expedite processing and generate automatic letters and follow-up to applicants.
- Develop 'goal' time periods for each aspect of processing and response to applicants.
- Conduct the Admissions process to cycle earlier and provide indication for incoming class by May 1.
- Increase utilization of e-mail in communicating with applicants (confirmations, etc.).
- Install Electronic Data Imaging (EDI) for scanning and management of applicant transcripts, letters, etc.
- Develop systems for utilization of EDI.
- Continue development and integration of an electronic internet-based application for admission.
- Develop on-line payment of application fee.
- Develop CD to replace ICO recruitment videotape.
- Explore distribution of the Admissions Newsletter via e-mail.

Optimize communications for marketing strengths of ICO's program.

- Develop an Admissions Marketing Plan.
- Distribute the 'Admissions Newsletter' quarterly.
- Develop increased utilization and incorporation of practitioner comments and testimonials regarding ICO student excellence in publications.
- Develop a standard Power Point presentation for use in Admissions Recruitment visits.
- Increase communication of Student Satisfaction Inventory results/improvements to all constituencies.
- Survey Alumni regarding how we can better prepare them to assist in recruitment and admissions activities.
- Increase communications to encourage ICO alumni to assist in recruitment of potential students.
- Increase efforts to make alumni aware of the current applicant pool situtation.
- Encourage ICO Alumni to participate in the ASCO mentor network.
- Fully participate and support ASCO campaign to encourage O.D. recruiting.
- Develop policies and procedures for potential students to do on-campus observations and complete shadowing experiences.
- Communicate decreased attrition rates whenever possible.

Provide internal support for optimization of Admission's functions and efficiency.

- Expand the applicant host program to accommodate 25% of interviewees.
- Improve training for Tour Guides to be able to effectively communicate all strengths of the program.
- Provide training for Admissions and/or Alumni staff to conduct "short notice" tours.
- Increase faculty participation in the Admissions Open House.

Explore opportunities to increase state contract funding for ICO students (WICHE, etc.).

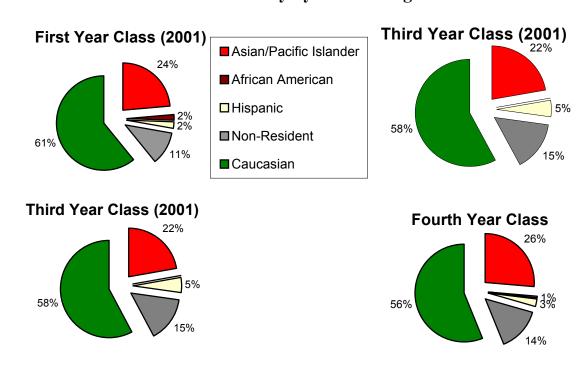
Increase 3 + 4 Program affiliations by 3 colleges per year.

Cooperate in ASCO development of a nationwide "common application form".

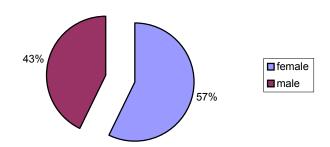
Continue utilization of Tuition Discounting schedule to attract high caliber candidates.

Increase recruitment of qualified underrepresented minorities to achieve a student body reflective of population demographics.

Student Body by Ethnic Origin



Student Body by Gender (2001)



- Increase involvement of ICO minority alumni in recruitment.
- Develop a minority O.D. mentor program.
- Target Chicago area "magnet" schools for admissions visits.
- Consider offering an Admissions Open House during the academic year for area advisors and counselors (specifically high school).
- Develop a career mailing kit about the profession and school to area high school career counselors.
- Develop a special section on the ICO web site to welcome and encourage minority applicants.
- Develop materials specifically for minority recruitment.
- Increase recruitment of qualified international students.

Phase II: Two to Five Years

Convert application submissions to 100% electronic.

Explore potential for "on-line" processing status checking for applicants.

Develop systems for electronic sharing and evaluation of admissions candidate file information with Admissions Committee members.

Develop an "on-line" Open House.

Explore potential for utilization of web-based admissions visits.

Explore development of a summer preparation program targeted for minority students.

Consolidate interview days to maximum of 3 per week.

Work with Academic Administration to provide for Admissions Committee members to receive one "session" per week to conduct Committee business and conduct interviews.

Develop a career/ICO poster for high school and college's bulletin boards.

Phase III: Five to Ten Years

Develop workspace for conducting applicant file reviews on interview days.

Develop workspace for faculty to review applicant files and prepare for interviews.

Provide for applicants and families to have music, TV news, Chicago information channel, and/or Internet access in Welcome Center on interview days.

Student Services

Phase I: Current Time to Two Years

In the spirit of College-wide cost control, explore all possible means to control and offset operating costs of the Student Affairs Department.

- Increase Admissions Application fee to \$75.
- Explore decreasing the Admissions Deposit refund from \$400 to \$250.
- Develop new Application Packet packaging system to decrease cost of mailings.
- Explore availability of funds from NOA (or other) for minority recruitment related projects.
- Explore grant funding for Admissions and Student Affairs initiatives.
- Explore and maximize opportunities for funding of Student Affairs programs Placement ads, sponsorships, etc.
- Explore user fees for non-alumni and/or non-contributing alumni utilization of on-line Placement.

Consolidate all non-academic student-related functions into Student Affairs Department.

Foster a "Customer/Student Service" attitude college-wide.

Empower all front-line employees (college-wide) to solve student problems.

Develop the ICO Intranet for improving communications to students, faculty and staff. (Academic calendar, student schedules, faculty schedules, student guide, employee manual, forms, etc.)

- Decrease dependence upon contractual updates of Web page by developing ICO Web-Master position. Provide for weekly/monthly updates of web page.
- Work with student leadership to develop best methods to distribute student schedules on a timely basis and decrease paper usage.

Develop and conduct Recent Graduate Survey to determine areas which ICO can improve preparation of students for entering practice.

Provide student administrative contact (for emergencies) at all regional and national meetings attended by students.

Increase opportunities for interaction between current students and alumni. (Alumni Connection, Reunions, Phonations, Regional and National meetings, etc.)

Convert 3rd Floor locker room to allow for co-ed utilization.

• Implement system for student self-selection of lockers with once per year open change opportunity.

Establish a sub-department within Student Affairs combining Fitness Center, Student Health Service and Counseling Services under one supervisory position ("mind, body wellness concept").

Increase student body awareness of professional conduct and ethical behavior.

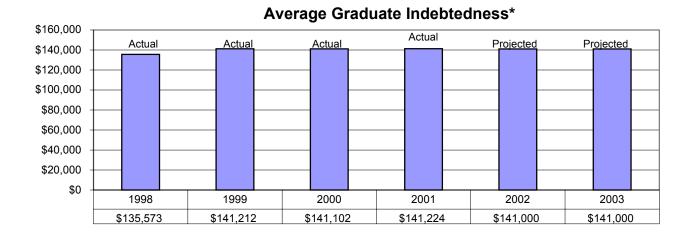
• Begin discussions (among students and faculty) of implementation of a Student Honor Code.

Explore and communicate increasing community service opportunities available to students.

Develop a comprehensive student crisis plan (in case of emergency or tragedy).

Continue to monitor for new options for student health insurance.

Increase student awareness of non-program related indebtedness. Maintain average graduate indebtedness at \$141,000 for those students who borrow through 2003.



- Consolidate student payment and financial aid functions to one office, i.e. "one-stop" service concept. Preserving required (Auditors) separation of business office and Financial Aid functions.
- Develop a Financial Aid Office informational booklet (obtain outside funding sponsorship for production costs).
- Develop a Financial Aid Regulations Manual for distribution to students.
- Continue to increase the Work-Study program to maximize utilization of federal dollars and assist in controlling student indebtedness.
- Evaluate student-borrowing patterns for non-program related expenses and minimize any non-program related over-borrowing.
- Explore and communicate to students all known opportunities for reducing indebtedness loan forgiveness programs, forbearance, government service programs, scholarship opportunities, etc.

Develop a Financial Aid Office informational presentation (Power Point) for use on interview days and in the absence of Financial Aid Office staff.

Explore self-funding of the student loan program.

Consolidate dormant (inactive with no contact x 3 years) named scholarship accounts into one "Consolidated Scholarship Account - CSA" in order to best utilize the funds and provide perpetual scholarships.

Distribute ICO Budget Income/Expense category information to all students yearly.

Develop student leader orientation for required financial transaction policies and procedures with ICO Business Office – to be conducted each fall for new student leaders.

Increase occupancy in the Residential Complex (RC).

- Develop a self-governance system for the Residential Complex.
- Develop policy and procedures and charge system for RC visitors.
- Improve Internet access to include all RC computer laboratory computers.
- Add decorating to RC Lounges to make the RC more "homey" as suggested by residents
- Improve student satisfaction rating for ICO Food Service by responding to RC Food Service Advisory Group suggestions.

Implement changes in the Bookstore that provides a service oriented philosophy for students and Alumni while controlling operational costs through efficiency.

- Develop a marketing plan for the ICO Bookstore. (students, alumni, CE attendees, parents)
- Implement a pre-order and discount system for all textbooks and equipment to be conducted quarterly.
- Continue operation of the ICO Bookstore with efforts to reduce and maintain inventory at "shelf-copy" only level.
- Develop a "Laboratory Fee" to replace the previous "Breakage and Use Fee" and incorporate automatic payment for Laboratory Manuals.
- "Right-size" the square footage needs of the "New" Bookstore.
- Determine space needs for new pre-order system.
- Test offering ICO logo-wear to Alumni through publications and events.
- Evaluate "Required" text and equipment lists to minimize student expense.
- Explore ICO web-page presence for Bookstore items or access.
- Explore on-line ordering for Bookstore items.
- Provide incentive for graduating students and young alumni to continue utilizing the ICO Bookstore for their reference and equipment needs i.e. extend "student discount".

Phase II: Two to Five Years

Relocate all student-related services to one centralized location within the college.

Explore the development of a system to equalize tuition and fee payments between quarters and years of the program.

Implement a front entrance location of current event scrolling system monitor.

Explore potential for equipment rental or lease program.

Phase III: Five to Ten Years

Explore consolidation of Alumni Office function into integrated Student and Alumni Affairs Department.

Explore sale of the Residential Complex and replace with cost effective structure.

Security

Phase I: Current time to Two Years

Strive to reduce the number of thefts.

Develop a work place violence policy and procedures.

Continue to improve relations with the Chicago Police Department through periodic meetings with the area Commander and beat officers.

Develop a card index file for those who do not utilize the parking structure to identify vehicles in case of an emergency.

Continue to keep the administration, students and employees aware of any safety or security concerns.

Upgrade the key control software.

Replace the security camera feed.

Continue to revise emergency procedures and emergency plans according to changes in OSHA workplace regulations.

Compile a Security Management plan according to JCAHO standards.

Phase II: Two to Five Years

Improve security management procedures and revise the security management plan in order to continually improve campus safety and security.

Continue to reduce the potential for incidents by increasing security presence in patient areas, parking areas, and general vicinity of the college.

Upgrade security equipment as indicated.

Install a security camera in the hallway between the Low Vision Rehabilitation and Pediatrics/Binocular Vision Services in the Illinois Eye Institute.

Due to the increase of construction in the area and loss parking availability, continue to evaluate the parking situation and consider parking alternatives.

Consider an additional security officer in the IEI due to the increase in patient activity.

Phase III: Five to Ten Years

Continually evaluate and revise the security management plan in order to ensure the safety and security of students, employees, patients and visitors.

Key to Abbreviations

AA Academic Affairs

ACOE Accreditation Council for Optometric Education

BO Business Office BOT Board of Trustees

CAB Community Advisory Board

EWC Eye Wear Center

FEC Faculty Executive Council FGPP Faculty Group Practice HR Human Resources

IA Institutional Advancement

IEI Illinois Eye Institute

IRB Institutional Review Board

IS Information Systems

JCAHO Joint Commission for the Accreditation of Health Care Organizations

LRC Learning Resource Center / Library

MP Media Production

NBEO National Board of Examiners in Optometry

PAB Professional Advisory Board PAC Presidential Advisory Council PSB Professional Standards Board

U of C University of Chicago