I. TEACHING AND LEARNING

1. Use of Technology in Instruction and Evaluation
   
   **Goal:** Develop policies that encourage faculty to engage in innovative learning activities through the use of technology, such as online and other technology-enhanced educational products; acquire tools to facilitate faculty training and participation in online and other technology-enhanced education; and evaluate outcomes.
   
   **Measure:** Inventory online and other technology-enhanced learning opportunities; and develop capacity and process for computer-based exams and course/teaching evaluations.
   
   **Progress:** An inventory of on-line and distance courses has been provided to the Kansas Board of Regents on-line catalog, and is updated as needed. KUMC has partnered with the Lawrence campus to offer the Blackboard on-line course management system. Use of our other online testing and evaluation tool, eZ.exam, has increased to 21 courses. In the fall of 2002 we migrated from eZ.exam to Perception, which is essentially the same product marketed by a different vendor. The School of Nursing anticipates offering all course evaluations online via Perception during the 2003-2004 academic year.
   
   **Goal for 2004:** Enhance support for the use of technology in learning.
   
   **Measure for 2004:** By June 30, 2004, implement Blackboard version 6.0, integrate the SOM-Wichita campus, and incorporate at least 50 courses within Blackboard; and, with the involvement of faculty and students, prepare a proposal to develop a student learning center that integrates library/ITC services with increased study space, online testing facilities, and additional small group study spaces.

2. Teaching Improvement and Recognition of Teaching Excellence
   
   **Goal:** Ensure the quality of instruction through faculty development and the recognition of teaching excellence.
   
   **Measure:** Using faculty, course and curriculum evaluation data, assess the areas with the most pressing need for the improvement of the teaching skills of faculty; maintain (and enhance where appropriate) programs and opportunities for faculty skill building and development; fully develop the process of annual review of faculty by their academic unit; and coordinate the annual review process with promotion and tenure procedures.
   
   **Progress:** In response to a need for development of faculty skills in leadership and management, a series of seminars on these topics was developed in the School of Medicine. In addition, sessions with the National Board of Medical Examiners’ staff were arranged to discuss the new Clinical Skills Examination. All of the undergraduate programs in the School of Allied Health have come together to work with the Educational Technology staff to enhance their skills in developing online courses while creating an online course called Management Principles in Health Care. Nine teaching awards given to faculty in Allied Health, including the Stata Norton Distinguished Teaching Award, and Faculty in the School of Nursing received seven teaching awards in 2002, including the Chancellor's Award, the Kemper Award, and the ACNM “Instructor of the year award.” Faculty are reviewed annually, and the review criteria are based upon the Faculty Handbook and the review process for the school.
   
   **Goal for 2004:** Ensure the quality of instruction through faculty development and the recognition of teaching excellence.
   
   **Measure for 2004:** Maintain current programs and opportunities for faculty skill building and development and, where necessary, introduce new programs in response to faculty and curricular needs.

3. Rural and Underserved Health Experiences in the Health Professions
   
   **Goal:** Assure that students in the health sciences at KUMC are aware of opportunities to practice in rural and underserved areas of Kansas; and accumulate data in order to propose and implement improvements in programs that include rural health experience.
   
   **Measure:** Inventory each experience available or required of students in the Schools of Allied Health, Nursing and Medicine, including the required fourth-year rural preceptorship, the rural health weekend experience, and basic clerkship opportunities in rural settings for medical students; inventory the number and location of clinical sites in rural areas that are used by departments in the School of Allied Health; and complete and validate a rural preceptor database.
Progress: Exposure of students to rural healthcare settings is extensive. Students and faculty of the School of Allied Health have been actively involved in the Rural Interdisciplinary Training Grant in which students and faculty provide health screenings in many rural and underserved sites in Kansas such as: Hiawatha (Senior Expo), Mayetta (Prairie Ban Potawatomi Nation) and in Holton, KS (Kickapoo Tribe). Students and faculty from the school also participated in three AHEC health care programs in Southeast Kansas (Asthma and COPD in the Adult, Asthma and the Athlete, and Asthma and Kids). Medical students continue to gain experience in rural and underserved areas of Kansas. First and second year medical students participate in Rural Health Weekend and the “Rural Family Medicine: Practice and Research” elective. Third year students may spend part or all of their Pediatrics, Obstetrics/Gynecology, Family Medicine, Ambulatory Medicine/Geriatrics, Neuropsychiatry and Surgery rotations at a rural clinic and/or hospital. Also, 40 clinical placements in the School of Nursing’s RN-BSN program were in rural and/or underserved communities in Kansas. The preceptor database has been updated to include information from Fall 2000 to the present on Kansas City students that have completed rural experiences including Rural Health Weekend, third year clinical experiences, Rural Primary Care Practice and Research Program, and the Rural Preceptorship.

Goal for 2004: Ensure that students in the health sciences at KUMC are exposed to opportunities to practice in rural and underserved areas of Kansas.

Measure for 2004: Use student assessments to evaluate the experiences available or required of students in the School of Medicine, including the required fourth-year rural preceptorship, the rural health weekend experience, and basic clerkship opportunities in rural settings for medical students; track the number of rural and underserved clinical sites used by the 21 programs in the School of Allied Health; and continue development of the scheduling component of the rural preceptor database.

4. Post-graduate and Limited Undergraduate Programs that Lead to University Certificates for Health Professionals

Goal: Develop appropriate post-graduate and undergraduate certificate program proposals that meet current student needs and workforce requirements; and evaluate programs annually to ensure they are meeting these needs.

Measure: Establish criteria and processes for determining needs in selected areas that could be met by undergraduate and post-graduate certificate programs; and define a process that will lead to the implementation of appropriate programs.

Progress: A number of new certificate programs have been developed to meet community needs. A new post-masters certificate program for Psychiatric/ Mental Health Nurse Practitioners was approved for the School of Nursing. One new Family Nurse Practitioner certificate program is in process of approval and three new programs are in development (healthcare informatics, public health nursing and organizational leadership). The 21-month certificate program in Diagnostic Cardiac Sonography has been approved and admitted its first class of students. The School of Allied Health, in conjunction with KU Med, is in the process of evaluating the need for an accredited educational program to prepare perfusionists, who operate extracorporeal circulation and autotransfusion equipment.

Goal for 2004: Ensure that post-graduate and undergraduate certificate programs meet current student needs and workforce requirements.

Measure for 2004: Evaluate the need for additional certificate programs, and develop new programs as necessary.

5. International and Multicultural Experiences for Students

Goal: Ensure programs are in place that facilitate international and multicultural educational experiences for KUMC students and the hosting of international students and scholars; increase cooperation and coordination with the international programs on our Lawrence campus; continue to develop experiences that reinforce multiculturalism and cross-cultural competence in our healthcare professionals; and include documentation of international learning experiences on the students’ transcripts.

Measure: Inventory all programs that offer international or multicultural experiences for KUMC students or that host international students and scholars; and develop assessment methods to evaluate program quality and outcome.

Progress: An inventory revealed significant and enhanced multicultural experiences by KUMC students. In 2002, for example, 27 senior medical students went abroad for international clinical electives; in 2003, 37 students did so. Electives are available in sites on five continents, in developed and developing countries, in hospitals and clinics in urban and rural areas. New sites have been identified in Swaziland, Haiti, Paraguay and South Africa, and new electives in Dublin and Wexford, Ireland. The success of the outbound program is monitored using the students’ papers and presentations, and the written evaluations provided by their on-site mentors. In addition to multicultural experiences by KUMC students abroad, KUMC hosts senior medical, nursing, physical therapy and pharmacy
students from many countries. This year, we welcomed our first Japanese senior medical student. We continue to monitor the success of our inbound program using exit interviews and grades.

**Goal for 2004:** Provide support for international and multi-cultural experiences for students.

**Measure for 2004:** Facilitate compliance with SEVIS (the federal government’s Student and Exchange Visitor Information System) in order to maintain our international student and scholar program; and develop an orientation program to include web-based material, hard copy brochures and peer hosts to provide an easier transition to life in the United States, Kansas City, and KUMC for international students.

**II. RESEARCH, SCHOLARSHIP, and CREATIVE ACTIVITIES**

1. **Research Mentoring of Clinical Faculty**
   
   **Goal:** Ensure opportunities, and provide faculty incentives, for research, scholarship and creative activities by clinical faculty, and conduct regular formal evaluation of the policies and opportunities.

   **Measure:** Inventory faculty development opportunities that support research efforts; and create policies that enhance opportunities in the development of research skills, including research grant preparation.

   **Progress:** KU Medical Center continues the NIH K-30 clinical research-training program. In addition, clinicians were invited this year to apply for an internal grant of $50,000 from the Research Institute. Three clinical faculty members were funded on this research program, one of whom went on to submit a proposal for a NIH R-01 grant. Internal continuing programs of education in FY2003 increased from approximately 500 training hours to nearly 3000 training hours, with a special emphasis on training clinical researchers and their staffs. The course in grant writing skills continued this year with emphasis on clinical research. Five clinical researchers applied for and received NIH funded grants, bringing the total to ten clinical faculty who have received NIH funding.

   **Goal for 2004:** Provide support for research, scholarship and creative activities by clinical faculty.

   **Measure for 2004:** Measures will be developed to monitor progress in supporting clinical faculty research endeavors, including the amount of internal grant dollars allocated for clinical faculty research projects, and the number of clinical research proposals submitted and funded.

2. **Research Collaborations Within and Outside the Institution**

   **Goal:** Because of the depth of expertise at the various research campuses and research institutions across the state and in the region, identify and facilitate opportunities to work collaboratively with researchers at other facilities; develop a database listing collaborative research opportunities, collaborative grant proposals, publications, new initiatives, and evaluation; and assess the maintenance of successful programs and the development of new collaborative research efforts.

   **Measure:** Inventory collaborative opportunities between KUMC and local and statewide research institutions; e.g., University of Missouri-Kansas City, Midwest Research Institute, Stowers Institute, Children’s Mercy Hospital, KU-Lawrence and K-State.

   **Progress:** There has been an increase in the past year in both the number of grants submitted and the number funded as a result of collaborations between KUMC and various area institutions. Collaborations with Children’s Mercy expanded significantly with $2.3M in proposals signed. KUMC has three national clinical trials center grants that entail collaboration with 17 other universities. A strong seminar series between Stowers Institute and KUMC has also been established, and joint participation in scientific programs occurred with both faculty and graduate students. The technology transfer program of KUMC has been assisting and managing Children’s Mercy technology and intellectual property and has signed several licenses for products in this joint relationship.

   **Goal for 2004:** Provide support for internal and external research collaborations.

   **Measure for 2004:** Grants jointly applied for and received between KUMC and its partner institutions will be tracked; and progress made in developing and supporting collaborative efforts will be monitored.

3. **Research Experiences for Students**

   **Goal:** Inventory, maintain and enhance internal and external programs that provide research experiences for students at KUMC; and ensure opportunities for medical students and residents.

   **Measure:** Inventory the types of research experiences across the defined student and resident populations.

   **Progress:** There has been a substantial increase in student research activity. All residents are now required to produce at least one publishable research paper while in their residency program. The Student Research Day program encourages students to conduct research as part of the curriculum, and this year there were 96 oral abstracts
presentations and 9 posters, which is a record number of student research projects presented at KUMC. In a further significant enhancement, 34 students participated in a summer research program this past year. This number has increased significantly from about 20 per summer in the late 1990s.

**Goal for 2004:** Provide support for research experiences for students at KUMC.

**Measure for 2004:** Increase the number of students in the summer research program at KUMC and explore the development of an annual research day for medical residents.

4. **Research Compliance**

**Goal:** Implement a research compliance program to manage institutional assurance of compliance with federal regulations and educate investigators in bioethics.

**Measure:** Develop the basic design of a comprehensive program that facilitates compliance with governmental and university policies governing research. Included in the program will be assessments, education, training, auditing, and policy development.

**Progress:** In April 2003, the University undertook a wholesale reorganization of its research enterprise, resulting in the development of a new stand-alone division for Research Compliance. This new unit will provide oversight and support of all related compliance functions, will acquire two additional FTE, and be housed in a new location which provides easy access to researchers and their staff. Staff support has increased from 5.5 to 11 FTE. Oversight and support of all research compliance committees was assigned to the Executive Director. An educational coordinator position was established and filled, resulting in development and delivery of a comprehensive research orientation program, coordination of related research compliance educational programs, and on-going administration of on-line mandatory ethics training. More than 3900 individuals have received certification in Human Subjects Protection.

**Goal for 2004:** Improve support for compliance with federal regulations concerning research.

**Measure for 2004:** Establish formal operating procedures and institutional policies that comply with all regulatory and sponsor requirements governing research; and expand educational and outreach methods to disseminate regulatory requirements, quality assurance tools and other resources that enable compliance.

5. **Research Funding Opportunities**

**Goal:** Maintain healthy growth in research funding opportunities and research support; and facilitate the development and submission of research grant applications.

**Measure:** Identify and assess management and support functions that will facilitate grant development, application preparation and submission.

**Progress:** Research Administration, which separated from Research Compliance in FY2003, has taken significant steps in improving research-funding opportunities. There are currently over four thousand different funding sources in the faculty-funding database. The pre-award program has been increased by two FTE staff members, a director and a proposal development assistant, and a database for tracking research proposals has been upgraded. Initial steps have been taken to provide more efficient and effective assistance for faculty who are submitting research grant proposals including centralizing support for all types of grants in one unit.

**Goal for 2004:** Provide support for continued growth in research funding.

**Measure for 2004:** Develop a tracking and reporting system to record proposal-development support for faculty researchers.

### III. PUBLIC SERVICE

1. **Serving the Continuing Education of Health Care Providers**

**Goal:** Provide continuing education that meets the needs of Kansas’s healthcare practitioners.

**Measure:** Inventory and assess the number of continuing education contact hours provided to the Kansas community of healthcare providers by faculty and staff from the Schools of Allied Health, Medicine and Nursing.

**Progress:** Information on continuing education contact hours is collected by all programs. Growth occurred in a number of areas. For example, the number of accredited grand rounds increased from 11 in FY 2002 to 18 in FY 2003 and the number of participants increased by 5,062. A number of new courses were introduced, including two cardiology courses; a workshop on Telemedicine as part of the Kansas Technology Leadership Conference; several programs related to terrorism response; a new pediatric assessment program; and a consumer education series called Saturday Morning at KU Med. The KU Medical Staff Grand Rounds was initiated with KU Hospital, and 28 HIPAA training sessions were offered.
Goal for 2004: Provide continuing education that meets the needs of Kansas’s healthcare practitioners.
Measure for 2004: Use requests for courses and survey data to develop and deliver new continuing education courses that meet the expressed needs of Kansas’s community of healthcare providers.

2. Clinical and Community Service and Support
Goal: Provide consultation and expertise in areas of health care where it is not readily available from other sources.
Measure: Inventory and assess the number of consultations provided to the Kansas community by faculty and/or staff in the Schools of Allied Health, Medicine, and Nursing.
Progress: In 2002 the Center for Telemedicine and Telehealth facilitated the delivery of over 3200 tele-consultations by KUMC providers. These consisted of approximately 3000 clinical and 200 educational events to patients and professionals in 64 communities across Kansas. Specialties ranged from school-based acute pediatric care to nursing home-based geriatric education, and from autism expertise through the Developmental Disabilities Center to Pediatric Cardiology. In addition to schools, hospitals, health clinics, and mental health facilities, new constituents were added during 2002 including a nursing home and a juvenile correctional facility.
Goal for 2004: Provide health-care consultation and expertise in areas where it is not readily available from other sources.
Measure for 2004: Increase the number of outreach locations and the range of events provided to the Kansas community by faculty and/or staff in the Schools of Allied Health, Medicine and Nursing.

3. Essential Coverage for Practicing Physicians in Rural Areas through a locum tenens Program
Goal: Provide essential or relief coverage for practicing rural physicians; and evaluate annually to determine if the program is meeting the needs of the practicing community in rural areas.
Measure for 2003: Inventory locum tenens services provided by the faculty and staff of KUMC and establish assessment process.
Progress in 2003: A database tracks locum tenens services. In order to promote awareness of locum tenens services, presentations were made to resident groups on the Kansas City, Wichita and Salina campuses in Family Medicine, Internal Medicine, Psychiatry, Medicine-Pediatrics and Pediatrics throughout the year. Exhibits at conferences were also created to promote awareness of our locum tenens services to the rural communities of Kansas. Contacts were made to re-establish relations and awareness with past locum tenens communities. Through these presentations and exhibits additional providers and communities were recruited. A total of fifteen communities have used the program over the past 12 months and fifty-one providers are registered with the program. Satisfaction is assessed through surveys of rural physicians and providers.
Goal for 2004: Provide essential or relief coverage for practicing rural physicians.
Measure for 2004: Measures will be developed to monitor progress in providing locum tenens coverage for practicing physicians, including days of coverage requested; days of coverage provided; total number of requests received; total number of requests filled; and requests not filled.

4. Repository of Information for Students, Faculty and the Healthcare Community
Goal: Maintain and improve library and information resources to serve the research and education needs of healthcare students and professionals.
Measure: Inventory the use of Dykes Library by KUMC faculty, staff and students as well as others; and determine the affiliation of non-KUMC users and their total consumption of services at the Dykes Library.
Progress: Dykes Library has made routine a monthly survey of library users, the purpose of which is to determine the user’s affiliation. The data indicates that 76.6% of users from June 2002 through May 2003 were affiliated with the KU Medical Center, i.e. faculty, staff, students, hospital authority, or KUPI. This is an increase from the previous reporting period, which showed 70.3% of the users were affiliated with the KU Medical Center. The non-KU users included users from UMKC, Rockhurst University, law firms researching health issue, and pharmaceutical clients. In addition to providing on-site use of library resources, Dykes Library provided a total of 13,750 items to other libraries in the first six months of FY 2002. Of these items, 7,937 went to libraries, hospitals, non-profits and KU-Medical Center persons in Kansas while 5,913 were sent to libraries, hospitals, and non-profit organizations from out of state.
Goal for 2004: Maintain and improve library and information resources to serve the research and education needs of healthcare students and professionals.
Measure for 2004: Inventory the use of Dykes Library by affiliation to determine who is using the library; collect data on the number of interlibrary loan lending requests to determine the use of the KUMC collection; inventory the
use of electronic and print resources provided by Dykes Library; and collect data related to classes/workshops taught by Dykes librarians for healthcare students and professionals.

5. **Healthcare Services and Information Provided for Kansans**

   **Goal**: Provide high-level or technologically sophisticated diagnostics and tertiary treatment for the residents of Kansas.

   **Measure**: Inventory those services and centers of expertise at KUMC that provide highly technical or state-of-the-art medical services not otherwise available in the area; and devise a mechanism for assuring that these services are known to both the public and the practicing community. Some examples of these activities include telemedicine (e.g., Tele-Kid, Tele-Health), and rural onsite specialty clinics.

   **Progress**: In conjunction with health teams from Kansas communities, the Center for Telemedicine and Telehealth (CTT) implements and researches the latest communication technologies and equipment for the delivery of clinical, educational and health wellness services to Kansans in 64 communities across the state. Innovations include real-time videoconferencing for provider-patient consultations, community and continuing education, store-and-forward operations, and Internet-enabled interactions. The CTT is currently working to advance interactive videoconferencing to an Internet platform in Kansas to expand access to health care to even more communities.

   **Goal for 2004**: Provide high-level or technologically sophisticated diagnostics and tertiary treatment for the residents of Kansas.

   **Measure for 2004**: Increase access to tertiary care for Kansans through the appropriate integration of health care technology and outreach specialty clinics, and by partnering with additional communities across the state for the provision of specialty services.

IV. INSTITUTIONAL MANAGEMENT

1. **Institutional and Planning Data for Improvement of Management and Decision-Making**

   **Goal**: Improve and increase access to institutional and planning data to facilitate more informed decision-making and to reinforce management objectives; acquire and install data warehouse software and populate the warehouse with historical and current data; and facilitate user access.

   **Measure**: Define the architecture of the KU Medical Center data warehouse; develop an initial data model; and implement the Data Management Committee to guide development of the data warehouse and MIS initiatives.

   **Progress**: The new data warehouse environment now includes beta versions of a departmental financial report, a student admissions report, and a report for research grant balances. The Data Management Committee has defined and prioritized subject areas for data to be entered into the data warehouse, and designated the PeopleSoft Student Administration system as the authoritative source for student data and the PeopleSoft HR/Pay system as the authoritative source for the majority of employee data.

   **Goal for 2004**: Improve access to institutional and planning data to facilitate more informed decision-making.

   **Measure for 2004**: Define and pilot mechanisms and procedures to off-load reports not needing real-time data from the production student administration system; generate an initial set of student data reports; implement a data mart that will allow principal investigators to view their grant balances; and implement a decision support system for financial information.

2. **Staff Development, Education and Training Opportunities and Procedures**

   **Goal**: Improve employee job skills and facilitate faculty and staff development through education and training opportunities; and improve processes and procedures relating to human resource issues for all employees.

   **Measure**: Complete staff development, education, and training opportunity improvement plans and the examination of policies and procedures.

   **Progress**: KUMC Human Resources department added 2 web-based training modules for the State Employee Review System and the Recruitment/Selection process. In addition, two additional modules (writing Position Descriptions, and New Employee Orientation) are nearly complete. A system for on-line registration and tracking of KUMC’s Tuition Reimbursement is complete and in use. A new policy/procedure to improve recovery of property/equipment was drafted, and a comprehensive review is underway of KUMC’s compensation philosophy and salary administration practices for unclassified professional staff.

   **Goal for 2004**: Improve faculty and staff development through education and training opportunities.
Measure for 2004: Reevaluate staff development, education, and training plans; examine and revise selected policies and procedures; and install and implement automated applicant tracking process to improve compliance efforts.

3. Improvement of Purchasing
   Goal: Simplify and facilitate the purchasing process for required supplies and small equipment.
   Measure: Implement a business procurement credit card system available to all departments and research units.
   Progress: Use of the business procurement credit card has increased substantially in the last year. The number of active cards is essentially constant, but the cards are being used more. Whereas a year ago charges per month were around $100,000, now the charges are $140,000 per month, with the amount increasing slightly each month. For the last 10 months of this fiscal year, approximately 25% of KUMC procurement activity was done through the BPC.
   Goal for 2004: Simplify and facilitate the purchasing process for required supplies and small equipment
   Measure for 2004: Implement a business procurement credit card system available to all departments and research units; and streamline the PeopleSoft requisitioning process.

4. Program Review and Accreditation Process
   Goal: Complete program reviews in a timely manner using the revised program review process; and construct a central database to track accreditation processes and follow up in all KUMC programs.
   Measure: Evaluate the current program review and accreditation tracking processes and make recommendations for improvement.
   Progress: The tracking of accreditation has been enhanced by the addition of new fields to the accreditation database, which will allow tracking of issues and concerns raised by the accrediting body, as well as of other issues, such as limited additional review schedules. A new Associate Dean for Program Review in the Office of Academic Affairs is gathering these data from the schools and individual units. Also, additional personnel are being trained to use the accreditation database and to input data as it changes. The next initiative in this goal will be to re-coordinate program review schedules with accreditation cycles.
   Goal for 2004: Use program reviews to enhance program quality at KUMC and ensure successful program accreditation.
   Measure for 2004: Enhance the program review tracking process and update the accreditation database.

5. Conservation of Infrastructure Resources
   Goal: Efficient utilization of resources and maintenance of manageable costs for our infrastructure.
   Measure: Collect, analyze, and report data on the performance of two critical infrastructure indicators: the use of energy, represented by BTU’s used per square foot, and the appropriate upkeep of our offices, classrooms, laboratories and clinics, as reflected in the cost of housekeeping services per square foot. A statistical process control mechanism will be used to establish a range of appropriate operation (normalized for climatic extremes), which will be benchmarked against peer institutions to create indicators of successful performance.
   Progress: Benchmarks have been established for BTU and housekeeping costs per square foot. At $.91 per square foot, housekeeping costs in FY 2003 were within the benchmark range of $.90 - $1.00 per square foot, and showed a substantial decline from the cost of $2.75 per square foot in FY 2000. BTU consumption for FY 2003 was within the benchmark range of 220,000 – 244,000 BTU per square foot and there was a notable decrease in BTU consumption from FY 2002 to FY 2003. Although we have been successful in getting costs within benchmark ranges there are always factors that can cause variation in performance, such as fluctuation in the need for heating or cooling due to weather changes, and the construction of new research facilities with higher BTU consumption.
   Goal for 2004: Improve utilization of resources and maintenance of manageable costs for KUMC’s infrastructure.
   Measure for 2004: Collect, analyze, and report data on the performance of two critical infrastructure indicators: the use of energy, represented by BTU’s used per square foot, and the appropriate upkeep of our offices, classrooms, laboratories and clinics, as reflected in the cost of housekeeping services per square foot. A statistical process control mechanism will be used to establish a range of appropriate operation (normalized for climatic extremes), which will be benchmarked against peer institutions to create indicators of successful performance.