

DEPARTMENT OF
COMMUNICATION
SCIENCES & DISORDERS
STRATEGIC PLAN

MARILYN E. CROTTY, UNIVERSITY OF CENTRAL FLORIDA
INSTITUTE OF GOVERNMENT

INTRODUCTION

The Department of Communication Sciences and Disorders at the University of Central Florida, began a strategic planning process on August 27, 2014. Ms. Marilyn Crotty, director of the Florida Institute of Government at the University of Central Florida was the facilitator for this initiative which resulted in the development of a vision, organizational values, a mission, goals, objectives, priorities, and strategies for implementation by the department in the next few years.

A committee of approximately 25 faculty and staff met on August 27, 2014 to begin the strategic planning process and continued working on the plan during 11 additional meetings (concluding on April 22, 2015). Additional work was carried on by the participants and the facilitator outside the meetings.

The existing vision, organizational values, and mission statement were reviewed and revised to reflect current ideas and plans for the future of the department.

This report includes the new vision, organizational values, mission statement, goals, objectives, priorities, and action plan to implement the strategic plan.

DEPARTMENT OF COMMUNICATION SCIENCES & DISORDERS

VISION

A world-class center for transformative research, teaching, and learning, the Department of Communication Sciences and Disorders at the University of Central Florida is a leader in community-based programs that support and empower individuals affected by communication disorders.

ORGANIZATIONAL VALUES

The faculty, students, and staff of the Department of Communication Sciences and Disorders believe in the right of all individuals to live a full and rewarding life. It is in the context of valuing the quality of life for individuals affected by communication disorders that we commit ourselves to the following:

Respect: We hold in high regard the diversity of all people, cultures, and perspectives.

Ethics: We value ethical conduct as essential to our research, educational, and clinical practices.

Scholarship: We value scholarship through the generation, acquisition, and dissemination of knowledge.

Partnerships: We value local, national, and international partnerships, in service to the profession, academia, and the greater community.

Excellence: We are committed to the pursuit of excellence in all endeavors.

Collaboration: We believe that better outcomes emerge when people work together to achieve common goals.

Trustworthiness: We believe in openness, honesty, and transparency in all our words and deeds thereby creating a climate of trust and collegiality.

MISSION

The Department of Communication Sciences and Disorders empowers our students to achieve their greatest potential as clinicians, scientists, scholars, and professionals. By providing the foundations of our discipline and through the use of innovative technology, we enable our graduates to be leaders who positively impact individuals and their communities.

GOAL STATEMENTS

Goal - To provide ongoing opportunities for faculty and staff professional development.

Goal – To offer our students the skills to pursue a fulfilling career and foster a sense of responsibility to self and others

Goal –To increase and diversify external funding initiatives

Goal – To provide an environment that emphasizes a robust research culture

Goal – To ensure that our integrated academic and clinical programs are relevant, innovative, and of service to the community

Goal – To establish partnerships and facilitate collaboration within the university and the greater community

PRIORITY OBJECTIVES

Tier One

- (16) Pursue the use of simulation for academic and clinical preparation
- (15) Develop a new doctoral program based within the department (restructure of existing program)
- (14) Provide additional resources to obtain internal and external grants
- (13) Establish mechanisms for student input/voice at both undergrad and graduate levels (advisory committee, forums, NSSLHA, faculty meetings, comment box, survey, etc.)
- (13) Develop market-based programs – needs of partners (alternative models) – meet accreditation standards (consortium)
- (13) Continue to fully integrate academic and clinical aspects of the program as appropriate

Tier Two

- (11) Address needs and assignment of adjuncts – recruitment, professional learning, mentoring, manual, ethics, etc.
- (10) Provide regular, ongoing professional learning opportunities for faculty, staff and community professionals – internal (visiting) and external (traveling)
- (10) Increase student engagement in research
- (10) Establish advisory boards for the department
- (9) Expand clinic revenues and profitability

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
1. To provide ongoing opportunities for faculty and staff professional development	<p>1.1. Address needs and assignment of adjuncts – recruitment, professional learning, mentoring, manual, ethics, etc.</p> <p>1.2. Provide regular ongoing opportunities for faculty, staff, and community professionals - internal and external</p>	<p>1.1.a Take a baseline measure to determine overall experience as an adjunct, suggestions to improve experience, etc.</p> <p>1.1.b Create methods to improve adjunct experience based on feedback</p> <p>1.1.c Create an Adjunct Mentor/Monitor position</p> <p>1.2.a. Develop a monthly research colloquium that is open to students</p> <p>1.2.b. Extend program to nearby departments such as USF and Jacksonville</p>		initially by new faculty followed by seasoned faculty	After first year	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
2. To offer our students the skills to pursue fulfilling careers and foster a sense of responsibility	2.1.a. Establish 3 mechanisms for more student input at: Undergraduate level - add 3 mechanisms. Graduate level - add 3 mechanisms. Review and act upon that feedback	2.1.a. Contact Linda, Cecyle, and Richard to identify current mechanisms	1	Todd	March 31, 2015	
		2.1.b. Speak with NSSLHA officers for input on possible mechanisms	3	Gillian	March 31, 2015	
		2.1.c. Investigate possibility of student attendance at portions of faculty meetings	4	Todd/Richard/faculty	April 1 meeting	
		2.1.d. Learn Qualtrics operations to post surveys for undergraduate and graduate students	5	Todd with faculty volunteers	End of 2015	
		2.1.e. Comment boxes for undergraduates in department and in dept. and clinic for graduate students	2	Gillian	March 31, 201	
		2.1.f. Increase membership in NHSSLHA by ___%	7	Faculty	End of 2015	
		2.1.g. Define who would review feedback	6	Faculty	End of 2015	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
3. To increase and diversify external funding initiatives	3.1. Expand clinic revenues	3.1.a. Increase clinic fees by 10% over current fiscal year. Target goal for audiology fees for year 1 (new audiologist) \$35,000. Target goal for therapy fees for FY 2015-16: To be determined based on year end \$		Debra/Clinical faculty	July 1, 2015- June 30, 2016	
		3.1.b. Establish administrative overhead with ORC regarding research space for grants involving clinical space		Debra, Richard, Kerry	Summer 2015	
		3.1.c. Establish collections procedures to increase collections for past due accounts >3-6 months past due with the goal of increasing collections by 10% on these accounts		Debra, Joanne	December 1, 2015	
		3.1.d. Establish baseline fees for voice/swallowing clinic line with incremental increases of ____% per year after year one		Debra, Associated faculty	July 1, 2016	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
<p>4. To provide an environment that emphasizes a robust research culture</p>	<p>4.1. Increase research among faculty by providing additional resources to obtain internal and external grants (private and federal agencies)</p>	<p>4.1.a. Research coordinator for the department to configure boiler plate/standard information and prepare checklist of needed items for individual proposals</p>		<p>Chair</p>	<p>Appointment August 2015; prepare checklist Dec. 2015</p>	
		<p>4.1.b. Statistical consultant available to department faculty</p>		<p>Chair</p>	<p>August 1, 2015</p>	
		<p>4.1.c. Submit 1 in-house grant proposal each year during eligibility period-internal</p>		<p>Newly hired faculty, junior faculty</p>	<p>End of academic year 2015-16</p>	
		<p>4.1.d. Obtain baseline information relative to internal and external grant proposal writing last 5 years</p>			<p>End of academic year 2015-16</p>	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
		4.1.e. Increase number of submissions by 2 and number of submitting faculty by 2 - external		All research active and intensive faculty; clinical faculty when interested; teaching intensive faculty when interested	End of academic year 2015-16	
		4.1.f. Increase number of submissions by 3 and number of submitting faculty by 4			End of academic year 2016-17	
		4.1.g. Increase number of submissions by 4			End of academic year 2017-18	
		4.1.h. Increase number of submissions by 5			End of academic year 2018-19	
		4.1.i. Reduction in service assignment for faculty who are research intensive		Chair	August 1, 2015	
		4.1.j. Pivot data conformed to individual faculty members' profile		ORC	December 1, 2015	
		4.1.k. Access to review committees with expertise relevant to proposal being prepared		College Research Council	Fall 2015	
		4.1.l. Regular research meetings in the department (see also 1.2.a.)		Research Coordinator	Fall 2015	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
	4.2. Increase student engagement in research	4.1.m. Annual evaluation credit given for proposal submissions (as well as for funded proposals)		Chair	End of each academic year	
		4.2.a. Establish Student Research Coordinator position (see Research Coordinator position above)		Chair	August 8, 2015	
		4.2.b. Obtain baseline information relative to research activities in CSD - past 5 years		Academic and clinical faculty in CSD	September 30, 2015	
		4.2.c. Establish Open House Research Forum (see also 1.2.a.)			Fall 2015	
		4.2.d. Develop curriculum change proposal(s) to support student research; move Research Design course to semester 1			December 31, 2015	
		4.2.e. Develop new incentives for master's students to complete theses			December 31, 2015	
		4.2.f. Set goal to increase frequency of identified student research products based on baseline findings			September 30, 2015	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
5. To ensure that our integrated academic and clinical programs are relevant, innovative, and of service to the community	5.1. Pursue the use of simulation for academic and clinical preparation	5.1.a. Identify research pertaining to simulation (lit. review). This could be a GA, thesis student, or doctoral student activity		Grad Assist., thesis/doc student	End of Fall 2015	
		5.1.b. Obtain feedback relative to the 3 simulation white papers delivered in Fall 2014		Dean	End of Fall 2015	
		5.1.c. Identify current ASHA standards referencing verification of competencies and accrual of clinical clock hours		Committee	End of Fall 2015	
		5.1.d. Identify current simulation models available at universities/in the marketplace (psychology)		Committee	Spring 2016	
		5.1.e. Identify possible community partners interested in simulation (hospitals, comp. gaming, military)		Committee	Spring 2016	
		5.1.f. Identify UCF simulation projects (psych, CSD, CompSci, Engin, IST, Nursing, Educ)		Committee	Spring 2016	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
		5.1.g. Present research on ongoing simulation practices to faculty		Faculty	Spring 2017	
		5.1.h. Identify and select appropriate course objectives for ASHA competencies that might be used for simulation		Faculty	Spring 2017	
		5.1.j. Identify scenarios for simulation		Faculty	Fall 2017	
		5.1.i. Progress to funding with a seed project by IST		Faculty/IST	Spring 2017	
		5.1.k. Move to external grant Funded submission			Spring 2018	
	5.2. Develop a new doctoral program based within the department (restructure of existing program)	5.2.a. Obtain baseline information on best pathway to transition from CSD track to stand alone PHD program		CSD Doctoral Program committee: Co-chairs with support & input from Doctoral Program Committee	December 31, 2015	
		5.2.b. Review other internal and external related aspirational program documents			December 31, 2015	
		5.2.c. Develop business plan			April 30, 2016	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
	5.3. Develop market-based programs - needs or partners that meet accreditation standards	<p>5.2.d. Obtain feedback from alumni & faculty</p> <p>5.2.e. Take a draft proposal to faculty at large for discussion and vote</p> <p>5.2.f. Prepare relevant documents for Dept., COHPA, UCF, and state of FL official approval of new PhD program</p> <p>5.2.f. Additional specific goals and objectives will be developed when above activities are completed</p> <p>5.3.a. Develop a market-based program focused on preparing master level SLPs to serve school-age students with communication disorders</p> <p>5.3.b. Develop a market-based program that has a goal to prepare master level SLPs to respond to community needs</p> <p>5.3.c. Develop a market-based program that has a major focus to create an interdisciplinary curriculum (inter-professional education/practice)</p>		Committee	<p>December 31, 2015</p> <p>April 30, 2016</p> <p>June 30, 2016 (or other deadline defined externally)</p> <p>2015-16 Academic year</p> <p>write proposal by July 1, 2015</p>	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
	5.4. Continue to fully integrate academic and clinical aspects of the program as appropriate	<p>5.4.a. Collect data on current integration of academic and clinical components for establishing baseline measure of which courses have existing interactions between academic and clinical faculty for the student's education.</p> <p>5.4.a.1. Create and distribute survey to collect data mentioned above</p> <p>5.4.b. Establish partnerships of academic/clinical faculty based on specialty practice area</p> <p>5.4.c. Initiate visibility and exposure of team partners in either environment through a variety of means (For example: promoting clinical participation in academic course and academic participation in clinical seminars/practica. Also, collaboration of partners for student projects, research, etc.</p>		<p>Master's Program Committee</p> <p>Master's Program Committee</p> <p>Master's Program Committee</p> <p>All faculty</p>	<p>Dec. 2015</p> <p>Dec. 1, 2015</p> <p>May 1, 2016</p> <p>May 1, 2016</p>	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
		5.4.d. Develop strategies for integration of course and clinical content by implementing clinical based case studies or projects (academic presence in supporting EBP in clinic - brown bag discussions with students perhaps)		Master's program committee	April 1, 2017	
		5.4.e. Academic faculty assignments in clinic		Department Chair	April 1, 2017 (or sooner)	
6. To establish partnerships and facilitate collaboration within the university and the greater community	6.1. Establish a minimum of three advisory boards for the department	6.1.a. Identify the overarching purpose of each board		Faculty	Fall 2015	
	6.2. Establish student feedback board	6.2.a. Review SPI and Qualtrics for academic and clinical faculty to assess need		Committee	2015-16	
		6.2.b. Recruit participants for student feedback board			Fall 2016	
		6.2.c. Establish meeting schedule based on identified needs			Fall 2016	
	6.3. Establish community board	6.3.a. Recruit Externship Supervisors, local alumni and 2 UCF clinical educators		Committee	Spring 2016	

Goal	Objective	Action	Priority	Responsibility	Timeline	Status
		6.3.b. Establish meeting schedule based on identified needs			Spring 2016	
	6.4. Establish inter-professional board	6.4.a. Recruit PTs OTs, MDs, Neurologists, etc.		Committee	Fall 2017	
		6.4.b. Establish meeting schedule based on identified needs			Fall 2017	
	6.5. Establish aphasia house board	6.5.a. Recruit faculty, brain injury survivors, caregivers, and medical professionals		Committee	Spring 2016	
		6.5.b. Establish meeting schedule based on identified needs			Spring 2016	
	6.6 Continue Consortium Board	6.6. a. Request input from current Consortium Board re: program reconfiguration		Committee	Fall 2015 and ongoing	