



# STRATEGIC PLAN REPORT

2021

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## Dr. Gerald Niznick College of Dentistry Values:

- **Social Accountability**

Fostering community engagement, committed to guiding oral health education and service toward addressing the priority health concerns of our community.

- **Collaboration**

Building meaningful relationships and partnerships with learners, intra- and interprofessional colleagues, patients, clients, and all community stakeholders; reaching goals through shared efforts.

- **Equity, Access and Participation**

Creating an environment that promotes and supports a positive and respectful work/learning environment for our learners, staff, faculty, patients, clients, and community members.

- **Scholarship and Innovation**

Promoting and supporting the advancement of oral health care through education, service, research, and technologies.

- **Professionalism**

Working towards the highest ethical and professional standards of the oral health care profession; to be competent, accountable, and reliable professionals and engaging constructively with the community to shape the future of oral health care.

- **Care and Compassion**

Acting with respect, empathy, and kindness to meet the needs of those we serve and provide excellent person-centered oral health care.

## Introduction

### Overall Goal of the Strategic Planning Process

The overall goal of the strategic planning process was to develop a clear understanding of a mission, and a vision, and by using a collaborative consultative process, develop a strategic plan to guide the Dr. Gerald Niznick College of Dentistry (CoD) for the next three to five years.

### Process

The strategic planning process began in the spring of 2021 with an environmental scan conducted by Marcia Langhan, director, policy and planning, Rady Faculty of Health Sciences (RFHS). Using the scan, the Dr. Gerald Niznick College of Dentistry identified key criteria to be considered for a strategic plan which was then used as a starting point for the strategic planning retreat held on June 7 and 14, 2021. The retreat was held virtually over two half days (agenda and presentation materials Appendix 1; pre-retreat reading Appendix 2). Using an appreciative inquiry planning process (see Appendix 3), members of the CoD reviewed the environmental scan, and, in small groups, identified key goals, priorities for action, suggested resources and outcome measures. Focus groups were also held with community-based faculty using the same discussion framework. These discussions were documented by participants using strategic planning worksheets (Appendix 4). These worksheets were analyzed, grouped into common areas under the strategic planning Pillars, and the draft document was circulated to college staff, faculty and students for feedback. The recommendations were incorporated in the final document presented here.

The planning process included the following components:

#### 1. Resources:

- a. Mission statement:  
*We educate our learners to be skilled, evidence-informed, collaborative, and caring oral health professionals and advocates, partnering with and serving our diverse community*
- b. Pre-reading materials (see Appendix 2)

#### 2. Actions:

- c. Review mission and vision statements
- d. Receive input from all and share widely on:
  - i. Draft of the strategic plan
  - ii. Draft of action plan (when, where and how)

#### 3. Review achievements yearly and adjust priorities:

- e. Measurable outcomes
- f. Advance action items of the strategic plan
- g. Identify champions to lead each action item

#### 4. Revisit and adjust the action plan yearly

## Executive Summary

The strategic plan for the Dr. Gerald Niznick College of Dentistry is aligned with the Rady Faculty of Health Sciences and University of Manitoba (UM) Strategic Plans. Each of these two plans has identified five pillars, which have been used to conceptualize the CoD's planning process and ultimately the organization of this strategic plan. For each of these pillars, the CoD has identified priority goals. Faculty members in the CoD identified the actions, processes, resources and champions necessary to achieve each goal. To assess the success of the plan's desired outcomes, as well as associated measures, potential instruments have been identified for each goal to assist with measuring and/or tracking its achievement. Each pillar and its associated goals are included in the executive summary. They are described in more detail in the section titled The Plan.

Strategic plans are intended to be living documents that are useful to stakeholders for determining priorities, assigning resources and measuring progress. However, as living documents, they should be reviewed annually and adjusted in response to changes in needs, context and/or resources.

### Pillar 1: Education

Students will have broad and diverse evidence-based learning experiences from a variety of settings including pre-clinic, clinic, community and research environments.

**Goal 1:** Provide a strong undergraduate and graduate curriculum linked to clinical practice and college research.

**Goal 2:** Expand digital curriculum across programs to include three sub-goals:

Sub-goal 1: Creation and utilization of digital software workflows and laboratory equipment.

Sub-goal 2: Enhance software literacy.

Sub-goal 3: Expand online/virtual teaching and learning.

**Goal 3:** Convert dental hygiene diploma to a degree.

**Goal 4:** Increase and enhance research exposure for students through education programs that support the development of research skills for CoD learners and develop capable researchers who are highly competitive in obtaining external research funding and producing high-quality productive research programs.

### Pillar 2: Research and Innovation

Continue to develop, expand and support collaborative research and innovation within the CoD and the RFHS.

**Goal 1:** Building on our strengths, increase research capacity and enhance collaborative research opportunities, particularly between clinical and research-oriented departments.

**Goal 2:** Secure a Research Chair within the CoD that further enhances the research strengths of the CoD.

### **Pillar 3: Our People**

Create a positive and respectful work/learning environment for CoD students, staff, faculty and patients/clients.

**Goal 1:** Ensure good communication between programs, divisions, intra- and inter-departmental units. Academics and staff work in collaboration for departmental growth and learning opportunities.

**Goal 2:** Apply equity, diversity and inclusion principles throughout program offerings and everyday teaching, research and clinical services.

**Goal 3:** Encourage professional development/advancement opportunities across all levels of staff, faculty and graduate students. Provide career development and advancement opportunities.

**Goal 4:** Build a sense of community in the CoD.

### **Pillar 4: Community and Partnerships**

Foster community engagement and be socially accountable through evidence-based patient-centred care. Enhance partnerships that contribute to the success of the CoD and the community.

**Goal 1:** Enhance access to services and clinics, and expand our social accountability.

**Goal 2:** Enhance and expand the provision of professional services and care.

### **Pillar 5: Sustainability and Impact**

Support and optimize the CoD infrastructure, faculty member capacity and operations. Be recognized nationally and internationally for the CoD's impact.

**Goal 1:** Support the people in the CoD to contribute to the success and impact of the CoD.

**Goal 2:** Update Infrastructure to ensure the CoD can achieve its mission, vision and strategic goals.

**Goal 3:** Engage in promotion and advocacy activities that will raise the profile of the CoD within the University of Manitoba, to its stakeholders and patients/clients, and to national and international oral health communities.





## The Plan

The plan is organized around the five pillars identified in the strategic plan and is aligned with the RFHS and University of Manitoba strategic plans. Within each pillar, the CoD has identified goals, actions, champions and desired measurable outcomes.



## Pillar 1: **EDUCATION**

Students will have broad and diverse evidence-based learning experiences from a variety of settings including pre-clinic, clinic, community and research environments.

**GOAL 1:** Provide a strong undergraduate and graduate curriculum linked to clinical practice and CoD research.

To attain this goal, the following **actions** will be engaged:

1) Complete an undergraduate dentistry curriculum review:

- i. Enhance education in terms of professionalism, patient-centred care, communication, health promotions, EDI, and IPE
- ii. Update and align the didactic content of the curriculum with pre-clinical and clinical teaching
- iii. Ensure high-quality diverse clinical learning experiences for CoD learners
- iv. Support the development of research skills for CoD learners through education programs
- v. Enhance internal collaboration between undergraduate and graduate programs in patient-centred care

2) Expand patient pool for clinical teaching.

To complete these goals, the following **resources** and **processes** will be required:

- CoD's educational specialist
- Curriculum review expertise from outside the CoD
- Creation of an ad hoc Curriculum Review Committee
- Protected faculty time to meaningfully engage in the review process
- Collaboration with other dental and dental hygiene schools
- Engagement with relevant subject matter experts, such as CoD and RFHS EDI, IPC, Ongomizwin representatives and CCOH directors
- Supports to attract a diversity of patients and clients, including funding. Diversity to include age, socio-economic status, special needs, etc.
- Software to assist with tracking patient referral, treatment and disposition across all clinics
- Screening clinics in the community that may link patients to the CoD
- Patient coordinators to ensure good service and treatment are provided; focus on and enhance the patient experience in clinics
- A full complement of clinical teaching staff
- Review compensation models for part-time faculty
- Early exposure to clinical experiences for students



- Provide internal and external rotations in a variety of clinical settings (e.g. community, rural, urban, remote, Indigenous, etc.)
- Support increased rotations for senior students including for outreach/experiential learning in northern, rural and Indigenous locations
- Ensure teaching focuses on the holistic approach to patient care
- Continued and enhanced partnerships with medicine (e.g. transplant, CancerCare, CHRIM, etc.) to provide externships for learners
- Opportunities for collaboration in patient care between graduate and undergraduate students are explored, using concepts such as near-peer teaching and graduated responsibility for care

The following have been identified as **champions** for this goal:

- College’s educational specialist
- CATL
- Ad hoc Curriculum Review committee
- Department heads and course coordinators
- Ongomiizwin Elders and Knowledge Keepers
- RFHS and CoD EDI representatives
- RFHS IPC Office
- CCOH directors
- Dean and associate deans (academic, clinical and research)
- Director of student affairs and academic services
- Graduate program directors
- Learners

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Students exposed to a wide variety of patients	Student tracking of patient encounters shows exposure to a diverse patient population (demographics)
Alumni/Employer feedback about program is positive	Alumni/Employer survey
Student feedback about program is positive	<ul style="list-style-type: none"> <li>• Student evaluation of courses and teachers</li> <li>• Exit surveys of graduating undergraduate and graduate students by director of student affairs and academic services.</li> <li>• Exit interviews of graduating undergraduate students by the dean of the CoD and the director of the SDH</li> </ul>
Meaningful changes introduced that address gaps and needs, including IPE, EDI, Indigenous care, health promotion, communication, patient-centred care, professionalism	Curriculum mapping pre/post change documents changes made across course
Patients are satisfied with improved care	Patient satisfaction survey
Increased number of externships available	Number of externships (trends)
Less delay in patient care	Tracking of time from referral/beginning of care to “discharge” (trends)

**GOAL 2:** Expand digital curriculum to include three sub-goals:

**Sub-goal 1: Creation and utilization of digital software workflows and laboratory equipment.**

To attain this goal, the following **action** will be engaged:

- 1) Create a strategic plan to implement further teaching about the utilization of digital platforms across all programs with increased funding for capital investment and human resources

To complete this goal, the following **resources** and **processes** will be required:

- Dean’s ad hoc Digital Infrastructure Committee to create a strategic and operational plan for digitization and implementation of digital technologies in the curriculum
- Faculty and staff with the knowledge to support and champion this goal
- Full-time CoD’s IT position to support this initiative

The following have been identified as **champions** for this goal:

- Chair and members of the Dean’s ad hoc Digital Infrastructure Committee
- Course coordinators
- College’s IT specialist

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Increased utilization of digital platforms and workflow by faculty and staff	<ul style="list-style-type: none"> <li>• Faculty survey pre/post</li> <li>• Number of digitally planned and fabricated prostheses</li> </ul>
Alumni/employer feedback about graduate knowledge is positive	Alumni/Employer survey
Student feedback is positive	Student evaluation of courses (includes questions about digital components where appropriate)
Increased utilization of current equipment by graduate and undergraduate students	Track the number of procedures performed utilizing digital equipment

**Sub-goal 2: Enhance software literacy.**

To attain this goal, the following **actions** will be engaged:

- 1) Provide training to support staff and faculty with the variety of software needed for teaching and administration (e.g., Microsoft Teams)
- 2) Create time outside of regular responsibilities for this training. Provide consistent on-boarding and training protocols for new faculty and staff

To complete this goal, the following **resources** and **processes** will be required:

- Conduct a staff and faculty training needs assessment
- Determine available training opportunities at the university
- Identify CoD champions who can train others
- Identify time during each term to devote to training and schedule training

The following have been identified as **champions** for this goal:

- Senior administrator
- College’s educational specialist
- University and IST trainers

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Feedback from user groups is positive	Faculty and staff survey
Training is recognized and valued	Annual performance reviews
Software is utilized appropriately	Utilization statistics (where possible)

**Sub-goal 3: Expand online/virtual teaching and learning**

To attain this goal, the following **actions** will be engaged:

- As part of the CoD curriculum review process, develop a plan to build on the digital transitions in response to COVID-19 and explore creative ways to expand this
- Explore a mix of asynchronous and synchronous learning, using appropriate and effective teaching methodologies. These will include expanding digital dentistry and virtual clinics

To complete this goal, the following resources and processes will be required:

- Work with Educational Specialist, ad hoc Curriculum Review Committee and CATL with a focus on online course delivery and suitable content
- Charge the ad hoc Curriculum Review Committee to review and recommend options for online/virtual teaching and learning as part of the review process
- Survey students and faculty re: attitudes and experiences of synchronous versus asynchronous and online versus in-person
- Engage CATL expert in online learning as a consultant in the planning process
- Invest in digital resources through funding for additional technology, editing software, etc.

The following have been identified as **champions** for this goal:

- College’s educational specialist
- Ad hoc DMD Curriculum Review Committee
- CATL
- Associate dean (academic)

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Feedback from stakeholders is positive	<ul style="list-style-type: none"> <li>• Faculty and staff survey</li> <li>• Student survey</li> </ul>
Student performance in program is unchanged/ improved	Student performance on assessments/exams
Online/virtual resources are utilized by students/ faculty	Utilization statistics (where possible)

**GOAL 3:** Convert Dental Hygiene Diploma to a Degree.

To attain this goal, the following **actions** will be engaged:

1) Review and revise curricula to meet criteria for a degree program. Obtain university approval for change and implement considering available resources

To complete this goal, the following **resources** and **processes** will be required:

- Increase faculty positions for teaching in the DH program
- Support staff to help facilitate the transition

The following have been identified as **champions** for this goal:

- Director of the School of Dental Hygiene
- Dean
- Faculty

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Graduate employment opportunities are expanded (beyond private practice dentistry)	Graduate survey
Increased applicants to dental hygiene program	Application statistics (comparison year-to-year)
Increased opportunities for dental hygiene research	Increased research activity

**GOAL 4:** Increase and enhance research exposure for students through education programs that support the development of research skills for CoD learners and develop capable researchers who are highly competitive in obtaining external research funding and producing high-quality productive research programs.

To attain this goal, the following **actions** will be engaged:

- Increase student awareness of research performed at the CoD and the opportunities for them to participate both at undergraduate and graduate levels
- Increase student exposure to the B.Sc. (Dent.) program
- As part of the curriculum review process, identify opportunities for students to participate in research and where the teaching of research methods can be enhanced

To complete this goal, the following **resources** and **processes** will be required:

- Consider implementation of an “introduction to research” course in first year to expose all UG students to research; vertically integrate this throughout entire DH and DMD programs
- Prepare graduate students in basic research methodology to encourage further research
- Strengthen the B.Sc. (Dent.) program by increasing opportunities for participation and increasing stipends
- Promote attendance at B.Sc. (Dent.) presentations
- Initiate and/or enhance research mentorship of UG students by faculty

- Promote current research of faculty to students via a “live” research web page, provide opportunities for students to connect with faculty via the webpage
- Increase the number of UG students participating in research
- Annual CoD Research Fair

The following have been identified as **champions** for this goal:

- Associate dean (research)
- Associate dean (academic)
- Ad hoc Curriculum Review Committee

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Increased student enrolment in the B.Sc. (Dent.) program	Application statistics
Increased student application for graduate programs	Application statistics
Increase in scholarly output (publications, poster and paper presentations, etc.)	<ul style="list-style-type: none"> <li>• Annual report of scholarly activity – departments</li> <li>• Annual report of scholarly activity – performance reviews</li> </ul>
Oral biology graduate students who continue in research and/or develop their own labs	<ul style="list-style-type: none"> <li>• Graduate student – post-graduation survey</li> <li>• Graduates returning to teach (count)</li> </ul>



## Pillar 2: **RESEARCH AND INNOVATION**

Continue to develop, expand and support collaborative research and innovation within the CoD and the RFHS.



**GOAL 1:** Building on our strengths, increase research capacity and enhance collaborative research opportunities, particularly between clinical and research-oriented departments.

To attain this goal, the following **actions** will be engaged:

- Continue with and enhance established research clusters to improve collaborations within and outside the CoD
- Encourage collaborative research with the establishment of Manitoba Chemosensory Biology Group
- Strategic recruitment of faculty members who are focused on research (researchers) in our areas of strengths
- Provide adequate administrative support for researchers (so they can focus on research)
- Enhance research mentorship for faculty
- Protect research time for all faculty
- Create a clinical faculty research-intensive position
- Develop funding for post-doctoral fellows and graduate students

To complete this goal, the following **resources** and **processes** will be required:

To develop clusters:

- Develop an evaluation plan to assess cluster performance and viability
- Identify priorities for research topics
- Identify cluster lead roles and responsibilities
- Ensure cluster leads have adequate time to support the cluster's success
- Consider expanding the number of clinical research clusters
- When recruiting new clinicians, CoD search committees include discussions about research activities in the department and promote opportunities for clinicians to participate in research where possible

To enhance resources:

- Develop a long term strategic plan for research infrastructure, (e.g. physical space, (lab space) and up-to-date technology, including an implementation plan
- Ensure awareness of supports for research (e.g. libraries, Centre for Healthcare Innovation, core facilities, other RFHS resources)
- Improve accessibility of research tools and equipment
- Secure additional funding for research (at the CoD level – external or internal resources)

To enhance human resources:

- Recruit competitive/highly trained and experienced academics with 50 per cent research allocation

To increase awareness of current research within the CoD:

- Create a research map for the faculty and communicate that map regularly to all faculty members, graduate and UG students
- Host research events to highlight current CoD research
- Acknowledge B.Sc. (Dent.) students through the research webpage
- Leverage research day to promote CoD research within the CoD and across the university

Mentorship for “new” researchers:

- Create a list of available research mentors
- Provide protected time for mentorships
- Provide training for mentors and mentees

Support for Clinician Scientists:

- Secure funding with protected research time
- Clinical instructors to backfill clinicians who need protected time for research
- Support from clusters and support staff for clinical faculty to do research

The following have been identified as **champions** for this goal:

- Department heads
- Cluster leads
- Dean
- Associate dean (research)
- Research program leads

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Desired Measure/Instrument
Increase in funded grants and grant applications (national and international)	Number of funded grants/grant applications (trends)
Increase in peer-reviewed publications from faculty. Including case reports (not always peer-reviewed)	Number of publications/faculty demographics (trends)
Increase in mentoring relationships	Number reported (trends)
Increased scholarly activity (oral and poster presentations)	Trends in presentations
Increase in new clinical trials. Break-through in clinical findings	Count/trends
Cluster reports describing deliverables from the cluster – or an alternative proposal	(E.g. number of projects/status of projects, number of publications, number of collaborators)
Infrastructure needs are addressed	Lab space renovations (number/trends), lab space is fit for purpose based on evaluations from faculty and students

**GOAL 2:** Secure a research chair within the CoD that further enhances the research strengths of the CoD.

To attain this goal, the following **actions** will be engaged:

- Create proposal for a research chair(s)
- Secure funding for research chair(s)

To complete this goal, the following **resources** and **processes** will be required:

- Identify potential areas for a research chair based on CoD research strengths and priority areas
- Identify potential funding sources for research chairs
- Establishment of INDONE research chairs that are funded internally through donations

The following have been identified as **champions** for this goal:

- RFHS dean
- Donor relations
- Dean
- Associate dean (research)

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
CoD expertise recognized nationally and internationally	Invited talks. Invited 'visiting professor'
Increase in funded grants and grant applications (national and international)	Number of funded grants/grant applications (trends)
Peer-reviewed publications from a greater variety of academics	Number of publications/faculty demographics (trends)
Establishment of at least one research chair	Number of research chairs

## Pillar 3: **OUR PEOPLE**



Create a positive and respectful work/ learning environment for CoD students, staff, faculty members, patients and clients.

**GOAL 1:** Ensure good communication between programs, divisions, intra- and inter-departmental units. Academics and staff work in collaboration for departmental growth and learning opportunities.

To attain this goal, the following **actions** will be engaged:

1) Improve communication channels through collegial, inclusive and streamlined processes

To complete this goal, the following **resources** and **processes** will be required:

- Regular meetings of stakeholders
- Monthly departmental/team meetings with staff and faculty to bring people together
- Meetings across departments for more collaborative opportunities
- Processes and communication between departments to identify areas for improvement
- Implementation of processes to support two-way communication from end-users, such as suggestion boxes
- Phone and email directory accessible to all and updated regularly
- Visual chart of staff roles and clarity of the chain of communication, indicating who is responsible to communicate with whom
- Individual engagement
- Ensure broad input and open dialogue for CoD decisions that have wide-reaching implications

The following have been identified as **champions** for this goal:

- Individual members of the CoD
- Department heads
- College administrator/HR officer
- Dean and associate deans (academic, clinical, research)

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Faculty, staff and students are satisfied with communication and work/learning environment	Surveys
Increased feedback from stakeholders resulting in tangible improvements	Tracking of suggestions and their disposition
Ease in recruitment and retention of faculty and staff	<ul style="list-style-type: none"> <li>• Position retention/turn-over trends</li> <li>• Length of position vacancies</li> <li>• Number of first offers accepted</li> </ul>

**GOAL 2:** Apply equity, diversity and inclusion (EDI) principles throughout program offerings and everyday teaching, research and clinical services.

To attain this goal, the following **actions** will be engaged:

- 1) Uphold values being taught by the EDI concept, Indigenization of the curriculum, anti-racism, etc. to create both **clinically competent and morally ethical learners** in a safe environment
- 2) Uphold values being taught by the EDI concept to support a **transparent and respectful work environment**

To complete this goal, the following **resources** and **processes** will be required:

*In General, to meet this goal:*

- Training of faculty and staff in EDI concepts and their application in teaching, learning and the workplace contexts
- Support and assistance from:
  1. RFHS EDI committee
  2. Ongomiizwin
  3. RFHS Truth and Reconciliation Action Plan
  4. CoD EDI officer
- EDI in the Curriculum
- Curriculum mapping process, to review EDI content and help identify best spots for further incorporation
- Transparent and respectful work environment
- Confidential staff “advocate” to assist and provide coaching for bringing concerns to admin/management
- Equity between professions (DMD, DH, and DA)
- Meetings to include all
- Shared management of patients

The following have been identified as **champions** for this goal:

- CoD EDI officer
- RFHS EDI committee
- Ongomiizwin
- Dean and associate deans (academic, clinical, research)
- Ad hoc curriculum review committee



The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Stakeholders feel included	Patient, staff, faculty surveys on EDI (work/ learning environment)
Students feel included and diversity respected	<ul style="list-style-type: none"> <li>• Exit surveys of graduating undergraduate and graduate students by director of student affairs and academic services</li> <li>• Exit interviews of graduating undergraduate students by the dean of the CoD and the director of the SDH</li> <li>• Student reports (end of course evaluations)</li> <li>• RFHS Speak up button reports</li> </ul>
Staff and faculty able to talk about incidents and have constructive dialogue without fear of reprisals	Staff and faculty surveys on work environment
Recruit and retain a diverse workforce	Workforce demographics

**GOAL 3:** Encouragement of professional development/advancement opportunities across levels of staff and faculty. Provide career development and advancement opportunities.

To attain this goal, the following **actions** will be engaged:

1) Empower CoD team members through education and shared goals; foster leadership, initiative, and innovation

To complete this goal, the following **resources** and **processes** will be required:

- Promote professional development relevant to the needs of CoD team members (e.g. leadership training)
- Provide funding for professional development and protected time for participation
- Identify career paths for faculty and staff, and individual career plans with developmental milestones
- Create an internal mentorship committee to assist department heads one-on-one in early and mid-career development of faculty
- Acknowledge career advancement/milestones in the CoD (awards, announcements, etc.)
- Provide opportunities for people to provide leadership – formal and informal and celebrate this

The following have been identified as **champions** for this goal:

- Individual CoD team members
- College administrator
- Managers
- Tenure and Promotion Mentorship Committee
- Dean
- Department heads/directors

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Staff are satisfied with their career in the CoD	Staff and faculty surveys
Retention of staff/faculty is improved	Staff /faculty turnover and retention trends (year over year). Exit interviews.
<ul style="list-style-type: none"> <li>• Staff /faculty advance in their careers</li> <li>• Promotion and tenure preparation improved</li> </ul>	Staff/faculty career progression in CoD, RFHS, and U of M (trends)
Recruitment to CoD is easier	<ul style="list-style-type: none"> <li>• Turnover rates (trends)</li> <li>• Length of position vacancies (trends)</li> <li>• Number of first offers accepted (trends)</li> </ul>
Utilization of CPD is increased	<ul style="list-style-type: none"> <li>• Number applying for CPD funding (trends)</li> <li>• Number successful in funding (trends)</li> <li>• Number of attending CPD (trends)</li> </ul>
Knowledge translation/mobilization is enhanced (e.g. things people learn through CPD are implemented)	<ul style="list-style-type: none"> <li>• Curriculum change requests (trends)</li> <li>• Self-reports (Performance feedback meeting question)</li> </ul>

**GOAL 4:** Build a sense of community in the CoD.

To attain this goal, the following **actions** will be engaged:

- Provide opportunities and supports for CoD team members to build professional and personal relationships
- Support activities focused on CoD team members wellness and community building

To complete this goal, the following **resources** and **processes** will be required:

- Provide opportunities for team members to connect through social interaction/social activities
- Potlucks
- College holiday parties
- Sports days
- Summer barbecues
- Formalize onboarding of new staff – introductions and orientation to the team
- Celebrate achievements
- Support for activities that build social cohesion and community
- Provide physical and mental wellness resources
- Provide mentorship (staff and faculty)

The following have been identified as **champions** for this goal:

- Department heads/directors
- Dean’s office

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Increased satisfaction with work-life and environment	<ul style="list-style-type: none"> <li>• Staff and faculty surveys</li> <li>• Retention of staff and faculty</li> </ul>
Staff and faculty participation at social events	Attendance numbers/trends

Pillar 4:  
**COMMUNITY  
AND  
PARTNERSHIPS**



Foster community engagement and be socially accountable through evidence-based patient-centred care. Enhance partnerships that contribute to the success of our college and our community.

**GOAL 1:** Enhance access to services and clinics and expand our social accountability.

To attain this goal, the following **actions** will be engaged:

- 1) Improve/enhance access to our services (broaden the reach of our clinical services)
- 2) Improve/enhance accessibility to our clinics (make our clinic easier to get to)

To complete this goal, the following **resources** and **processes** will be required:

- Enhance access to services
- Fundraise to enhance our patient care funds
- Explore cost structure and any savings that can be generated
- Introduce geriatric dentistry program, develop expertise in geriatric dentistry
- Provide services to low socio-economic communities; include community dentistry/community patients with a particular focus on geriatric and children
- Improve accessibility in our clinics
- Improve signage to assist patients in finding dental college
- Facilitate parking for patients/address cost of parking
- Provide culturally safe care (see EDI goal)
- Explore accessible delivery of services (e.g. dental van)

The following have been identified as **champions** for this goal:

- Associate dean (clinics)
- Director(s), CCOH
- Dean
- University of Manitoba/RFHS
- Public Health dentistry

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Patients report satisfaction with services	Patient survey
No shows for visits decrease	Tracking of no-shows and reasons (trends)
Patient demographics are diverse – reaching underserved populations	Tracking of patient demographics (trends)
Meeting service purchase agreement targets for patients and populations served	Tracking of targets
CCOH is sustainable	Budget tracking (trends and forecasting)

**GOAL 2:** Enhance and expand the provision of professional services and care.

To attain this goal, the following **actions** will be engaged:

- 1) Creation of sustainable rural/northern externships for undergraduate and graduate students
- 2) Enhance community outreach/partnerships
- 3) Consider geriatric, pediatric and community engagement clinics

To complete this goal, the following **resources** and **processes** will be required:

*In General*

- Secure funding to fully support these initiatives
- Provide training in providing culturally safe care (see EDI goal)
- Ensure adequate administrative and clinical staffing to support (local/onsite)

*For Rural/Northern Externships*

- Recruit community clinicians to help offer/mentor externships
- Support and expand community outreach/partnerships/CCOH
- Collaborate with existing primary health care units that don't have dental units
- Collaborate with Variety Children's Program to support a strong pediatric program in school divisions; consider expanding reach to other school divisions
- Collaborate with various stakeholders such as the WRHA, Shared Health and the MDA/MDHA to secure agreements with CCOH and PSD for priority populations
- Support CCOH to define role as a formal university centre, with a clear mandate to provide oral health to priority populations
- Dedicated CCOH director/public health
- Secure support from Shared Health/WRHA
- Raise awareness through advertisement, brochures, website – ensure populations are aware of CCOH and reduced fees
- Consider providing opportunities for CDI and RRC students
- Reach out to the community regularly to get feedback and raise awareness
- Visits to schools and seniors living facilities to give oral health presentations
- Attend WRHA forum with seniors and advocates representing these groups
- Link with partners outside the university, such as private practitioners who didn't graduate from our college

The following have been identified as **champions** for this goal:

- CSS
- CCOH
- Dean’s office
- Department heads
- RFHS
- Communities as a whole

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Community satisfied with services/outreach	<ul style="list-style-type: none"> <li>• Stakeholder surveys – identifying needs</li> <li>• Stakeholder surveys – satisfaction</li> </ul>
Increase in external rotations	Number and variety of rotations/student



## Pillar 5: SUSTAINABILITY AND IMPACT

Support and optimize our infrastructure, faculty member capacity and operations. Be recognized nationally and internationally for our impact.



**GOAL 1:** Enhance access to services and clinics and expand our social accountability.

To attain this goal, the following **actions** will be engaged:

- 1) Engage in sustainable organization practices. Explore organizational processes that support the sustainability of the CoD, such as inventory management, group purchasing, process mapping etc., to ensure best practices are implemented
- 2) Engage in evidence-based change management strategies
- 3) Review our processes and strive towards environmental sustainability (recycling of PPE, etc.)
- 4) Develop an HR plan that identifies faculty and staffing needed for CoD to fulfill its mission and this strategic plan, including a plan for approval

To complete this goal, the following **resources** and **processes** will be required:

- Review organizational processes to reduce waste, both in terms of inventory, and importantly, in terms of staff time
- Provide all staff/faculty with training on change management and lean practices
- Collaborate with the university sustainability office and student groups to improve our environmental sustainability

The following have been identified as **champions** for this goal:

- Dean
- Department heads/directors
- Project management office
- Sustainability office

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
CoD processes are defined and efficiencies are identified	Project management checklist (PMO)
Increased resources for CoD priority areas from reduction in waste (e.g. inventories)	Reduced spending on inventory items (trends)
Increased suggestions for/identification of areas for improvement	Number of improvement suggestions from CoD team members (trends)
CoD team members' satisfaction with work environment	Staff and faculty survey re: changes in CoD

**GOAL 2:** Update Infrastructure to ensure the CoD can achieve its mission, vision and strategic goals.

To attain this goal, the following **action** will be engaged:

1) Assess and improve infrastructure – teaching space, laboratory space, equipment, digital technology, building space. Develop a priority list for renovations

To complete this goal, the following **resources** and **processes** will be required:

- Develop a plan for infrastructure improvement to include:
  1. Fundraising
  2. Amortization planning
  3. Advocacy within the university “decision making” levels about CoD infrastructure needs
- Assess and identify areas where technology needs to be modernized, including:
  4. Resources and/or resource people needed
  5. Inventory of current equipment, their operating status, and service life
  6. Addressing biosafety concerns
- Identify priority areas, such as material labs, oral surgery, HSC clinic (C3), MDR, AxiUm
- Processes for patient communication (for those without access to email)

The following have been identified as **champions** for this goal:

- All departments
- Dean’s office
- Central administration/donor relations

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Infrastructure plan is developed and operationalized	Plan milestones tracked and met
CoD team members report they have appropriate and accessible infrastructure to support their work	CoD team member workplace survey

**GOAL 3:** Promotion and advocacy – we will engage in promotion and advocacy activities that will raise the profile of the CoD both inside the University of Manitoba, outside to our stakeholders and to our national and international dentistry communities.

To attain this goal, the following **actions** will be engaged:

- 1) Create awareness and communicate our impact within the RFHS/UM community and externally. Participate more fully in RFHS and UM activities
- 2) Promotion and marketing of the CoD services to UM and external communities
- 3) Create awareness and communicate our activities and accomplishment to national and international dentistry and oral healthcare research communities
- 4) Support faculty engagement in provincial/national/international dentistry and dental hygiene organizations to raise the profile of the CoD (e.g., MDA, MDHA, CDHA, CDA, ACFD, NDEB, RCDC, CDAC, ADEA, CADR, IADR, etc.)

To complete this goal, the following **resources** and **processes** will be required:

- Allocate time and resources for promotional activities
- Provide “copy” for university publications, such as UM today, RadyUM, etc., highlighting activities and achievements within CoD
- Increase staff and faculty engagement on university committees
- Communicate opportunities available
- Ensure staff who participate are aware of the scope and range of services provided, impact of research and achievements of faculty, staff and learners
- Communicating our impact nationally and internationally
- Highlight, in our communication tools, faculty who have national/international reputations, are high profile leaders or make an important contribution to dentistry and/or dentistry education
- Highlight the successes of our graduates
- Highlight the impact of our research
- Communicate to our alumni about our achievements (SDH and DMD) to engage them as supporters of the college
- Promote the CoD to our patients and communities with a goal to increase awareness of our services
- Work with RFHS Marketing and Communications on a CoD and CCOH marketing strategy
- Advertise what we can provide external sites and people (e.g. long term healthcare facilities, low socio-economic areas etc.)
- Advertise what we offer within the community, improve communication with general health care practitioners
- Look at different avenues of marketing so we can reach a broader patient pool, increase screenings; make our patients aware of what we offer and that referrals are welcome
- Internal marketing to main campus and RFHS students, staff and faculty
- Spread the word of our services to rural communities
- Consider social media avenue of advertising for each clinic that we service
- Designate students for each class assigned to advertise online
- Show appreciation for referrals

The following have been identified as **champions** for this goal:

- Dean’s office
- Deans, associate deans and department heads/ directors
- All CoD team members
- RFHS Marketing and Communications
- CCOH

The **measurable outcomes** aimed for in this process are:

Desired Measurable Outcome(s)	Measure/Instrument
Increased demand for services	<ul style="list-style-type: none"> <li>• Number of appointments (trends)</li> <li>• Wait time for appointments (first available appointment (trends)</li> </ul>
Increased referrals from dentists and other health care providers, increased variety of procedures and patients seen	<ul style="list-style-type: none"> <li>• Number of referrals, appointments (trends)</li> <li>• Patient demographics (trends in demographics)</li> </ul>
Increased faculty and staff engagement in university committees/decision making	Count of individuals on university-related committees (trends – year-over-year)
Recruitment process is easier	<ul style="list-style-type: none"> <li>• Length of time position vacancies</li> <li>• First offer acceptance rate</li> </ul>
Increased donations of time, resources and funds to CoD	Tracking of donations (trends)

## Appendix 1: Retreat Agenda and Presentation Materials

Dr. Gerald Niznick College of Dentistry | Strategic Planning Retreat | June 14, 2021 | 0900 – 1200

### Agenda Day 1

0900	Welcome and context – Dr. Anastasia Kelekis-Cholakis
0915	Overview of process and report – Identification of Pillars (Anastasia)
0930	Format for the retreat (Joanne Hamilton)
945-1045	<b>Pillar 1: Education</b> Identify strategic priorities and supporting actions (break out rooms – 30 minutes) Report back to larger group
1045 – 1145	<b>Pillar 2: Research and Innovation</b> Identify strategic priorities and supporting actions (break out rooms – 30 minutes) Report back to larger group
1145-1200	Discussion and next steps. (Joanne and Anastasia)

Dr. Gerald Niznick College of Dentistry | Strategic Planning Retreat | June 14, 2021 | 0900 – 1200

### Agenda Day 2

0900-9010	Welcome and recap/review of process – Dr. Anastasia Kelekis-Cholakis
0910-1000	<b>Pillar: Our People</b> (start at group five) Identify strategic priorities and supporting actions (break out rooms – 30 minutes) Report back to larger group (20 minutes)
1000-1050	<b>Pillar: Community and Partnerships</b> (start at group three) Identify strategic priorities and supporting actions (break out rooms – 30 minutes) Report back to larger group (20 minutes)
1050-1100	Stretch break
1100-1150	<b>Pillar: Sustainability and Impact</b> (start at group seven) Identify strategic priorities and supporting actions (break out rooms – 30 minutes) Report back to larger group (20 minutes)
1150-1155	Discussion and next steps in strategic planning process (Joanne)
1155-1200	Closing remarks and adjournment (Anastasia)

## PRESENTATION MATERIALS - Retreat #1 – June 7, 2021

The presentation materials include the following slides:

- Slide 1: Strategic Planning Retreat** (Title slide, June 7, 2021)
- Slide 2: Agenda** (Detailed timeline of the retreat)
- Slide 3: Work to Date** (List of items to be discussed, including environmental scan, consultations, and proposed pillars)
- Slide 4: 1. Education** (Introduction to the Education pillar: Prepare our students well, to be well rounded oral healthcare providers)
- Slide 5: 1. Education** (List of strategic priorities for Education, such as success on national exams, recruiting high quality academics, and monitoring success factors)
- Slide 6: 1. Education (cont'd)** (Continuation of strategic priorities for Education, including tracking happiness, implementing new curriculum, and converting diploma programs to degrees)

**2. Research and Innovation**

Continue to develop and support collaborative research and innovation within our College and the Rady Faculty of Health Sciences.



**2. Research and Innovation**

- Assess research outputs: number of publications/presentations; research funding; attraction of MSc and BSc students
- An increase in external funding; an increase in high impact publications by faculty
- Increased critical mass of Oral Health Researchers/groups
- Increased student engagement in research activities; increased demand from students within Canada to join the research programs offered at the College



**2. Research and Innovation (cont'd)**

- College being awarded a Tier 1 Canada Research Chair in early childhood oral health/public health; exponential growth in research activity based upon the foundation of a well-established research program in early childhood oral health/early childhood caries
- Faculty research recognized at the National/International level (via invited lectures; awards; etc).



**3. Our People**

Create a positive and respectful work/learning environment for our students, staff, faculty members, patients and clients.



**3. Our People (cont'd)**

- Recruitment and retention of high quality academics, support staff and students: monitor FT progression through academic ranks; investigate reasons for lack of recruitment and address (financial etc.). Recruitment of research -intensive faculty. Financial support for early career faculty.
- Increased faculty members. Demand by high quality faculty to join the College



**3. Our People (cont'd)**

- Mentorship program identifying mentors for newly recruited academics/support staff
- Track satisfaction/happiness of faculty and staff; enjoyable work environment and positive morale, collegiality
- Support for graduate students, undergraduate research programs
- Better understanding of EDI Strategy to promote inclusion for faculty, staff and students. Enhanced relationship with Ongomiizwin.



**4. Community and Partnerships**

Foster community engagement and be socially accountable through evidence-based patient centered care. Enhanced partnerships that contribute to the success of our college and our community.



**4. Community and Partnerships (cont'd)**

- Track success with patient pool: adequate numbers of patients; examine procedure cost to patient vs experience to student to maximize experiences at price point that will attract patients
- Feedback from stakeholders including graduates for education, patients for service, community partners



**5. Sustainability and Impact**

Support and optimize our infrastructure, faculty member capacity and operations. Be recognized nationally and internationally for our impact.



**5. Sustainability and Impact**

- Establishing "lean" and change management in clinical operations
- Students supporting the College upon graduation
- Infrastructure renewal; Capital upgrades; Updated clinics
- Extent of University and Faculty support of Infrastructure renewal to support scholarly activity



**5. Sustainability and Impact (cont'd)**

- Completion of research space renovation
- Alumni surveys
- Government recognition
- An increase in external funding
- National and international representation and reputation



**Goals for our 2 retreats**

- Review proposed pillars
- Identify 3-5 goals for each pillar
- Identify supporting actions for the goals



**Post retreat**

- Consolidate small group and individual feedback
- Synthesize findings into common areas
- Report back to participants
  - Strategic priorities
  - Supporting actions






Retreat #2 – June 12, 2021

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Dr. Gerald Niznick College of Dentistry

## Strategic Planning Retreat


June 14, 2021



DR. GERALD NIZNICK COLLEGE OF DENTISTRY

### Agenda

0900 - 9010 - Welcome and recap/review of process - Dr. Anastasia Kelekis-Cholakis  
 0910 -1000 **Pillar: Our People (start at group 5)**  
 Identify strategic priorities and supporting actions (break out rooms – 30 minutes)  
 Report back to larger group (20 minutes)  
 1000 – 1050 **Pillar: Community and Partnerships (Start at group 3)**  
 Identify strategic priorities and supporting actions (break out rooms – 30 minutes)  
 Report back to larger group (20 minutes)  
 1050 – 1100 stretch break  
 1100 – 1150 **Pillar: Sustainability and Impact (start at group 7)**  
 Identify strategic priorities and supporting actions (break out rooms – 30 minutes)  
 Report back to larger group (20 minutes)  
 1150 - 1155 Discussion and next steps in strategic planning process (Joanne)  
 1155 -1200 Closing remarks and adjournment (Anastasia)



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### Work to Date


- Environmental scan
  - Consultations
  - Review of other dental schools
- Identification of proposed pillars
  - Education
  - Research and Innovation
  - Community and Partnerships
  - Our People



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### 3. Our People


Create a positive and respectful work/learning environment for our students, staff, faculty members, patients and clients.



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### 3. Our People (cont'd)


- Recruitment and retention of high quality academics, support staff and students: monitor FT progression through academic ranks; investigate reasons for lack of recruitment and address (financial etc.). Recruitment of research -intensive faculty. Financial support for early career faculty.
- Increased faculty members. Demand by high quality faculty to join the College



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### 3. Our People (cont'd)

- Mentorship program identifying mentors for newly recruited academics/support staff
- Track satisfaction/happiness of faculty and staff; enjoyable work environment and positive morale, collegiality
- Support for graduate students, undergraduate research programs
- Better understanding of EDI Strategy to promote inclusion for faculty, staff and students. Enhanced relationship with Ongomizwin.



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### 4. Community and Partnerships

Foster community engagement and be socially accountable through evidence -based patient centered care. Enhanced partnerships that contribute to the success of our college and our community.



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### 4. Community and Partnerships (cont'd)

- Track success with patient pool: adequate numbers of patients; examine procedure cost to patient vs experience to student to maximize experiences at price point that will attract patients
- Feedback from stakeholders including graduates for education, patients for service, community partners



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### 5. Sustainability and Impact

Support and optimize our infrastructure, faculty member capacity and operations. Be recognized nationally and internationally for our impact.



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### 5. Sustainability and Impact

- Establishing "lean" and change management in clinical operations
- Students supporting the College upon graduation
- Infrastructure renewal; Capital upgrades; Updated clinics
- Extent of University and Faculty support of Infrastructure renewal to support scholarly activity



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### 5. Sustainability and Impact (cont'd)

- Completion of research space renovation
- Alumni surveys
- Government recognition
- An increase in external funding
- National and international representation and reputation



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### Goals for our 2 retreats

- Review proposed pillars
- Identify 3-5 goals for each pillar
- Identify supporting actions for the goals



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### Post retreat

- Consolidate small group and individual feedback
- Synthesize findings into common areas
- Report back to participants
  - Strategic priorities
  - Supporting actions





## **Appendix 2: Pre-Retreat Reading Material**

Dr. Gerald Niznick College of Dentistry – Strategic Plan 2021

### **SOAR Summary**

#### **I. Education: Prepare our students to be well rounded oral healthcare providers.**

##### STRENGTHS

- Academic excellence: high success rates (and demand) for our graduates
- Programs produce confident and competent dentists, dental hygienists, dental specialists
- Strong graduate programs
- Small class sizes with excellent instructor: student ratio
- High quality teaching and training (dedicated and well-trained faculty members) with a blend of senior and junior faculty who collaborate effectively to optimize student learning and are engaged in students
- Diverse teaching strategies; embrace diverse strategies and pedagogies
- High quality clinical experiences for students
- Early contact with patients starting in first year (assisting)
- Access to large patient pool for clinical teaching
- Good service learning opportunities
- Focus on strong treatment planning skills
- Well integrated International Dental Degree Program
- Use of UM Learn and technology for teaching
- Office of Interprofessional Collaboration – interprofessional learning
- Scholarly approach to our teaching; working to advance our teaching; disseminate with others to the broader community
- High levels of satisfaction and the high motivation of alumni referring others to the DMD program
- High quality education in terms of professionalism, patient-centred care, communication, health promotion, information management and collaboration

##### OPPORTUNITIES

- Increase in technology education and practice management education (practice management offerings provide more relevant content that relates to current dental practices)
- Expand digital curriculum across all four years of UG program
- Curricular development/reform/update to improve teaching delivery and re-allocate time and resources to where they are needed (improvements in the curriculum to include advancing clinical theory and techniques to reflect current dental practices)
- Different methodologies for teaching, given pandemic, how we deliver education/other potential ways to deliver – blended delivery approach; synchronous and asynchronous
- Continue to be a high quality educational institution so that graduates support our activities
- Address the increasing trend/provide opportunities for new graduates to pursue post graduate education
- Increase rotations of senior students to rural, northern and indigenous communities (RFHS funding for accommodations and travel)
- New prosthodontic specialty program
- Degree conversion: revising educational program based on existing models
- Interprofessional clinical experience
- Continue to develop virtual clinic and competency based exam
- Establish a new program in Geriatric Dentistry
- Programming to find ways to increase the positive experience of those who are either neutral or less than positive in referring the DMD program
- Improve the clinical learning environment to provide a supportive and positive experience to increase students' overall experience (reduce discrimination, bias, negative experiences) and desire to contribute back to the program either as a future clinical instructor and/or financial supporting to the programs
- Dental materials taught in the program and used in the clinic to reflect current practices used in dentistry
- Externship program better prepare the student learning experiences and that the clinical instructors and staff in the externship program provide a more positive experience

## RFHS/ Dr. Gerald Niznick College of Dentistry Strategic Plan / Appendices

### ASPIRATIONS

- Continue to ensure students are well grounded in all aspects of dental/dental hygiene professional activities
- Strong undergraduate curriculum linked to both clinical practice and CoD research
- Admission criteria to be revisited
- Re-evaluate diploma and baccalaureate curriculum and enhance practice management
- Ensure alliance with new dental hygiene competencies
- Masters in Dental Hygiene
- A graduate program, Community Dental Health
- Continue programming that produces leaders in the profession
- Train more than dental technicians
- Create and nurture innovative dental practitioners who can develop new ideas for dentistry (Dr. Niznick)

### RESULTS

- Success and high scores by students on national exams
- Recruiting and retaining high quality academics, support staff and students
- Surveys or other analysis of graduates between two to five years following graduation to assess whether program has prepared them well for career
- Monitor success factors of recent/near graduates
- Ensure not solely tracking/focused on immediate happiness/gratification of students
- Track implementation of new digital curriculum
- Improvements in course evaluations
- Enrollment numbers/large application pool
- Success rate of RCDC outcomes for our graduate programs and all academics engaged in funded research with adequate support
- In 2024, convert diploma program to degree

## **II. Research and Innovation: Continue to develop and support collaborative research and innovation within the CoD and the Rady Faculty.**

### STRENGTHS

- Research is recognized nationally and internationally
- Producing capable researchers (clusters of researchers who are highly competitive in obtaining external research funding, producing high quality productive research programs)
- Established research clusters to improve collaborations within the CoD (department research clusters) and outside the CoD. Collaborative research with the establishment of Manitoba Chemosensory Biology Group
- Independent and funded research programs in multiple fields. Well-funded research program in early childhood oral health-early childhood caries with remarkable research outputs from Division of Community Dentistry
- Excellent undergraduate research program (B.Sc. (Dent.) program) allows students to carry out research projects during summer and has allowed our graduating students an advantage for admission to specialty programs
- Experienced and well-trained PIs
- High quality graduate training programs

### OPPORTUNITIES

- More financial support for research (internal and/or external). More protected research time for clinical faculty members
- Enhance clinical research
- An emphasis on research based recruitment of clinical faculty; at least one highly research intensive faculty member in each of the clinical departments
- RFHS could dissolve basic science departments and amalgamate them as one college that will highlight research and help small departments thrive within a bigger cohort
- Move forward with a culture and stimulus for more interdisciplinary research (creation of RFHS). Changes in the administrative structure of RFHS that would allow/promote graduate programs based on a “research groups” umbrella similar to what other universities have adopted
- Develop a fellowship program/post-doctoral fellowship in community dentistry/public health/early childhood oral health research in partnership with the Children’s Hospital
- Increase community dentistry research by collaborating with CCO

## RFHS/ Dr. Gerald Niznick College of Dentistry Strategic Plan / Appendices

### ASPIRATIONS

- Be a leader in research
- Improve clinical research capacity; improve research infrastructure and capacity
- Meaningful research groups/clusters that provide for collaborative interaction and opportunities through RFHS reorganization. Can't effectively function as a service provider for research opportunities due to limited resources/opportunities available for establishing meaningful research groups/clusters. Too many artificial/department boundaries. Formation of interest-based research groups. Increase Global visibility of research programs for attracting HQP to University
- Have a Canada Research Chair based within the CoD. Public Health Endowed Chair
- Provide support for the faculty to be able to do research/mentorship for faculty that supports their aspirations in research. Ensure available time for research due to high teaching loads and future impact on career advancement for full-time faculty
- Better thinking behind how we ensure sustainable evolution of basic/clinical research programs within the current national landscape governing the funding of research
- To be recognized for our superb graduate programs and outstanding research world-wide
- Tier 1 Canada Research Chair in early childhood oral health/public health; recruitment of top tier academics that can work as part of a team

### RESULTS

- Assess research outputs: number of publications/presentations; research funding; attraction of M.Sc. and B.Sc. students
- An increase in external funding; an increase in high impact publications by faculty
- Increased critical mass of oral health researchers/groups
- Increased student engagement in research activities; increased demand from students within Canada to join the research programs offered at the CoD
- College being awarded a Tier 1 Canada Research Chair in early childhood oral health/public health; exponential growth in research activity based upon the foundation of a well-established research program in early childhood oral health/early childhood caries
- Faculty research recognized at the national/international level (via invited lectures; awards; etc.)

### **III. Community and Partnerships: Foster community engagement and be socially accountable through evidence-based patient-centered care. Enhance partnerships that contribute to the success of the CoD and our community.**

### STRENGTHS

- Providing dental services to the community-at-large / strong clinical program / strong pedo/ortho clinics
- Active community engagement programs / northern, rural and community clinics / Variety Dental Outreach Program
- Community: serving low socio-economic areas
- Patient support funds that are only for DH: Smiles for Miles; DH4U
- Relationship with CCOH
- Representation on senate, UMFA, RFHS senior committees – well-networked within the university (faculty, administration, etc.)
- Knowledgeable (“keepers of knowledge”) of university and college procedures and matters
- Close ties with the local dental community including the MDA and alumni

### OPPORTUNITIES

- Pandemic and economic factors may lead to patients seeking quality low-cost dental care at the college (we can provide GP and specialist care at reduced cost for patients)
- Improvements in the clinic to include current and innovative digital technology and current clinical procedures
- Working collaboratively with university, profession, community
- Northern/rural rotations for students
- Challenges in job market for graduates / increased demand for residencies – consider general practice internship
- Community service and engagement opportunities, especially in rural and Indigenous areas in need of oral health care
- International exchange opportunities for students and instructors

### ASPIRATIONS

- Robust patient pool
- Be a leader in Northern and rural oral health

### RESULTS

- Track success with patient pool: adequate numbers of patients; examine procedure cost to patient versus experience to student to maximize experiences at price point that will attract patients
- Feedback from stakeholders including graduates for education, patients for service, community partners.

**IV. Our People: Create a positive and respectful work/learning environment for our students, staff, faculty members, patients and clients.**

STRENGTHS

- Dedicated support staff, academics and students
- Strong leadership within the profession and high service commitment to the CoD, RFHS and UM
- EDI of team enriches program experience / academics with strengths in education, research and administration
- Good communication between different divisions and inter-departmental academics work in collaboration for departmental betterment and learning opportunities
- Resiliency shown by academics to challenges presented over the past year due to COVID-19 pandemic

OPPORTUNITIES

- Pandemic has made academics/support staff/students work more collaboratively in overcoming constraints imposed by COVID-19. Better appreciation by all in understanding challenges each group faces
- Maintaining academic staff. Junior faculty bringing new ideas and experiences to CoD
- Collaboration between the programs. Inter- and intra-departmental academics work in collaboration for departmental betterment and learning opportunities
- Create an improved positive, welcoming work environment and community spirit
- Open better channels of communication; hold more team meetings
- SDH MDHA Mentorship Program
- Indigenization of curriculum, anti-racism training, EDI

ASPIRATIONS

- Enhance relationships within CSS
- Ensure time available to engage in curriculum development and enhancement (needs include digital dentistry, implant dentistry among others) – ensure adequate number of FT and PT staff to ensure that faculty have balanced workload
- Ensure that clinical FT faculty are able to continue to progress in the ranks through their academic career: balance in workload; broader acceptance of what constitutes scholarly activity; understanding of time available for scholarly activity by FT clinical faculty
- Time allocations for academic staff to attend CE courses/advanced standing courses for the betterment of the division and him/herself
- Funding and time allocation for faculty scholarly works
- Uphold values being taught by the EDI concept to create both clinically competent and morally ethical learners in a safe environment: acknowledge weaknesses in this area; model behaviours and decisions to learners
- Fulfillment of RFHS of policies on disrupting all forms of racism, EDI, etc.
- Wellness and positive environment for faculty/staff/students / better balance; recognition of support staff
- Bring in salutogenesis in our education and workplace

RESULTS

- Recruitment and retention of high quality academics, support staff and students: monitor FT progression through academic ranks; investigate reasons for lack of recruitment and address (financial etc.). Recruitment of research-intensive faculty. Financial support for early career faculty
- Increased faculty members. Demand by high quality faculty to join the college
- Mentorship program identifying mentors for newly recruited academics/support staff
- Track satisfaction/happiness of faculty and staff; enjoyable work environment and positive morale, collegiality
- Support for graduate students, undergraduate research programs
- Better understanding of EDI strategy to promote inclusion for faculty, staff and students. Enhanced relationship with Ongomiizwin

**V. Sustainability and Impact: Support and optimize our infrastructure, faculty member capacity and operations. Be recognized nationally and internationally for our impact.**

STRENGTHS

- Leadership with collaborative input from academics/support staff in determining direction of college
- Modern facilities equipment and foundational digital infrastructure
- Not afraid of change

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- A fertile environment to keep up-to-date with latest developments in orthodontics
- High profile/well respected leaders in organized dentistry nationally
- National and international representation on NDEB, RCDC, AAFP, AAE (among others)
- Research is recognized nationally and internationally

### OPPORTUNITIES

- Improvement to infrastructure
- More wet lab space as well as renovation of existing laboratories
- Recruitment of new faculty
- Free up CoD resources
- Continue to seek funding sources such as Dr. Niznick's donation to enhance ageing infrastructure and move forward with digital technology in the curriculum
- Renovated labs offer promise of
  - » Rejuvenation of existing research programs
  - » Better ability to attract new faculty hires
  - » Opportunities for collaborative research interactions with clinical faculty and grad students

### ASPIRATIONS

- Freedom to support the mission statement of the CoD
- Addition of faculty members
- Promoting the SDH and the DH profession; getting more highlights by external relations
- To develop a cleft database of orthodontic records to allow the department to participate in inter-centre studies
- To develop and parallel departmental goals with those in the public sector to recognize that preventative dentistry is a public model and should not be treated differently than any other medical speciality from both perception and funding models

### RESULTS

- Establishing "lean" and change management in clinical operations
- Students supporting the CoD upon graduation
- Infrastructure renewal; capital upgrades; updated clinics
- Extent of university and faculty support of Infrastructure renewal to support scholarly activity
- Completion of research space renovation
- Alumni surveys
- Government recognition
- An increase in external funding
- National and international representation and reputation

### Weaknesses and Threats

#### WEAKNESSES (not categorized)

- Not all our academics are able to engage in more research due to time constraints, lack of support and funding challenges
- Salaries for some academics is on soft money and lack of central funding / under-funding to a very great extent with expectations that at positions must be self-funded
- Recruitment and maintaining of academic staff
- Limited research academics and research time
- Limited professors with various (or higher level) academic rank
- Work/balance – teaching loads, less support staff, less time for research
- Centralized administration support staff with conflicting goals and objectives
- Lack of staff so the faculty can dedicate more time to teaching and research
- Lack of dedicated office space to community dentistry in the CoD; lack of representation of researchers/clinician scientists on Dean's Advisory Committee
- Social and more personable work environment is lacking
- Lack of communication

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- There could be more collaborations for teaching, research
- Mission statements for divisions are not focused (i.e. either too vague or ambitious)
- Lack of space for staff/postdocs/space allocation
- Aging IT infrastructure – are we meeting demands
- Support for IT to keep up-to-date – need more people to do updates/upgrades
- New IT/innovations – spread becoming larger versus those that have new technology and those that don't have funds to support this
- Website that requires updating/errors
- Absence of a succession plan/aging cohort
- Changing student population needs – expectations of students are changing

### THREATS (not categorized)

- Ongoing/administrative bureaucracy
- Lack of time for grant application
- Need for additional faculty/salaries / recruitment of part-time academics
- Inequality of recognition of support staff across the CoD
- Ongoing uncertainty of job security
- Continued centralization of staff, funding and policy, divesting from internal goals and unit identity
- Aging infrastructure and space; capital investment needed is significant; need a plan to fund to deliver teaching – building limitations restrict classroom sizes/can't increase enrollment
- Pandemic – uncertainty regarding ability to be open/operate / revenue lost due to pandemic
- Cost of providing dental care has increased significantly vis-à-vis providing affordable patient care/maintaining patient supply
- Uncertainty of future of donated supplies
- Draft Industry Relations policy: threat to income in future / may affect part-timers desire to teach
- CDAC requirements for graduates – disruption of patient flow, may disrupt requirements to graduates
- Patient supply concerns and lack of parking availability for patients
- Maintaining support from alumni base
- Potential budget cuts / uncertainty in planning - long term viability of program given current structure / budget
- New financial model – negative effect on college in its ability to grow – can't increase enrollment, restricts ability to make new hires
- Increase in administrative burden on faculty – administrative work increase – costs of running university are being put onto faculty

## Appendix 3: Appreciative Inquiry

### Appreciative Inquiry as a method for strategic planning

Adapted from Stavros, Cooperrider and Kelley, 2003

Appreciative Inquiry is based on this premise:

- Change requires action
- Action requires a plan
- A plan requires a strategy
- A strategy requires goals and enabling objectives
- Goals and objectives require a mission
- **A mission is defined by a vision**
- **A vision is set by one’s values**

The Appreciative Inquiry (AI) approach to strategic planning starts by focusing on the strengths of an organization and its stakeholders’ values and shared vision.

#### Use strengths, opportunities, aspirations and results (SOAR) rather than SWOT.

- Build on their strengths (the positive core)
- Discover “profitable” opportunities (profit in terms of value and meaning)
- Visualize goals and strategic alternatives
- Identify enabling objectives
- Design strategies and tactics that are integrated with most successful programs
- Implement a strategic plan that is a dynamic, continuous and living document
- Uses a cycle of change – the 4-D Cycle: based on four stages: **discovery** – focusses on excellence, core values and best practices; **dream** - envisioning positive possibilities; **design** - the structure, processes and relationships that support the dream; **destiny** - an effective inspirational plan for implementation

*Strategic Inquiry – Appreciative Intent: Inspiration to SOAR*

<b>Strategic Inquiry</b>	<b>Strengths</b>  What are our (greatest) assets; what can we build on; what are we doing well; what do our strengths tell us about our skills?	<b>Opportunities</b>  What are the best possible opportunities; what are our stakeholders asking for; how do we collectively understand outside threats; how can we reframe to see the opportunity; how can we best partner with others?
<b>Appreciative Insight</b>	<b>Aspirations</b>  What is our preferred future; what do we care deeply about; considering our strengths and opportunities – who should we become; how can we make a difference for our organization and its stakeholders?	<b>Results</b>  What are the measurable results; how do we know we are succeeding; how do we tangibly translate our strengths, opportunities and aspirations?

(Adapted from Stavros, Cooperrider, and Kelley, 2003)

#### Potential questions for SOAR

*(Adapted from Stavros, Jacqueline, and Hinrichs, 2011 and U of Guelph Associate Vice President, Academic, nd)*

##### Strengths: What can we build on?

1. What are we most proud of as an organization? How does that reflect our greatest strength?
2. What makes us unique? What can we be best at in our world?
3. What is our proudest achievement in the last year or two?
4. How do we use our strengths to get results?
5. How do our strengths fit with the realities of the profession/our field?
6. What do we provide that is “world class” in our field?



**Another way:**

1. What are we doing well?  
What key achievements are we most proud of?  
What positive aspects of the research program have students/faculty/colleagues or others commented on?
2. What are we known for?  
What makes us unique?  
Why do students choose our program?
3. What key resources and areas of expertise give us an advantage?

**Developing Strengths:**

In small groups...

- Each person will describe examples of stories that show the organization at its best and when s/he felt proud to be part of it
- Each group will report back to the large group the major themes that came up in their discussions

**Opportunities:** What are our stakeholders asking for?

1. How do we make sense of opportunities provided by external forces or trends?
2. What are the top three opportunities on which we should focus our efforts?
3. How can we best meet the needs of our stakeholders ... including students, patients/clients, employers and the general public?
4. How can we reframe challenges to be seen as existing opportunities?
5. What new skills do we need to move forward?

**Another way:**

1. What changes in demand do we expect to see over the next years?  
What external forces or trends may positively impact the program?
2. What future external opportunities exist for the program?  
What are key areas of untapped potential?  
What are students, employers and/or other community members asking for?
3. How can we highlight our program strengths and distinguish ourselves from competing programs?
4. How can we reframe perceived challenges to be seen as opportunities?

**Aspirations:** What do we care deeply about?

1. When we explore our values and aspirations, "what are we deeply passionate about?"
2. Reflecting on our strengths and opportunities, who are we, who should we become and where do we go in the future?
3. What are our most compelling aspirations?
4. What strategic initiatives (e.g. projects, programs, processes) would support our aspirations

**Another way:**

1. What are we deeply passionate about?
2. As a program, what difference do we hope to make (e.g. to learners, the institution, employers, the community)?
3. What does our preferred future look like?
4. What projects, programs or processes would support our aspirations?

**Developing aspirations:**

In small groups discuss...

- What are we deeply passionate about?
- What are our most compelling aspirations?

Each group will report back to the large group the major themes that came up in their discussion.

**Results:** How do we know we are succeeding?

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1. Considering our strengths, opportunities and aspirations, what meaningful measures would indicate that we are on track to achieve our goals?
2. What are three to five indicators that would create a scorecard that addresses a triple bottom line of our own metrics, people and planet?
3. What resources are needed to implement vital projects?
4. What are the best rewards to support those who achieve our goals?

### **Another way:**

1. Considering our strengths, opportunities and aspirations, what meaningful measures will indicate that we are on track in achieving our goals?
2. What measurable results do we want to see? What measurable results will we be known for?
3. What resources are needed to implement our most vital projects and initiatives?
4. What are the three to five key goals would you like to accomplish in order to achieve these results?

### **Developing Results:**

In small groups discuss

- How do you define success as a professional?
- How do you know you are succeeding?

Each group will report back to the larger group the major themes that came up in their discussions.

### **References**

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## **Appendix 4: Retreat Worksheet**

### **Introduction**

The Dr. Gerald Niznick College of Dentistry began a strategic planning process in December of 2019. This process started with an environmental scan. The scan included a review of accreditation standards, the CoD's governance process and a scan of other Canadian dental schools. Using an appreciative inquiry framework, the strengths, opportunities, aspirations and desired results for the CoD were identified using a consensus-based approach. Using the data from these activities, four strategic pillars were identified. These are:

#### **1. Education**

"Education: Prepare our students to be well rounded oral healthcare providers."

#### **2. Research and Innovation**

"Research and Innovation: Continue to develop and support collaborative research and innovation within our college and the Rady Faculty."

#### **3. Our People**

"Our People: Create a positive and respectful work/learning environment for our students, staff, faculty members, patients and clients."

#### **4. Community and Partnerships**

"Community and Partnerships: Foster community engagement and be socially accountable through evidence-based patient-centered care. Enhance partnerships that contribute to the success of our college and our community."

#### **5. Sustainability and Impact**

"Sustainability and Impact: Support and optimize our infrastructure, faculty member capacity and operations. Be recognized nationally and internationally for our impact."

OUR GOALS FOR THE RETREAT:

1. Identify the top criteria for each of the strategic pillars
2. Create goals to achieve the top criteria for each of the strategic pillars
3. Design a strategic plan to achieve the strategic pillars

DESIGNING OUR STRATEGIC PLAN:

For each of the strategic pillars we will identify the top three to five criteria for each pillar with supporting strategies to achieve the pillar, as well as measures and milestones to document our progress to achievement and champions who will lead in these strategies.

#### **Pillar 1 – Education: Prepare our students to be well-rounded oral healthcare providers.**

1. Referring to the SOARs Summary, identify the top 3-5 criteria that best define this pillar:

- 
- 
- 
- 
- 

2. Create one to two goals for each of the three to five top criteria identified above.

- a. For each goal, identify a:

- i. Resources and/or resource people needed
- ii. Measurable outcome at the end of each year and at the end of five years
- iii. Champion to lead the initiative

#### **Pillar 2 – Research and Innovation: Continue to develop and support collaborative research and innovation within our college and the Rady Faculty.**

1. Referring to the SOARs Summary, identify the top three to five criteria that best define this pillar:

- 
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-

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2. Create one to two goals for each of the three to five top criteria identified above.
  - a. For each goal, identify a:
    - i. Resources and/or resource people needed
    - ii. Measurable outcome at the end of each year and at the end of five years
    - iii. Champion to lead the initiative

**Pillar 3 – Community and Partnerships: Foster community engagement and be socially accountable through evidence-based patient-centered care. Enhance partnerships that contribute to the success of our college and our community.**

1. Referring to the SOARs Summary, identify the top three to five criteria that best define this pillar:
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  -
2. Create one to two goals for each of the three to five top criteria identified above.
  - a. For each goal, identify a:
    - i. Resources and/or resource people needed
    - ii. Measurable outcome at the end of each year and at the end of five years
    - iii. Champion to lead the initiative

**Pillar 4 – Our People: Create a positive and respectful work/learning environment for our students, staff, faculty members, patients and clients.**

1. Referring to the SOARs Summary, identify the top three to five criteria that best define this pillar:
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  -
2. Create one to two goals for each of the three to five top criteria identified above.
  - a. For each goal, identify a:
    - i. Resources and/or resource people needed
    - ii. Measurable outcome at the end of each year and at the end of five years
    - iii. Champion to lead the initiative

**Pillar 5 – Sustainability and Impact: Support and optimize our infrastructure, faculty member capacity and operations. Be recognized nationally and internationally for our impact.**

1. Referring to the SOARs Summary, identify the top three to five criteria that best define this pillar:
  - 
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  - 
  -
2. Create one to two goals for each of the three to five top criteria identified above.
  - a. For each goal, identify a:
    - i. Resources and/or resource people needed
    - ii. Measurable outcome at the end of each year and at the end of five years
    - iii. Champion to lead the initiative

