

## Impediments and their Countermeasures in Strategic Planning

Impediments	Countermeasures
<p><b>Unpredictable External Environment</b></p> <p>A rapidly changing and often unpredictable external environment makes a durable strategic plan difficult to justify, particularly for skeptical stakeholders. The uncertainty of the economy, and market-driven changes in the financing and delivery of health care and fluctuations in federal support for research and education profoundly impact the clinical and nonclinical sources of support for the tripartite mission of academic medicine.</p>	<ul style="list-style-type: none"> <li>■ From the outset, all participants understood that the plan would be dynamic and needed to be updated, not on a calendar basis, but when new opportunities or threats arose.</li> <li>■ The strategy was clear, but it took into account that situations change and that strategic goals can be achieved in multiple ways.</li> </ul>
<p><b>Rapidly Changing Internal Environment</b></p> <p>The volatility of the external environment is mirrored by a rapidly changing internal environment. Increasing instability in the leadership at academic medical centers, as evidenced by the steadily decreasing mean tenure of medical school deans (recently estimated at about four years), has created the potential for erratic and frequent redirection of priorities. The turnover rate for department of medicine chairs has been likewise increasing, with a concomitant rise in the number of interim chairs.</p>	<ul style="list-style-type: none"> <li>■ The strategic thinking behind initiatives identified early in the process was farther along in some than in others. Recognizing this and finding key faculty working in these areas made it possible to go forward with different initiatives on different time frames.</li> <li>■ By broadening the ownership of key initiatives and linking faculty task forces with active involvement by division chiefs, the ideas had broader support beyond the support of leaders in official roles.</li> </ul>
<p><b>Skeptical Faculty</b></p> <p>Faculty are skeptical or even cynical about the utility and productivity of strategic plans. This is particularly the case with longstanding faculty members who have seen leaders come and go, and when the outcomes of previous strategic plans have not been clearly apparent. These are the strategic plans of previous administrations that have sat on shelves as though they were ends unto themselves.</p>	<ul style="list-style-type: none"> <li>■ Actively involving all levels of faculty, including clinicians and researchers sought to overcome the skepticism.</li> <li>■ We presented the accomplishments of past planning efforts to show that real work has been done, suggesting that some of the cynicism is not evidence-based. People were surprised and impressed by achievements of previous plans.</li> <li>■ We continually updated an internal strategic planning website with current information. Information included key events, documents and general updates to provide a sense of momentum and accomplishment throughout the process.</li> </ul>
<p><b>Individual Culture of Academic Medicine</b></p> <p>Faculty tend to be wed more to their individual interests and their specialty disciplines and less to their departments. The academic medical environment traditionally values autonomy and rewards individual achievement. In a decentralized and highly specialized faculty culture there is little incentive for faculty members to support the community interest of a department with which they may not even strongly identify. This often leads to a "what's in it for me" attitude to strategic planning; at its extreme, it may even lead to a perceived threat of conflicting interest.</p>	<ul style="list-style-type: none"> <li>■ We deliberately invited people to join task forces in areas where they were already passionate. The goal was to harness their interests rather than engage them abstractly in identifying strengths, weakness, etc., in ways that felt formulaic.</li> <li>■ We linked to external drivers for more teamwork in science (the NIH Roadmap), in education, and in clinical care.</li> </ul>

*This is a draft table that looks at some of the typical problems and countermeasures in strategic planning. The final article can be found in *The American Journal of Medicine*, Vol 118, No 3, March 2005, pp 315-320. For more information, please contact CFAR at [info@cfar.com](mailto:info@cfar.com) or 215.320.3200, or visit our website at <http://www.cfar.com>.*