

# The University of Texas M. D. Cancer Center



Institutional  
Process

Focus on  
Learning

Institutional  
Capability

Broad-Based  
Involvement

Assessment  
Plan

## QEP 2021 Overview

Prepared By  
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Program Director Academic Affairs  
Director QEP  
Associate Professor School of Health Professions



## QUALITY ENHANCEMENT PLAN GUIDELINES INDICATORS OF AN ACCEPTABLE QUALITY ENHANCEMENT PLAN

**NOTE TO THE EVALUATOR:** The guidelines presented below are intended to assist you in focusing and developing your professional judgment. The component parts of the matrix are not summative nor are they necessarily of equal weight. You will need to evaluate and weigh the issues when arriving at a judgment about the institution's compliance with the requirement.

**CR.2.12:** *The institution has developed an acceptable Quality Enhancement Plan (QEP) that includes an institutional process for identifying key issues emerging from institutional assessment and focuses on learning outcomes and/or the environment supporting student learning and accomplishing the mission of the institution. (Quality Enhancement Plan)*

INDICATOR	UNACCEPTABLE	WEAK	ACCEPTABLE	EXCEPTIONAL
<b>1.A.</b> An institutional process	No evidence provided of process used for developing QEP topic, etc., or a top-down approach used and only narrow involvement of university staff, faculty.	A core group of institutional representatives develop topic and plan. Some attempt is made to tie topic/plan to prior institutional planning.	Topic is directly related to prior institutional planning which had involved a broad-based effort. Plan then developed by key individuals/groups on campus.	Plan is directly related to institutional planning efforts. Topic selection involved process that generated information and specific ideas from a wide range of constituents. Selection of topic determined by representative process that considered institutional needs and viability of plan.
<b>1.B.</b> Key issues identified that emerge from institutional assessment	No evidence of relationship of QEP to institutional data/analysis/assessment. Plan seems to be an isolated topic unrelated to institutional needs and/or never tied to those needs.	General institutional needs addressed, but no clear linkage to QEP topic in terms of how needs would be addressed by successful QEP implementation.	A direct relationship established between QEP topic and institutional needs. QEP may indirectly affect needs.	A direct and strong relationship of QEP topic to institutional needs; clear how accomplishment of QEP would directly improve institutional/student performance.
<b>2.A.</b> Focus on learning outcomes and accomplishing the mission of the institution	Plan focuses only on establishing processes and strategies with no clear identification of outcomes directly related to mission. If outcomes present, they are not related directly to improving student learning.	Some outcomes focus on student learning, but many represent process/strategies with no clear outcomes identified. Those that address student learning may not be clearly related to institutional mission and needs.	Outcomes are generally related to student learning and reasonably address the accomplishment of mission-specific goals.	Detailed student learning outcomes tied directly to institutional needs.
<b>2.B.</b> Focus on the environment supporting student learning and accomplishing the mission of the institution	No relationship of QEP activities/processes to the support of student learning. Student learning left undefined or poorly defined.	Activities of QEP to some extent are related to improvement of student learning; no relationship established institutional needs.	Activities of QEP focus, generally, on the improvement of student learning, with some that may not be directly tied to that effort.	A clear relationship between activities of QEP and the improvement of student learning, all tied to established institutional needs.

### FIVE COMPONENTS OF QEP REVIEW FRAMEWORK:

- 1 = An Institutional Process. The institution uses an institutional process for identifying key issues emerging from institutional assessment.
- 2 = Focus of the Plan. The institution identifies a significant issue that (i) focuses on learning outcomes and/or environment supporting student learning and (ii) accomplishes the mission of the institution. *Cross-referenced to Component 5.*
- 3 = Institutional Capability for the Initiation, Implementation, and Completion of the Plan. The institution provides evidence that it has sufficient resources to initiate, implement, sustain, and complete the QEP.
- 4 = Broad-Based Involvement of Institutional Constituencies. The institution demonstrates the involvement of its constituencies in the development and proposed implementation of the Plan.
- 5 = Assessment of the Plan. The institution identifies goals and a plan to assess the achievement of those goals. *Cross-referenced to Component 2.*

**CS.3.3.2:** The institution has developed a Quality Enhancement Plan that (1) demonstrates institutional capability for the initiation, implementation, and completion of the QEP; (2) includes broad-based involvement of institutional constituencies in the development and proposed implementation of the QEP; and (3) identifies goals and a plan to assess their achievement. (Quality Enhancement Plan)

INDICATOR	UNACCEPTABLE	WEAK	ACCEPTABLE	EXCEPTIONAL
3.A. Capability to initiate the plan	No attention given to personnel, budget, other support needed to implement and complete the plan.	While some basic information on budgetary, personnel and other needs are presented, some or all of that support is "soft" and not committed-to by the institution. Often vague details about personnel, organizational control, and budget needs.	Yearly, overall, budget, with basic descriptions of personnel needs including organizational structure needed to carry out the plan.	Very detailed budget information, institutional commitment of funds clearly indicated. If individuals are not yet identified, detailed job descriptions provided that indicate the specific skills and abilities needed for key personnel. Organizational structure shows clear reporting responsibilities and oversight structures.
3.B. Capability to implement and complete the plan	No timetable is provided for year by year activities including specific actions, budgetary expenditures and assessment processes.	Sketchy timetable is provided for year by year activities including specific actions, budgetary expenditures and assessment processes.	Detailed timetable is provided for year by year activities including specific actions, budgetary expenditures and assessment processes.	Very detailed timetable is provided for year by year activities including specific actions, budgetary expenditures and assessment processes. Timetable indicates clearly that QEP can be realistically implemented and completed in five years.
4.A. Broad-based involvement of institutional constituencies in the development of the plan	QEP developed by one individual or small group of individuals not representative of key constituencies.	QEP developed by one individual or small group, some attention given to obtaining input from others on campus, but no real involvement.	Process used to develop plan involved representative of key constituencies.	Process used ensured input from all relevant constituencies in developing the plan.
4.B. Broad-based involvement institutional constituencies in the proposed implementation of the plan	No indication of how relevant constituencies will be involved in implementation.	Implementation of plan will involve some representative of key constituencies, but carried out by only a few individuals or a single group on campus.	All relevant constituencies involved in implementation, either directly or indirectly.	All relevant constituencies have direct involvement in implementation.
5.A. Identified goals for the quality enhancement plan	Goals not present or those stated are not goals but, rather, processes that will be implemented.	Goals include mix of process and expected accomplishments.	Goals deal with expected accomplishments.	Goals are clearly stated, lead to specific, measurable outcomes.
5.B. A plan to assess the achievement of the goals of the quality enhancement plan	Assessment plan not present or is not clear in determining expected outcomes and means of assessment.	Assessment plan present; outcomes are often processes that are to be implemented. Assessment of goals not directly related to outcomes.	Assessment plan is based on clear outcomes; assessment methods related to outcomes.	Assessment is based on clear outcomes, assessment methods related to outcomes, and are direct measures of those outcomes.
Overall Evaluation of Acceptability of the Quality Enhancement Plan	When looked at as a whole, the plan clearly does not meet the requirements for an acceptable QEP. While one or more of the components may be acceptable, those that are not acceptable make the overall plan inappropriate.		While there may be weaknesses in one or more of the components, overall the plan is acceptable due to the strength of a number of the components.	All components of the plan are acceptable or exceptional; no weaknesses.

**FIVE COMPONENTS OF QEP REVIEW FRAMEWORK:**

- 1 = An Institutional Process. The institution uses an institutional process for identifying key issues emerging from institutional assessment.
- 2 = Focus of the Plan. The institution identifies a significant issue that (i) focuses on learning outcomes and/or environment supporting student learning and (ii) accomplishes the mission of the institution. *Cross-referenced to Component 5.*
- 3 = Institutional Capability for the Initiation, Implementation, and Completion of the Plan. The institution provides evidence that it has sufficient resources to initiate, implement, sustain, and complete the QEP.
- 4 = Broad-Based Involvement of Institutional Constituencies. The institution demonstrates the involvement of its constituencies in the development and proposed implementation of the Plan.
- 5 = Assessment of the Plan. The institution identifies goals and a plan to assess the achievement of those goals. *Cross-referenced to Component 2.*

## PEER EVALUATORS: SELECTED POINTERS ON DEVELOPING A QEP

Members of the 2012 and 2013 SACSCOC On-Site Reaffirmation Committees were asked to offer practical pointers for institutions that are about to start developing their QEPs. A set of factors listed below emerged from the content analysis of the feedback provided by the peer evaluators. These factors (and illustrative direct quotes) are intended to highlight peer evaluators' perspectives and to assist institutions in designing effective and sustainable QEPs. The purpose of the framework presented below is to serve as a GUIDE not as a checklist. The inter-related component parts of this framework are not exhaustive or summative nor are they necessarily of equal weight. Institutions will need to evaluate and weigh all relevant and appropriate issues when designing a QEP that appropriately addresses CR 2.12 and CS 3.3.2.

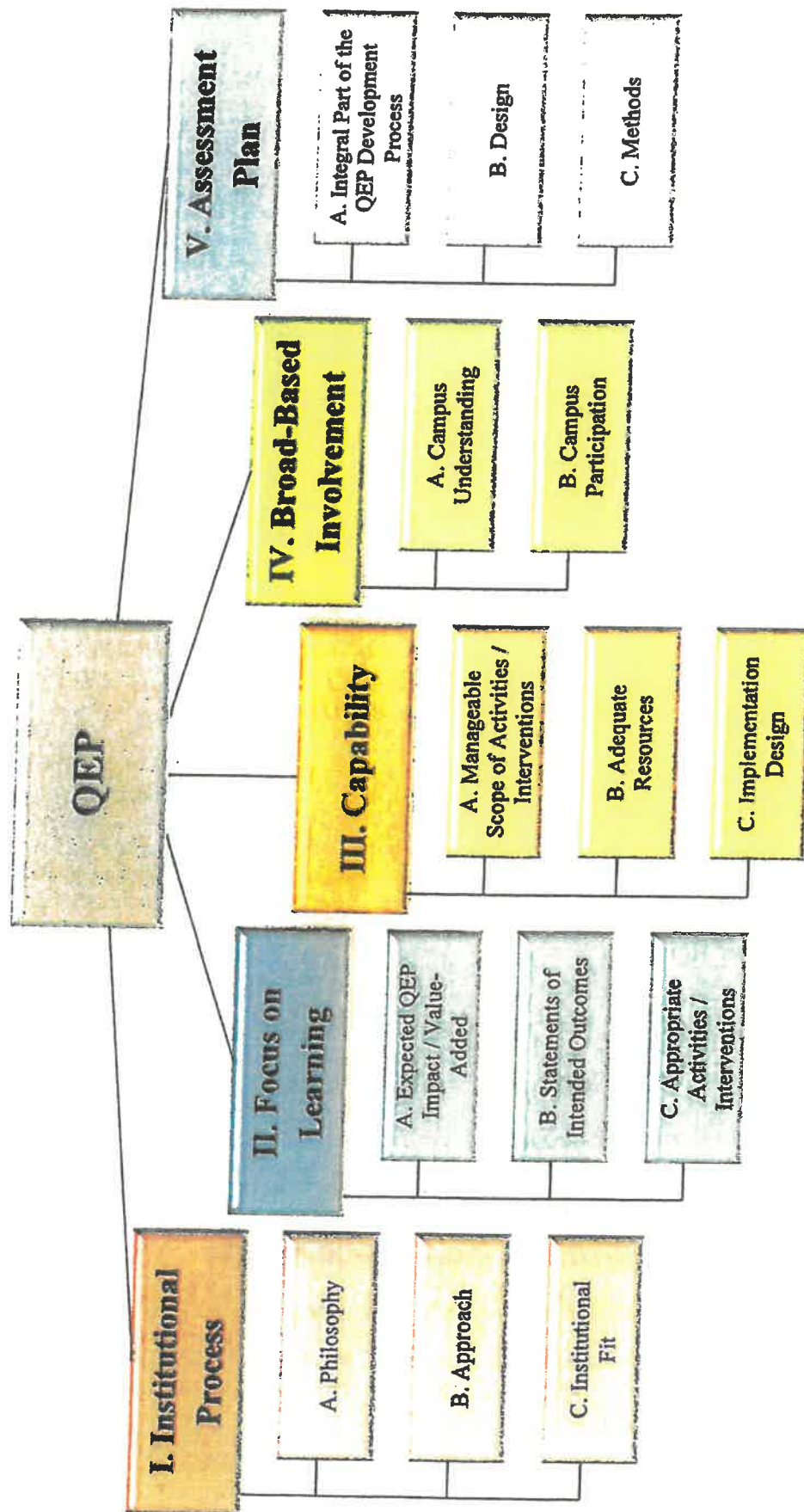
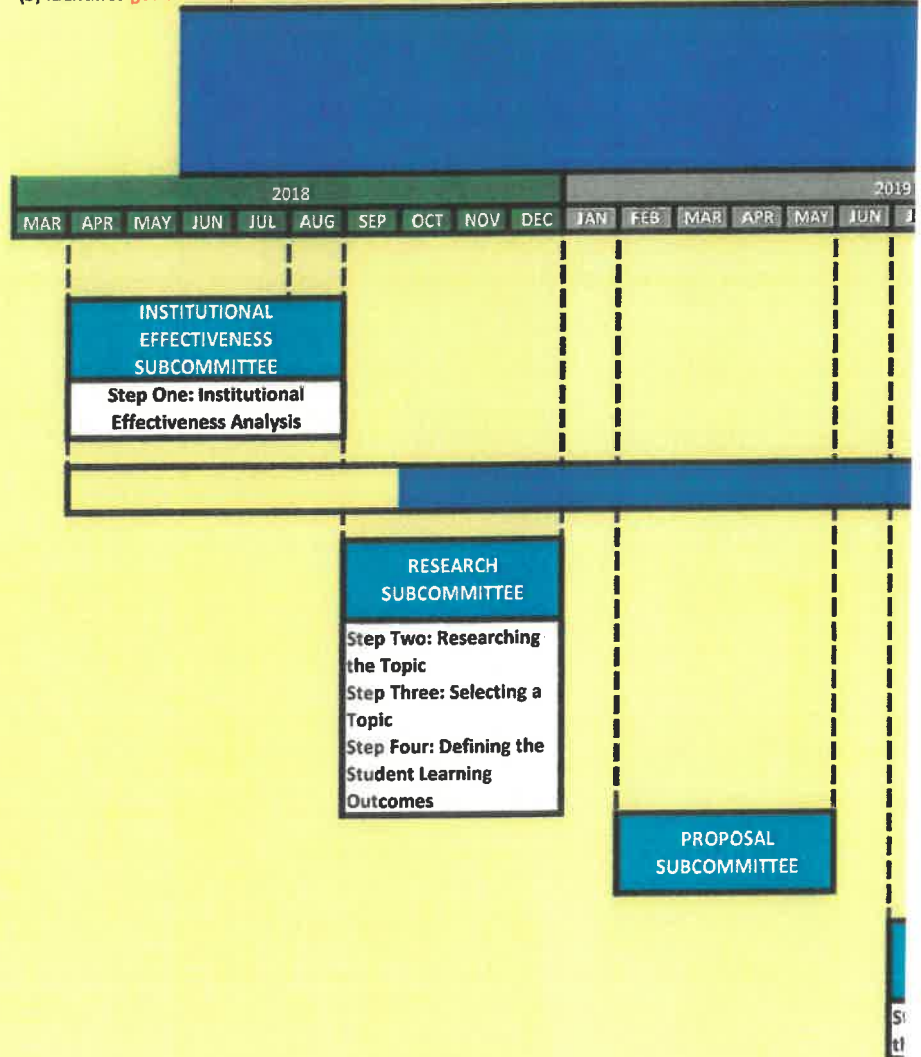


Table of Contents for the Quality Enhancement Plan generally include the following components:

- I. **Executive Summary** *(one page)*
- II. **Process Used to Develop the QEP:** Evidence of the involvement of all appropriate campus constituencies *(providing support for compliance with CS 3.3.2 "includes a broad-based involvement of institutional constituencies in the development...of the QEP")*
- III. **Identification of the Topic:** A topic that is creative and vital to the long-term improvement of student learning *(providing support for compliance with CR2.12 "focuses on learning outcomes and/or the environment supporting student learning")*
- IV. **Desired Student Learning Outcomes:** Specific, well-defined goals related to an issue of substance and depth, expected to lead to observable results *(providing support for compliance with CS 3.3.2 "identifies goals")*
- V. **Literature Review and Best Practices:** Evidence of consideration of best practices related to the topic *(providing support for compliance with CS 3.3.2 "institutional capability for the initiation, implementation, and completion of the QEP")*
- VI. **Actions to be Implemented:** Evidence of careful analysis of institutional context in designing actions capable of generating the desired student learning outcomes *(providing support for compliance with CS 3.3.2 "institutional capability for the initiation, implementation, and completion of the QEP")*
- VI. **Timeline:** A logical calendaring of all actions to be implemented *(providing support for compliance with CS 3.3.2 "institutional capability for the initiation, implementation, and completion of the QEP")*
- VIII. **Organizational Structure:** Clear lines of responsibility for implementation and sustainability *(providing support for compliance CS 3.3.2 "institutional capability for the initiation, implementation, and completion of the QEP")*
- IX. **Resources:** A realistic allocation of sufficient human, financial, and physical resources *(providing support for compliance CS 3.3.2 "institutional capability for the initiation, implementation, and completion of the QEP")*
- X. **Assessment:** A comprehensive evaluation plan *(providing support for compliance with CS 3.3.2 "a plan to assess their achievement")*
- XI. **Appendices** *(optional)*

**Core Requirement 2.12** The institution has developed an acceptable Quality enhancement Plan (QEP) that i  
**and/or the environment** supporting student learning and accomplishing the mission of the institution.  
**Comprehensive Standard 3.3.2** The institution has developed a Quality Enhancement Plan that:  
 (1) demonstrates **institutional capability** for the initiation, implementation, and completion of the QEP;  
 (2) includes **broad-based involvement** of institutional constituencies in the development and proposed impl  
 (3) identifies **goals and a plan to assess** their achievement.

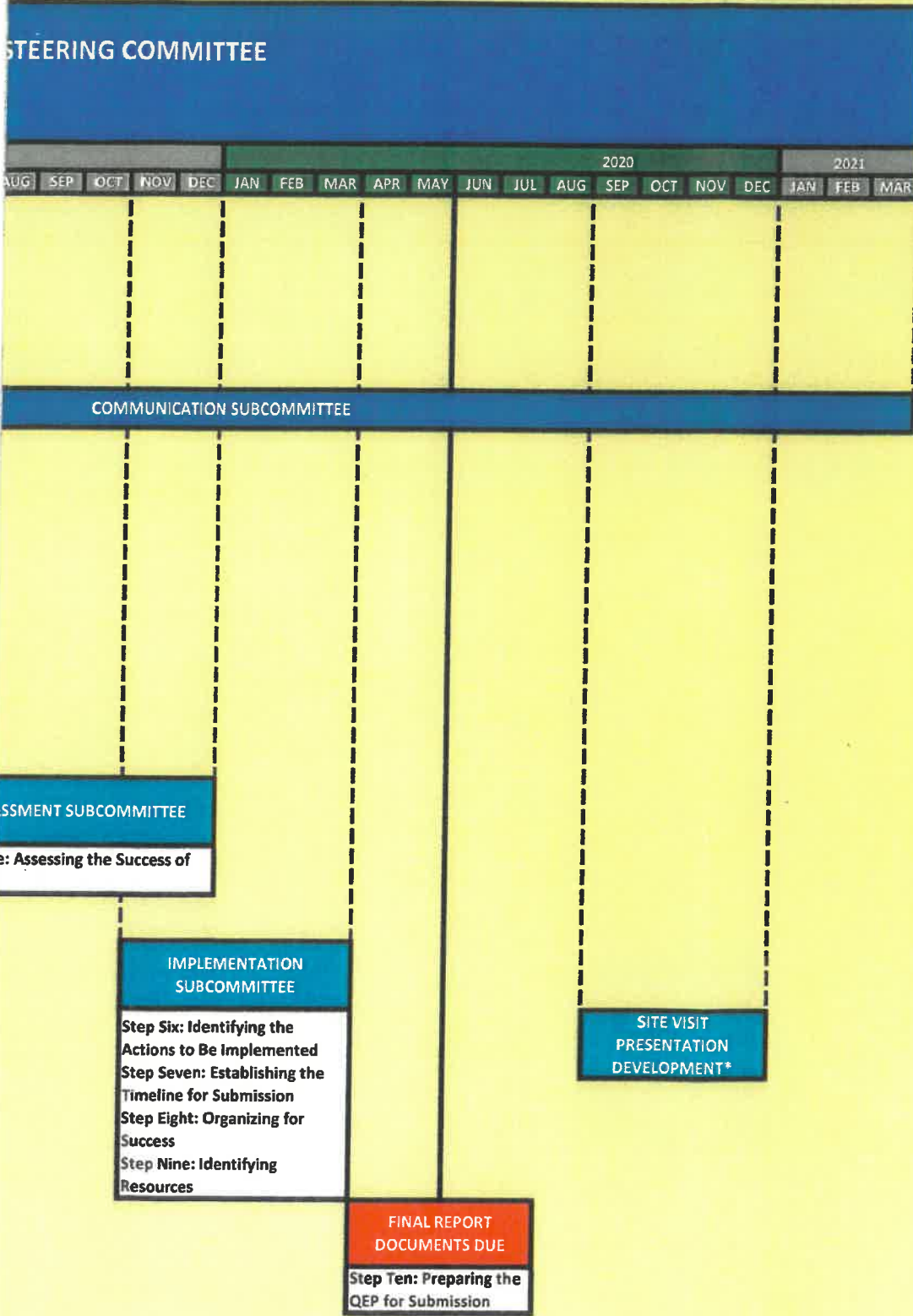


\*Site visit presentation made by chairs of subcommittees

# PROCESS OVERVIEW

es an institutional process for identifying key issues emerging from institutional assessment and focuses on learning outcomes

ation of the QEP; and



## QEP 2021 PRODUCTION GRID

Section	Support Documentation	Responsibility	TIME FRAME
Executive Summary			
Process Used to Develop the QEP			
Introduction			
Introduction to M. D. Anderson's School of Health Professions	1. Appendix I: SHP Student Enrollment 2009-2010 (p. 63)	SHP Deans Office	
Organizing the QEP Process			
The QEP Advisory Committee	2. Appendix II: SACS QEP Committee (p. 64) 3. Appendix III: QEP Subcommittees (p. 65)	2. QEP Staff 3. QEP Staff	
The Committee Process			
QEP Development Timeline	4. Table 2.1: QEP Development Timeline (p. 7)	QEP Staff	
Selecting the QEP Title			
Identification of the Topic			
Development of the Topic	5. Appendix IV: Bibliography (p. 66)	Research Subcommittee	
Analysis of Institutional Effectiveness Data			
SHP Student Course Evaluations	6. Table 3.1 SHP Student Course Evaluation Sample Data Summary (2007-2008) (p. 9)	Institutional Effectiveness Analysis Subcommittee	
SHP Faculty Instructional Observations			
Faculty Development Needs Assessment	7. Table 3.2: Target Development Area Summary from Needs Assessment and Instructional Observations (p. 11)	Institutional Effectiveness Analysis Subcommittee	
Informal Faculty Observations			
Employer, Alumni, Faculty and Student Focus Groups	8. Appendix V: SACS QEP, Alumni and Student, Employers and Faculty Focus Groups (p. 69), 9. Appendix VI: Announcement and Minutes to M. D. Anderson Chair/Research Faculty and GSBS Faculty (p. 71)	8. Institutional Effectiveness Analysis Subcommittee 9. Communication Subcommittee	



Section	Support Documentation	Responsibility	TIME FRAME
Alignment of the QEP to M. D. Anderson's Institutional Mission	10. Table 3.3. QEP Goals Alignment with SHP, Academic Affairs and M. D. Anderson Strategic Plans (p. 13)	QEP Staff	
Operational Definition of Critical Thinking			
Desired Student Learning Outcomes			
Development of the QEP Goal and Outcomes			
Goal Defined			
Outcomes Defined			
Literature Review and Best Practices			
Development of the Literature Review			
Defining Critical Thinking			
Theoretical Definitions			
Theoretical Foundations			
Philosophy-based Theories and Definitions			
Psychology-based Theories and Definitions			
Teaching Critical Thinking			
Best Practices Instructional Models (QEP /Critical Thinking)			
Assessment of Critical Thinking			
Critical Thinking Assessment Test (CAT)			
The California Critical Thinking Skills Test			
The Watson-Glaser Critical Thinking Appraisal			
The University of Cambridge Assessment of Academic Proficiency Critical Thinking			
The International Critical Thinking Test			

Section	Support Documentation	Responsibility	TIME FRAME
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Elements of the Implementation Plan			
Faculty Components of the Implementation Plan			
Faculty Development Sessions	13. Table 6.1: Faculty Development Plan (p. 26)	Implementation Subcommittee	
Faculty CAT Exam Scoring Training			
Faculty Competencies: Current Best Practices in Critical Thinking Skills			
Faculty Resource Center			
Student Components of the Implementation Plan			
Student Research Projects			
Integrated Course Activities	14. Appendix IX: SHP Research Courses (p. 77)	SHP Deans Office (if needed)	
Student Assessment	15. Table 6.2: Cohorts by Implementation Year (p. 29)		
QEP Five Year Implementation Plan	16. Table 6.3: M.D. Anderson's QEP (aligned outcomes, program components, and assignment) (p. 30)	Implementation Subcommittee	
Timeline	17. Table 7.1: QEP Implementation Timeline by Program Component (p. 35)	Implementation Subcommittee	
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Development of the Implementation Infrastructure	18. Table 8.1: QEP Organizational Infrastructure with Time frame (p. 37)	Implementation Subcommittee	
QEP Leadership	19. Figure 8.1: Organizational Reporting Structure for Implementing the QEP (p. 38)	QEP Staff	
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Institutional Research			
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Communication and Marketing Plan	23. Table 9.1: QEP Launch Communication Plan (p. 41) 24. Appendix XII: Initial QEP Announcement (p. 85) 25. Table 9.2: Ongoing QEP Communication and Marketing Plan (p. 42)	23. Communication Subcommittee 24. Communication Subcommittee 25. Communication Subcommittee	
Faculty Development			
Critical Thinking Skills Sessions			
CAT Exam Scoring Training			
Current Best Practices in Critical Thinking Skills			
Funding Support	26. Funding support for faculty development (p. 44)	QEP Staff	
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Funding Support	27. Funding support for the hands-on student research activity (p. 48)	QEP Staff (if needed)	
Integrated Course Activities			
Funding Support	28. Funding support for the integrated course activities (p. 49)	QEP Staff (if needed)	
Faculty Resource Center			
Funding Support	29. Funding support for the Faculty resource center (p. 50)	QEP Staff (if needed)	

Section	Support Documentation	Responsibility	TIME FRAME
Student Assessment			
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Assessment			
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Assessment Instruments			
Assessment Plan Overview			
Assessing Student Outcomes	31. Table 10.1: Assessment Measures for Student Learning Outcomes by QEP Components (p. 53)	Assessment Subcommittee	
Student Research Project Rubric			
Student Course Survey			
Standardized Assessment (CAT Exam)			
Baseline Student Performance on CAT	32. Figure 10.1: Distribution of Junior Students' Scores on CAT Exam (p. 55)	Institutional Effectiveness Analysis Subcommittee	
Assessing Faculty Outcomes	33. Table 10.2: Assessment Measures for the Faculty Learning Outcome by QEP Components (p. 56)	Assessment Subcommittee	
Pre- and Post-Session Evaluation			
Faculty Development Session Evaluation Survey			
Curriculum Inventory			
Portfolio Assessment			
Instructional Observations			
Faculty Satisfaction Survey			
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Section	Support Documentation	Responsibility	TIME FRAME
Student and Faculty Outcome Benchmarks	35. Table 10.4: QEP Assessment Benchmarks (p. 59)	Assessment Subcommittee	
QEP Annual Report and Retreat			
Summary			
Site Visit Presentation		Subcommittee Chairs	

\*\* In addition to templates (on Production Grid) subcommittees will prepare report to include:

- Roster
- Agendas
- Results

### **Organizing the QEP Process**

Discussions were held between the senior vice president for academic programs at M. D. Anderson, the dean of the School of Health Professions (SHP) [Note: formerly School of Health Sciences] and the dean of the Graduate School of Biomedical Sciences (GSBS) regarding the QEP development process. During these meetings the parties discussed the advantages and disadvantages of developing a joint QEP: one that would benefit both the SHP and GSBS immediately. As discussions progressed, significant differences between the two schools' goals and objectives emerged. SHP programs are skill-based baccalaureate level programs while the GSBS programs are research-based graduate level programs in pure science. In addition, since the SHP is administered solely by M. D. Anderson and the GSBS is jointly administered by M. D. Anderson and the University of Texas Health Science Center Houston (UTHSCH), the decision was made that the QEP should be initially developed within the SHP. However, it is anticipated that the best practices developed in the SHP for the QEP will be reviewed for potential implementation into the GSBS curriculum.

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THE UNIVERSITY OF TEXAS

**MDAnderson  
Cancer Center**

Making Cancer History\*

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The University of Texas Health Science Center at Houston  
The University of Texas M. D. Anderson Cancer Center  
**GRADUATE SCHOOL OF BIOMEDICAL SCIENCES**  
**GRADUATE FACULTY MEETING**  
**February 12, 2009**  
**MINUTES - Abbreviated**

**Present:** Lozano, Chair; Actor, Angel, Balasubramanian, Barnhart, Barton, Bean, Bedford, Benavides, Blackburn, Broaddus, Cantor, Chamberlain, Sandy Chang, Shine Chang, Cody, Cote, Dent, Douglas, Fischer, Freireich, Fuchs-Young, Furuta, Gallick, Gandhi, Goka, Hazle, D. Johnson, Knutson, Koehler, Krahe, Kuang, Legerski, Lizee, Lorenz, Loveland, Q. Ma, Martinez-Valdez, Mattox, May, McCrea, Nagarajan, Nehete, Overwijk, Plunkett, Price, Richie, Scheet, J. Schumacher, Shi, Singletary, Starkschall, Tomasovic, Ullrich, Van Dyke, Watowich, Waymire, Wiener, Williams, Willis, K-K Wong  
**Staff:** Chappell, Cruz Bruesch, Gaughan, Solberg, Spitzenberger, Theriot, Valladolid, Weinberg, Williams

**1. Approval of the minutes of the October 7, 2008 meeting**

Minutes were approved by acclamation.

**2. Report from the Senior Vice President for Academic Affairs, M. D. Anderson Cancer Center**

Dr. Tomasovic reported:

M. D. Anderson's Provost, Dr. Raymond DuBois, who is very interested in faculty development and mentoring, has started a quarterly seminar series on career building. The first seminar was held this week and went very well.

Dr. Tomasovic and his staff are preparing for the 2010 accreditation reviews of MDACC and the HSC by the Southern Association of Colleges and Schools (SACS) since GSBS is part of both institutions. The administrations are working together to ensure that consistent data and documentation are submitted. One aspect of the SACS review is the Quality Improvement Plan

As part of the accreditation process, SACS requires each institution to have a "Quality Enhancement Plan" (QEP). A QEP is an ongoing project designed to improve student learning outcomes. Since Anderson's review will include both GSBS and MDACC's School of Health Professions (SHP), instead of developing a QEP that would involve both undergraduate and graduate students, it's been proposed that the QEP be related to critical thinking skills at SHP. Dr. Stancel said that if a strategy is developed that would be appropriate for our students, then we would take advantage of it, but only after the SACS review is over next year. By a show of hands, the faculty unanimously endorsed the plan to have MDACC's QEP focus on critical thinking skills at the School of Health Professions.

Appendix VI: Announcement and Minutes to M. D. Anderson Clinical/Research Faculty and GSBS Faculty

## facultyNotes

### SACS Quality Enhancement Plan Established

Thursday, October 9, 2008

M. D. Anderson has established a Quality Enhancement Plan as part of its Southern Association of Colleges and Schools reaccreditation initiative.

The QEP is a component of the SACS accreditation process that reflects the commitment of the Commission on Colleges to enhancing the quality of higher education. M. D. Anderson earned SACS accreditation in 2005 and will seek to maintain its status in 2010.

SACS defines a QEP as a carefully designed plan that addresses a well defined and focused topic or issue that is related to enhancing student learning. A QEP is embedded within an institution's ongoing planning and evaluation process, and focuses on an issue or issues that the institution considers important.

A steering committee of faculty and students is developing the QEP, using a 10-step process established by SACS. These steps include:

- Selecting the topic
- Defining the student learning outcomes
- Researching the topic
- Identifying the actions to be implemented
- Determining a timeline
- Organizing the project
- Identifying necessary resources
- Assessing the success of the QEP
- Preparing the QEP submission
- Preparing an Impact Report

## facultyNotes

### SACS Quality Enhancement Plan Progress

Thursday, July 2, 2009

The Quality Enhancement Plan is a component of the Commission on Colleges of the Southern Association of Colleges and Schools reaccreditation process and is designed to reflect an institution's commitment to enhancing the quality of student learning on campus. M. D. Anderson earned initial SACS accreditation in 2005 and will seek to maintain its status in 2010.

The institution's QEP steering committee has passed the 60% mark in its progress to develop a QEP Plan for the School of Health Professions. The committee conducted an in-depth study of results from SHP assessment tools, leading to the identification of four possible areas for improvement. These four areas were: capstone seminars, critical thinking skills, faculty development and use of technology. Following the identification of these areas, focus groups were conducted by Marilyn Greer, Ph.D., director for Institutional Research, to allow for a more in-depth investigation of these topics from the perspective of university stakeholders.

Ultimately, this process resulted in a preliminary, working definition of critical thinking. The definition, as developed by the M. D. Anderson community, is:

"Critical thinking includes the ability to: 1) effectively evaluate and interpret data; 2) apply existing knowledge to solve problems in new situations; 3) demonstrate creativity and resourcefulness; and 4) effectively and persuasively communicate findings."

The committee currently is considering proposals for curriculum interventions and faculty development that will result in the improvement of SHP graduates' critical thinking skills



## **Ford,David M**

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**From:** Ford,David M  
**Sent:** Thursday, March 15, 2018 9:46 AM  
**To:** Ford,David M  
**Subject:** DRAFT MEMO FOR DR BODURKA

**Importance:** High

**From: Diane Bodurka, MD**  
VP, Clinical Education  
[dcbodurka@mdanderson.org](mailto:dcbodurka@mdanderson.org)  
The University of Texas MD Anderson Cancer Center  
1515 Holcombe Blvd, Unit 1727  
Houston TX 77030

**Date:** March 2, 2018

**Subject:** Continuation of QEP agreement (UT MD Anderson and UT Health) for 2021 SACSCOC Reaffirmation Report

The following memorandum and attachments from the 2010 SACSCOC submission serve to acknowledge our interest in continuation of the agreement between The University of Texas MD Anderson Cancer Center and The University of Texas Health Science Center of Houston McGovern Medical School regarding the development and implementation of the Quality Enhancement Plan (QEP) for the upcoming 2021 SACSCOC's Reaffirmation Report.

As before,

- 1). The MD Anderson UT Health Graduate School of Biomedical Sciences will develop and implement their QEP jointly with The University of Texas Health Science Center of Houston McGovern Medical School. Their joint QEP will be included with The University of Texas Health Science Center of Houston McGovern Medical School's 2021 SACSCOC Reaffirmation submission.
- 2). The MD Anderson School of Health Professions will develop and implement their QEP through The University of Texas MD Anderson Cancer Center. Their QEP will be included with The University of Texas MD Anderson Cancer Center's 2021 SACSCOC Reaffirmation submission.

We appreciate the collaborative relationship we have enjoyed and look forward to continuing it moving forward. If you additional information or have any questions, please direct them to my office.

David M. Ford, Ed.D.  
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QEP Director  
Assistant Professor  
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**Making Cancer History**

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