



REQUEST FOR PROPOSAL (RFP)

STRATEGIC ENROLLMENT CONSULTANT

**EASTERN VIRGINIA MEDICAL SCHOOL
MATERIALS MANAGEMENT**

RFP #: [EVMS ENROLLCONSULT19-101](#)

July 18, 2018

REQUEST FOR PROPOSAL (RFP)

RFP Number: EVMS ENROLLCONSULT19-101
(INTERNAL REFERENCE ONLY: BV19-1)

Issue Date: July 18, 2018

Project Title: Strategic Enrollment Consultant

Issuing Department: Eastern Virginia Medical School
Department of Materials Management
711 Southampton Avenue
Norfolk, VA 23510

Location Where
Work Will Be
Performed: Office of Admissions and Enrollment

Anticipated Dates
Of Initial
Contract Term: From: September 10, 2018
To: September 9, 2021
With two (2) 1-year renewal options for Digital Marketing Analysis

Due Date (Sealed
Proposals will be
received Until): **August 8, 2018 at 4:00 PM EST**

Additional RFP
Information:

Addenda and Amendments to this RFP will be posted on the following EVMS website:

http://www.evms.edu/about_evms/administrative_offices/materials_management/solicitations/

Please direct all inquiries for information about this RFP, in writing, to the **Materials Management, Contract Specialist**, at the following email address: Michele Jean @ jeanma@evms.edu

NO QUESTIONS WILL BE ANSWERED BY PHONE

EVMS will post all questions and responses on:

http://www.evms.edu/about_evms/administrative_offices/materials_management/solicitations/ to ensure that responses to RFP questions are available to all responsible bidders (“Offerors”). However, it is the sole responsibility of the Offeror(s) to periodically check the before mentioned website for any response(s) to RFP question(s).

In addition, while the RFP is open, and once the RFP has closed, Offeror(s) shall not contact EVMS staff directly to ask questions about the RFP. **This restriction on Offeror communication with EVMS staff is to ensure fairness in the competitive process.**

Due Date for RFP

Questions: August 1, 2018

RFP Time

Extensions: Requests for additional RFP information and the associated responses shall not extend the due date for bids in response to this RFP. To ensure fairness in the competition process and that all Offerors are given the same amount of time to respond to the RFP EVMS reserves the right, at EVMS’s sole discretion, to extend the time for responses to this RFP to all Offerors, as deemed appropriate; and, under no circumstances shall separate or individual extensions be granted. EVMS will post all RFP extensions on the following website:

http://www.evms.edu/about_evms/administrative_offices/materials_management/solicitations/

PROPOSALS MAY BE MAILED, SENT BY OVERNIGHT OR EXPRESS COURIER, OR HAND-DELIVERED TO:

Mail, Overnight or Express Courier

Eastern Virginia Medical School
Materials Management
Attn: RFP No: EVMS ENROLLCONSULT19-101
714 Woodis Avenue
Norfolk, VA 23510

Hand Delivery

Eastern Virginia Medical School
Materials Management
Subject: RFP No: EVMS ENROLLCONSULT19-101
711 Southampton Avenue
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1.0 PURPOSE:

The purpose of this RFP is to provide information to responsible bidders (referred throughout this RFP as “Offeror(s)” and/or “Contractor(s).”) in order to solicit competitive proposals (“Proposals”), in accordance with the policies of Eastern Virginia Medical School.

Eastern Virginia Medical School (EVMS) is committed to providing academically challenging education preparing the next generation of healthcare providers, researchers, and educators while translating discovery into better healthcare for the Hampton Roads Community.

EVMS recognizes the ever-changing higher education landscape and the availability of resources needed to accomplish its mission and vision while meeting its long-term enrollment goals. It recognizes competition to attract students is increasing with regional institutions adding similar programs and online options giving students choices. Furthermore, changing demographics, economic conditions, and a need to increase a diverse study body are also affecting enrollment and the institution’s mission.

To address these challenges EVMS is seeking to develop a comprehensive, multiyear data-driven strategic enrollment plan to better align itself with its mission and vision while providing ongoing guidance for its enrollment policies, and procedures. The Strategic Enrollment Plan will establish an integrated and transparent framework to guide the institution’s enrollment management.

EVMS is requesting submission from higher education consulting firms to provide guidance, expertise, and assistance for strategic enrollment planning, program marketing analysis and digital marketing in medical and graduate health professions markets for the School of Medicine and the School of Health Professions over a 36-month period

2.0 BACKGROUND

Eastern Virginia Medical School (EVMS) was born of necessity in 1973, the result of a community-led effort to improve health care in a region then plagued with a severe shortage of physicians. Patients often had to leave the area in search of specialized care. Today, the region enjoys modern medical facilities and a full-range of medical specialties. As community leaders foresaw, EVMS was a catalyst for change, playing a key role in the region’s medical renaissance through its commitment to education, research and patient care.

Education

EVMS offers a variety of graduate and doctoral degrees in the medical and health professions. Interest in all programs continues to grow. In the most recent year, EVMS received nearly 8,000 applications for 450 openings. The school now has 6,800 graduates who practice throughout Hampton Roads, across Virginia and around the globe. EVMS also provides specialty training for some 300 medical residents annually and offers Continuing Medical Education to thousands of health-care professionals practicing in the region.

Research

EVMS is the largest biomedical research institution in southeastern Virginia. More than 100 EVMS faculty members are engaged in basic and clinical research focused in areas where the

community has pressing needs. Innovative research has brought EVMS to the forefront of groundbreaking discoveries — from the pioneering of in vitro fertilization in America, to the recognition of new cancer detection and treatment methods and innovative therapies for individuals suffering from the debilitating side effects of diabetes. We continually strive to enhance our research enterprise in order to improve the health of the people of Hampton Roads and beyond.

Patient Care

What once was one of the nation's most medically underserved communities is today a destination for people from around the country seeking the best available care. For the 1,500 people each day who receive high-quality, patient-centered care at more than 20 convenient EVMS Medical Group locations across the region, it equates to the best possible care, delivered with a healthy dose of compassion.

3.0 STATEMENT OF NEEDS / SCOPE OF WORK

EVMS seeks consultant(s) who have extensive experience in higher education medical and health professions enrollment planning, program analysis, and digital marketing.

The consultant(s) shall furnish the following services for strategic planning, program market analysis and digital marketing.

3.1 Strategic Enrollment Planning

- The consultant(s) will work with EVMS Strategic Enrollment Management (SEM) Committee to create a 3-year Strategic Enrollment Plan that provides realistic projections of demographics, goals, metrics for successful conversion of prospects to applicants, self-assessment and accountability.
- The consultant(s) will conduct an analysis of current and future enrollment trends and projections for all programs.
- The consultant(s) will ensure the strategic enrollment plan will include a 5-year projection of demographics, enrollment patterns and trends.
- The consultant(s) will evaluate and assess current marketing and recruitment strategies.
- The consultants(s) will identify gaps in enrollment, marketing and recruitment.
- The consultant(s) will work with EVMS SEM Committee to create a framework with specific actions and accountabilities.
- The consultant(s) will work with EVMS SEM Committee to develop a recruitment plan by program.
- The consultant(s) will work with EVMS SEM Committee to develop key performance indicators (KPI) based on data.
- The consultant(s) will assess the structure of the Office of Admissions and Enrollment to ensure current positions will successfully meet institutional recruitment, enrollment and retention goals.
- The consultants will work with EVMS SEM Committee to complete the strategic enrollment plan within 1 year.

3.2 Program Analysis

- The consultant(s) will conduct the program analysis in 3 phases. Each phase will include four to six programs and should not take more than 4 months to complete. The phases are as follows:
 - **Phase I**
 - Art Therapy & Counseling, MS
 - Healthcare Analytics, MHA
 - Healthcare Delivery Science, MHDS
 - Medical & Health Professions Education, MMHPE and PhD/EdD
 - Master of Public Health, MPH
 - Medical Masters, MS (1-year & 2-year)
 - **Phase 2**
 - Doctor of Medicine, MD
 - Laboratory Animal Science, MS
 - Pathologists' Assistant, MHS
 - Contemporary Human Anatomy, MS
 - Biomedical Sciences Research, MS and Biomedical Sciences, PhD
 - Biotechnology, MS
 - **Phase 3**
 - Physician Assistant, MPA
 - Surgical Assisting, MSA
 - Doctor of Health Sciences, DHSc
 - Reproductive Clinical Science, MS and PhD
- The consultant(s) will conduct a needs assessment and identify learner profiles for each program.
- The consultant(s) will conduct the following analyses for each program
 - Situational
 - Competitor
 - Market Demand
- The consultant(s) will provide a detailed project timeline.

3.3 Digital Marketing

- The consultant(s) will review previous and current digital marketing campaigns and strategies.
- The consultant(s) will develop a marketing strategy and data-driven digital marketing plan that works synergistically with institutional marketing efforts.
- The consultant(s) will recommend and provide strategies for audience identification/targeting including the following platforms but not limited to behavioral, demographics, geo-targeting, IP Targeting, and website retargeting.
- The consultant(s) will develop and implement creative multi-channel social media marketing campaigns that meet and support institutional brand standards to build awareness of EVMS programs, and unique opportunities across the web.
- The consultant(s) will develop tailored communications that meet and support institutional brand standards to target program specific populations.
- The consultant(s) will develop tailored communications that meet and support institutional brand standards to target under-represented minorities (URM), military, and veterans.

- The consultant(s) will provide real-time analysis and tracking of engagement and conversion throughout each campaign. Reports will be given on a bi-weekly and monthly basis.
- The consultant(s) will develop and implement assessments of success of digital marketing campaigns and communications.
- The consultant(s) will evaluate current program brochures and design new program brochures, if needed, that meet and support institutional brand standards.
- EVMS will retain ownership of all materials developed.

4.0 PRICING SCHEDULE:

The Offeror shall provide pricing for each of the identified components of this RFP to include all travel, deliverables, incidental, and miscellaneous expenses. Offeror should provide extensive detail as to what is included within pricing. The Offeror shall include pricing for all other products and services.

Offeror is to fill in the table on Attachment G to include all applicable components, charges, and any other charges not listed.

5.0 METHOD OF PAYMENT:

The Supplier will be paid based on invoices submitted after services have been provided or upon completion of project.

Payment to Supplier:

1. The Offeror shall enroll in and acknowledges that payment will be made by payment card, also known as ePayables. Once an invoice is approved for payment, an electronic remittance advice shall be sent to the Offeror by email or facsimile, instead of a check. Payments can be retrieved with EVMS’s designated account number that will be assigned to the Offeror. Terms begin after receipt of proper invoice or material/service, whichever is later.
2. Offeror cannot charge fees to accept ePayables.
3. A .5% administrative fee may be charged for check payments and default payment terms of Net 30, or others outside of ePayables.

Submit invoices to the following address:

Eastern Virginia Medical School
Attn: Accounts Payable
PO Box 2020
Norfolk, VA 23501-2020

Email: apinvoices@evms.edu

6.0 INVOICES, REPORTING AND DELIVERY INSTRUCTIONS

1. The Contractor shall prepare and submit invoices and reports to EVMS according to the following schedule:

<u>Invoice or Report</u>	<u>Due Date</u>
1. Invoices	Within Ten (10) Days of EVMS’s Acceptance of the Completed Deliverable(s); and,
1. Final Technical Report	Forty-five (45) Days after Scope and Invoice of Work Completion and Acceptance by EVMS or Expiration or Termination of the Contract. Meeting will be required to review any technical report that is produced.

2. The following is a schedule of deliverables including any specific delivery instructions:
 1. The Consultant(s) shall provide the following documentation to EVMS SEM Committee to review:
 - Outline and timeline of the Strategic Enrollment Plan;
 - Outline and timeline of the Program Analysis;
 - Outline and timeline of the Digital Marketing Analysis to include but not limited to:
 - a. Digital marketing plan
 - b. Campaign Plans;
 - c. Campaign Timelines.
 - d. Reports
 2. The consultant(s) shall provide a monthly progress report to EVMS SEM Committee outlining the following:
 - The specific accomplishments achieved during the reporting period;
 - The specific tasks completed pursuant to the provisions of the contract and the completion dates of such tasks;
 - The projected completion dates for the remaining specific tasks required by the contract.
 3. Within thirty (30) calendar days after the award date of the contract, the consultant(s) shall furnish a preliminary outline of the organizational structure of the project to EVMS SEM Committee, outlining the following:

- The preliminary outline shall delineate the main topics and subtopics that will later be described in detail in the final report;
 - Beneath each topic and subtopic, the contractor shall furnish a brief narrative description of the subject matter encompassed by the topic or subtopic;
 - The Medical School shall have the right to edit, modify and/or rearrange the organizational structure, topics, and subtopics as it deems necessary to insure the inclusion of all work required by the contract;
4. At least two (2) weeks prior to the submission of the final report, the consultant(s) shall present a preliminary draft of the final report to EVMS SEM Committee. The agency shall have the right to modify and/or to require additional elaboration as it deems necessary to insure a comprehensive and thorough written study of all work required by the contract.
 5. On or before the date specified in the contract, a final report shall be delivered to the SEM Committee for its approval. The consultant(s) shall furnish (5) copies of the final reports.
 6. The contractor shall make at least one (1) oral presentation of the final report to persons or organizations as deemed necessary by the Medical School.

7.0 PROPOSAL PREPARATION AND SUBMISSION INSTRUCTIONS

A. General Instructions:

Delivery of the Proposal must be by one of the following methods:

Mail, Overnight or Express Courier to:

Eastern Virginia Medical School
Materials Management
Attn: RFP No: EVMS ENROLLCONSULT19-101
714 Woodis Avenue
Norfolk, VA 23510

Hand Delivery

Eastern Virginia Medical School
Materials Management
Subject: RFP No: EVMS ENROLLCONSULT19-101
711 Southampton Avenue
Norfolk, VA 23510

B. RFP Submission:

1. **Complete Submissions:**

Except as provided for under the Proposal Preparation Section, 7.0 (A)(2)(a)(iii), which addresses the circumstances under which the submission of missing Proposal information would be acceptable, Offerors must submit a complete response to this RFP in order to be considered for selection under this RFP.

2. **Delivery:**

By Mail, Overnight or Express Courier or Hand Delivery -

If Proposals are delivered by mail, overnight or express courier or hand-delivery, Offerors must provide **one (1) original and (5) copies** of each Proposal along with an electronic copy of the proposal on a flash drive in Microsoft Word, Excel(if applicable) and PDF format must be submitted to EVMS for consideration. Each copy must include all addenda acknowledgements, if any, and completed attachments signed and filled out as required.

3. **Proposal Acceptance Period:**

All Proposals must be received by the Due Date and time found on page 1 of this RFP (the "RFP Close"). Proposals received after RFP Close will not be considered. RFP modifications, unless requested by EVMS and posted to all Offerors on the EVMS RFPs website, will not be considered.

4. **Proposal Withdrawals:**

At the sole discretion of the Offeror(s), Proposals may be withdrawn at any time prior to the RFP Close. After RFP Close, letters to withdraw a Proposal will not be accepted and Proposals will remain valid until an award is made and a contract is executed or the RFP is canceled. If an award is not made within 120 days from the RFP closure date, the Proposal may be withdrawn at the written request of the Offeror.

C. **Proposal Preparation:**

1. Proposals shall be signed by an authorized representative of the Offeror (Section 11 Attachment B). All information requested should be submitted to ensure consideration as a responsive bidder. Failure to submit all information requested may result in the following:

- a. EVMS may reject the Proposal as unresponsive. Proposals, which are substantially incomplete or lack key information, may be rejected by EVMS; or,
- b. EVMS may lower the overall evaluation score due to missing information; or,

- c. EVMS may require prompt submission of missing information within a prescribed time period and/or the Offeror shall receive a lower overall evaluation score due to missing information lowered evaluation of the Proposal. If after being given an opportunity to submit missing information, the Offeror does not provide all of the requested information then subsections 7.0 C (1)(a) and (b) above apply.
2. All information above must be submitted along with the RFP cover sheet (Section 13, Attachment A) and an Entity Data Sheet (Section 13, Attachment C). Failure to submit all information requested may result in EVMS requiring prompt submission of missing information and/or giving a lowered evaluation of the Proposal. EVMS may reject Proposals, which are substantially incomplete or lack key information.
3. Proposals should be prepared simply and economically, providing a straightforward, concise description of capabilities to satisfy the requirements of the RFP. Emphasis should be placed on completeness and clarity of content and include or address the following:
 - a. **Organization** - Proposals should be organized in the order in which the requirements are presented in the RFP;
 - b. **Pagination** - All pages of the Proposal should be numbered;
 - c. **Paragraph Structure** - Each paragraph in the Proposal should reference the paragraph number of the corresponding section of the RFP and it is also helpful to cite the paragraph number, sub letter, and repeat the text of the requirement as it appears in the RFP. If a response covers more than one page, the paragraph number and sub letter should be repeated at the top of the next page;
 - d. **Table of Contents** - The Proposal should contain a table of contents, which cross-references the RFP requirements; and,
 - e. **Additional Information** - Information which the Offeror desires to present that does not fall within any of the requirements of the RFP should be inserted at an appropriate place or be attached at the end of the Proposal and designated as additional material.

Incomplete Proposals or Proposals, which, lack clarity of contact and organization submitted to EVMS submitted under this RFP may risk a reduced evaluation score or elimination from consideration.

4. As used in this RFP, the terms “must”, “shall”, “should” and “may” identify the critical requirements. “Must” and “shall” identify requirements where absence will have a major negative impact on the suitability of the Project and/or mandatory requirements, which are required by law or regulation and as such they cannot be waived and are not subject to negotiation. This includes any applicable prime award funding flow-down provisions, which are mandatory and/or required as applicable. Any federal standard provisions are an example of mandatory terms and conditions that are not subject to negotiation. Items labeled as “should” or

“may” are highly desirable, although their absence will not have a large impact on the Project and would be useful, but are not absolutely necessary or required. The inability of an Offeror to satisfy a “must” or “shall” requirement does not automatically remove that Offeror from consideration; however, it may seriously affect the overall rating of the Offerors’ Proposal.

5. Each copy of the submitted Proposal contained in a single volume where practical (i.e., binder, stapled, or otherwise secured so that the pages will not easily separate or come loose). All documentation submitted with the Proposal should be contained in that single volume.
6. All expenses involved with the preparation and submission of Proposals to EVMS, or any work performed in connection therewith, shall be borne by the Offeror. No payment(s) will be made for any responses received; or, for any other effort required of or made by the Offeror(s) prior to commencement of work as defined by a fully executed contract.
7. Ownership of all data, materials, and documentation originated and prepared for EVMS pursuant to the RFP shall belong exclusively to EVMS and may be subject to public inspection in accordance with the Virginia Freedom of Information Act (FOIA) unless a confidentiality or non-disclosure agreement is signed by the parties.

D. Oral Presentation:

Offerors who submit a Proposal in response to this RFP may be invited or required to give an oral presentation of such Proposal to EVMS. This provides an opportunity for the Offeror to clarify or elaborate on the Proposal. This is a fact finding and explanation session only and does not include negotiation. If such oral presentations are deemed appropriate at the sole discretion of EVMS, EVMS will schedule the time and location for such presentations. Oral presentations, including telephone, video/internet conferencing are available at the sole discretion of EVMS and may or may not be conducted.

E. Specific Proposal Instructions:

1. Proposals should be as thorough and detailed as possible so EVMS may properly evaluate your capabilities to provide the required goods/services. Offerors are required to submit the following items as a complete Proposal:
 - a. Return the RFP cover sheet (Attachment A) and all addenda, if any, along with all attachments signed and filled out as required;
 - b. Completed Entity Data Sheet (Attachment C) attached to the RFP, and other specific items or data requested in the RFP;
 - c. Contractor must provide proof of insurance via a Certificate of Liability Insurance (COI) to the EVMS Materials Management Contract Specialist upon award of Contract.
 - d. Address each item in the Statement of Work;

- e. Briefly describe what sets your Company/Proposal apart from your competitors;
 - f. A written narrative statement to include company history and key information relative to offeror's company as it pertains to this RFP;
 - g. A written narrative describing experience in providing the services described herein, samples from similar projects within the last five (5) years;
 - h. Provide an organizational chart illustrating the team structure and interrelationships, and provide an executive summary describing the roles and responsibilities of the team members;
 - i. Provide names, qualifications and experience of key personnel to be assigned to this the project; and,
 - j. Resumes of key personnel to be assigned to the project;
 - k. Offeror must provide three (3) references to include contact name, title, company name, email address, phone number, and how long Offeror has been doing business with that company. References from Higher Education, Medical/Health Centers or Research Facilities are preferred. References should be from within the past ten (10) years.
 - l. Offeror must provide a list of all accounts that have been lost during the past five (5) years including reasoning for cancellation or non-renewal.
2. Specific plans for providing the proposed goods/services, such as:
 - a. List of proposed equipment/goods/etc. including operating parameters, illustrations, etc.;
 - b. What, when and how the service will be performed and reference to any detailed work plans, milestones and timelines; and,
 - c. Time frame for completion (if not otherwise specified by EVMS in the Statement of Needs);
 3. Proposed Price broken down by line-item categories, as applicable –

For example:

- Personnel (total hours and hourly rate);
- Travel (including anticipated destinations);
- Laboratory Supplies;
- Equipment;

- Subcontracts; and,
 - Indirect Costs & Percentage (%) (if any), or as task-based pricing); and,
4. Internal Revenue Service (IRS) form W-9 for entities based in the United States (US) and appropriate W-8 for non-US based entities, signed by the Contractor's authorized official (See Section 11, Attachment D for W9/W8 Instructions).

8.0 PROPOSAL EVALUATION, NEGOTIATION AND AWARD CRITERIA

A. Award Criteria

Award of the Contract under this RFP shall be based on a written evaluation of the RFP evaluation criteria below (i.e., score sheet) of each responsible Offeror. Note that failure to provide accurate information required by this RFP may result in a lower score or rejection of the Proposal. EVMS has broad flexibility in fashioning the details of competition for this RFP. This may include conducting on-line Reverse Auctions for certain products within this RFP or setting price targets as part of follow-on negotiations in order to determine the prices that will be used to evaluate the pricing part of your Proposal.

B. Evaluation Criteria:

		<u>Point Value</u>
1.	Consulting Firm's background and experience in providing the services in medical and health profession institutions	20
2.	Proposed Project Tasks and Timeline	20
3.	Client References	20
4.	Price	20
5.	Samples of similar projects	15
6.	Small, Women, and Minority Vendors (SWaM) (Including Small Business Plan, Attachment F)	5
Total		100

9.0 GENERAL TERMS AND CONDITIONS

- A. Applicable Laws and Courts: This solicitation and any resulting contract shall be governed in all respects by the laws of the Commonwealth of Virginia and any litigation with respect thereto shall be brought in the courts of the Commonwealth. The contractor shall comply with all applicable federal, state and local laws, rules and regulations.
- B. Anti-Discrimination: By submitting their proposals, offerors certify to the Medical School that they will conform to the provisions of the Civil Rights Act of 1964, as amended as well as the Virginia Fair Employment Contracting Act of 1975 as amended, where applicable. If the award is made to a faith-based organization, the organization shall not discriminate against any recipient of goods, services, or disbursements made pursuant to the contract on the basis of the recipient's religion, religious belief, refusal to participate in a religious practice, or on the basis of race, age, color, gender or national origin and may be subject to the same rules as other organizations that contract with public bodies to account for the use of the funds provided.

In every contract, the provisions in 1. and 2. below apply:

1. During the performance of this contract, the contractor agrees as follows:
 - a. The contractor will not discriminate against any employee or applicant for employment because of race, religion, color, sex, national origin, age, disability, or any other basis prohibited by state law relating to discrimination in employment, except where there is a bona fide occupational qualification reasonably necessary to the normal operation of the contractor. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the provisions of this nondiscrimination clause.
 - b. The contractor, in all solicitations or advertisements for employees placed by or on behalf of the contractor, will state that such contractor is an equal opportunity employer.
 2. The contract will include the provision of 1. above in every subcontract or purchase order, so that the provisions will be binding upon each subcontractor or vendor.
- C. Ethics In Contracting: By submitting their proposal, offerors certify that their proposals are made without collusion or fraud and that they have not offered or received any kickbacks or inducements from any other offeror, supplier, manufacturer or subcontractor in connection with their proposal, and that they have not conferred on any Medical School employee having official responsibility for this procurement transaction any payment, loan, subscription, advance, deposit of money, services or anything of more than nominal value, present or promised, unless consideration of substantially equal or greater value was exchanged.

- D. Immigration Reform and Control Act of 1986: By submitting their proposals, offerors certify that they do not and will not during the performance of this contract employ illegal alien workers or otherwise violate the provisions of the federal Immigration Reform and Control Act of 1986.
- E. Debarment Status: By submitting their proposals, Offerors certify that they are not currently debarred by the Commonwealth of Virginia, from submitting bids or proposals on contracts for the type of goods and/or services covered by this solicitation, nor are they an agent of any person or entity that is currently so debarred. Also, Offerors certify that they are not on the Department of Health and Human Services (HHS) and Office of Inspector General's (OIG) monthly list of excluded individuals/entities from providing medical services and supplies to Medicare, Medicaid or other federal health care program participants.
- F. Antitrust: By entering into a contract, the contractor conveys, sells, assigns, and transfers to the Medical School all rights, title and interest in and to all causes of action it may now have or hereafter acquire under the antitrust laws of the United States and the Commonwealth of Virginia, relating to the particular goods or services purchased or acquired by the Medical School under said contract.
- G. Mandatory Use of Terms and Conditions for RFPs: Modification of or additions to the General Terms and Conditions of the solicitation may be cause for rejection of the proposal; however, the Medical School reserves the right to decide, on a case-by-case basis, in its sole discretion, whether to reject such a proposal.
- H. Clarification of Terms: If any prospective Offeror has questions about the specification or other solicitation documents, the prospective Offeror should contact the buyer whose name appears on the face of the solicitation no later than five working days before the due date. Any revisions to the solicitation will be made only by addendum issued by the buyer.
- I. Payment:
1. To Prime Contractor:
 - a. Invoices for items ordered, delivered and accepted shall be submitted by the contractor directly to the payment address shown on the purchase order/contract. All invoices shall show the purchase order number and the contract number.
 - b. Any payment terms requiring payment in less than 30 days will be regarded as requiring payment 30 days after invoice or delivery, whichever occurs last. This shall not affect offers of discounts for payment in less than 30 days, however.
 - c. All goods and services provided under this contract/purchase order, shall be billed by the contractor at the contract price, regardless of which department is being billed.
 - d. The date of postmark shall be deemed to be the date of payment in all cases where payment is made by mail.

- e. **Unreasonable Charges.** Under certain emergency procurements and for most time and materials purchases, final job costs cannot be accurately determined at the time orders are placed. In such cases, contractors should be put on notice that final payment in full is contingent on a determination of reasonableness with respect to all invoiced charges. Charges which appear to be unreasonable will be researched and challenged, and that portion of the invoice held in abeyance until a settlement can be reached. Upon determining that invoiced charges are not reasonable, the Medical School shall promptly notify the contractor, in writing, as to those charges which it considers unreasonable and the basis for the determination. A contractor may not institute legal action unless a settlement cannot be reached within sixty (60) days of notification.

2. To Subcontractors:

- a. A contractor awarded a contract under this solicitation is hereby obligated:
 - i. To pay the subcontractor(s) within seven (7) days of the contractor's receipt of payment from the Medical School for the proportionate share of the payment received for work performed by the subcontractor(s) under the contract; or
 - ii. To notify the Medical School and the subcontractor(s), in writing, of the contractor's intention to withhold payment and the reason.
 - b. The contractor is obligated to pay the subcontractor(s) interest at the rate of one percent per month (unless otherwise provided under the terms of the contract) on all amounts owed by the contractor that remain unpaid seven (7) days following receipt of payment from the Medical School, except for amounts withheld as stated in (ii) above. The date of mailing of any payment by U.S. Mail is deemed to be payment to the addressee. These provisions apply to each sub-tier contractor performing under the primary contract. A contractor's obligation to pay an interest charge to a subcontractor may not be construed to be an obligation of the Medical School.
- J. Precedence of Terms: The following General Terms and Conditions APPLICABLE LAWS AND COURTS, ANTI-DISCRIMINATION, ETHICS IN CONTRACTING IMMIGRATION REFORM AND CONTROL ACT OF 1986, DEBARMENT STATUS, ANTITRUST, MANDATORY USE OF TERMS AND CONDITIONS, CLARIFICATION OF TERMS, PAYMENT shall apply in all instance. In the event there is a conflict between any of the other General Terms and Conditions and any Special Terms and Conditions in this solicitation, the Special Terms and Conditions shall apply.
- K. Qualifications of Offerors: The Medical School may make such reasonable investigations as deemed proper and necessary to determine the ability of the offeror to perform the services/furnish the goods and the offeror shall furnish to the Medical School all such information and data for this purpose as may be requested. The Medical School reserves the right to inspect offeror's physical facilities prior to award to satisfy questions regarding the offeror's capabilities. The Medical School further reserves the right to reject any proposal if the evidence submitted by, or investigations of, such offeror fails to satisfy the Medical School that such offeror is properly qualified to carry out the obligations of the contract and to provide the services and/or furnish the goods contemplated therein.

- L. Testing and Inspection: The Medical School reserves the right to conduct any test/inspection it may deem advisable to assure goods and services conform to the specifications.
- M. Assignment of Contract: A contract shall not be assignable by the contractor in whole or in part without the written consent of the Medical School.
- N. Changes to the Contract: Changes can be made to the contract in any of the following ways followed by a change order/revised purchase order:
1. The parties may agree in writing to modify the scope of the contract. An increase or decrease in the price of the contract resulting from such modification shall be agreed to by the parties as a part of their written agreement to modify the scope of the contract.
 2. The Purchasing Department may order changes within the general scope of the contract at any time by written notice to the contractor. Changes within the scope of the contract include, but are not limited to, things such as services to be performed, the method of packing or shipment, and the place of delivery or installation. The contractor shall comply with the notice upon receipt. The contractor shall be compensated for any additional costs incurred as the result of such order and shall give the Purchasing Department a credit for any savings. Said compensation shall be determined by one of the following methods:
 - a. By mutual agreement between the parties in writing; or
 - b. By agreeing upon a unit price or using a unit price set forth in the contract, if the work to be done can be expressed in units, and the contractor accounts for the number of units of work performed subject to the Purchasing Department's right to audit the contractor's records and/or to determine the correct number of units independently; or
 - c. By ordering the contractor to proceed with the work and keep a record of all costs incurred and savings realized. A markup for overhead and profit may be allowed if provided by the contract. The same markup shall be used for determining a decrease in price as the result of savings realized. The contractor shall present the Purchasing Department with all vouchers and records of expenses incurred and savings realized. The Purchasing Department shall have the right to audit the records of the contractor as it deems necessary to determine costs or savings. Any claim for an adjustment in price under this provision must be asserted by written notice to the Purchasing Department within thirty (30) days from the date of receipt of the written order from the Purchasing Department.
- O. Disputes: Neither the existence of a claim nor a dispute resolution process, litigation or any other provision of this contract shall excuse the contractor from promptly complying with the performance of the contract generally or with the changes ordered by the Purchasing Department.
- P. Default: In case of failure to deliver goods or services in accordance with the contract terms and conditions, the Medical School, after due oral or written notice, may procure them from other sources and hold the contractor responsible for any resulting additional purchase and

administrative costs. This remedy shall be in addition to any other remedies which the Medical School may have.

- Q. Taxes: Sales to the Medical School are normally exempt from State sales tax including prepared meals, catering and all serving charges, food, audio/visual services in connection with catering. State sales and use tax certificates of exemption, Form ST-12, will be issued upon request. Deliveries against this contract shall be free of excise or transportation taxes.
- R. Use of Brand Names: Unless otherwise provided in this solicitation, the name of a certain brand, make or manufacturer does not restrict offerors to a specific brand, make or manufacturer named, but conveys the general style, type, character, and quality of the article desired. Any article which the Medical School, in its sole discretion, determines to be the equal of that specified, considering quality, workmanship, economy of operation, and suitability for the purpose intended, shall be accepted. The Offeror is responsible to clearly and specifically identify the product being offered and to provide sufficient descriptive literature, catalog cuts, and technical detail to enable the Medical School to determine if the product offered meets the requirements of the solicitation. This is required even if offering the exact brand, make or manufacturer specified. Failure to furnish adequate data for evaluation purposes may result in declaring a bid nonresponsive. Unless the offeror clearly indicates in its proposal that the product offered is an equal product, such proposal will be considered to offer the brand name product referenced in the solicitation.
- S. Transportation and Packaging: By submitting their proposals, all offerors certify and warrant that the price offered for FOB destination includes only the actual freight rate costs at the lowest and best rate and is based upon the actual weight of the goods to be shipped. Except as otherwise specified herein, standard commercial packaging, packing and shipping containers shall be used. All shipping containers shall be legibly marked or labeled on the outside with purchase order number.
- T. Insurance: By signing and submitting a proposal under this solicitation, the offeror certifies that if awarded the contract, it will have the following insurance coverage at the time the contract is awarded. For construction contracts, if any subcontractors are involved, the subcontractor will have workers' compensation insurance in accordance with § 2.2-4332 and 65.2-800 et seq. of the *Code of Virginia*. The offeror further certifies that the contractor and any subcontractors will maintain these insurance coverage during the entire term of the contract and that all insurance coverage will be provided by insurance companies authorized to sell insurance in Virginia by the Virginia State Corporation Commission.

MINIMUM INSURANCE COVERAGES AND LIMITS REQUIRED FOR MOST CONTRACTS:

1. Workers' Compensation – Statutory requirements and benefits. Coverage is compulsory for employers of three or more employees, to include the employer. Contractors who fail to notify the Medical School of increases in the number of

employees that change their workers’ compensation requirements under the *Code of Virginia* during the course of the contract shall be in noncompliance with the contract.

2. Employer’s Liability - \$1,000,000.
3. Commercial General Liability - \$1,000,000 per occurrence. Commercial General Liability is to include bodily injury and property damage, personal injury and advertising injury, products and completed operations coverage. The Medical School must be named as an additional insured and so endorsed on the policy.
4. Professional Liability (unless otherwise listed below) - \$1,000,000 per occurrence, \$3,000,000 aggregate.

<u>Profession/Service</u>	<u>Limits</u>
Accounting	\$1,000,000 per occurrence, \$3,000,000 aggregate
Architecture	\$2,000,000 per occurrence, \$6,000,000 aggregate
Asbestos Design, Inspection	\$1,000,000 per occurrence, \$3,000,000 or Abatement Contractors aggregate
Health Care Practitioner	\$2,000,000 per claim, \$6,000,000 aggregate (to include Dentist, Licensed Dental Hygienists, Optometrists, Registered or Licensed Practical Nurses, Pharmacists, Physicians, Podiatrists, Chiropractors, Physical Therapists, Physical Therapist Assistants, Clinical Psychologists, Clinical Social Workers, Professional Counselors, Hospitals, or Health Maintenance Organizations.)
Insurance/Risk Management	\$1,000,000 per occurrence, \$3,000,000 aggregate
Landscape/Architecture	\$1,000,000 per occurrence, \$1,000,000 aggregate
Legal	\$1,000,000 per occurrence, \$5,000,000 aggregate
Professional Engineer	\$2,000,000 per occurrence, \$6,000,000 aggregate
Surveying	\$1,000,000 per occurrence, \$1,000,000 aggregate

- U. Announcement of Award: Upon the award or the announcement of the decision to award a contract over \$100,000, as a result of this solicitation, the Department of Materials Management will publicly post such notice on the EVMS Internet web site at www.evms.edu for a minimum of 10 days.

- V. Drug-Free Workplace: During the performance of this contract, the contractor agrees to provide a drug-free workplace for the contractor's employees; (ii) post in conspicuous places, available to employees and applicants for employment, a statement notifying employees that the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana is prohibited in the contractor's workplace and specifying the actions that will be taken against employees for violations of such prohibition; (iii) state in all solicitations or advertisements for employees placed by or on behalf of the contractor that the contractor maintains a drug-free workplace; and (iv) include the provisions of the foregoing clauses in every subcontract or purchase order of over \$10,000, so that the provisions will be binding upon each subcontractor or vendor.

For the purpose of this section, "drug-free workplace" means a site for the performance of work done in connection with a specific contract awarded to a contractor, the employees of whom are prohibited from engaging in the unlawful manufacture, sale, distribution, dispensation, possession or use of any controlled substance or marijuana during the performance of the contract.

- W. Nondiscrimination of Contractors: An offeror or contractor shall not be discriminated against in the solicitation or award of this contract because of race religion, color, sex, national origin, age or disability, faith-based organizational status, any other basis prohibited by state law relating to discrimination in employment or because the bidder or offeror employs ex-offenders unless the Medical School has made a written determination that employing ex-offenders on the specific contract is not in its best interest. If the award of this contract is made to a faith-based organization and an individual, who applies for or receives goods, services, or disbursements provided pursuant to this contract objects to the religious character of the faith-based organization from which the individual receives or would receive the goods, services, or disbursements, the Medical School shall offer the individual, within a reasonable period of time after the date of his objection, access to equivalent goods, services, or disbursements from an alternative provider.
- X. Permits and Fees: All proposals submitted shall have included in price the cost of any business or professional licenses, permits or fees required by the Commonwealth of Virginia. The Offeror must have all necessary licenses to perform the services in Virginia, and, if practicing as a corporation, be authorized to do business in the Commonwealth of Virginia.
- Y. OSHA Standards: All contractors and subcontractors performing services for the Medical School are required and shall comply with all Occupational Safety and Health Administration (OSHA) State and City Safety and Occupational Health Standards and any other applicable rules and regulations. Also, all contractors and subcontractors shall be held responsible for the safety of their employees and any unsafe acts or conditions that may cause injury or damage to any persons or property within and around the work site area under this RFP.
- Z. Equal Employment Opportunity (EEO) Clause for Veterans: An offeror or contractor shall abide by the requirements of 41 CFR 60-300.5(a). This regulation prohibits discrimination against qualified protected veterans, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified protected veterans.

AA. Equal Employment Opportunity (EEO) Clause for Individuals with Disabilities: An offeror or contractor shall abide by the requirements of 41 CFR 60-741.5(a). This regulation prohibits discrimination against qualified individuals on the basis of disability, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified individuals with disabilities.

BB. Equal Employment Opportunity (EEO) Clause for Individuals based on Race, Color, Religion, Sex, or National Origin: An offeror or contractor shall abide by the requirements of 41 CFR 60-1.4(a). This regulation prohibits discrimination against qualified individuals on the basis of race, color, religion, sex, or national origin, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified individuals without regard to their race, color, religion, sex, or national origin.

10.0 SPECIAL TERMS AND CONDITIONS

- A. Advertising: In the event a contract is awarded for supplies, equipment, or services resulting from this proposal, no indication of such sales or services to the Medical School will be used in product literature or advertising. The contractor shall not state in any of its advertising or product literature that the Medical School has purchased or uses its products or services.
- B. Audit: The contractor shall retain all books, records, and other documents relative to this contract for five (5) years after final payment, or until audited by the Medical School, whichever is sooner. The Medical School, its authorized agents, and/or auditors shall have full access to and the right to examine any of said materials during said period.
- C. Best and Final Offer (BAFO): At the conclusion of negotiations, the offeror(s) may be asked to submit in writing, a Best And Final Offer (BAFO). After the BAFO is submitted, no further negotiations shall be conducted with the offeror(s). The offeror's proposal will be rescored to combine and include the information contained in the BAFO. The decision to award will be based on the final evaluation including the BAFO.
- D. Proposal Acceptance Period: Any proposal in response to this solicitation shall be valid for 120 days. At the end of the 120 days the proposal may be withdrawn at the written request of the offeror. If the proposal is not withdrawn at that time it remains in effect until an award is made or the solicitation is canceled.

Proposals received after the proposal due date and time are late and will not be considered. Modifications received after the proposal due date are late and will not be considered. Letters of withdrawal received either after the proposal due date or time, or after contract date, whichever is applicable, are late and will not be considered.

- E. RFP Postponement/Cancellation: The Medical School may, at its sole and absolute discretion, reject any and all, or parts of any or all proposals; readvertise this RFP; postpone or cancel, at any time, this RFP process; or waive any irregularities in this RFP or in the proposals received as a result of this RFP.
- F. Cancellation of Contract: The Medical School reserves the right to cancel and terminate any resulting contract, in part or in whole, without penalty, upon 60 days written notice to the contractor. In the event the initial contract period is for more than 12 months, the

resulting contract may be terminated by either party, without penalty, after the initial 12 months of the contract period upon 60 days written notice to the other party. Any contract cancellation notice shall not relieve the contractor of the obligation to deliver and/or perform on all outstanding orders issued prior to the effective date of cancellation.

- G. Identification of Proposal Envelope: If a special envelope is not furnished, or if return in the special envelope is not possible, the signed proposal should be returned in a separate envelope or package, sealed and identified as follows:

From: _____

Name of Offeror	Due Date	Time
Street or Box Number	RFP No.	
City, State, Zip Code	RFP Title	
Name of Contract/Purchase Officer or Buyer		

The envelope should be addressed as direct of Page 3 of the solicitation.

If a proposal not contained in the special envelope is mailed, the offeror takes the risk that the envelope, even if marked as described above, may be inadvertently opened and the information compromised which may cause the proposal to be disqualified. Proposals may be hand delivered to the designated location in the office issuing the solicitation. No other correspondence or other proposals should be placed in the envelope.

- H. Indemnification: Contractor agrees to indemnify, defend and hold harmless the Medical School, its officers, agents, and employees from any claims, damages and actions of any kind or nature, whether at law or in equity, arising from or caused by the use of any materials, goods, or equipment of any kind or nature furnished by the contractor/any services of any kind or nature furnished by the contractor, provided that such liability is not attributable to the sole negligence of the Medical School or to failure of the Medical School to use the materials, goods, or equipment in the manner already and permanently described by the contractor on the materials, goods or equipment delivered.
- I. Accuracy/Competition: By submitting a proposal, offerors certify that all information provided in response to this RFP is true and accurate. Failure to provide information required by this RFP may ultimately result in rejection of the proposal.

Furthermore, the Medical School has broad flexibility in fashioning the details of competition for this RFP. This may include conducting on-line Reverse Auctions for certain products within this RFP or setting price targets as part of follow-on negotiations in order to determine the prices that will be used to evaluate the pricing part of your proposal.

- J. Additional Cost: No service fees or additional costs will be invoiced to the Medical School by the contractor during the term of the contract except as allowed for in the contract.
- K. Bonds: By submitting a proposal, offerors confirm that the company and subcontractors involved in construction or facility improvements exceeding \$100,000 will provide the following:
1. A bid guarantee equivalent to five percent of bid price as assurance that the bidder upon acceptance of his bid, execute such contractual documents as may be required within the time specified.
 2. A performance bond on the part of the offeror for 100 percent of the contract price to secure fulfillment of all the offerors obligations under such contract.
 3. A payment bond on the part of the offeror for 100 percent of the contract price to assure payment as required by statute of all persons supplying labor and material in the execution of the work provided for in the contract.
 4. Bonds shall be obtained from companies holding certificates of authority as acceptable sureties pursuant to 31 CFR Part 223, "Surety Companies Doing Business with the United States".

11.0 CONTRACT NEGOTIATION

- A. Based on evaluation of the Proposals, one or more successful Offerors will be selected. Award of the contract shall be made to the Offeror(s) deemed to be fully qualified and best suited for the project based on the evaluation criteria set forth herein. EVMS will select the Proposal determined during the evaluation of the timely submitted Proposals to be the most advantageous in meeting the specifications as outlined under this RFP. This may or may not be the Offeror, which presented the lowest costs/price.
- B. EVMS will request a copy of the contract from the Offeror. If the Offeror does not have a template, an EVMS contract will be provided.
- C. General Terms and Conditions that are added or modified from EVMS approved terms and conditions shall require EVMS approval.
- D. Special Terms and Conditions added to or deviating from EVMS approved terms and conditions shall require EVMS approval.
- E. Non-Negotiable Terms and Conditions.

By submitting a response to this RFP the Offeror agrees that it, and any subcontractors that Offeror shall utilize to fulfill the Contract Workslope, shall be subject to mandatory standard provisions that flow-down from the prime award made to EVMS by the Federal Government or private funders applicable to that contract under the prime award and that it must certify compliance with certain federal laws/guidelines, as applicable, including, but not limited to the following:

1. ***Equal Employment Opportunity (EEO) Clause for Veterans.*** An offeror or contractor shall abide by the requirements of *41 CFR 60-300.5(a)*. This regulation prohibits discrimination against qualified protected veterans, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified protected veterans.
2. ***Equal Employment Opportunity (EEO) Clause for Individuals with Disabilities.*** An offeror or contractor shall abide by the requirements of *41 CFR 60-741.5(a)*. This regulation prohibits discrimination against qualified individuals on the basis of disability, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified individuals with disabilities.
3. ***Equal Employment Opportunity (EEO) Clause for Individuals based on Race, Color, Religion, Sex, or National Origin.*** An offeror or contractor shall abide by the requirements of *41 CFR 60-1.4(a)*. This regulation prohibits discrimination against qualified individuals on the basis of race, color, religion, sex, or national origin, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified individuals without regard to their race, color, religion, sex, or national origin;
4. ***Copeland “Anti-Kickback” Act (18 U.S.C. 874 and 40 U.S.C. 276c)***, as supplemented by Department of Labor regulations (*29 CFR part 3, “Contractors and Subcontractors on Public Building or Public Work Financed in Whole or in Part by Loans or Grants from the United States”*), prohibiting the Contractor from inducing, by any means, any person employed in the construction, completion, or repair of public work, to give up any part or compensation to which otherwise entitled;
5. ***Davis-Bacon Act***, as amended (*40 U.S.C. 276a to a-7*) and as supplemented by Department of Labor regulations (*29 CFR part 5, “Labor Standards Provisions applicable to Contracts Governing Federally Financed and Assisted Construction”*), regulating wages to laborers and mechanics;
6. ***Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333)*** as supplemented by Department of Labor regulations (*29 CFR part 5*), regulating laborer and mechanic work hours and safety standards;
7. ***Rights to Inventions Made Under a Contract or Agreement – (37 CFR part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Grants, Contracts and Cooperative Agreements,”*** providing for the invention rights of the Parties and the Federal Government;
8. ***Clean Air Act (42 U.S.C. et seq.)*** and the Federal Water Pollution Control Act (*33 U.S.C 1251 et seq.*) as amended related to applicable standards under said regulations; and,
9. ***Worker’s Compensation Insurance (42 U.S.C. 1651, et seq.)*** requiring worker’s compensation insurance for contracts, which require performance outside the United States as applicable per the circumstance of each particular contract.

- F. All EVMS contracts are subject to prime funding constraints and applicable federal and state laws, regulations, guidelines as well as EVMS policies and procedures. If EVMS and the Offeror(s) are unable to agree on the negotiated contract terms and conditions, EVMS may elect to terminate negotiations and begin negotiations with the second best ranked Offeror and so forth. If those negotiations do not result in mutually acceptable contract terms and conditions, the negotiations with the next best qualified Offeror(s) will continue until there is an executed contract, there are no more Offerors to negotiate with based on submitted/complete Proposals or EVMS, at its sole discretion, terminates the RFP. No Offeror shall have any claims and/or rights against EVMS arising from such negotiations and/or the RFP evaluation or overall process.
- G. At the conclusion of negotiations, the Offeror(s) may be asked to submit in writing, a Best And Final Offer (BAFO) along with an executed copy of the negotiated contract with the understanding that all contracts funded under prime awards to EVMS by the United States Government, private foundations or other nonprofit organizations may be subject to availability of funds. Under these circumstances, there may be additional approval requirements required by the funding federal agency, private foundation or other organization. After submitting the BAFO and/or the Contract is fully executed, no further negotiations shall be conducted with the Offeror(s). In the case of BAFO submission, the Offeror's Proposal will be rescored to combine and include the information contained in the BAFO. EVMS will base its final decision regarding the contract award on the final evaluation, which will include the BAFO.
- H. Cancellation of Contract.
EVMS reserves the right to cancel and terminate any resulting contract, in part or in whole, without penalty, unless otherwise negotiated under the contract, upon thirty (30) days prior written notice to the contractor. Any contract cancellation notice shall not relieve the Offeror of the obligation to deliver and/or perform on all outstanding orders issued prior to the effective date of cancellation.

12.0 AWARD

- A. Upon the announcement of the decision to award under this RFP, the EVMS Department of Materials Management will publicly post such on the EVMS Internet web site at <https://www.evms.edu> for a minimum of ten (10) days. EVMS will contact each successful Offeror with additional post-award information as deemed appropriate per award.
- B. While it is the intent of EVMS to award only one contract. EVMS reserves the right to not make an award or to award multiple contracts, if deemed in the best interest of EVMS or as required under the applicable prime funding award. All decisions made by EVMS are final. In addition, EVMS reserves the right, in its sole and absolute discretion, to:
1. Issue or not reissue a subsequent RFP if no award is made;
 2. Not select any Offeror that submitted a Proposals
 3. Make a partial award;

4. Modify, change or reduce the scope of work for this RFP; and/or
5. Waive any irregularities in this RFP or in the Proposals received as a result of this RFP.

13.0 ATTACHMENTS:

- Attachment A – RFP Coversheet
- Attachment B – Offeror RFP Certification
- Attachment C - Entity Data Sheet
- Attachment D – W9/W8 Instruction Sheet
- Attachment E – Contractor’s License & Insurance Information
- Attachment F – Small Business Subcontracting Plan
- Attachment G – Pricing Schedule
- Attachment H – EVMS Facts & Figures 2017-2018
- Attachment I – EVMS Strategic Plan FY2019 - FY2022

Attachment A

**RFP
Coversheet**

From: _____ Due Date: _____

Approximate Time: _____

Address: _____

Name of
Contractor's
Project
Manager: _____

Project Title: _____

Name of
EVMS
Technical
Monitor: _____

Attachment B

Offeror RFP Certification

RFP Number: _____

Issue Date: _____

Project Title: _____

Name of Entity: _____

Street Address: _____

State/ Zip Code: _____

Federal Employer Identification Number (FEIN): _____

Foreign Identification Number (FIN), if applicable: _____

Data Universal Numbering System # (DUNS): _____

By signing below, I hereby certify that:

1. I have the authority to submit the attached Proposal and am the authorized signatory for the entity listed above;
2. The terms and conditions of this RFP are accepted by the entity listed above and all good/services will be provided in accordance with the attached Proposal; and,
3. All information provided in the attached Proposal is true and correct to the best of my knowledge, information and belief.

Signature By: _____

Date: _____

Name: _____

Title: _____

Phone: _____

Fax: _____

E-mail: _____

Attachment C

Entity Data Sheet

Please complete the following information:

1. **Entity Name:** _____

2. **Signatory Name:
& Title** _____

3. **Address:** _____

4. **Primary Negotiation
Point of Contact**

Name: _____

Title: _____

Email Address: _____

Telephone Number: _____

5. Is the entity registered in System for Award Management (SAM), formerly known as the Central Contractor Registration (CCR)? Registration in SAM is required under 2 CFR 25 unless the entity is exempt under 2 CFR 25.110.

Yes _____ No _____ Expiration Date: _____

6. **Entity
DUNS Number:** _____

Attachment D**W9/W8 Instruction Sheet**

The Internal Revenue Service (IRS) requires verification of taxpayer information when making disbursements to individuals and entities. This is accomplished by either IRS form W9 for United States (US) entities or W8 for foreign entities not based in the US.

Please refer to <https://irs.gov> for more detailed information regarding which is the appropriate taxpayer information form that must be completed by your organization and returned with your Proposal in response to the RFP. The links below are provided for your convenience but it is the responsibility of your organization to submit the correct form with your request. Please see the below for links to examples of Taxpayer Information Forms:

IRS Form - W9 (US)

<http://www.irs.gov/pub/irs-pdf/fw9.pdf>.

IRS Form – W8 (Non-US)

There are several types of W8 forms that are available. See the following as an example of one type of W8 that is frequently used:

<http://www.irs.gov/pub/irs-pdf/fw8ben.pdf>.

Attachment E

**Contractor's License & Insurance Information
(COPIES OF ALL LICENSES AND INSURANCE CERTIFICATES MUST BE PROVIDED)**

Contractor's License:

- 1. Virginia Contractor's License Number: _____
- 2. Class: _____
- 3. Specialty Codes: _____
- 4. Expiration Date: _____

Insurance Information:

- 1. Producer Of Insurance: _____
- 2. Name and Address of Insured: _____

- 3. Commercial General Liability: _____YES _____NO
-Policy Number _____
-Effective Dates _____
- 4. Automobile Liability: _____YES _____NO
-Policy Number _____
-Effective Dates _____
- 5. Workers Compensation: _____YES _____NO
-Policy Number _____
-Effective Dates _____
- 6. Property Insurance: _____YES _____NO
-Policy Number _____
-Effective Dates _____

**Attachment F
Small Business Subcontracting
Plan**

SMALL BUSINESS SUBCONTRACTING PLAN

Offeror: _____

Address: _____

Solicitation Number: _____

Supplies or services offered: _____

Total estimated cost of subcontract to Small Businesses: \$ _____

Period of Performance From: _____ To: _____

1. We plan to subcontract the following principal types of supplies and services to SDB, WOSB, VOSB, MOSB, HSB, SDVOSB, SB(reference Attachment B – Section12)

<u>Types of Supplies and Service</u>	<u>Type of SB</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**It is the policy of the Medical School to facilitate the establishment, preservation, and strengthening of small businesses and businesses owned by woman and minorities and service disabled veterans and to encourage their participation in the Medical School’s procurement activities. Toward that end the Medical School encourages these firms to compete and encourages other firms to provide for the participation of these firms through partnerships, joint ventures, subcontracts, or other contractual opportunities. Offeror are asked, as part of their submission, to describe any planned use of such business in fulfilling this contract.

2. We developed the small business subcontracting principles in 1 above by the following methods. Explain how they are to be used and identify any source list used.

3. Identify the overall goals you plan to accomplish by instating this small business subcontracting plan.

4. The employee who will administer our subcontracting program is:

Name: _____
Title: _____
Address: _____
Telephone: _____

The administrator's duties include:

5. We will make the following internal/external efforts to ensure that SDB, WOSB, VOSB, MOSB, HSB, SDVOSB, SB have an equitable opportunity to compete for subcontracts by:

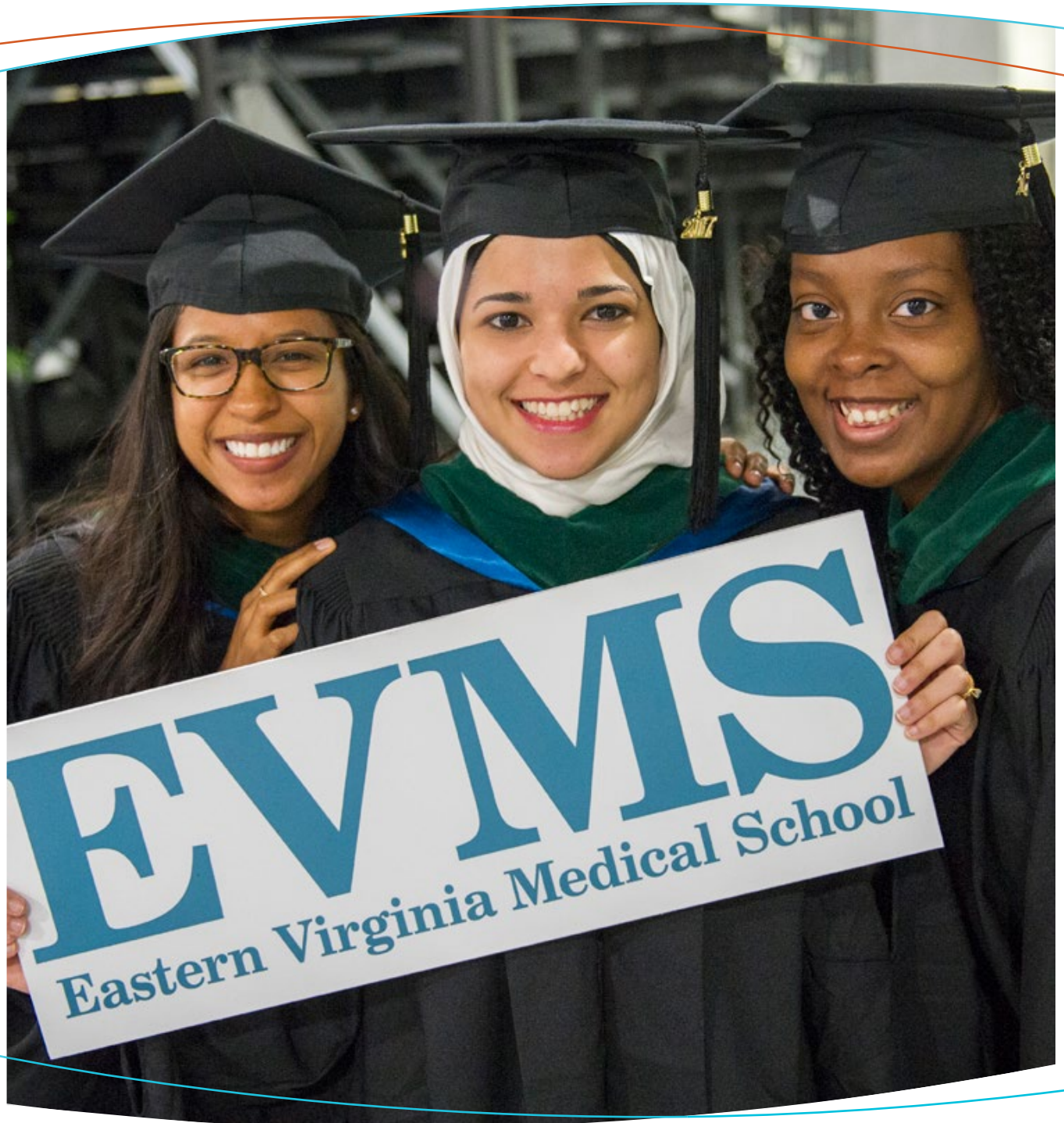
6. We will maintain the following types of records to document our efforts to solicit small businesses as it relates to this small business subcontracting plan:

**Attachment G
Pricing Schedule**

Strategic Enrollment Planning	Cost:
Program Analysis	Cost:
<p>Digital Marketing Analysis to include:</p> <p>Search Engine Marketing</p> <ul style="list-style-type: none"> a. Search Engine Optimization b. Paid Search <p>Online Display Marketing</p> <ul style="list-style-type: none"> a. Retargeting b. IP Targeting c. Geofencing d. Other <p>Social Media Marketing</p> <ul style="list-style-type: none"> a. Facebook/Instagram b. LinkedIn c. Twitter d. Other 	<p>Annual Cost: (including any renewal option years)</p>
Miscellaneous Expenses (please define)	Cost:
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

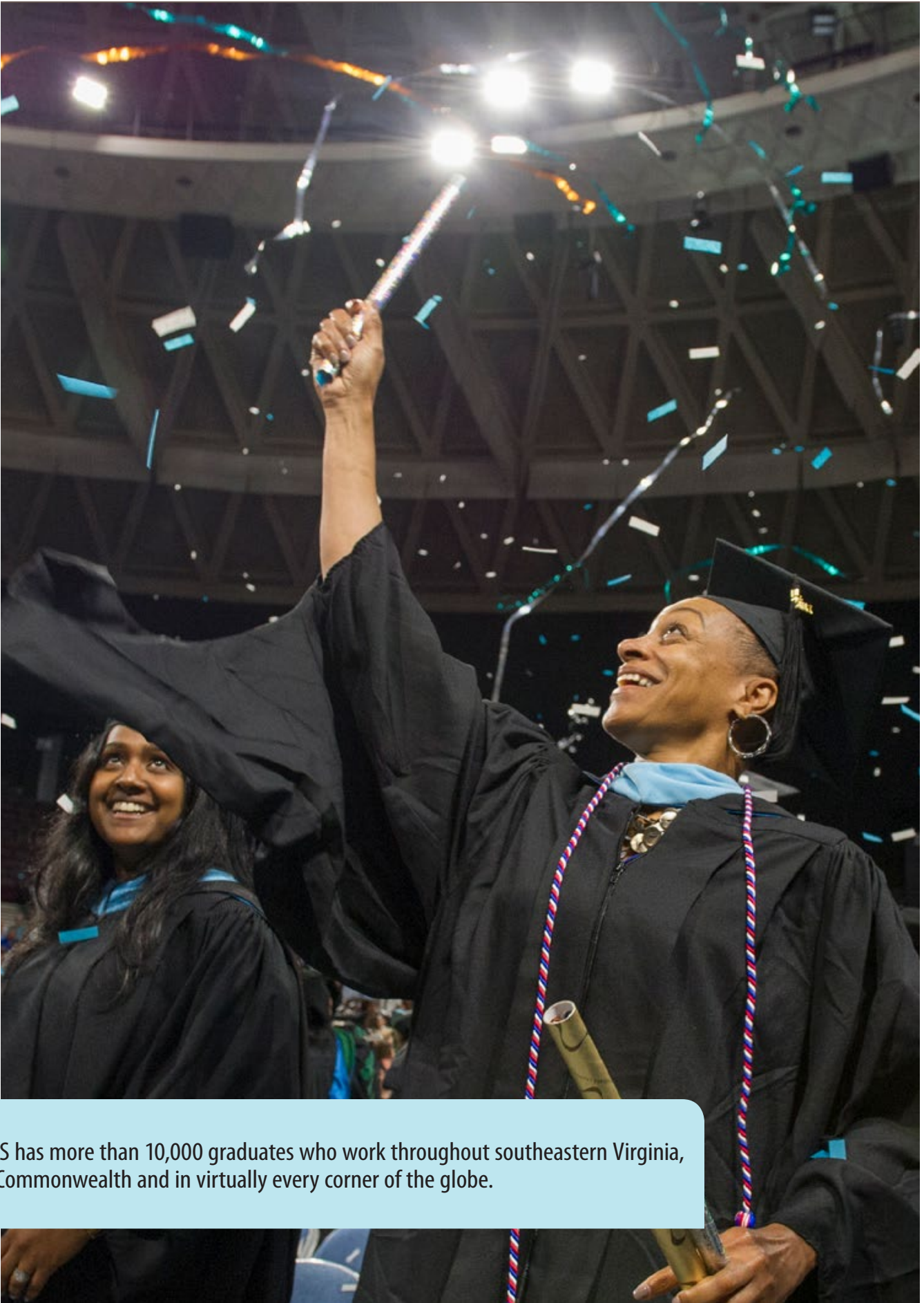
FACTS & FIGURES

2017-2018



EVMS
Eastern Virginia Medical School

Community Focus.
World Impact.



EVMS has more than 10,000 graduates who work throughout southeastern Virginia, the Commonwealth and in virtually every corner of the globe.

Eastern Virginia Medical School/EVMS

EVMS enjoys a unique relationship with the people of southeastern Virginia, an area known as Hampton Roads. It began when community leaders created EVMS in 1973 to address the region's serious shortage of physicians. Today, the relationship is stronger than ever as EVMS continues to safeguard the community's health.

For instance, EVMS has added and enlarged educational programs to keep pace with the region's growth. Similarly, the school's clinical and research missions are tailored to address the health issues that confront the people of Hampton Roads. EVMS researchers and physician-scientists work together to rapidly translate laboratory discoveries into new treatments to help patients.

Given EVMS' deep roots in the community, it's no surprise that students, faculty and staff embrace the school's commitment to service. A key to the school's community focus is the M. Foscue Brock Institute for Community and Global Health, which is harnessing this enthusiasm and collaborating with community partners to address key health issues. For students, this translates into curriculum reforms that encourage a lifelong commitment to service.

On the following pages, you will learn more about the breadth and depth of the EVMS impact in this community and beyond.

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EVMS BY THE NUMBERS

Alumni: **10,309**

Journal articles, books and book chapters authored by EVMS faculty in FY 2017: **703**

Number of Health Professions programs now offered: **20**

Number of student applications received for 2017: **9,208**

Medical residents, interns and fellows training in one of 39 educational programs: **363**

Patient appointments in FY 2017: **411,933**

Total annual budget for FY 2017: **\$252.6 million**

State appropriations for FY 2017: **\$25.3 million**

Active US patents and applications for EVMS innovations: **59**

Statistics presented in this booklet are from fiscal year 2017 unless otherwise noted.

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EVMS Mission

Eastern Virginia Medical School is an academic health center dedicated to achieving excellence in medical and health professions education, research and patient care. We value creating and fostering a diverse and cohesive faculty, professional staff and student body as the surest way to achieve our mission. Adhering to the highest ethical standards, we will strive to improve the health of our community and to be recognized as a national center of intellectual and clinical strength in medicine.

Our Vision

Eastern Virginia Medical School will be recognized as the most community-oriented school of medicine and health professions in the nation.

EVMS Board of Visitors

The Board of Visitors is the governing body of EVMS. Members are appointed by the governor, both houses of the state legislature, the cities that support the school and the EVMS Foundation.

David A. Arias, *Rector*
Mark R. Warden, *Vice Rector*
Robin D. Ray, *Secretary*
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Fred W. Lindsay, DO
T. Richard Litton, Jr.
Marcus L. Martin, MD '76

EVMS Foundation Board of Trustees

The EVMS Foundation supports the medical school. The board includes a cross-section of leaders from healthcare, business and the community.

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To promote **diversity**,
EVMS places a special emphasis
on recruitment of women,
traditionally underrepresented
minorities in medicine and the
health professions, veterans
and individuals who come
from socioeconomically
disadvantaged backgrounds.

“EVMS has a great curriculum and a non-competitive atmosphere where everybody works well together to help each other succeed and thrive.”

David Le, MD Class of 2021

Senior Leadership

Richard V. Homan, MD, *President and Provost of EVMS, Dean, School of Medicine*

C. Donald Combs, PhD, *Vice President and Dean, School of Health Professions*

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Mekbib L. Gameda, MS, *Vice President, Diversity and Inclusion*

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Jerry L. Nadler, MD, *Vice Dean, Research*

William J. Wasilenko, PhD, *Senior Associate Dean, Research*

Ann E. Campbell, PhD, *Associate Dean, Student Affairs*

David E. Huband, *Associate Dean, Business and Administrative Affairs*

Jeffrey A. Johnson, DHSc, *Associate Dean, School of Health Professions*

Thomas Kimble, MD, *Associate Dean, Admissions and Enrollment*

Cynthia C. Romero, MD, *Director, M. Foscue Brock Institute for Community and Global Health*

EVMS Faculty, Preceptors, Residents and Staff

Basic Science Faculty **58**

Clinical Faculty **479**

Health Professions Faculty **37**

Residents/Fellows **365**

Staff **976**

Part-time Faculty **43**

Volunteer Community Faculty **1,119**

Preceptors (mentors not on faculty) **539**

Emeritus faculty **35**

Adjunct faculty **57**

Figures are current as of Sept. 1, 2017

Regional Alumni

Graduates by City of Residence	MD	Health Professions	Resident Alumni	ALL
Chesapeake	80	230	134	385
Hampton	18	48	22	79
Newport News	29	65	23	99
Norfolk	293	380	346	847
Portsmouth	16	48	28	82
Suffolk	43	74	61	150
Virginia Beach	254	487	367	946
Summary	MD	Health Professions	Resident Alumni	ALL
Hampton Roads	733	1,332	981	2,588
Virginia	1,452	1,836	1,319	3,917
All Areas	3,834	3,732	3,941	10,309

The ALL columns count an individual only once regardless of the number of programs he/she completed





EVMS educational programs are highly competitive, with an average of 16 applicants per opening across the medical and health professions.

Education

EVMS attracts applicants from across the country who seek out the school's collaborative environment and share the institution's commitment to community service.

In addition to the MD program, the school offers training in a growing number of health professions. EVMS also trains medical-school graduates in their chosen specialty, provides specialized training in the form of fellowships and sponsors ongoing Continuing Medical Education.

Graduate Medical Education (Residency Training)

Once they graduate from medical school, new physicians must go through at least another three years of training in their chosen specialty. The duration of this residency varies from specialty to specialty. EVMS hosts 363 residents in 39 residency, fellowship and internship programs:

- Combined Internal Medicine/
Family Medicine
- Combined Internal
Medicine/Geriatrics
- Dermatology
Pediatric Dermatology
Fellowship
- Emergency Medicine
International Wilderness
Fellowship
Medical Services Fellowship
Ultrasound Fellowship
- Family Medicine
Ghent Family Medicine
Portsmouth Family Medicine
- Internal Medicine
Endocrinology, Diabetes &
Metabolism Fellowship
Geriatrics Fellowship
Hospitalist Fellowship
Infectious Disease Fellowship
Nephrology Fellowship
Pulmonary/Critical Care
Fellowship
Sleep Medicine Fellowship
- Obstetrics/Gynecology
Maternal Fetal Medicine
Fellowship
Reproductive Endocrinology
and Infertility Fellowship
- Ophthalmology
- Otolaryngology
- Pediatrics
Child Abuse Fellowship
Emergency Medicine
Fellowship
International Pediatric
Emergency Medicine
Fellowship
Simulation in Medical
Education Fellowship
- Physical Medicine &
Rehabilitation
Pain Medicine Fellowship
- Podiatry
- Psychiatry
- Psychology Internship
- Radiology
Mammography Fellowship
- Surgery
Critical Care Fellowship
Vascular Surgery Fellowship
- Urology
Adult & Pediatric
Genitourinary
Reconstructive Fellowship

Teaching Affiliates

EVMS does not own a hospital. Instead, the school has established working relationships with healthcare facilities across the region where student and medical residents learn in a variety of clinical settings. In addition to the major facilities listed below, EVMS also has teaching affiliations with approximately 150 private practices and 10 additional clinical facilities throughout Hampton Roads.

- Beth Shalom Village [Virginia Beach]
- Bon Secours DePaul Medical Center [Norfolk]
- Bon Secours Maryview Medical Center [Portsmouth]
- Chesapeake General Hospital
- Children's Hospital of The King's Daughters [Norfolk]
- Eastern State Hospital [Williamsburg]
- Naval Medical Center Portsmouth
- Riverside Behavioral Health Center [Hampton]
- Riverside Rehabilitation Institute [Newport News]
- Sentara Careplex Hospital [Hampton]
- Sentara Leigh Hospital [Norfolk]
- Sentara Norfolk General Hospital
- Sentara Obici Hospital [Suffolk]
- Sentara Princess Anne Hospital [Virginia Beach]
- Sentara Virginia Beach General Hospital
- Veterans Affairs Medical Center Hampton



Continuing Medical Education (CME)

Educational activities sponsored by Continuing Medical Education (CME) help physicians maintain competence and skills to provide the highest level of patient care in the Hampton Road area. The EVMS CME office has received the highest level of accreditation, with commendation, from its accrediting body.

Hours of CME offered:	1,082
Number of activities:	533
Attendees at EVMS CME activities:	12,840

Medical Modeling and Simulation

EVMS was among the first medical schools in the country to use “standardized” patients — trained individuals who portray patients — to teach students how to perform clinical exams and how to communicate effectively with patients. With the establishment of the Sentara Center for Simulation and Immersive Learning at EVMS, the school continues to be an innovator in developing new ways to use technology to teach common medical procedures and to provide students with a safe environment in which to practice and perfect their technique. The simulation center is accredited by the Society for Simulation in Healthcare.

The center has logged **55,864 hours** of simulation training at the facility with **13,485 students** — both from EVMS and other institutions locally

The center also works offsite with **53 external clients**, including other medical schools

The center has recently begun offering life-support courses, with **1,175 students** enrolled in **5,542 hours** of training

Staff includes **21 full-time** and **125 other** employees, including standardized patients

Accreditation

Below are the major agencies that accredit educational programs and activities at EVMS.

Commission on Colleges of the Southern Association of Colleges and Schools

Liaison Committee on Medical Education

Accreditation Council for Graduate Medical Education

Accreditation Council for Continuing Medical Education



Student Demographics

Medical Doctor 2017 Entering Class

Total students (6,729 applicants)	151
In-state	76
Out-of-state	75
Hampton Roads	33
Male	87
Female	64
Underrepresented Minorities*	29
Average GPA	3.6
Average MCAT (Medical College Admissions Test)	511

* Includes African, African American, Afro Caribbean, Black, American Indian or Alaskan Native, Mexican, Mexican American/Chicano, Native Hawaiian or Puerto Rican

Health Professions 2017 Entering Class

Total students (2,479 applicants)	413
In-state	244
Out-of-state	169
Hampton Roads	168
Males	125
Females	288
Underrepresented Minorities*	72
Average GPA	3.34

* Includes African, African American, Afro Caribbean, Black, American Indian or Alaskan Native, Mexican, Mexican American/Chicano, Native Hawaiian or Puerto Rican

“There’s a common goal here that basically boils down to helping people live longer and better lives.”

April Pace, Librarian
EVMS Brickell Medical Sciences Library

Degrees Offered

EVMS offers a range of doctoral and graduate degrees and certificates in the medical and health professions.

DEGREE PROGRAM	NO. OF STUDENTS	COMPLETION TIME
Art Therapy & Counseling, MS	35	2 years
Biomedical Sciences, MS (Research)	11	2 years
Biomedical Sciences, PhD	13	6 years
Biotechnology, MS	8	16 months
Clinical Psychology, PhD	32	4 years
Contemporary Human Anatomy, MS	12	1 year
Doctor of Health Sciences, DHSc	25	3 years
Healthcare Delivery Science, MS	10	2 years
Laboratory Animal Science, MS	26	2 years
Medical/Health Professions Education, MS	11	2 years
Medical Master’s, MS	54	1 year
Medical Master’s, MS	35	2 years
Medicine, MD	600	4 years
Pathologists’ Assistant, MS	27	2 years
Physician Assistant Fellowship Programs	6	1 year
Physician Assistant, MPA	158	28 months
Public Health, Certificates	11	1 year
Public Health, MPH	77	2 years
Reproductive Clinical Sciences, MS (formerly Clinical Embryology/Andrology)	51	2 years
Reproductive Clinical Sciences, PhD	13	3 years
Surgical Assisting, MS	44	2 years
Surgical Assisting Bridge, MS	2	1 year

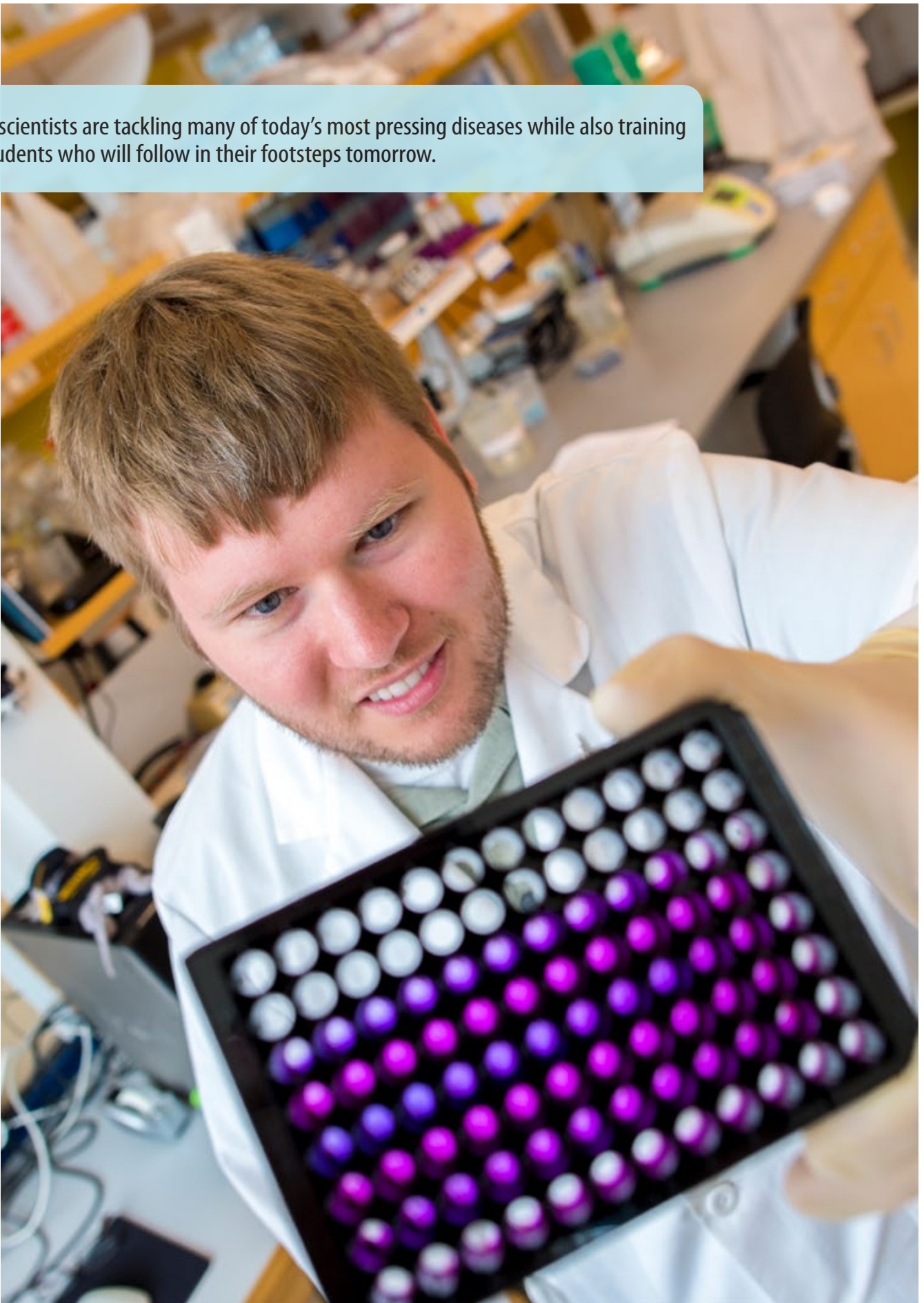
9,208 applicants
for 564 spots in the
medical and health professions
educational programs

Tuition*

MD (in-state):	\$31,196
MD (out-of-state):	\$56,382
Art Therapy & Counseling (in-state):	\$27,843
Art Therapy & Counseling (out-of-state):	\$33,215
Biomedical Sciences, Research (in-state):	\$5,500
Biomedical Sciences, Research (out-of-state):	\$7,175
Biomedical Sciences, PhD (in-state):	\$5,940
Biomedical Sciences, PhD (out-of-state):	\$7,749
Biotechnology (in-state):	\$28,512
Biotechnology (out-of-state):	\$34,048
Contemporary Human Anatomy (in-state):	\$32,544
Contemporary Human Anatomy (out-of-state):	\$37,792
Doctor of Health Sciences (in-state):	\$13,515
Doctor of Health Sciences (out-of-state):	\$13,515
Healthcare Delivery Science (in-state):	\$16,218
Healthcare Delivery Science (out-of-state):	\$16,218
Laboratory Animal Science (in-state):	\$19,152
Laboratory Animal Science (out-of-state):	\$21,996
Medical/Health Professions Education (in-state):	\$10,812
Medical/Health Professions Education (out-of-state):	\$10,812
Medical Master’s 1-year (in-state):	\$36,920
Medical Master’s 1-year (out-of-state):	\$43,208
Medical Master’s 2-year (in-state):	\$26,265
Medical Master’s 2-year (out-of-state):	\$27,300
Pathology Assistant (in-state):	\$20,600
Pathology Assistant (out-of-state):	\$24,150
Physician Assistant (in-state):	\$11,661
Physician Assistant (out-of-state):	\$13,800
Public Health (in-state):	\$22,275
Public Health (out-of-state):	\$26,600
Reproductive Clinical Sciences, MS (in-state):	\$21,080
Reproductive Clinical Sciences, MS (out-of-state):	\$24,220
Reproductive Clinical Sciences, PhD (in-state):	\$23,184
Reproductive Clinical Sciences, PhD (out-of-state):	\$23,634
Surgical Assistant (in-state):	\$15,670
Surgical Assistant (out-of-state):	\$18,695

* For initial year only; does not include fees or other costs

EVMS scientists are tackling many of today's most pressing diseases while also training the students who will follow in their footsteps tomorrow.



Research

More than 100 EVMS faculty members are engaged in basic and clinical research focused in areas where the community has pressing needs. EVMS continually strives to enhance its research enterprise in order to improve the health of the people of Hampton Roads and beyond. EVMS carries out focused research in several specialty centers, including:

Biorepository

A College of American Pathology Accredited program to acquire, process and share bio-specimens for biomedical research.

Leroy T. Canoles Jr. Cancer Research Center

The center is dedicated to translational research studies that lead directly to improved care and new biomarkers.

Clinical programs with community outcomes

The Glennan Center for Geriatrics and Gerontology and the Community Health division of Pediatrics conduct research on the special needs of the community.

CONRAD

The center focuses on prevention of sexually transmitted diseases in developing countries.

EVMS-Sentara Healthcare Analytics and Delivery Science Institute

Conducts collaborative epidemiological research to improve population health management and healthcare delivery.

Jones Institute for Reproductive Medicine

The institute conducts research in menopause, infertility, contraception, pre-implantation genetic diagnosis, and more.

National Center for Collaboration in Medical Modeling and Simulation

A joint project of EVMS and academic, governmental and commercial partners, the center works to improve patient care by advancing simulation-based training.

Strelitz Diabetes Center

The center conducts a broad range of research focused on minimizing complications of diabetes and developing new treatments to prevent or reverse type 1 diabetes.

G.L. Wright, Jr. Center for Biomedical Proteomics

Provides state-of-the-art mass spectrometers and analytical tools for biomarker discovery & proteomic disease analysis.

Technology Highlights

US patents and applications: **59**

Licenses: **17**

Companies formed: **11**

Products from EVMS technologies: **9**

Licensing & royalty income: **\$46.5 million**

Figures reflect active metrics, current as of Sept. 1, 2017

In addition to the centers, many departments also conduct research in a myriad of areas, including:

- Complement and inflammation modulation**
- Ear, neck and head disorders**
- Emergency medical treatments**
- Health disparities**
- Infectious disease and immunology**
- Maternal-fetal medicine, general obstetrics, gynecology and urogynecology**
- Psychiatric and behavioral disorders**
- Pediatric diseases, genetics, neonatology**
- Surgical procedures**
- Urologic disorders**

Basic, Translational & Clinical Research

Active grants and contracts: *	259
Annual funding:	\$28 million
NIH primary funding	\$5.2 million
NIH primary awards: *	21
NIH secondary awards: *	22

* These numbers represent research begun in FY 2017 and existing research that continued during that time period. Figures are accurate as of June 2017.

Research Publications

Scholarly activity is one measure of an institution's research output. Researchers typically submit their study results to peer-reviewed publications so that colleagues everywhere can keep pace with the latest discoveries and developments. Below are figures related to articles and publications authored by EVMS faculty.

Journal articles:	675
Books and book chapters:	28

703 journal articles, books and book chapters

EVMS faculty members not only educate and train students, they provide world-class medical care to more than 1,600 people every day.



Patient Care

EVMS full-time physicians and EVMS-affiliated physicians and healthcare providers care for patients in locations throughout the region. Many are sought after by patients near and far in search of the best-available care and innovative treatments.

Some of the care is unique. For instance, EVMS specialists are the only ones in the region to provide care for women experiencing a high-risk pregnancy.

EVMS Medical Group

150 full-time physicians and 40 physician extenders are affiliated with EVMS Medical Group, a not-for-profit physician group supporting EVMS. In addition to their duties as teachers and scientists, these physicians and surgeons care for more than 1,600 people every day at 29 clinical practice sites.

Primary Care

EVMS Ghent Family Medicine
Norfolk

EVMS Internal Medicine
Norfolk

EVMS Portsmouth Family Medicine
Portsmouth

Obstetrics and Gynecology

EVMS General Ob/Gyn
Norfolk, Virginia Beach

EVMS Jones Institute for Reproductive Medicine
Newport News, Norfolk, Virginia Beach

EVMS Maternal-Fetal Medicine
Newport News, Norfolk, Virginia Beach

EVMS Urogynecology
Newport News, Norfolk, Virginia Beach

Medical Specialties

EVMS Allergy/Rhinology
Norfolk, Virginia Beach

EVMS Dermatology
Norfolk, Virginia Beach, Hampton

EVMS Endocrinology & Metabolism
Norfolk, Suffolk

EVMS Glennan Center for Geriatrics & Gerontology
Norfolk

EVMS Hearing and Balance Center
Norfolk, Virginia Beach

150 physician-educators
in the EVMS Medical
Group care for patients at
29 practice locations in
Hampton Roads

EVMS Infectious Disease

Accomack, Chesapeake, Gloucester, Norfolk, Portsmouth, Virginia Beach, Williamsburg

EVMS Otolaryngology/Neurotology

Norfolk, Virginia Beach

EVMS Physical Medicine and Rehabilitation

Norfolk

EVMS Pulmonary and Critical Care

Norfolk

EVMS Sleep Medicine

Norfolk

EVMS Sports Medicine

Norfolk, Virginia Beach

EVMS Voice and Swallowing Disorders

Norfolk

Psychiatry and Behavioral Sciences

EVMS General Psychiatry/Psychology

Norfolk

EVMS Neuropsychology Program

Norfolk

CONTINUED ON NEXT PAGE



“[EVMS] genuinely cared. They called me on days that I wasn’t scheduled to come in to see how I was. I didn’t know care could be that way.”

Kavitha Johnson, pictured with her husband and daughter, following her treatment for infertility



Radiation Oncology

EVMS Radiation Oncology
Norfolk, Virginia Beach

Surgery

EVMS General Surgery
Norfolk

EVMS Ophthalmology
Norfolk

EVMS Otolaryngology/Head & Neck Surgery
Norfolk, Virginia Beach

EVMS Plastic Surgery
Norfolk, Virginia Beach

EVMS Surgical Oncology
Norfolk, Virginia Beach

EVMS Urogynecology
Newport News, Norfolk, Virginia Beach

Laboratory

EVMS Andrology
Norfolk

EVMS Dermatopathology
Norfolk

EVMS Embryology
Norfolk

Additional Clinical Faculty

In addition to physicians associated with EVMS Medical Group, EVMS also has clinical faculty practicing, with residency training programs, in these specialties:

Emergency Medicine
Norfolk, Suffolk, Virginia Beach

Ophthalmology
Norfolk, Virginia Beach

Pathology
Norfolk

Pediatrics
Locations throughout Hampton Roads

Radiology
Chesapeake, Norfolk

Urology
Norfolk, Virginia Beach

Annual Patient Visits by Specialty

EVMS Dermatology:	13,630
EVMS Endocrine:	17,009
EVMS Family Medicine:	48,330
EVMS Geriatrics:	5,477
EVMS Hospital Medicine:	12,120
EVMS Infectious Disease:	18,985
EVMS Internal Medicine/Primary Care:	30,190
EVMS Maternal-Fetal Medicine:	62,482
EVMS Obstetrics & Gynecology:	23,294
EVMS Ophthalmology:	11,547
EVMS Otolaryngology (Ear, Nose and Throat):	30,132
EVMS Plastic Surgery:	4,340
EVMS Physical Medicine:	22,859
EVMS Psychiatry:	16,232
EVMS Pulmonary/Critical Care Medicine:	11,097
EVMS Radiation Oncology:	28,836
EVMS Reproductive Endocrinology:	20,598
EVMS Sleep Medicine:	5,799
EVMS Surgery:	34,897
EVMS Urogynecology:	5,686

EVMS' vision is to become recognized as the most community-oriented school of medicine and health professions in the nation.



Community

EVMS has always enjoyed a close connection with the people of Hampton Roads. That relationship entered a new era with the establishment of the M. Foscue Brock Institute for Community and Global Health.

The Brock Institute has become the focal point for integrating EVMS' clinical, educational and research programs, enabling EVMS to take a major step toward its vision of becoming the most community-oriented school of medicine and health professions in the nation.

The interdisciplinary institute is a model for medical schools nationwide by helping to train the next generation of community-minded physicians and healthcare professionals and building a robust training program that offers students meaningful service experiences.

The donation from Macon F. Brock Jr., co-founder and chairman of Dollar Tree Inc., and his wife, Joan, is one of the largest individual gifts ever made to EVMS. Their donation, made in honor of Mr. Brock's father, a Norfolk physician and community volunteer, has allowed the school's service programs to expand and deepen their impact on both local and global health issues.

Community outreach

One shining example of how EVMS gives back to the community is HOPES, a student-led free clinic. From April to July 2017, the clinical saw 178 patients in one of seven specialty areas. During that same period, there were 211 student volunteers, assisted by a group of dedicated physicians. The clinic continues to expand to meet patient needs, including adding a night dedicated to women's health and provisions for Spanish-speaking patients.

“When you're going into the health sciences, whether as a physician or researcher, it's important to make sure you are keeping that bond with the community and keeping sight of the bigger picture of why we do what we do.”

Allison Mathiesen, PhD student
Biomedical Sciences

COMMUNITY



EVMS opened in 1973 with just 27 students. Today, there are more than 1,400 students in 21 programs designed to meet the workforce needs of the community.

Financial Overview

EVMS is a state-assisted, independent, community-based medical school. Unlike most medical schools, EVMS does not own a hospital and is not part of a larger university system.

EVMS has seen steady growth in the last several years. The school continues to enjoy strong support from business, organizations and individuals who appreciate the school's value to the community.

Revenue

Patient care	\$63.6 million
Grants/contracts	\$25.8 million
Contractual services	\$56.4 million
Tuition and fees	\$43.1 million
State appropriations	\$25.3 million
Other	\$18 million
Auxiliary enterprises	\$7.6 million
Facility/administrative cost recoveries	\$4.4 million
EVMS Foundation support	\$5.0 million
Municipal appropriations	\$1.4 million
TOTAL	\$252.6 million

Source: FY 2017 budget

Endowment

The EVMS Foundation supports Eastern Virginia Medical School.

Endowed funds	\$91.6 million
Other funds	\$7 million
TOTAL NET ASSETS	\$98.6 million

Endowment figures are current as of Sept. 1, 2016

EVMS ranks **12th**
among the region's largest
private-sector employers

“EVMS unquestionably has established itself as one of the foremost economic engines in Hampton Roads.”

James Koch, PhD, Board of Visitors Professor of Economics Emeritus at Old Dominion University

Economic Impact

When noted regional economist James V. Koch, PhD, last reported on his evaluation of the school's economic imprint on the region in 2017, he found that EVMS-related economic activity grew at more than twice the pace of the region in the last five years. He estimated the school's annual impact at \$1.2 billion, a 21.4 percent increase from just five years ago.

Annual economic impact:	\$1.2 billion
EVMS rank among private-sector employers in Hampton Roads:	12
Estimated annual impact of EVMS alumni in Hampton Roads:	\$446 million*
Value of charitable services, including uncompensated care:	\$63 million
Economic ripple effect from EVMS activities:	\$655 million
Additional jobs generated locally because of EVMS economic ripple effect:	4,900

* includes ripple effect

Eastern Virginia Medical Center



Facilities

EVMS has modern facilities for education, research and patient care. The school has made significant capital investments in the last few years in addition to opening an education and research building, now known as Lester Hall. EVMS will begin construction of a new education and academic administration building in the spring of 2018 with occupancy scheduled for 2020.

The recent renovations at EVMS and elsewhere in the Eastern Virginia Medical Center have made space for two large lawns and adjoining areas to relax and enjoy the outdoors.

EVMS facilities include:

Building	Purpose	Sq. Ft.	Year Built/Renovated
Andrews Hall	Executive offices, administration, clinical offices	80,000	1973/2010
Brickell Library	Medical sciences library, open to the public	57,000	2000/2011
Jones Institute	Infertility treatment	69,000	1992/2011
Hofheimer Hall	Clinical offices	108,000	1985/2010
Lester Hall	Canoles Cancer Research Center, School of Health Professions, Sentara Center for Simulation & Immersive Learning	103,000	2011
Lewis Hall	Education, research	179,000	1978/2011
Smith-Rogers Hall	Administration, Continuing Medical Education, Graduate Medical Education	39,000	1960/1988
Williams Hall	Strelitz Diabetes Center, Clinical Research Unit of EVMS Pediatrics	50,000	1967/2011



EVMS partners with hospitals, health systems, clinicians in private practice and other universities across the region to provide a full range of medical, health professions and post-graduate training.

EVMS

Community Focus.
World Impact.

www.evms.edu



evms.edu/Pulse



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EVMS
Eastern Virginia Medical School

**Thriving in Our Missions:
Our Roadmap for the Future**

STRATEGIC PLAN

BOARD APPROVAL DOCUMENT

FY2019 - FY2022

Eastern Virginia Medical School

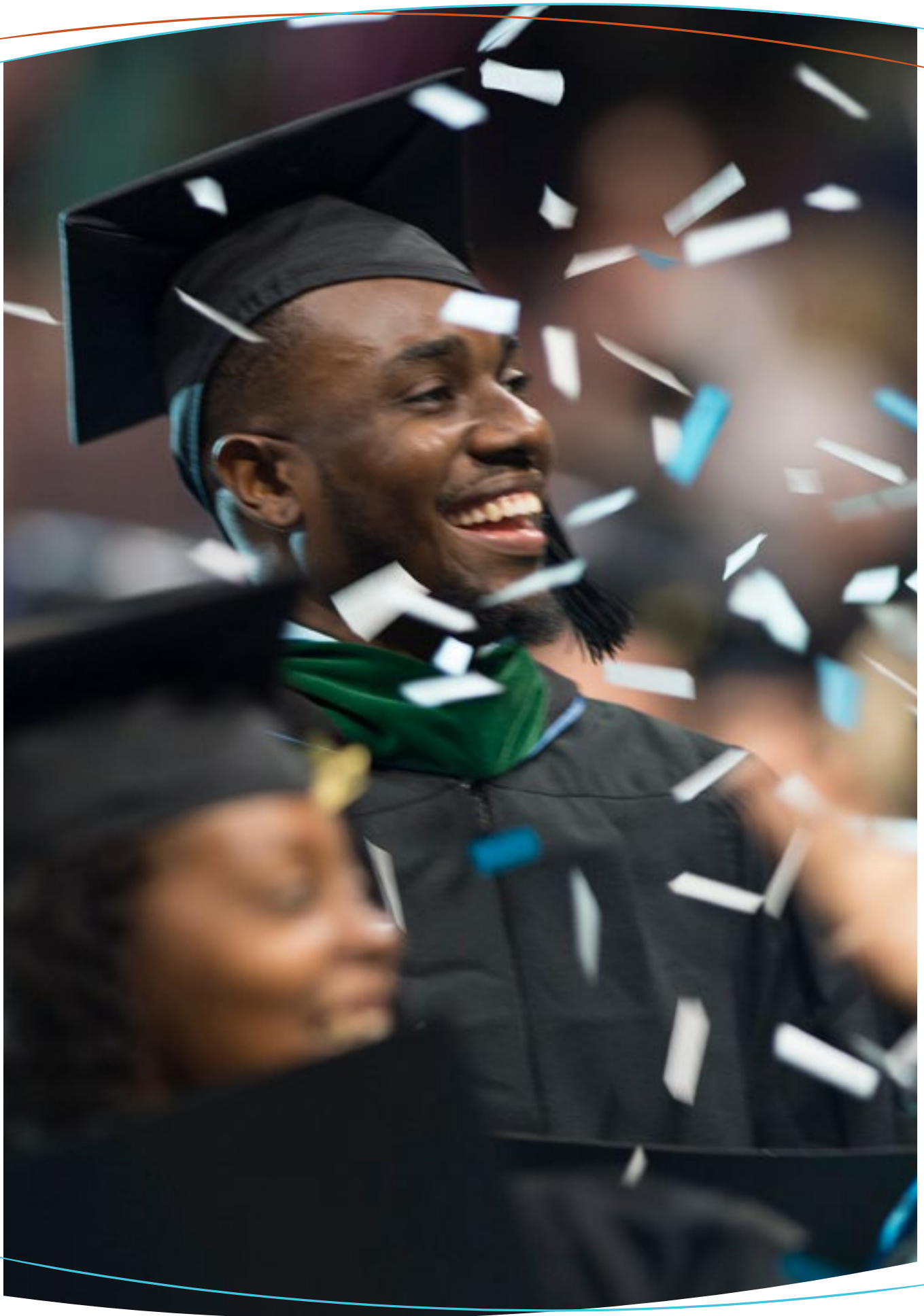
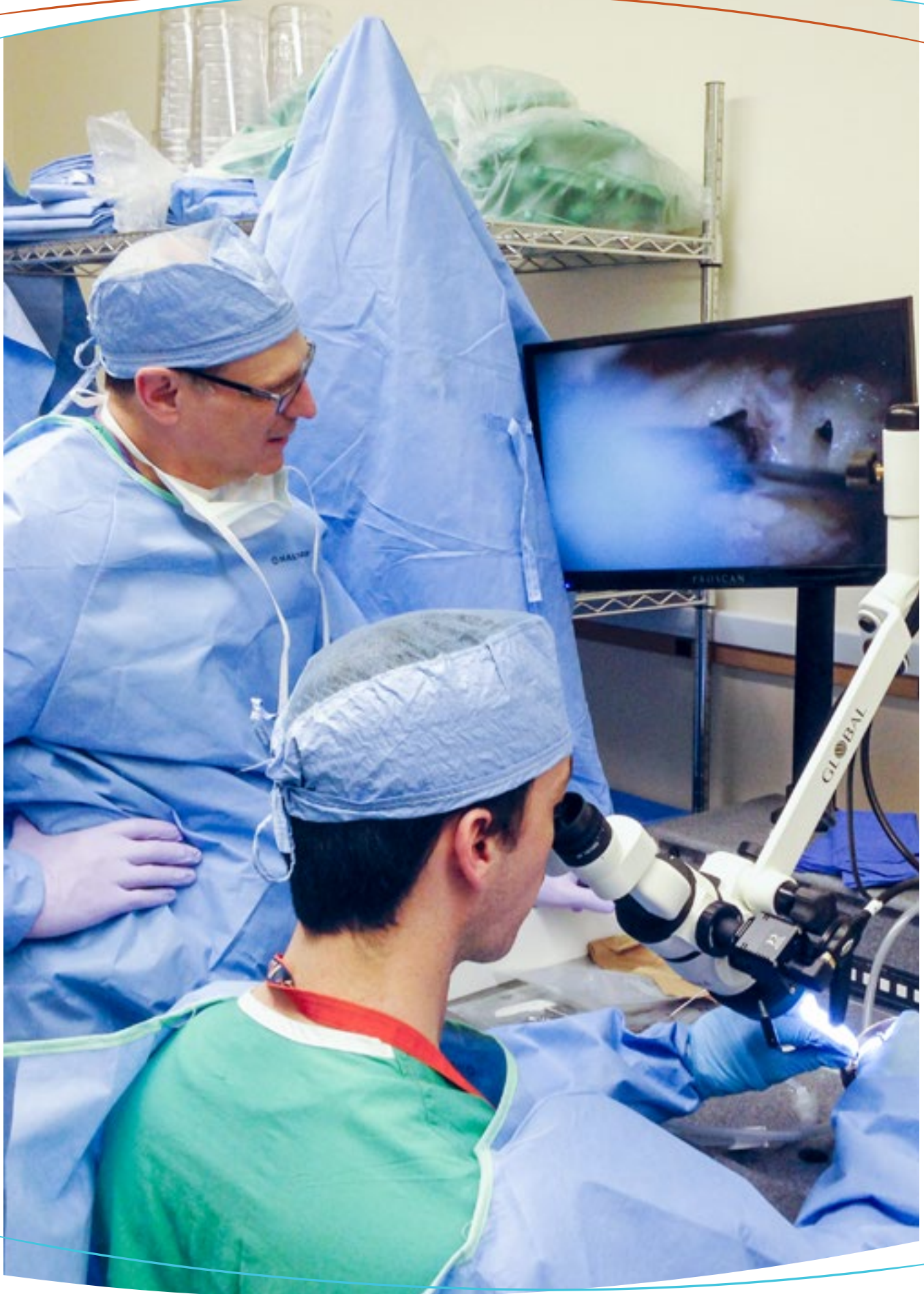




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INTRODUCTION

Achieving excellence in its core missions of education, research, and clinical care while maintaining its community-based focus is the foundation underlying the overall mission of Eastern Virginia Medical School. As one of the nation's only academic medical centers founded and funded by its local community, this was the school's initial vision when established more than 40 years ago.

Today, EVMS serves as an integral community partner to industry organizations, academic institutions, healthcare entities and area municipalities, while also being a primary economic driver and healthcare workforce developer for the Hampton Roads region.

EVMS highly values the input of its campus community. The strategic planning process was designed to encourage transparency and participation, providing an opportunity for the institution's faculty, staff, and students to have a voice and actively participate. Throughout the proceedings, collaboration among the school's diverse population was not only encouraged but expected, as forums were structured to solicit feedback, generate open exchange of ideas, and facilitate thoughtful discussion.

Four strategic theme areas were identified, including the three core mission areas of Education, Research, and Clinical Care. The fourth strategic theme, Administration, is a broader area that strategically bridges and supports the other three mission areas. Subcommittees for each strategic theme were created, and the following guiding principles were provided for developing strategic goals and objectives.

Guiding Principles

1. Improve quality
2. Identify/define deliverables
3. Provide a financial/academic return on investment
4. Project/advance the national reputation of EVMS
5. Define accountability
6. Align with EVMS' Mission, Vision, and Diversity statements
7. Demonstrate synergistic value across multiple mission areas





EVMS MISSION STATEMENT

Eastern Virginia Medical School is an academic health center dedicated to achieving excellence in medical and health professions education, research and patient care. We value creating and fostering a diverse and cohesive faculty, professional staff, and student body as the surest way to achieve our mission. Adhering to the highest ethical standards, we will strive to improve the health of our community and to be recognized as a national center of intellectual and clinical strength in medicine and health professions. Our commitment to ensuring institutional effectiveness is demonstrated by the continuous assessment processes we use to improve program performance and student learning outcomes.

EVMS VISION STATEMENT

Eastern Virginia Medical School will be recognized as the most community-oriented school of medicine and health professions in the United States.

EVMS CORE VALUES

Three core values drive our daily efforts:

Excellence: We determine with our stakeholders what is valuable and hold ourselves to high performance standards that fulfill our promises.

Collegiality: We serve our community and one another, building strong and mutually supportive relationships. We work as a cooperative, united team to further our purposes of education, research, and patient care.

Integrity: We strive to maintain the highest ethical standards and accept accountability for all we do and say.

EVMS DIVERSITY STATEMENT

The education, research, and patient care mission of Eastern Virginia Medical School is shaped by many considerations: the demographics of the surrounding communities, the significant presence of military personnel, retirees and their families, the rural and underserved communities of the Commonwealth of Virginia, and the broader national and global need to address gaps in the health workforce and the accessibility of healthcare.

Eastern Virginia Medical School has a unique history as one of the few institutions in the United States established by the local community to serve the local community. Indeed, its vision is to be the most community-oriented school of medicine and health professions in the nation. In fulfilling that vision, EVMS strives to attract talented students, trainees, faculty, staff, and leaders who bring diverse attributes and experience to drive our collective commitment to excellence.

Eastern Virginia Medical School embraces diversity broadly defined, but places a special emphasis on recruitment of women, traditionally underrepresented minorities in medicine and the health professions (African Americans, Latinos, American Indians and Native Alaskans, and Native Hawaiians and Pacific Islanders), veterans, and individuals who come from socioeconomically disadvantaged backgrounds. Acknowledging that diversity is a fluid and evolving concept, we will continually strive to be inclusive of individuals and groups in the broadest possible manner.





EXECUTIVE SUMMARY

The EVMS Strategic Plan for FY2019-FY2022 affirms the institution's commitment to continued excellence in its core mission areas of Education, Research and Clinical Care. The initiatives and priorities outlined are congruent with EVMS' mission and vision and represent an assortment of new program concepts, existing program enhancements, and operational advancements designed to better position EVMS for success.

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Four strategic theme areas were identified, including the three core mission areas of Education, Research, and Clinical Care. The fourth strategic theme, Administration, is a broader area that strategically bridges and supports the other three mission areas. Subcommittees for each strategic theme were created, and the following guiding principles were provided for developing strategic goals and objectives.

Strategic Planning — Guiding Principles

1. Improve quality
2. Identify/define deliverables
3. Provide a financial/academic return on investment
4. Project/advance the national reputation of EVMS
5. Define accountability
6. Align with EVMS' Mission, Vision and Diversity statements
7. Demonstrate synergistic value across multiple mission areas



EVMS STRATEGIC PLAN FY19-FY22
Funding Requests by Mission

Target Funding	12,000,000	3,200,000
Funding Projections by Mission	One Time	Recurring
Education	2,740,154	1,464,928
Research	5,733,087	254,408
Clinical Care	1,845,439	709,500
Administration	1,681,320	766,586
Total	12,000,000	3,195,422
Under/(Over) Target	0	4,578



EVMS
Eastern Virginia Medical School

**Thriving in Our Missions:
Our Roadmap for the Future**

EDUCATION

- Goal E1: Strengthen the undergraduate medical education program.**
- Goal E2: Strengthen the School of Health Professions educational programs.**
- Goal E3: Develop and implement a Strategic Enrollment Plan for EVMS educational programs.**
- Goal E4: Improve the clinical education sites for programs and maintain critical relationships with key partners that teach.**





Strategic Planning Theme: EDUCATION

Medical and health education is a labor-intensive enterprise. The revised EVMS medical curriculum has significantly improved the educational experience, but the move has left the institution with an acute shortage of faculty experts (both paid and volunteer) to effectively deliver the curriculum. In addition, the escalating competitiveness of residency programs requires that medical students have an optimal learning experience and preparation for residency training.

Over the last several years, the School of Health Professions has experienced substantial growth as it has added programs in response to the evolving educational needs of the community. To accommodate the growth, the School of Health Professions needs additional faculty, improved infrastructure and a comprehensive strategy to drive student recruitment across all the educational programs. The Education subcommittee devised four goals to meet these needs.

Goal E1: Strengthen the undergraduate medical education program.

Objective E1.1: Expand the number of foundational sciences faculty to serve as medical education experts.

- Recruit two co-modular directors in foundational sciences to address identified needs in the M1 and M2 years.
- Recruit a curriculum coordinator to manage logistics of pre-clerkship education under the Care Forward Curriculum.

Objective E1.2: Create a co-clerkship director position for every core clerkship at EVMS to oversee each department's undergraduate medical-education teaching and faculty development.

Objective E1.3: Develop and implement an Academy of Educators, as an organizational unit within the existing EVMS infrastructure. This academy will foster excellence in teaching, learning, and scholarship and will recognize EVMS healthcare educators for outstanding contributions to the educational mission of the institution.

Objective E1.4: Hire part-time clinical education faculty to lead key components of the CareForward Curriculum. The faculty member will:

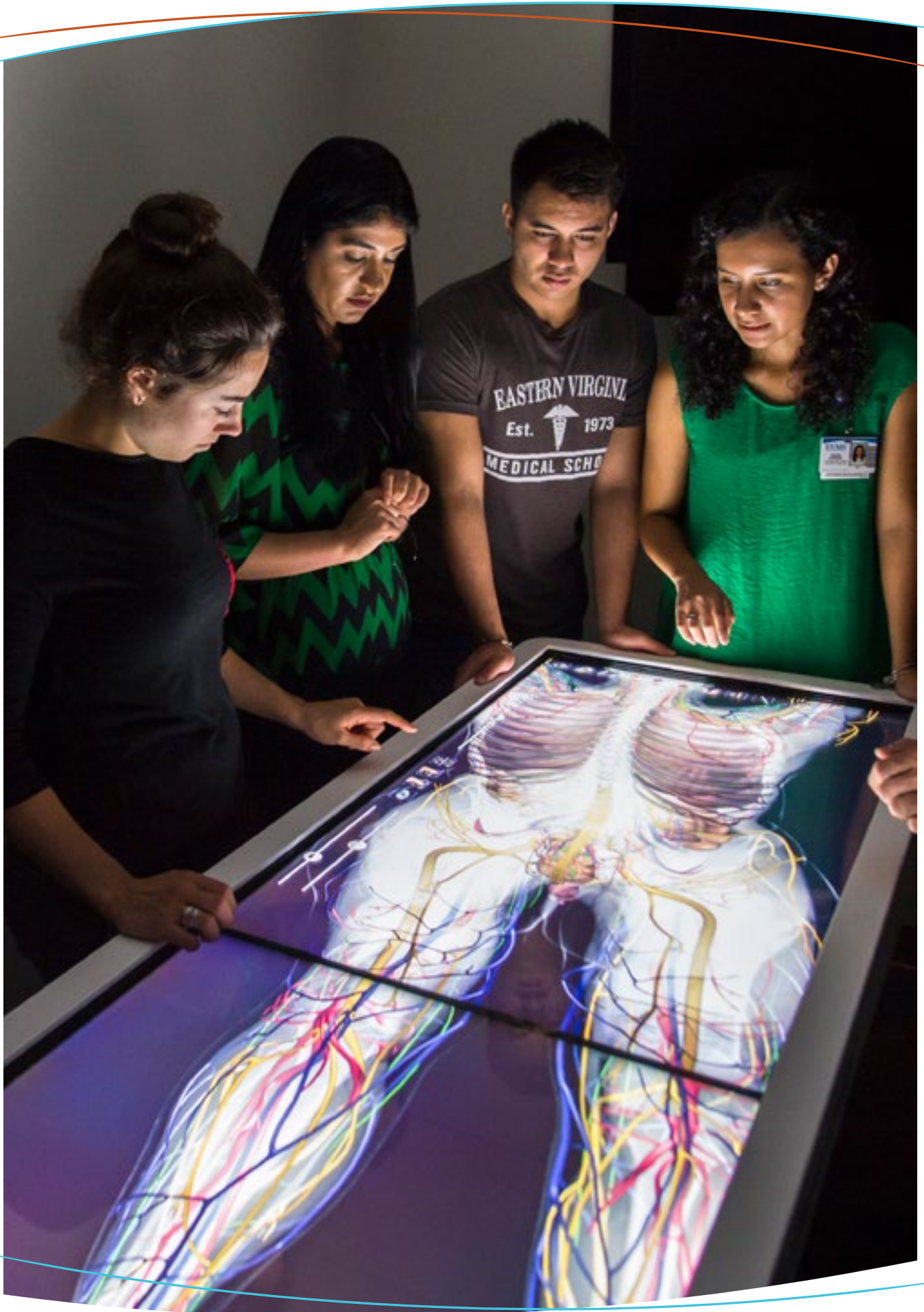
- Lead the STEP course.
- Co-lead the clinical skills component of the new curriculum.
- Co-lead the Synthesis-II module.

Objective E1.5: Improve the Interprofessional Education (IPE) component in the CareForward Curriculum.

- Identify and appoint a clinical faculty expert to design and monitor the IPE component across the undergraduate medical-education continuum.
- Empower the IPE Thread Director to engage with the School of Health Professions and other institutions in Hampton Roads to organize learning sessions.

Objective E1.6: Enhance the operating room (OR) skills of interprofessional students with early introduction of asepsis and suturing technique within a longitudinal curriculum. This includes:

- Creating a dedicated mock OR suite to practice and master asepsis and suturing techniques.
- Allocating funding for the supplies necessary to create a four-year longitudinal curriculum for asepsis and suturing technique.





Objective E1.7: Create and fill an Assistant Dean for Assessment and Evaluation position. This position would implement an MD program-wide educational continuous quality improvement (CQI) initiative, conduct a comprehensive program evaluation plan prior to the 2020 LCME and SACS visits, advise faculty on best practices in grading, and monitor consistent grading policies across all four years of the MD program.

Objective E1.8: Establish EVMS as the global leader in Point of Care Ultrasound (POCUS) for undergraduate medical and health professions education.

- Provide a stipend for a Director of Ultrasound.
- Hire a full time staff member for operational logistics support.
- Purchase equipment for expanded programs and certification offerings.
- Elevate the EVMS brand through recognition as the premier center of excellence in ultrasound education for both medical and health professions curricula.
- Provide EVMS graduates with a skill set that is “value added,” making them more competitive for residency training programs and employment
- Provide research opportunities in ultrasound for students, residents and faculty.
- Leverage ultrasound programs as a commodity to improve student recruitment across multiple programs.
- Leverage ultrasound as a value-added offering to community faculty and residents by developing certificate-granting training opportunities.
- Develop the first PhD in medical education with a track for specializing in ultrasound education.
- Leverage ultrasound as a vehicle to become a leader in competency-based medical education.
- Reduce the reliance on informal volunteerism for the delivery of the ultrasound curriculum by formalizing electives and a system of providing work-study, student-support programs.

Objective E1.9: Support the supervision, administration, and growth of EVMS Global Health programs.

- Hire a full-time program administrator to provide administrative support for work with community partners, students, and EVMS faculty and staff in implementation of community-engaged Global Health programs.
- Develop the required infrastructure of the programs as it relates to identified institutional, program and community needs aligned with allocated resources.
- Perform program supervision and monitoring and evaluation of program outcomes in institutional, local, and international contexts.
- Support all travel necessary to build global health partnerships, present EVMS global health scholarship and program outcomes, and supervise EVMS Global Health initiatives.

Objective E1.10: Increase the number of individuals available to provide academic counseling services to learners at EVMS in order to improve student performance on assessments, including high-stakes USMLE exams.



Goal E2: Strengthen the School of Health Professions educational programs.

Objective E2.1: Hire one new full-time Biostatistics faculty member to deliver coursework for the Master of Healthcare Analytics (MHA) and Master of Public Health (MPH) programs. The faculty member also will be tasked with research and service activities as appropriate.

Objective E2.2: Hire one new full-time Health Management & Policy faculty member to deliver coursework in the MPH program, as well as support courses in the MHA, Master of Healthcare Delivery Science, and Doctor of Health Sciences programs. The faculty member also will be tasked with research and service activities as appropriate.

Objective E2.3: Provide approximately five faculty/staff within EVMS the opportunity for tuition waivers. *(No funding required.)*

Objective E2.4: Create and implement a marketing plan for new certificate programs offered through the School of Health Professions.

Objective E2.5: Improve the educational infrastructure for distance education programs by renovating the studio to include reconfigured layout, furniture replacement, upgraded recording space, and new equipment.

Objective E2.6: Develop and implement an external-assessment process for School of Health Professions academic programs that do not have an accrediting body (currently 13). SACS and LCME require external and periodic program assessments.

Goal E3: Develop and implement a strategic enrollment plan for EVMS educational programs.

Objective E3.1: Hire a consultant to guide the process of development and implementation of the plan.

Objective E3.2: Develop an annual recruitment plan that supports the admissions and enrollment needs of all EVMS educational programs.

Objective E3.3: Develop a marketing and communications outreach plan to support recruitment efforts.

Objective E3.4: Produce admissions and enrollment marketing materials.

Goal E4: Improve the clinical education sites for programs and maintain critical relationships with key educational partners.

Objective E4.1: Negotiate with key partners to maintain opportunities and increase teaching activity at clinical sites.

Objective E4.2: Provide administrative support to improve access to clinical teaching sites.

Objective E4.3: Increase the number of EVMS alumni willing to serve as clinical preceptors for third- and fourth-year medical students or physician assistant students. *(No funding required.)*

- Develop a complete list of EVMS alumni who currently serve as clinical preceptors and identify the reasons/barriers for EVMS alumni that decline to serve as preceptors.
- Develop tailored marketing materials to educate alumni on the need for clinical preceptors and asking them to serve.



Objective E4.4: Increase the involvement of EVMS residents and fellows in teaching EVMS medical students in the first and second year, primarily for small group discussions. *(No funding required.)*

- Identify EVMS residents and fellows (not interns) interested in teaching first- and second-year EVMS medical students.
- Provide training, including hands-on through the Graduate Medical Education office.
- Coordinate with Academic Affairs to schedule these residents and fellows to teach/proctor small groups (M1/M2).

EVMS STRATEGIC PLAN FY19-FY22 Financial Projections

MISSION AREA: EDUCATION

Goals/Objectives	One Time	Recurring				Recurring Total
		FY 2019 Year 1	FY 2020 Year 2	FY 2021 Year 3	FY 2022 Year 4	
E1 Strengthen Undergraduate Medical Education						
E1.1 Co-Modular Director 1 - Foundational Sciences	–	86,250	87,975	89,735	91,529	355,489
Co-Modular Director 2 - Foundational Sciences (MD)	–	172,500	175,950	179,469	183,058	710,977
Curriculum Coordinator	–	73,200	74,664	76,157	77,680	301,702
Professional Development	100,000	–	–	–	–	–
Office Furnishings	6,000	–	–	–	–	–
Subtotal	106,000	331,950	338,589	345,361	352,268	1,368,168
E1.2 Co-Clerkship Directors	–	172,500	175,950	179,469	183,058	710,977
Professional Development	100,000	–	–	–	–	–
Subtotal	100,000	172,500	175,950	179,469	183,058	710,977
E1.3 Academy of Educators - Director	–	23,000	23,460	23,929	24,408	94,797
Academy of Educators - Coordinator	–	54,900	55,998	57,118	58,260	226,276
Operating Budget	–	15,000	15,000	15,000	15,000	60,000
Travel/CME/Other	400,000	–	–	–	–	–
Subtotal	400,000	92,900	94,458	96,047	97,668	381,073
E1.4 Lead CareForward Curriculum (Assistant Professor)	–	86,250	87,975	89,735	91,529	355,489
Subtotal		86,250	87,975	89,735	91,529	355,489
E1.5 Expanded Interprofessional Education	–	57,500	58,650	59,823	61,019	236,992
Subtotal		57,500	58,650	59,823	61,019	236,992
E1.6 Enhance Operating Room Skills	400,000	–	–	–	–	–



Goals/Objectives	One Time	Recurring				Recurring Total
		FY 2019 Year 1	FY 2020 Year 2	FY 2021 Year 3	FY 2022 Year 4	
E1.7 Assist. Dean for Educational Assessment	–	172,500	175,950	179,469	183,058	710,977
Office Furnishings	6,000	–	–	–	–	–
Subtotal	6,000	172,500	175,950	179,469	183,058	710,977
E1.8 Ultrasound Education - Co Director	–	11,500	11,730	11,965	12,204	47,398
Ultrasound Ed. - Admin. Support	–	61,000	62,220	63,464	64,734	251,418
Supplies	6,000	–	–	–	–	–
Additional Transducers	475,000	–	–	–	–	–
Subtotal	481,000	72,500	73,950	75,429	76,938	298,817
E1.9 Global Health - Admin. Support	–	73,200	74,664	76,157	77,680	301,702
Travel/CME/Other	200,000	–	–	–	–	–
Subtotal	200,000	73,200	74,664	76,157	77,680	301,702
E1.10 Academic Counseling	–	46,000	46,920	47,858	48,816	189,594
Subtotal		46,000	46,920	47,858	48,816	189,594
E2 Strengthen Health Professions Educational Programs						
E2.1 New Faculty - Biostatistics	–	138,000	140,760	143,575	146,447	568,782
E2.2 New Faculty - Health Management & Policy	–	138,000	140,760	143,575	146,447	568,782
E2.1/2.2 Professional Development	30,000	–	–	–	–	–
Operating Costs/Furnishings	57,000	–	–	–	–	–
E2.4 Marketing New Certificate Programs	120,000	–	–	–	–	–
E2.5 Renovations to Distance Education A/V	50,000	–	–	–	–	–
E2.6 Program Assessments - Non Accredited Programs	91,000	–	–	–	–	–
Subtotal	348,000	276,000	281,520	287,150	292,893	1,137,564
E3 Strategic Enrollment Plan	424,000					
E4 Clinical Education Sites	210,000					
Unallocated One Time Funds	65,154					
Total Strategic Plan Funding	2,740,154	1,381,300	1,408,626	1,436,499	1,464,928	5,691,353

FY22 Recurring Annual Funding 1,464,928



EVMS
Eastern Virginia Medical School

**Thriving in Our Missions:
Our Roadmap for the Future**

RESEARCH

Goal R1: Enhance multidisciplinary research that aligns with funding opportunities, institutional goals and community health needs.





Strategic Planning Theme: RESEARCH

The growing trend among national funding agencies such as the NIH is to require team-based, multidisciplinary approaches to biomedical research. The Research subcommittee has identified three objectives to enhance and expand multidisciplinary research at EVMS. Implementing these strategies will create a foundation to improve faculty competitiveness for grants, develop new opportunities for engaging learners in research, and elevate the reputation of EVMS to strengthen recruitment of faculty and learners. The objectives also contribute to regional economic development and research in community health needs.

Goal R1: Enhance multidisciplinary research that aligns with funding opportunities, institutional goals, and community health needs.

Objective R1.1: Augment resources to bolster multidisciplinary research.

- ❑ **Equipment/Maintenance:** Acquire new analytical tools and replace aging research equipment to facilitate competitive multidisciplinary research at EVMS. This will complement and expand existing core equipment capabilities for translational research in existing focal areas and provide upgrades to the student-training environment.
- ❑ **Seed funding:** Initiate five seed-grant programs to enhance the school's competitiveness for grants by enabling the generation of new data and methodologies. The various seed funds also will allow for collaboration with external entities and build capacity for research projects available to students.
- ❑ **Workshop funding:** Encourage conversations and interactions among researchers to facilitate discussions of multidisciplinary research and cultivate a culture conducive to cooperative research ventures.
- ❑ **Data enhancements:** Create a database of EVMS research expertise available to faculty and students.

Objective R1.2: Provide for the strategic recruitment of faculty to strengthen competitiveness in multidisciplinary research.

- ❑ **Start-up packages for faculty:** Recruit faculty with the goal of increasing the pool and diversity of funded, successful researchers at EVMS and strengthening institutional competitiveness for multidisciplinary research opportunities. EVMS currently lacks a critical mass of faculty actively engaged in biomedical research needed to successfully compete for some targeted research grants.

Objective R1.3: Develop research education infrastructure, resources, and mentored experiences for trainees to successfully engage in scholarly projects that meet the need for EVMS educational program completion, future residency or fellowship opportunities, and/or LCME/ACGME requirements.

- ❑ **Research Development Facilitator:** Recruit a research administrator for a new position to help coordinate research opportunities. This is part of an effort to create a mechanism of centralized support and coordination of interprofessional, team-based scholarly projects that incorporate multiple level of trainees (MD and health professions students and medical residents) and faculty as mentors or trainees. EVMS currently has an existing research support infrastructure, but it is fragmented and is not equally accessible to all trainees and faculty.
- ❑ **Student/mentor stipends:** Establish a stipend system to help cover the cost of research materials and encourage the recruitment of faculty willing to serve as project mentors to trainees for summer research and research opportunities throughout the year. Faculty often lack the protected time for mentoring experiences that count toward promotion.



EVMS STRATEGIC PLAN FY19-FY22 Financial Projections

MISSION AREA: RESEARCH

Goals/Objectives	One Time	Recurring				Recurring Total
		FY 2019 Year 1	FY 2020 Year 2	FY 2021 Year 3	FY 2022 Year 4	
R1 Enhance Multidisciplinary Research (MDR)						
R1.1 Equipment/Maintenance	1,831,743	127,968	152,968	152,968	152,968	586,872
Seed Funding	1,920,000	-	-	-	-	-
Workshop Funding	20,000	-	-	-	-	-
Equipment/Maintenance - 2nd Priority	193,344	-	-	8,223	8,223	16,446
Subtotal	3,965,087	127,968	152,968	161,191	161,191	603,318
R1.2 Faculty Recruitment	1,500,000	-	-	-	-	-
R1.3 Research Development Facilitator	-	87,840	89,597	91,389	93,217	362,043
Student/Mentor Stipends	268,000	-	-	-	-	-
Subtotal	268,000	87,840	89,597	91,389	93,217	362,043
Total Strategic Plan Funding	5,733,087	215,808	242,565	252,580	254,408	965,361

FY22 Recurring Annual Funding 254,408



EVMS
Eastern Virginia Medical School

**Thriving in Our Missions:
Our Roadmap for the Future**

CLINICAL CARE

- Goal C1:** Right-size the academic faculty in the five core clinical departments with EVMS Medical Group with respect to undergraduate medical education.
- Goal C2:** EVMS Medical Group will become “ACO ready” to participate in Advanced Payment Models, vital to our financial success as well as our responsibility as educators to provide model practices.





Strategic Planning Theme: CLINICAL CARE

The Clinical subcommittee identified two critical strategic areas of focus. The first is right-sizing the academic faculty in five core clinical departments with respect to undergraduate medical education. Over the last few years, the undergraduate medical-education program class-size has increased significantly without a corresponding increase in the full-time salaried faculty. This, along with financial pressures to generate more clinical revenue, has resulted in a high student-to-faculty ratio and increased student dissatisfaction.

The second area of focus is to ensure EVMS Medical Group becomes “Accountable Care Organization (ACO) ready” and continues planning and transforming its current quality initiatives to prepare for the payment changes outlined in the Medicare Quality Payment Program (QPP) and other value-based reimbursement models. Addressing this is vital to our financial success as well as our responsibility as educators to provide model practices.

Goal C1: Right-size the academic faculty in the five core clinical departments with EVMS Medical Group with respect to undergraduate medical education to lower student-to-faculty ratios in these clinical settings.

Add faculty to the following core clinical departments:

- Family and Community Medicine
- Internal Medicine
- Obstetrics and Gynecology
- Psychiatry and Behavioral Sciences
- Surgery

Goal C2: EVMS Medical Group will become “ACO ready” to participate in Advanced Payment Models and enhance Medicare reimbursement payments as well as provide model practices for learners.

Objective C2.1: Develop education and training for providers regarding Hierarchical Condition Category (HCC) coding for billing and Medicare reimbursement purposes. This would include education modules and chart review, as well as feedback from qualified reviewers.

Objective C2.2: Upgrade the telephone system to facilitate the patient appointment-scheduling process and referring physician communication.

Objective C2.3: Review, revise, and monitor electronic health record (EHR) workflows to ensure that they are as efficient and effective as possible. A consultant would be hired to evaluate the various department workflows and recommend best practices to be implemented.



EVMS STRATEGIC PLAN FY19-FY22 Financial Projections

MISSION AREA: CLINICAL CARE

Goals/Objectives	One Time	Recurring				Recurring Total
		FY 2019 Year 1	FY 2020 Year 2	FY 2021 Year 3	FY 2022 Year 4	
C1 Right Size Academic Faculty for UME						
MD - Family & Community Medicine	274,365	94,500	96,400	98,350	100,300	389,550
MD - Primary Care Internal Medicine	122,100	101,000	103,000	105,050	107,150	416,200
MD - Obstetrics & Gynecology	165,629	123,500	125,950	128,450	131,000	508,900
MD - Psychiatry & Behavioral Medicine	83,345	96,500	98,450	100,400	102,400	397,750
MD - Surgery	–	170,000	173,400	175,150	178,650	697,200
Subtotal	645,439	585,500	597,200	607,400	619,500	2,409,600
C2 Become ACO Ready/Advanced Payment Models						
C2.1 HCC Coding Education/Training	–	25,000	25,000	25,000	25,000	100,000
C2.2 Upgrade telephone system (half cost; see A2.5)	1,100,000	65,000	65,000	65,000	65,000	260,000
C2.3 EHR Workflows - Consultant	100,000	–	–	–	–	–
Subtotal	1,200,000	90,000	90,000	90,000	90,000	360,000
Total Strategic Plan Funding	1,845,439	675,500	687,200	697,400	709,500	2,769,600

FY22 Recurring Annual Funding 709,500



EVMS
Eastern Virginia Medical School

**Thriving in Our Missions:
Our Roadmap for the Future**

ADMINISTRATION

- Goal A1: Examine wellness across the EVMS community and develop an institution-wide, coordinated wellness initiative.**
- Goal A2: Develop a data collection, management, and reporting infrastructure to facilitate access to information internally and externally.**
- Goal A3: Enhance communication among EVMS leadership, faculty, staff, residents, fellows, and students; between EVMS departments and divisions; and with our community teaching partners and the communities of Hampton Roads.**





Strategic Planning Theme: ADMINISTRATION

Participant feedback from the Strategic Planning Survey and Strategic Planning Retreat showed that the most common “opportunities” and “road blocks” in the Administration section were related to three focus areas: Institutional Wellness; Data Collection, Management and Reporting; and Internal and External Communications. For example, feedback included frequent references to faculty burnout and low morale, out-of-date systems for data collection and management, and the need for improved two-way communication. The Administration subcommittee believes that addressing those three key areas will strengthen EVMS overall and make it a more effective institution.

Goal A1: Examine wellness across the EVMS community and develop an institution-wide, coordinated wellness initiative.

Objective A1.1: Identify a faculty member to champion the development and coordination of institution-wide activities focused on wellness, including burnout. Align a dedicated percentage of time and effort to perform this function, which would include working with Human Resources on maintaining a comprehensive wellness website.

Objective A1.2: Task the identified wellness champion with developing and implementing a mechanism for a targeted solution-based approach at the level of the departments and programs. This would include piloting a mechanism similar to the Professional Enrichment and Growth (PEG) grants (currently utilized by the Office of Faculty Affairs and Professional Development) to advance wellness.

Objective A1.3: Task EVMS Faculty Affairs and Professional Development and EVMS Human Resources with making workshops available to serve as an aid to improve professional well-being. *(No funding required.)*

Objective A1.4: Establish a Dean’s Standing Committee on Wellness, which would include the wellness champion, to serve as the reviewer of applications made to the funding mechanism noted in Objective A1.2. *(No funding required.)*

Goal A2: Develop a data collection, management, and reporting infrastructure to facilitate access to information internally and externally.

Objective A2.1: Develop centralized personnel and system infrastructure for institutional effectiveness — data collection, management, and reporting.

Objective A2.2: Develop a system for campus-wide standardization of data definitions and report production based on accreditation standards and grant requirements, and establish standards for ensuring data quality and integrity.

Objective A2.3: Implement a mission-driven community-engagement effort, supported by data.

Objective A2.4: Implement a succession plan for EVMS’ Chief Information Officer by adding one FTE at a level sufficient to be groomed as a replacement when the current CIO retires.

Objective A2.5: Enhance the institutional telephone-system platform, bringing it up to date with capacities to capture communications data for quality improvement and deliver expanded capabilities.



Goal A3: Enhance communication among EVMS leadership, faculty, staff, residents, fellows, and students; between EVMS departments and divisions; and with our community teaching partners and the communities of Hampton Roads.

Objective A3.1: Define, assess, and compare (against other organizations) existing communication processes and strategies to identify and fill communication gaps.

Objective A3.2: Engage faculty, staff, students, and leadership in two-way communication processes around challenges and opportunities for EVMS and related organizational actions.

Objective A3.3: Increase communication about organizational and strategic plan successes to recognize stakeholder contributions to those achievements and to enhance overall morale.

EVMS STRATEGIC PLAN FY19-FY22 Financial Projections

MISSION AREA: ADMINISTRATIVE

Goals/Objectives	One Time	Recurring				Recurring Total
		FY 2019 Year 1	FY 2020 Year 2	FY 2021 Year 3	FY 2022 Year 4	
A1 Institutional Wellness						
A1.1 Wellness Champion	1,000	58,700	59,804	60,930	62,079	241,513
A1.2 Wellness Activities	20,000	–	–	–	–	–
Subtotal	21,000	58,700	59,804	60,930	62,079	241,513
A2 Institutional Data Management						
A2.1 Office for Institutional Effectiveness	131,000	320,750	331,390	393,393	400,386	1,445,918
A2.2 Data Definitions and Reports (SWOT)	155,000	–	–	–	–	–
A2.3 Data Driven Community Engagement	83,120	–	–	–	–	–
A2.4 CIO Succession Plan	55,000	158,600	161,772	232,107	236,750	789,229
A2.5 Upgrade Telephone System (half cost; see C2.2)	1,100,000	65,000	65,775	66,566	67,372	264,713
Subtotal	1,524,120	544,350	558,937	692,066	704,507	2,499,861
A3 Institutional Communication						
A3.1 Effective Communications Baseline	110,000	–	–	–	–	–
A3.2 Engage 2 Way Communication	19,000	–	–	–	–	–
A3.3 Stakeholder Recognition	7,200	–	–	–	–	–
Subtotal	136,200	–	–	–	–	–
Total Strategic Plan Funding	1,681,320	603,050	618,741	752,996	766,586	2,741,374

FY22 Recurring Annual Funding 766,586



Committee Members

(In alphabetical order. Credentials not included.)

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Elza Mylona

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