

UMC Utrecht 3.0

Strategy 2010-2015

Prof. dr. Frank Miedema
Dean and Vice Chairman of the Board



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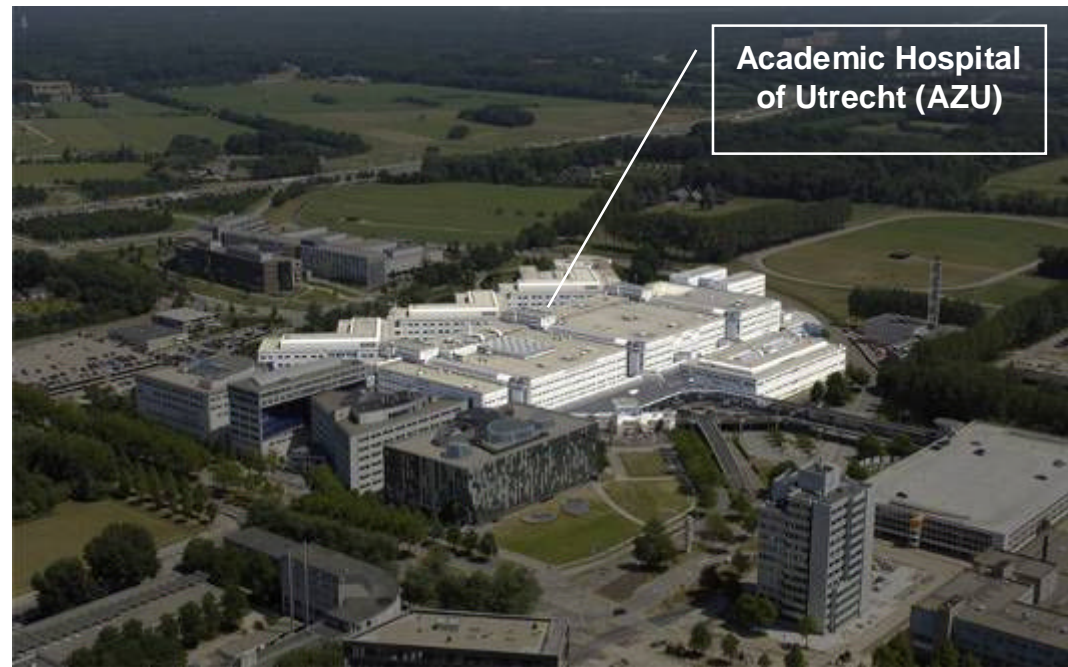
Research, education and care



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- The UMC Utrecht was founded in 2000 through the merger of the Academic Hospital, Wilhelmina Children's Hospital (WKZ) and the Medical Faculty of Utrecht University

- *11.000 employees,*
- *1000 beds,*
- *3500 students,*
- *2200 scientific papers*
- *200 PhD thesis defenses*
- *2,340 births*
- *634 deceased*
- *41,400 hours of surgery*
- *1,620,928 website visitors*
- *820,000 meals*
- *2,210 tons of waste*



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Drive and goals



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- The University Medical Center is a leading international academic medical center where knowledge of health, illness and care is generated, evaluated, shared and applied for the benefit of patients and society
- Core values:
 - Passionate and committed
 - Innovative and eager to learn
 - Take responsibility, work together

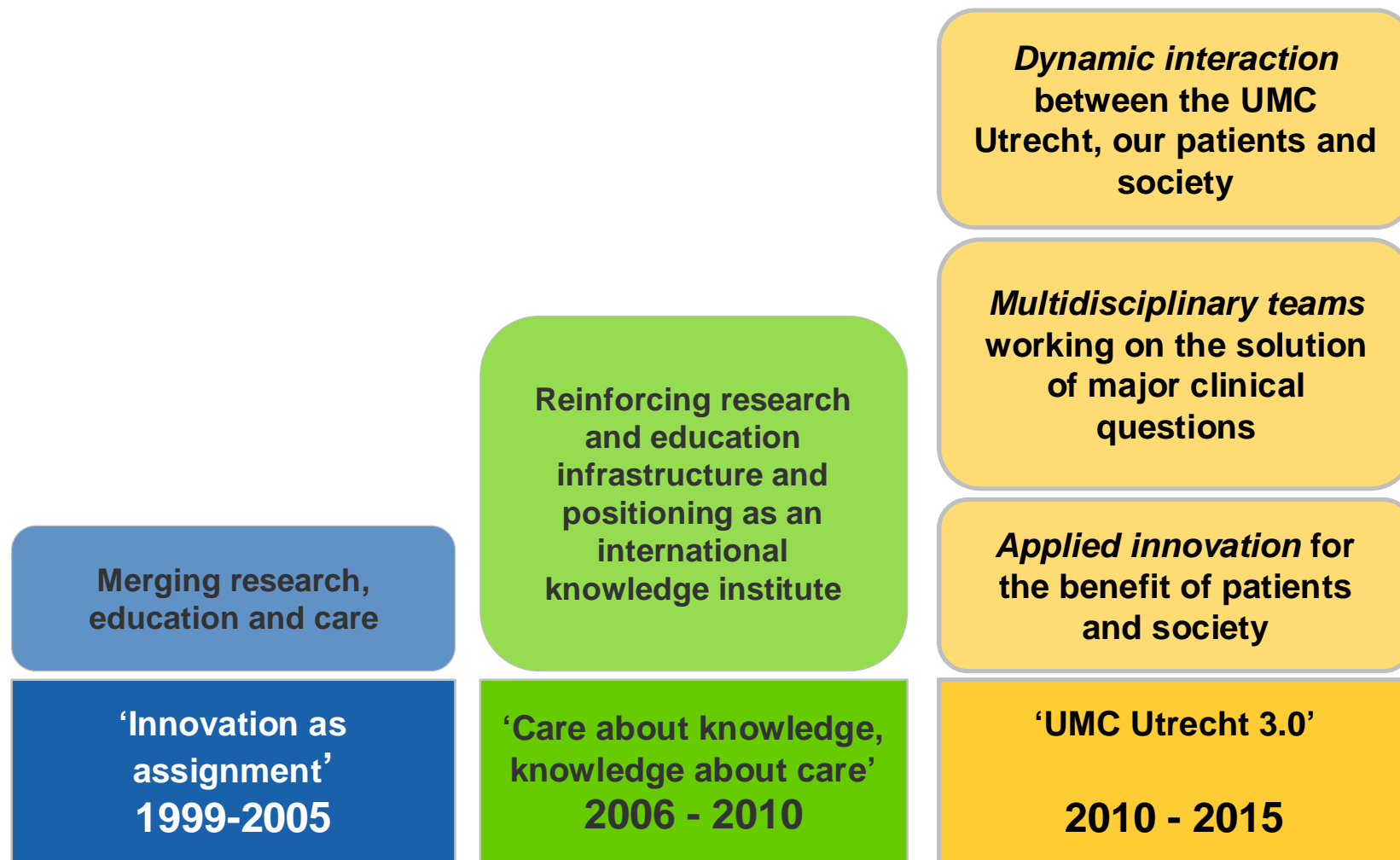


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Three distinct strategic periods



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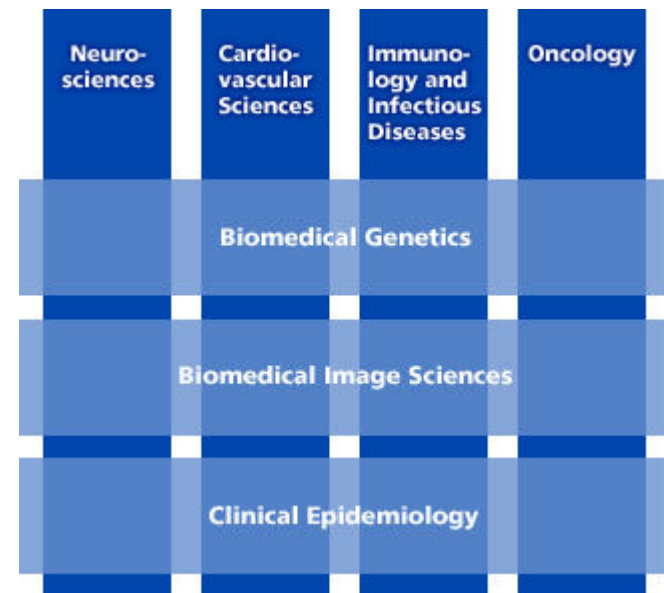
Historic context

Divisionalized structure and research programs



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- 2000-2009: very successful in our divisionalized organizational structure
- Built around disciplines and decentralized control mechanisms
- Research programs designed as a matrix, but developed into departments



Historic context

Care about knowledge, knowledge about care



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- Top-down formulated strategy
- Virtually no interaction or iteration in the process
- Limited sense of urgency and impulse for action on the shopfloor

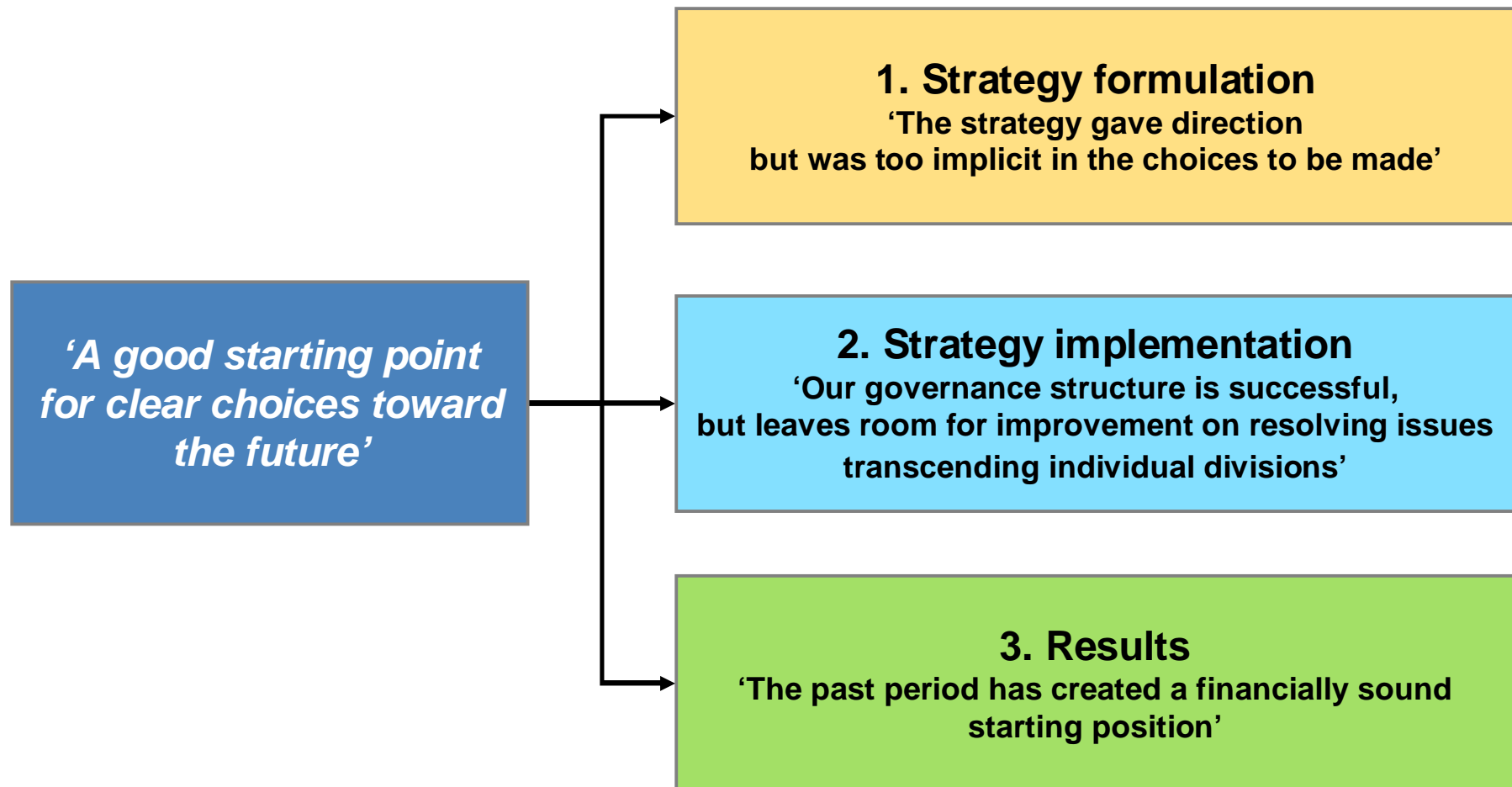


Background 2009

Evaluation of 'care about knowledge, knowledge about care'



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Our challenge

Making choices



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- The pace of innovation and the scarcity of top talent and resources drives us to focus on those area's where we can excel in innovating healthcare through research and education
- We maximize deployment of top talent and strategic resources strategic research programs of choice
- We need to reinforce our organization on strategic themes, such as:
 - Patient Safety & Quality
 - Innovation & Valorization
 - Branding & Relations
 - Talent, Leadership & Values
 - Operational Effectiveness



Making choices

A bottom-up, interactive approach for making tough decisions



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- All researchers invited to formally profile their research ('Call')
- Evaluation criteria:
 - Potential to be internationally prominent
 - Number of Primary Investigators
 - Combination of research, education and healthcare delivery
 - Concrete health(care) benefits and innovation in the foreseeable future
 - Multidisciplinary cooperation

- Scored by top 20 PI's

- Proposals: 61
- Selected: 21
- Grouped into: 6 (programs)



Making things happen

The organization of top talent in truly multidisciplinary teams



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1. Brain
2. Infection & Immunity
3. Circulatory Health
 - Prof. dr. Grobbee (**Epidemiology**)
 - Prof. dr. Pasterkamp (**Exp. Cardiology**)
 - Prof. dr. Mali (**Radiology**)
 - Prof. dr. Rinkel (**Neurology**)
4. Personalized Cancer Care
 - Prof. dr. Van der Wall (**Medical Oncology**)
 - Prof. dr. Bos (**Molecular Oncology**)
 - Prof. dr. Borel Rinkes (**Surgery**)
 - Prof. dr. Peeters (**Epidemiology**)
 - Prof. dr. Mali (**Radiology**)
5. Regenerative Medicine and Stem Cells
6. Child Health



Making things happen

The organization of focus and shared responsibility



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- Research and development aimed at the **application** of innovative methods and treatments
- Each program **focuses** on three to four diseases
- The policies and efforts of researchers, educators and clinicians are pooled in cross-departmental and truly **multidisciplinary** teams
- These program teams have to **negotiate** with divisions regarding funds, people, apparatus and infrastructure

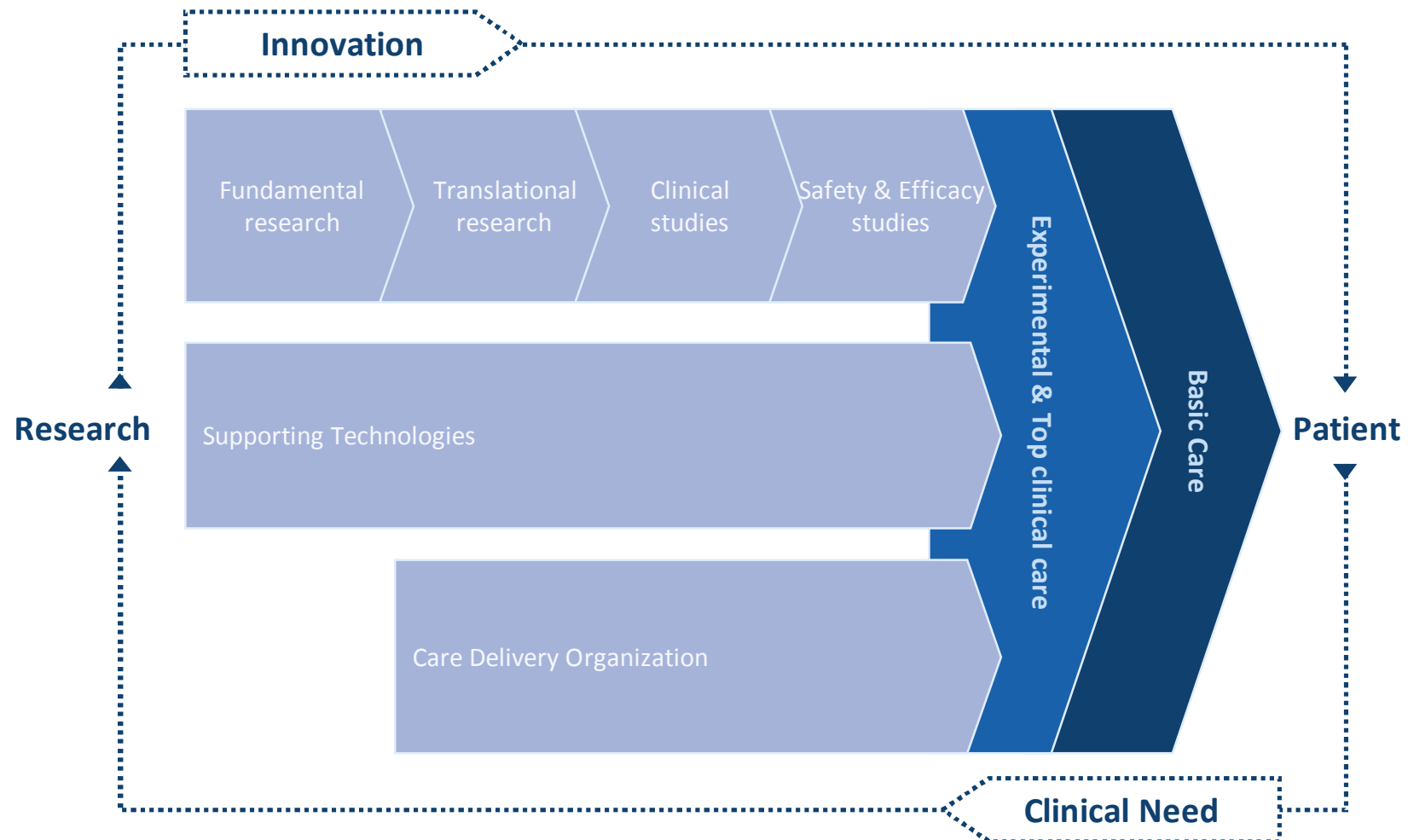


The assignment

Innovation driven by clinical needs of patients and society



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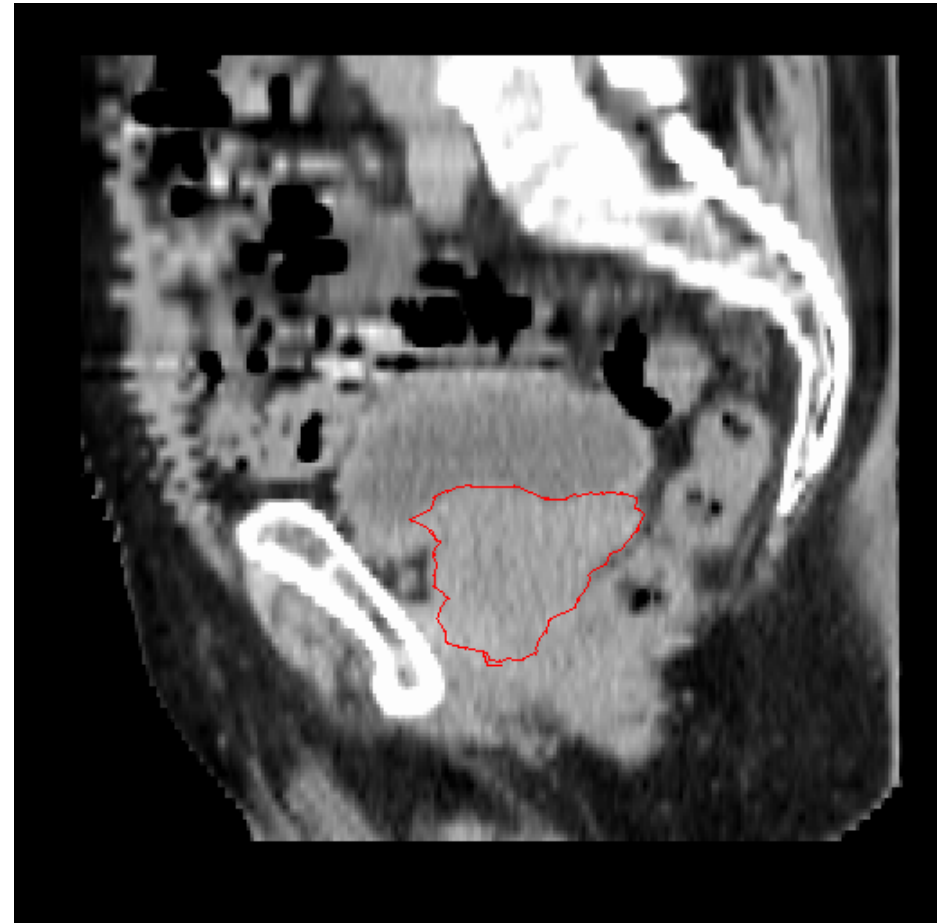
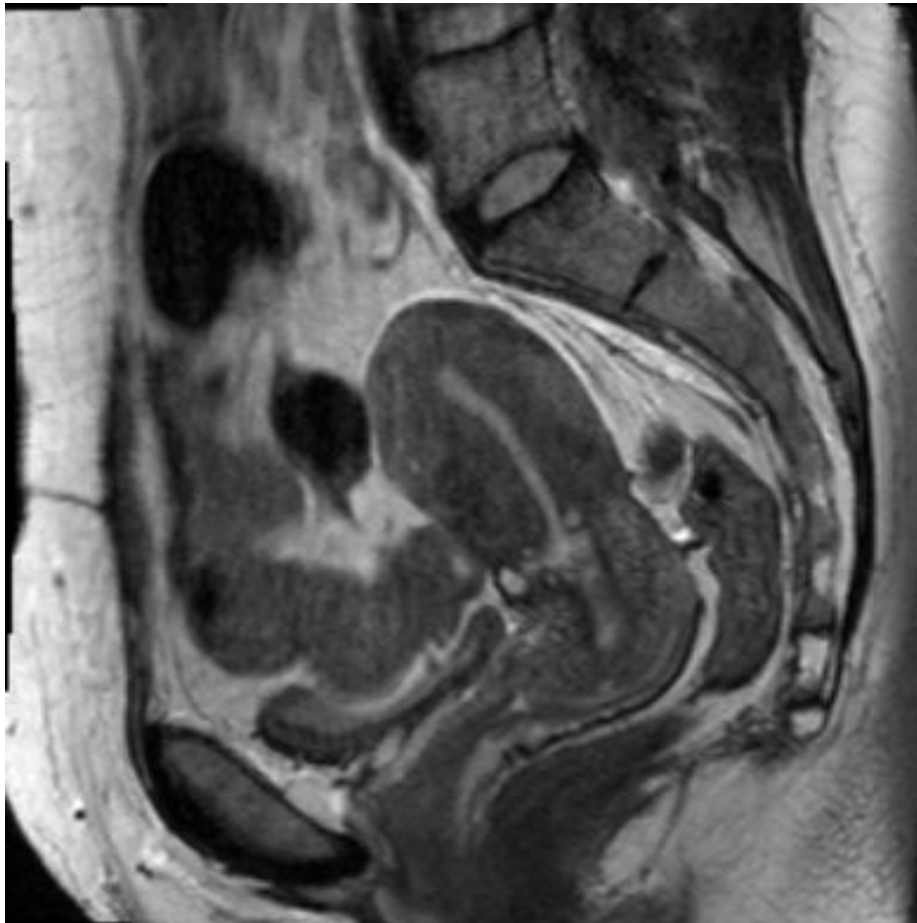
Example of the innovation loop

Center for Image-guided Oncological Intervention (CIOI)



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Radiotherapy....



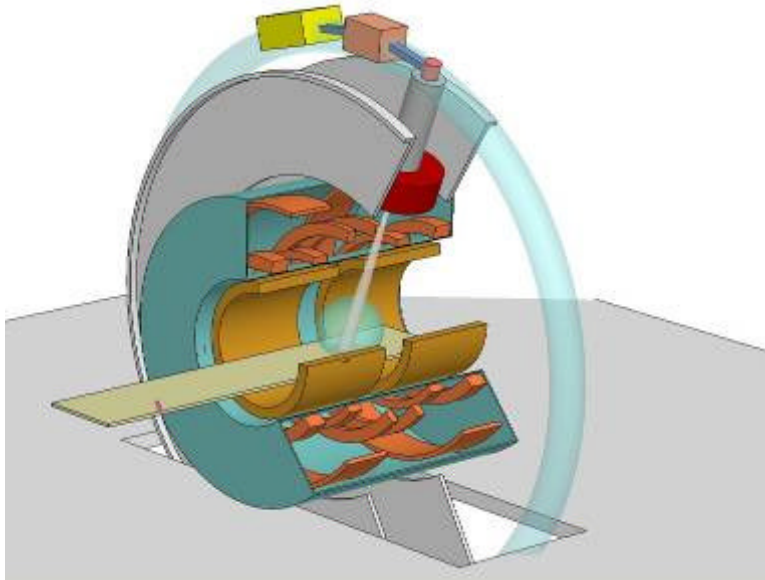
...shooting at moving targets

Example of the innovation loop

MRI-guided radiotherapy



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Impression



Prototype



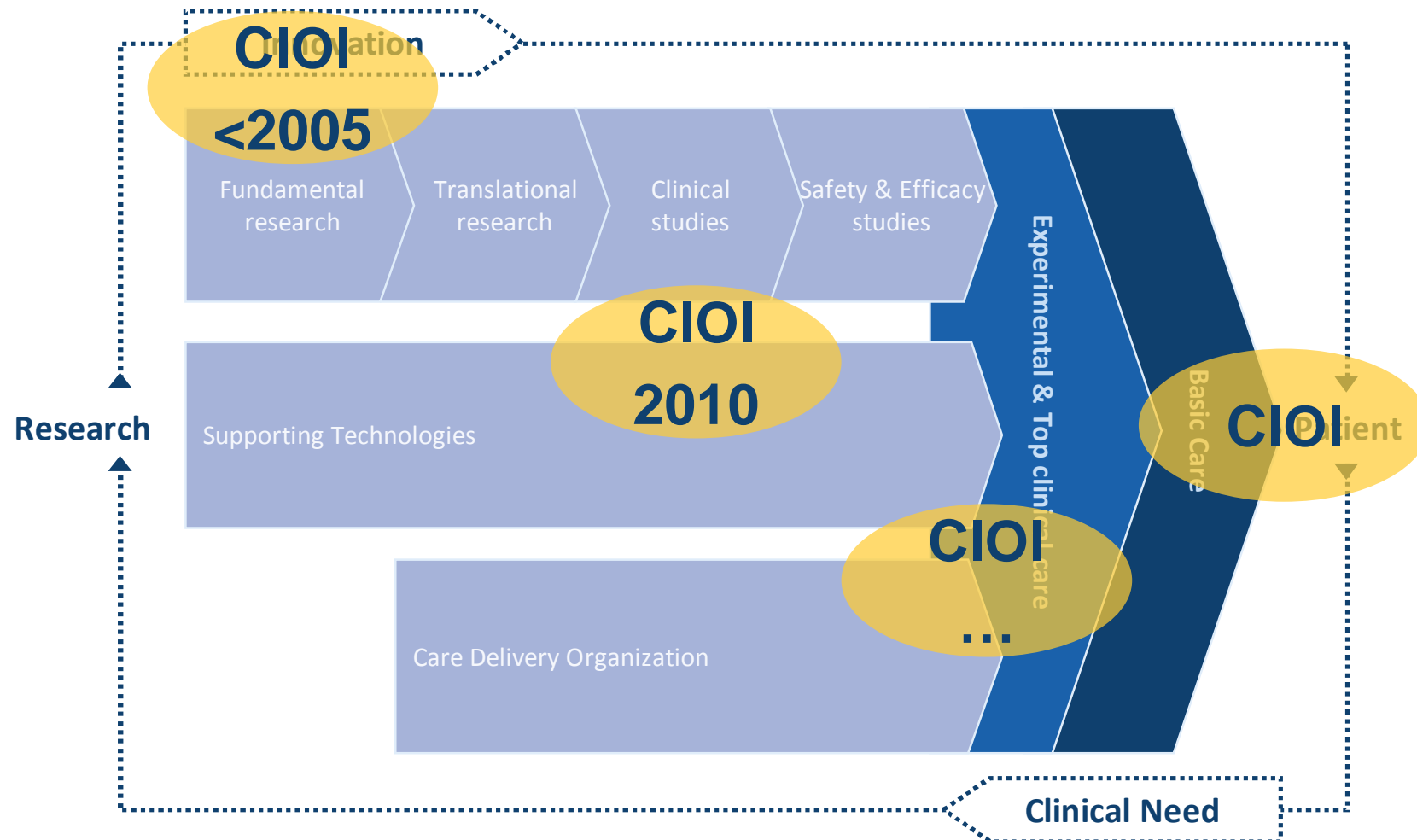
1.5 T diagnostic MRI image quality

Example CIOI

Linking top research to healthcare delivery



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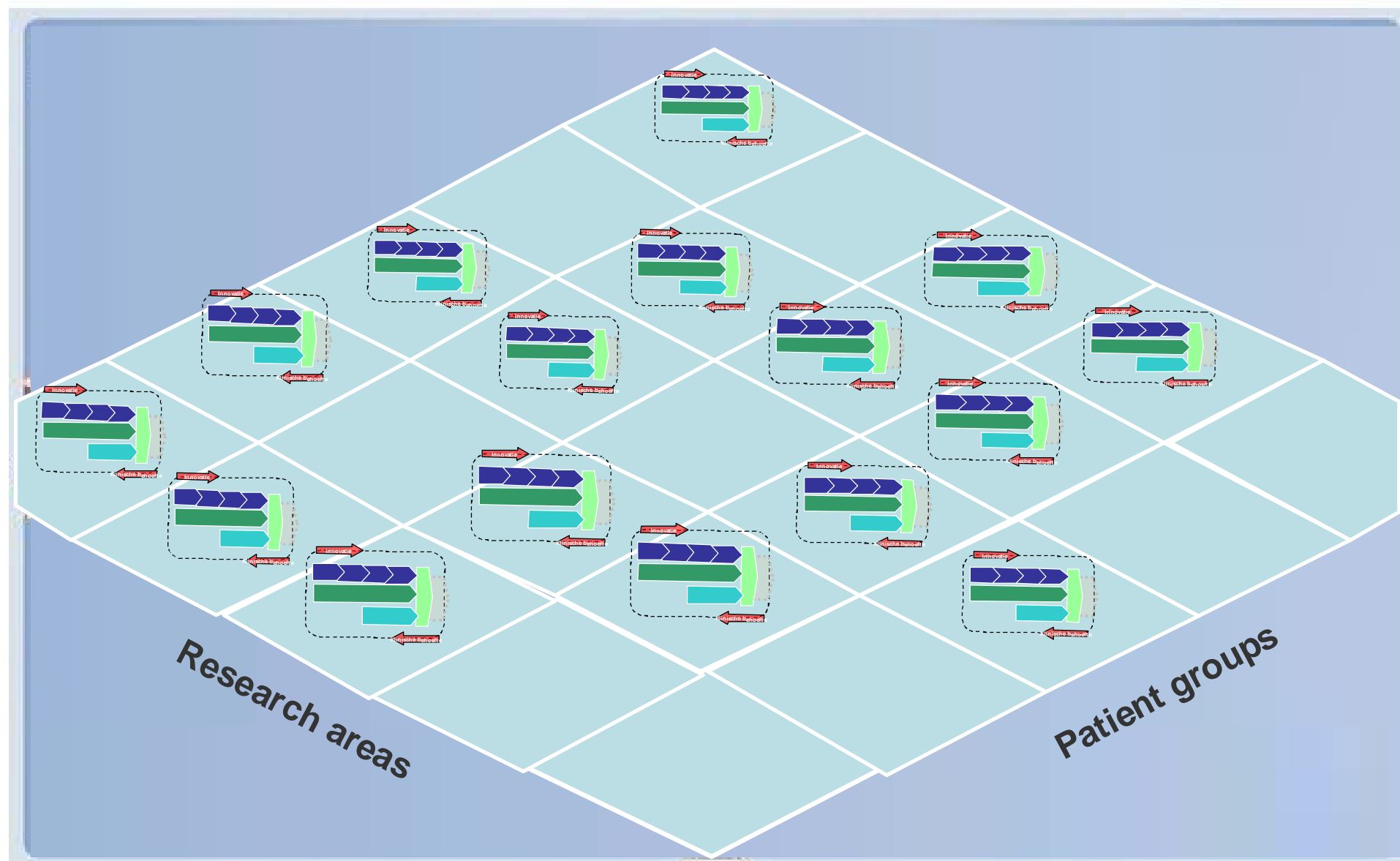


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Innovation dynamics in research and healthcare



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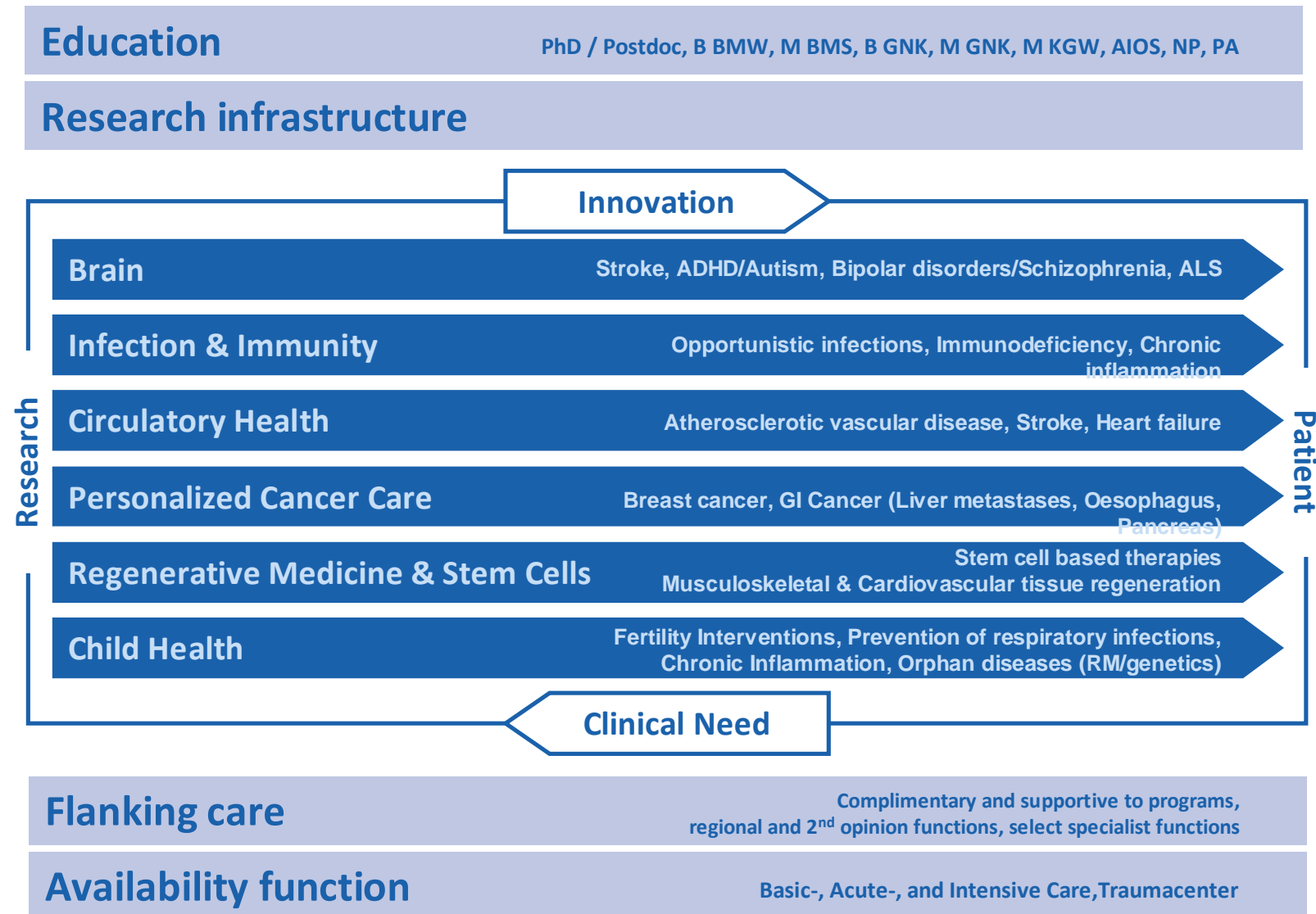


The total picture:

Availability as a basis, programs at the core, innovation as assignment



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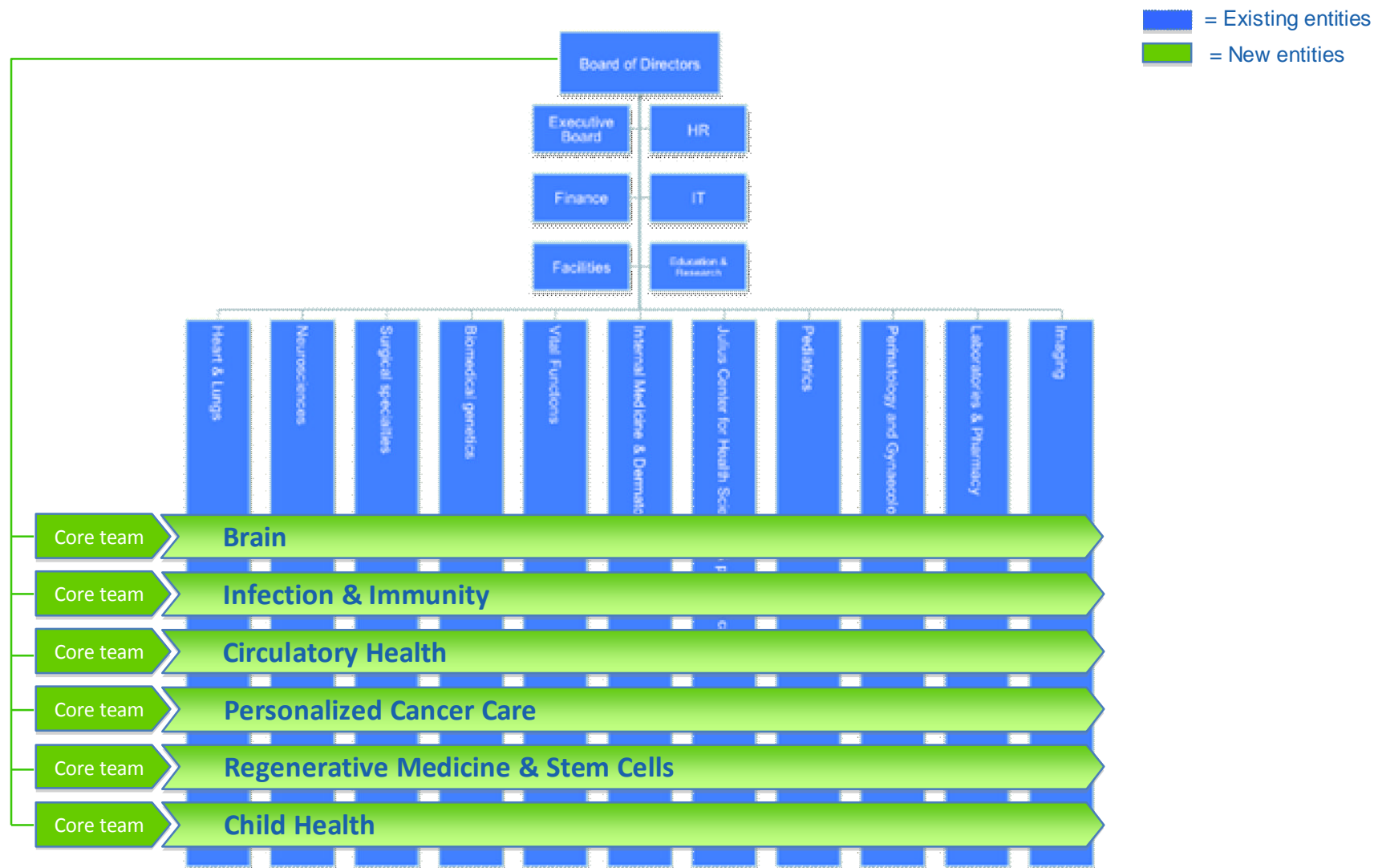


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Organizing cross-divisional cooperation and shared responsibility



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The consequences

Strategic development = organisation development



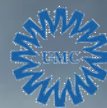
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- **Cross-divisional clinical pathways**
- **Establishment of centers & clinics**
(Oncology Center, Vascular Center, Youth Clinic, Stroke Center,...)
- **Reconstructing facilities**
(Outpatient clinics, OR's, one-stop-shop diagnostic facilities,)
- **Re-aligning research facilities**
(Biobanking, cohort research facilities, Gen-Cell Therapy facility)
- **Forging Strategic Alliances**
(International, regional, and national with specialized hospitals)



Current developments

What keeps us up at night?



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Current developments

What raises our expectations above surface level?



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