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AACI

Commentary

How a Robust Strategic Planning Process Can Advance the Mission of Your Cancer Center

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The UCSF Helen Diller Family Comprehensive Cancer Center team, pictured clockwise, from upper left: **Erin Bank, PhD**, director of research strategy; **Kate Shumate, MPA, CCRP**, associate director of administration and chief of staff; **Eric Small, MD**, chief scientific officer and deputy director; and **Alan Ashworth, PhD, FRS**, president, and senior vice president for cancer services with UCSF Health

Commentary Overview

- In 2018, the UCSF Helen Diller Family Comprehensive Cancer Center undertook a multi-year strategic planning process centered on what cancer research might look like in the year 2030.
- UCSF's forward-looking focus aimed to encourage creativity unconfined by a particular institutional structure or grant mechanism, and to pave the way for an innovative, actionable, and motivating strategic planning process.
- A strategic plan is a key element of the National Cancer Institute (NCI) Cancer Center Support Grant (CCSG) application. Highly ranked centers show specific examples of how the strategic plan guides decision-making across the entire center.
- A broad strategic plan allows input from a variety of sources: CCSG reviewers; external and internal advisory boards; community advisory boards; institutional leaders such as deans and department chairs; and center leadership, members, trainees, and staff.

The prospect of undertaking an extensive center-wide strategic planning process can be daunting. Indeed, why would you spend the time, money, and energy to undertake a prolonged review only to arrive at the same priorities and decision-making structures

already in place?

We offer our perspective on the value of a carefully designed, research-focused, strategic planning exercise. The process can be a truly galvanizing experience, with broad engagement, that achieves a unity of purpose and vision. A process with tangible outputs that can be monitored, tracked, and iterated upon, is an important tool that places centers at the cutting-edge of future research.

Our Process

The University of California, San Francisco (UCSF) Helen Diller Family Comprehensive Cancer Center (HDFCCC) undertook a multi-year strategic planning process beginning in 2018, following a National Cancer Institute (NCI) Cancer Center Support Grant (CCSG) competitive renewal, the details of which were recently published in *Preventative Oncology and Epidemiology*. Our process centered on what cancer research might look like in the year 2030. This forward-looking focus was intended to encourage creativity unconfined by a particular institutional structure or grant mechanism.

Focusing on our center's science paved the way for an innovative, actionable, and motivating strategic planning process for all involved. Importantly, from the outset we wanted to ensure our process did not result in a document that gets circulated once and then is filed and never used again. The resulting logic model and tracking document ensure our plan continues to help shape HDFCCC priorities and support member research.

Traditional Benefits

Strategic planning identifies center-wide priorities so that limited resources can be directed in the most impactful way. Importantly, the process can also reveal weaker areas that would benefit from dedicated collaborations.

A refreshed strategic plan also allows a center to revisit its mission statement. Although every center might say its goal is to prevent and cure cancer, the unique strengths and weaknesses of each center should be reflected in its specific vision.

A strategic plan is a key element required to obtain funding through the NCI CCSG mechanism. Highly ranked centers show specific examples of how the strategic plan guided decision-making across the entire center in the grant cycle. Having a plan with clearly defined research priorities makes it relevant to all CCSG components and can set the tone for the entire grant and site visit.

Transdisciplinary Collaboration

Our planning process was highly interactive. In addition to engaging extant groups, such as CCSG research programs, shared resources, and clinical research leadership teams, we developed six task forces representing each stage of the cancer continuum. These task forces combined members, trainees, and staff to allow for transdisciplinary, collaborative discussions. Connections forged in these groups continue: for example, a cadre of members focused on symptom management and survivorship from one task force kept meeting after the review process concluded; this evolved into a formal research interest that continues to develop research in this area.

Stakeholder Engagement

A broad strategic plan allows input and engagement from a variety of sources: CCSG reviewers; external and internal advisory boards; community advisory boards; institutional leaders, such as deans and department chairs; and center leadership, members, trainees, and staff. Action items can incorporate the perspectives of all these groups in a unified way.

It is critical to design a planning process that all these stakeholders look forward to participating in. For us, it was important to have the process run by internal facilitators who were familiar with the institutional landscape and dynamics of the center. Facilitators engaged stakeholders regardless of actual or perceived academic hierarchy. Thus, members, trainees, and staff who wouldn't be directly involved in decision-making were engaged in defining areas of center priority.

Our plan was reviewed at multiple levels to ensure transparency and continued engagement. Progress updates were given to leadership at quarterly retreats, and an HDFCCC-wide virtual town hall provided a forum for discussion of the near-final plan. The plan was reviewed with

internal and external advisory boards. A working session with our community advisory board ensured the perspective of our community and patient population could be incorporated into our mission statement and logic model, and that our respective priorities are aligned. The [final plan and executive summary](#) are available to all members on the HDFCCC website.

Every new member application and request for proposals for internal funding now points to the strategic plan and asks applicants how their work or proposal aligns with one of the priority areas. These consistent criteria for decisions help members feel part of a broader purpose.

Measuring Success

Our logic model ensures that we can both define and measure tangible metrics of success. By discussing what, exactly, needs to happen to meet each goal, we can break the effort down into measurable activities that can be tracked over time.

The logic model also helps us to identify areas that may be more aspirational than the currently available center expertise allows. When these activities are identified, we can bring in subject matter experts to help us understand what would be needed to build out an area so we can decide whether we want to commit resources of our own or partner with existing initiatives. We are also able to iterate the plan based on new discoveries. For example, technologies related to machine learning and artificial intelligence have rapidly developed beyond what we specified in our logic model. However, we can incorporate this growing field into our research priorities related to data science and new tools for diagnosis.

We believe a strategic planning process that focuses on research can be customized for any center. Engaging the unique stakeholders at your center at all career levels will not only ensure their buy-in, but it will also make the strategic plan more robust and relevant to your center. Owning and fully embracing the process will reward your center for years to come.

Our Mission

The Association of American Cancer Institutes (AACI) represents over 100 premier academic and freestanding cancer centers in the United States and Canada. AACI is accelerating progress against cancer by enhancing the impact of academic cancer centers and promoting cancer health equity.

About AACI Commentary

To promote the work of its members, AACI publishes *Commentary*, a monthly editorial series focusing on major issues of common interest to North American cancer centers, authored by cancer center leaders and subject matter experts.

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