Facilities Planning and Management
VCFA Annual Plan – 2014

Section 1: FP&M Summary Statement

Facilities Planning and Management is a service organization, reporting to the Associate Vice Chancellor, Bill Elvey. The organization consists of seven core departments:
- Business and Staff Services
- Campus Planning and Landscape Architecture
- Capital Planning and Development
- Environment, Health and Safety
- Physical Plant
- Space Management Office
- Transportation Services

The goals and objectives listed in this report were identified by Facilities Planning and Management to support, and align with, the strategic priorities established by the Vice Chancellor for Finance and Administration. They reflect critical success factors for FP&M, or are associated with specific initiatives designed to improve the effectiveness and efficiency of FP&M services. These goals were identified and advanced by staff working within their departments or representing their departments on cross-organizational teams. The Leadership Team's commitment to these goals validates the work of these employees, and will hopefully, encourage others to engage in improving our services and our organization. The common thread throughout these goals is the desire to achieve our mission; begin to realize our vision of 'an inclusive and diverse team, working together to provide exceptional service for our university community'; and, engage staff in creating a work environment that truly reflects our core values.

FP&M Mission: *Providing excellence in facilities and services for our university community.*

FP&M Vision: *An inclusive and diverse team, working together to provide exceptional service for our university community.*

FP&M Shared Values: *Shared values guide how we behave toward our customers, coworkers and stakeholders.*
- We are <u>People Centered</u> by being inclusive, engaged, diverse and customer-focused.
- We promote <u>Stewardship</u> through sustainable, effective and efficient use of resources.
- We promote <u>Integrity</u> by building trust, respect and accountability.
- We support <u>Innovation and Discovery</u> through continuous learning and improvement.
- We promote <u>Safety</u>, ensuring a safe and healthy campus environment.

Departments:

Business and Staff Services (BASS)
BASS provides support services to all units of FP&M in the areas of budget and financial reporting, business operations and purchasing, human resources, and training and organizational development.

Campus Planning and Landscape Architecture (CPLA)
CPLA works with faculty, staff, students and the surrounding urban community on physical planning issues, including implementation of the Campus Master Plan. Staff assist with the capital budgeting and infrastructure planning processes, assist with facility related ADA issues, design and manage landscape architecture projects, and serve as a liaison with municipal governments and adjacent neighborhoods.

Capital Planning and Development (CP&D)
CP&D is responsible for identifying and developing capital programs and related policies and procedures to address the University's strategic, long-range physical planning needs. Staffs oversees development of the biennial capital budget and serve as university representatives and project managers for the design of new facilities, additions, utility improvements and large scale remodeling projects.

Environment, Health and Safety (EH&S)
EH&S provides guidance, technical consultation and expertise to the campus community in the areas of biological, chemical, environmental, radiation, lake, fire and life safety, and occupational health.

Physical Plant (PP)
PP is responsible for the maintenance of campus buildings, grounds, utilities and vehicles. Design resources, construction trades and specialized facilities services are available for departmental requests and remodeling projects on a fee-for-service basis.

Space Management Office (SMO)
SMO collects, maintains and analyzes information about University space use. The office coordinates the allocation and reassignment of existing space and participates in the planning for modified or new space. This includes providing appropriate office, laboratory or support space for research and instruction, as well as classroom environments for effective teaching and learning, and support services for use of multimedia classrooms. The office also provides support for leasing space, manages campus real estate transactions, and assists with space relocation for major remodeling projects.

Transportation Services (TS)
TS is responsible for the coordination and administration of all transportation-related services for the University of Wisconsin-Madison campus community. Primary functions include the sale/management of parking permits, special event coordination, maintenance and enforcement, construction coordination, lot and booth operations, citation payments and appeals, information technology, financial, transportation planning and development of multi-modal options.

This annual plan is organized into four sections:

Section 1: Division Priorities - Summary
Section 2: VCFA Strategic Priorities
- Engagement, Inclusion and Diversity (EID)
- Student Leadership Development
- Resource Stewardship Through Process Improvement
Section 3: FP&M Strategic and Operational Priorities
Section 4: FP&M Strategic and Operational Priorities – Summary Chart

Section 2: VCFA Strategic Priorities – Summary

VCFA Strategic Priority 1: **Engagement, Inclusion and Diversity (EID)**

Goal/Objective 1a: Implement the FP&M and departmental EID Plans.

Description
FP&M developed an EID Plan in response to the EID survey completed in FY12. This plan includes many of the goals/objectives that are represented in this Annual Plan. The team identified the following three goals as their priorities for FY14:
- o Build a common understanding and commitment to the FP&M mission, vision and core values.
- o Build a common understanding across FP&M of Engagement, Inclusion and Diversity.
- o Increase response to the EID survey.

In addition, each department developed an EID Plan to respond to the survey data specific to their units. Directors and their staff will be working to accomplish goals identified in those plans.   Progress on these goals will affirm the work of each of the teams and will be a sign that the FP&M Leadership Team is committed to increasing engagement, inclusion and diversity throughout the organization.

Baseline Measure
- FP&M as a Division and each of its Departments has baseline data from the FY12 survey that served as the basis for development of the EID Plans.
- Gender and heritage data for FP&M and the demographic breakdown of the EID Survey data provides baseline demographic data.

Targets
- In general, targets are to increase favorable responses in the FY14 EID survey.

Performance Indicator
- Comparison of survey data from FY12 and FY14.

Risks and Challenges
- Risk/challenge – To coordinate and align goals/initiatives/plans/actions across the organization.
- Challenge – Communication across a large, complex, distributed, diverse organization.

Milestones to be accomplished and schedule
- Established in the FP&M and Departmental EID Plans.

Goal/Objective 1b: Increase response rate to the EID survey.

Description
This goal/objective was identified as a priority by the FP&M EID Team after careful analysis of the FP&M data from the 2012 EID survey. This connects to, and depends on, the goal/objective identified by the VCFA EID Planning team as 'Continue to administer the EID Survey'. While the response rate for FP&M was 40%, there was significant variability in participation across the organization. For example, the 29% response rate in Custodial Services, and the 8% response rate for employees identifying as Hispanic, highlight the need to make the survey more accessible to our most diverse population who work primarily during second and third shifts. The FP&M EID Team recognizes that increasing the response rate across all dimensions of the organization is required if EID action plans are to represent all staff in FP&M.

Baseline Measure
- The response rate for FP&M was 40% overall; however, response rates varied from a low of 3% to a high of 93%, by department.
- Response rate by demographics ranged from a low of 8% (Hispanic) to a high of 49% (White).
- Response rate by employee category: 30% LTE; 39% classified permanent; 68% project; 75% limited; 86% academic staff.
- Survey data display was inadequate for some sections of FP&M (e.g. no roll-up to Department level for large units).
- Demographic detail was available only at the division, not the departmental level.

Target
- Administer the EID survey to the employee categories directed by the VCFA/OHR. (Divisions should have the ability to manipulate data to better analyze survey results by employment categories).
- Show an increased response rate over time, with a goal of reaching 80% response rate for all employment categories, demographic and gender groups.
- Create data displays that are user friendly and easily understood throughout the organization. (Data provided by the FY14 survey firm must be flexible and easy to display; this was a problem/concern with the original FY12 survey)

Performance Indicators
- Percent of employees who complete the EID survey – goal of 80%.
- Demographics of respondents – goal is 80% for each gender and heritage group.
- Data is used as basis for advancing EID plans in all FP&M departments.
- Data is displayed in a useful manner that can be understood by all staff.

Risks and challenges
- Challenge – Employees do not trust that the survey is truly confidential.
- Challenge – Concepts may be unfamiliar to those from other cultures.

- Challenge – Identifying methods to ensure respondents remain anonymous, and yet the survey is administered in ways that meet the needs of employees without computer access or English language literacy (i.e. paper/computer survey may not meet needs for those with limited literacy and/or no computer access).
- Challenge – Multiple languages, lack of computer access, dispersed work locations, multiple shifts.
- Challenge – Inability to access gender/heritage data for all levels of FP&M on demand.
- Risk – Administration of survey managed outside of FP&M.
- Risk – Unable to manipulate data to create a variety of reports (e.g. FP&M would benefit from the ability to isolate certain employee categories for further analysis).

Milestones to be accomplished and schedule
- Increasing response rate identified as an objective of the FP&M EID Team – July 1, 2013.
- FP&M EID Team – Identifies EID talking points, communication strategies/methodologies – February 1, 2014.
- FP&M Leadership Team – Develops desired groupings for roll-up of data to ensure meaningful interpretation and confidentiality (e.g. sub-departments, departments, etc.) – February 1, 2014.
- Implementation of communication plan launched once EID survey schedule announced by VCFA (target for survey is April 2014).

Action Plan to overcome barriers and take advantage of opportunities
- Detailed action plan to be developed by FP&M EID Team and approved by FP&M Leadership Team.

Goal/Objective 1c: Increase representation of under-represented groups at all levels.

Description
The FP&M Gender and Heritage data and the demographic detail attached to the EID survey were analyzed and used as the basis for the FP&M EID Plan. FP&M believes achieving this goal requires improvement in the frequency, content and distribution of demographic reports; strengthened policies and procedures for recruitments; increased diversity, development of competencies, and training in management/supervisory positions; and, improvements to ensure under-represented groups experience the workplace as welcoming and inclusive. All of the goals in this section are inextricably linked, as will be the action plans developed to advance all the goals of EID.

Baseline Measure
- Gender and heritage data provided by OHR for FP&M on an annual basis.
- Support provided to under-represented groups in Custodial Services (e.g. English Language Learners, translated training, Cultural Linguistic Services, etc.).

Target
Reporting:

- FP&M gender and heritage data is available from OHR a minimum of twice a year. Preferred target is for FP&M to have the ability to access data and create reports on demand.
- FP&M gender and heritage data available at a departmental and sub-departmental level.
- FP&M makes division-level gender and heritage data available on website.
- FP&M gender and heritage data will help guide the development of recruitment plans.

Programs:
- Development of pilot programs in Physical Plant and Environment, Health and Safety, in partnership with the Urban League and OHR, to increase representation in skilled trades and in safety related positions.

Performance Indicators
- Data updated twice a year.
- Recruitment plans reference gender and heritage data.
- Trends in gender and heritage data tracked over time.
- Plan (including scope, schedule, budget and resource identification) developed for pilot programs.

Risks and challenges
- Risk – Focusing on increasing diversity without an equal emphasis on increasing engagement and inclusion (e.g. new employees may be excluded and therefore choose to leave the organization).
- Challenge – Gender and heritage data is not routinely updated.
- Challenge – Gaining support for pilot programs.
- Challenge – Resource/expertise needed to develop plan and curricula for pilot programs.
- Challenge - Changing organizational culture.
- Challenge – Trade positions are currently filled at the Journey level only.

Milestones to be accomplished and schedule
- Gender and heritage data provided by OHR – TBD.
- Gender and heritage data reviewed by Leadership Team annually, at minimum.
- Gender and heritage data posted to FP&M intranet – TBD.
- Preliminary discussions regarding pilot program completed with OHR – Adin Palau.
- Development of an implementation plan for a pilot apprenticeship/internship program in Physical Plant – July 1, 2014.
- Development of an implementation plan for a pilot internship program in Environment, Health and Safety – July 1, 2014.

Action Plan to overcome barriers and take advantage of opportunities
- Gender and heritage data – action plan by OHR.
- Once FP&M data is available it will be posted to the re-designed FP&M website.
- Pilot apprenticeship/internship program
  - Review of AIMS pilot project/curriculum developed in partnership with the Urban League.
  - Enlist potential partners (e.g. OHR, Urban League, Madison College, and Trades Unions).

o   Establish scope, schedule, resources and develop project charter for pilot.
o   Identify resources to assist with development of program.

Goal/Objective 1d: Improve the recruitment and selection process to increase employee diversity – create a more diverse pool of applicants, first interviewees and finalists.

Description
This goal will build on work from previous years including focusing advertisement to create an inclusive candidate pool, identifying diverse search and screen committees, providing information on biases to search and screen committees, and review and approval of interview questions by FP&M HR. The efforts from previous years will form the foundation for a more concerted, focused effort to improve recruitment and selection processes. Guidance from OHR will be an important addition to FP&M's efforts.

Baseline Measure
- Gender and heritage data is not available for applicant pools.
- Search and screen committees for unclassified positions are composed to ensure gender and heritage diversity. Interview panels for classified positions include gender and heritage diversity when possible.
- Search and screen committees for director-level positions receive bias literacy information.
- Behavioral based interview questions and benchmarks are established for recruitments and reviewed by FP&M HR for many recruitments.
- Employees are invited to participate in question/answer sessions with finalists for director-level positions.

Target
- Gender and heritage data on applicant pools provided by OHR.
- Search and screen committees and interview panels for all manager/supervisor positions are composed to ensure gender and heritage diversity.
- Managers, supervisors and search and screen/interview panels receive training on bias literacy.
- Behavioral based interview questions and benchmarks established and used for recruitments for all manager/supervisor level positions and for all staff positions.

Performance Indicators
- Percent of applicants, interviewees and finalists categorized by gender and heritage (data provided by OHR).
- Demographic data for management/supervisor/professional positions trends upward from 2012 data.
- Recruitment plans developed and approved for manager/supervisor level positions. Plans include diverse search and screen committees and interview panels, advertisement to reach a diverse population, behavioral based questions, scenarios and benchmarks – goal of 100%.
- Recruitment plans for manager/supervisor level positions discussed at Leadership Team, with an emphasis on sharing of best practices – goal of 100%.

Risks and challenges
- Challenge – Gender and heritage data depends on self-disclosure by candidates and is not currently available to the division.
- Challenge – Identifying staff to serve on panels without routinely over-committing the same individuals for multiple recruitments.

Milestones to be accomplished and schedule
- Leadership Team to establish policy for composition of search and screen committees and interview panels – September 1, 2013.
- Model recruitment plan developed using the Deputy Associate Vice Chancellor position – September 1, 2013.
- Leadership team establishes a standard for interview protocol: behavior based interview questions, benchmarks – October 1, 2013.
- Recruitment plans for manager/supervisor positions are shared and discussed at Leadership Team meetings, approved by the Associate Vice Chancellor or designee.
- Model recruitment plan approved and implemented by Leadership Team – November 1, 2013.

Action Plan to overcome barriers and take advantage of opportunities
- Model best practices in the recruitment process for the Deputy Associate Vice Chancellor position – beginning in August 2013.
- Evaluate results of the Deputy Associate Vice Chancellor recruitment after hire.

Goal/Objective 1e: continue to increase employee diversity at the manager/supervisory levels.

Description
This goal/objective will focus on increasing diversity in manager/supervisor positions through recruitment and by developing staff to compete for higher level manager/supervisory positions. We believe progress in this area will create a workplace that is more inclusive, engaged and creative, and will result in improved decision-making and performance across the organization.

Baseline Measure
- According to the 2012 Heritage and Gender data:
    - 5.1% of Trades are persons of color; 4.0% are female.
    - None of the Supervisory Professional positions are held by persons of color; 33.3% are female.
    - 6.8% of Supervisory positions are held by persons of color; 17.8% are female.
    - 8.8% of Professional positions are held by persons of color; 38.2% are female.
    - 43.4% of Non-exempt positions are held by persons of color; 28.5% are female.
    - 4.5% of Executive Managerial positions are held by persons of color; 9.1% of positions are held by female.
- Reports are confusing (e.g. Employment Categories includes Professional, Supervisory Professional, and Supervisory levels).

Target
- Employment categories are clearly defined and differentiated.
- Demographic data for management/supervisor/professional positions trends upward from 2012 data.
- Maintain diversity in the non-exempt level positions.
- Recruitment plans developed and approved for manager/supervisor level positions. Plans include diverse search and screen committees and interview panels, advertisement to reach a diverse population, behavioral based questions and benchmarks – goal of 100%.
- Recruitment plans for manager/supervisor level positions discussed at Leadership Team, with an emphasis on sharing of best practices – goal of 100%.

Performance Indicator
- Gender and heritage data by employment categories provided by OHR.

Risks and challenges
- Challenge – Applicant pool for facilities positions is traditionally predominately white male.

Milestones to be accomplished and schedule
- Leadership Team to establish policy for composition of search and screen committees and interview panels – September 1, 2013.
- Model recruitment plan approved and implemented by Leadership Team – September 1, 2013.
- Model recruitment plan developed using the Deputy Associate Vice Chancellor position – September 1, 2013.
- Leadership team establishes a standard for interview protocol: behavior based interview questions, benchmarks – October 1, 2013.
- Recruitment plans for manager/supervisor positions are shared and discussed at Leadership Team meetings, approved by the Associate Vice Chancellor or designee.
- Partner with WISELI to offer Bias Literacy training to search and screen committee and Leadership team – November 1, 2013.

Action Plan to overcome barriers and take advantage of opportunities
- Leadership Team establishes/communicates policy for composition of search and screen committees and interview panels – September 1, 2013.
- Leadership team establishes/communicates a standard for interview protocol: behavior based interview questions, benchmarks – October 1, 2013.
- Share/discuss recruitment plans for manager/supervisor positions at Leadership Team meetings, approved by the Associate Vice Chancellor or designee.
- Create a recruitment plan for the Deputy Associate Vice Chancellor position:
  - Review of plan by FP&M Leadership Team.
  - Approval of plan by AVC.
  - Launch of recruitment.
  - Bias Literacy training provided by WISELI.
  - Analysis of results at various stages of recruitment: diversity of applicant pool, interview candidates, finalists, and person hired.

Goal/Objective 1f: Provide all employees with annual performance reviews that include a development plan.

Description
FP&M currently requires all permanent staff receive an annual performance review. Discussion of development goals is a standard component of the performance review form. This goal will focus on re-vamping the process to create consistency across the organization and improve the review process for both employees and supervisors. *Although part of the EID initiative, this goal is described in detail under FP&M Strategic and Operational Objectives.*

Goal/Objective 1g: Provide EID competency assessment and development, with an initial focus on leaders, managers and supervisors.

Description
In FY13, FP&M created new mission and vision statements for the organization. In addition, core values were identified for the organization. This work provides the foundation necessary to begin to identify the key competencies required for leaders, managers and supervisors to ensure behaviors are consistent with the values of the organization.

Baseline Measure
- FP&M core values identified:
  o We are People Centered by being inclusive, engaged, diverse and customer-focused.
  o We promote Stewardship through sustainable, effective and efficient use of resources.
  o We promote Integrity by building trust, respect and accountability.
  o We support Innovation and Discovery through continuous learning and improvement.
  o We promote Safety, ensuring a safe and healthy campus environment.

Target
- EID competencies established (by VCFA and VCFA directors).
- Additional competencies identified for FP&M, if appropriate.
- Provide EID competency assessment and development with initial focus on leaders, managers, and supervisors.

Performance Indicator
- Percent of leaders, managers and supervisors who demonstrate EID competencies based on a pre and post-assessment tool.

Risks and challenges
- Challenge – Identifying the resources to assist with identification of competencies, and development of appropriate educational opportunities.
- Challenge – Phasing this work in a logical, thoughtful manner.
- Risk – Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
- Identification of EID competencies. (VCFA led effort)
- Identification of additional competencies for FP&M, as appropriate.
- Develop a communication/implementation plan for all sections of FP&M:
    o Category I – FP&M Leadership Team
    o Category II – Associate, assistant directors and managers
    o Category III – Area/shop supervisors
    o Category IV – Crew/craftsworker supervisors
    o Category V – Front-line staff

Action Plan to overcome barriers and take advantage of opportunities
- FP&M Leadership Team identifies and consults with potential resources to support this effort.
- Leadership Team engages in a facilitated discussion of desired behaviors to support core values, and identifies competencies required.
- Explore options for introducing competencies to the organization:
  Option 1:
    o Identify 5-7 core competencies for EID. Conduct pre and post-assessment moving sequentially through the categories identified above.
    o Phase the work with categories I & II as the first priority for completion in FY14.
    o Begin category III and IV in FY14 and complete in FY15.
    o Begin category V in FY15.
  Option 2:
    o Identify 5-7 core competencies for EID. Conduct pre and post-assessment for category I and II in FY14.
    o Identify a subset of competencies for introduction to category III and IV in FY14.
    o Identify a subset of competencies for introduction to category V in FY15.

- Leverage the work of the FP&M and Departmental EID Teams on their goals:
  '*building understanding and commitment to the FP&M mission, vision and core values.'*

VCFA Strategic Priority 2: **Student Leadership Development (WiGrow)**

Goal/Objective: Pilot WiGrow Initiative in FP&M.

Description
FP&M will be piloting the WiGrow program with two groups of students in FY14: (1) Campus Planning and Landscape Architecture has 3 students studying landscape architecture; and, (2) Transportation Services has approximately 24 students assigned to Booths. This allows us to introduce the program to a group of students working in their field of study and students working primarily to earn income for school. This will allow us to assess the success and relevancy of WiGrow to a variety of students. Participation in this initiative will require that we be more intentional in our interactions with students and that we clearly articulate the knowledge and skills gained by working in FP&M.

Baseline Measure
- Two pilot groups identified for WiGrow.
  - Transportation Services Booths – 24 students.
  - Campus Planning and Landscape Architecture – 3 students.

Target
- Implementation plan included in the WiGrow toolkit.
- Pilot group supervisors trained for implementation of WiGrow.
- Two pilot groups complete participation in WiGrow.
- Performance reviews conducted for all students remaining in pilot in May 2014.
- Assessment of learning outcomes for students enrolled in WiGrow.
- Assessment of pilot and expansion of program in FY15.

Performance indicators
- Development of WiGrow implementation plan.
- Number of supervisors who participate in the training sessions for WiGrow, offered by VCFA and supplemented by FP&M.
- Number of student employees who complete the WiGrow program.
- Learning outcomes for those students participating in WiGrow.
- Number of focused discussions between supervisors and students.
- Percentage of students participating in the pilot groups in Spring 2014 who receive performance reviews – goal of 100%.
- Final year assessment of pilot conducted with supervisors and students – goal of 100% favorable rating.

Risks and challenges
- Risk - Supervisors do not have resources and/or skills to adequately coach students.
- Risk - Students lack skills in reflection or are unable to identify transferable skills.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
- Establish pilot groups – July 1, 2013.
- WiGrow Train the Trainer completed – August 2013.
- FP&M WiGrow coordinator, supervisors and directors provide orientation to WiGrow for participating students – September 2013.
- Fall Semester focused discussions complete – October and December.
- Evaluation of focused discussion questions/responses by Student Employment Team.
- Collect and report WiGrow performance metrics for structured conversations.
- Administer standardized instrument for learning outcome assessment – April 2014.
- Student evaluations completed – May 2014.
- Evaluation of WiGrow by supervisors and students – May 2014.
- Decision about adjustment to program, expansion to other FP&M units in FY15 – June 2014.

Action Plan to overcome barriers and take advantage of opportunities
- FP&M planning meeting – Completed July 26, 2013:

- o Identified skills students will be expected to develop in specific jobs.
- FP&M Coordinator and Training Officer participate in WiGrow orientation in August 2013.
- FP&M trains the supervisors of students participating in WiGrow – August 2013.
- FP&M supervisors provide orientation to WiGrow for participating students – Complete by September 9, 2013.
- Semester I - Supervisors conduct focused discussions – October and December 2013.
- Review/evaluation of responses to focused discussions by supervisors, directors, FP&M WiGrow coordinator.
- Review/discuss any additional training needs of supervisors or students.
- Semester I learning activity for students: Identification of Knowledge, Skills, and Talents.
- Semester II learning activity for students: Identification of Organizational Needs and matching to Knowledge, Skills and Talents.
- Semester II - Supervisors conduct focused discussions – complete by May 1, 2014.
- Review/evaluation of responses to focused discussions by supervisors, directors, FP&M WiGrow coordinator.
- Conduct performance reviews with all students in pilot group.
- Conduct final assessment of WiGrow pilots (supervisors, students, directors).
- Adjustment to program, expansion to other FP&M units in FY15.

VCFA Strategic Priority 3: **Resource Stewardship Through Process Improvement**

Goal/Objective: Improve the FP&M customer billing process.

Description

The FP&M customer billing process is critical to the success of FP&M and is also of critical importance to our customers. This effort will focus on creating a consistent and predictable schedule for billing; improving efficiency by assigning clear roles and responsibilities; reducing redundancies and re-work; and improving the accuracy and accessibility of bills. The result will be improved service for our customers as they are better able to manage their budgets, and a more efficient, less frustrating customer billing process for our staff.

Baseline Measure
- Customers (internal and external to UW-Madison) are billed for services provided by Physical Plant, Transportation Services, and Environment, Health and Safety.
- Billing process, format and schedule is not uniform across the organization.

Target
- Billing occurs at a standard time every month.
- Bills are informative and easily understood by the customer.
- Bills are accurate and defensible.

Performance Indicators
- Percentage of bills processed within an established timeframe each month.
- Customer satisfaction with billing information/format.

- Reduction in number of 'bombed' charges monthly.
- Reduction in clearing account balance.

Risks and challenges
- Challenge - Billing is a complex process that incorporates/depends on rate setting and other processes.
- Challenge – Creating a standard process supported across the organization, particularly given that each group currently has their own standards.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
- Identification of team members and training needs, if any.
- Approved project charter – November 1, 2013.
- Implementation plan, including communication plan, approved.
- Metrics established and populated.

Action Plan to overcome barriers and take advantage of opportunities
- Identification of advocates from the FPM Leadership Team to lead effort – July 22, 2013.
- Develop project charter – October 1, 2013.
- Identification of team members and resources needed – October 1, 2013.
- Development of plan for collecting data, customer focus groups, etc.
- Determine schedule for implementation. (Given scope and complexity, this project may need to be phased over fiscal years).

Section 3: FP&M Strategic and Operational Priorities – Summary

The goals/objectives presented in this section of the annual report represent the goals/objectives that the Division identified as having the greatest potential to improve the services FP&M provides in support of the mission and vision of UW-Madison. All of these goals are also aligned with, and intended to advance the Vice Chancellor for Finance and Administration's Strategic Plan 2009-2014.

Goal/Objective 1: Provide all employees with annual performance reviews that include a development plan.

Description
FP&M currently requires all permanent staff receive an annual performance review. This goal will focus on re-vamping the process to create consistency across the organization and improve the review process for both supervisors and employees. Providing meaningful performance evaluations, and holding managers, supervisors and staff accountable for performance, was identified as a critical key action in the FP&M EID Plan.

Baseline Measure
- Performance evaluations are required for all permanent staff in FP&M, typically by June of each year.
- Performance evaluations are not required for LTE or student employees.
- A variety of formats is employed for documenting performance reviews.
- Evaluations are not competency based.

Target
- All performance reviews include a professional development component.
- Each employee receives an annual performance review, completed by May of each year. This includes student employees.
- The format is consistent for employee categories (e.g. exempt has a standard form, non-exempt uses a standard form).
- Training provided to all supervisors on how to provide constructive performance evaluations and coach for success. 100% of supervisors.
- EID competencies incorporated and communicated in advance of the FY14-15 performance review cycle (phased in according to decisions made regarding EID competencies –Goal 1g).
- Performance evaluations completed for 100% of staff.
- Performance evaluations completed for 100% of LTE and student employees.

Performance Indicators
- Percentage of performance evaluations complete by the due date of May 1, 2014 – goal of 100%.
- Random check of quality of performance reviews.

Risks and challenges
- Challenge – Cycle-time for performance reviews has been challenging due to workloads, particularly during the summer months.

- Challenge – Assessing the quality of performance reviews, particularly of the face-to-face interactions, is difficult.
- Challenge – Employees may not trust the process or feel comfortable meeting with supervisors.
- Risk – Assessing employees against an expectation that has not been previously or completely communicated.
- Risk – Competencies not being explained in terms that are readily understood by all employees.
- Challenge – Ensuring performance reviews include face-to-face discussion between supervisor and employee.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
- Approval of format for forms.
- Training for supervisors.

Action Plan to overcome barriers and take advantage of opportunities
Phase I – Focus on exempt positions (e.g. manager/supervisor/professional) through May 2014.
- Collect and analyze forms used in FP&M for evaluation of exempt staff.
- Incorporate competencies into forms for exempt staff. TBD.
- Finalize and approve form to be used for exempt staff.
- Develop job aids to explain competencies and expectations for exempt staff.
- Conduct communication/training campaign to inform exempt staff of new form and competencies to be used for their positions. TBD

Phase II – Focus on non-exempt positions (through May 2015).
- Collect and analyze forms used in FP&M for evaluation of non-exempt staff.
- Incorporate competencies into forms. TBD
- Finalize and approve form to be used for non-exempt staff.
- Develop job aids to explain competencies and expectations for non-exempt staff.
- Conduct communication/training campaign to inform non-exempt staff of new form and competencies to be used for their positions. TBD

Goal/Objective 2: Develop and disseminate FP&M policies and procedures.

Description
FP&M policies and procedures are not consistently documented or communicated. This initiative will focus on developing an FP&M standard format; a process for prioritizing and developing policies and procedures; and, on the development/documentation of specific divisional HR policies and procedures. The FP&M EID Plan identifies this as a key action needed to begin to build credibility and trust between the FP&M Leadership Team and employees; to create a fair and equitable work environment; and to encourage and support engagement, inclusion and diversity.

Baseline Measure
- FP&M currently lacks a codified process of policy development.
- Policies and procedures are not formatted and tracked consistently.

- Policies are not readily available to staff.

Target
- Policies and procedures are written in plain, easily understandable language.
- Policies and procedures are communicated across the entire organization through a variety of media.
- Policies are reviewed and updated on a regularly scheduled basis.

Performance Indicators
- Number of policies/procedures completed and accessible.
- Managers/supervisors educated on new policies and procedures.

Risks and challenges
- Challenge – Overcoming past practice.
- Challenge – Acceptance and application by all managers and supervisors.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
- An approved process for identifying need, drafting policy and procedures, soliciting input, finalizing and communicating policies and procedures – September 2013.
- An approved policy/procedure template for FP&M – September2013.
- A prioritized list of HR policies for development - September 2013.
- Policies developed and communicated – On-going.

Action Plan to overcome barriers and take advantage of opportunities
- Staff person assigned to develop process, template and draft policies – July 2013.
- Template and process approved by Leadership Team – September 2013.
- Policies and procedures advanced through the process – On-going.

Goal/Objective 3: Refine key indicators to measure and improve services.

Description

FP&M identified key indicators for all departments in the organization in FY13. This goal builds on that effort. Each director has established key indicators that are shared with the AVC. In turn, a subset of 32 metrics was established and shared with the VCFA. This goal focuses on evaluating and refining key indicators to ensure they are appropriate measures, that the data can be routinely populated, and that they are used throughout the organization to track and improve services.

Baseline Measure
- Key indicators established for seven FP&M departments.
- 32 metrics established and shared with the VCFA.
- Key indicators populated with data.

Target
- Data for all key indicators is updated on schedule (generally on a quarterly basis).

- Staff responsible for service delivery is engaged in capturing, tracking and adjusting key indicators specific to their areas of responsibility.

Performance Indicators
- Data is refreshed on schedule (goal of 100%).
- Key indicators are regularly evaluated and used to inform decision-making.

Risks and challenges
- Challenge – Ensuring data collection is incorporated into processes.
- Challenge – Data may be 'controlled' by other departments/agencies and not readily accessible.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
- Departmental key indicators shared at Leadership Team meetings.
- Key indicators regularly reviewed and discussed on a quarterly basis.
- Key indicators communicated through FP&M website. TBD
- A subset of key indicators is shared with VCFA Bazzell on a quarterly basis.

Action Plan to overcome barriers and take advantage of opportunities
- Key indicators to be discussed and refined through discussions in departmental meetings and in Leadership Team meetings.

Goal/Objective 4: Update and launch a new website for Facilities Planning and Management.

Description
Although individual departments have updated webpages over time, the overall FP&M website is outdated, both in content and in design. In addition, there is no overall consistency between departmental pages. Improving the website by aligning with the campus and VCFA standard design and upgrading the content, will be an important component in an improved communication strategy for FP&M. The new site will include pages containing content specifically designed to increase employee engagement, inclusion and diversity and will provide important information to applicants for possible employment in FP&M.

Baseline Measure
- Two departments have launched new websites using the standard DoIT CMS package.
- The FP&M website is externally focused with only limited resources for employees (e.g. the Training site).

Target
- Complete re-design of the FP&M website to align with the design of the VCFA homepage. All departments have a consistent, user-friendly design.
- The FP&M website includes an intranet to facilitate communication with employees and improve employee engagement.
- A staff person is dedicated to providing management and oversight of the FP&M website.

Performance Indicators
- Website traffic, measured via Google analytics.
- Percent of FP&M sites using CMS and meeting the FP&M standard (goal is 100%)

Risks and challenges
- Challenge – Departments must agree on a common design.
- Challenge – The time required to create the content for the various sites.
- Risk – Cost and time required to re-design sites.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
- Review of existing websites by AVC – completed July 2013.
- Capital Planning and Development re-designed website launched July 2013.
- Environment, Health and Safety re-designed website launched September 2013.
- Communication Specialist hired October 1, 2013
- FP&M website committee formed November 1, 2013.
- FP&M homepage – go live April 2014.
- FP&M intranet – go live September 2014.
- All FP&M websites re-designed using CMS – TBD.
- FP&M business portals re-designed – July 2015.

Action Plan to overcome barriers and take advantage of opportunities
- Recruit for a Communication Specialist to oversee website design and maintenance.
- Create a team with representation from each department to participate in the website re-design initiative.
- Enlist assistance/advice from UW Communications and DoIT, as appropriate.

Goal/Objective 5: Provide project management services for capital projects.

Description
FP&M staff serves as the liaison between campus customers (Schools and Colleges), project managers assigned by the Division of Facilities Development (DFD) and the architectural/engineering design firms. This goal is intended to highlight the importance of managing the quality, schedule and budget for capital projects to ensure support of the academic, research and outreach mission of the university.

Baseline measure
- Baseline measures exist for the completion of capital projects (16 projects scheduled for completion during FY14).

Targets
- Complete projects on time, within budget to the specified level of quality.
- Complete planning & design on eighteen projects ($399.6M) during FY14.
- Complete construction on sixteen projects ($663.7M) during FY 14.

Performance indicators
- Quality, schedule and budget established by construction documents and bids; tracked and managed at the project level.

Risks and challenges
- Challenge – process and schedule are determined by UWSA and DFD.
- Challenge – DFD holds the planning, design and construction contracts for all capital projects.
- Challenge – ensuring targeted funds are raised in a timely fashion for those projects funded, in part or entirely, by gifts.

Milestones to be accomplished and schedule
Construction Complete by 6/30/2014
- Biochemistry Phase II ('85 Wing) – complete construction July 2013 (completes the $111.9M project).
- Carson Gulley Renovation – complete construction July 2013 ($10).
- Goodman Softball Complex – complete construction July 2013 ($3.5M).
- Lakeshore Residence Hall Phase II – complete construction Aug 2013 ($17.4M).
- Gordon Dining & Event Center (site) – complete construction Aug 2013 (completes the $41.3M total project).
- Linden Drive Branch Steam Repairs - construction complete Sept 2013 ($650K).
- Telecommunications Phase III – complete construction Sept 2013 ($1.4M).
- ITIP Classroom Renovation Projects – complete construction Sept 2013 ($1.2M).
- Langdon Street Utility Tunnel Replacement – complete construction Oct 2013 ($4.8).
- Highland Avenue Reconstruction – complete construction Oct 2013 ($698K).
- Student Athlete Performance Center – complete construction Dec 2013 ($86.2M).
- Wisconsin Institutes for Medical Research Phase II – complete construction Dec 2013 ($134.8M).
- Charter Street Heating Plant Upgrades – complete construction Dec 2013($140M).
- General Library Storage Facility – complete construction Jan 2014 ($1.7M).
- Signe Skott Cooper Hall – complete construction Apr 2014 ($52.9M).
- Memorial Union Phase I – complete construction May 2014 ($55.2M).

Planning/Design Complete by 6/30/2014
- Babcock Hall Dairy Plant Renovation & Addition – complete construction documents May 2015 ($31.9M).
- Camp Randall Memorial Shell Renovation/Reconstruction – complete planning study Nov 2013 ($100K).
- Chemistry Building Addition – complete 10% Concept Report in spring 2014 ($103.5M).

- Dayton Street Utility Extension project (pre-planning) – complete bidding May 2014 ($3.1M).
- Elizabeth Waters Hall Renovation – complete bidding of Phase I Dec 2013 ($10.1M).
- Engineering Hall Structures Lab Addition (pre-planning) complete A/E Selection July 2014 ($1.6M).
- Hospital Parking Ramp Expansion – complete bidding May 2014 ($29.1M).
- Recreational Sports Master Plan Update – complete planning by Dec 2013 ($185K).
- University Houses Redevelopment – complete bidding Feb 2014 ($15M).
- UW Police Department Addition (pre-planning) – complete A/E Selection July 2014 ($5M).
- West Campus Cogeneration Facility Chiller Addition – complete bidding March 2013 ($67.6M).
- Bucky Wagon Shelter Implementation – complete construction fall 2013 ($TBD).
- Elvehjem Building Renovations (pre-planning) TBD ($150K).
- Meat Science and Muscle Biology Building – TBD ($43M).
- Memorial Union, Phase II & Alumni Park – TBD ($42M).
- ROTC facility (pre-planning) – TBD ($185K).
- Walnut Street Greenhouses, Phase II (pre-planning) TBD ($100K).
- Witte & Sellery Hall Renovations – TBD ($47M).

Action Plan to overcome barriers and take advantage of opportunities
- Each project manager monitors project schedule, budget and quality and works with campus customers, and through the Division of Facilities Development (DFD) works with contractors to complete the project on time, within budget and to the expected standard of work.

Goal/Objective 6: 2005 Campus Master Plan on-going implementation.

Description
This goal tracks the number of major capital improvement project initiatives and overall development goals identified in the approved 2005 Campus Master Plan. The objective is to assure that we are moving ahead with the goals identified in the plan and that the campus master plan is a highly respected and utilized document guiding campus growth and assuring transparent, participatory planning for the physical development of campus. This is an on-going priority for FP&M. In FY14, we will begin preparations for the next comprehensive campus master plan update.

Baseline Measure
- The baseline measurement is the number of major projects and overall goals completed annually. From 2005 through July 1, 2013, we have completed (or will complete in 2013) 27 major projects (roughly 28%) of the 95 potential projects identified in the 20-year 2005 Campus Master Plan.

Target
Over the next fiscal year, the following projects will begin with planning & design development:
- Memorial Union - Phase II
- Alumni Park

- Chemistry Instructional Facilities Expansion
- Babcock Hall Dairy Plant Expansion
- Recreational Sports Facilities Master Plan Update
- College of Engineering Facilities Master Plan
- Tandem Press Addition

The following major projects/initiatives are expected to be completed in FY14. Completion of these projects will bring our total up to 37% of the master plan being complete:

- Signe Scott Cooper Hall School of Nursing
- Carson Gulley Renovation
- Charter Street Heating Plant Upgrades
- Lakeshore Residence Hall - Phase II
- Robert and Irwin Goodman Softball Complex
- Student Athlete Performance Center
- WIMR – Phase II

Performance Indicators
- Quality, schedule and cost established for each project
- Comparison of map of completed projects to the 2005 Campus Master Plan graphic.

Risks and challenges
- Risk - Project implementation involves construction delays, weather and material delivery difficulties.
- Challenge – Funding of projects. State dollars are scarce and each project needs to be prioritized against other campus, UW System and State priorities. Private dollars also continue to be scarce as resources are directed to other priorities and initiatives on campus that do not support bricks & mortar projects.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
Each of the above projects has their own milestone schedules and overall completion schedule as defined in the Quarterly Report. Proposed occupancy dates are listed below:

- Signe Cooper Hall School of Nursing, August 2014
- Carson Gulley Renovation, July 2013
- Charter Street Heating Plant Upgrades, December 2013
- Lakeshore Residence Hall - Phase II, August 2013
- Robert and Irwin Goodman Softball Complex, July 2013
- Student Athlete Performance Center, December 2013
- WIMR – Phase II, December 2013

Action Plan to overcome barriers and take advantage of opportunities
Continue to support major projects and campus master plan goals to assure they are implemented effectively. At the end of the fiscal year, we will review the number of projects completed to assure that we are moving forward with the planned opportunities and goals of the 2005 Campus Master Plan.

Goal/Objective 7: Improve stormwater management on campus.

Description
UW-Madison is part of the Yahara Lakes watershed and occupies over 4 miles of lakefront on its largest water body, Lake Mendota. Virtually all of the stormwater runoff from campus ends up in either Lake Mendota or Lake Monona. This objective tracks pervious land area changes for the main UW-Madison campus to better understand our impact on stormwater runoff. The goal is to maintain or increase the amount of pervious area within the main campus boundary. Maintaining or increasing pervious area is important because it helps the university meet Wisconsin Department of Natural Resources requirements for stormwater runoff, as well as sediment and phosphorus control. Doing so demonstrates the UW's commitment to improving water quality; reducing the quantity of stormwater flowing into the lakes (and thus reducing risk of flooding); and, strengthens relationships with surrounding municipalities.

Baseline Measure
- As of 2008, campus consists of approximately 556 acres of pervious area (66%) and 283 acres (34%) of impervious area north of University Avenue (including the Lakeshore Nature Preserve).
- Additional studies are being completed for the current conditions across campus including the urban area south of University Avenue.

Target
- Initial goal is to increase pervious areas to 70% and decrease impervious areas to 30% campus wide by 2015.

Performance Indicators
- Calculations will be done on an annual basis to compare prior data with changes made over the past fiscal year in development.
- Changes to the overall numbers are based on the number and types of major capital improvement projects in development each year.

Risks and challenges
- Challenge – tracking changes and ensuring data set is accurate and up-to-date.

Milestones to be accomplished and schedule
- Update stormwater model and analysis for entire campus – January 1, 2014.
- Review and recommend changes to major capital improvement projects to assure stormwater management is being considered and impervious areas are reduced – ongoing.

Action Plan to overcome barriers and take advantage of opportunities
- Continue to monitor major projects during design and construction to assure best management practices are used to manage and reduce stormwater impacts.

Goal/Objective 8: Sustainability - Advance 'UW Builds Green' program.

Description
To benchmark our commitment to sustainability, campus is pursuing Leadership in Energy and Environmental Design (LEED) certification on most of its new and renovated major projects. By following this commitment, LEED Silver certification level is obtainable and is the minimum level pursued on campus projects. LEED is used as a guideline and a way to measure the sustainability elements of a project; it is not used as a checklist of items required to be included. An effort is made to pursue points which are truly sustainable and have a strong return on investment.

Baseline measure
- Advance the UW Builds Green programs.

Targets
- Leadership in Energy and Environmental Design (LEED) – Silver certification.

Performance Indicators
- Successful LEED certification.
- Adherence to the principles of sustainability included in the Division of Facilities Development (DFD) Sustainability Guidelines.

Risks and challenges
- Risk - The ability to implement processes or procedures that are not truly sustainable. Points may still be received through the LEED point system, but the item is not sustainable for the particular project.
- Challenge - The entire project team – the architects, engineers, owners, and contractors need to be committed. Collaborative efforts from the very beginning of the project are needed to ensure success.
- Challenge – Follow through on measurement and verification of the building's actual energy use compared to the model to ensure it is performing as designed.
- Risk - The LEED process starts at the very beginning of the project and can continue for a year or more past the point when construction is complete. During this time, members of the project team can change, and information isn't always passed on. This can result in delays and inadequate information for completing the credits.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones accomplished
Currently, there are nine projects seeking LEED certification, with five expecting certification in FY14.
- LaBahn Arena – Tracking LEED Silver (certification expected November 2013).
- Student Athlete Performance Center, McClain Center – Tracking LEED Silver (certification expected November 2013).
- Wisconsin Energy Institute – Tracking LEED Gold (certification expected November 2013).
- Lakeshore Residence Hall Phase II/Food Service – Tracking LEED Silver (certification expected March 2014).
- Wisconsin Institutes for Medical Research Phase II – Tracking LEED Silver (certification expected April 2014).

Action Plan to overcome barriers and take advantage of opportunities
- Incorporate LEED/Sustainability discussions into design meetings. This ensures that the entire project team understands the sustainability goals of the project.

Goal/Objective 9: Redesign of parking permit renewal process – complete redesign to allow for annual renewal in lieu of priority ranking system.

Description
The current parking permit renewal system requires departments to reprioritize their employees each year to allocate parking. Customers must then apply for parking every year. Departments, including Transportation Services, dedicate hundreds of hours to this process while at least 80% of employees elect to park in the same lot each year (Transportation Services sells about 10,000 annual base lot permits). The prioritization process also requires substantial administrative oversight and effort, electronic data storage space, and computing system oversight due to the high traffic generated by customers attempting to accept their offers online. A parking renewal system would allow employees to keep their same lot each year and Transportation Services would only need to actively manage the 20% of employees who need to change their parking assignment.

Baseline Measures
- Employee parking requests are prioritized, offered, approved and accepted annually.

Targets
- Reduce the time needed for individuals and departments to obtain parking (reduce overall time by 70%).
- Reduce Transportation Services administrative costs to manage the process (reduce by 40%).
- Improve overall customer (Unit Transportation Coordinators; parking patrons) satisfaction.

Performance Indicators
- Cycle-time for permit process.
- Permit processing costs.
- Customer satisfaction survey/feedback.

Risks and challenges
- Challenge - Transfer of decision-making. A parking permit renewal policy will take decision-making authority away from College/School/Department/Unit management and shift it to Transportation Services.
- Challenge – The need for an exceptions policy to manage replacement of key personnel, departmental moves, loss of parking space availability due to construction projects and sabbaticals.
- Challenge - Convince Colleges/Schools/Departments/units of the benefit of most of their staff using a faster, more efficient process as a trade-off for diminished decision-making role.
- Challenge - Communicating a changed role for the UTCs, i.e. more of a communication liaison with a reduced commitment of resources.
- Challenge - Integration of new process into software programs and processes.
- Challenge – Time constraint for developing and implementing a new annual parking permit renewal process.

- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be accomplished and schedule
- Data collection and identification of software needs – Summer 2013.
- Policy options developed and shared with stakeholders – January 2014.
- Implementation plan complete and approved – May 2014.
- Implementation complete – August 2014.
-
Action Plan to overcome barriers and take advantage of opportunities
- Summer 2013 - Begin data collection and identification of software needs.
- Fall 2013 - Begin development of policy options.
- Winter 2013/2014 - Develop policy options and share with stakeholders.
- Winter 2014 – Obtain approval to implement new process.
- Spring/Summer 2104 – Implement new process.
-

Goal/Objective 10: Design and construction of the UW Hospital Parking Ramp 75 Expansion.

Description
The expansion of the Hospital parking structure will be used to replace parking on the west campus that was lost to construction and provide for additional visitor parking capacity to meet the needs of the hospital.

Baseline Measures
- Current parking structure at 95% capacity.
- Project is at 10% Design.

Targets
- Target is to complete structure design by March 31, 2014.
- Target is to add 700 spaces to existing facility at a cost of $29,085,000.

Performance indicators
- Milestones achieved within 30 days of scheduled date.
- Conduct monthly construction coordination meetings with UW Hospital Administration.

Risks and Challenges
- Risk - An area transportation study of street and road capacities; pedestrian access through an active construction site; and, managing construction over the full range of seasonal climatic conditions.
- Challenges - Maintaining parking in one of Wisconsin's busiest parking facilities while the facility capacity is doubled; staging and construction in very limited space; heavy construction adjacent to an advanced high-risk surgery center; collaborating with Hospital operations and administration; and, providing adequate parking for patients and visitors while the construction is underway.

Milestones
- Agency Request – September 27, 2013

- State Building Commission approval – December 2013
- 100% Final Design submittal – March 2014
- Construction Start – July 2014

Barriers to Success
- Approval by the Board of Regents and State Building Commission in December 2013.
- Approval by the City of Madison based on the results of the area traffic study and neighborhood feedback.

Next Steps and Future Opportunities
- Release Environmental Impact Study – August 9, 2013
- 35% Preliminary Design submittal – August 12, 2013
- Agency Request – September 27, 2013

Goal/Objective 11: Improvements to campus bus service.

This goal focuses on engaging students (ASM) in order to adopt a plan for campus bus service and funding that will be implemented by September 2014 (FY15). Transportation Services (TS) negotiates campus transit service with ASM. An agreement should be completed by January for service beginning in September in order for budgets to be finalized and complete the necessary planning and public notification to be undertaken by Madison Metro. However, sometimes negotiations do not begin until January and there is insufficient time to implement changes before the following September.

Baseline Measures
- No timeline for finalizing funding agreement was established during FY 13.
- No service changes were possible during FY 13.

Targets
- Target is to have an approved written agreement by Feb 1, 2014.
- Target is to implement Metro service changes by September 1, 2014.

Performance indicator
- The number of days targets are achieved earlier than, or later than, scheduled. Targets should not be achieved more than 30 days late.

Risks and Challenges
- Risk - ASM's position on funding and amount of campus transit service may go undecided or conflict with campus needs.
- Risk - ASM committee members may not be selected until too late to reach an agreement.
- Risk - Conflicting and competing student priorities, student time demands, students learning bus service and funding complexities, reaching agreements on the amount of transit service and level of funding.
- Challenge - Explaining campus bus ridership; over-crowding; schedules; need to meet to reach a timely agreement; Metro public hearings; approvals by various City of Madison committees; and, labor contract requirements.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones
- TS and ASM meet at least once/month in Sep, Oct, Nov, and Dec in 2013.
- There is an approved written agreement by February 1, 2014.
- The initial public information meeting (if needed) is held by April 1, 2014.
- Any Metro service changes are adopted by City of Madison committees by June 1, 2014.
- Any Metro service changes implemented by September 1, 2014.

Action Plan to overcome barriers and take advantage of opportunities
- Prepare a TS position paper, budget and propose meeting dates by September 1, 2013.
- Contact ASM/SSFC officers, distribute information and budget by September 15, 2013.

Goal/Objective 12: Complete beta-test of biosafety's ARROW project initiative and develop training tools for PIs.

Description

The Application Review for Research Oversight at Wisconsin (ARROW) project is a comprehensive campus-wide effort to streamline the process and create a single point source for animal, human, and biosafety, protocol registrations. This project is a carryover from FY13. The project is managed by the Graduate School and is designed to work in conjunction with federal grants and their management. EH&S is providing assistance to help with the final design and programming features needed to make the Institutional Biosafety Committee (IBC), Institutional Animal Care and Use Committee (IACUC) and the Institutional Review Board (IRB) process work as one unit. EH&S has contributed significant resources to develop smart forms and programing.

Baseline Measures
- Current IBC protocol application is a manual paper process. Forms are reviewed manually by the Office of Biological Safety (OBS) staff. Completed forms are copied into a tracking system. Data from the tracking database are not readily available to investigators.
- PIs are required to re-enter background information for each protocol.

Target
- Reduced time for PIs to enter information into the ARROW database.
- Increased efficiency in the development of IBC protocols. OBS staff will spend less time checking protocol information; entering the information into a tracking system; corresponding with investigators; and, make it easier to create meeting agendas, meeting minutes, and action items.
- Automation of the current manual process.
- Wider availability of information to researchers and PIs.
- Protocol information would be held in centralized, single-source database.

Performance Indicators
- Processing time for protocol updates/reviews.
- Customer satisfaction – feedback from PIs.

Risks and Challenges

- Risk – Existing servers may be inadequate and need to be replaced or upgraded.
- Risk – Limited resources are available for on-going support.
- Challenge – Loss of programmer (early retirement from Graduate School).

- Challenge - The system must meet the federal biological safety regulations and guidelines promulgated by accrediting agencies.
- Challenge - The information system must support business processes and data needs of researchers and compliance mandates.
- Challenge - The information system must implement a security model that ensures appropriate control over the information, allowing access only to those who are authorized.
- Challenge - The information system must deliver a high level of performance for its customers.
- Risk - The limitation on project resources and recent personnel changes may continue to constrain meeting completion dates.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be Accomplished and Schedule
- Development of forms, workflow and protocols – August 2013
- Development of reporting tools – August 2013.
- Pilot testing – September 2013.
- Data migration/conversion plan – October 2013.
- On-going maintenance and support plan complete – October 2013.
- Communication plan complete – October 2013.
- Training tools and reference materials complete – November 2013.
- Delivery of training – December 2013.
- Projected 'Go-Live' date – December 2013.

Action Plan to Overcome Barriers and Take Advantage of Opportunities

- EH&S IT and biosafety staff will continue to work on the ARROW biosafety project and interact with Graduate School IT to finish the project in timely manner.
- A new IT Graduate School ARROW project manager has been appointed. EH&S will work with the new project manager to coordinate reporting, resources and support.

Goal/Objective 13: APR initiative for Occupational Health and Environmental Health realignment.

Description
Building on an earlier strategic recommendation from a 2012 APR project titled: "Improving Campus Response to Chemical Exposures", the team determined that an evaluation of occupational and environmental health functional areas should be conducted. A small team was assembled to: (1) review functional alignment with the missions of EH&S and UHS: (2) address overlapping functions: and, (3) identify possible scenarios for reorganization, staffing, information management, location and funding. The goal of the project is to review occupational health and industrial hygiene activities that occur in the University Health Services (UHS), Environmental Health (EH) program , and the Environment, Health & Safety (EH&S), Occupational Health (OH) program to identify synergies and logical alignment of the programs and functions.

Baseline measures
- Current baseline measure is customer confusion around which services are provided by which unit.
- Redundant and inconsistent service models that currently exist within the departments.

- Propose a structural re-alignment that will clarify the role UHS/EH and EH&S/OH contribute to the campus community, better serve the campus research programs and staff, and continue to ensure compliance with regulatory mandates.

Target
- Clarity of UHS and EHS roles and responsibilities for customers.
- Increased industrial hygiene capacity (by combining skills of broadly trained EH specialists from UHS with the OH staff from EH&S.)
- Improved information transfer and management between Occupational Health and Occupational Medicine by establishing a single location for the new environmental/occupational health data management system.

Performance Indicators
- Customer satisfaction feedback.
- Response time from EHS and UHS to resolve customer's issues.
- Feedback from staff regarding roles and responsibilities.

Risks and challenges
- Risk - Dislocation of staff that are associated with reorganization efforts.
- Challenge - Introduces complexity to the UHS funding model by bringing EH&S staff who are not funded by segregated fees to UHS.
- Risk - Organizationally separates occupational health capacity from the chemical, biological, radiological, and workplace safety efforts.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestones to be Accomplished and Schedule
- Review proposal with affected APR team members and UHS/EHS stakeholders – On-going.
- Meet with senior administration to finalize implementation strategy – August 2013.
- Communicate implementation plan to all staff – September 2013.
- Implement campus communication strategy – December 2013.

Action Plan to Overcome Barriers and Take Advantage of Opportunities
- Revise and review strategic recommendations to meet organizational needs.
- Establish a more vigorous campus community communication plan to highlight the various functions within each department.
- Engage affected staff in a transparent process of understanding the goals of the initiative.

Goal/Objective 14: Administrative Excellence Instructional Space Inventory Implementation.

Description
The AE Instructional Space Inventory Data team completed the collection and compilation of instructional space data attributes and made recommendations for managing and making the data available to campus users. The next step is to implement those recommendations.

Baseline measures
- Inventory of attributes/characteristics maintained for general assignment classroom space.
- Frequency and scope of attribute maintenance.

- Access to instructional space attribute data by campus users and classroom scheduling processes.

Target
- Provision instructional space inventory data to campus users and instructional space scheduling system(s).
- Recognition of Space Management as the responsible unit for the "gold standard" inventory data.
- Improved process for collecting, maintaining and provisioning instructional space inventory data.

Performance indicators
- Inventory of attributes/characteristics for all instructional space stored in a secure database.
- Attributes/characteristics data web-viewable and query-able by campus users.
- Process to review the attributes established to assure the data is up-to-date, accurate and complete.

Risks and challenges
- Risk – Acceptance of, and support for, the designation of the "gold standard" for instructional space attributes/characteristics by the campus community.
- Challenge – Identify and secure adequate resources to support the data maintenance and provisioning processes.
- Challenge – Establishing appropriate processes to keep the data current and accurate.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestone to be accomplished and schedule
- Develop plan for implementation; identify resources; and, implement by April 2014.

Goal/Objective 15: College of Engineering Pilot Study -- Instructional Space Utilization.

Description
A pilot study is proposed to create a system optimization model to assess strategies for realistic and optimal instructional space assignment in the College of Engineering. The model would be exploratory in nature, i.e. the model would be used to conduct simulations that provide insight into various scenarios for optimizing space allocation and scheduling, but would not be used in actual class scheduling in this phase of the pilot study. The pilot study will focus on instructional space, but the methodology will be developed so that it can apply to other space analysis processes on campus (e.g. research).

Baseline measures
- Current weekly student contact hours (WSCH) taught in the College of Engineering.
- College of Engineering instructional space inventory.
- Average weekly room periods (AWRP) scheduled in College of Engineering instructional space.

Target
- Creation of an optimized, sustainable academic schedule for the College of Engineering.
- Acceptance of sustainable approach within College of Engineering.
- Application of College of Engineering processes and findings to campus instructional space policy and processes.

Performance indicators
- Optimized College of Engineering academic schedule.
- WSCH capacity in the College of Engineering.
- Revised/improved College of Engineering instructional space inventory.
- AWRP scheduled in College of Engineering instructional space.

Risks and challenges
- Risk – Resistance to class/schedule/location changes by faculty and academic departments.
- Challenge – Adherence to standard scheduling practices and protocols.
- Challenge – Resistance to policy change(s).
- Challenge – Acceptance of incentive(s).
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestone to be accomplished and schedule
- College of Engineering pilot study graduate student analysis phase I completed by the end of fall semester 2013.

Goal/Objective 16: Collaborate with Educational Innovation groups to develop a learning space improvement plan.

Description
For the past several biennia UW-Madison has requested funding from the UW System classroom renovation/instructional technology improvements program in the capital budget to upgrade the condition and instructional environment in the general assignment classrooms. The Educational Innovation initiative will create a sustained campus environment that maintains and enhances student learning while gaining efficiencies and generating new resources. Educational Innovation will take place across campus, within and across programs, departments, colleges and centers, and will be supported by new and streamlined policies and practices. A learning space improvement plan needs to be developed which embodies the goals and principles of Educational Innovation while leveraging the funding opportunities in the biennial capital budget.

Baseline measures
- The number and type of classroom renovation projects completed through the UW System program.
- The current inventory of collaborative, flexible learning spaces on campus.
- The current utilization rates for classrooms with instructional technology.

Target
- Increased interaction with Educational Innovation groups.
- Comprehensive learning space improvement plan.
- Coordination and acceptance of learning space improvement plan by UW System.

Performance indicators
- The number of collaborative, flexible learning spaces requested through the UW System capital program.
- The utilization rates for instructional space with collaborative, flexible environments.
- The ability to adapt instructional environments to meet changing learning approaches and pedagogies.

Risks and challenges
- Risk – Meeting the growing and changing demand for collaborative, flexible learning spaces.
- Challenge – Creating collaborative, flexible learning spaces which lack adequate resources or support to sustain their operation.
- Challenge – Implementing scheduling policies, processes and practices which maximize the utilization of the flexible learning environments.
- Challenge – Aligning the curricular changes contemplated by academic departments and faculty with the learning space inventory to identify a plan for development.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestone to be accomplished and schedule
- A proposal of new, EI-capable classrooms will be proposed to the UW system for FY 13-15 during late August 2013. It is hoped that this plan will be approved by the UW system in time to allow for implementation to begin during the summer of 2014.

Goal/Objective 17: Extend the access to university facilities and related data via INSITE to FP&M units and campus administrative users.

Description
The Space Management Office collects, maintains and analyzes information about university facilities and space use. UW-Madison facilities information in tabular and graphic formats resides in INSITE, a web-based application. Additional data (i.e. Principal Investigators, occupancy, grants) was collected through the Facilities and Administrative space survey and populated in INSITE. The goal is to extend access to university facilities and related data to FP&M units and campus administrative users. The data can be used to respond to basic inquiries, for analytical purposes in planning, or for daily decision-making.

Baseline measures
- Inventory of FP&M users with access to university facilities data via INSITE.
- Inventory of campus administrative users with access to university facilities data via INSITE.
- Inventory of facilities and related data residing in INSITE.

Target
- Increased value of facilities and related data in analysis and decision-making.
- Expand consultative role of Space Management to campus administration, deans and departments.

Performance indicators
- Increased inventory of FP&M users with access to university facilities data via INSITE.
- Increased inventory of campus administrative users with access to university facilities data via INSITE.
- Increased inventory facilities and related data residing in INSITE.

Risks and challenges
- Risk – Assurance of the accuracy, quality and timeliness of facilities and related data residing in INSITE.
- Challenge – Identify adequate resources to provided training and oversight for departmental use of INSITE and the data contained therein.
- Challenge – Processes necessary to keep facilities and related data up-to-date.
- Challenge – Achieve optimal system performance as additional INSITE users increase.
- Risk - Resource allocation and increased demands results in potential to overload/stress staff.

Milestone to be accomplished and schedule
- Completion date – July 2014.

Goal/Objective 18: Re-energize the Physical Plant Safety Program; including review and update of policies, procedures, and implementation to create a "Culture of Safety".

Description
In an on-going effort of continuous improvement, the Physical Plant Department is committed to re-engaging all its employees in a "Culture of Safety"; where performing work in a safe and efficient manner is "just the way we do things" at UW Madison. Work process evaluations, inspections, requests for safety issue identification, and appropriate education/training will be implemented. Follow-up, and site visits will be undertaken for verification of safe working conditions, and subsequent process improvement/education/action will be administered.

Baseline Measure
- Inconsistent level of safety training for new and existing employees.

Target
- To create a "Culture of Safety" across all aspects of Department work. Ensure all employees have received adequate training to complete their work in a safe, yet efficient, manner.

Performance Indicator
- Engaged commitment to, and an integration of, safety into "the way we work" in the Physical Plant.

Risks and challenges
- *Challenge* - Identify all issues/concerns over a group of 800+ employees.
  Challenge - Scheduling training to respond to newly developed protocol from newly identified issues.
  Challenge - Checking to ensure newly identified and/or modified safety protocols are being followed in the field.

Milestones to be accomplished and schedule
- Hire a dedicated safety person to develop and administer the process – August 2013
- Request for written indication of perceived or outstanding safety issues (or not) from every employee – Aug - Oct 2013
- Form a Safety Management Group to oversee program operation – Sept 2013
- Investigate and prioritize identified safety-related issues – Oct - Nov 2013
- Form an Employee Safety Advisory Board to hear issues, appeals, and impasses – Dec 2013
- Develop training and operational protocol to address prioritized safety-related issues/concerns – Nov 2013 – Jan 2014
- Develop implementation plan and execute – on-going as we respond to our findings

Action Plan to overcome barriers and take advantage of opportunities
- All employees of Physical Plant will be asked to provide a signed, written response to request for information regarding real/perceived safety related issues.
- Program communication will ensure all understand that, "There are no stupid questions, except those that go un-asked". [Originators name can be kept confidential at the writer's request.]
- All responses resulting in identified issues will be prioritized for investigation.
- Real issues will move to the top of the list, and addressed.
- All issues/concerns presented will be responded to and/or addressed, to ensure we "close the loop" through communication.
- All affected parties will be slated to receive training refreshers regarding compliance and operational requirements.
- Any questions and all comments related to process improvement will be considered, evaluated, answered and implemented where feasible.

Goal/Objective 19: Advance WE CONSERVE.

Description
WE CONSERVE promotes education and awareness of the importance of environmental stewardship. In addition, this initiative has enabled the University to leverage its resources to reduce its annual campus energy consumption. Further reductions through campus operational energy efficiency projects will include those listed below.

Baseline Measure
- Current conditions and energy consumption data and modeling results.

Target
- Accomplishments of the set goals.

Performance Indicator
- Measurement and verification of results confirming anticipated savings.

Risks and challenges
- Risk - Unforeseen possible construction project constraints or funding complications during the various stages of the projects.

Milestones to be accomplished and schedule
- Complete construction phase of the energy retrofit project at Biotron building (annual savings of $446,000 with 13.7 year payback) in FY14.
- Complete construction phase of the lighting retrofit phase II (annual savings of $282,000 with 12.8 year payback) in FY14.
- Substantially complete construction phase of the TURN (Tunnel Upgrade and Refurbishment Now) phase II project (annual savings of $122,000 with 20 year payback) in FY14.
- Start construction phase of the energy retrofit project at Vet Med (annual savings of $361,000 with payback of 10.5 years) in FY14.
- Start construction phase of the energy retrofit project at Bock Labs project (annual savings of $202,000 with 10.7 year payback) in FY14.
- Start the design process and start construction (assuming funding gets approved by DFD) for energy retrofit project at WIMR (annual savings of $70K with 7.8 year payback) in FY14.
- Complete the design process and start construction (assuming funding gets approved by DFD) for energy retrofit at Waisman Center (annual savings of $216K with 10.4 year payback) in FY14.
- Complete cost estimating for the McArdle Lab (annual savings of ~$260,000) and Russell Laboratories (annual savings of ~230,000) and engage DFD in scope, cost, and funding discussions in FY14.
- Work with DFD on scope, cost, and funding for a comprehensive Chilled Water System Optimization project (annual savings of $2.8 million with 10 year payback) in FY14.

Action Plan to overcome barriers and take advantage of opportunities
- Keeping close working relationships with UWSA and DFD staff and coordination of the projects with building occupants.

Section 4: FP&M Strategic and Operational Priorities – Summary Chart [Note: Highlighted Goals are new for FY 2014]

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Process Improvement	1: Provide all employees with annual performance reviews that include a development plan.	Performance evaluations are not required for LTE or student employees. A variety of formats is employed for documenting performance reviews. Evaluations are not competency based.	Performance evaluations are completed for 100% of staff. EID competencies will be included in FY 2014-2015 performance review cycle.	TBD
Process Improvement	2: Develop and disseminate FP&M policies and procedures.	FP&M currently lacks a codified process of policy development; policies and procedures are not formatted and tracked consistently; and, policies are not readily available to staff.	Policies and procedures are written in plain, easily understandable langue; are communicated across the entire organization via a variety of media; and, polices are reviewed and updated on a regularly scheduled basis.	TBD

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Process Improvement	3: Refine key indicators to measure and improve services.	Key indicators have been established for all FP&M Departments; 32 metrics are shared and updated on a quarterly basis with the VCFA.	Data is updated on a scheduled basis as appropriate; Staff responsible for engaging in service delivery is engaged in capturing, tracking, and adjusting key indicators respective to their areas of responsibility.	TBD
Process Improvement: Technology	4: Update and launch a new website for FP&M.	Two departments have implemented new websites using the new DoIT CMS package; the FP&M website is externally focused with limited resources for employees.	Complete re-design of the FP&M website to align with the VCFA website. All departments have a consistent, user-friendly design; the website includes an intranet to facilitate communication with employees;	TBD
Resource Stewardship	5: Provide project management services for capital projects.	Budgets schedule and specifications established by construction documents and contractor's bid.	Complete projects to required quality, on budget and on schedule.	TBD

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Resource Stewardship	6: 2005 Campus Master Plan on-going implementation.	Number of major projects and overall goals completed annually.	6 projects to begin planning & design development; and, 7 projects are expected to be completed.	TBD
Resource Stewardship	7: Improve stormwater management on campus.	566 acres of pervious area (66%) and 283 acres of impervious area (34%).	Increase pervious areas to 70% and decrease impervious areas to 30% by 2015.	TBD
Resource Stewardship: Sustainability	8: Advance UW Builds Green program.	LEED Silver certification. Divesting of surplus property.	Nine projects are seeking LEED certification.	TBD
Process Improvement	9: Redesign of the parking permit renewal process…	Employee parking requests are prioritized, offered, approved, and accepted annually.	Reduce overall parking permit renewal time by 70%; reduce TS administrative costs; Improve overall customer satisfaction.	TBD
Resource Stewardship	10: Design and construction of the UW Hospital parking Ramp 75 Expansion.	Current parking structure at 95% capacity; and, the project is at 10% design.	Complete the project design by March 31, 2014; and, eventually complete the construction project adding 700 new spaces at a cost of $29,085,000.	TBD

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Process Improvement	11: Improvements to the campus bus service	No service adjustments or rate changes were made during FY 13.	Have an approved written agreement with ASM by Feb 1, 2014; implement Metro service changes by September 1, 2014.	TBD
Process Improvement	12: Complete beta-test of biosafety's ARROW project initiative and develop training tools for PIs.	Current IBC protocol application is a paper process. Data from the tracking database is not readily available to PIs. PIs are required to reenter background information for each protocol.	Reduce time required by PIs for data entry; increase efficiency in development of IBC protocols; automate the manual process; wider availability of information/data; and, establish a centralized protocol database.	TBD

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Process Improvement	13: APR Initiative for Occupational Health and Environmental health	Customers are currently confused around which services are provided by which unit; and, redundant and inconsistent service models	Clarity of UHS and EHS roles and responsibilities; increased industrial hygiene capacity; and improved information transfer between Occupational health and Occupational Medicine.	TBD
Process Improvement and Resource Stewardship	14. College of Engineering Pilot Study – Instructional Space	Inventory of attributes maintained for general assignment classroom space; frequency and scope of attribute maintenance; and, access to instructional space attribute data by campus users	Provision instructional space inventory data to campus users and instructional space scheduling system(s). Recognition of Space Management as the responsible unit for the "gold standard" inventory data. Improved process for collecting, maintaining and provisioning instructional space inventory data.	TBD

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Process Improvement and Resource Stewardship	15: College of Engineering Pilot Study – Instructional Space Utilization	Current weekly contract hours (WSCH) taught in the CoE; COE instructional space inventory.	Creation of an optimized, sustainable academic schedule for the College of Engineering. Acceptance of sustainable approach within College of Engineering. Application of College of Engineering processes and findings to campus instructional space policy and processes.	TBD

Process Improvement and Resource Stewardship	16: Collaborate with Educational Innovation groups to develop a learning space improvement plan.	Number and type of classroom renovation projects completed through the UW System; Current inventory of collaborative, flexible learning spaces; and, current utilization rates for classrooms with instructional technology.	Increased interaction with Educational Innovation groups. Comprehensive learning space improvement plan. Coordination and acceptance of learning space improvement plan by UW System.	TBD
Process Improvement and Resource Stewardship	17: Extend the access to university facilities and related data via INSITE to FP&M units and campus administrative users.	Inventory of FP&M users with access to facilities data via INSITE; Inventory of campus administrative users with access to facilities data via INSITE; and, inventory of facilities data residing in INSITE.	Increased value of facilities and related data in analysis and decision-making. Expand consultative role of Space Management to campus administration, deans and departments.	TBD

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Process Improvement	18: Re-energize the Physical Plant safety program	Inconsistent level of safety training for new and existing employees.	Create a "Culture of Safety" across all areas of Physical Plant; and, ensure that all employees have adequate training to complete their work in a safe, yet efficient, manner.	TBD
Resource Stewardship	19: Advance WE CONSERVE.	Current conditions and energy consumption data and modeling results.	Accomplishment of specific project goals.	TBD