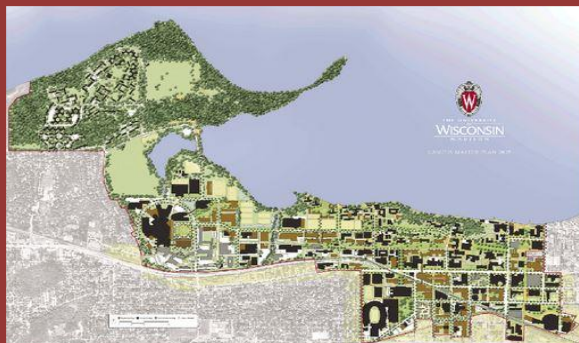




Facilities Planning & Management

Annual Report – 2014

Providing excellence in facilities and services for our university community



This annual report is organized into four sections:

Section 1: Division 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: VCFA Strategic Priorities and FP&M Strategic and Operational Priorities – Summary Chart

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 six core departments in addition to the Office of the Associate Vice Chancellor:

- 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 People Centered by being inclusive, engaged, diverse and customer-focused.
- We promote Stewardship through sustainable, effective and efficient use of resources.
- We promote Integrity by building trust, respect and accountability.
- We support Innovation and Discovery through continuous learning and improvement.
- We promote Safety, ensuring a safe and healthy campus environment.

Departments:

Office of the Associate Vice Chancellor (AVC)

The Office of the Associate Vice Chancellor 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. Staff 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.

Section 2: VCFA Strategic Priorities

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

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

Description

FP&M developed an EID Plan written by its EID team in response to the 2012 EID survey. The team identified the following three goals as their priorities for FY14:

- Build a common understanding and commitment to the FP&M mission, vision and core values.
- Build a common understanding across FP&M of Engagement, Inclusion and Diversity.
- 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 worked to accomplish goals identified in those plans.

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.

Target Performance Indicator

- In general, target was to increase favorable responses in the 2014 EID survey.

Risks & Challenges

- Challenge – Given the size of FP&M’s workforce, it has proven challenging to coordinate and align goals/initiatives/plans/actions across the organization.
- Challenge – Communication across a large, complex, distributed, diverse organization.

Milestones Accomplished

- THE FP&M-WIDE EID PLAN HAS BEEN CREATED AND SHARED WITH ALL STAFF VIA STAFF GATHERINGS.
- FP&M MISSION, VISION AND CORE VALUES STATEMENTS HAVE BEEN SHARED WITH ALL STAFF AND ARE REGULARLY INTEGRATED INTO ALL COMMUNICATIONS.
- PHYSICAL PLANT CONDUCTED A SERIES OF OVER 50 LISTENING SESSIONS WITH ALL ITS EMPLOYEES AND HAS GATHERED ADDITIONAL “BASELINE” DATA FROM WHICH IT IS USING TO FURTHER DEVELOP THE PHYSICAL PLANT DEPARTMENTAL EID PLAN.

Next Steps & Future Opportunities

- As individual departments developed their EID plans, it quickly became apparent that there were a number of common themes that could be better addressed on a division-wide level. Plans and overall strategy will be updated accordingly once 2014 results are available.

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

Description

Overall, the response rate to the 2012 FP&M EID survey was 40% and there was significant variability in participation across the organization. For example, the response rate in Custodial Services was 29% and the response rate for employees identifying as Hispanic was only 8%, which highlighted the need to make the 2014 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 2012 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 Performance Indicators

- Show an increased response rate over time, with a goal of achieving an 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)
- 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 shared with all employees and is displayed in a useful manner that can be understood by all staff.

Risks & Challenges

- Challenge – Many FP&M 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 Accomplished

- RESULTS OF THE 2012 SURVEY HAVE BEEN SHARED WITH ALL FP&M STAFF. WITHIN PHYSICAL PLANT, THIS WAS ACHIEVED BY HAVING EXECUTIVE DIRECTOR ROB LAMPPA MEET WITH EACH WORK GROUP INDIVIDUALLY TO TALK ABOUT THE SURVEY AND HEAR EMPLOYEE COMMENTS AND CONCERNS. IN TOTAL, THIS REPRESENTED MORE THAN 50 INDIVIDUAL MEETINGS CONDUCTED ACROSS THREE SHIFTS.
- IN ORDER TO IMPROVE 2014 RESPONSE RATES, THE FP&M EID TEAM HOSTED SIX SURVEY-TAKING SESSIONS FOR THE 830 EMPLOYEES WHO RECEIVED PAPER VERSIONS OF THE SURVEY. THESE SESSIONS TOOK PLACE AT DIFFERENT TIMES TO ACCOMMODATE 1ST, 2ND, AND 3RD SHIFT EMPLOYEES AND INCLUDED TRANSLATION SERVICES.
- WHILE THE FINAL RESPONSE RATE FOR THE 2014 SURVEY IS NOT YET KNOWN, THE INITIAL RESPONSE RATE AMONG PAPER SURVEY RESPONDENTS ALREADY FAR EXCEEDS 2012 (74.3% AS OF 7/31/14 COMPARED TO 40% OVERALL IN 2012).

Next Steps & Future Opportunities

- Results of the 2014 survey will be shared with all employees in a timely fashion this fall in order to gain employee buy-in.
- FP&M EID plans will be updated to reflect the 2014 survey results.

Goal 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 2012 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 Performance Indicators

Reporting:

- FP&M gender and heritage data should be 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.
- Recruitment plans reference gender and heritage data.
- Trends in gender and heritage data tracked over time.

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.
- Plan (including scope, schedule, budget and resource identification) developed for pilot programs.

Risks & 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.

Barriers to Success

- Progress on gender and heritage reporting remains TBD due to six-month vacancy in FP&M deputy position and competing priorities within both FP&M and OHR.

Milestones Accomplished

- Gender and heritage data provided by OHR – TBD. **STATUS: GENDER & HERITAGE REPORTING IS CURRENTLY ON HOLD.**
- Gender and heritage data reviewed by Leadership Team annually, at minimum.
- Gender and heritage data posted to FP&M intranet – TBD.
- Development of an implementation plan for a pilot apprenticeship/internship program in Physical Plant – July 1, 2014. **STATUS: PLANNING UNDERWAY WITH GOAL TO LAUNCH PILOT IN FY15.**
- Development of an implementation plan for a pilot internship program in Environment, Health and Safety – July 1, 2014. **STATUS: PROPOSAL IS WRITTEN AND WAS RECENTLY APPROVED BY AVC.**

Next Steps & Future Opportunities

- Revisit gender and heritage data needs with OHR in FY15.
- Once FP&M data is available, post to the re-designed FP&M website.
- Launch pilot apprenticeship/internship programs in EH&S and Physical Plant
 - Enlist potential partners (e.g. OHR, Urban League, Madison College, and Trades Unions).
 - Establish scope, schedule, resources and develop project charter for pilot.
 - Identify resources to assist with development of program.

Goal 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 builds 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.

Baseline Measure

- Gender and heritage data has not been available for applicant pools historically.
- 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 Performance Indicators

- 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.
- 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 & 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 Accomplished

- Leadership Team to establish policy for composition of search and screen committees and interview panels – September 1, 2013. **STATUS: DELAYED DUE TO DEPUTY AVC POSITION VACANCY. CURRENTLY IN PROGRESS.**
- Model recruitment plan developed using the Deputy Associate Vice Chancellor position – September 1, 2013. **STATUS: COMPLETE.**
- Leadership team establishes a standard for interview protocol: behavior based interview questions, benchmarks – October 1, 2013. **STATUS: DELAYED DUE TO DEPUTY AVC POSITION VACANCY. CURRENTLY IN PROGRESS.**
- Recruitment plans for manager/supervisor positions are shared and discussed at Leadership Team meetings, approved by the Associate Vice Chancellor or designee. **STATUS: THIS PROTOCOL WAS FOLLOWED FOR THE RECRUITMENT FOR THE DIRECTOR OF UTILITIES IN THE PHYSICAL PLANT DEPARTMENT.**
- Model recruitment plan approved and implemented by Leadership Team – November 1, 2013. **STATUS: PROTOCOL CURRENTLY BEING FOLLOWED FOR MANAGER/SUPERVISOR POSITIONS.**

Barriers to Success

- The six-month vacancy in the Deputy position resulted in slowed progress on this goal.

Next Steps & Future Opportunities

- Update FP&M protocols based on VCFA diversity recruitment training workshop. Fall 2014.
- Formalize written protocols into policy.
- Train FP&M managers on policy and monitor for compliance.

Goal 1e: Continue to increase employee diversity at manager/supervisor levels.

Description

This goal focuses 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 Performance Indicators

- 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%.
- Gender and heritage data by employment categories provided by OHR.

Risks & Challenges

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

Barriers to Success

- The six-month vacancy in the Deputy position resulted in slowed progress on this goal.

Milestones Accomplished

- Leadership Team to establish policy for composition of search and screen committees and interview panels – September 1, 2013. **STATUS: DELAYED DUE TO DEPUTY AVC POSITION VACANCY. CURRENTLY IN PROGRESS.**
- Model recruitment plan approved and implemented by Leadership Team – September 1, 2013. **STATUS: IN PROGRESS.**
- Model recruitment plan developed using the Deputy Associate Vice Chancellor position – September 1, 2013. **STATUS: FOLLOWED FOR THE RECRUITMENT OF THE DIRECTOR OF UTILITIES & ENGERGY MANAGEMENT.**
- 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. **STATUS: COMPLETE FOR DEPUTY AVC SEARCH COMMITTEE.**
- **CREATED A RECRUITMENT PLAN FOR THE DEPUTY AVC POSITION:**
 - Plan reviewed by FP&M Leadership Team and approved by AVC.
 - Bias Literacy training provided by WISELI.
 - Results were analyzed at various stages of recruitment: diversity of applicant pool, interview candidates, finalists, and person hired. **FINALISTS FOR POSITION OF UTILITY DIRECTOR REFLECTED A DIVERSE CONSTITUENCY.**

Next Steps & Future Opportunities

- Establish a formal FP&M policy for composition of search and screen committees and interview panels using the model established with Deputy and Utilities Director searches – Fall 2014.
- Ensure department directors, human resources staff, and hiring managers participate in VCFA Diversity Recruiting training – Fall 2014.

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

Description

FP&M currently requires that all permanent staff receive an annual performance review. Discussion of development goals is a standard component of the performance review form. This goal focuses 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 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 provided 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:
 - We are People Centered by being inclusive, engaged, diverse and customer-focused.
 - We promote Stewardship through sustainable, effective and efficient use of resources.
 - We promote Integrity by building trust, respect and accountability.
 - We support Innovation and Discovery through continuous learning and improvement.
 - We promote Safety, ensuring a safe and healthy campus environment.

Target Performance Indicators

- 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.
- 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 Accomplished

- **FP&M SUPERVISORS AND MANAGERS WHO ARE ACCOUNTABLE FOR LEARNING THESE COMPETENCIES HAVE BEEN IDENTIFIED AND NOTIFIED OF OHRD TRAININGS AND A MECHANISM IS IN PLACE TO TRACK PARTICIPATION.**

- NEXT STEPS ARE ON HOLD PENDING LAUNCH OF VCFA EID TRAINING WORKSHOPS – AUGUST 2014.

Next Steps & Future Opportunities

- Following VCFA EID training, the new EID competencies will be integrated into the 2014-15 performance evaluations for all FP&M supervisors and managers.

VCFA Strategic Priority 2: Student Leadership Development (WiGrow)

Goal: Pilot WiGrow Initiative in FP&M.

Description

FP&M piloted the WiGrow program with three 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 and 33 students in the SAFE program. This allowed 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 allowed us to assess the success and relevancy of WiGrow to a variety of students. Participation in this initiative required 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

- Three pilot groups identified for WiGrow.
 - Transportation Services Booths – 24 students.
 - Transportation Services SAFE – 33 students
 - Campus Planning and Landscape Architecture – 3 students.

Target Performance Indicators

- Implementation plan developed and included in the WiGrow toolkit.
- 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.
- Assessment of learning outcomes for students enrolled 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 & 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 Accomplished

- Establish pilot groups – July 1, 2013.
- WiGrow Train the Trainer completed – August 2013. **STATUS: COMPLETED.**
- FP&M WiGrow coordinator, supervisors and directors provide orientation to WiGrow for participating students – September 2013. **STATUS: COMPLETED.**
- Fall Semester focused discussions complete – October and December. **STATUS: COMPLETED.**
- Evaluation of focused discussion questions/responses by Student Employment Team. **STATUS: COMPLETED.**
- Collect and report WiGrow performance metrics for structured conversations. **STATUS: COMPLETED.**
- Administer standardized instrument for learning outcome assessment – April 2014. **STATUS: COMPLETED.**
- Student evaluations for pilot groups completed – May 2014. **STATUS: COMPLETED.**
- Evaluation of WiGrow by supervisors and students – May 2014. **STATUS: COMPLETED.**
- Decision about adjustment to program, expansion to other FP&M units in FY15 – June 2014. **STATUS: IN DEVELOPMENT BY WIGROW OVERSIGHT TEAM.**
- FP&M planning meeting – Completed July 26, 2013:
 - Identified skills students will be expected to develop in specific jobs.
- FP&M Coordinator and Training Officer participate in WiGrow orientation in August 2013. **STATUS: COMPLETED.**
- 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. **STATUS: COMPLETED.**
- Semester I - Supervisors conduct focused discussions – October and December 2013. **STATUS: COMPLETED.**
- 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. **STATUS: COMPLETED.**
- Review/evaluation of responses to focused discussions by supervisors, directors, FP&M WiGrow coordinator. **STATUS: IN DEVELOPMENT BY WIGROW OVERSIGHT TEAM.**
- Conducted performance reviews with all students in pilot group.

Next Steps & Future Opportunities

- Conduct final assessment of WiGrow pilots (supervisors, students, directors).
- Adjustment to program, expansion to other FP&M units in FY15. **STATUS: PLANNED ROLL OUT FOR ALL FP&M STUDENTS IN FALL 2015.**

VCFA Strategic Priority 3: Resource Stewardship Through Process Improvement

Goal: 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. **THE SCOPE WAS REVISED IN APRIL 2014 TO ELIMINATE UTILITY BILLING AND THE BILLING PROCESSES INTERNAL TO DEPARTMENTS PRIOR TO THEM SENDING TO FP&M BILLING PROCESS.**

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 Performance Indicators

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

- Identification of team members and training needs, if any. **STATUS: COMPLETED JANUARY 2014**
- Approved project charter – November 1, 2013. **STATUS: COMPLETED JANUARY 2014**
- Implementation plan, including communication plan, approved. **STATUS: AS OF JUNE 2014, THE PROCESS HAS BEEN MAPPED, BASELINE METRICS COLLECTED, AND VOICE OF CUSTOMER IS IN PROCESS BUT SURVEY DATA NOT ANALYZED. IMPLEMENTATION PLAN IS PROJECTED TO BE COMPLETE BY SEPTEMBER 2014.**
- Metrics established and populated. **STATUS: AS OF JUNE 2014, BASELINE METRICS COLLECTED BUT IMPROVEMENTS HAVE NOT BEEN IDENTIFIED OR IMPLEMENTED.**

Barriers to Success

- Given scope and complexity, this project may need to be phased in over multiple fiscal years.

Next Steps & Future Opportunities

- Obtain Voice of Customer data and analyze survey data – September 2014.
- Develop implementation plan – September 2014.
- Determine schedule for implementation.

Section 3: FP&M Strategic and Operational Priorities

The goals presented in this section of the annual report represent those goals 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 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 Performance Indicators

- 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.
- Random check of quality of performance reviews.

Risks & 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 Accomplished

- Approval of format for forms. **STATUS: ON HOLD DUE TO DEPUTY VACANCY BEGINNING IN OCTOBER 2013.**
- Training for supervisors. **STATUS: PROVIDED ELECTRONICALLY FOR 2014.**
- **AS OF JULY 31, ALL FP&M PERMANENT STAFF RECEIVED A PERFORMANCE EVALUATION FOR 2013-14.**

Barriers to Success

- Competing priorities and staff vacancies slowed progress on this goal.

Next Steps & Future Opportunities

- Phase I – Focus on exempt positions (e.g. manager/supervisor/professional)
 - 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.
 - 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 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 Performance Indicators

- 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.
- Managers/supervisors are 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 Accomplished

- An approved process for identifying need, drafting policy and procedures, soliciting input, finalizing and communicating policies and procedures – September 2013. **STATUS: A POLICY TO DETERMINE PROCESS FOR DRAFTING POLICIES HAS BEEN ESTABLISHED AND APPROVED BY LEADERSHIP TEAM IN MAY 2014.**
- Gain organizational buy-in: **CROSS-FUNCTIONAL FP&M POLICY ADVISORY REVIEW GROUP ESTABLISHED JUNE 2014.**
- An approved policy/procedure template for FP&M – September 2013. **STATUS: THE TEMPLATE WAS APPROVED AND IS CURRENTLY BEING UTILIZED.**
- A prioritized list of HR policies for development - September 2013. **STATUS: A LIST OF POLICIES WAS DEVELOPED AND PLACED IN PRIORITY ORDER ALLOWING FOR FLEXIBILITY IF THERE IS A NEED TO ADJUST. AS OF JUNE 2014, 2 POLICIES HAVE BEEN FINALIZED, FIVE MORE ARE BEING REVIEWED FOR FINAL APPROVAL BY THE POLICY ADVISORY REVIEW GROUP, AND 38 ADDITIONAL POLICIES ARE IN DEVELOPMENT.**
- Staff person assigned to develop process, template and draft policies –**STATUS: COMPLETE.**

Next Steps & Future Opportunities

- Now that the Deputy is on board, monthly meetings of the Policy Advisory Review Group have been set to ensure progress continues at a timely pace.
- Policies developed and communicated – On-going.

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

COMPLETED

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 Performance Indicators

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

Risks & 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 Accomplished

- Departmental key indicators shared at Leadership Team meetings. **STATUS: COMPLETE.**
- Key indicators regularly reviewed and discussed on a quarterly basis. **STATUS: COMPLETE.**

Next Steps & Future Opportunities

- Continue to refine key performance indicators and refine reporting schedule.
- Communicate key indicators on FP&M website.
- Share a subset of key indicators with VCFA Bazzell on a quarterly basis.

Goal 4: Update and launch a new FP&M website

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 FP&M departments, Capital Planning & Development and Environment, Health & Safety, 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 Performance Indicators

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

Risks & 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 Accomplished

- Review of existing websites by AVC – completed July 2013.
STATUS: COMPLETED SEPTEMBER 2013.
- Capital Planning and Development re-designed website launched July 2013.
STATUS: COMPLETED JULY 2013.
- Environment, Health and Safety re-designed website launched September 2013.
STATUS: COMPLETED OCTOBER 2013.
- Communication Specialist hired October 1, 2013
STATUS: COMPLETED JANUARY 2014.
- FP&M website committee formed November 1, 2013.
STATUS: IN PROGRESS, AS OF JUNE 30 COMMITTEE MEMBERS ARE BEING IDENTIFIED SINCE COMMUNICATIONS SPECIALIST WAS HIRED IN JANUARY 2014.
- FP&M homepage – go live April 2014.
STATUS: IN PROGRESS. ESTIMATED GO LIVE DATE SEPTEMBER 2014.
- FP&M intranet – go live September 2014.
STATUS: IN PROGRESS. ESTIMATED GO LIVE DATE SEPTEMBER 2014 .TO BE ROLLED OUT IN CONJUNCTION WITH FP&M HOME PAGE.
- All FP&M websites re-designed using CMS – TBD.
STATUS: IN PROGRESS. FP&M DEPARTMENT WEBSITE PROJECTS HAVE BEEN SET UP WITHIN THE CMS TOOL. SITE HEADERS FOR EACH SITE HAVE BEEN CREATED. DEPARTMENTS ARE IN THE PROCESS OF REVIEWING CONTENT ON CURRENT SITES AND REMOVING ITEMS THAT ARE NO LONGER VALID. ROLL-OUTS ESTIMATED TO BEGIN IN FIRST QUARTER OF 2015.
- FP&M business portals re-designed – July 2015.
STATUS: DESIGN OF PORTALS YET TO BE DETERMINED.

Barriers to Success

- Limited staff resources and competing priorities (including EID initiatives) have resulted in slowed progress in some aspects of the project.

Next Steps & Future Opportunities

- Create a FP&M website committee team with representation from each department to participate in the on-going website re-design initiative.
- Continue to build out content on FP&M main site as well as FP&M Intranet site.

Goal 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). **STATUS – CONSTRUCTION COMPLETE JULY 2013.**
- Carson Gulley Renovation – complete construction July 2013 (\$10M). **STATUS – CONSTRUCTION COMPLETE JUNE 2013.**
- Goodman Softball Complex – complete construction July 2013 (\$3.5M). **STATUS – CONSTRUCTION COMPLETE JULY 2013.**
- Lakeshore Residence Hall Phase II (Aldo Leopold Residence Hall) – complete construction Aug 2013 (\$17.4M). **STATUS – CONSTRUCTION COMPLETE JUNE 2013.**

- Gordon Dining & Event Center (site) – complete construction Aug 2013 (completes the \$41.3M total project). **STATUS – CONSTRUCTION (SITE WORK) COMPLETE JUNE 2014.**
- Linden Drive Branch Steam Repairs - construction complete Sept 2013 (\$650K). **STATUS – CONSTRUCTION COMPLETE NOVEMBER 2013.**
- Telecommunications Phase III – complete construction Sept 2013 (\$1.4M). **STATUS – CONSTRUCTION COMPLETE DECEMBER 2013.**
- ITIP Classroom Renovation Projects – complete construction Sept 2013 (\$1.2M). **STATUS – CONSTRUCTION COMPLETE JANUARY 2014.**
- Langdon Street Utility Tunnel Replacement – complete construction Oct 2013 (\$4.8M). **STATUS – CONSTRUCTION COMPLETE NOVEMBER 2013.**
- Highland Avenue Reconstruction – complete construction Oct 2013 (\$698K). **STATUS – CONSTRUCTION COMPLETE NOVEMBER 2013.**
- Student Athlete Performance Center – complete construction Dec 2013 (\$86.2M). **STATUS – CONSTRUCTION COMPLETE DECEMBER 2013.**
- Wisconsin Institutes for Medical Research Phase II – complete construction Dec 2013 (\$134.8M). **STATUS - CONSTRUCTION COMPLETE NOVEMBER 2013.**
- Charter Street Heating Plant Upgrades – complete construction Dec 2013(\$140M). **STATUS – CONSTRUCTION COMPLETE DECEMBER 2013.**
- General Library Storage Facility – complete construction Jan 2014 (\$1.7M). **STATUS – CONSTRUCTION COMPLETE APRIL 2014.**
- Signe Skott Cooper Hall – complete construction Apr 2014 (\$52.9M). **STATUS – CONSTRUCTION COMPLETE APRIL 2014.**
- Memorial Union Phase I – complete construction May 2014 (\$55.2M). **STATUS – CONSTRUCTION COMPLETE MAY 2014.**

Planning/Design Complete by 6/30/2014

- Babcock Hall Dairy Plant Renovation & Addition – complete construction documents May 2015 (\$31.9M). **STATUS – COMPLETE CONSTRUCTION DOCUMENTS MAY 2015.**
- Camp Randall Memorial Shell Renovation/Reconstruction – complete planning study Nov 2013 (\$100K). **STATUS – PLANNING STUDY COMPLETED JANUARY 2014.**
- Chemistry Building Addition – complete 10% Concept Report in spring 2014 (\$103.5M). **STATUS – COMPLETE 10% CONCEPT REPORT FALL 2014.**
- Dayton Street Utility Extension project (pre-planning) – complete bidding May 2014 (\$3.1M). **STATUS – BIDDING COMPLETE AUGUST 2014.**
- Elizabeth Waters Hall Renovation – complete bidding of Phase I Dec 2013 (\$10.1M). **STATUS – BIDDING COMPLETE DECEMBER 2014.**
- Engineering Hall Structures Lab Addition (pre-planning) complete A/E Selection July 2014 (\$1.6M). **STATUS – COMPLETE A/E SELECTION IN OCTOBER 2014.**
- Hospital Parking Ramp Expansion – complete bidding May 2014 (\$29.1M). **STATUS – BIDDING COMPLETE MARCH 2015.**
- Meat Science and Muscle Biology Building – (\$43M). **STATUS – COMPLETE CONSTRUCTION DOCUMENTS FEBRUARY 2016.**
- Memorial Union, Phase II & Alumni Park – TBD (\$42M). **STATUS – COMPLETE CONSTRUCTION DOCUMENTS DECEMBER 2014.**
- Recreational Sports Master Plan Update – complete planning by Dec 2013 (\$185K). **STATUS – PLANNING COMPLETE IN JANUARY 2014.**
- University Houses Redevelopment – complete bidding Feb 2014 (\$15M). **STATUS – BIDDING COMPLETE MARCH 2014.**

- UW Police Department Addition (pre-design) – complete A/E Selection July 2014 (\$4.8M). **STATUS – COMPLETE A/E SELECTION NOVEMBER 2014.**
- West Campus Cogeneration Facility Chiller Addition – complete bidding March 2013 (\$67.6M). **STATUS – BIDDING COMPLETE, CONSTRUCTION TO BE COMPLETE JANUARY 2015.**
- Witte & Sellery Hall Renovations – (\$47M). **STATUS - COMPLETE CONSTRUCTION DOCUMENTS NOVEMBER 2016.**
- Elvehjem Building Renovations (pre-planning) TBD (\$150K).
- ROTC facility (pre-planning) – TBD (\$185K).
- Walnut Street Greenhouses, Phase II (pre-planning) TBD (\$100K).

Next Steps & Future 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 level.

Goal 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 **STATUS: IN DESIGN DEVELOPMENT.**
- Alumni Park **STATUS: IN DESIGN DEVELOPMENT.**
- Chemistry Instructional Facilities Expansion **STATUS: WAITING FOR A/E CONTRACT TO BEGIN DESIGN.**
- Babcock Hall Dairy Plant Expansion **STATUS: IN SCHEMATIC DESIGN.**
- Recreational Sports Facilities Master Plan Update **STATUS: COMPLETED.**
- College of Engineering Facilities Master Plan **STATUS: IN PROGRESS.**
- Tandem Press Addition **STATUS: PROJECT ON HOLD.**

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 & 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 Accomplished

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. **STATUS: SUBSTANTIALLY COMPLETE. OCCUPANTS MOVING IN AUGUST 2014.**
- Carson Gulley Renovation, July 2013. **STATUS: COMPLETED.**
- Charter Street Heating Plant Upgrades, December 2013. **STATUS: COMPLETED.**
- Lakeshore Residence Hall - Phase II, August 2013. **STATUS: COMPLETED.**
- Robert and Irwin Goodman Softball Complex, July 2013. **STATUS: COMPLETED.**
- Student Athlete Performance Center, December 2013. **STATUS: COMPLETED.**
- WIMR – Phase II, December 2013. **STATUS: COMPLETED.**

Next Steps & Future 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 7: Improve storm water 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 Performance Indicators

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

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

Milestones Accomplished

- Update storm water model and analysis for entire campus – January 1, 2014.
STATUS: DELAYED. THE UPDATED MODEL AND ANALYSIS WILL BE PART OF THE 2015 CAMPUS MASTER PLAN UPDATE.
- Review and recommend changes to major capital improvement projects to assure storm water management is being considered and impervious areas are reduced.
STATUS: ON-GOING ON ALL MAJOR PROJECTS.

Next Steps & Future Opportunities

- Continue to monitor major projects during design and construction to assure best management practices are used to manage and reduce stormwater impacts.

Goal 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.

Target Performance Indicators

- Leadership in Energy and Environmental Design (LEED) – Silver certification.
- Successful LEED certification.
- Adherence to the principles of sustainability included in the Division of Facilities Development (DFD) Sustainability Guidelines.

Risks & 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). **STATUS – CERTIFIED LEED SILVER FEBRUARY 2014.**
- Student Athlete Performance Center, McClain Center – Tracking LEED Silver (certification expected November 2013). **STATUS – CERTIFIED LEED SILVER AUGUST 2013.**
- Wisconsin Energy Institute – Tracking LEED Gold (certification expected November 2013). **STATUS – CERTIFIED LEED GOLD MAY 2014.**
- Aldo Leopold Residence Hall – Tracking LEED Silver (certification expected March 2014). **STATUS – CERTIFIED LEED GOLD SILVER JULY 2014.**
- Wisconsin Institutes for Medical Research Phase II – Tracking LEED Silver (certification expected April 2014). **STATUS – CERTIFICATION EXPECTED SEPTEMBER 2014.**

Next Steps & Future Opportunities

- Incorporate LEED/Sustainability discussions into design meetings. This ensures that the entire project team understands the sustainability goals of the project.

Goal 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 processing power, storage space, and 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 departmental costs by reducing role of Unit Transportation Coordinator functions (reduce resource need by 50%)
- Reduce Transportation Services administrative costs to manage the process (reduce by 40%)

Performance Indicators

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

Risks & Challenges

- Transfer of decision making – a renewal policy will take decision making authority away from Department management and shift it to Transportation Services.
- Need for an exceptions policy to manage replacement of key personnel, departmental moves, loss of space due to construction and sabbaticals.
- Challenge to convince Departments of the benefit of most of their staff using a faster, more efficient process as a trade-off for diminished decision making role.
- Communicating a changed role for the UTC's -- more of a communication liaison with a reduced commitment of resources
- Integration of new process into software programs and processes
- Time frame

Milestones Accomplished (2013)

- Implemented T2 Flex software and Access Revenue and control system
- Identified data needs and developed draft outreach process

Milestones Accomplished (2014)

- HIRED TECHNICAL EXPERT WITH EXTENSIVE EXPERIENCE IN T2 FLEX TO LEAD DEVELOPMENT OF RENEWAL SYSTEM.
- MET WITH TS STAFF AND COLLECTED DATA ON PERMIT SALES STATISTICS, RESOURCES EXPENDED ON CURRENT PROCESS AND SURVEYED CUSTOMERS.
- MET WITH MAJOR STAKEHOLDER GROUPS ON CAMPUS TO DISCUSS THE PROCESS AND OBTAIN FEEDBACK SO CONCERNS CAN BE ADDRESSED.
- DETERMINED NEED FOR TEST PROCESS AND TO PUSH BACK FULL IMPLEMENTATION TO 2015-2016 PARKING SEASON.

- DEVELOPED AND TESTED TEST PROCESS AND IDENTIFIED SAMPLE GROUP.
- DEVELOPED INVITATION MATERIALS AND SOLICITED PARTICIPANTS. TESTING OCCURRED IN JUNE 2014.
- DISCUSSIONS HELD WITH OHIO UNIVERSITY, ARIZONA STATE UNIVERSITY, TEXAS A&M, AND UNIVERSITY OF VIRGINIA TO REVIEW DIFFERENT POLICIES/PROCEDURES.
- IDENTIFIED NEED FOR CUSTOM WORK WITH T2 TO UPDATE CUSTOMER IMPORT DATA.
- WORKING WITH DOIT ON CUSTOMER IMPORT FILE TO IMPROVE ACCURACY FOR DETERMINING ELIGIBILITY FOR PERMITS AND PAYMENT PLANS.
- IDENTIFIED LIST OF CUSTOM CHANGES NEEDED FOR T2 SOFTWARE TO IMPLEMENT RENEWAL PROCESS.
- BEGAN WORKING WITH T2 ACCOUNT MANAGER TO SCOPE AND IMPLEMENT CUSTOM CHANGES.

Barriers to Success

- Lack of acceptance of new process that reduces current decision making of departments and substantially changes process to obtain parking on campus
- Customer understanding and acceptance of new process
- Potential software or data integration issues
- Other major policy changes on campus that take precedence over process change

Next Steps & Future Opportunities

- Summer 2013 -- Begin data collection and identification of software needs
 - COMPLETED.
- Fall 2013 -- Begin development of policy options
 - ON-GOING – CONTINUE IN FY15.
- Winter 2013/2014 -- Develop policy options and share with stakeholders
 - ON-GOING – CONTINUE IN FY15.
- Winter 2013 – obtain approval to implement new process
 - NOT COMPLETED.
- Spring/Summer 2104 – implement new process
 - NOT COMPLETED.

Goal 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.

Target Performance Indicators

- Complete structure design by March 31, 2014.
- Add 700 spaces to existing facility at a cost of \$29,085,000.
- Milestones to be achieved within 30 days of scheduled date.
- Conduct monthly construction coordination meetings with UW Hospital Administration.

Risks & 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 Accomplished

- Agency Request – September 27, 2013. **COMPLETED: SEPTEMBER 2013.**
- State Building Commission approval – December 2013. **STATUS: APPROVED APRIL 16, 2014.**
- 100% Final Design submittal – March 2014. **STATUS: SUBMITTED JUNE 2014.**
- Construction Start – July 2014. **STATUS: CONSTRUCTION START MOVED TO AUGUST 2015 DUE TO DELAY IN BUILDING COMMISSION APPROVAL AND 100% DESIGN HELD AT DOA UNTIL JUNE 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 & Future Opportunities

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

Goal 11: Improvements to Campus Bus Service. COMPLETED

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
- No service changes were possible

Target Performance Indicators

- Have an approved written agreement by Feb 1, 2014
- Implement Metro service changes by September 1, 2014

Risks & Challenges

- Risks include: 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,
- Challenges include: explaining campus bus ridership, over-crowding, schedules, need to meet to reach a timely agreement, Metro public hearings, approvals by various Madison city committees and labor contract requirements

Milestones Accomplished

- TS and ASM meet at least once/month in Sep, Oct, Nov, and Dec in 2013
STATUS: COMPLETED DECEMBER 2013.
- There is an approved written agreement by February 1, 2014
STATUS: COMPLETED 4/22/2014.*
- The initial public information meetings (if needed) are held by April 1, 2014
STATUS: NOT APPLICABLE – MEETINGS NOT NEEDED BECAUSE NO SERVICE CHANGES.
- Any Metro service changes are adopted by City of Madison committees by June 1, 2014
STATUS: NOT APPLICABLE – MEETINGS NOT NEEDED BECAUSE NO SERVICE CHANGES.
- Any Metro service changes implemented by September 1, 2014.
STATUS: NOT APPLICABLE – MEETINGS NOT NEEDED BECAUSE NO SERVICE CHANGES.

**TS prepared a written agreement in December 2013 and it was signed by the Student Transportation Board Chair in December 2013. The agreement was submitted for ASM signature but service terms ended and newly elected ASM representatives would not sign until April 2014.*

Next Steps & Future 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 12: Complete beta-test of biosafety's ARROW project initiative and develop training tools for principle investigators.

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 programming.

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 Performance Indicators

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

Risks & 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 Accomplished

- 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. **STATUS: DUE TO HIGHER PRIORITIES IN THE GRADUATE SCHOOL IT PROGRAM, THIS PROJECT HAS BEEN PUSHED BACK. THE LATEST PROPOSAL IS FOR A 'GO-LIVE' AUGUST 30, 2014.**

- EH&S CONTINUES TO WORK WITH GRADUATE SCHOOL IT ON THE IMPLEMENTATION OF THE PROJECT. – AUGUST 2014.
- THE PROJECT IS CURRENTLY GOING THROUGH ALPHA TESTING—SEPTEMBER 2014.
- EH&S HAS BEEN PREPARING BIOSAFETY STAFF FOR TRAINING RESEARCHERS ON THE ROLLOUT OF THE PROGRAM - SEPTEMBER 2014.
- EH&S IT WILL ALSO ASSIST WITH PATCHES TO FIX PROBLEMS WITHIN THE PROGRAM – SEPTEMBER 2014.

Next Steps & Future 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.
- THE MOST DIFFICULT PART OF THE PROCESS IMPROVEMENT AT THIS STAGE IS CONTINUOUS PRIORITY BY THE GRADUATE SCHOOL TO FULLY IMPLEMENT THE PROGRAM. OUR EXPECTED DATES FOR ROLLOUT HAVE BEEN PUSHED BACK DUE TO HIGHER PRIORITIES BY THE GRADUATE SCHOOL. WE WILL CONTINUE TO WORK WITH GRADUATE SCHOOL IT TO MEET THE AUGUST/SEPTEMBER 2014 DEADLINES.

Goal 13: APR Initiative for Occupational Health and Environmental Health Realignment. COMPLETED 12/31/2014

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 Performance Indicators

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

Risks & 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 Accomplished

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

Next Steps & Future 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 14: Administrative Excellence Instructional Space Inventory Implementation. COMPLETE

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 Performance Indicators

- 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.
- 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 & 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.

Milestones Accomplished

- Develop plan for implementation; identify resources; and, implement by April 2014.
STATUS: COMPLETED MAY 2014.

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

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 Performance Indicators

- 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.
- 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 & 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.

Milestones Accomplished

- College of Engineering pilot study graduate student analysis phase I completed by the end of fall semester 2013. **STATUS: COMPLETED JUNE 2014.**

Goal 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 Performance Indicators

- Increased interaction with Educational Innovation groups.
- Comprehensive learning space improvement plan.
- Coordination and acceptance of learning space improvement plan by UW System.
- Number of collaborative, flexible learning spaces requested through the UW System capital program.
- Utilization rates for instructional space with collaborative, flexible environments.
- Ability to adapt instructional environments to meet changing learning approaches and pedagogies.

Risks & 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.

Milestones Accomplished

- A proposal of new, EI-capable classrooms was proposed to the UW system for the 2013-15 biennium in August 2013. **STATUS: IN JUNE 2014 THE BOARD OF REGENTS AND STATE BUILDING COMMISSION APPROVED UW-MADISON 2013-15 INSTRUCTIONAL SPACE PROJECTS AT \$2.84M TO PROVIDE SEVEN COLLABORATIVE, FLEXIBLE LEARNING CLASSROOMS AND ONE UPGRADED LECTURE HALL.**

Next Steps & Future Opportunities

- Design this fall and early spring will allow the remodeling work to occur in summer 2015. Additional planning with EI groups is needed in FY15 to assess current state and create a context for future learning space improvements. This goal will be included in the FY 15 FP&M annual plan.

Goal 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 Performance Indicators

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

Milestones Accomplished

- Completion date – July 2014. STATUS: AS OF JUNE 2014 THERE WERE 54 FP&M STAFF TRAINED AND AUTHORIZED IN THE USE OF INSITE. AN ADDITIONAL 16 CAMPUS ACADEMIC/ADMINISTRATIVE STAFF WERE TRAINED TO USE INSITE. AN INSITE USER'S GROUP WAS FORMED IN 2013 AND THE INITIAL GROUP MEETING WAS CONDUCTED IN WINTER 2013.

Next Steps & Future Opportunities

- Efforts will be made to expand the staff base trained and using insite. This goal will be included in the FY15 FP&M annual plan.

Goal 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 Performance Indicators

- A “Culture of Safety” across all aspects of Department work exists.
- All employees have received adequate training to complete their work in a safe, yet efficient, manner.
- There is an engaged commitment to, and an integration of, safety into “the way we work” in the Physical Plant.

Risks & Challenges

- *Challenge* - Identify all issues/concerns over a group of 900+ 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 Accomplished

- Hire a dedicated safety person to develop and administer the process. STATUS: MIKE PENA WAS HIRED AS THE PHYSICAL PLANT SAFETY COORDINATOR IN AUGUST OF 2013, TO DEVELOP PROGRAM.
- Request for written indication of perceived or outstanding safety issues (or not) from every employee. STATUS: PHYSICAL PLANT DEPARTMENT STAFF (I.E. ALL SUPERVISORS) PROVIDED A LIST OF PERCEIVED DEPARTMENT SAFETY CONCERNS TO PP MANAGEMENT FOR PRIORITIZATION, AUG - OCT 2013.
- Form a Safety Management Group to oversee program operation. COMPLETED: SEPT 2013.
- Investigate and prioritize identified safety-related issues. ON-GOING: COMPILING ISSUES RAISED BY STAFF ATTENDING SAFETY AWARENESS TRAINING (SEE BELOW), FOR INTEGRATION INTO PRIORITIZATION OF ISSUES BROUGHT FORWARD BY THE PP SUPERVISORY STAFF. MANY STRAIGHT FORWARD ISSUES HAVE ALREADY BEEN ADDRESSED. OCT - JUN 2014.
- Form an Employee Safety Advisory Board to hear issues, appeals, and impasses. STATUS: IN DEVELOPMENT AS OF JUNE 2014.
- Develop training and operational protocol to address prioritized safety-related issues/concerns. ON-GOING: 4-HR SAFETY AWARENESS TRAINING PROVIDED TO THE MAJORITY OF PHYSICAL PLANT STAFF WHERE ATTENDEES WERE ALSO ASKED TO PROVIDE ANY ADDITIONAL PERCEIVED CONCERNS NOT ALREADY PROVIDED BY THE SUPERVISORY STAFF. OSHA 30-HR SAFETY TRAINING HAS BEEN PROVIDED THROUGH TWO SESSIONS TO ALL PP SUPERVISORY STAFF ALONG WITH ADDITIONAL PRIMARY DEPARTMENT STAKEHOLDERS. A THIRD SESSION IS CURRENTLY BEING PLANNED. A FULL STAFF SAFETY TRAINING PROGRAM HAS BEEN OUTLINED WITH 18 DIFFERENT TRAINING MODULES. MODULE TRAINING IN THE AREA OF PERSONAL PROTECTIVE EQUIPMENT (PPE), LOCK-OUT, TAG-OUT (LOTO), AERIAL LIFT SAFETY, FIRE PROTECTION, CPR/AED, AND FIRST AID HAVE BEEN COMPLETED, NOV 2013 – JUNE 2014.
- Develop implementation plan and execute. ON-GOING AS WE RESPOND TO OUR FINDINGS.

Next Steps & Future 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. MOSTLY COMPLETED: WILL BE FINISHED ALONG WITH THE REMAINDER OF 4-HR SAFETY AWARENESS TRAINING SESSIONS FOR ALL STAFF.
- 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.] THIS PROTOCOL HAS BEEN FOLLOWED, AND WILL CONTINUE TO BE FOLLOWED. DEVELOPING A CULTURE WHERE, "IT'S SAFE TO TALK ABOUT MY SAFETY." STICKERS, DECALS, ETC. BEING DEVELOPED FOR EMPLOYEE DISPLAY TO HELP RAISE THIS AWARENESS. PUBLISHED A 1ST EDITION SAFETY BULLETIN WITH A PERSONAL SAFEGUARD MESSAGE FOR ALL PHYSICAL PLANT STAFF.

- All responses resulting in identified issues will be prioritized for investigation. **ON-GOING.**
- Real issues will move to the top of the list, and addressed. **IN PROGRESS.**
- All issues/concerns presented will be responded to and/or addressed, to ensure we “close the loop” through communication. **THIS PROTOCOL IS BEING FOLLOWED.**
- All affected parties will be slated to receive training refreshers regarding compliance and operational requirements. **ALL SAFETY TRAINING IS BEING TAILORED TO THE INDIVIDUAL DEPARTMENT/SHOP NEED.**
- Any questions and all comments related to process improvement will be considered, evaluated, answered and implemented where feasible. **THIS PROTOCOL IS BEING FOLLOWED.**

Goal 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 Performance Indicator

- Measurement and verification of results confirming anticipated savings.

Risks & Challenges

- Risk - Unforeseen possible construction project constraints or funding complications during the various stages of the projects. – **DOA HAS REDUCED THE LEVEL OF FUNDING, AND HAS RAISED THE ROI REQUIREMENTS FOR FUNDABLE ENERGY EFFICIENCY PROJECTS.**

Milestones Accomplished

- Complete construction phase of the energy retrofit project at Biotron building (annual savings of \$446,000 with 13.7 year payback) in FY14. **IN PROGRESS (90% COMPLETE) – COMPLETION EXPECTED IN JAN 15.**
- Complete construction phase of the lighting retrofit phase II (annual savings of \$282,000 with 12.8 year payback) in FY14. **LED RETROFIT PROJECT IS 95% COMPLETE WITH 1268 FIXTURES REPLACED SO FAR – COMPLETION EXPECTED SEPTEMBER 2014.**
- 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. **IN PROGRESS (60% COMPLETE). COMPLETION EXPECTED DURING FY 15.**
- Start construction phase of the energy retrofit project at Vet Med (annual savings of \$361,000 with payback of 10.5 years) in FY14. **JUST GETTING UNDERWAY (5% COMPLETE).**
- Start construction phase of the energy retrofit project at Bock Labs project (annual savings of \$202,000 with 10.7 year payback) in FY14. **IN PROGRESS (20% COMPLETE).**
- Start the design process and start construction (assuming funding gets approved by DFD) for energy retrofit project at WIMR (annual savings of \$70,000 with 7.8 year payback) in FY14. **IN DESIGN (60% COMPLETE).**

- 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. **IN DESIGN (60% COMPLETE).**
- 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. **MCARDLE LAB PROJECT SUBMITTED TO DFD FOR REVIEW IN MAY 14. RUSSELL LAB PROJECT IS ON HOLD (AND NOT YET ESTIMATED OR SUBMITTED).**
- 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. **HAS BEEN REVIEWED BY DFD – HOWEVER, APPROVAL AND/OR IMPLEMENTATION MAY BE DELAYED DUE TO UNCERTAINTY OVER POSSIBLE HEATING/COOLING PLANT SALE.**

Next Steps & Future Opportunities

- Continue to keep close working relationships with UWSA and DFD staff and coordination of the projects with building occupants.

Section 4A: VCFA Strategic Priorities – Summary Chart [Highlighted Goals were new in FY14]

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
VCFA Strategic Priority 1: Engagement, Inclusivity and Diversity	1a. Implement the FP&M and departmental EID plans.	Baseline data from the FY 12 survey served as the basis for development of both FP&M and departmental EID plans.	Increase favorable responses in the FY14 EID Survey.	In progress. FP&M-wide plan is in place and will be updated once the 2014 survey results are available.
	1b. Increase the response rate to the EID survey.	Response rate for FP&M was 40% overall; however response rates ranged from a low of 3% to a high of 93% by department.	Show an increased response rate over time with a goal of an 80% response rate for all employment categories, demographic and gender groups.	FP&M has a 74.3% overall response rate as of 7/31/14, a 34% increase over 2012.
	1c. Increase representation of under-represented groups at all levels.	Gender and heritage data provided by OHR for FP&M on an annual basis.	Greater availability of FP&M gender and heritage data as well as ability to access data and create reports on demand.	Planning is underway for Physical Plant and EH&S internship programs. Data project delayed due to Deputy AVC vacancy.
	1d. Improve the recruitment and selection process to increase diversity.	Current practices to create inclusive candidates pools, diverse search and screens and unbiased interview questions.	Search and screen committees are composed to ensure diversity. Interview questions are behavioral-based and used for all positions.	New recruitment protocols are in place and are being used for manager/supervisor positions.

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
	1e. Continue to increase employee diversity at the manager and supervisor level.	2012 Heritage and Gender data.	Demographic data for management, supervisor and professional positions trends upward.	In progress: Data project delayed due to Deputy AVC vacancy.
	1f. 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 are used for 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.	As of 7/31/14, all FP&M permanent staff received a performance evaluation for 2013-14.
	1g. Provide EID competency assessment and development.	FP&M Core Values as identified.	Initial focus will be to establish EID competencies with focus on leaders, managers, and supervisors.	In progress: FP&M managers are enrolling in EID trainings and mechanism is in place to track participation.
VCFA Strategic Priority 2: Student Leadership Development (WiGrow)	Pilot WiGrow initiative in FP&M.	Two groups of students have been identified as members of the pilot group: 24 students in Transportation Services and 3 in CPLA.	Expansion of WiGrow participation in FY15.	Pilot is underway and plans are in place to roll out program to all FP&M student employees in fall 2015.
VCFA Strategic Priority 3: Resource Stewardship through Process Improvement	Improve the FP&M customer billing process.	Billing process, format and schedule is not uniform across FP&M units.	Bills issued by FP&M are easily understood, accurate and occur at a standard time every month.	In progress: As of June 2014, voice of customer data collection is underway.

Section 4B: FP&M Strategic and Operational Priorities – Summary Chart [Highlighted Goals were new in FY14]

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.	As of 7/31/14, all FP&M permanent staff received a performance evaluation for 2013-14.
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 language; are communicated across the entire organization via a variety of media; and policies are reviewed and updated on a regularly scheduled basis.	In progress. A standard template has been established and two policies have been finalized with several more ready for final approval.
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.	On-going. Key performance indicators have been established for all major areas and quarterly reporting is in place.

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
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.	In progress. This project is being led by FP&M's Communications Director who was hired in January 2014. CMS site is currently being built with preliminary pages set to go-live September 2014.
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.	16 projects reached milestone of construction completed within budget/scope by 6/30/2014.
Resource Stewardship	6: 2005 Campus Master Plan on-going implementation.	Number of major projects and overall goals completed annually.	Six projects to begin planning and design development; and seven projects are expected to be completed.	Six projects have begun planning/design; Six are completed and one is substantially complete with move-in August 2014.
Resource Stewardship	7: Improve storm water 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.	No change from reported baseline. Will have positive change when Nursing is fully complete in Q1-FY15.

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Resource Stewardship: Sustainability	8: Advance UW Builds Green program.	LEED Silver certification. Divesting of surplus property.	Nine projects are seeking LEED certification.	Two projects certified LEED silver; one certified LEED gold and two more are tracking LEED silver.
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.	Project extended into FY15. Pilot project currently underway to evaluate opportunities to enhance the program for customers.
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 \$33,950,000.	Design was completed in June 2014. Construction scheduled to start August 2015 with completion September 2016. Project will construct 780 spaces for \$33,950,000.

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 FY13.	Have an approved written agreement with ASM by 2/1/2014; implement Metro service changes by 9/1/2014.	Signed agreement received from ASM April 2014. Both entities agreed no service changes were needed so there will be no alterations of the schedule in September 2014.
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.	On track. Project 'Go-Live' scheduled for 8/30/14.
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.	Completed December 2013.

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
Process Improvement and Resource Stewardship	14: Administrative Excellence: Instructional Space Inventory Implementation.	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 of 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.	Completed May 2014.
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 CoE. Acceptance of sustainable approach within CoE. Application of CoE processes and findings to campus instructional space policy and processes.	Completed June 2014.
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.	Worked with EI subgroup to develop request for FY13-15. BOR and SBC approved \$2.84M UW-Madison projects to create seven collaborative, flexible classrooms. Design and work will be done in 2015.

Priority area	Goal/Objective	Baseline measure	Defined target	Year-end actual measure
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.	54 FP&M and 16 campus academic / administrative staff trained and authorized to use INSITE. An INSITE user's group formed and initial meeting was held in December 2013.
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.	In-progress. Safety Director hired 8/2014. Safety concerns have been collected and many issues have already been addressed. Project will continue in FY15.
Resource Stewardship	19: Advance WE CONSERVE.	Current conditions and energy consumption data and modeling results.	Accomplishment of specific project goals.	Nine projects currently in progress for a combined annual savings estimated at \$2.2M. A tenth project is on hold due to uncertain future ownership status of central campus heating and cooling plants.