

What is the purpose of the Proposal?

Unaddressed operational issues derail many a strategic plan. Equally, knee jerk reactions and attempts at fixing operational issues too quickly only make implementing such plans more challenging. The purpose of these **Proposals**, therefore, is to help the *Department of Family Medicine and Community Health* plan effectively for addressing and remedying current operational issues within the *Department* that may interfere with the successful implementation of its Strategic Plan. The **Proposals** should only convey essential strategic information which will require your **Task Force** to:

- Enable any reader to grasp the critical elements of your proposal and understand the decisions that need to be made. Aim to manage, therefore, the information overload that can easily occur. Proposals should be 5 pages minimum, 10 pages maximum, in order to convey *only essential strategic information*.
- Advocate for what you are proposing and attempt to sway the reader(s). Each Task Force **Proposal** should clearly, and explicitly, state the benefits of its proposed approach, not only to the people of the *Department*, but to the system at large. In other words, your **Proposal** should NOT be neutral in tone.

What should the Proposal include? The key components of a complete **Proposal** should include analyses or discussion of:

- I. **Description of the Issue:** Clearly define the issue – What is the problem and what are the reported causes of the problem? Make sure to define the current situation, rather than its history. Identify existing policies currently used/in place within DFMCH/UW- Madison/UW Health regarding your issue.
- II. **Best & Current Practices:** This section identifies what the research says are best/current practices regarding your issue and what other *Departments of Family Medicine* are doing to address the issue. Conducting current and best practices research will help to develop a full understanding of the issue and all of its components from multiple and varied perspectives & provide useful insights into underlying causes, strategies for change, and problems to expect along the way. **Note:** This will require Task Force members to visit sites of Best Practices and report back what they found/what people said. You will argue from the voices of these people who have lived and succeeded with the approach you are proposing to address the issue. Be very concrete & specific –*Here is the course we need to take and this is why it would be an improved alternative to what we currently have/how we currently do it.*
- III. **Option:** Given your study of the issue, what alternative approach should *DFMCH* consider regarding the issue? In this section, advocate for the new course you are proposing for the *Department* – and be sure to delineate the benefits to the people at *DFMCH*, as well as to the system at large.
- IV. **Financial Requirement:** In this section, identify the funding required to implement your suggested course, the *Department's* current and potential sources of these funds, and its most critical resource and funding gaps.
- V. **Short & Long Term Plan: Tactical Plan** Outline what needs to be done/ the strategy for effectively implementing the new course of action presented in your proposal. What is your Task Force's recommended roadmap to executing your proposed **Option?** Remember to set short term goals/milestones of 6 to 12 months that provide evidence of success toward your long term plan.

Your **Proposal** may only be considered complete when these components have been defined and reviewed by your **Steering Group Liaison**. Once approved by the **Steering Group Liaison**, they will present the **Proposal** to the Steering Group for any further suggestions/changes/edits. Following final edits, a Task Force member will present the final version of its **Proposal** to Steering Group who will ultimately determine the institutional body/bodies that will be involved in the decision making aspect of the Proposal.