Linking Scholarship & Communities

Sarena D. Seifer
Community-Campus Partnerships for Health
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Athens, GA ~ October 3, 2005
Overview

Welcome and Introductions
Community-Campus Partnerships for Health
Commission on Community-Engaged Scholarship in the Health Professions
Community-Engaged Scholarship for Health Collaborative
Institutional Assessment
Resources

Acronyms…. CCPH, CES, RPT…
Mission

To promote health through partnerships between communities and higher educational institutions
At-A-Glance

- Nonprofit organization launched in January ‘97
- Headquartered in Seattle, WA USA
- 16-member board of directors
- 1000+ members from communities and campuses across the US and a dozen countries
- Private and public funding
- Staff, students and senior consultants
Board Members

Chris Atchison, University of Iowa School of Public Health
Renee Bayer, University of Michigan School of Public Health
Cynthia Barnes-Boyd, Neighborhoods Initiative, University of Illinois-Chicago Great Cities Institute
Chuck Conner, West Virginia Rural Health Education Partnership, Spencer, WV
Diane Downing, Arlington County Dept. of Human Services, VA
Elmer Freeman, Center for Community Health Education, Research and Service, Boston, MA
Barbara Gottlieb, Brookside Community Health Center, Jamaica Plain, MA
Board Members

**Larry Green**, Comprehensive Cancer Center, San Francisco, CA

**Ella Greene-Moton**, Flint Odyssey House, Inc. Health Awareness Center, MI

**Susan Gust**, Partners Three Consulting, Minneapolis, MN

**Dennis Magill**, Wellesley Central Health Corporation, Toronto, Canada

**Daniel E. Korin**, Lutheran Medical Center, NY

**Carmen Patrick**, Emory University medical student, Atlanta, GA

**Richard W. Redman**, University of Michigan School of Nursing

**Monte Roulier**, Community Initiatives, Columbia, MO

**Douglas Simmons**, University of Texas, Houston Health Science Center Dental Branch
Partnership Outcomes being pursued by CCPH members

- Eliminating health disparities
- Community-responsive, culturally competent health professionals
- Diversity of health professionals
- Supply and distribution of health professionals
- Access to health care
- Access to information and technology
- Access to quality primary, secondary & higher education
- Community development
- Economic development
Principles of Partnership

- Partners have agreed upon mission, values, goals and measurable outcomes for the partnership.
- The relationship between partners is characterized by mutual trust, respect, genuineness, and commitment.
- The partnership builds upon identified strengths and assets, and addresses needs.
- Power is balanced among partners and resources are shared.
Principles of Partnership

- There is clear, open and accessible communication between partners
- Roles, norms and processes for the partnership are established with the input and agreement of all partners
- There is feedback to, among and from all stakeholders in the partnerships
- Partners share the credit for accomplishments
- Partnerships take time to develop and evolve
Major Strategies

- Create and expand opportunities for collaboration and information sharing
- Promote awareness about the benefits of community-campus partnerships
- Advocate for policies that facilitate and support community-campus partnerships
- Support service-learning and community-based participatory research in higher education
Promote and encourage funding initiatives that prioritize principle-centered community-campus partnerships

**Advocate for faculty promotion and tenure policies and processes that support CES**

Advocate for accreditation and institutional policies that require service-learning in higher education

Support capacity building within community-based organizations that enable them to be full partners with higher educational institutions
Community Engagement
An Essential Strategy

Health professional education
Health workforce diversity
Research relevance and translation into practice
Access to health care
Eliminating health disparities
Health and economic vitality of communities

Faculty roles are changing but the Review, Promotion and Tenure (RPT) system has not kept pace...
Current Reality

- A frequently cited barrier is the risk associated with trying to achieve promotion and tenure.
- Often viewed as service and perceived as an inferior activity, rather than being acknowledged as genuine scholarship.
- Most academic institutions confer tenure and promote faculty based primarily on the quantity and caliber of peer-reviewed publications.
“A university’s values are most clearly described by its promotion and tenure policy and by the criteria used to evaluate faculty members”

Conrad Weiser et. al.
Scholarship Unbound for the 21st Century, 2000
Commission on Community-Engaged Scholarship in the Health Professions

*Funded by the WK Kellogg Foundation*

*To provide national leadership* for creating a more supportive culture and reward system for health professional faculty involved in CES

*To develop and disseminate a set of tools* that faculty and health professional schools can use to advance CES
Commission Members

Alex Allen, Isles, Inc., Trenton, NJ
Larry Green, Centers for Disease Control and Prevention, Atlanta, GA
Barbara Brandt, University of Minnesota Academic Health Center
Jessie Gruman, Center for the Advancement of Health, DC
Marshall Chin, University of Chicago School of Medicine, IL
Susan Gust, Phillips Neighborhood Healthy Housing Collaborative, Minneapolis, MN
Jay Chunn, National Center for Health Behavioral Change Morgan State University, Baltimore, MD
Laura Leviton, Robert Wood Johnson Foundation, Princeton, NJ
Amy Driscoll, California State University-Monterey Bay
Alonzo Plough, Public Health- Seattle & King County, Seattle, WA
Eugenia Eng, University of North Carolina-Chapel Hill
Commission Members

Shobha Srinivasan, National Institute for Environmental Health Sciences, Research Triangle Park, NC
Clyde Evans, Association of Academic Health Centers, DC
Susan Tortolero, Prevention Research Center, University of Texas Health Science Center at Houston
Elmer Freeman, Center for Community Health Education Research and Service, Inc, Boston, MA
Pat Wahl, University of Washington School of Public Health and Community Medicine, Seattle, WA
Charles Glassick, Carnegie Foundation for the Advancement of Teaching, Spartanburg, SC
Terri Wright, W.K. Kellogg Foundation, Battle Creek, MI
Definitions & Frameworks that informed the Commission

Defining scholarship
  ▪ Ernest Boyer (1990, 1996)

Assessing scholarship
  ▪ Charles Glassick et al. (1997)

Changing systems of promotion and tenure

Model of organizational change
  ▪ John Kotter (1996)
Community engagement is the application of institutional resources to address and solve challenges facing communities through collaboration with communities.

Scholarship is teaching, discovery, integration, application and engagement that has clear goals, adequate preparation, appropriate methods, significant results, effective presentation, and reflective critique that is rigorous and peer-reviewed.

Community-engaged scholarship is scholarship that involves the faculty member in a mutually beneficial partnership with the community.
Challenges in Current RPT System

Would you add others?

- Time involved in developing partnerships
- Collaborative and interdisciplinary nature
- Expectations of funding agencies
- Funding and journal hierarchy
- Diverse dissemination pathways and products
- Diverse measures of quality, productivity and impact
- Lack of peer review
- Limited opportunities for involvement of community partners
For health professional schools:

Adopt and promote a definition of scholarship that includes and values CES

Adopt RPT policies that reflect this new definition of scholarship

Ensure that community partners are meaningfully involved in the RPT process
For health professional schools:
Educate and prepare RPT committee
Invest in faculty development
Advocate for increased extramural support
Take a leadership role on campus
For national associations of health professional schools:

- Adopt and promote a definition of scholarship that explicitly includes CES
- Support member schools that recognize and reward CES
- Advocate for increased extramural support
Recognizing that many products of CES are not currently peer-reviewed, a national board should be established to facilitate a peer review process.

*From recommendations to action...*
Community-Engaged Scholarship Toolkit

www.communityengagedscholarship.info

– **Planning for Promotion and Tenure** - role of mentors, developing a vision, and strategies for documenting work across missions.

– **Creating a Strong Portfolio** - career statement, curriculum vitae, teaching portfolio, letters from external reviewers, letters from community and practice partners, and documentation.

– **Portfolio Examples** from community-engaged faculty members in a wide range of health professions and academic institutions.

– **References and Resources** - citations, glossary of terms, examples of schools that support community-engaged faculty, and list of funding agencies.
Ten health professional schools
Seek to recognize & reward community-engaged scholarship
Campus teams of key stakeholders: faculty, community partners, academic administrators (provost & dean reps)
Collaborative funded by Fund for the Improvement of Postsecondary Education, 2004-2007
Coordinated by Community-Campus Partnerships for Health Evaluation team led by Sherril Gelmon at Portland State Univ.
Community-Engaged Scholarship for Health Collaborative

Members

Auburn University Harrison School of Pharmacy
Case Western University School of Nursing
Indiana University School of Dentistry
Loma Linda University School of Public Health
University of Cincinnati College of Allied Health Sciences
University of Colorado School of Pharmacy
University of Massachusetts Worcester School of Nursing
University of Minnesota Academic Health Center
University of North Carolina-Chapel Hill School of Dentistry
Vanderbilt University School of Medicine
Goals

Increase capacity for community-engaged scholarship (CES) in participating schools

Increase capacity for CES in health professional schools nationally
Objectives

Increase capacity for CES in participating schools
– assess each school’s capacity
– increase knowledge and support for CES among administrators and faculty
– align RPT policies and practices with CES
– share experiences, expertise, lessons learned
Objectives

Increase capacity for CES in health professional schools nationally

– assess capacity for CES within the associations

– increase knowledge and support for CES among association staff, leadership, members

– share experiences, expertise, lessons learned
Significant changes in RPT policies and practices to recognize and reward CES

Peer review mechanism(s) established

Each national professional association has taken a substantive action to support CES
Assess institutional capacity regarding community engagement and CES
Identify opportunities for action
Two perspectives: school and university
Serve as baseline for tracking progress

Self-Assessment Instrument

Draws upon similar existing validated tools and peer-reviewed literature
Includes 6 dimensions with various elements within each dimension – key ingredients of sustained engagement
Four assessment levels to determine current stage of community engagement for each dimension and element
Two perspectives: school and university
Self-Assessment: Six Dimensions

I: The Definition and Vision of Community Engagement
II: Faculty Support for and Involvement in Community Engagement
III: Student Support for and Involvement in Community Engagement
IV: Community Support for and Involvement in Community Engagement
V: Institutional Leadership and Support for Community Engagement
VI: Community-Engaged Scholarship
Dimension VI:
Community-Engaged Scholarship

Context:
- Definition, perception of value, determination of scope of community impact

Nature of appointments:
- Tenure-track, RPT policies, rank and seniority of scholars

Scholarship support:
- Value of nature of scholarship, various products, range of acceptable funding sources

RPT process:
- Training and orientation of committee, community partner participation
**6.5 Review, Tenure and Promotion Policies Regarding Community-Engaged Scholarship**

<table>
<thead>
<tr>
<th>Level One</th>
<th>Level Two</th>
<th>Level Three</th>
<th>Level Four</th>
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<tbody>
<tr>
<td>Community-engaged scholarship is not recognized or considered during the review, tenure or promotion process.</td>
<td>Community-engaged scholarship is somewhat recognized and considered during the review, tenure or promotion process, but is not explicitly included in the review, tenure and promotion policies and procedures.</td>
<td>Community-engaged scholarship is significantly recognized and considered during the review, tenure or promotion process and is explicitly included in the review, tenure and promotion policies and procedures.</td>
<td>Community-engaged scholarship is substantially recognized and rewarded during the review, tenure or promotion process. It is explicitly included in the review, tenure and promotion policies and procedures.</td>
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Choose the stage that characterizes your school: 1 2 3 4 Unable to assess

Choose the stage that characterizes your university: 1 2 3 4 Unable to assess
## Community-Engaged Scholarship for Health Collaborative

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<th>6.11 Community Partner Participation in the Review, Tenure and Promotion Process</th>
<th>Level One</th>
<th>Level Two</th>
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<th>Level Four</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is no role for community partners in the review, tenure or promotion process for community-engaged faculty members.</td>
<td>Community partners are allowed to participate in the review, promotion or tenure process of community-engaged faculty members by writing letters of support. In practice, these letters are not seriously considered.</td>
<td>Community partners are allowed to participate in the review, tenure or promotion process of community-engaged faculty members by writing letters of support. In practice, these letters are seriously considered.</td>
<td>Community partners are regularly invited to participate in the review, tenure or promotion processes in ways that go beyond writing letters of support (e.g., serving on a faculty review committee). In practice, these community partner contributions to the process are seriously considered and valued.</td>
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Choose the stage that characterizes your school: 1 2 3 4 Unable to assess
Choose the stage that characterizes your university: 1 2 3 4 Unable to assess
Develop team goals and strategies for achieving them

- Where are you now?
- Where do you want to be?
- How are you going to get there?

Establish a need for change and a sense of urgency
Form a powerful guiding coalition and equip it with resources
Create a clear vision and plan for achieving and evaluating achievement of vision
Communicate the vision
Empower others for broad-based action
Plan for and create short-term wins
Consolidate gains and produce more change
Anchor new changes in the culture
Establish need for change & urgency
*Kotter Step #1*

Why is recognizing & rewarding CES important for your school/university?
– What are the compelling reasons?

Why is recognizing & rewarding CES important to your profession/discipline?
– What are the compelling reasons?

What are the consequences of NOT changing?
Work Plan
Fall 2004 - Fall 2007

Teams develop & implement action plans
Work groups address cross-cutting issues
Project staff provide support to teams and work groups
Teleconferences and web conferences
Annual meetings
Assessment and documentation
Dissemination
Resources
Through Community-Campus Partnerships for Health

Training Institutes
Customized Consultation
National Conference
Online Newsletter
Electronic Discussion Groups
Resource Guides & Toolkits
Promising Practices

www.ccph.info
Mark Your Calendars!

**Toolkit Webconference** – October 13, 2005 from 1:30 – 3 pm EST

**9th Conference** - May 31-June 3, 2006, Minneapolis, MN - Proposals due October 7, 2005


**5th Annual Award** – Call for nominations out in November 2005
Community-Campus Partnerships for Health

We invite you to join a growing network of communities & campuses that are collaborating to promote health

Contact us by phone 206-543-8178 or email at ccphuw@u.washington.edu or visit us online at www.ccph.info


References


References


