



UNIVERSITY OF WASHINGTON
The Graduate School
G-1 Communications
Box 3537700
Seattle, Washington 98195

Telephone: (206)685-3519
Fax: (206)685-3234

March 25, 2002

William Welton, Director
Graduate Programs in Health Services Administration
Box 357660

Dear Dr. Welton:

The committee report is enclosed on the review of the Master in Health Administration program. Please share the report with faculty, students, and staff in the Program. We would appreciate receiving the Program's comments on the report and recommendations by April 12, 2002. When we receive the comments we will transmit them to the review committee.

The next step in the review process is discussion of the review committee report and recommendations with the Graduate School Council, to be scheduled for later in May. You, and other Program faculty whom you would like to include, and the internal members of the review committee will be invited to participate in the Council's discussion.

Sincerely,

A handwritten signature in black ink, appearing to read 'John Slattery', written over a horizontal line.

John Slattery
Associate Dean for Academic Programs

Enclosures

C: (with enclosures)
Marsha Landolt, Dean, The Graduate School
Debra Friedman, Associate Provost for Academic Planning
Patricia Wahl, Dean, School of Public Health and Community Medicine
Fred Connell, Associate Dean, School of Public Health and Community Medicine
MHA Review Committee

Ten-Year Review of the Master of Health Administration Program

Department of Health Services
School of Public Health and Community Medicine

Conducted by:

Debbie Ward, Associate Professor, University of Washington School of Nursing, Box 357263
(committee chair)

Robert Higgins, Professor, University of Washington School of Business, Box 353200

Stephen Mick, Professor and Chair, Department of Health Administration, School for Allied
Health Professions, Medical College of Virginia Campus, Virginia Commonwealth University,
PO Box 980203, 1008 East Clay Street, Richmond, VA 23298

Robert Plotnick, Professor, University of Washington Evans School of Public Affairs, Box
353055

Eugene Schneller, Professor and Director, School of Health Administration and Policy, Arizona
State University, 318H BA, Tempe, AZ 85287-4506

Graduate School Liaison: Heidi Tilghman

January 30-31, 2002

Process summary

On January 4, 2002, representatives from the Graduate School met with the University of Washington members of the committee appointed to review the Master's of Health Administration (MHA) degree program. Graduate school representatives included Marsha Landolt, Dean, Heidi Tilghman, Assistant to the Dean, John Slattery, Associate Dean for Academic Programs, Fred Connell, Associate Dean School of Public Health and Community Medicine, as well as Debra Friedman, Associate Provost for Academic Planning. At this meeting, the charge was laid to the group (later to be revised and detailed in a letter of January 8, 2002). The initial self-study materials were reviewed, and the University of Washington faculty members began a list of themes to guide their review.

In the subsequent 3 weeks before the site visit, the committee

- Requested and received additional materials from the staff and director of the MHA program
- Individually solicited and reviewed comments on the program from faculty and alumnae
- Prepared for the two-day site visit

The Master's of Health Administration program leadership and much of its faculty reside in the Department of Health Services in the School of Public Health and Community Medicine. But the program is actually an interdisciplinary one, administered through the Graduate School. Among the many topics at issue in this review was the success of this interdisciplinarity, and the future for leadership and governance in this program. In addition, reviewers were asked to address:

- National standing of the program
- The likelihood for success of recent and ongoing curricular revisions
- Comparison of the two approaches to the degree, the day program and the Executive program
- Funding, including the potential for self-sustainability

The committee itself chose to organize the review according to a set of jointly established themes that we believed could encompass issues arising from academic leadership as well as from the content expert and peer review committee members. An email process involving all members of the committee including the outside reviewers was used to compile a final list of themes to guide the review. They were:

- 1) Clarity. Is the MHA program -- mission, curriculum, relevance to employment -- clear to students?
- 2) Size. The number of students in the fall 2001 entering class is 30, 50% larger than in recent years. Was this a planned increase? Is it straining resources? Can it be sustained and does the program want future cohorts of this size?
- 3) Interdisciplinarity. How does faculty governance of this program actually work? How much are the other departments and schools involved, and if the level of involvement is insufficient, how is that being addressed?
- 4) Work design. Are teaching responsibilities distributed in a manner agreeable to faculty? What about other committee, advising, and program work?
- 5) Home base. Should the graduate school continue to be home base for this program?

- 6) Finances. Is the program a candidate to become self-sustaining? If space, equipment, and core funding are major program weaknesses, how could they best be addressed in this disproportionately soft-money environment?
- 7) Diversity. What are the short and long-term approaches to launching diversity among faculty and enhancing it among students?
- 8) Identified weaknesses. What are the program's plans to address its weaknesses identified in the self study?
- 9) Professional mentoring. What is the level of meaningful contact between the students and people who are from the actual world of health administration?

On January 30 and 31, the 5-member review committee, assisted by Dr. Heidi Tilghman, met with the program leader and faculty, with current and former students, with the program's external advisory board, with the dean of the School of Public Health and Community Medicine, and with the program staff. An exit interview was held at the end of the site visit, first with program leadership and faculty and finally with senior dean and provost's office leadership.

Review summary

The review committee recommends the continuation of the MHA program. Rightly called a premier program, it should be reviewed again in ten years, unless there is, in the interim, significant changes in personnel or a substantial decrease in funding. The UW MHA program has a national reputation, built on 30 years of excellence in research, on its excellent faculty, and its position in the region as the producer, hub, or connection to virtually all the health care delivery system leadership. It has dealt well with substantial changes in leadership, and in a series of initiatives and demands, including the launching of the Executive MHA program (the EMHA) in January 1998, and accreditation in 1999.

But sustaining this reputation is a major challenge. This report will enumerate hurdles and concerns, and make what is hoped will be helpful suggestions.

Program governance

We held discussions on governance with a range of faculty – tenured members of the Department of Health Services, lecturers in the Department, adjunct faculty in tenure track appointments, and adjunct faculty without tenure track appointments.

This interdisciplinary group of faculty appears to function very well. Regardless of rank or closeness of affiliation with Health Services, faculty consistently felt they were included in governance decisions and had a meaningful voice. All were invited to the annual retreat and to meet with the MHA Director and Department chair.

There is general agreement that it is important for the core curriculum competencies to reside in Health Services faculty [which is the case currently]. There was also sentiment that the Group Degree arrangement helped foster better governance

Significant involvement in the program by faculty outside of Health Services is real and not a problem. Collegial relations appear to be excellent and have been for some time. This state of affairs is a real credit to the current and past leadership of the MHA program.

NO RECOMMENDATION

Program Home

Should the program stay in the Graduate School?

There is strong consensus by the faculty, Division Head, Program Director and Dean that the program should remain in the Graduate School with the degree so conferred. Faculty believe that they benefit from their strong relationships with other colleges on campus and that the graduate program umbrella provides "legitimacy" and motivation for relationship sustainability. While students may not be aware of the Graduate School home, they value the opportunity provided to engage in other colleges. The Program's principal home, in the School of Public Health and Community Medicine, where it benefits by interaction with other School of Public Health programs, is appropriate and consistent with traditions in the field. Faculty understand that they are in a full partnership with the School of Public Health.

Health administration education is a highly interdisciplinary endeavor requiring input from a wide range of perspectives. This observation supports a variety of formal and informal mechanisms to assure participation by faculty from throughout the campus. The emerging curriculum "enterprise" model will require stronger, rather than weaker, ties across the University of Washington. It is noteworthy, however, that the University of Washington has a very strong culture of collaboration across units and Colleges. The program benefits from many informal relationships— including ties with the schools of Law, Medicine, and Nursing.

RECOMMENDATION:

The MHA program should remain in the Graduate School.

Core funding issues

Core instructional funding appears to provide adequate support to MHA faculty only when compared to other funding levels elsewhere in the Department and School. The Committee is quite concerned that the core program faculty in the Department must still raise more than half their FTE salaries from grant and other soft funds. Although this has been a longstanding expectation of faculty in the school, and the MHA faculty members appear to have made their

peace with it, the Committee is concerned that this practice will create serious problems in the future.

The Committee recognizes the severe constraints created by inadequate state funding for the School and Department and the limited room for maneuver. The Committee has serious concern about the viability of this model of faculty support for sustaining the current high quality of the program. There are two reasons for this concern. Most obvious is that competing programs offer far more attractive salary packages that provide 100% support from tenure track funds and do not require faculty to raise any external funds, at least for the academic year. The School's expectation that all faculty raise significant external funds to receive full salary is likely to make recruiting new faculty difficult. This will pose significant risk to the quality of the program as current faculty retire or move elsewhere.

The Committee observes that expectations of high external support makes considerable sense for Public Health faculty engaged in lab and epidemiological research, where NIH and other major sources of funds are available. Yet many important issues in health administration [e.g. models and empirical studies of the behavior of health care organizations, health policy] call for a rather different research style and are not well supported by NIH and most other funders. The current approach to funding salaries makes it difficult for UW faculty to study such issues. It thereby risks narrowing the intellectual range of the faculty and its ability to be at the forefront of the full set of issues engaging the field.

In addition to this major concern, the Committee observes that the program and Department badly lag behind competitors in investments in teaching technology [e.g. LCD projectors, staff computers]. Students are increasingly expected to be comfortable with similar technologies in their work places. The quality of instruction and preparation of students for jobs both suffer as a consequence of the low level of such resources.

RECOMMENDATIONS:

Begin and sustain a major initiative to increase funding from endowment and gifts and thereby reduce the pressure on faculty to raise external funds.

Devote some equipment funds to upgrading the quality and quantity of instructional technology. Equipment donations or funds earmarked for equipment might be promising targets for development efforts.

Is MHA a candidate to become a self-sustaining program?

Not at present. A significant tuition increase would be a burden to day MHA students that would reduce applications. This problem could be overcome by a liberal student loan program. EMHA students are better able to afford tuition increase but the program is quite new and there appears to be relatively little employer support for students. Thus a significant tuition increase would somewhat reduce applications, particularly among private practice doctors.

The major problem is that applications to both programs are weak. EMHA class sizes are 11 and 12 with target of 25. MHA enrollments are rising, but after several soft years. Increased enrollments is a stated program goal.

RECOMMENDATION:

The program undertake a serious examination of the possibility of achieving self-sustainability after enrollments rise to the target level.

MHA Ranking

According to *US News & World Report*, the UW MHA program is ranked in 5th place after the University of Michigan, the University of North Carolina, the Wharton School at the University of Pennsylvania, and the Kellogg School at Northwestern University. Other recognized approaches to ranking of health management programs do not really exist other than whether a program is or is not accredited by the Accrediting Commission for Education in Health Services Administration (ACEHSA). The University of Washington programs have recently received full accreditation for the maximum amount of time, seven years. A ranking system based on total student enrollment recently appeared in *Modern Healthcare*, but the Committee does not consider this a necessary correlate of quality. Other desirable but non-existent ranking systems would include how quickly graduates secure responsible positions in health care, and views of employers about the preparedness of program graduates to undertake responsible managerial positions.

In the event, given (1) the productivity and distinction of the MHA faculty, (2) the success of its alumni/ae, (3) the general strength of the wider University and the closely associated Schools and collaborating units, the MHA Program remains a premier educational, research, and service unit in the country. We believe that the evidence supports the position of the University of Washington MHA program within the top 10 percent of the roughly 70-80 ACEHSA-accredited programs in the United States and Canada.

NO RECOMMENDATION

Curriculum

The program, under the guidance of its new director, is undergoing a careful review of the dynamics and changes in the health care sector and its implications for the curriculum. The Program continues to focus its effort on individuals who will be involved in the delivery of personal medical services within the context of community health systems. It is the goal of the program to train individuals with a strong understanding of operations. It is expected that graduates will grow into leadership roles.

The program is developing an “enterprise” model of the health care delivery system. Principal components include evidenced based management, leadership, public health basic skills, and a variety of business skills. The emergent curriculum will require extensive cross-disciplinary competencies. Given the nature of the enterprise model, substantial attention should be given to the trade offs of breadth vs depth in curriculum. This is especially important in a Program that has prided itself on offering students a wide range of electives.

The program is grappling with questions of efficiency vs targeting in re the two approaches to the degree; benefits of putting the day and executive students together are contrasted with the complaints (especially of the executive students)at being co-mingled. The committee could well see that this sort of decision is one for faculty to resolve, keeping mindful of the more important need to increase enrollment overall.

Conversations with students in both the day-MHA and EMHA programs revealed that students are clear about the constituents of their programs and curricula, but few were able to articulate a clear vision of the program goals or of their future work.

RECOMMENDATION.

This is a key time to be engaged in due-diligence regarding the curriculum. The newly developed program will require a new model of advising and curriculum plan to assure that students have appropriate breadth and depth for entry into the marketplace. Internships and mentorships will require a focusing on the experiential components necessary for managing in the enterprise model.

With a newly established curriculum, branding and communication will be vital. Students (as well as alumnae and community leadership) must be apprised of the overall vision behind the curriculum, as well as the current visions of the field overall.

Relationships with the Business School

Program administration, faculty, and students value the relationship between the Program and the College of Business. Approximately 5 students choose the MHA-MBA. While many students in the Program have strong interests in enrolling in courses in the School of Business, access to core courses is limited by the structure of the MBA which is a lockstep/integrated program. Non MHA-MBA students report uneven success in accessing other desired courses in which MBA and MBA-MHSA students are given first choice. The Program’s emergent “enterprise” model is very consistent with models developed by business schools to better depict and understand other industries. As the health care sector grows, demanding students trained in both business and public health, faculty with a wider range of competencies and interests will be required.

RECOMMENDATION:

The relationship between the Program and the College of Business should be sustained and strengthened. Opportunities for MHA student enrollment in key courses should be

facilitated through the identification of courses that are most appropriate for MHA students and working to secure "protected slots" for MHA students in those courses. As the Program's movement toward a new curriculum based on the "enterprise" model continues, there will be a need for a stronger partnership with the school of Business.

Work design

Faculty: Various teaching responsibilities [a 3 credit course, guest lectures, advising, etc.] carry specified numbers of "work points." For each point earned, a faculty member receives 1 percent of his salary. Most faculty earn less than half their salary with work points and depend on soft money to cover the rest of their 12 month salary.

The system of work points is highly refined. The Health Services faculty developed this system and appears to be satisfied with it. As already noted, the Committee is concerned about the extent to which faculty must raise external dollars to cover their full salaries.

Staff: The Committee offers several observations about the staff.

1. This MHA program is richly staffed by UW standards. There are 4 FTE staff to serve approximately 75 degree students.
2. The staff is well organized to meet the range of program, student and faculty needs.
3. Each staff member knows his or her role. Working relationships with other staff in the Department and School appear to be good.
4. The staff is loyal to the program
5. The transition to working with the new Director went well.
6. Staff would welcome more resources, particularly a better computer for the lowest ranking staff member and more time to spend on marketing the program, recruiting students and longer term planning.

RECOMMENDATION:

More people hours are required to do a variety of tasks, notably recruitment, marketing, and advancing the application process.

External Relations and Support Structure

This topic includes: Marketing, advertising, recruitment of students as well as development activities and alumni relations. The Committee finds that the program has latent resources in these areas but that these resources are underutilized or ignored

Marketing/advertising/recruitment:

The program is largely passive. There are brochures for EMHA, WEB sites, some mailings to physicians. Students were attracted by location, school ranking, overall strength of health care at

UW. But the students could not articulate a clear image or vision of the program, or how it differed from other MHA programs. Given soft enrollments, the committee was surprised about apparent lack of urgency in improving recruitment.

Development Activities and Alumni Relations:

The program has a loyal and active alumni base as well as solid community support. There is an active External Advisory Board and mentoring program. But, remarkably, there is no dialogue with this community about development/financial support. These groups readily, even enthusiastically, supported the Committee's assertion that the program was resource poor and that the local health community had been getting a bargain for decades without paying for it. They offered many suggestions for fund raising. They reported that there was little or no financial support for the program because "no one's ever asked."

RECOMMENDATIONS:

The program work with the new development officer and the External Advisory Board to expand the Board's role to include development and to implement a development strategy.

The program become more proactive in recruiting, i.e. in marketing terms work to establish and promote a coherent "brand."

Diversity

Program faculty and administration are aware of the need to enhance diversity among students and faculty. Some progress appears to have been made among students.

At least one faculty member has taken personal responsibility for improving student diversity and is working with program administration on an action plan. The program's relatively passive approach to recruitment is one handicap to improving student diversity.

RECOMMENDATION:

Specific strategies to enhance student diversity be part of a new proactive marketing/recruitment plan.

Professional Mentoring

Review Committee members heard from various sources and compiled various impressions about the place of mentoring in the professional development of MHA students, especially the so-called "day" or residential students. Mentoring during the period of degree enrollment takes two forms: first, during the summer internships that all students are required to undertake;

second, during the regular academic years, there is a specific "mentoring" program that appears to be voluntary.

The summer internship is a traditional approach to the development of health administration students, widely practiced in almost all 2-year degree programs. Typically, a student will be employed full time by a health care related organization for a period of eight to 12 weeks, will often work side-by-side with a middle- or senior-level executive, and will sometimes be required to present a report or reports summarizing his or her work or project results. Summer internships generally provide the first full-scale experience with health care organizations for many students. The University of Washington MHA Program appears to follow this traditional path with a high level of placement success as evidenced in the documentation of student placement sites. The Committee's surmise is that the results are positive for both the student and the mentor, although no evaluation data to support this hypothesis was present in the documentation provided to the Committee. The Committee noted that other programs charge mentor institutions an administrative fee to participate in their internship program and speculated that the UW could do the same.

The second program is a "mentoring" program that begins with a student-mentor "mixer," during which students and interested mentors meet, hold conversations, and make decisions about placement preferences. The Program provides students with potential mentors' résumés and vice versa. Thus, during the "mixer," there will have been a pre-selection of potential matches. Then, both parties submit final preferences and a sort of "match" takes place.

Apparently depending on the level of interest and initiative of the student, the amount and the nature of contact between the student and mentor are negotiated. It is likely that the mentor plays an important role in this discussion, although the Committee could not determine this.

The Committee learned that about 75 percent of a given group of MHA students take advantage of the mentor program, and there was no clear reason given why the remaining quarter do not engage in this process. The mentoring program appears to be highly dependent upon the will and interest of the student, seems to be highly variable in its content, is voluntary in the first place, and may not be subjected to any standardized form of evaluation, although students, alumni/ae, and mentors themselves praised the program.

As the MHA curriculum moves toward a so-called enterprise model that will probably require more breadth of instruction while also needing traditional depth in generic management areas, the complementary role of mentoring assumes more importance as a way to guide students on a route that avoids the extremes of dilettantism and narrowness.

RECOMMENDATIONS:

Except in unusual circumstance, all MHA students should be involved in the mentorship program. Although the importance of personal initiative cannot be gainsaid, this is an insufficient basis upon which to assure that graduates will have the maturity and strength of vision that a genuine leadership mission requires.

Stronger involvement of MHA core faculty in both the summer internship and particularly the mentorship program should exist. Currently, the work surrounding both these activities appears to be almost entirely in the purview of staff personnel.