Department Response to 2018 Program Review Report

Department of Health Services School of Public Health University of Washington November 20, 2018

The Department of Health Services would like to acknowledge the hard work of the review committee and express appreciation for the guidance provided in the report. We are gratified by the largely positive review, its endorsement of our efforts over the past 10 years, and its approval that our programs continue for the next 10 years.

Recommendations and Response – Academic Unit Diversity

Recommendation: Continue efforts to ensure an inclusive climate for diversity, such as training for faculty and staff on unconscious bias and institutional racism and monitoring of the climate.

Response: The Department is involved in, and committed to continuing, the following efforts:

- The Department will continue to offer Learning Labs for faculty and staff at least annually. A
 past Learning Lab focused specifically on workplace inclusiveness aimed at recruiting and
 retaining a more diverse workforce, with an ultimate target of increased equity. The selection
 of topics and format are based on input provided by canvassing Department of Health
 Services (HSERV) faculty and staff to accommodate changing needs.
- Across our teaching programs, we have revised admissions processes to encourage diversity, including training admissions committee members in addressing unconscious bias and encouraging whole-person assessments.
- In addition to our departmental efforts, HSERV will continue to leverage School of Public Health (SPH) initiatives to increase equity, diversity, and inclusion. Dean Godwin is committed to continuing to champion these efforts. SPH recently hired a Chief Diversity Officer (Director of Equity, Diversity, and Inclusion). Two of her early initiatives include development of training sessions for faculty and staff on topics related to unconscious bias and a related session for search committees to ensure that inclusive hiring practices are employed.
- SPH is launching the Center for Anti-Racism and Community Health (ARCH), expected to be administered by HSERV or the Department of Epidemiology. Long-term goals are to 1) develop a cadre of public health advocates, practitioners and researchers equipped to identify and challenge systems and structures of racism; 2) support and foster racismfocused research; and 3) build diversity in our community. A search committee (co-chaired by HSERV Professor Clarence Spigner) has been formed to recruit a senior-level faculty member to lead the center.
- The School and Department conduct climate surveys annually; these surveys will continue to guide the focus, and gauge the impacts, of our efforts.

Recommendation: Continue to work with institutional resources in recruitment and retention of faculty from diverse backgrounds.

Response: Since January 1, 2018, the Department has been very successful in recruiting minority faculty and faculty whose research is devoted to health disparities and underserved populations. In addition to employing methods of recruitment that promote diversity, we have secured \$30K in diversity supplements from the Office for Faculty Advancement for three of these new faculty members. Supplements are provided directly to new faculty in the form of start-up funds to support their research. New faculty in chronological recruitment order include:

- Donald Chi, PhD, DDS, joint associate professor with Oral Health Sciences. Dr. Chi's
 current research focuses on reducing sugared fruit drinks for Alaska Native Children and
 oral health for publicly insured adolescents. His research affiliation is with HSERV's Center
 for Health Innovation and Policy Science (CHIPS).
- Joana Cunha-Cruz, PhD, DDS, MPH, joint research associate professor with Oral Health Sciences and Associate Director for the Northwest Center for Public Health Practice (NWCPHP). Dr. Cunha-Cruz is a dentist and epidemiologist who employs evidence-based methods, regional practice-based research networks, and community-based research to address health disparities.
- Magaly Ramirez, PhD, MS, assistant professor. Dr. Ramirez's current research focuses on using technology to prevent and control risk factors for, and improve care of, chronic diseases in low-income Latinx populations. Her research affiliation is with HSERV's Latino Center for Health (LCH).
- Barbara Baquero, PhD, MPH, associate professor. Dr. Baquero's current research focuses
 on designing and implementing effective community-based interventions to prevent obesity
 and chronic diseases and promote physical activity and healthy diets among underserved
 populations, particularly Latinx populations. Her research affiliations are with HSERV's
 Health Promotion Research Center (HPRC) and LCH.
- Anjulie Ganti, MSW, MPH, senior lecturer. Ms. Ganti brings 20 years of teaching experience and recently directed an International Indigenous Health Research Training Program in the School of Social Work. She is passionate about reproductive justice and social justice and will be teaching SPH undergraduate courses.
- Jerome Dugan, PhD, assistant professor. Dr. Dugan is investigating the effects of insurance-coverage expansions on racial and gender disparities among low-income households with chronic disease and the overall impact on racial and gender disparities in health outcomes. His research affiliation is with CHIPS.
- We have also extended offers to the following three candidates, all of whom will potentially be affiliated with the Seattle-Denver Veterans Affairs Center of Innovation:
 - Researcher whose focus is on the provision of equitable, high-quality, evidencebased, accessible health care for women Veterans (10% of all Veterans).
 - Researcher whose focus is on subgroups of women Veterans who are particularly vulnerable to disparities.
 - Researcher who studies influences of inequities, violence, and discrimination on health among Veterans with sexual and gender minority status.

Recommendation (not identified specifically but mentioned in text): Not as much description was included for initiatives supporting academic success of students with disabilities and LGBTQ students.

Response: Included in the department's equity, diversity, and inclusion mission has been the integration of <u>UW Disability Resources for Students</u> (DRS) into program outreach and orientation activities, meeting with DRS representatives annually, and advising students of DRS resources in support of their academic, professional, and career-development goals.

Starting in 2018, the Health Services Diversity Committee played a prominent role in the establishment of the HSERV LGBTQA+ (lesbian, gay, bisexual, transgender, queer, and asexual) Student Affinity Group and provided administrative, programmatic and financial assistance in support of the group's mission:

- Honor and support the cultural and identity diversity of all members
- Increase education and dialogue on issues facing the LGBTQA+ community
- Support professional-development opportunities among members
- Advocate for issues in higher education that affect LGBTQA+ populations
- Create and maintain an anti-racist atmosphere

The HSERV Diversity Committee has also been instrumental in the creation of the SPH's Rainbow Connection organization that connects LGBTQA+ students across numerous SPH graduate programs, hosts regular programming, and is developing an annual LGTBQA+ Health Symposium for 2019.

Recommendations and Response – Research

Recommendation: As part of the current review, re-organization, and co-location of its research centers, the Department should review Centers to ensure a critical mass of faculty investigators in each center, with the possibility of consolidating Centers for operational efficiencies.

Response: One of the primary goals of the research reorganization is to help our research centers do more research without increasing costs. Many operational functions will be shared so that "a center" will not incur the expensive trappings of a fully separate entity. However, we will remain cognizant of further benefits that could be realized by merging centers. Signals to consider such a move would be significant overlap in research areas or a scarcity of funding or expertise in a particular center. Our efforts to increase researcher collaboration and support across the Department will continue. The more closely we work together, the more clearly we can see opportunities to leverage the skills and capacity of all our faculty and staff.

As attrition occurs within faculty or staff groups, we will consider opportunities for additional efficiencies. We are currently exploring strategies for responding to the retirement of faculty member Donna Johnson and the new research of faculty member Jesse Jones-Smith. For instance, we are asking and taking steps to answer questions such as: "Will the research conducted by Dr. Jones-Smith and her colleagues be best supported in a standalone fashion by the Center for Public Health Nutrition, or would it be better supported by HPRC or CHIPS?"

Recommendation: The Department should explore possible reasons why full professors may be less active in leading funded research and develop strategies to ensure productivity continues from the associate to the full professor rank.

Response: Attached is an illustration of our faculty hiring over the past 25 years (Attachment A). Our professorial track was well-balanced in the 1990s, typically with 8-10 full professors, 8-10 associate professors, and 3-6 assistant professors (numbers here and below are for faculty with primary appointments in HSERV). Research funding was relatively plentiful; full professors and associate professors led lucrative projects, and all assistant professors were promoted. The Department was moving in a positive direction. However, in the decade that followed, a lack of succession planning and insufficient hiring and retention efforts for assistant professors had a long-lasting, negative impact on research. No assistant professors were hired 2003-2007, and most of those hired 2008-2013 (7 of 11) left within a few years. Suspected reasons for these departures include a lack of senior-faculty guidance, beginning with assistant professors' recruitment and continuing through their first years. While there were 16 full professors in HSERV during this period, few led active research portfolios. Instead, they concentrated on teaching or were moving toward retirement.

Over the past five years, we have worked hard to develop a succession plan and regain balance in our professorial track. We begin 2019 with 9 full professors, 11 associate professors, and 5 assistant professors. We have made aggressive efforts to hire strategically and ensure that candidates selected are doing fundable research in areas conducive to collaboration within HSERV. To provide solid guidance and support, we associate each incoming faculty member with at least one of our research centers. Departmental funding gives each new assistant professor start-up funding that can be used to hire research staff as well as protected time to develop their research portfolios; 100% funding the first three years, 90% in year four, 70% in year five, and 50% in year six. Assistant professors teach no more than one course per year in their first 3 years and two courses per year after that.

Guidance for our assistant professors includes the Professional Development Group, which is led by Professor Hendrika Meischke and meets monthly to discuss how to build a research portfolio while meeting the teaching requirements for promotion. Our Research Council, led by Professor Donald Patrick, Associate Chair for Research, conducts a peer-review process for research proposals-in-development. Our associate professors--for HSERV, the rank currently most active in research--have become a thriving, self-directed team who further provide guidance to assistant professors. This group meets monthly with Professor Bryan Weiner and brings together associate professors at HSERV, the VA, the Fred Hutchinson Cancer Research Center, and other UW health-sciences departments and schools to ensure high levels of collaboration and productivity. Their agenda items include:

- Brainstorming grant ideas
- Getting early feedback on aims
- Thinking big (e.g. program-project grants)
- Improving scores on resubmissions and deciding whether to resubmit to same study section
- Sharing experiences serving on study sections and with grant reviews

- o Getting creative about data, populations, partnerships, and settings
- Maintaining diversity in funding sources (applying for non-NIH funding)
- o Discussing ins and outs of NIH training, study sections, and relationships with staff
- Discussing professional development
- Sharing good ideas for figures and tables in grants
- Discussing strategies for finding new collaborators

While we do not currently have a large cohort of full professors who are active in research, we are cultivating this scenario for the future. Through strategic hiring, support for junior faculty that includes the provision of start-up funds and bridging, guidance through the Research Council, Professional Development Group, and the Associate Professors group, we attempt to replicate the more resource-rich situation of the 1990s. We also promoted two successful researchers to full professor in July 2018 and are putting forward a third for promotion in July 2019. With these actions, we hope to re-create a scenario of research success that supports our faculty and the Department.

Recommendation: Continue to identify and implement strategies to enhance and support research, such as the center re-organization initiative, salary-offset incentives for submission of larger grants, and protected research time for junior faculty.

Response: We continue to further develop and apply the strategies mentioned immediately above. Added to this set of initiatives is our work to understand the impact of the indirect-cost rates currently in use and to develop a fiscally responsible growth strategy for research in HSERV. All research centers will be on-campus beginning summer 2020. It will be important to ensure there is a sustainable mix of projects, with most collecting the full indirect-cost rate. With recent and planned hires of active researchers, we project a doubling of our direct-cost revenue and a near-tripling of our indirect-cost revenue over the next 3 years. These revenue increases would put the Department and its research program on solid financial footing.

Recommendations and Response – Teaching and Degree Programs

In addition to the specific recommendations made by the committee (page 10), we would like to address the concerns raised in the text.

Recommendation: Two issues were raised by students regarding the MPH program and instruction. The first was that sometimes courses were less targeted towards those at the MPH level, with some instruction perceived to be more similar to what was covered in undergraduate courses and less challenging than they expected for Masters-level courses (page 5).

Response: Over the summer, the School embarked on a re-envisioning of the 19 different MPHs offered across the five departments in the School. While we are in the early days of this process, the key decision made so far is that all MPH students in the school will share an interdisciplinary first-year core curriculum of 23 credits. This represents five new courses that will be team-taught using multiple pedagogical approaches and intended to meet Council on Accreditation for Public Health (CEPH) competencies. Additionally, the core courses will be

more rigorous so that discipline-specific courses and electives offered in the second year can also cover more advanced material and also be more rigorous.

Recommendation: Most students expressed some concerns about finding practicum placements, understanding the goals of the practicum experience and some misalignment between the types of experiences students get on the practicums and the assignments associated with the practicum placement. The Department should survey MPH students about their practicum experiences and ways that the practicum experience can be better organized and structured for optimal student training and student experience.

Response: The MPH practicum process is co-administered by the SPH and departments. The School is engaged in redefining its MPH practicum expectations based on new CEPH accreditation requirements. The new requirements had raised questions about implementation and student deliverables, but new SPH leadership is now in place, and we expect these issues to be resolved within academic year 2018-19. In addition, the revisions pending to the MPH Program across the School will have significant impact on the practicum, and we anticipate achieving a steady state in 2-3 years. As we do now, we will make every effort to ensure that students have optimal experiences and are surveyed for their feedback.

Recommendations and Response – Health Informatics

Note: due to a family emergency, the reviewer best able to address our Health Informatics program was unable to participate in the site visit, so the review is based on the written materials provided to the review committee.

Recommendation: Directors of the health informatics programs should keep an eye on the other biomedical informatics programs within the university (e.g., http://bime.uw.edu/) and look for opportunities to collaborate on research, share courses or course materials where appropriate, and help their students find internships, research opportunities, and eventually jobs.

Response: We intend to leverage HSERV faculty with joint BIME (Biomedical Informatics and Medical Education) appointments, opening lines of communication with BIME and the CIPCT (Clinical Informatics and the Patient-Centered Technologies) on-line MS program.

Recommendation: Faculty responsible for overseeing both the Bachelor's and Master's Biomedical Informatics degree programs should keep these Health Informatics core competencies in mind as they review existing and new course content.

Response: The Master of Health Informatics and Health Information Management (MHIHIM) curriculum currently includes both the Facets for Masters of Health Informatics from the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM) and the Core Competencies from the American Medical Informatics Association. In addition to extensive work by the Program faculty to revise courses to meet these competencies, the MHIHIM Advisory Board is very active and reviews curriculum to offer feedback on how the Program's courses meet the competencies. The baccalaureate program is

governed by a different set of competencies. The faculty implemented the 2014 baccalaureate degree core competencies in Autumn 2017.

Recommendation: We would strongly encourage the Department to maintain their CAHIIM accreditation going forward.

Response: The Department has policies and procedures in place to ensure the program remains accredited.

Recommendation: The Department should continue to survey students who graduate from the informatics programs to both understand how well they performed in the past as well as to seek their alumni's input on future directions of the field and modifications needed in coursework for future students.

Response: Both the baccalaureate and master's programs conduct graduate and employer surveys within 6 to 9 months of graduation, as required for CAHIIM accreditation. We continue efforts to increase the response rate to both these surveys. In addition, the master's program has alumni serving on the Advisory Boards. The master's program has added current students and alumni to the Admissions Review process.

Recommendations and Response – Other

Recommendation: The Department and School should work with the graduate college and central administration to address the weaknesses identified with PCE support. The lack of support of PCE for the certificate programs is extremely concerning, particularly given that the Department is paying for services from PCE that they are not receiving.

Response: While there is variability across the Department of Health Services fee-based programs as to which UW Continuum College (UWC2, formerly referenced as PCE) services are used and their respective levels of satisfaction, all programs agree that the cost of coadministering our fee-based programs with UWC2 is higher than the value of services (quantity and quality) delivered. In 2017, the University initiated a "Central Administrative Unit Customer Service Survey" that collected feedback on 94 different services. Through that process, as well as direct program feedback received throughout 2017-18, it became clear to UWC2 that campus partners are unhappy with UWC2's systems, processes and communications. This feedback spurred a number of actions, including initiation of the UWC2 Advisory Council (comprised of fee-based unit leaders and administrators) led by Vice Provost Rovy Branon. The Council's first charge for 2018-19 is to advise UWC2 on "improving the fee-based degree model." The Department is working closely with the SPH's council representative to ensure its interests are represented. In the meantime, program management is collaborating directly with UWC2 management on process improvements at the program-operations level.

Recommendation: The Department should consider revising the point system to include more incentives for the preparation of large and innovative research projects.

Response: We currently provide a moderate FTE contribution for grant writing via the point system (up to 7.5% annually), and we continue to consider increased monetary incentives via the point system. Beyond the point system, we are employing the following strategies to support the development of large, innovative projects:

- Strategic hires of junior faculty who have high potential for research success due to the fields in which they work and their funding and publishing history.
- Facilitating grant submissions made by our joint faculty, particularly for our six VA faculty. We have removed administrative roadblocks and are providing incentives for these faculty to conduct more of their research within the Department. Two joint VA faculty, Emily Williams and Edwin Wong, have moved to 50% appointments within the Department to allow them to lead and develop more research within the Department.
- Strategically affiliating junior faculty with our research centers to facilitate collaborations
 with experienced staff and faculty who can help them. This helps fill some of the gaps
 left by the lack of an earlier succession plan.
- Continued work with the Research Council, in tandem with the Professional Development Group and the Associate Professors Group, to guide researchers as they hone their grant-writing skills.
- Through reorganization, creation of flexible workgroups to support researchers in the areas of statistical analysis and data management, communications and marketing, training and outreach, and fiscal operations.
- Periodic report-outs to illustrate Department-wide movement toward larger grants and beneficial indirect rates, allowing all PIs to see what they do can help move the Department's research program toward sustainability.