

December 30, 2009

A. Lorris Betz
Senior Vice President for Health Sciences
5th Floor, Clinical Neurosciences Center
Campus

RE: Graduate Council Review
Department of Family and Preventive Medicine

Dear Vice President Betz:

Enclosed is the Graduate Council's review of the Department of Family and Preventive Medicine. Included in this review packet are the report prepared by the Graduate Council and the Memorandum of Understanding resulting from the review wrap-up meeting.

Please forward this review to the Academic Senate to be placed on the information calendar for the next meeting of the Senate.

Sincerely,

Charles A. Wight
Dean, The Graduate School

Encl.

XC: David J. Bjorkman, Dean, School of Medicine
Michael K. Magill, Chair, Department of Family and Preventive Medicine
Stephen Alder, Chief, Division of Public Health
Donald M. Pedersen, Director, Physician Assistant Program

The Graduate School - The University of Utah

**GRADUATE COUNCIL REVIEW OF THE DEPARTMENT OF
FAMILY AND PREVENTIVE MEDICINE**

April 27, 2009

The Graduate Council has completed its review of the Department of Family and Preventive Medicine. The External Review Committee included:

James F. Cawley, MPH, PA-C (Chair)
Professor, Department of Prevention and Community Health
School of Public Health and Health Services
George Washington University

Patricia M. Dieter, MPA, PA-C
Program Director
Department of Community and Family Medicine
Duke University Medical Center

Dr. Richard Muma, PhD, MPH, PA-C
Professor and Director, Public Health Program
Wichita State University

The Internal Review Committee of the University of Utah included:

Dr. Deborah Scammon
Professor, Department of Marketing

Dr. Norman Waitzman
Professor, Department of Economics

Dr. Les Chatelain
Professor, Department of Health Promotion and Education

This report by the Graduate Council is based on the self-study report submitted by the Department of Family and Preventive Medicine, the results of the internal and external review committees, and the comments/responses from Dr. Michael K. Magill, Chair and Professor of the Department of Family and Preventive Medicine; Dr. Stephen Alder, Chief of the Division of Public Health; David Keahey, Associate Director of Graduate Studies for the Physician Assistant Program; and Dr. David Bjorkman, Dean of the School of Medicine at the University of Utah.

DEPARTMENT PROFILE

The Department of Family and Preventive Medicine is in the School of Medicine. The Department has recently been reorganized and is now composed of 3 Divisions: 1) the Division of Public Health, 2) the Division of Family Medicine, and 3) the Division of Occupational and Environmental Health; and 1 Program, the Physician Assistant Program. The Division of Occupational and Environmental Health is a new Division and was therefore not included in this review. The Graduate Council does not review medical education and therefore the Division of Family Medicine is not included in this review. This Graduate Council review includes the Division of Public Health and the Physician Assistant Program.

Program Overview

Division of Public Health

The Division of Public Health operates its own master's and doctoral degree programs, awarding MPH, MSPH, and PhD degrees. The Division offers several joint degrees including an MD/MPH (or MSPH), and MPA (master of public administration)/MPH. The Division also offers courses at the undergraduate level, and there is some discussion of developing an undergraduate BA in Public Health. The Division has a large number of students, approximately 150, enrolled in their master's and doctoral programs. Tuition from these students is an important revenue source for the Division; however, adequate resources and faculty support appears to be a concern. The Division has recently undergone several important transitions including the appointment of a new Chief for the Division, a move to new facilities at the University, the loss of several faculty members, and recent reorganization with the Department of Family and Preventive Medicine to separate the Division of Public Health and the Division of Occupational Health. The changes in structure and leadership have led the Division of Public Health to refocus its mission towards capitalizing on its strengths to serve as a resource within the School of Medicine, instead of moving towards a School of Public Health that is separate from the School of Medicine, which is the model used in some institutions.

Physician Assistant Program

The Physician Assistant Program is a well-established program with an excellent national reputation. The Program currently enrolls 36 students annually, although based on recommendations from the Utah Medical Education Council, enrollment is anticipated to increase to 50 students by 2012. The Physician Assistant Program has a 2-year curriculum and awards a Master of Physician Assistant Studies degree. Students have an excellent pass rate on the Physician Assistant National Certifying Examination, well above the national averages. The current Program Director, who is very highly regarded both internally and nationally, will retire from the position in 2010. The Program appears to have a strong plan in place to recruit an effective replacement and facilitate this transition.

Faculty

Division of Public Health

The Division of Public Health currently consists of 9 faculty members, 1 full professor, 4 associate, and 4 assistant professors. Four are clinical track faculty (3 at the associate professor level and 1 at the assistant professor level). The Division is currently conducting a search for 2 additional tenure-track faculty members in Biostatistics and Epidemiology, and 1 clinical faculty member. Of the 9 total faculty members within the Division, 5 are women. One is African American. There is a need for additional faculty members to allow the Division to meet the needs of its current students and establish its role in the School of Medicine. The Division has outlined its plan to improve the recruitment of minorities in the Division. Faculty members in the Division have historically carried heavy teaching and advising responsibilities due to the large number of students in the Division. Many of the faculty members have been recognized for their teaching excellence, and overall the faculty has demonstrated resiliency and productivity in the face of a great deal of change.

Physician Assistant Program

The Physician Assistant Program has 8 core faculty members, each of whom is a Physician's Assistant with a master's degree. Four faculty members are female, none are minorities. Faculty in the Physician Assistant Program can gain faculty appointment in the School of Medicine's Department of Family and Preventive Medicine. Currently 1 faculty member is a full professor, 1 an associate professor, and 1 an instructor in the non-tenure, clinical track. Two additional faculty members are in the process of attaining appointments as instructors. Continued efforts to assist faculty in attaining appointments in the Department will assist with improving the visibility of the Program within the School of Medicine. The Program uses a large number of adjunct faculty for both instruction and clinical supervision.

The faculty and adjuncts in the Physician Assistant Program are enthusiastic and dedicated to their profession and the development of their students. There is a strong sense of collegiality among the faculty. Many faculty members are engaged with national professional organizations and contribute to professional education journals. The faculty have enjoyed strong and stable leadership in the Program. Current faculty:student ratio is excellent. The increase in enrollment will challenge the ability to maintain this ratio, and to continue to provide outstanding clinical instruction.

Students

Division of Public Health

In the 2007-2008 academic year, the Division of Public Health had 80 students enrolled in its master's degree programs and 32 students in its doctoral degree program. In the same academic year the Division awarded 42 master's degrees and 4 doctoral degrees. The Division has two scholarships designated for support of minority students. A limited number of students are supported as Teaching Assistants, Research Assistants, Fellowships and Graduate Assistants.

Based on the last review by the Graduate Council, the Division of Public Health has improved efforts towards advising students. Students appear satisfied with their progress towards degrees in their programs. For the master's degree programs the average time to degree attainment has remained at about 2 years, and attrition rates have been generally low. The doctoral program awarded its first degrees in 2007-2008. As a new program, tracking student progress towards degree attainment will need to be monitored. The doctoral program has taken on a large number of students, and although admissions have been reduced in the past few years, there remain a large number of doctoral students in the program relative to the size of the faculty.

The Division takes advantage of opportunities for student input on specific courses and the programs as a whole while students are in their programs. The Division appears to be very receptive and responsive to this feedback. The Division does not have an adequate process to track the outcomes of its graduates. This feedback would provide important input to identify areas of strength or deficiency in their programs that students may perceive only after graduation.

Physician Assistant Program

The Physician Assistant Program currently admits 36 students annually. The Program receives approximately 450-500 applicants for these positions, allowing them to select highly qualified students. Students note that the process of application and notification of acceptance occurs late relative to other programs, creating pressure to accept admission from other programs and hardships in getting affairs in order to begin the program. Over the past 5 academic years, approximately 70% of accepted students have been female, and 15% are minorities. The percentage of minorities in the program has risen over the past 7 years. The Program makes use of a Diversity Coordinator, which is likely responsible for the successful minority recruitment efforts. Unlike many programs in the School of Medicine, students in the Physician Assistant Program receive almost no financial support and little or no state financing, creating a large financial burden to be borne by the students.

Students in the Physician Assistant Program express a great deal of satisfaction with the Program and are happy with the support they receive from faculty and staff and express a high degree of satisfaction with the Program as a whole. The Program has a defined process of remediation for students who are experiencing difficulty with the Program. Attrition from the Program is very low. The Physician Assistant Program surveys graduates on various aspects of the Program, and although response rates are somewhat low, the efforts to gather this information are laudable.

Curriculum and Programs of Study

Division of Public Health

The Division of Public Health offers master's degrees in public health (MPH), master of science in public health (MSPH), master of statistics (MStat), joint master's degrees with medicine (MD/MPH or MD/MSPH), and healthcare administration (MPH/MHA). The Division also offers a Doctor of Philosophy in Public Health (PhD). The MPH is a 2-year, 45 credit

curriculum that may be completed in 3 semesters, although a 2-year time frame is more typical. The MPH does not require completion of a research project. The MSPH is a 55 credit curriculum that requires at least 2 years for completion. The MSPH degree requires a research project presented as a thesis or paper of publishable quality. The PhD program has a 72 credit hour minimum and requires both a teaching and research practicum. The program is designed to require 4-5 years for completion.

The coursework for the master's degree programs involves instruction from a large number of adjunct instructors, which has created some inconsistency in the quality of some courses. Students commented on a desire to have more elective courses available in the curriculum; however, this may not be realistic considering the limited faculty resources.

Physician Assistant Program

The curriculum for the Physician Assistant Program requires 89 credit hours taken over two years. The first year is primarily didactic while the second year involves preceptorships in various clinical settings. The curriculum is well-designed to cover current topics in medicine including evidence-based medicine, genetics, community-oriented primary care, etc. A deficiency in the clinical training is the lack of exposure for all students to experiences with residency-trained physicians in the area of internal medicine and psychiatry. The concern will only grow with expansion of student enrollment.

Program Effectiveness – Outcomes Assessment

Division of Public Health

The tracking of student outcomes and program effectiveness is a concern for the Division of Public Health. There is little data provided to examine the overall effectiveness of the program or to permit comparison to other programs nationally.

Physician Assistant Program

The Physician Assistant Program assesses effectiveness through recent graduate and alumni surveys and scores on the national board examination. The Program has examined student performance while in the Program to performance on the national examination. Overall the pass rates on the national examination have been excellent. The Program effectively tracks the outcomes of its graduates. The percentage of graduates working in primary care vs. specialty care, and the percentage working with underserved populations compare favorably with national averages. The Program could benefit from additional evaluation of particular didactic components of the curriculum.

Facilities and Resources

Division of Public Health and Physician Assistant Program

The Division of Public Health and the Physician Assistant Program are currently housed in Research Park in the same building with the Family Medicine Division and the Administration for the Department of Family and Preventive Medicine. The space within this building has been undergoing reallocation to decrease fragmentation among these different entities. Classroom and student computing facilities are also housed in the same building. The Physician Assistant Program also uses the classroom and clinical facilities in the new Health Science Education Building at the University of Utah.

The funding for the Division of Public Health is generated largely from student credit hours, although the Division does not directly receive this funding. A differential tuition assessment has recently been established which provides greater and more predictable financial support for the Division. Funding remains a concern for the Division, as does the balance between teaching responsibilities and other scholarly activities for the faculty. The Physician Assistant Program has a self-retaining tuition arrangement and generates revenue from student contact hours, creating a stable financial situation for the Program.

COMMENDATIONS

Division of Public Health

1. The Division faculty and staff have shown remarkable resiliency through numerous recent changes. The Division has energetic new leadership and a highly capable faculty to move the Division into the future.
2. The Division is evaluating its mission and role within the School of Medicine and the University, and positioning itself to capitalize on its core strengths.
3. The Division and its faculty are committed to the education of its students. Students in the Division are very satisfied with the quality of their education and enjoy strong relationships with faculty.
4. The Division provides degree programs that are integral to the University of Utah and the School of Medicine.
5. The Division has a strong commitment to interdisciplinary collaboration in research and program development.

Physician Assistant Program

1. The Program has a clear sense of mission and purpose, strong and well-regarded leadership, and a highly-committed faculty and staff.
2. The Program is recognized nationally as a leader in Physician Assistant education.

3. The Program has a well-established procedure for examining its overall performance and the outcomes of its graduates. The Program is very responsive to any issues or concerns that arise from these assessments.
4. The Program has been proactive in anticipating changes that will be occurring due to the retirement of its Director and expansion of its enrollment.
5. The Program takes explicit steps to assist with recruitment of minority students. These efforts have resulted in rising rates of minority students in the Program.

RECOMMENDATIONS

Division of Public Health

1. The Division should continue to refine its mission and strategic plan for the future. A written mission statement with measurable outcomes should be developed.
2. The Division should continue to focus and define its role in the areas of biostatistics and epidemiology, and continue to build collaborative efforts related to these areas.
3. The Division should continue to seek opportunities for sustainable financial support for the Division that do not rely strictly on funding that results from teaching activities. Continued reliance on revenues from teaching may hamper the scholarly development of the Division.
4. It is recommended that the Division should develop a strategy to mentor junior faculty and anticipated new faculty hires with the School of Medicine's RPT process in order to improve retention of faculty.
5. The Division should develop a strategy to regularly evaluate its degree programs and the outcomes of its graduates. Consultation with the Physician Assistant Program is a positive step towards this goal.
6. The Division should carefully track the progress of doctoral students to insure progress towards degree completion.
7. Continued growth in the Division is likely to provide opportunities to diversify the faculty with respect to minority representation.

Physician Assistant Program

1. The Program should seek additional opportunities to financially support students through scholarships or other mechanisms.
2. The Program should continue its careful planning towards hiring a new Program Director.
3. The Program should consider revisions of the timing of its application process to insure that top applicants are not lost to other programs.
4. The Program should continue efforts to assist faculty members in attaining faculty appointments within the Department of Family and Preventive Medicine.

5. Hiring additional faculty members within the Program will provide opportunities to diversify the faculty with respect to minority representation.

ACTIONS TAKEN SINCE INITIATION OF THE REVIEW

Division of Public Health

Since the reports from the internal and external review teams, the Chief of the Division of Public Health and the Chair of the Department of Family and Preventive Medicine have taken actions to address some of the concerns raised. The Division is continuing to work towards better defining its mission and role in the School of Medicine through a planned faculty retreat, and ongoing efforts are underway to recruit additional faculty members with expertise in the core areas of the Division (Epidemiology and Biostatistics). Recent budget concerns have presented additional challenges in faculty recruitment efforts. The Division has also established additional joint degree offerings across the University and is moving towards a fully-online MPH curriculum. The Division has consulted with the Physician Assistant Program for assistance with outcomes assessment and graduate surveys.

Physician Assistant Program

Since the reports of the internal and external review teams, the Associate Director of Graduate Studies for the Physician Assistant Program and the Chair of the Department of Family and Preventive Medicine have taken actions to address some of the concerns raised. The Program is continuing to move forward with a thoughtful and inclusive process for recruiting a new Director for the Program. Funding has been allocated for two new faculty positions in anticipation of growth in enrollment. The Program has made plans to produce an annual Outcomes Assessment Report to further evaluate the didactic and clinical components of its curriculum. Additional efforts to secure scholarship support for students have been undertaken.

Submitted by the Ad Hoc Review Committee of the Graduate Council:

Julie Fritz (Chair), Department of Physical Therapy
Sally Planalp, Department of Communication
Mary Jane Taylor, College of Social Work

**Memorandum of Understanding
Department of Family and Preventive Medicine
Graduate Council Review 2008-09**

This memorandum of understanding is a summary of decisions reached at a wrap-up meeting on October 27, 2009, and concludes the Graduate Council Review of the Department of Family and Preventive Medicine. A. Lorris Betz, Senior Vice President for Health Sciences; David J. Bjorkman, Dean of the School of Medicine; Michael K. Magill, Chair of the Department of Family and Preventive Medicine; Stephen Alder, Chief of the Division of Public Health; Donald M. Pedersen, Director of the Physician Assistant Program; Charles A. Wight, Dean of the Graduate School; and Frederick Rhodewalt, Associate Dean of the Graduate School, were present.

The discussion centered on, but was not limited to, the recommendations contained in the Graduate Council review completed on April 27, 2009. At the wrap-up meeting, the working group agreed to endorse the following actions:

DIVISION OF PUBLIC HEALTH

Recommendation 1: The Division should continue to refine its mission and strategic plan for the future. A written mission statement with measurable outcomes should be developed.

The Division Chief reports that based on input from the faculty, a draft of the Division's new mission statement should be available in a few weeks. The mission statement will better align the Division's goals with those of the Department of Family and Preventive Medicine (DFPM), the School of Medicine, and the University. The revised mission statement will be forwarded to the Graduate School by the end of December, 2009.

Recommendation 2: The Division should continue to focus and define its role in the areas of biostatistics and epidemiology, and continue to build collaborative efforts related to these areas.

Since the review, the Division has successfully recruited two new faculty to address this recommendation. One is a biostatistician and the other is an epidemiologist hired in collaboration with the Huntsman Cancer Institute. The Division anticipates that the new faculty hires will contribute substantially to their goal of increasing collaborative interdisciplinary research projects in biostatistics and epidemiology.

Recommendation 3: The Division should continue to seek opportunities for sustainable financial support for the Division that do not rely strictly on funding that results from teaching activities. Continued reliance on revenues from teaching may hamper the scholarly development of the Division.

Adequate funding continues to be a challenge for the Division. The Division has instituted differential tuition, and increased revenue from this source will help offset loss of teaching revenue as faculty research and grant seeking activities increase. The Division is well positioned to contribute collaboratively to researchers across the University and plans to develop those relationships in order to increase extramural funding.

Recommendation 4: It is recommended that the Division should develop a strategy to mentor junior faculty and anticipated new faculty hires with the School of Medicine's RPT process in order to improve retention of faculty.

The Division has taken several actions to address this recommendation. It has instituted annual reviews of all faculty and all new faculty hires are assigned a mentor to help guide them through the RPT process. The School of Medicine also provides faculty mentoring support and mentoring workshops for the Division.

Recommendation 5: The Division should develop a strategy to regularly evaluate its degree programs and the outcomes of its graduates. Consultation with the Physician Assistant Program is a positive step towards this goal.

Division personnel are continuing to meet with the Physician Assistant Program Outcomes Director in order to identify best practices in outcome assessment for the purpose of developing a set of outcomes assessment strategies for their program. They are also conducting exit surveys and maintaining contact information from past graduates, which will allow them to collect information on post-graduate outcomes and satisfaction.

Recommendation 6: The Division should carefully track the progress of doctoral students to insure progress towards degree completion.

The Division has instituted formal periodic reviews of all doctoral students in the program. It has also adjusted its admission procedures in order to match students with faculty mentors at the time of matriculation.

Recommendation 7: Continued growth in the Division is likely to provide opportunities to diversify the faculty with respect to minority representation.

The Division reports that as a result of the recent restructuring of DFPM the Division has attained greater faculty diversity with respect to gender balance. The Division will continue to seek increased diversity through hiring underrepresented minorities. They also see opportunities for increasing diversity through their joint MD/MPH program.

PHYSICIAN ASSISTANT PROGRAM

Recommendation 1: The Program should seek additional opportunities to financially support students through scholarships or other mechanisms.

The Program Director reports that they have taken a larger endowed fellowship and divided it into five smaller fellowships in order to provide partial support to more students. These fellowships carry a payback obligation of service to underserved areas. The faculty is working on a development effort to commemorate the Program's 40th year. A central focus of this effort is to raise money for scholarships. They are also trying to raise funds for international study experiences. DFPM provides support for these development activities within the Program.

Recommendation 2: The Program should continue its careful planning towards hiring a new Program Director.

The DFPM Executive Committee is currently conducting a search for a new Program Director. They are working with a consultant to assist with the process. The search committee is currently advertising the position and targeting specific individuals. The goal is to complete the search by the end of this academic year.

Recommendation 3: The Program should consider revisions of the timing of its application process to insure that top applicants are not lost to other programs.

The application deadline has been moved forward to September 1.

Recommendation 4: The Program should continue efforts to assist faculty members in attaining faculty appointments within the Department of Family and Preventive Medicine.

The Program Director reports that 6 of 10 clinical teachers (formerly academic staff) are currently DFPM faculty and that the Program is working to move remaining academic staff into clinical faculty appointments.

Recommendation 5: Hiring additional faculty members within the Program will provide opportunities to diversify the faculty with respect to minority representation.

In accord with this recommendation, the Program reports that it has achieved gender balance through its recent faculty hires. Although not directly related to the recommendation, the Program reports that they have hired a part-time diversity coordinator to work with community groups to recruit underrepresented students.

This memorandum of understanding is to be followed by annual letters of progress from the chair of the Department of Family and Preventive Medicine to the Dean of the Graduate School. Letters will be submitted each year until all of the actions described in the preceding paragraphs have been completed.

A. Lorris Betz
David J. Bjorkman
Michael K. Magill
Stephen Alder
Donald M. Pedersen
Charles A. Wight
Frederick Rhodewalt

Charles A. Wight
Dean, The Graduate School
December 30, 2009