W PROGRAM IN HEALTH MANAGEMENT & INFORMATICS

UNIVERSITY *of* WASHINGTON

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UW Graduate School ACADEMIC PROGRAM REVIEW TEAM
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Dear Academic Program Review Team,

On behalf of the Program in Health Management and Informatics, we appreciate the committee for their thorough and thoughtful review of the Master of Health Administration (MHA) and Executive Master of Health Administration (EMHA), Master of Health Informatics and Health Information Management, and B.S. in Health Informatics and Health Information Management degrees. Our faculty and staff understand the amount of time and effort that is required to complete these programmatic reviews and greatly appreciate the recommendations provided in the HMI Programs Graduate School Review Report.

The HMI programs have examined the principal recommendations and provide the following comments.

1. *Develop a strategic plan that clearly articulates how each of the HMI programs align with the broader vision and mission of the SPH; specifies the desired fit of each HMI degree program within SPH and with each other to achieve that strategic alignment; and enhances each degree program's ability to serve its key stakeholders more effectively.*

E/MHA Program Response:

We agree with the Committee's assessment that, at present, alignment of strategic priorities is lacking between the E/MHA program and SPH, and that this lack of alignment limits the E/MHA program's potential to help the SPH fulfill its mission and vision. Similarly, we believe the E/MHA and SPH will benefit if our program's strategic plans align more clearly with the SPH's mission and vision. These are key components of the strategic planning process presently underway in the E/MHA programs.

Strategic planning for the E/MHA programs began in Autumn 2023. This process began with "listening sessions" between the Program Director and students (by year and cohort), staff, and faculty, to better inform areas of focus. In Winter and Spring of 2024 the programs will engage three external advisors to review the materials prepared for Graduate School program review and make at least one site visit to assess the E/MHA programs and to offer their insight on positioning of our programs in the marketplace, competitors, and future directions. We will ask these external advisors to prepare a report of findings by Autumn 2024, and the programs will hold a Fall planning retreat to finalize an updated strategic plan to guide the programs from 2025-2030.

The focus of our planning retreat will be articulating a revised vision and mission for our programs that aligns with the broader vision and mission of the SPH and incorporates both the voices and interests of

our key stakeholders. Included in strategic planning are issues of curricula, faculty composition, program positioning, and E/MHA program status as fee-based programs.

M/HIHIM Program Response:

We agree that the two HIHIM programs need to engage in strategic planning, and we plan to conduct this exercise in 2024. The HIHIM program had embarked on a strategic plan update just prior to the creation of the HMI entity. The program completed a SWOT analysis as a precursor to the update. However, the update was placed on hold as the program awaited a strategic plan to be developed by the overarching HMI program. The HMI program, to our knowledge, never started the strategic plan development process and, consequently, the updated HIHIM strategic plan was never completed.

The HIHIM program agrees that a unique strategic plan for each HIHIM program should be generated, considering stakeholders, mission, vision, and relationships with each other and with the SPH. If the HMI entity is dissolved, relationships, if any, to the EMHA/MHA programs should be included in the strategic plan.

2. *Evaluate the implications of a fee-based versus tuition-based funding model for the cost of degree acquisition and delivery.*

E/MHA Program Response:

We appreciate the committee's recommendation to evaluate the implications of a fee-based versus tuition-based funding model for the E/MHA programs; cost-benefit and competitive market analyses for our programs will be key components of our strategic planning process. At present, we know that our programs are the most expensive offered by a public university among peers of similar ranking; we are beginning assessment of how our tuition costs may impact participation in our programs overall and by first generation, underrepresented minority, rural, and high financial need students. Should our assessment suggest that either or both E/MHA programs benefit from transitioning from fee-based to state-based, we will work with SPH and the University to enact the change, cognizant that this is likely a significant and multi-year undertaking.

M/HIHIM Program Response:

We understand that the HSPop department plans to conduct a cost/benefit analysis of fee-based vs. tuition-based models. Several questions must be answered, the most important of which: is it possible for a program to move from fee-based to tuition-based? If so, what is the breakeven point in terms of enrollment? Would a high enrollment be sustainable, given capstone project limitations? The HIHIM undergraduate program would be looked upon favorably if moved to a tuition-based model for reasons articulated during the review, such as student access to funding opportunities, improved competitiveness as a result of lowered tuition, opportunity for students to take courses outside of the major at a higher priority, just name a few.

3. *Reevaluate the current HMI structure to determine whether it is the best home for each HMI degree program, or if some other structure within SPH would be more appropriate.*

E/MHA Program Response:

In 2020 via University Reorganization, consolidation, and elimination procedures (RCEP - defined in Section 26-41 of the UW Faculty Code), the M/HIHIM programs joined the existing E/MHA interdisciplinary group to form the Program in Health Management and Informatics (HMI). These programs were originally managed by a single director, co-located, and it was hoped that the programs would achieve efficiencies of scale. As noted in the Graduate Program review report, it's unclear that these efficiencies have materialized and it has been recommended (and the Dean has supported that) the programs focus on crafting their own identities. At present, the E/MHA programs feel the best strategy for sustaining and further developing a distinctive identity, both in brand and educational programs, is to dissolve the HMI.

This process will require several administrative considerations for the E/MHA programs and the Department of Health Systems and Population Health (HSPop), the most important of which is the appropriate home of the E/MHA programs — presently the degree programs are academically housed in the Office of the Dean, but administratively housed in the Department. If it is decided via strategic planning that the E/MHA degree programs should move into HSPop, similar to the Department's other master's programs, this could be enacted via a limited RCEP. An additional consideration is whether the E/MHA programs should persist as an interdisciplinary group, as they have since their inception in 1973. At the time, faculty contributing to the MHA were drawn from across existing units on campus. At present, all but two faculty who participate in the E/MHA programs are housed in HSPop. This is different from the other interdisciplinary programs in SPH, as well as UW's guidelines for interdisciplinary groups. Dissolving the interdisciplinary group could also be accomplished via limited RCEP.

M/HIHIM Program Response:

The HIHIM program looks forward to meeting with leadership in SPH, HSPop, and the UW to explore the most effective organizational structure, guided by the questions stated above. Although the benefits envisioned by the creation of the HMI entity never fully materialized, for several reasons, the program has enjoyed an improvement in staff support. Moving the undergraduate and graduate advisors and program coordinator under the Senior Associate Director for Operations, improved access to the Senior Associate Director for Curriculum Management and benefiting from more robust support from the Marketing and Recruiting Specialist have resulted in consistent support processes with an eye toward best practices. Regardless of how a new structure evolves over the next year, both HIHIM programs would greatly benefit, we believe, by retaining the current staff support structure, and augmenting with additional resources for marketing and recruitment of students for both the undergraduate and graduate HIHIM programs.

4. *Increase the percentage of full-time faculty and develop deliberate, systematic practices for onboarding, supporting, and evaluating teaching and pedagogy for all HMI faculty.*

E/MHA Program Response:

The E/MHA programs appreciate and agree about the importance of balancing clinical and full-time faculty; as our faculty are almost exclusively housed in HSPop we will continue to work with the Department to articulate our teaching needs and the impact that full-time faculty have on our students,

and to include faculty who can teach in the E/MHA programs in upcoming years HSPop hiring plans. We are optimistic that HSPop and SPH will consider the impact that full-time faculty have on the sustainability of our programs as they consider hiring. Of note, we also feel strongly that hiring additional full-time faculty and capitalizing on the hires of new faculty in HSPop present an opportunity to further diversify the faculty who teach in our programs, and will help with our continued commitment to EDI articulated below.

Additionally, we will continue to work internally as a program, with HSPop, and with SPH to better develop deliberate, systematic practices for onboarding, supporting, and evaluating teaching and pedagogy for faculty who teach in the E/MHA.

M/HIHIM Program Response:

The two HIHIM programs have employed the use of clinical faculty relatively sparingly, with full-time faculty teaching majority of the courses in both programs. There will always be courses in HIHIM for which clinical faculty are better positioned to teach, especially subject areas like data governance, enterprise health information management, and healthcare law. In conjunction with the support staff professionals, the program will review and improve onboarding processes for new and clinical faculty; continue to ensure rigor and consistency in course offerings as specified by CAHIIM and the SPH, and HSPop; and, explore intentional scaffolding, by being mindful with the course sequence in both HIHIM programs and exploring crossover of learning outcomes between programs. These are expectations by CAHIIM, our accreditation body, and the programs have been intentional in their employment of these concepts.

5. *Seek to engage more research track faculty to teach in these programs to ensure the balance between research- and practice-informed perspectives.*

E/MHA Program Response:

As with full-time faculty, we agree about the importance of including research track faculty in the E/MHA program; historically the E/MHA benefitted from significant contributions from research track faculty and the UW was known as a national leader in scholarship in health administration. We will continue to work with HSPop to articulate our needs for participation in the E/MHA programs by existing and future research track faculty, and are optimistic that the Department will consider these needs as they develop future year hiring plans.

M/HIHIM Program Response:

HIHIM course content is relatively specialized; as such, there are few research faculty who possess the requisite skill sets and knowledge to teach most courses. All HIHIM core faculty are teaching faculty with limited research expectations. However, the program will not object to establishing a PhD-trained, research professor position, if economically feasible; currently, at least two courses exist for which research faculty would be a good fit. Additionally, the two HIHIM programs would be amenable to allowing our existing core faculty who hold doctoral degrees, to have time set aside and committed for research activities.

6. *Leverage learning from pandemic experimentation and innovations.*

E/MHA Program Response:

We appreciate the Committee's suggestion to sustain HyFlex in the EMHA and have undertaken systematic assessment of present and previous EMHA cohort experience with both HyFlex and the program's intensive delivery model, whereby in-person classes are held on Thursday, Friday, and Saturday 8A-5P one weekend a month and students attend either in-person or synchronously online. Early assessment suggests that our present learners appreciate that the HyFlex modality allows either in-person or remote participation with minimal difference in experience. We are presently considering whether the three-day intensive model best serves participants in the program, and our E/MHA strategic planning process will focus in part on how to best sustain the innovation in our EMHA program while also best serving our learners.

M/HIHIM Program Response:

This approach to combining a cohort from the MHIHIM program with one from the EMHA program was attempted in 2021 and 2022 in one course. The result was unsuccessful for several reasons.

The program has elicited feedback from students and no clear favored option has been identified. The program believes that the current executive schedule (Th/F/S once per month) should be adjusted to accommodate students who cannot be absent from work on Thursdays and is currently exploring alternative options, such as Friday/Saturday all day, with the third course being delivered at a distance on two weekday evenings. We plan to explore these options further during our strategic planning sessions.

7. *Ensure the HIHIM/MHIHIM programs are adequately funded to support initiatives aligned with the SPH's and the University's mission and vision that include:*

M/HIHIM Program Response:

The program agrees that it is essential to adequately fund student services staff, technology resources, and access to faculty development support. We believe that if the program increases its enrollment, a long-term goal, that an additional FTE would be warranted in the student support role. The program purchases appropriate technology from vendors, such as EHRGo (EHR), CAHIIM-approved encoding software; the University provides free access to Microsoft tools used in all courses. Increased enrollment would also subsidize more faculty and staff professional development support, essential for keeping faculty current with teaching expectations.

8. *Sustain and build upon progress that has been made in EDI initiatives.*

E/MHA Program Response:

We appreciate the acknowledgment of the initiatives undertaken to improve EDI in E/MHA courses and among students, faculty, and staff. And, still, there is more progress to be made. We benefit significantly from the Universal Anti-Racism Training facilitated by SPH; it will continue to be an expectation that all program leadership, faculty, and staff to complete this series. Additionally, we will continue efforts to diversify our faculty, and to include equity and disparities content and work of scholars of color in each of our courses.

M/HIHIM Program Response:

The two HIHIM programs continue to sustain EDI initiatives, and the faculty and staff participate in EDI trainings provided by SPH. The students in the two HIHIM programs exemplify the richness of diversity

that is representative of the Pacific Northwest, and we look forward to continuing participation in the SPH EDI trainings and fostering a culture of inclusivity.

In summary, both the E/MHA faculty and the HIHIM/MHIHIM faculty agree with the principal recommendations to the university. Of particular importance is the question of the appropriate administrative homes for the E/MHA and M/HIHIM programs, and how each may best craft an independent identity. Therefore, our faculty strongly agree with the committee's recommendation to undertake independent strategic planning for each of our programs; we are confident that by doing so we will best answer the question of the most appropriate administrative structure and home for each of our programs and for the long-term success and survivability of our programs. We look forward to working with the School of Public Health, the Department of Health Systems and Population Health, and the Graduate School as we consider and implement these fundamental, organizational changes.

We would, again, like to thank the committee for its hard work and important observations during this process. We will endeavor to use these as tools to strengthen our highly regarded programs.

Sincerely,

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