

Welcome, attendees!

- If you are attending virtually:
 - Your microphone and camera will remain off
 - The chat feature is turned off for this event (except for faculty vote portion)
 - Use the Q&A feature to send your questions
- If you are attending in person:
 - Raise your hand during the Q&A session and someone will bring you a microphone
- This meeting is being recorded

Land Acknowledgment

We acknowledge that the land our university and school stands on is ancestral Ho-Chunk land.



Building Community
UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

Every person.
Every action.
Every time.

Spring Faculty & Staff Meeting

April 27, 2022



School of Medicine
and Public Health
UNIVERSITY OF WISCONSIN-MADISON

Agenda

- Welcome
- Faculty Vote to Award Degrees to Graduates & Research Honors Program
 - Elizabeth Petty, MD
- Match Outcomes & Clinical Education
 - Dave Bernhard
- Institute for Clinical & Translational Research (ICTR): Status and Future Goals
 - Allan Brasier, MD, and Elizabeth Burnside, MD, MPH, MS
- Financial Update
 - Ken Mount
- Town Hall
- Celebratory Reception in Health Sciences Learning Center (HSLC) Atrium

Faculty Vote to Award Degrees / Match Outcomes & Clinical Education

Elizabeth M. Petty, MD

Senior Associate Dean for Academic Affairs

Dave Bernhard, MS

Director of MD Student Services



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Faculty Vote to Award Degrees to SMPH Graduates

Motion:

“The Faculty recommends to the Regents for their respective degrees those students certified whose names are submitted by the Dean as having completed the requirements for their respective degrees.”

Match Summary 2022



All photo credits to Todd Brown, Media Solutions, SMPH

Dave Bernhard

Director of Student Services

dbernhard@wisc.edu

Elizabeth Petty

Senior Associate Dean,
Academic Affairs

Professor, Pediatrics

epetty@wisc.edu

It Takes a Village

Director of Career Advising & Wellness

Brian Núñez

Academic & Career Advising Program

Carol Diamond, MD

Christopher Hildebrand, MD

Blaise Nemeth, MD, MS

Sam Lubner, MD

Pam Ryan, MD

Associate Dean for Students

Gwen McIntosh, MD, MPH



**Faculty Advisors, Educators, Residency Program Directors, Letter Writers,
& Mentors Across SMPH Departments and Statewide Academic
Campuses**

Another Year of Record NRMP Figures

34,075 (+2.2%) Matches*

Total Applicants*

42,549 (+0.1%)

80.1% (+1.6%)

Total PGY1 Positions*

36,277 (+3.1%)

93.9% (-0.9%)

6,272 More Applicants Than Positions

* Denotes highest number on record

<https://www.nrmp.org/match-data-analytics/residency-data-reports/>



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2022 NRMP US MD Senior Match Rate ~93%

U.S. MD Seniors Submitting Program Choices**	19,902	↑ 36	0.2%
U.S. MD Seniors Matched to PGY-1 Positions**	18,486	↑ 51	0.3%
Percent of U.S. MD Seniors Matched to PGY-1 Positions***	92.9	↑ 0.1%	
Percent of PGY-1 Positions Filled by U.S. MD Seniors***	51.0	↓ 1.4%	

** Highest on Record

***Increases or declines reflect absolute percent changes since 2020

<https://www.nrmp.org/wp-content/uploads/2022/03/2022-Match-by-the-Numbers-FINAL.pdf>

2022 Rate of 92.9% for US MD Seniors Increased by 0.1% (92.8% in 2021)

2022 Rate of 91.3% for US DO Seniors Increased by 2.2% (89.1% in 2021)

2022 Rate of 61.4% for US IMGs Increased by 1.9% (59.5% in 2021)

2022 Rate of 58.1% of Non-US IMGs Increased by 3.3% (54.8% in 2021)

**Match Rates Increased More for US Dos, US IMGs, and Non-US IMGs
than it did for US MD Seniors...**

Thus, matching for US MD Seniors is growing more competitive

Unmatched Students & SOAP

Reasons Why Students Do Not Match Varies

- Marginal academic record (poor national exams, extended curriculum)
- Professionalism concerns (rare)
- Poor quality application or interviews
- Highly competitive specialty (applicants > positions)
- Limited geographical options
- Too few applications, interviews, or ranked programs
- Did not follow advice or received conflicting advice
- Really bad luck

Options for Students That Don't Match

- Match into position during SOAP
- Find a position post-SOAP
- Graduate and do work in specialty area, try again
- Stay in MD program and enhance knowledge/skills, try again

Recent History: UWSMPH Match Rates

Year	National-MD* Pre-SOAP	UWSMPH Pre-SOAP	UWSMPHP Post-SOAP**
2022	92.9%	93.4%	100%
2021	93%	93.4%	96%
2020	94%	96.2%	99%
2019	94%		98%
2018	94%		98%
2017	94%		98%

*Post-SOAP National Data Not Readily Available

**Excludes students who elected to stay in MD program for 5th year or chose not to do residency

National Match Rates for US MD Graduates (not seniors) is only 50.5%

Thus, Matching during final year of medical school is important!

UWSMPH Match: 31% PGY1 in WI

UW and Statewide Campus results

- UW Health or SMPH DFMCH n=40
- Medical College of Wisconsin n=8
- Advocate Aurora Health Milwaukee n=2
- Gundersen Health System n=2
- Marshfield Clinic Health System n=1



Total Remaining in WI n=53 (31%)

UWSMPH Match: Midwest Cities Popular

32 Different States
from Maine to Hawaii
and Washington to Florida

Most Popular Cities

- Madison (27)
- Milwaukee (14)
- Chicago (12)
- Minneapolis (6)
- Indianapolis (6)
- Ann Arbor (6)



UWSMPH Match: 37% Primary Care

Most Popular Specialties in 2022

- Internal Medicine (17%)
- Family Medicine (13%)
- Psychiatry (12%)
- Emergency Medicine (7%)
- Pediatrics (5%)
- OB/Gyn (5%)

5-yr Primary Care Range: 37% - 45%

UWSMPH Match: 18% Surgical Specialties

- General Surgery (7%)
- Orthopedics (5%)
- Otolaryngology (2%)
- Plastics (1%)
- Urology (1%)
- Vascular Surgery (2%)



WARM, TRIUMPH, & MSTP Programs

WARM, n=24 (10 WI)

Family Med - 7
Internal Med - 4
Orthopedic Surg - 2
Pediatrics - 2
Psychiatry - 2
Gen Surg - 2
Dermatology - 1
Emergency Med - 1
Obstetrics & Gyn - 1
Ophthalmology - 1
Urology - 1

TRIUMPH, n=18 (2 WI)

Family Med - 4
Internal Med - 4
Psychiatry - 3
Emergency Med - 2
Medicine-Pediatrics - 1
Neurology - 1
Pediatrics - 1
Prelim Year/Gen Surg - 1
Research-Ext - 1

MSTP, n=7 (2 WI)

Emergency Med - 1
Neurology - 1
Obstetrics & Gyn - 1
Pathology - 1
Psychiatry - 1
Diag Radiology - 1
Gen Surg - 1

UWH PGY1 Program Match

Year	# Core Residency Programs	# PGY1 slots	% PGY1 Slots Filled by Match/SOAP**	% UWSMPH graduates in PGY1 slots
2022	24	143* (146 post SOAP)	98.6%	19.6%
2021	24	140	99.3%	20.7%
2020	24	135	99.3%	13.7%
2019	24	135	99.4%	14.8%
2018	23	133	99.2%	17.3%

*Total PGY1s is 3 residents higher than the Match data as 3 individuals were accepted post-Match & SOAP, including 1 SMPH grad

**Only a few UW Health positions open in SOAP (6 Prelim Surg, 1 Pathology, 1 Pediatric Neurology)

UWH PGY1 Race, Ethnicity, and Gender Diversity

27/146 (18.5%) AI/NA, Black, Hispanic/LatinX, 2 or more Ethnic Groups (per ERAS)

45/146 (30.8%) above racial/ethnic groups and Asian, Arab (per ERAS)

78/146 (53.4%) Women (per binary data collected)

SMPH Family Medicine PGY1 Match

- 16/18 (89%) Filled in Initial Match (Baraboo RTT did not fill)
- 18/18 (100%) Filled through SOAP, including 1 SMPH grad

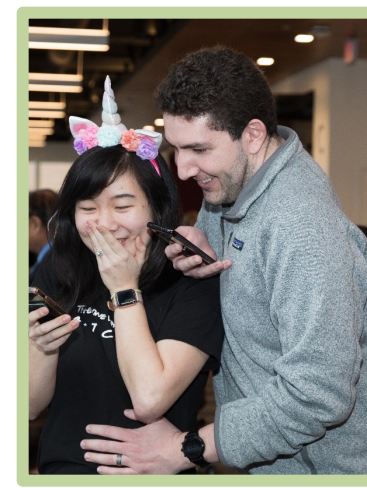
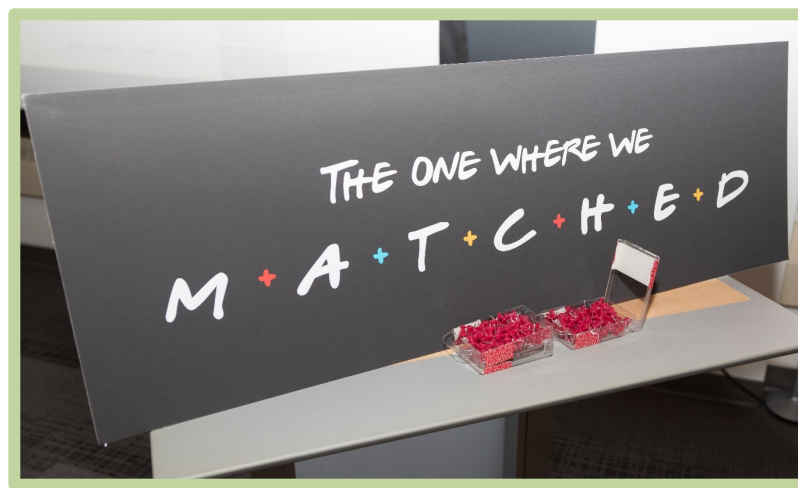
Inaugural National AMA Foundation – SMPH LGBTQ+ Health Fellowship Administered through Academic Affairs and Department of Family Medicine and Community Health

- 2 Fellows starting July 2022

2022 Match Summary

- UWSMPH students successful in challenging national landscape
 - Above national match rates
 - Broad range of specialties
 - Competitive program matches across the country
 - Great contribution to research
- Strong contribution to Primary Care
- Over ¼ remain in WI for residency training
- UW Health and SMPH GME Programs – Outstanding Match Results
- Ongoing CQI working with learners, staff, faculty, programs and departments for even greater success – GOAL 100% MATCH!

Thank You! Questions?



Institute for Clinical & Translational Research (ICTR): Status & Future Goals

Allan R. Brasier, MD

Senior Associate Dean, Executive Director

Elizabeth Burnside, MD, MPH, MS

Associate Dean, Deputy Executive Director



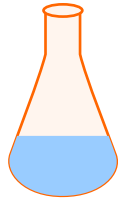
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The Urgency of Translational Research

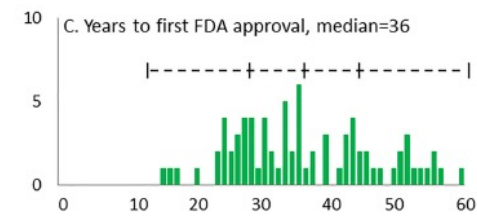
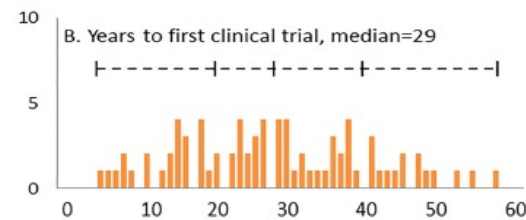
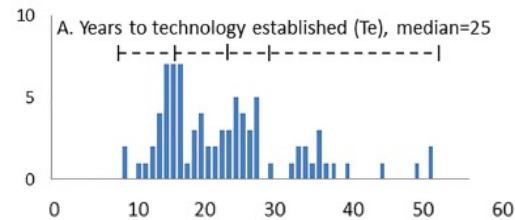
- US spends more on health care yet has more chronic disease burden and a lower life expectancy than 10 developed countries.
 - Has the highest infant mortality rate of any of the industrialized nations.
- Wisconsin is
 - 33rd in state rankings of below-average health
 - 40th in maternal outcomes (low birthweight)
 - 2nd in nation in falls and deaths from fall-related injuries (\$800 M/year)

Rethinking the Translational Research Paradigm

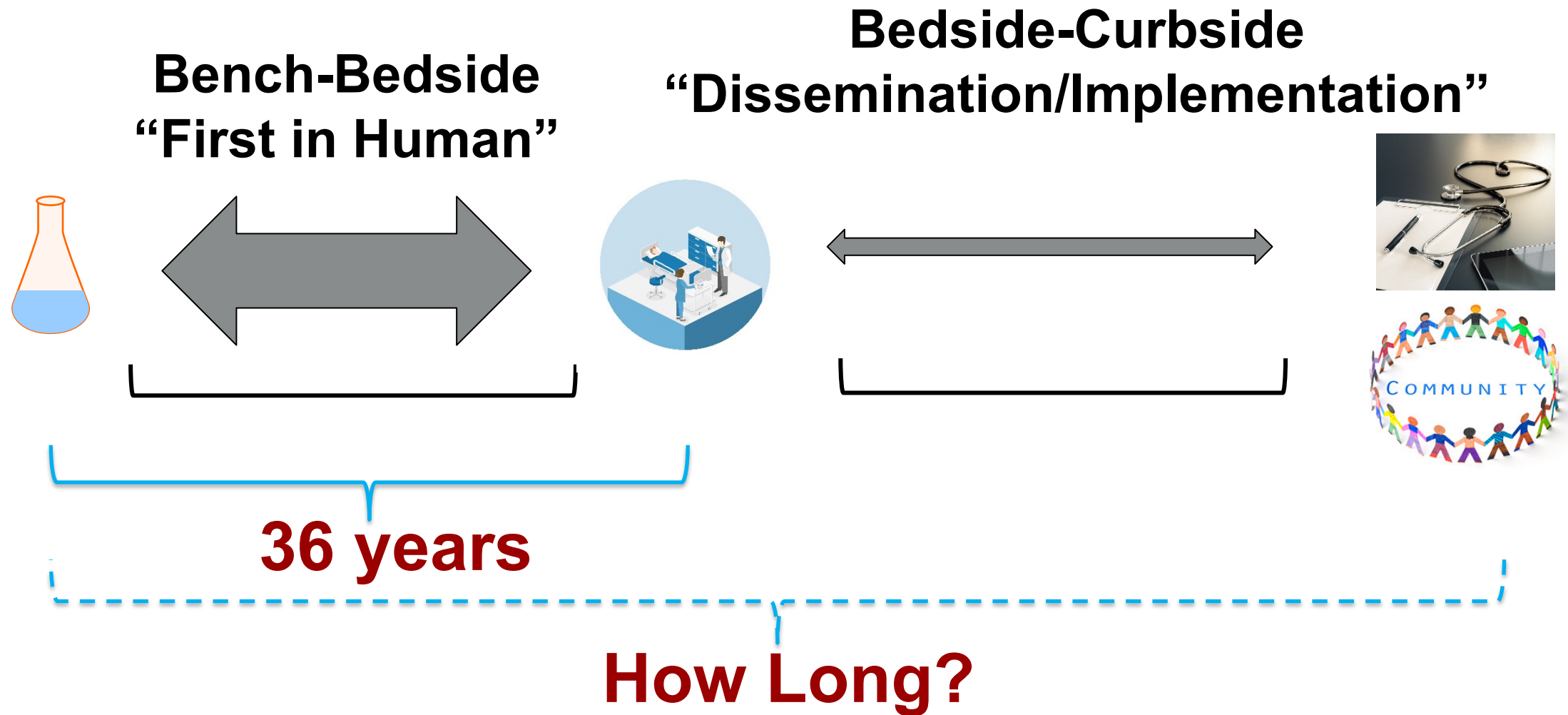
**Bench-Bedside
“First in Human”**



**Bedside-Curbside
“Dissemination/Implementation”**



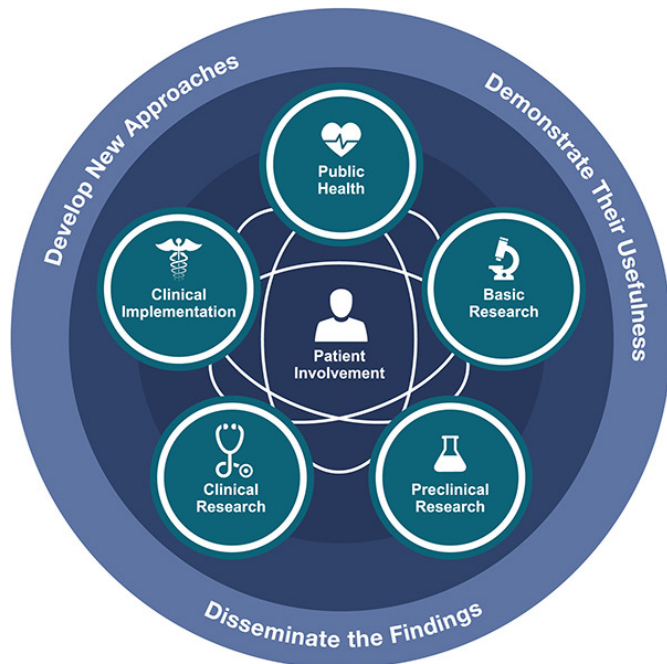
Rethinking the Translational Research Paradigm



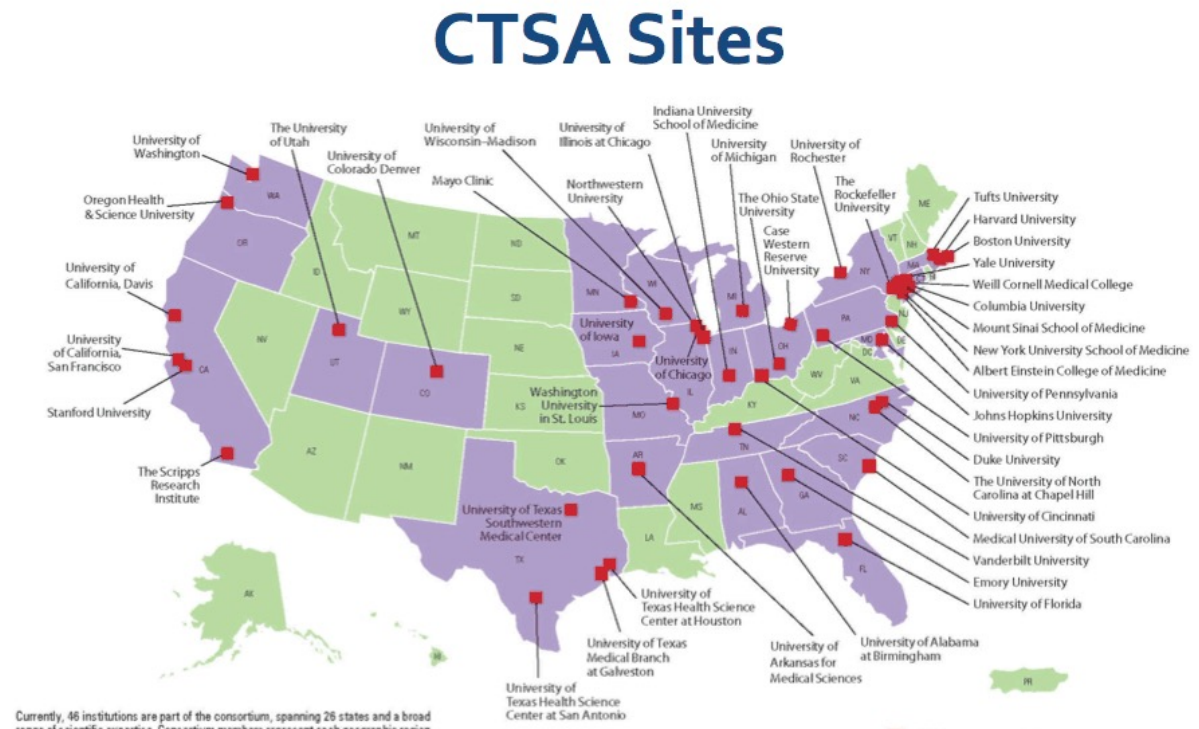
UW-ICTR Enables Translation into Practice

Our mission: is to discover, translate, and disseminate interventions to improve health and health care.

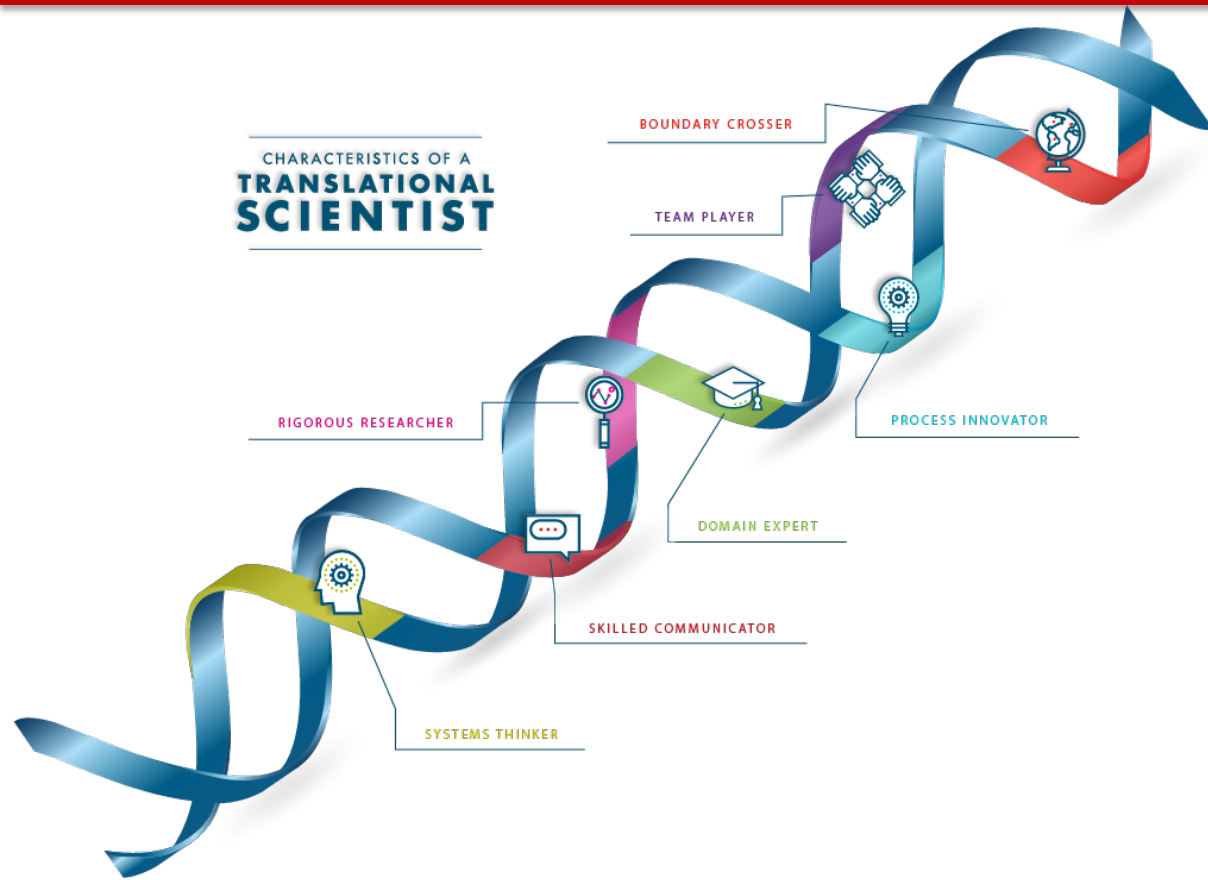
Our vision: is a healthy Wisconsin for all.



Credit: National Center for Advancing Translational Sciences



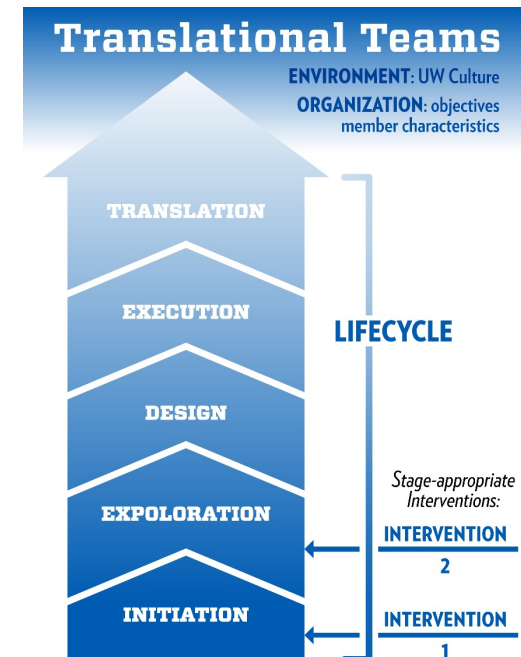
Translational Scientists Advancing Research Impact



For more information about
applying to the KL2 program,
email pmhatfie@wisc.edu

ICTR KL2 Training:

- Competency-Based Training
- Team Science Skills
- Leaders of Translational Teams



Develop Translational Scientists & High-Impact Translational Teams

Team Science Focus Areas



Education & Training



Team-Based Interventions



Culture of Team Science at UW

Team Lead



**Betsy Rolland,
PhD, MLIS, MPH**

Director of Team
Science + Research
Development

For more information,
email brolland@wisc.edu

Training Highlights of Past Year

1) Education & Training

- Team Science Seminar for 12 TL1 Scholars, Including Two Interdisciplinary Teams
- Three Team Science Courses

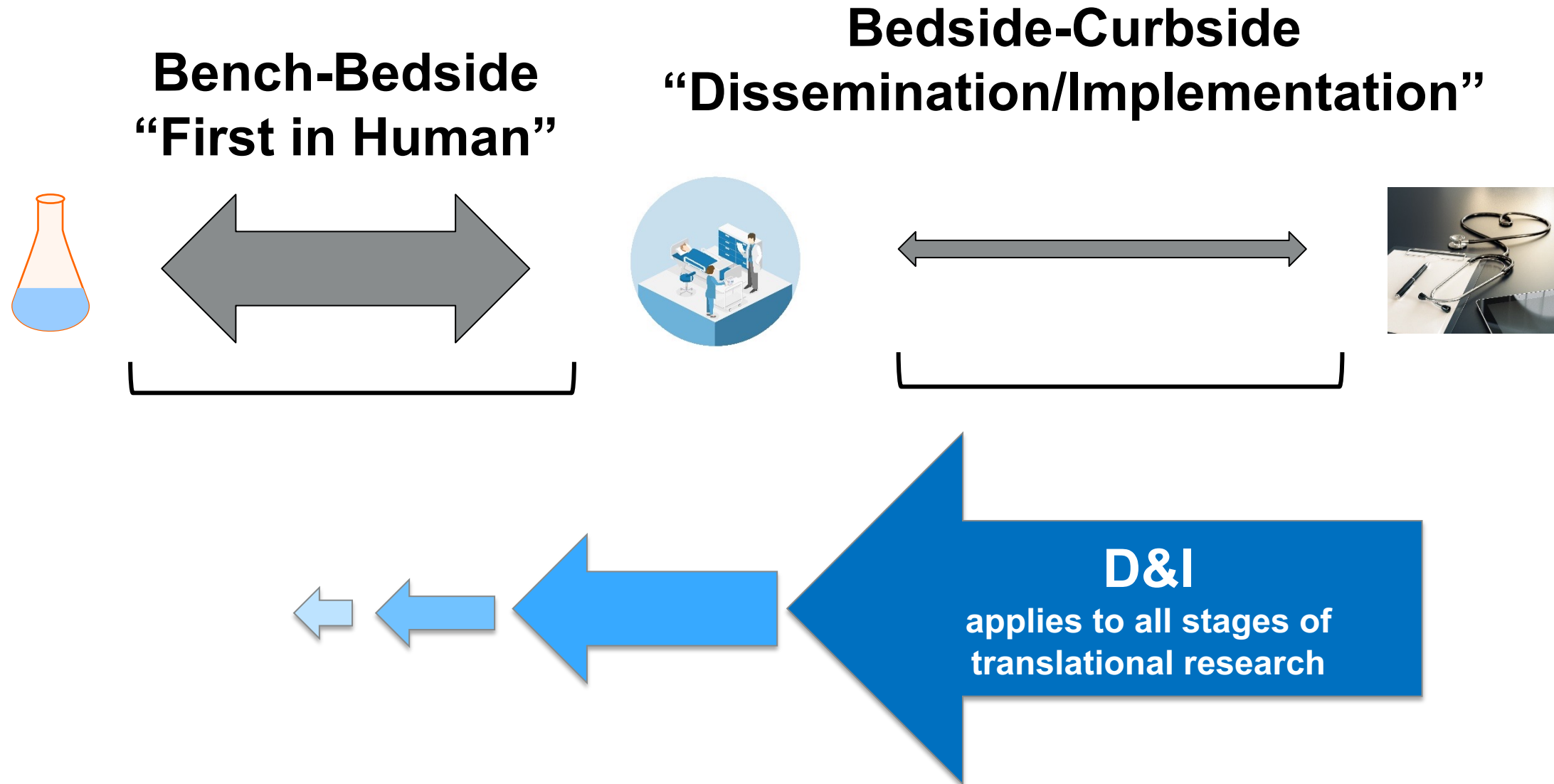
2) Team-based Interventions

- Rollout and Enhancement of Collaboration Planning Intervention

3) Culture of Team Science at UW

- Additional Team Science Language in Promotion & Tenure Criteria

Rethinking the Translational Research Paradigm



ICTR - Dissemination & Implementation Launchpad

- **Dissemination:** The active and targeted distribution of information and intervention materials to a specific public health or clinical practice
- **Implementation:** The adoption and integration of evidence-based health interventions into clinical and community settings for the purposes of improving care delivery and efficient, patient outcomes, and individual and population health.

What is offered

Education

- Educate researchers through annual D&I short course featuring experts
- Provide resources in D&I Theories, Frameworks, and Toolkits

Consultations

- Utilize D&I methods to support high quality grant application
- Assist in innovation development
- Facilitate stakeholder engagement
- Train on Design for Dissemination

Implementation

- Provide Evidence to Implementation Award (E2I) to support broad dissemination and sustainability (Intellectual Property, Value Proposition Business Plan, Marketing Research, Marketing & Sales Plan, Financial Proforma, Purveyor, ROI)
- Assist in Operations / Implementation Manuals and Toolkits development

For more information,
email di-launchpad@wisc.edu

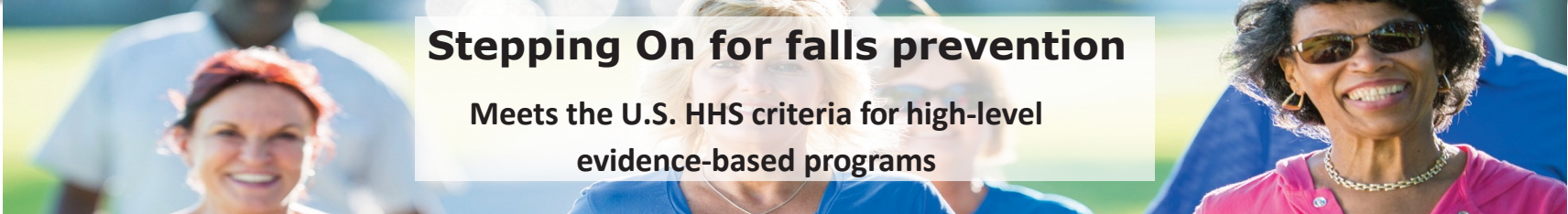
D&I Science Use Case:

D&I Science funded by
CTSA, WPP, CDC

Engaged

- **End-users:** Older adults
- **Implementers:** Coaches
- **Adopters:** Aging Agencies
- **Purveyor:** Wisconsin Institute for Healthy Aging



 Stepping On for falls prevention Meets the U.S. HHS criteria for high-level evidence-based programs		
INCIDENCE & COST	THE PROGRAM	PROVEN OUTCOMES & REACH
Incidence and Cost: ♦Nationally (≥ 65): hospitalization every 40 seconds; ED visit every 11 seconds. (CDC) ♦Wisconsin ranks 2nd in fall-related deaths twice the national rate. (CDC) ♦\$800 M/Y. Over 70% of these costs are paid by government insurance programs such as Medicare and Medicaid. (Wisconsin DHS)	Stepping On: a 7-week (once-a-week) program proven to decrease the incidence of falls. Adapted to Spanish “Pisando Fuerte”: Jane Mahoney and Maria Mora Pinzon	Outcomes as demonstrated by 2 pre-post studies: ♦ 40 - 50% reduction in falls¹ ♦ 70% reduction in ED visits for falls² Reach in Wisconsin in a decade: ♦ 1,538 workshops ♦ 69 counties and 5 tribes ♦ 15,782 participants Disseminated to 23 US states  School of Medicine and Public Health UNIVERSITY OF WISCONSIN-MADISON

MENTAL HEALTH "Through the darkest days, I never hated the science" **p.160**

ENERGY A history of the pioneers of power from steam to nuclear **p.162**

PHYSICS Richard Feynman's books, from hilarious to revolutionary **p.164**

DEVELOPMENT New national funds for research in Kenya and Ghana **p.166**



A man waits for treatment at a hospital in Havana, where a drug to treat diabetic foot ulcers was shown to be effective in a clinical trial.

When will clinical trials finally reflect diversity?

An analysis of drug studies shows that most participants are white, even though trials are being done in more countries, reveal **Todd C. Knepper** and **Howard L. McLeod**.

COMMENT | VOLUME 395, ISSUE 10242, P1955-1957, JUNE 27, 2020

COVID-19 and ethnicity: who will research results apply to?

Shaun Treweek ✉ • Nita G Forouhi • K M Venkat Narayan • Kamlesh Khunti

Published: June 12, 2020 • DOI: [https://doi.org/10.1016/S0140-6736\(20\)31380-5](https://doi.org/10.1016/S0140-6736(20)31380-5) • Check for updates

Perspective:
COVID-19

IMPACT OF COVID-19 ON CLINICAL
RESEARCH AND INCLUSION
OF DIVERSE POPULATIONS

Ethnicity & Disease

Daniel T. Lackland, DrPH¹; Catrina Sims-Robinson, PhD¹;
Joy N. Jones Buie, PhD MSCR¹; Jenifer H. Voeks, PhD¹

Trends in Molecular Medicine

Volume 27, Issue 2, February 2021, Pages 97-100

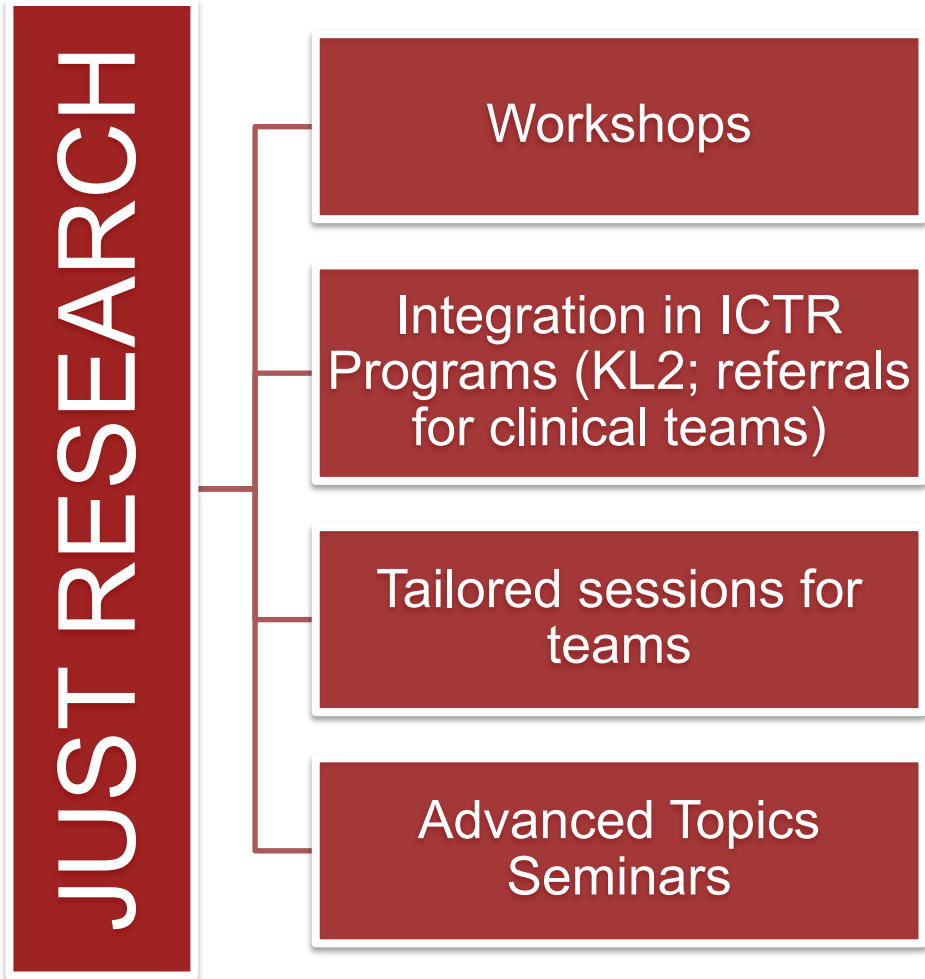


Science & Society

The Urgency of Justice in Research: Beyond COVID-19

Andrea Gilmore-Bykovskyi ¹ ✉, Jonathan D. Jackson ^{2, 3}, Consuelo H. Wilkins ^{4, 5}

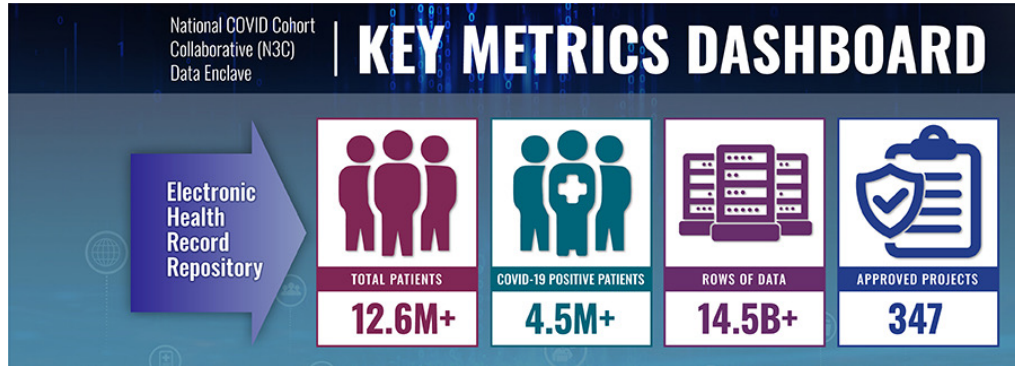
Diversity & Equity in Translational Research



- Focus on Practical Skills/Strategies
- Reflects Equity Impact Assessment
 - Community Engagement and Health Partnerships
 - Recruitment, Representativeness, Generalizability
 - Intervention Design
 - Interpretation and Contextualization
 - Dissemination of Research Findings

For more information,
contact S. Passmore passmore2@wisc.edu

National Initiatives with Major Contributions from UW



National COVID Cohort Collaborative (N3C)
ICTR CHI² and leaders contribute to long COVID study

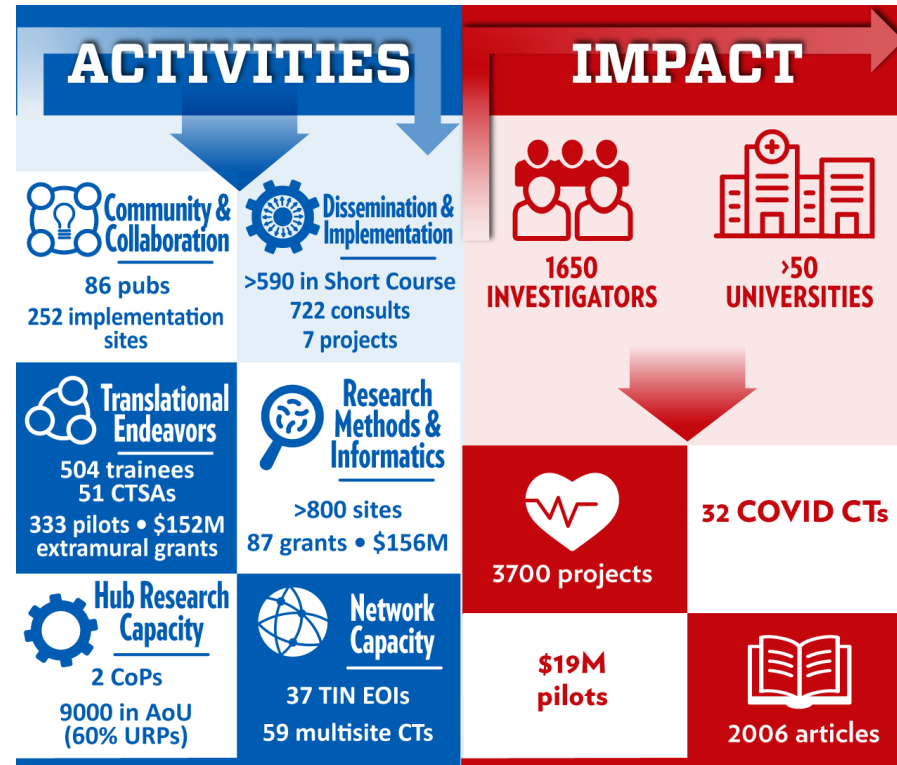
For more information, contact ladick@wisc.edu



The All of Us Initiative
ICTR Community Engagement, CHI², leaders and investigators contribute to Precision Health

For more information, contact allofus@hslc.wisc.edu

ICTR Activities & Impact Fostering Cross-Campus Collaboration



Wisconsin Partnership Program

UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

Contacts:



**Institute for Clinical and
Translational Research**

UNIVERSITY OF WISCONSIN-MADISON

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Twitter: @UWICTR

LinkedIn: @UW ICTR



**School of Medicine
and Public Health**

UNIVERSITY OF WISCONSIN-MADISON

Financial Update

Ken Mount

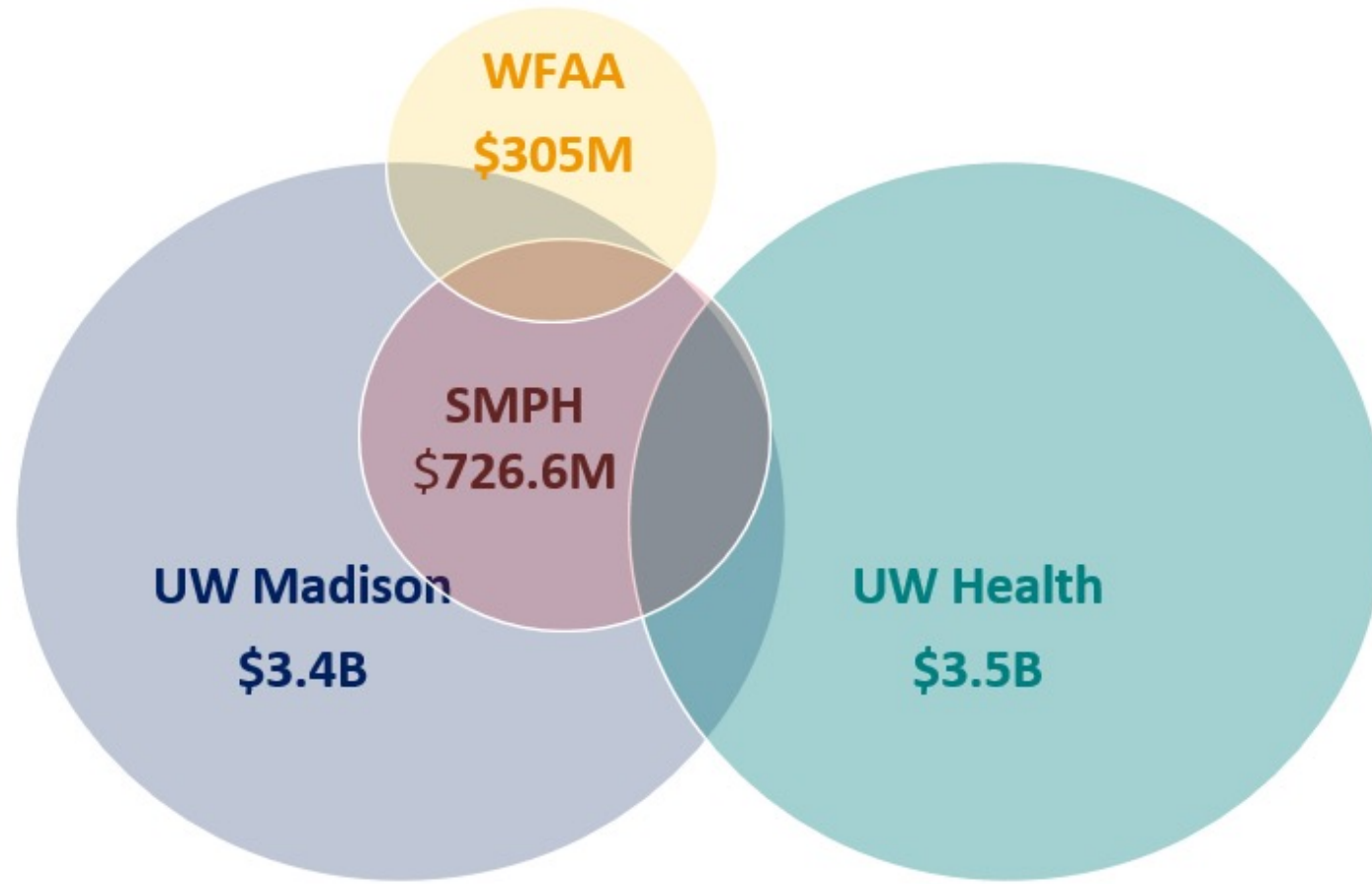
*Senior Associate Dean for Finance &
Chief Financial Officer*



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UNIVERSITY OF WISCONSIN-MADISON

The Big Picture

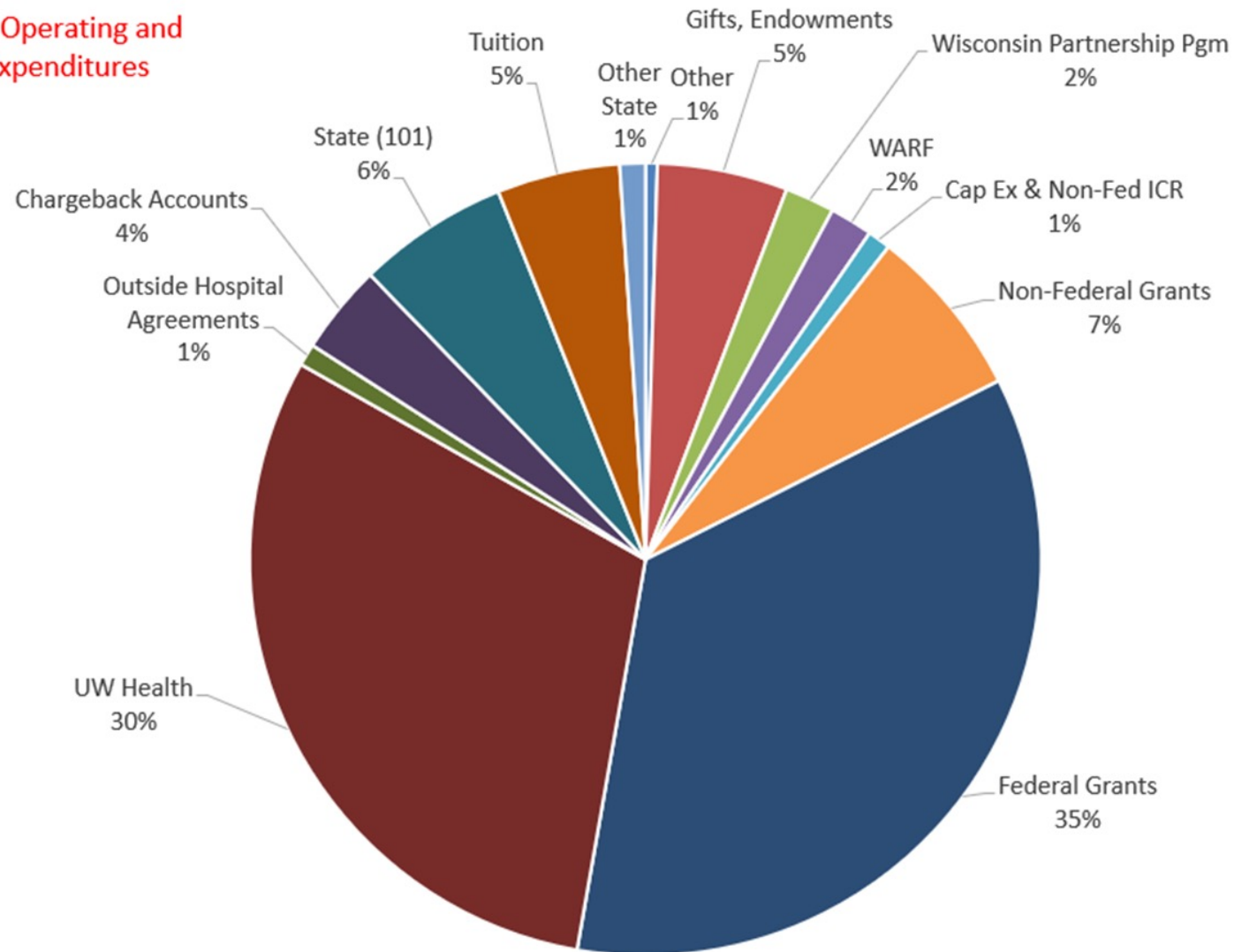
FY21 Annual Expenditures



SMPH FY21 Expenditures by Source of Funds

\$726.6M

Includes Operating and
Capital Expenditures



SMPH Major Revenues

- Grant Funding (Direct & Indirect Costs)
- Clinical Funds (UW Health Funding)
- Tuition
- State Support
- Gifts and Investment Earnings
- Fee for Service Revenues
- A little over 2/3 of SMPH UW revenues are derived from grants and UW Health funding
- The remaining 1/3 comes from all other sources

Clinical Funds

Clinical Funds fall into two major categories:

- Unrestricted Funds to the Dean
 - Unrestricted Funds to the Dean are tied to UW Health revenues.
- Funds to Specific Departments/Units
 - Funds to specific departments/units are budgeted annually
- As with most medical schools, this has been the fastest growing source

Grant Funding

- For FY 2021, SMPH grant revenues were
\$252 million from Federal awards
\$53 million from Non-Federal awards
This amount has been steadily increasing
- Through 9 months of FY 2022, grant revenues are up 15% from FY 2021
- SMPH faculty and staff continue to generate over 1/3 of total UW-Madison grant revenues
 - Our share continues to increase

SMPH Expenses

- By major category, FY 2021 expenses in SMPH were as follows:

- Salary & Fringe \$475M 68%

- Supplies & Services \$184M 26%

- Capital & Building \$14M 2%

- Financial Aid \$24M 3%

Annual Budget Changes

- Grant revenue changes are tied to specific new and ending grant awards
 - Also, some impact from F&A rate
- Unrestricted clinical funding is tied to UW Health revenues. Specific clinical funding mostly tied to clinical faculty growth
- State/Campus revenue changes are almost exclusively tied to pay plan changes and fringe benefit costs

Overall Budget Prognosis

- Grant activity continues to grow
 - Clinical trials are growing along with federal awards
 - There is the possibility of increased collaborations with WI DHS
- Pandemic, labor and insurance issues have impacted UW Health and will continue to exert pressure
 - This impacts Dean's Funds
- State/campus increases are expected to remain modest and mostly associated with the pay plan

Town Hall

Open for Questions

- If on Zoom, use the Q&A feature to submit
- If in person, raise hand and wait for microphone