

Welcome, attendees!

- If you are attending virtually:
 - We are using the SMPH Video Library
 - Use the chat feature to send your questions for the Q&A
 - This meeting is being recorded, and your Q&A submissions will also be saved for follow-up as needed

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.

Winter Faculty & Staff Meeting

January 23, 2023



Agenda

- Welcome Remarks
- Office of the Associate Dean for Social Health Sciences and Programs: Overview of Role, Partnerships, and Future Opportunities
- Centennial Scholars/Clinicals Program Updates
- AAMC Assessing and Advancing DEI Efforts Report Summary, Office of Diversity and Equity Transformation Update
- Town Hall: Questions, Comments, & Discussion

Office of the Associate Dean for Social Health Sciences and Programs: Overview of Role, Partnerships and Future Opportunities

Amy Kind, MD, PhD

Associate Dean for Social Health Sciences and Programs
Executive Director, Wisconsin Partnership Program
Director, UW Center for Health Disparities Research (CHDR)
Professor, Department of Medicine, Division of Geriatrics



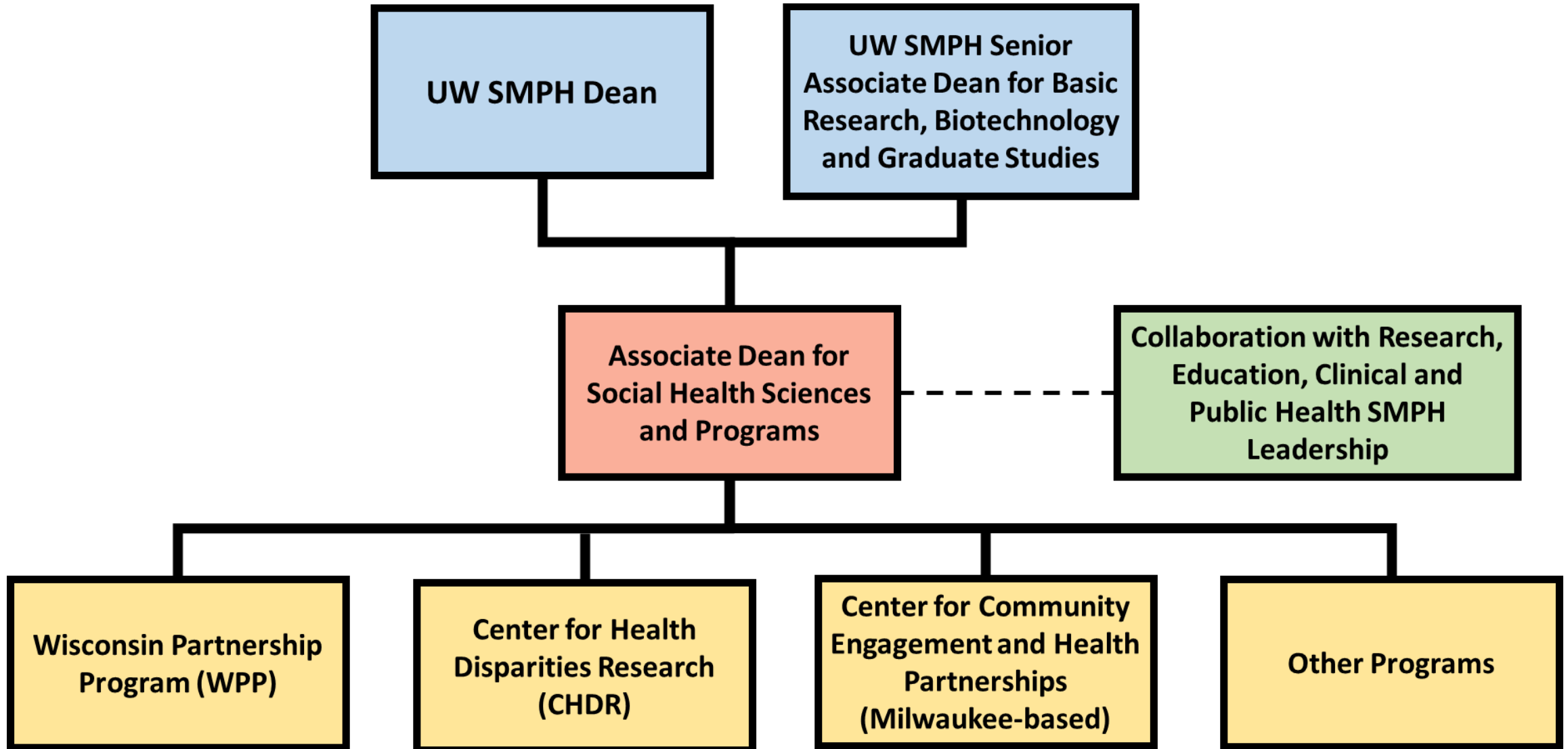
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Office of the Associate Dean for Social Health Sciences and Programs



- Oversee, create synergies, and guide the growth of the school's current and future initiatives, policies and programs designed to study and eliminate health disparities
- Work closely with stakeholders in research, education, clinical, and public realms to build capacity and ensure the advancement of health disparities research

Structure: Office of the Associate Dean for Social Health Sciences and Programs



Wisconsin Partnership Program: Improving Health in Wisconsin

Vision

Everyone in Wisconsin will live healthy and full lives

Mission

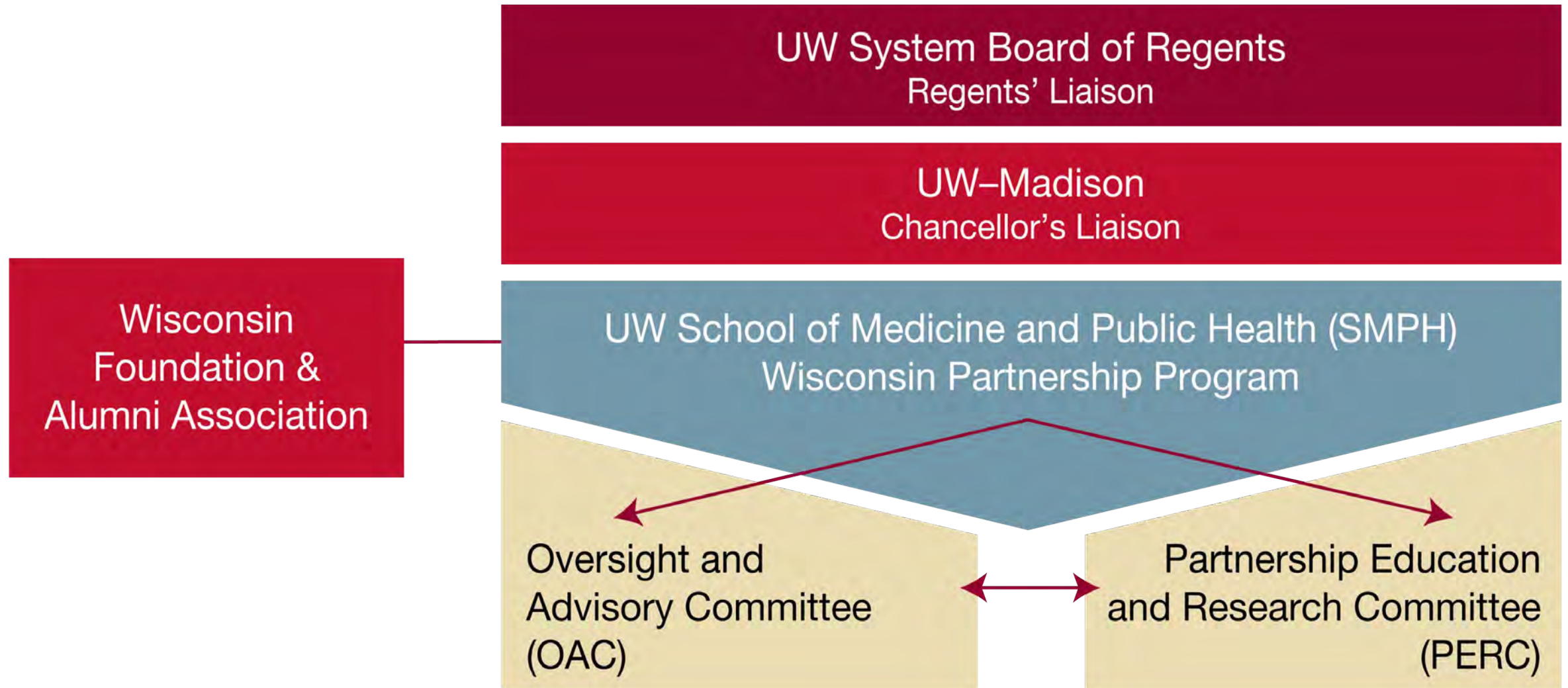
To bring about lasting improvements in health and well-being and advance health equity in Wisconsin through investments in community partnerships, education and research

Goals

Promote Innovation • Advance Health Equity
Build Capacity & Leadership • Catalyze Systems
Change



Wisconsin Partnership Program: Governance Structure



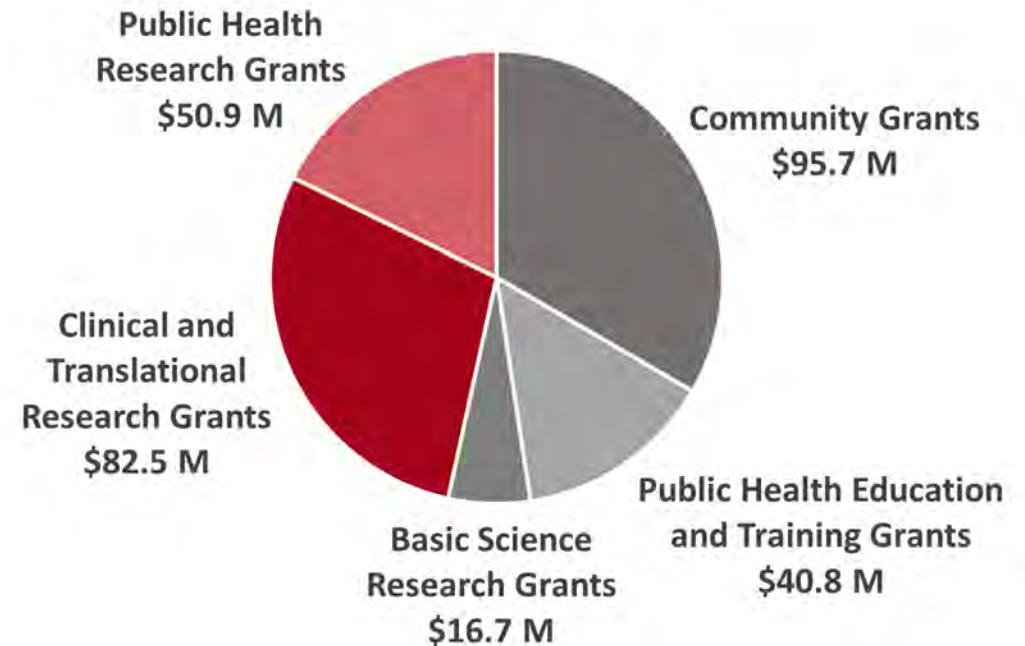
Wisconsin Partnership Program: 19 Years of Grantmaking and Impact



Since 2004
609 grants
for over
\$286 million

GRANTS AWARDED BY TYPE

2004 - December 31, 2022



Our grantees have leveraged an additional \$684 million to sustain their projects

Wisconsin Partnership Program: Driving Research and Scientific Discovery

- New Investigator Program
 - \$150,000 over two years
- Collaborative Health Sciences Program
 - \$600,000 over three years
 - Applications due February 14
- Strategic Research Grant Programs
 - Example: Institute for Clinical and Translational Research

208 Research Grants

\$150 million

Grants support research to prevent, diagnose, treat and cure disease and prevent injuries.



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Wisconsin Partnership Program: A Catalyst for Medical Education & Public Health Leadership

- Wisconsin Academy for Rural Medicine
- Master of Public Health Program
- **Transforming Medical Education**
- **Wisconsin Partnership Program Scholarship**
- **Preventive Medicine Residency**
- **Wisconsin Population Health Services Fellowship Program**

48 Education & Training Grants

\$40.8 million

Investments in education and training to prepare health professionals to meet the unique health needs of Wisconsin.

**bolded indicate active grants*

Wisconsin Partnership Program: Advancing Health Equity through Community Partnerships

- Community Impact Grants
- Community Collaboration Grants
- Maternal and Infant Health Grants

353 Community Partnership Grants

\$95.7 million

Community grant programs and community academic partnerships address critical public health issues in Wisconsin.

Supporting Health in Rural Communities

- Improve access to addiction treatment for patients in rural Wisconsin
- Provide on-call support and training for addiction health care workers



Supporting Black Women's Wellness

“Our goal is to move Wisconsin from worst to best for Black women's health and Black family health.”

Lisa Peyton-Caire, Founding CEO and President, The Foundation for Black Women's Wellness



Health Care Access for Underserved Populations

“WPP was the first to fund this idea and it allowed us to go live and obtain the resources we needed.”

Bre Loughlin, CEO and
Co-Founder, Nurse
Disrupted



NBC's Today: How a nurse is providing virtual care with a touch of a button
www.today.com

COVID-19 Response Grant

Improving Health and Safety for Seniors

Improving Assisted Living Quality through Collaborative Change

- 494 participating communities
- 11,800 occupants
- Sustained through Wisconsin Department of Health Services agreement



UW Center for Community Engagement and Health Partnerships (CCE), Milwaukee, Wisconsin



**CCE Director,
Gina Green-Harris, MBA**

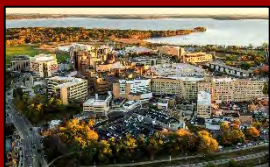
- Promote and curate sustainable bidirectional relationships between institutions and community to develop innovative and equitable research programs that promote improve health outcomes for all



**Center for Community Engagement
& Health Partnerships**

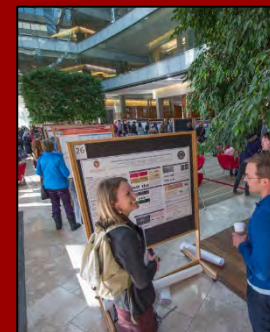
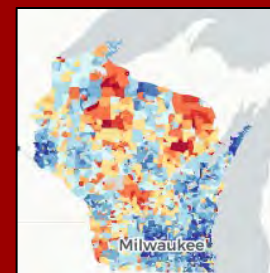
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Regional Milwaukee Office



Center for Health Disparities Research

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NIA HEALTH DISPARITIES FRAMEWORK



ENVIRONMENTAL



SOCIOCULTURAL



BEHAVIORAL



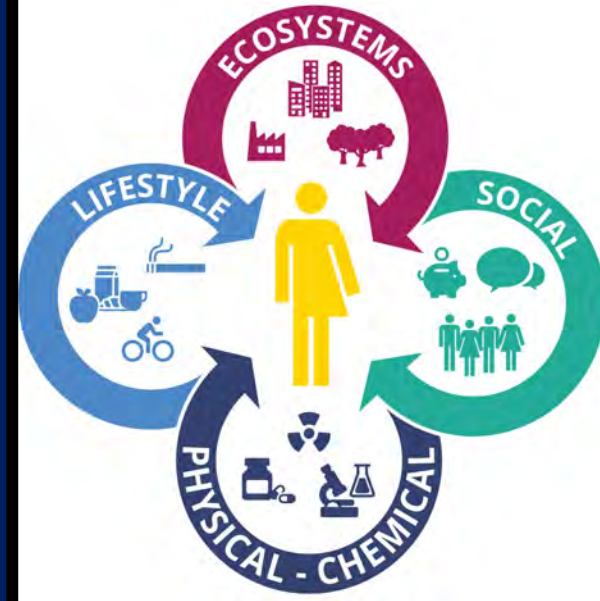
BIOLOGICAL

LIFE COURSE



EXPOSOME

The measure of all the exposures of an individual in a lifetime and how those exposures relate to health*



Science. 2020. 367(6476): 392–396.

*The National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC).
<https://www.cdc.gov/niosh/topics/exposome/default.html#:~:text=The%20exposome%20can%20be%20defined,from%20environmental%20and%20occupational%20sources>
.. Accessed 4/20/2021

CHDR Mission



Catalyze research, clinical innovation, and educational activities in health disparities research



Grow and nurture the health disparities research and practice community



Bring the benefits of multi-level mechanistic health disparities research to all in Wisconsin and beyond

CHDR Leadership Team



**Andrea Gilmore-
Bykovskiy, PhD
Deputy Director**



**Amy JH Kind, MD, PhD
Director**



**Barbara Bendlin, PhD
Deputy Director**



**JP Yu, MD, PhD
Associate Director
Basic and
Translational Science**



**Corrine Voils, PhD
Associate Director
Patient Centered
Research**



**Ann Sheehy, MD, MS
Associate Director
Health Policy
Research**



**Manish Shah, MD MPH
Associate Director
Faculty Development**



**Menggang Yu, PhD
Associate Director
Biostatistics and
Informatics**

2022-2023 CHDR Highlights



Over \$52 million in
active NIH funding



8 NIH grants submitted,
5 funded



56 personnel to support
social exposome
research (and growing)



15 students



7 active data use
agreements with
industry partners

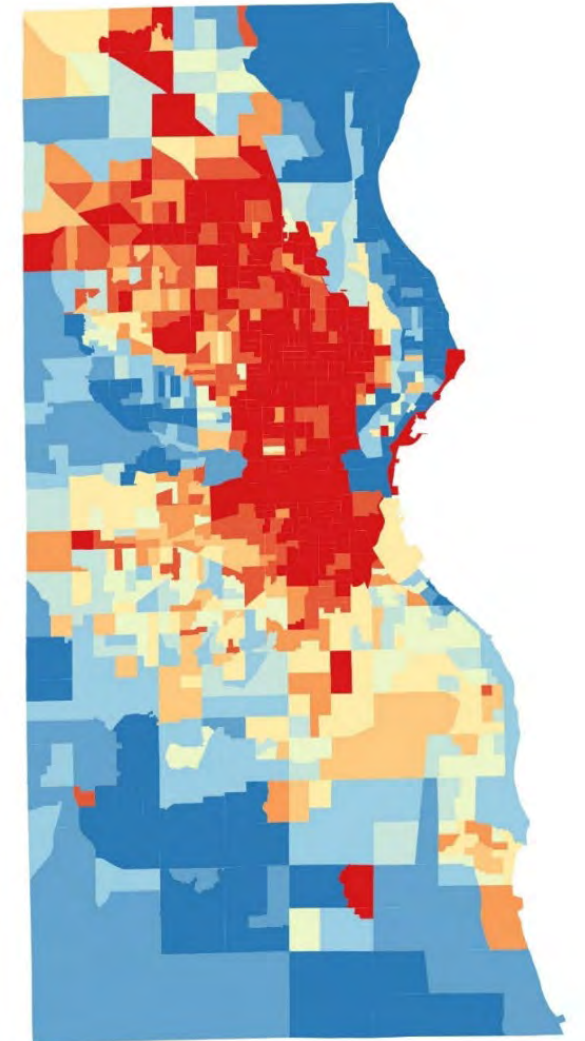


41 new faculty and staff
affiliates

Measuring Exposome Using the Area Deprivation Index (ADI)

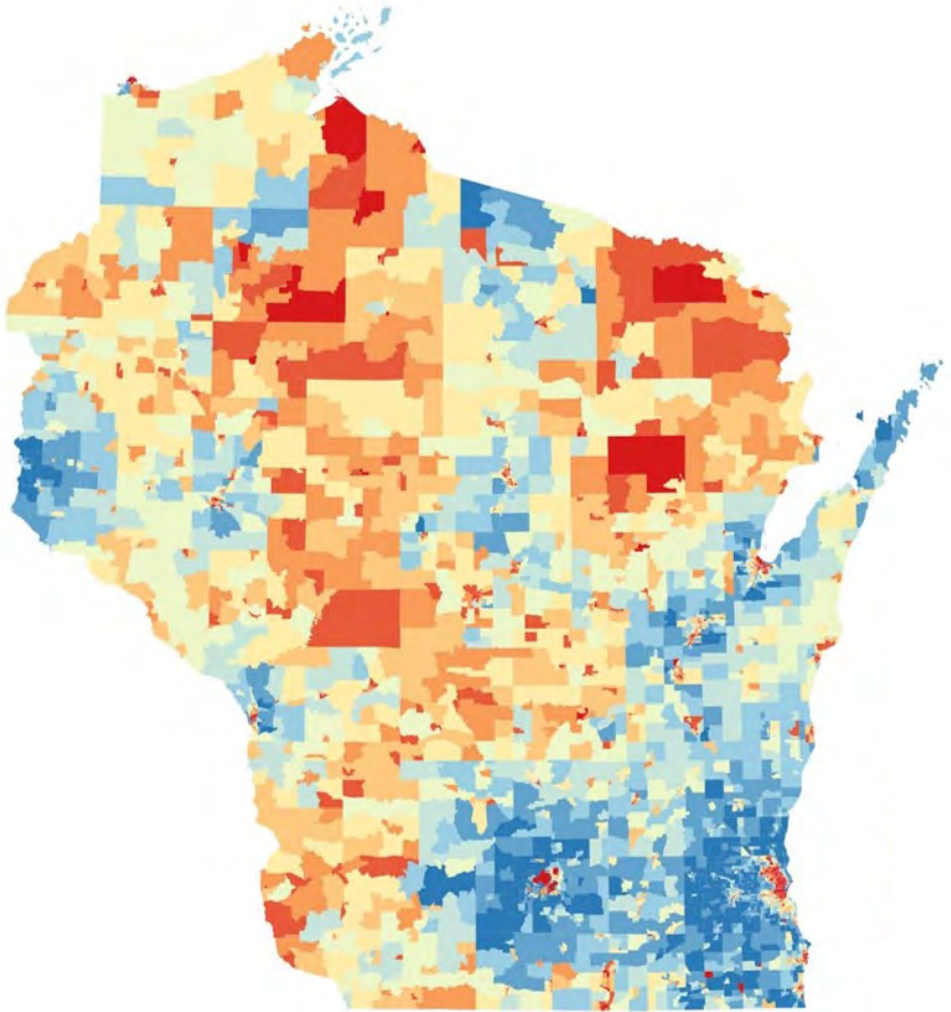
- ADI construction
 - 17 measures of social determinants of health across small, population sensitive areas
- Current ADI for full US available through the Neighborhood Atlas®*
- Harmonizable internationally
- Dominant US social exposome metric
- Marker of structural inequity

*Kind and Buckingham, *New England Journal of Medicine*, 2018



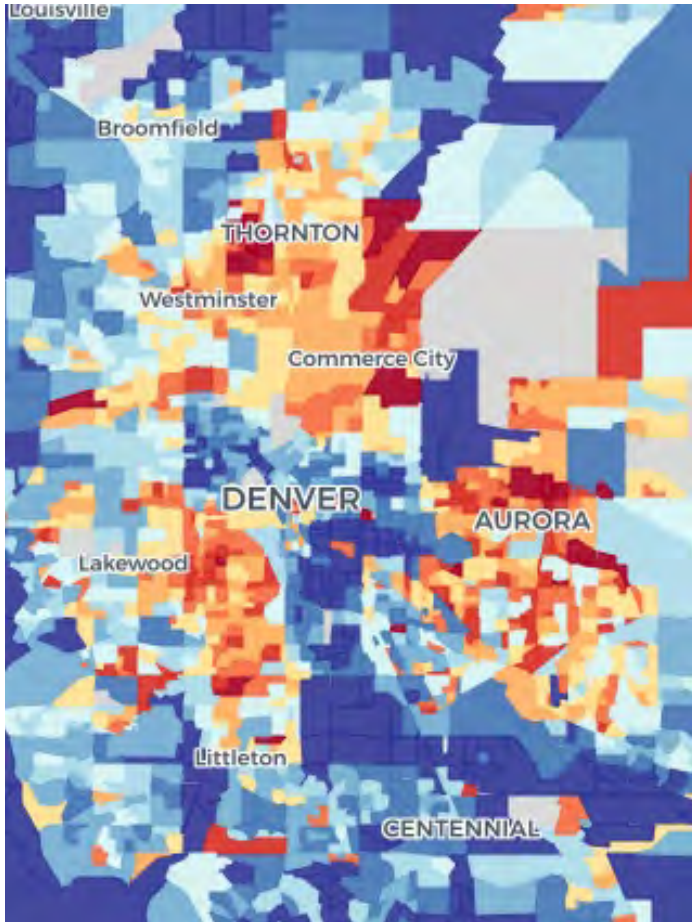
Milwaukee County

The Neighborhood Atlas



- Data democratization and open science tool for the ADI
- Customized mapping; Free, open to all
- Data downloaded tens of thousands of times by research, governmental, community, and industry groups
- www.neighborhoodatlas.medicine.wisc.edu

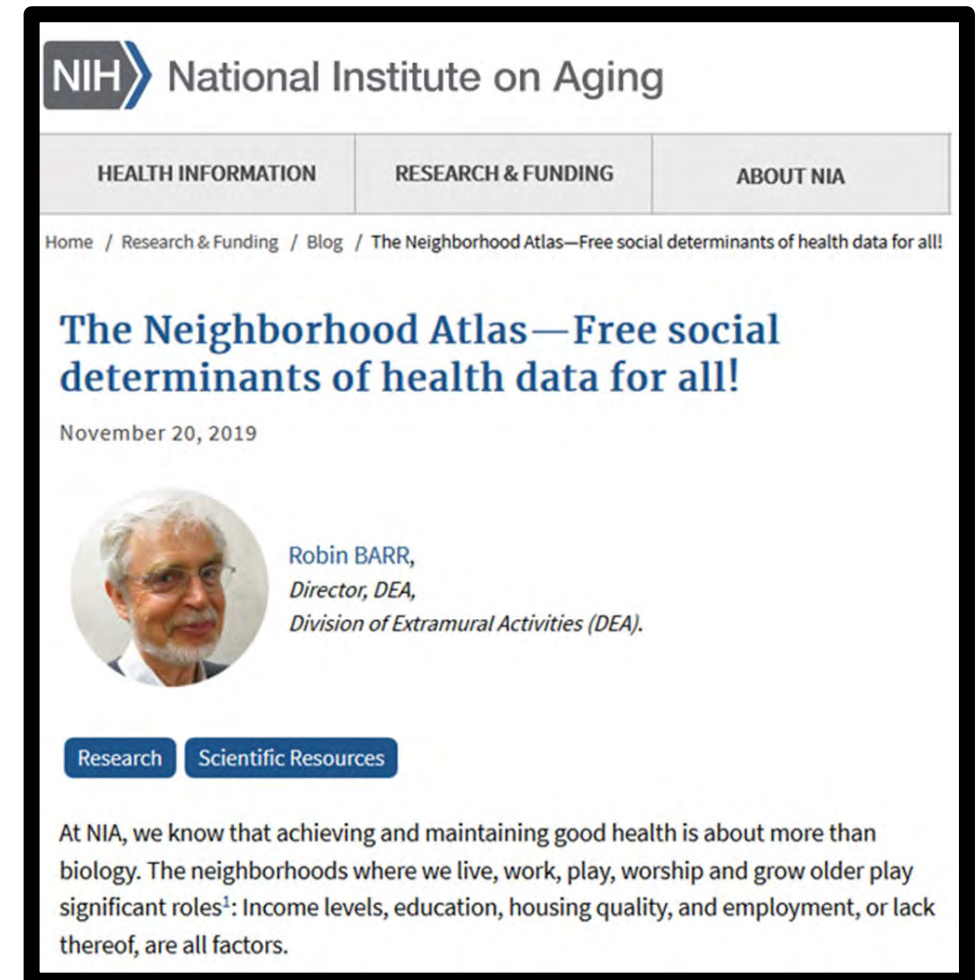
Residing in a High ADI Neighborhood is Linked to Poor Health



- Epigenetic age acceleration
(Lawrence et al, JAMA-Open, 2020)
- Rehospitalization and Cost (multiple)
- Later diagnoses and less comprehensive diagnostic evaluation
(Tsoy et al, JAMA-Neurology, 2021; multiple)
- Increased risk of post-surgical complications
(Arias et al, JAGS, 2021)
- Increased cardiovascular risk
(Berman et al, JAMA-Cardiology, 2021; multiple)
- Decreased active-life expectancy
(Gill et al, JAMA-IM, 2021)
- Many other factors

ADI Use is Widespread, Including in Federal Policy

- NIH Dissemination of the ADI
- Industry Partnerships
- Professional Medical Societies
- Private Insurers
- State Medicaid Programs
- US Center for Medicare and Medicaid Services ACO-REACH Program



Health Equity Benchmark Adjustment

ACO REACH includes a benchmark adjustment that increases benchmarks for ACOs serving higher proportions of underserved beneficiaries

CMS will stratify all beneficiaries aligned to ACO REACH using a composite measure of underservice that incorporates a combination of¹:

Area Deprivation Index

Area-level measure of local socioeconomic factors correlated with medical disparities and underservice

Percentile Score from 1-100

Dual Medicaid Status

Beneficiary-level measure of economic challenges affecting individuals' ability to access high quality care

25 Point Adjustment for Full or Partial Dual Eligibility



91st – 100th Percentile
(Top Decile)

+\$30 PBPM Adjustment

51st – 90th Percentile
(Middle 4 Deciles)

No Adjustment

1st – 50th Percentile
(Bottom 5 Deciles)

-\$6 PBPM Adjustment

1. CMS may explore other variables to include in this assessment and will notify applicants prior to the start of PY2023 if any other variables are included.

*2022 ACO Realizing Equity, Access, and Community Health (REACH) Model
[<https://innovation.cms.gov/media/document/aco-reach-fin-meth-webinar-slides>]



Thank You!



- **Please reach out to us with inquiries on:**
 - The Wisconsin Partnership Program
 - The UW Center for Community Engagement and Health Partnerships
 - The UW Center for Health Disparities Research
 - General questions on research infrastructure and funding opportunities in the health disparities and health equity research fields



- **Contact email**
 - amy.kind@wisc.edu

Centennial Scholars/Clinicians Program

Christian Capitini, MD

Associate Professor of Pediatrics

Elizabeth Felton, MD, PhD

Assistant Professor of Neurology

Nancy C. Raymond, MD

Professor in Psychiatry

Associate Dean for Faculty Affairs and Development



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Program Overview

- The **Centennial Scholars/Centennial Clinicians (CS/CC) Program** is designed to support departments in hiring and developing diverse faculty from groups who experience health disparities in Wisconsin.
 - Black, Hispanic, Hmong, Native American
- Faculty diversity enhances the quality of education, clinical care and research at the University of Wisconsin School of Medicine and Public Health.
- Program started in 2009
- Expanded after the 10-year review to include clinicians

The New Centennial Scholars/Clinicians Program

- Offers \$210,000 to assist departments in hiring URM faculty and to support their professional development.
 - Over 3 years for Centennial Scholars
 - Over 7 years for Centennial Clinicians
- Program is run by an Advisory Committee
- Administrative support provided by the Office of Faculty Affairs and Development

Departments Represented

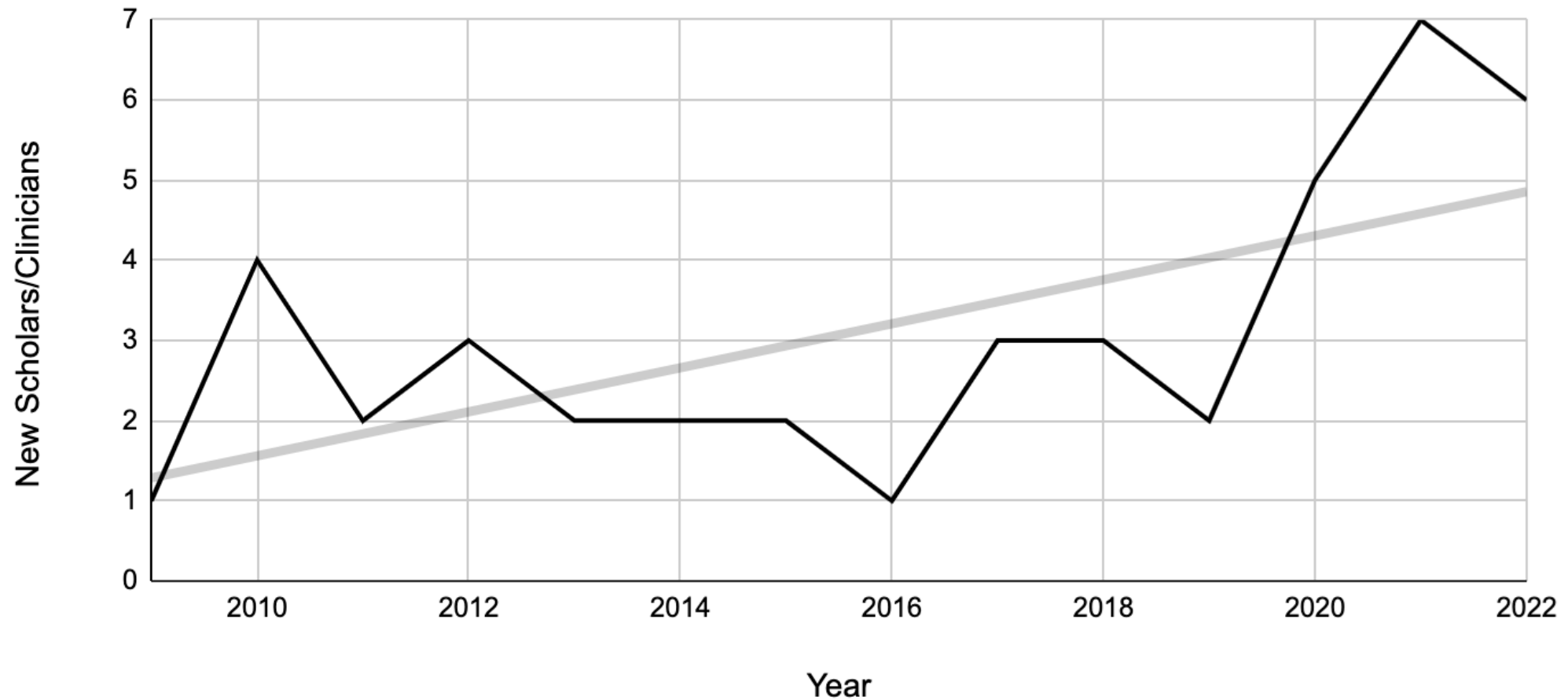
- Emergency Medicine
- Family Medicine & Community Health
- Medical Microbiology and Immunology
- Medical Physics
- Medicine
- Neurology
- Obstetrics and Gynecology
- Pediatrics
- Population Health Sciences
- Radiology
- Urology

By the Numbers

- Program has grown from 1 participant in 2009
- 19 members as of January 2023 (13 scholars and 6 clinicians)
- 24 scholars total in the first 10 years
- At least 2 more participants joining in July 2023
- 1 participant already slated to join January 2024

Program Recruitment

Centennial Scholars & Clinicians Recruitment 2009-2022



Current Centennial Scholars/Clinicians



Yohualli Anaya,
MD, MPH (2023)



Morgan White,
MD (2023)



Francisco Alvarado Guillen,
Pharm D, PhD (2022)



Shannon Cannon,
MD (2022)



Elebeoba E.
May, PhD (2022)



Melisa Carrasco
McCaul, MD,
PhD (2022)



Andrea Gilmore-
Bykovskyi, PhD, RN
(2022)



Vanessa
Sperandio, PhD
(2022)



Erica Knavel
Koepsel, MD
(2021)



Ivan Rosado-
Mendez, PhD
(2021)



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Current Centennial Scholars/Clinicians



Christine Sharkey,
MD (2021)



Claudette Adegboro,
MD (2021)



Shenikqua Bouges,
MD (2021)



Fred Ketchum,
MD, PHD (2021)



Gloria Morel,
PsyD (2021)



Sancia Ferguson,
MD, MPH (2020)



Tiffany L. Green,
PhD (2020)



Reinier Hernandez,
PhD (2020)



Mariétou
Ouayogodé,
PhD (2020)

Scan Here to Visit the CS/CC Webpage



6 Member Advisory Committee

- Functions
 - Provides oversight for the program
 - Determines the programming in collaboration with Scholars/Clinicians
 - Leads the annual meetings with individual Scholars/Clinicians
 - Offer counsel to Scholars/Clinicians encountering roadblocks
- Members:
 - **Christian Capitini**, MD, Co-Chair, Department of Pediatrics
 - **Elizabeth Felton**, MD, PhD, Co-Chair, Department of Neurology
 - **Lisa Barroilhet**, MD, Department of Obstetrics and Gynecology
 - **Dawd Siraj**, MD, MPHTM, Department of Medicine, Division of Infectious Disease
 - **Jason Stephenson**, MD, Department of Radiology
 - **Shaneda Warren-Andersen**, MS, PhD, Department of Population Health Sciences

6 Member Advisory Committee



Christian Capitini,
MD, Co-Chair,
Department of
Pediatrics



Elizabeth Felton,
MD, PhD, Co-
Chair, Department
of Neurology



Lisa Barroilhet,
MD, Department of
Obstetrics and
Gynecology



Dawd Siraj, MD,
MPHTM, Department
of Medicine, Division of
Infectious Disease



Jason Stephenson,
MD, Department of
Radiology



**Shaneda Warren-
Andersen, MS,**
PhD, Department
of Population
Health Sciences

CS/CC Program FAQ's

- Professional Development meetings once per semester
- 2 networking/community-building gatherings per year
- Annual Meetings
- K Awards vs. Centennial funding

CS/CC Program FAQ's

- Application Process
 - Department Chairs and prospective Scholar/Clinician have a dialogue
 - Department Chair submits letter, budget
 - Applications reviewed by Advisory Committee and Assoc Dean for Faculty Affairs and Development
 - Expedited Process to put Centennial Program in candidate's offer letter

Questions? Website and Contact



Contact: csp@med.wisc.edu

Assessing & Advancing DEI Efforts at AAMC Medical Schools - Report Summary

Shiva Bidar-Sielaff, MA, CDM

Associate Dean for Diversity & Equity Transformation, SMPH

Vice President/Chief Diversity Officer, UW Health



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Diversity, Inclusion, Culture, and Equity (DICE) Inventory, Background and Methodology

101 AAMC-member medical schools completed

- 64% of US medical schools

Self-assessment of policies, practices and programs

- 89 questions
- 15 sub-content areas
- Yes, No, N/A
- Optional: collecting & reporting supporting documentation
 - 74% of schools submitted, including SMPH

Completed in May 2022

Summary of Findings

DICE Inventory Section	DICE Inventory Subsection	Average Subsection Total Score	SMPH
Students	Diverse, Inclusive, and Equitable Student Development	96.2%	100%
Governance, Leadership & Mission	Governance and Leadership Structures	91.8%	91.7%
Governance, Leadership & Mission	Mission, Vision, and Values	89.4%	100%
Communications & Engagement	Local and National Diversity, Inclusion, and Equity Engagement	88.5%	100%
Institutional Planning and Policies	Diversity, Inclusion, and Equity Policies	87.0%	83.3%
Students	Diversity, Inclusion, and Equity Valued Curricular and Cocurricular Experiences	84.7%	100%
Communications and Engagement	Institutional History	83.5%	100%
Faculty and Staff	Diversity, Inclusive and Equitable Faculty Scholarship, Promotion, and Development	80.5%	100%
Communications and Engagement	Diverse, Inclusive, and Equitable Communication	79.5%	100%
Data and Assessment	Diversity, Inclusion, and Equity Data Collection and Reporting	72.7%	75%
Data and Assessment	Culture and Climate Data Collection and Reporting	71.0%	80%
Faculty and Staff	Diversity, Inclusive and Equitable Faculty Recruitment	69.5%	80%
Data and Assessment	Community Data Collection and Reporting	66.5%	66.7%
Faculty and Staff	Diversity, Inclusive and Equitable Faculty Recruitment and Development	65.5%	85.7%
Institutional Planning and Policies	Strategic Planning and Accountability	64.2%	50%

60% of respondents had a total score > 80%
SMPH total score 88.6%



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Institutional Planning and Policies

Strategic Planning and Accountability

Descriptor	Item No.	Survey Section: Institutional Planning and Policies	Yes	No	N/A	Supporting Evidence - Free Response
Strategic Planning and Accountability						
Accountability structures and processes exist for diversity, inclusion, and equity goals	17	Does the institution's/school's strategic plan or diversity plan identify individuals who are responsible and accountable for progress toward diversity, inclusion, and equity goals?	☒	☐	☐	Associate Dean for Diversity & Equity Transformation https://intranet.med.wisc.edu/office-of-diversity-and-equity-transformation/
	18	Are there mechanisms for reporting annually on progress toward diversity, inclusion, and equity goals in the strategic plan?	☒	☐	☐	The Dean reports to the Provost on our progress toward DEI goals on an annual basis. Several departments have created Vice Dean of DEI roles that meet collectively in a community of practice. This group, chaired by the Director of DEI and manager of DEI are working on coordinating and streamlining efforts.
	19	Does the institution/school have performance incentives for schools or departments to achieve diversity, inclusion, and equity goals?	☐	☒	☐	Not at this time.
	20	Are schools, departments, or units with successful diversity, inclusion, and equity initiatives rewarded or recognized by senior leadership?	☐	☒	☐	Not at this time.



Data and Assessment

Diversity, Inclusion, and Equity Data Collection and Reporting

Diversity, inclusion, and equity data are regularly collected and shared with the campus community	45	Are demographic data on faculty, staff, student, and leadership easily accessible to the campus community (e.g., via web-based portals, websites, reports)?	☐	☒	☐	Faculty and Staff: UW-Madison policies limit how we can access and share demographic data for our faculty and staff. For Medical students: the data is shared in a number of different ways and openly. For instance it is available on the SMPH website: https://www.med.wisc.edu/education/md-program/admissions/entering-class-profile/
	46	Does the institution/school provide demographic data to schools, departments, or units to facilitate their diversity, inclusion, and equity action planning?	☒	☐	☐	UW-Madison provides faculty & staff demographics to the SMPH but sharing it widely within SMPH is not permitted at this point due to UW-Madison policies. Senior leaders (Dean, Associate Deans and Chairs) do have access to this data. SMPH collects, tracks and monitors demographic data for students, residents and fellows.
Diversity, inclusion, and equity data are leveraged for continuous improvement	47	Have senior leaders used demographic data to promote change within the institution/school?	☒	☐	☐	Senior leaders use this data to understand current state and also to track change and impact of DEI related strategies and tactics.
	48	Does the institution/school have an action plan for following up on the results of demographic data collection?	☒	☐	☐	Our entire DEI action plan is based on the demographic data and also our quantitative and qualitative knowledge of the experiences of faculty, staff and learners from historically marginalized communities.

Community Data Collection and Reporting

Collects data on community needs and perceptions	54	Within the past five years, has the institution/school collected data on local community needs related to its mission such as improving workforce development or health equity?	☒	☐	☐	We do so under the auspices of our Population Health Institute through the County Health Rankings and Roadmaps program (https://www.countyhealthrankings.org/). For information on Dane County see: https://www.countyhealthrankings.org/app/wisconsin/2022/rankings/dane/county/outcomes/overall/
	55	Did the institution/school include input from the local community in the development of its most recent strategic plan or in current institutional planning?	☐	☒	☐	Not as part of the last strategic plan.
	56	Does the institution/school have a formal community advisory board that is engaged in the development of new initiatives and projects affecting the community?	☒	☐	☐	There are several community advisory boards that inform development of new initiatives and projects affecting the community. These include the Prevention Research Center, the Carbone Cancer Center, and the Oversight and Advisory Committee of the Wisconsin Partnership Program.



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Some of the Highlighted Practices

- Decanal level leader appointed to direct a DEI Office
- DEI incorporated into speeches and townhalls
- Pathway programs
- Change in admissions policies
- Processes to report discrimination, bias and harassment
- Bias trainings for search committees
- DEI incorporated in promotion guidelines
- Affinity groups
- DEI content integrated in med school curriculum
- Lecture series, symposiums, lunch and learns
- DEI weaved into communications, branding and visual displays
- Policy and legislative advocacy

Continuing our Transformational Journey: Alignment and Coordination

- Communities of Practice- Basic Science & Clinical Departments
- Continued collaboration with HR to create standard tools:
 - Stay interview toolkit
 - Recruitment and search process guides
- Using equity toolkit to embed equity in policies and practices
- Engage in longitudinal learning and unlearning
- Affinity groups (Employee Resource Groups)

Town Hall

Open for Questions

- *In person*: Raise hand to receive microphone
- *Online*: Use the chat feature to submit