

Let's Talk!

An Integrated Health College

A vision for the evolution of higher
education and its community
impact



Moderator: Cheryl B. Schrader, President

Panelists: Joseph E. Keferl, Dean

Tracey Stute, Director MHRB

Bryan J. Bucklew, President & CEO GDAHA

Travis Doom, Faculty Senate President



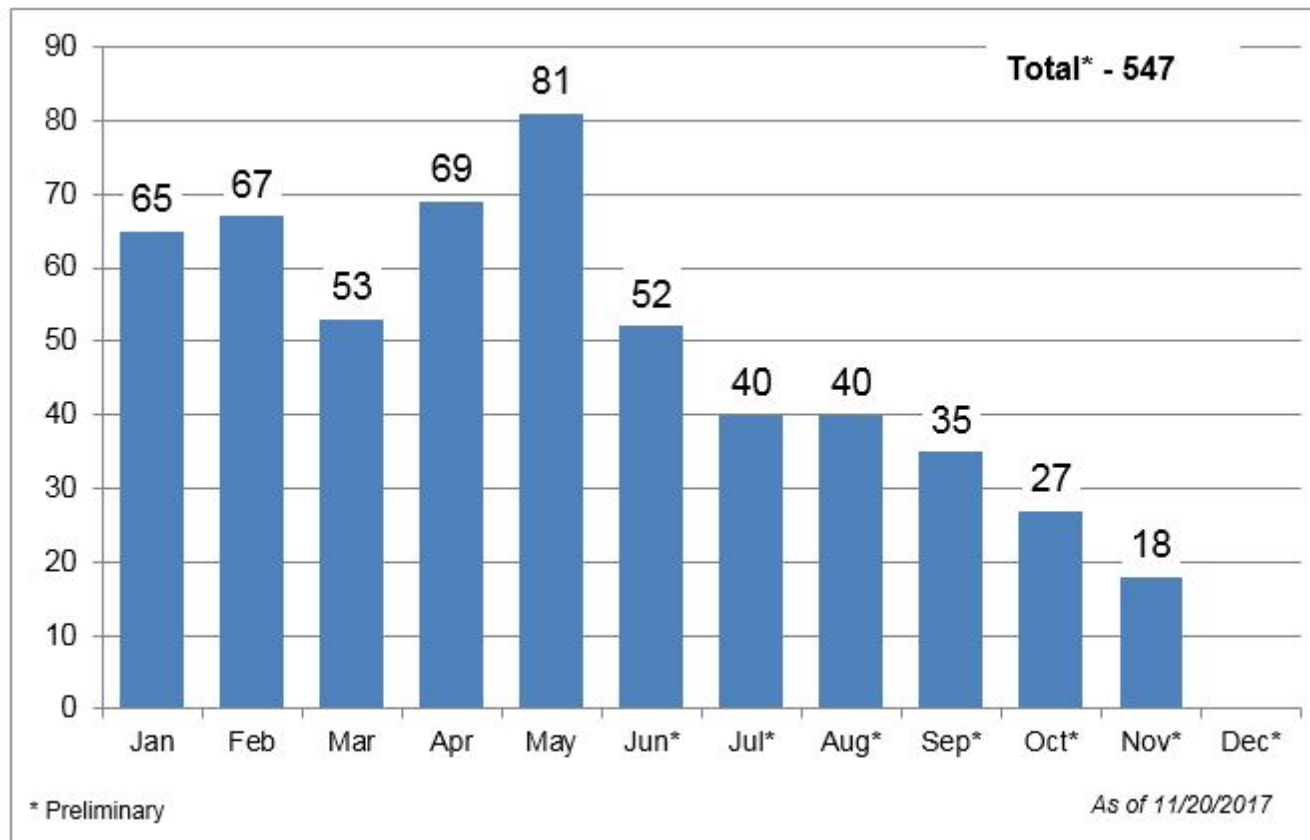
Issues...and solutions...are complex

- “Complex problems do not have simple solutions” – *Chinese proverb*
- “A scientific theory should be as simple as possible, but no simpler” – *Albert Einstein*
- Effectively addressing today’s issues requires us to think and respond differently

Real Threats to our Region

- Opiate epidemic
- Infant mortality
- Generational poverty
- Food scarcity
- Access to health care
- Deindustrialization
- Loss of population, workforce, tax base
- Challenges in education
- Achievement gap continues to widen

Preliminary number of accidental overdose deaths in Montgomery County in 2017 as reported by the Montgomery County Coroner's Office.



*These numbers may change when the final cause of death is determined.

Sample Issue



*Areas in bubbles are not comprehensive-many other aspects impact this issue

Integrated, Interdisciplinary,
Transdisciplinary, Interprofessional,
Multidisciplinary...this is the norm

Healthcare is moving fast!

Our students must be prepared

Our reality...

The growing complexities and mounting consequences of population health and workforce needs have outpaced the traditional IHE (Institution of Higher Education) model and associated funding structures.

Our opportunity...

Committing to an all-in impact approach wherein siloed academic practices are dismantled and restructured with the supports needed to grow and sustain a transdisciplinary model and university culture, will allow IHEs to reclaim their critical roles of driving population health, leading in workforce development, and contributing to local, state, and national economies.

American Psychological Association (APA)

Integrated Health Care

Collaboration between health professionals to provide complete treatment to patients and improve overall well-being.

What is Integrated Health Care?

Integrated health care, often referred to as interprofessional health care, is an approach characterized by a high degree of collaboration and communication among health professionals. What makes integrated health care unique is the sharing of information among team members related to patient care and the establishment of a comprehensive treatment plan to address the biological, psychological and social needs of the patient. The interprofessional health care team includes a diverse group of members (e.g., physicians, nurses, psychologists and other health professionals), depending on the needs of the patient.

AMA to Unleash a New Era of Patient Care

For immediate release:

Oct 16, 2017

CHICAGO - A new collaborative initiative founded by the American Medical Association (AMA) announced today it is working to unleash a new era of better, more effective patient care by introducing a data evolution for improving, organizing and sharing health care information.

The [Integrated Health Model Initiative \(IHMI\)](#) is a platform for bringing together the health and technology sectors around a common data model that is missing in health care. IHMI fills the national imperative to pioneer a shared framework for organizing health data, emphasizing patient centric information, and refining data elements to those most predictive of achieving better outcomes.

“We spend more than three trillion dollars a year on health care in America and generate more health data than ever before. Yet some of the most meaningful data – data to unlock potential improvements in patient outcomes – is fragmented, inaccessible or incomplete,” said AMA CEO James L. Madara, M.D.



**Integrated
Health Model
INITIATIVE**



Be part of our health care solution

AMA's Integrated Health Model Initiative: a collaborative effort that supports a continuous learning environment to enable interoperable technology solutions and care models that evolve with real-world use and feedback. IHMI uses the best available science to incorporate meaningful data elements around function, state and patient goals. All individual and organizational stakeholders are welcome to participate, simply login to get started.

IHMI features a digital platform for:

- Collaborative communities around costly and burdensome areas
- A physician-led validation process to review clinical applicability
- A data model for organizing and exchanging information

Integrated Model: Connecting the Systems, Data, Policies, Training, Practices and Outcomes

- Models
 - Northern Kentucky University
 - \$105 million Health Innovations Center 2018
 - ORVARC
 - University of Notre Dame
 - Keough School of Global Affairs
 - West Virginia University

One University Takes On the Opioid Crisis The Chronicle of Higher Education – WVU

To many academics, the mission is both a moral obligation and a practical necessity. The future doctors, business owners, teachers, and public officials who enroll at the university will all confront the crisis in one way or another. **It is overburdening health care systems, wreaking havoc on county budgets, and gutting the work force. The future of the state is at stake.**

But what progress can one university realistically make? "When I came in, everybody said, You need to solve the opioid problem," says Clay B. Marsh, vice president and executive dean for health sciences. Two years ago, he created a substance-abuse task force to coordinate resources in the university's health care system and beyond. **"What I've come to realize is that it's a complex systems problem," he says. "Everything in our world is completely interconnected."**

4 Universities Take Steps Against Opioids

- **The Ohio State University** has asked its 200-plus extension educators to undergo training in mental-health first aid as well as in addiction and recovery. Extension agents are trusted resources in Appalachia, where close family ties and self-reliance are part of the culture, says William J. Martin II, dean of the College of Public Health. "This is not a health care problem, it's a community problem. The solutions have to come from the community."
- **Clarion University of Pennsylvania** this year created the state's first certificate program in opioid treatment, for emergency-room personnel, school counselors and family therapists, among others. Within weeks, 75 people enrolled, says Raymond F. Feroz, a professor in the College of Health and Human Services. "Part of what we want to do is help people understand it is a disease, not a moral failing."
- **The University of Kentucky** designed a multidisciplinary resource for pregnant women struggling with substance abuse, the Perinatal Assistance and Treatment Home program. Through nurse-led care and group counseling during and after pregnancy, the program has helped about 200 women since 2014 and will probably serve 100 more this year. "There's really, unfortunately, no end in sight," says Kristin Ashford, an associate dean at the College of Nursing and one of four women in the university's health care system who created the program.
- **The University of New Mexico** started the Extension for Community Healthcare Outcomes, or ECHO, project in 2003 to let specialists in fields like addiction, pain management, and infectious disease work with doctors at clinics in underserved areas. The doctors present some of their most difficult cases via video conference and receive advice on the appropriate course of treatment. The model has expanded to dozens of academic and government medical centers, with the opioid crisis driving much of the momentum, says Miriam Komaromy, associate director of the project.

Why an Integrated Health Model at WSU?

- Beautiful alignment with WSU Mission
- WSU has immense expertise, quality, and depth/breadth of knowledge, research, academic programs
- Accrediting bodies pushing for integration of programs

Why Wright State?

- Strong community partnerships that need workforce with interdisciplinary training
- Our students tend to come from, and return to our communities
- We are the right University to make this shift

Integrated Health Model Benefits:

Rapid response and evaluation of interventions in real time, using findings to improve results

Invites policies and systems to be evaluated and adapted to improve effect and efficiency

Shapes our current and future workforce to be trained to “think beyond their discipline”, by understanding and responding to health care needs of local communities, through the design, discovery, and integration of knowledge and practice from other fields

By changing the way we address health care challenges to develop a truly integrated collective impact model, IHEs will make significant progress toward saving lives and improving communities.

<https://webapp2.wright.edu/web1/newsroom/2016/09/07/national-docu-series-on-daytons-heroin-use-premieres-at-wright-state/>

WSU is poised to lead with this model

Why Now?

- Our communities need us now
- Our health care partners need trained workforce
- Public/Political scrutiny of Institutions of Higher Education
 - Shrinking market coupled with increased doubt about the value proposition of higher education
- Other institutions mobilizing to address this need

Stakeholder Support

| WestCare Health Foundation | Nationwide Hospital |
|-----------------------------|--|
| Wexner Foundation | Drug Enforcement Administration |
| Centers for Disease Control | Office of National Drug Control Policy |
| Governor | Attorney General |
| Legislators | Commissioners |
| Judges | Law Enforcement |
| Community Providers | Donors |
| Employers | Hospitals |
| Chancellor/ODHE | Schools/Universities |

Creating a New Course for WSU

- Moving from reactive to setting the vision for the state and other entities
- Massive potential for increased:

| | |
|---|---|
| Grants and funding | Real-time, comprehensive support for community partners, employers, and student learning |
| Student scholarships & internships | Local, state and national recognition |
| Research opportunities | Revenue streams |
| Unique and evolving curriculum | Curricular pathways |
| Recruitment, retention, completion | Impact on policy and funding |

Greater Efficiency and Improved Student Success

- Clustered coursework/programs allows for synergy
- Student recruitment is streamlined
- Development of internal and external degree pathways
- Ease of student movement between programs and increased credit creation
- Retention and completion enhanced
- Ability to build new in-demand programs
- Opportunity for WSU to innovate and lead

The Vision is Ours to Create

- Many important details to consider
- Program and curriculum alignment/clustering
- Faculty/program movement
- Important to consider impact on all academic programs/units

Academic program growth

Staffing/support

Fiscal viability

Historic Opportunity

We have exceptional faculty, staff, students, alumni, and community partners who are excited, creative, and committed

- Opportunity to create innovative curriculums
- Innovative events and programming
- Share vision and gather partners
- Together, we shape the future of WSU
- Together, we improve our communities

Academic Organization Review

- A joint Administrative/Faculty/Student Steering Committee has been charged to focus on:
 - Enhancing student retention and progression to degrees
 - Creating programs and synergies to increase enrollment
 - Facilitating multidisciplinary programs and research
 - Providing students with career preparation for critical jobs in the region
- Initial focus directed on health and human services capabilities
 - Align programs to provide career opportunity pathways
 - Align faculty expertise to facilitate development of new programs
 - Align organization to better meet regional needs and employment
- <https://www.wright.edu/about/topics-open-for-comment>