

UNIVERSITY of WASHINGTON

FY2020 Annual Review Narrative Response for: **304 - School of Medicine**Programmatic & Academic Vitality Narrative

- 1) Please briefly describe your unit's annual internal budget development process. *Question Type: Free Text, Word Limit: 500, Required For: All Units*

The SoM's multi-level budget process includes the following steps: The 32 SoM Departments complete department budgets, which incorporate the Clinical Department's UWP and CUMG (practice plan) budgets. The 19 SoM Clinical Departments budget for their clinical activities as part of the annual UWP and CUMG budget process which captures clinical billings, support from medical centers and deployment of faculty in the clinical services. The SoM Dean's Office budget process includes centrally held funding sources and related expenses for research facilities, medical school programs, share of central budget, other SoM wide programs and central administration and finance. As part of the process, the GME and CME programs also prepare separate budgets. The SoM uses the department and central administrative budgets to accumulate the overall SoM budget. The SoM launches its budget process in January of each year; the Dean approves the budgets in April and in June the overall budget is reviewed with the UW Medicine Finance and Audit Committee.

- 2) What are 3-5 key elements of your unit's current strategic plan? *Question Type: Free Text, Word Limit: 500, Required For: All Units*

The SoM is one of eight organizations of UW Medicine with an overall mission to improve the health of the public. The key strategic elements in support of our overall mission include: Participation in key initiatives in UW Medicine's strategic plan including FIT project, Destination One (clinical transformation), the establishment of a clinically integrated network, healthcare equity, and integration of Northwest Hospital with UW Medical Center.

Continued improvement in the teaching programs of the SoM including the medical school program, residency programs (GME), other professional training programs (MEDEX / Lab Medicine Tech program / OT-PT programs), graduate programs and undergraduate programs. This includes the evolution of approaches to improve active learning relevant to the specific disciplines. Work to improve the overall training and research environment for the SoM faculty, staff and trainees including providing sufficient and high quality research space to support our research and teaching programs as well as a focus on philanthropy to support investment in student scholarships, trainee activities and new and ongoing strategic research initiatives.

- 3) What major obstacles or institutional barriers currently do, or likely will, hinder execution of your strategic plan? What are you doing to address these challenges? *Question Type: Free Text, Word Limit: 500, Required For: All Units*

The biggest obstacles for the SoM are as follows:

Adequate funding to meet the SoM teaching responsibilities. Under ABB the SoM will not be able to fully fund our annual mandated merit increases with incremental tuition. The SoM has only been able to successfully fund merit for the last several years due to class expansion in the medical school which will end after FY2020. Relatedly, the SoM does not have adequate state funding to fully cover all our teaching responsibilities in the medical school, other professional programs, ACGME residency programs and graduate and undergraduate programs. We estimate that nearly 50 percent of the teaching performed by faculty in the SoM does not receive "credit" under the ABB system. Our regular faculty are involved in teaching residents, fellows, and other post-doctoral learners. The ABB system does not enable the SoM to receive any central support for this critical aspect of our teaching. For example, a challenge facing our clinical departments is that ACGME has continued to increase the dedicated time commitment required to be funded for program directors with sweeping expansion of the requirements expected July 1, 2019. There is no new funding to support this increasing requirement from the ACGME and there is no recognition under ABB.

Increased taxation, retained funds and cost shifting at the central level have created financial pressure on the SoM. There is a lack of transparency related to how substantial funds retained by the central administration are allocated and used. As shared with the president, the prior provost and P&B over the last year, the increased central taxes, retained funds, cost



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shifting and other cost allocations have increased the financial challenges to the SoM. Two of the most recent examples of cost shifting are:

- EHS incremental budget request was not supported by the Provost. EHS decided to direct charge the SoM for BLS3, select agent and other oversight activities, even though these services were historically provided centrally by this UW safety program.
- Co-Motion's budget was reduced and the cost of patents was shifted to programs within the Schools and Colleges.

Aging and outdated teaching and research facilities are not meeting the needs of evolving teaching and research activities. There is a lack of on-campus space to meet program needs. There is limited, if any, funding for minor renovations to update teaching and research facilities to current standards.

To address these challenges, the SoM has been and will continue actively managing expenses and exploring opportunities for increasing revenue, including:

- UW Medicine Advancement continues to increase donors, gifts and foundation grants to support our activities. The SoM is exploring state funding opportunities and if supported by UW, the SoM will prepare state funding request packages. The SoM continues to explore opportunities to expand its ABC Shared Services and shared administrative oversight.
- The SoM, along with the Board of Health Sciences Deans, participated with central campus in a proposed plan for the Population Health Building backfill. The backfill plan will mitigate some of the SoM's current facility constraints.
- The SoM is actively participating in the Health Sciences Teaching facility planning and design and the discussions on T-wing renovations. Both of these facilities have the opportunity to meet the evolving teaching needs of our undergraduate, graduate and professional programs.

- 4) Over the next year, could any of your planned strategic activities result in material changes to revenues or expenditures, faculty or staff workload, or the student experience within your unit and/or another unit/campus? *Question Type: Free Text, Word Limit: 500, Required For: All Units*

The SoM is planning limited growth in faculty and staff to support the medical school program and the graduate medical education program. In Spokane, there may be renovations or construction of teaching facilities for the medical school program. These will increase SoM costs and/or existing faculty and staff workloads.

The SoM has planned growth in clinical services within UW Medicine and our affiliates that will drive continued faculty recruitment and compensation costs, however there will also be a growth in clinically related revenue.

The SoM expects its research programs will continue to grow which will increase both revenue and costs associated with faculty, trainees and staff research related efforts. The SoM is planning on building out the 8th floor of SLU 3.2 which will drive additional facilities related costs and staff workload with additional revenue occurring in later years. The SoM has appointed several new chairs in the last two years with additional new chairs starting in February and March 2019 in the departments of Pediatrics, Radiology, and Microbiology.

Finally, we have active searches for new chairs in the departments of Medicine and Radiation Oncology. It should be noted that the Department of Medicine is our largest department and the recruitment will come with significant investment requirements for the SoM. With the successful recruitment of these new chairs, there will be a net increase in start-up costs in the short-term. We would also anticipate increased revenue generation in future years as new research and clinical programs are developed in future years under the leadership of those new chairs.



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- 5) What is your unit doing to effectively use resources in a way that benefits your unit and/or other units/campuses? *Question Type: Free Text, Word Limit: 500, Required For: UWB, UWT, UWS Administrative Units*

Not Applicable

- 6) What are you doing to improve the experience and outcomes of students in your unit? What could the University do to support your efforts? *Question Type: Free Text, Word Limit: 500, Required For: UWB, UWT, UWS Academic Units, UAA, Graduate School*

The SoM has a major focus on mentorship, including mentorship for graduate students and post docs. School wide recognition for mentorship includes special mentorship awards, review of mentorship as part of annual faculty meetings, and recognition of mentorship as part of academic promotion.

For the SoM medical school program, we have a continuous curriculum improvement process that aims to improve all aspects of our medical school program annually. It incorporates faculty and student feedback in real-time and at the end of each course to identify opportunities to improve. Additionally, with our recently completed LCME site visit, the medical school program will be working to address concerns shared as part of the site visit process.

The SoM has an active wellness program for medical students across the WWAMI region. Each regional campus has a wellness committee that routinely plans wellness activities for students. There is financial support for these activities from the School's central budget.

UW GME Wellness is a tremendous benefit to trainees who can use free, private and confidential counseling services. As well, the GME Wellness counselors publish a weekly electronic newsletter (the Wellness Corner) that gathers all of the activities in the Seattle area, including art, entertainment, music, theater, family events and self-care discounts.

The SoM GME programs will be continuing to work to adapt to the new Clinical Learning Environment Review (CLER) requirements for residency training programs, which include a site visit every 24 months (site visit just completed January 8-10, 2019). The new CLER requirements will require all of our 110+ programs and the program directors to incorporate into the curriculum and learning experience for our 1,400+ trainees the following areas of emphasis:

- Patient Safety
- Healthcare Quality and Healthcare Disparity
- Care Transitions Supervision
- Well being
- Professionalism

Both the medical school program and the GME programs have active and ongoing initiatives to promote and support diversity and equity within the programs, including student led organizations and groups.



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Faculty/Librarian Trends

- 1) Please discuss your unit's Faculty/Librarian hiring trends and strategies from the last 2-3 years. *Question Type: Free Text, Word Limit: 500, Required For: UWB, UWT, UWS Academic Units, UWS Library*

The SoM has had a historical 3% increase in faculty FTE growth annually due to combined growth in clinical services at UW Medicine and Affiliated Entities (SCCA / SCH / other) as well as continued growth in the overall research and training programs. We anticipate this growth to continue over the next 2-3 years based on planned strategic growth in clinical services, research activities and training activities.

- 2) How do these Faculty/Librarian hiring trends and strategies relate to your previously stated strategic goals and/or priorities? *Question Type: Free Text, Word Limit: 250, Required For: UWB, UWT, UWS Academic Units, UWS Library*

The SoM hiring trends are a direct reflection of the SoM strategic goals.



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Tuition Based Program Rate Recommendation Narrative Section

- 1) Which existing tuition categories are you recommending a change to? *Question Type: Select Multiple, Required For: UWB, UWT, UWS Academic Units*

Medical Professional (MD)

- 2) Please explain why each proposed change is needed and how your unit will use new incremental tuition revenue increases or absorb incremental tuition revenue losses. *Question Type: Free Text, Required For: UWB, UWT, UWS Academic Units*

Recommendations by Category

- Medical Student Tuition – 3% (SoM has 99% of SCH in tuition category)
- Graduate Tuition Tier I – 0% (SoM has 14% of SCH in tuition category)
- Graduate Tuition Tier 2 – 2% (SoM has 85% of SCH in tuition category)

Why the Increase

- Medical Student Tuition (65% of SoM tuition under ABB) – proposing a 3% inflationary increase.
- Will be used to partially fund merit increase under ABB
- Graduate Tuition Tier 2 – proposing a 3% inflationary increase.

Will be used to partially fund merit increase under ABB

- 3) Explain whether and how each proposed change will affect peer comparisons and/or whether a market analysis was conducted. *Question Type: Free Text, Required For: UWB, UWT, UWS Academic Units*

SoM prepares an annual medical school tuition analysis that compares our tuition and growth rates to our peers. SoM resident tuition is approximately 107% of the average public medical school's resident tuition. The 3% increase is consistent with our peer's rate of annual increase.

- 4) Discuss the impact of each proposed change on student debt load. *Question Type: Free Text, Required For: UWB, UWT, UWS Academic Units*

Yes – any increase will impact student debt loads. The SoM completes an annual analysis that compares our student debt load across the WWAMI region and against our peers. With the School's commitment to primary care, the School monitors student debt load and compares it to national averages when proposing tuition increases.

- 5) Describe whether you expect the proposed tuition rate(s) to result in any substantial changes to enrollment (including a change in the resident/nonresident composition) or to the volume of waivers awarded. *Question Type: Free Text, Required For: UWB, UWT, UWS Academic Units*

No impact in enrollment is expected in medical school program or Professional Tier II programs. We are also not expecting any changes to volume of waivers awarded.

- 6) For each proposed change, please explain what would happen if the change were not implemented (e.g. deficit, loss of staff positions, etc.). If a proposed change is part of a plan to eliminate a current deficit, please indicate that. *Question Type: Free Text, Required For: UWB, UWT, UWS Academic Units*

The SoM will not be able to fund merit under ABB. Even with the proposed increases, we are only able to partially fund merit increases under ABB unless we expand our student enrollment or receive other central funding.



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Tuition Based Program Rate Recommendation Narrative Section

- 7) For each tuition category that you have proposed changing, please discuss your unit's overall tuition rate strategy for the next 3-5 years. In your response, please explain whether and how your long-term strategy connects to "market" rates (e.g. where do you want to be, rate wise, compared to peers?) *Question Type: Free Text, Required For: UWB, UWT, UWS Academic Units*

The SoM would anticipate growing medical student tuition over the next 3-5 years at a rate consistent with our peers. The SoM does not want its tuition rates to grow at a faster rate than its peers as the SoM tuition rates are already 107% of the average tuition rate for public medical schools. The SoM annually completes our tuition analysis that compares SoM tuition to our peers as part of our evaluation prior to making our tuition increase recommendation. The SoM also reviews the average student debt for UW students as well as national averages which is a consideration prior to finalizing our tuition recommendation.



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Communication with Stakeholders

- 1) Please enter the date that FACULTY leadership within your unit/campus was consulted and given the opportunity to provide input as part of this budget planning exercise. If not yet shared, please enter the date you are scheduled to consult with FACULTY leadership and, immediately after that date, please send an update to Becka Johnson Poppe, jbecka@uw.edu. *Question Type: Date Select, Required For: UWB, UWT, UWS Academic Units*

Jan 18, 2019

- 2) Please list a point of contact for your FACULTY leadership (including name and email address) *Question Type: Short Answer, Required For: UWB, UWT, UWS Academic Units*

Dr.Gautham Reddy, Professor and Vice Chair for Education, Department of Radiology -- Email reddyg@uw.edu.

- 3) Please enter the date that STUDENT leadership within your unit/campus was consulted and given the opportunity to provide input as part of this budget planning exercise. If not yet shared, please enter the date you are scheduled to consult with STUDENT leadership and, immediately after that date, please send an update to Becka Johnson Poppe, jbecka@uw.edu. *Question Type: Date Select, Required For: UWB, UWT, UWS Academic Units*

Jan 30, 2019

- 4) Please list a point of contact for your STUDENT leadership (including name and email address). *Question Type: Short Answer, Required For: UWB, UWT, UWS Academic Units*

Medical Student Association President is Thamanna Nishath -- tnishath@uw.edu.

- 5) Enrolled students affected by tuition rate increases should be consulted on proposed increases before proposals are finalized. In the space below: (1) please describe when and how students were consulted and (2) please summarize the feedback they provided regarding EACH of your tuition recommendations. *Question Type: Free Text, Required For: UWB, UWT, UWS Academic Units*

Faculty Council Feedback The SoM's Faculty Council on University Relations met with Dr. Ramsey on January 18, 2019 to discuss the FY20 Budget Narrative and Fiscal Vitality report (including the FY19-23 Fiscal Vitality forecast). Based on the discussion, the council recommended tuition should not increase more than 3% based on debt loads and comparison of tuition rates to peers institutions.

Student Feedback Suzanne Allen, M.D., Vice Dean for Academic, Rural and Regional Affairs met with the Medical Student Association leadership on January 30, 2019. Discussion was primarily focused on Tuition recommendation. As the SoM instituted a new summer tuition requirement this summer (new requirement was after 1st year a new summer tuition and program requirement before starting 2nd year – roughly \$10k/1st year student). The students noted the 3% increase would be on top of the new tuition charge which was not well received. They recommended a good communication plan outlining the rationale for a 3% increase, if the SoM proceeds.

Graduate Tier II – The SoM has asked the four department in the SoM in the Graduate Tier II category: Rehab PT / Bioethics / Biomedical Informatics / Lab Medicine to communicate the plan and or consult with student leadership groups if they exist in the programs. We have asked for feedback by February 28th.