Interdisciplinarity@WMU- Phase One planning Template

Duplicate Submission

1. **Brief Overview**: Provide a brief overview of the proposed interdisciplinary initiative. What types of questions would the initiative ask? What types of complex problems would it seek to solve?

As part of WMU’s interdisciplinary initiative, Haworth College of Business (HCOB) and the College of Health and Human Services (CHHS) are proposing a joint Health Administration degree program, with courses taught by each college. According to the WMUx occupation and job posting analysis developed for this program, occupations in this area will grow by more than 11 percent in our region and 17 percent nationwide. The program will seek the certification/accreditation of the Association of University Programs in Health Administration (AUPHA) and possibly accreditation of Commission on Accreditation of Healthcare Management Education (CAHME). The program will adopt a multi-modal course delivery, i.e., both online and/or face-to-face approaches will be used. The program will provide experiential learning opportunities based on the recommendations of healthcare organizations and healthcare service providers.

In 2018, the Director of the School of Interdisciplinary Health Programs (SIHP) initiated a conversation with executives from long-term care organizations and facilities in Michigan who indicated their belief for the need for young professionals with education and training in health administration especially in long-term care. In fall 2020, we formed an interdisciplinary committee composed of ten faculty members and administrators from the two colleges who have experience in relevant programs and courses. The committee meets regularly and is developing a high quality program that will likely create significant demand. Both colleges have deep connections with healthcare industry partners and we are in the process of forming an advisory council leveraging these relationships. The leadership of each college is highly supportive of the new degree program.

This program will provide our students the opportunity to develop an in-depth understanding of the AUPHA content areas of U.S. health care system; population/community health; cultural competence/diversity; organizational development/organizational behavior theory; management in healthcare organizations; operations assessment and improvement; management of human resources and health professionals; information systems management and assessment; healthcare law; governance; health policy; leadership; statistical analysis and application in decision-making; healthcare economics; post-acute care; healthcare marketing; financial analysis and management; ethics in business and clinical decision-making; strategy formulation and implementation; and, quality assessment for patient care improvement. We also expect the program to contribute to the interdisciplinary research in this area by providing engagement opportunities to faculty members of each college.

2. **Impacted units**: What existing units, programs, and colleges would be involved in the proposed initiative? What other possibilities for collaboration across campus or in the broader community might exist now or in the future?
In the CHHS, the primary contributing unit will be the SIHP. Existing courses from the Healthcare Services and Sciences (HSS) major will comprise a significant portion of the coursework. In the HCOB, the Departments of Accountancy, Business Information Systems, Finance and Commercial Law, Management, and Marketing will be involved as the program will include courses from the BBA core as well as additional courses that are part of HCOB majors. The Department of Public Administration was also included in the early proposal discussions.

The program follows the curriculum content of AUPHA and courses from other colleges that satisfy the content areas AUPHA identifies. The program will likely include courses from across the broad campus. For example, we hope to include several public administration courses, as well as statistics and economics courses. As in other degree programs, students will also take Essential Studies curriculum courses.

The program will strengthen WMU’s community partnerships. We are planning to include an experiential capstone course in the form of an internship or apprenticeship. The course will allow students to engage with our community partners. We will utilize HCOB’s Zhang Career Center and resources from the CHHS Student Services office to make connections for this internship. The program’s advisory council will be a source of information and feedback. The council is also expected to create placement and engagement opportunities for the students in our program.

3. Impact on teaching, learning, and curricula: Describe the anticipated impact of the proposed initiative on teaching, learning, and curricula. How might this initiative help to grow enrollment, including by reaching new audiences of learners through continuing education, dual enrollment, or professional certification? How will the proposed initiative positively impact the training of undergraduate and graduate students? How does it enhance our institutional commitment to diversity, equity, and inclusion?

The proposed Health Administration undergraduate degree will integrate currently available teaching resources to provide a strong career path into the growing high-demand field of managerial and administrative health-related workforce. The curriculum will be taught by CHHS and HCOB faculty and developed in alliance with certification standards of the Association of University Programs in Health Administration (AUPHA) and possibly accreditation of Commission on Accreditation of Healthcare Management Education (CAMHE).

The required teaching resources for the major are existing courses in the WMU Healthcare Services and Sciences Program (HSS), and courses in the Accountancy, Business Information Systems, Finance, Management and Marketing Departments at HCOB to combine business knowledge and skills of the health care environment. Both HCOB and CHHS have available teaching capacity for additional students in the affected courses.

Based on the WMUx recent findings, there is a strong market demand for graduates from the HA program. Using data from the U.S. Census Bureau along with data from WMUx, Michigan has the highest percentage of older adults (65+) as compared to three regional states (IL, IN, OH) while producing fewer graduates in the job domain. In contrast, Purdue University (IN) awards more than 40% of graduates to the market. Thus, the proposed HA program will grow new enrollments and attract new audiences.
The HA major can be taken in conjunction with other majors and minors to fully prepare students to meet the growing job demand. HA graduates can move directly into health careers or be prepared for graduate study.

Currently, students in the HSS major are racially diverse, though many have not secured a clear path to a clinical career. This new major will offer a great option for future employment. The current HSV 4400 Diversity and Inclusion in Health course will be part of this new degree to enhance student knowledge of the impact of social determinants of health and to meet AUPHA certification requirements to address cultural diversity in this program.

4. **Impact on research and creative activity:** Describe the anticipated impact of the proposed initiative on research and creative activity. How will this initiative promote discovery and creative scholarship? How might it result in increased external funding?

Faculty in many disciplines within CHHS and HCOB engage in research and creative activity in the broad “health administration” field. Today’s COVID-19 pandemic spotlights the need for generation of knowledge and creative activities at the nexus of public health, healthcare and business. While faculty and students engage in research within the health administration field with projects such as healthcare quality improvement, workforce development, health impacts of economic recessions, the proposed degree program will foster new, formal, collaborative cross-discipline relationships among faculty and students in CHHS and HCOB. Planning and administration of the program will facilitate communication and interaction which will allow evolution of ideas featuring interdisciplinary breadth supported by disciplinary depth. Partnerships among CHHS and HCOB will make applications from traditional sources of health administration funding, like HRSA, DoD, SAMHA, and NIH more competitive, it will open new avenues for business applications of health-related innovations, SBIR funding opportunities and realization of commercial possibilities.

5. **Efficiencies and/or cost savings:** How might the proposed initiative contribute to increased efficiencies and/or cost savings, for example by reducing administrative positions (e.g. chairs/directors), sharing staff support services and/or by sharing facilities?

We are planning to include courses that already exist and are regularly taught in the contributing departments/programs. Hence, there will likely be minimal cost associated with instructional costs of the program. The program will utilize existing administrators and staff. The only exception will be a program coordinator required by AUPHA once the program has 150 students. We are planning to have an existing faculty member serve as a co-coordinator in each college receiving one-course reduction but no other compensation. The students will use existing support services at HCOB and CHHS. Academic advisors will be trained about the requirements of the program and we are planning to assign an advisor from each college to coordinate the advising activities. Students will also be able to use tutoring and other academic success services in each college.

The students will use existing spaces and facilities in the two colleges and around the university. Students will have access to computer labs, trading room, sales lab, software, data sets, and study lounge at HCOB. No additional library resources will be needed.

We estimate to accept 100 students into the program every year with 20 more students transferring from community colleges at the end of the sophomore year. When it is fully enrolled, we expect the program to generate annual tuition revenue of $8.2 million.
6. Impact on course offerings and workload: At present, proposed initiatives will only be feasible and sustainable if they can be supported by existing resources, including instructional capacity, faculty and staff time, and facilities. Will the proposed initiative streamline existing course or program offerings? Could the initiative help create more equitable and sustainable workload for faculty, for example, by reducing the need to offer under enrolled courses, reducing the frequency of course offerings or eliminating the need to teach some courses?

Since the program will use existing classes, we do not anticipate that additional resources will be needed to initiate the program. Courses from the Healthcare Services and Sciences (HSS) program that are used in the program are currently offered every semester and are available face-to-face and online formats. The majority of courses in HSS are taught by part-time instructors and enrollment is typically at 80-85% of capacity with the online courses being fully enrolled. Therefore, in the SIHP, the capacity exists to accommodate additional enrollment in the classes. Growth in program development and enrollment will determine the need to expand instructional capacities. Tenured faculty in SIHP teach a 12 credit per semester teaching load and untenured faculty in SIHP receive a 3-credit workload release to develop their scholarly activities.

The deans of CHHS and HCOB have indicated that each college intends to request one faculty position that would be used primarily to support the proposal.

The primary efficiency that would be the capacity to offer an additional career pathway for WMU students with minimal additional resource investment. Discussions with long-term care executives from Michigan have confirmed their belief in the need for additional young professionals with education and skills in the management of long-term care facilities.

7. Additional Information: What additional information would you like to provide in support of this proposal?

The leaders of this proposal, with the support of the CHHS and HCOB Deans have initiated a market analysis through WMUx that will assist in identifying the precise focus of the degree. WMUx has already provided occupation overviews and job listing analysis. The additional WMUx reports will assist in identifying any gaps in health administration that exist in Michigan and in the region. For example, the market analysis will seek to find answers to questions such as: Is there a difference in need between long-term care, hospital, clinic, and health related human service settings? What are the gaps in knowledge, skills, and experiences of graduate of similar programs throughout the state that need to be addressed? What should be the specific focus of the WMU Health Administration degree be?

The leaders of this proposal have identified potential members and begun development of a community advisory council for this program/major. Current members reflect expertise in the long-term care industry. Representatives of other Health Administration settings are being sought.

8. Contact
   Dr. Mark Kelley, CHHS - School of Interdisciplinary Health Programs