Presentation to the Interim Higher Education Committee UND SMHS Advisory Council September 8, 2022

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Chair, UND SMHS Advisory Council



Overview of Today's Presentation

- •Update on the status of preparations for the Seventh Biennial Report 2023 — Health Issues for the State of North Dakota (to be released end of 2022)
- Update on the strategic plan, programs, and facilities of the UND School of Medicine and Health Sciences
 - Where we are
 - Where we hope to go
- Questions/Discussion



UND SMHS Advisory Council

Duties of the UND SMHS Advisory Council (NDCC 15-52-04) (edited):

- "1. The advisory council, in consultation with the school of medicine and health sciences...shall study and make recommendations regarding the strategic plan, programs, and facilities of the school of medicine and health sciences...
- 2. Biennially, the advisory council shall submit a report, together with its recommendations...to the legislative council.
- a. The report must describe the advisory council's recommendations regarding the strategic plan, programs, and facilities of the school of medicine and health sciences..."



The *Biennial Report* is highly reliant on secondary data from public and private sources. As such, data lags from 1-3 years are common. The most current data are used for each topic presented at time of publication.

The upcoming *Report will* contain some information that identifies impacts from the SARS-CoV-2 epidemic; however, future reports will be able to more fully address direct impacts.



Chapter 1 – The Population of North Dakota and the Attendant Health Needs

- Content has been updated
- Population trends in the state have remained relatively stable in relation to total population, age, and poverty rates.

Chapter 2 – Social Determinants of Health in North Dakota

Content has been updated

Chapter 3 – The Health of North Dakota

- The percentage of people reporting one or more days of poor health decreased from 2015 to 2020, as did the percentage of people reporting one or more days of poor physical health.
- The percentage of adults who smoke, drink alcohol, binge drink, drink and drive, and don't wear a seatbelt has decreased from 2015 to 2020.



Chapter 4 – Physician Workforce in North Dakota

- North Dakota continues to have less physicians per 10,000 people compared to the Midwest and the United States as a whole (27.5 and 23.0 respectively vs. 19.7)
- The age of North Dakota physicians shows slightly more early to mid-career physicians aged 35-44 than the Midwest or the United States, while the Midwest and United States have more physicians in the 65+ and older categories.
- North Dakota has more physicians per 10,000 than previous years; female physicians in rural areas increased between 2017 to 2019.
- The rate of hospital-based physicians has increased slightly since 2017, while office-based physicians has remained stable in North Dakota.
- The percent of International Medical Graduates in ND has continued to increase, while the Midwest and the United States had a larger increase in US Medical Graduates.



Chapter 5 – Primary Care Providers and Specialty Physician Workforce in North Dakota

- The rate of primary care providers for North Dakota, the Midwest, and the US declined from 2017 to 2019.
- The rate of general surgeons for North Dakota was higher than the Midwest and US in 2019.
- North Dakota continues to have more hospital-based primary care providers than the upper Midwest and United States.



Chapter 6 – Nursing Workforce in ND

- New: Trend comparisons for 2017, 2019, and 2021 included in the report
- North Dakota has seen an increase in all levels of nursing in the state from 2017 to 2021.
- In 2021 North Dakota saw a slight increase in APRNs practicing in family practice.

Chapter 7 – Behavioral Health and Non-Physician Healthcare Workforce in North Dakota

- New: Information on Athletic Training
- Comprehensive summaries of those provider types identified in the behavioral health tiered system in North Dakota.



Chapter 8 – Healthcare Facility Organization and Infrastructure in North Dakota

- New chapter combining the Healthcare Facility Workforce chapter with the Healthcare Organization and Infrastructure chapter
- Allows for a more streamlined and connected linkage between facilities and services.

Chapter 9 – Quality and Value of Healthcare

Content has been updated

Chapter 10 – Conclusion

Content has been updated



Chapter 11 – Healthcare Workforce Development

Content has been updated

Chapter 12 – Recommendations: Healthcare Planning for North Dakota

Content has been updated

Appendices

 New: Appendix of health facility locations to provide site-level detail not provided in chapter 8



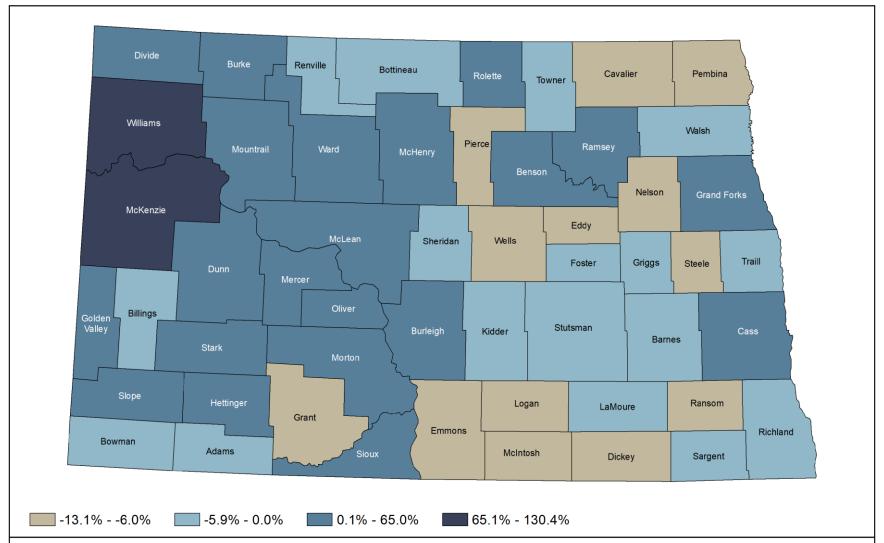


Figure 1.8. Percentage change in county population from 2010 to 2020.^{3,7}

Four counties have increased their population by greater than 30% from 2010 to 2020. These four counties are McKenzie, Mountrail, Stark, and Williams. From 2010 to 2020, 30 counties have lost population.



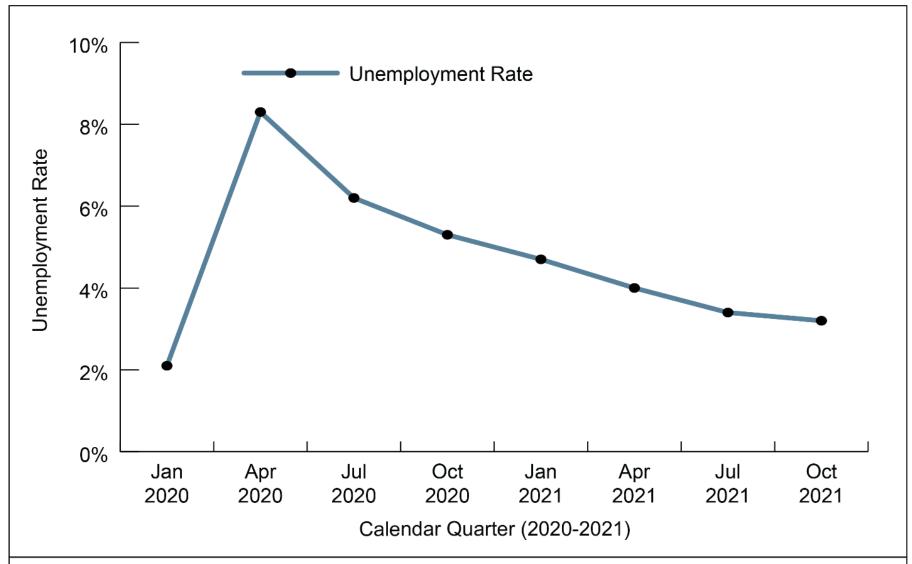


Figure 2.2. North Dakota unemployment rate by calendar quarter 2020-2021.⁴ North Dakota had an increase in the unemployment rate in the spring of 2020 followed by a steady decline.



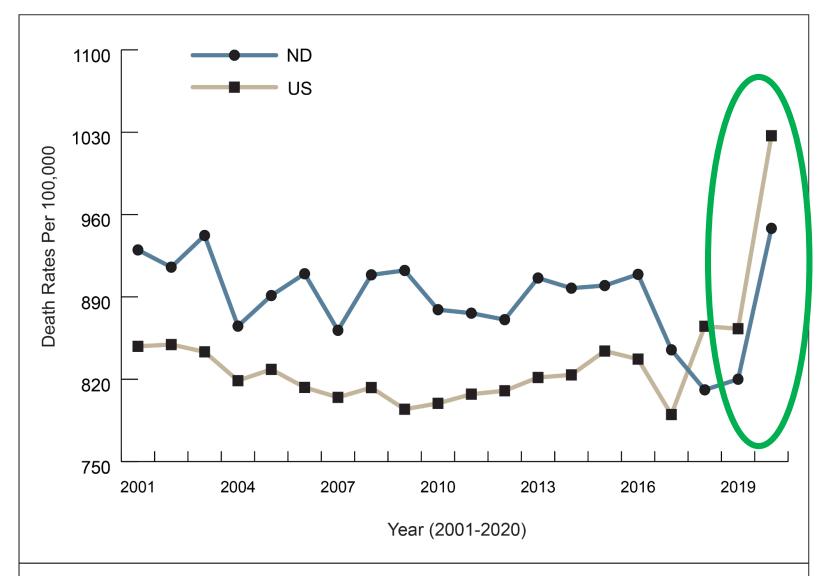
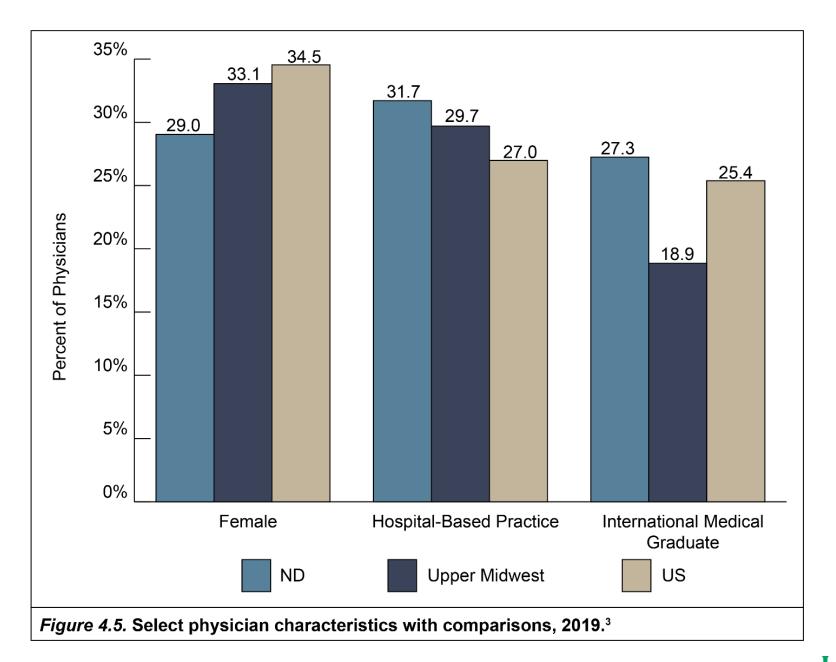
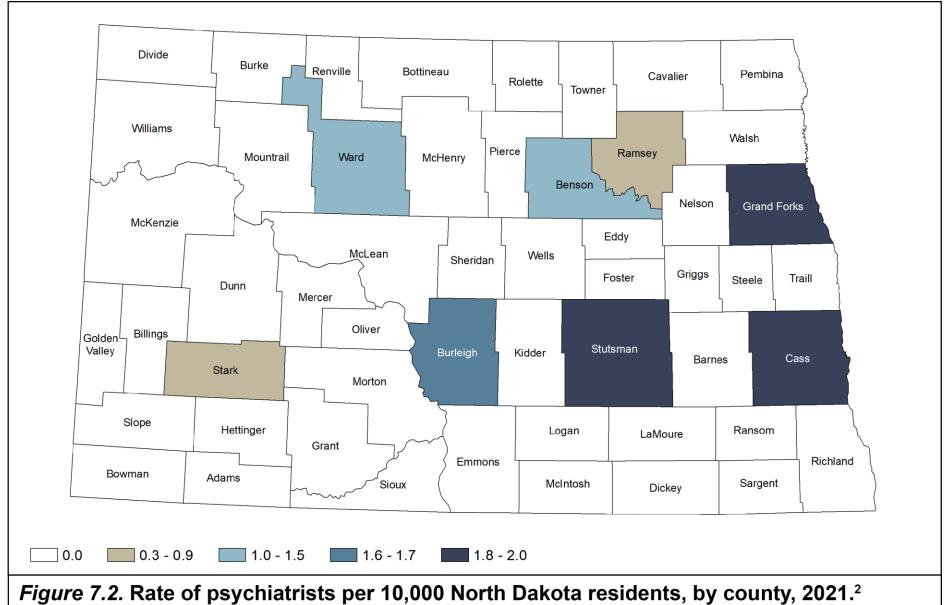


Figure 3.7. Changes in North Dakota mortality rates from 2001 to 2020 compared with the United States.^{37,46}











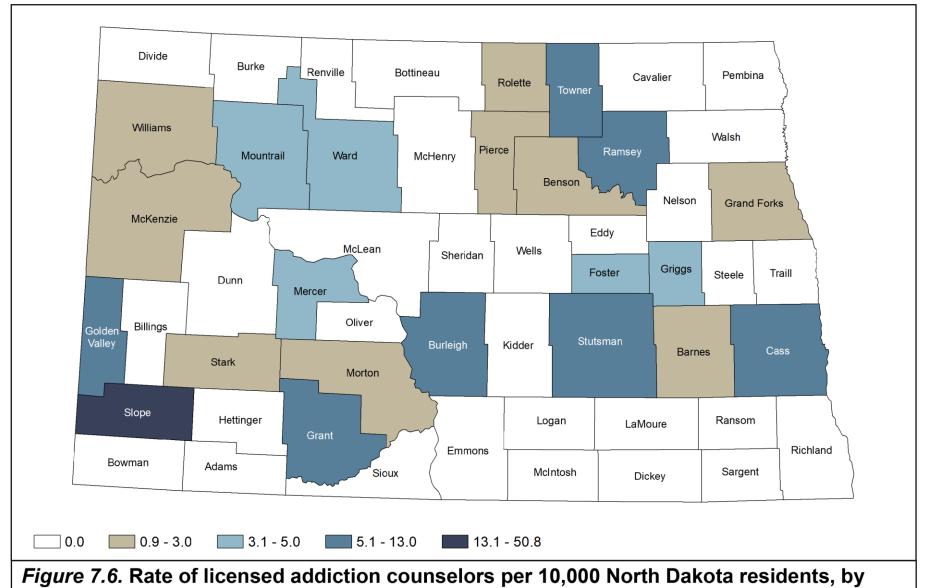


Figure 7.6. Rate of licensed addiction counselors per 10,000 North Dakota residents, by county, 2021.⁵



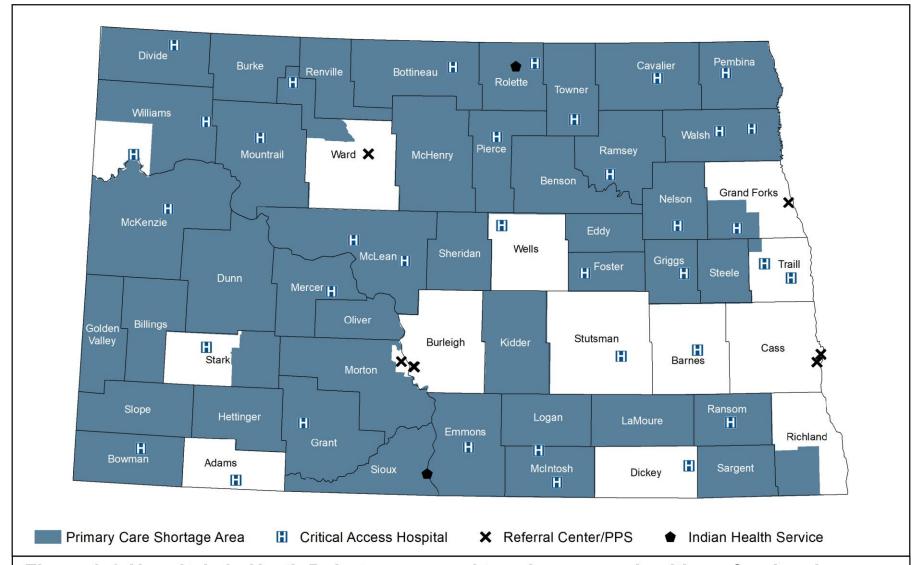


Figure 9.1. Hospitals in North Dakota compared to primary care health professional shortage areas.¹





Overview of Today's Presentation

Vision/Mission: The UND SMHS is the only institution within NDUS to have its **purpose** defined in ND Century Code (NDCC 15-52-01):

"The primary purpose of the University of North Dakota School of Medicine and Health Sciences is to educate physicians and other health professionals for subsequent service in North Dakota and to enhance the quality of life of its people. Other purposes include the discovery of knowledge that benefits the people of this state and enhances the quality of their lives."



Our Purpose as a School

- Educate
- Discover
- Serve





Opportunities

- UND SMHS research is growing substantially, with a doubling of grants and contracts (most federal, especially from NIH) over the past decade
 - In addition to the obvious health care benefits, such research also is an economic driver for North Dakota
- Public-private partnerships, especially with healthcare entities, is vital to the success of the UND SMHS
- Fundraising campaign supports student scholarships and faculty
 - Expanded scholarship support has reduced medical student debt and thus encouraged clinical practice in-state after graduation
 - Endowed chairs vitally important for faculty recruitment and retention



Challenges

- Because of the expansion of our research enterprise, availability of additional dry and wet lab space is beginning to become an issue
- Attracting and retaining talent
- Limited opportunities to expand class size further due to saturation of clinical sites with our trainees
- Relatively homogeneous patient population
- Student well-being issues specifically related to the pandemic

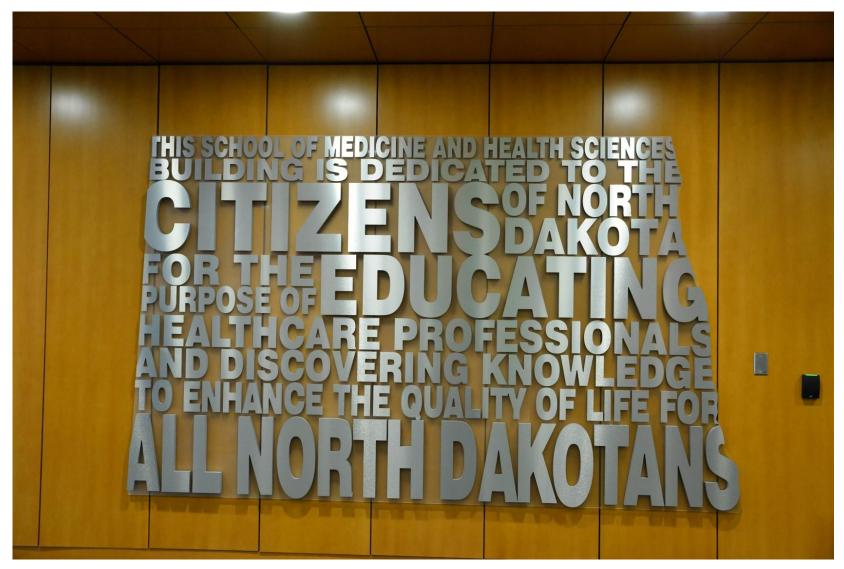


Objectives and Goals

- Objectives from the One UND Strategic Plan
 - Liberal Arts
 - Retention
 - Enrollment
 - Research
 - Inclusive campus
 - Serving military
 - Engaging alumni
 - Healthcare workforce development
- Updated SMHS strategic plan to be developed in 2023 following the release of the UND plan at the end of 2022



Action Plan





Focus and Act: Healthcare Workforce Development

Goal

 Our goal, as stated in NDCC, is "...to educate physicians and other health professionals for subsequent service in North Dakota and to enhance the quality of life of its people."

Actions

- Pathway programs focused on American Indian and rural students, with the goal of increased matriculation at UND SMHS
- Rural experience for all medical students
- Scholarships and other programs to reduce student debt
 - Major challenge recently with intense competition for American Indian students



Focus and Act: Research and Economic Diversification

Goal

- Engage in research activities consistent with high-performing medical/health sciences schools
 - Be in the top three of all community-based medical schools in terms of grants and contract awards

Actions

- Build on success
 - Engage in productive research that benefits the people of North Dakota
 - Aging
 - Epigenetics
 - Viral diseases ("host-pathogen interactions")
 - Neurodegenerative disease (especially Alzheimer's)



Focus and Act: Research and Economic Diversification

- Be the future
 - Virtual care
 - Telehealth partnering with College of Nursing and healthcare firms
 - Wearable/home devices partnering with Engineering and industry
 - Autonomous systems partnering with Aerospace, Grand Sky, and industry
 - Translational research ("bench to bedside")
 - Develop a network of Clinical Research Units (CRUs)



Focus and Act: Research and Economic Diversification

- Be the future
 - Study the impact of historical trauma on Indigenous health
 - Possible role of epigenetic factors
 - Expand the healthcare and research workforce to be more inclusive and diverse
 - Women
 - Indigenous people



Focus and Act: Inclusive Campus

Goals

- Foster a welcoming, safe, and inclusive campus environment
- Increase the diversity of our student, faculty and staff populations

Actions

- Indians into Medicine (INMED) and various pathway programs
- Only college in NDUS with Associate Dean for Diversity, Equity and Inclusion and Assistant Dean for Gender Equity
 - Recruitment of American Indian and rural students specific focus of our diversity initiative
- Expansion of mental and behavioral health programs
 - UND SMHS has two wellness advocates to service SMHS students at main and regional campuses



Focus and Act: Summary of Where UND SMHS Is Headed

- The "What" will remain unchanged
 - Teach
 - Discover
 - Serve
- The "How" will change dramatically
 - Teach More hybrid learning (but tough to teach team and procedural approaches virtually)
 - Discover Big focus on translational ("bench to bedside") research
 - Serve Bring medical care to the patient, rather than have the patient come to a medical care facility
- The "Who" will change too
 - More diverse and inclusive healthcare workforce



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