DATE: September 24, 2018
TO: Provost Sarah Mangelsdorf and Dean William Karpus
FROM: Steven M. Swanson, Dean and Professor
RE: Renaming of MS and PhD major in Social and Administrative Sciences

I am writing to request a change in the name of the MS and PhD major in the Social and Administrative Sciences (SAS) Graduate Program from “Social and Administrative Sciences” to “Health Services Research and Policy.” We ask that this be implemented in Fall 2019 for all new and current students.

The MS and PhD major in the SAS Graduate Program, currently titled “Social and Administrative Sciences”, has always focused on the preparation of pharmacy researchers and educators. Their discipline, however, has expanded beyond the study of pharmacy and pharmacists, to emphasize broader economic and policy analysis of the relationship of pharmacy services and processes to the health care system and the impact of pharmacy services and processes on health care organizations. The current name for the major does not reflect the evolution of the discipline’s focus. Further, the name change will align the degree offered from the graduate program with like programs around the country.

The SAS Graduate Program faculty and current graduate students have voted unanimously to change the name of the major. All graduate students have agreed to the “turnkey” approach in which all current students will accept the new name immediately.

The School of Pharmacy APC approved the name change on September 12, 2018. The external review committee of our graduate program review have endorsed the name change on September 21, 2018. We now seek approval from the Graduate Faculty Executive Committee and the University APC.

If there are any questions or concerns regarding this request, I would be happy to answer them.

Cc: Jocelyn Milner, Vice Provost, Academic Affairs
    Joshua Morrill, Graduate School
    Parmesh Ramanathan, Graduate School
    Michelle Chui, Director, SAS Graduate Program
    Charles Lauhon, Associate Dean of Graduate Programs
    Mel DeVilliers, Vice Dean of the School of Pharmacy
The School of Pharmacy Social and Administrative Sciences Division is seeking approval from the Graduate Faculty Executive Committee (GFEC) and the University Academic Planning Council (APC) to change the title of the MS and PhD major in “Social and Administrative Sciences (SAS)” to “Health Services Research and Policy (HSRP)”.

Background of Program

Graduate programs in social and administrative sciences in pharmacy began in the early 1950s. The University of Wisconsin-Madison was one of the first universities, along with Purdue University and the University of Pittsburgh, to offer M.S. and Ph.D. programs in Pharmacy Administration. Later, UW-Madison became the first university to offer graduate programs in Social Studies in Pharmacy (1963) and Continuing Education in Pharmacy (1970). A graduate program in History of Pharmacy started in 1948.

The characteristics of these individual programs had similarities. The total credits for degrees were quite consistent and they required a thesis or research report (History) for awarding the M.S. degree (with a few exceptions). Due to limited numbers of faculty members, few graduate courses were taught in-house and the programs relied on courses within main discipline units available on campus, with emphasis on application of main discipline concepts and content via individual instruction by School of Pharmacy faculty members. The emphasis of each program was doctoral level degrees, but with the M.S. degree as an initial degree from which the Ph.D. degree would build. Each program afforded individual students considerable flexibility and individualization in the area of specialization for their degree. Enrollments in the individual degree programs were low and in some years no degrees were awarded.

In 1995, the University Academic Planning Council considered the issue of low enrollment majors and recommended that reviews of such programs be incorporated into the ongoing process of program review within schools/colleges on campus. In a similar vein, the Graduate School pursued the review and consolidation of low enrollment graduate programs. Consequently, in late 1997, the four former individual programs (Pharmacy Administration, History of Pharmacy, Social Studies in Pharmacy, and Continuing Education in Pharmacy) were integrated into a single graduate program. Because the two largest individual programs at that time were Social Studies in Pharmacy and Pharmacy Administration, the new name of Social and Administrative Sciences (SAS) was formed to combine both distinct areas. The proposal to integrate the majors was approved in March 1998 and the current major in the SAS graduate program was initiated. The consolidation of the four individual programs included redesign of some existing courses, the creation of additional, new core program courses, and unifying some redundant courses, such as seminars. The revised, combined program allowed students to pursue specialized coursework yet maintained uniform admission requirements, M.S. and Ph.D. course and credit requirements, and procedures for monitoring student progress and program quality. The basic structure of the combined program has continued since 1998, with very minor adjustments, specifically, slightly increased core seminar requirements.

From a program content focus point of view, since the SAS graduate program resulted from combining four separate programs with intent to allow specialization in content emphasis consistent with the foci of individual programs, the overall program “focus” has not changed. The content foci generally have revolved around faculty expertise, with traditional Pharmacy Administration (management, marketing, finance, economics, policy and regulation), Social/Behavioral Pharmacy (patient and pharmacist roles, behavior and communication),
Continuing Education (adult learning and program assessment), and History of Pharmacy. Although the overall program focus has not changed, there have not been any active students or supervision of students with specialty emphasis in history or continuing education since the SAS program started in 1998. A relevant factor in the lack of students with continuing education specialization is that the overall School of Pharmacy organization also changed in 1996 to include three divisions, Pharmaceutical Sciences, Pharmacy Practice, and SAS, with Extension Services in Pharmacy as a separate division; with this change, faculty who could supervise graduate students specializing in continuing education no longer had faculty appointments in the School of Pharmacy and thus could not serve officially as graduate student advisors. Historically, the numbers of students interested in Continuing Education and History of Pharmacy specialization have been low; that lack of interest continues to yield a state of dormancy in those foci areas of the SAS graduate program.

The SAS graduate program has good national recognition and reputation. The program reputation is based on its legacy and the historical strength and quality of the program and the former individual graduate programs, the breadth, depth, and rigor of student academic preparation, and the quality of students admitted, their research, and accomplishments. In addition, SAS graduate faculty members have proven track records of research, teaching, service, and scholarship that, along with considerable length of tenure with the program, contribute to the program’s reputation.

Rationale for the Title Change for the MS and PhD Majors
The PhD major, currently titled Social and Administrative Sciences, has always had a primary focus on the preparation of researchers and teachers, who will move into academic positions in schools of pharmacy around the country. Indeed, the majority of our graduates have historically accepted assistant professor positions in Schools of Pharmacy around the country.

However, our discipline has evolved in the last 20 years. The emphases of economic and policy evaluation, as well as pharmacist-patient communication still are present. But, the approach to addressing these issues is now broader and is in the context of the entire health care system and population. In the past, it was not atypical for pharmacy researchers to primarily collaborate with other pharmacy researchers in their own university or around the country. Research was disseminated principally to pharmacy journals, and to pharmacy conferences. Today, our research is much more interdisciplinary, with collaborations with medicine, population and public health, engineering, health communications, and economics and policy. The results of our research are now disseminated in a broad array of journals and conferences that encompass a variety of disciplines. This is reflected by the job placement of a few of our most recent graduates to non-pharmacy positions (Johns Hopkins Medicine – Armstrong Institute for Patient Safety and Quality, Dartmouth Institute for Health Policy and Clinical Practice, Mathematica Policy Research).

In response to this evolution, our peer institutions have changed their degree names to accurately reflect the focus and content of their PhD and MS degree programs. See table for a list of their degree names. Further, as our program has taken a wide scope in investigating economic and policy implications related to

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<th>Peer Institutions</th>
<th>Degree Program Name</th>
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<tr>
<td>University of Houston</td>
<td>Pharmaceutical Health Outcomes &amp; Policy</td>
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<tr>
<td>University of Iowa</td>
<td>Health Services Research</td>
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<tr>
<td>University of Michigan</td>
<td>Health Services Research</td>
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<tr>
<td>University of North Carolina</td>
<td>Pharmaceutical Outcomes and Policy</td>
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<tr>
<td>University of Texas, Austin</td>
<td>Health Outcomes and Pharmacy Practice</td>
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<td>Purdue University</td>
<td>Health Services, Outcomes, and Policy</td>
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pharmacy and medication use within the context of the entire health care system, we have found that there are a number of graduate programs in Schools of Medicine and Public Health around the country that offer programs that sound similar to ours. In order to increase and improve the pool of qualified candidates to our program, we find that our name, which is not recognizable to those seeking the type of degree that we offer, puts us at a disadvantage. It may also put our graduates at a disadvantage as they seek positions outside of the pharmacy discipline.

Our program faculty voted unanimously to change our degree name to HSRP in Spring 2018. Our current graduate students also voted unanimously to change the name, and to accept the name immediately. In fact, our graduate students were disappointed that the name change could not be done instantly after they voted, but had to wait until it was approved through the proper university channels.

The SAS graduate program is currently conducting our 10-year program review. The background and rationale for the degree name change is described in the self-study document and the site visit with the external review committee took place on September 21, 2018. The name change was discussed with the external review committee and there was broad agreement that the name change made sense and was consistent with the focus and content of our program.

When the change in title of the majors are approved, we request that the change take place in the Fall 2019, following a turnkey approach in which current students will accept the name change prior to graduation. Prospective students applying to our graduate program this winter (2018) will be informed of the name change.

In summary, the change in title of our current Social and Administrative Sciences (SAS) major to Health Services Research and Policy (HSRP) will be much more consistent with the mission and content of our program. In addition, this change is important to recruit qualified applicants and to improve the hireability of our graduates.

Respectfully submitted,

Michelle A. Chui, PharmD, PhD
Associate Professor and Vice-Chair, Social & Administrative Sciences Division
Director, SAS Graduate Program
Director, Sonderegger Research Center