Satcher Health Leadership Institute

SHLI | MOREHOUSE SCHOOL OF MEDICINE

Satcher Health Leadership Institute Strategic Plan

2020 – 2023

A Message from the Director

After a period of gathering, planning, and preparation, we are primed to move towards the next phase in the storied history of the Satcher Health Leadership Institute (SHLI). This strategic plan will serve as the road map that will guide SHLI for the next three (3) years as we continue to diligently work towards the achievement of health equity for all.

The intended aim of this strategic planning process was a simple one: to chart a path forward for the next leg of SHLI's journey toward *leading the creation and advancement of health equity*. In alignment with Morehouse School of Medicine's vision, we have provided a framework for how we will approach three (3) priority areas we have identified as foci for our research and programming: mental/behavioral health, health system transformation, and political determinants of health. Collectively, these three critical areas will allow SHLI to cement its imprint in health policy and the larger movement to advance health equity.

Execution of a vision requires the collective effort of those who will make the difference: the community partner, the academic scholar, the government leader, the corporate sponsor, the individual next door. SHLI prioritizes approaches to contribute to the achievement of health equity by enhancing leadership among diverse learners; developing replicable standards and strategies in health leadership; and fostering a diverse and inclusive health leadership network. We cannot do this alone. The work that we do is predicated upon the input of our dynamic team, the leaders we encounter, the partners we engage, and the support of our institution.

Rooted in the legacy of our founder Dr. David Satcher – physician, researcher, thought leader, and pioneer in public health – and driven by a new vision and new mission, SHLI will be the leading transformative force for health equity in policy, leadership development, and research. While this is a profound declaration, it can be done. There are no limits to what we can achieve. I am excited for the future and am proud to lead SHLI in this endeavor!

In the Spirit of Equity,

Daniel E. Dawes, JD
Director

Overview

<u>The Strategic Planning Process</u>
In line with the announcement of the new Director, Daniel E. Dawes, JD, the Satcher Health Leadership Institute (SHLI) executed a strategic planning process that involved conducting an environmental scan; conducting surveys and informant interviews with funders, community representatives, alumni, policy makers, and leaders; hosting a strategic planning retreat; and developing this report.

In order to most efficiently accomplish this goal, SHLI engaged Dr. Robin Hindsman Stacia of Sage Consulting Network, Inc. as a consultant for this process. After hearing directly from external stakeholders via a broadly disseminated survey and more personal interviews, as well as incorporating the thoughts, concerns, and recommendations from internal SHLI faculty and staff, this report was compiled to serve as the guiding document for the next phase of SHLI's work.

<u>Environmental Scan</u>
In order to guide the direction of SHLI into the next chapter and iteration of its work, an environmental scan of SHLI stakeholders, health policy leaders, advocates, academics, and officials alike was performed by virtue of surveys and personal interviews to ask a series of pointed and revealing questions. As with all things that Morehouse School of Medicine engages in in our continual journey towards leading the creation and advancement of health equity, hearing directly from the voices of those we impact was absolutely vital before taking critical next steps. To accomplish this, a survey was submitted to 100+ individuals and personal interviews were performed with a select number of influential and well-informed stakeholders. Below are the questions that were posed to both groups of respondents:

Survey Questions
1. When did you first become involved in with the Satcher Health Leadership Institute (SHLI)?
2. Please indicate the type of relationship that you have shared with SHLI?
3. Based on your relationship with SHLI, how would you rate your familiarity with its mission and work?
4. How would you rate the SHLI's effectiveness in Health Systems Transformation?
5. How would you rate the SHLI's effectiveness in Informing Health Policy?
6. How would you rate the SHLI's effectiveness in Addressing Health Disparities?
7. How would you rate the SHLI's effectiveness in Advancing Health Equity?
8. How would you rate the SHLI's effectiveness in Engaging with Human Services?
9. How would you rate the SHLI's effectiveness in addressing Social Determinants of Health?
10. How would you rate the SHLI's effectiveness in Population Health?
11. How would you rate the SHLI's effectiveness in Mental/Behavioral Health?
12. How would you rate the SHLI's effectiveness in Sexual Health?
13. How would you rate the SHLI's effectiveness in Global Health Equity?
14. How would you rate the SHLI's effectiveness in Community Engagement?
15. How would you rate the SHLI's effectiveness in Leadership Development/Training?
16. What do you think sets SHLI apart from other leadership initiatives?
17. What do you consider to be three of SHLI's strengths?
18. What do you consider as three of SHLI's areas of improvement?
19. What are the most frequent ways you hear about us now?
20. As SHLI moves forward with its strategic planning efforts, what should SHLI be known for?
21. In what ways can you contribute to the training and education of the next generation of health leaders/learners?

Selected Survey Results

1. Roughly ⅓ became involved 3-5 years ago and roughly ⅓ became involved 10+ years ago
2. The largest share of respondents (35%) identified as "Advisory or Oversight Board / Committee Member"
3. Roughly ⅓ of respondents were moderately familiar with SHLI's work and roughly another ½ were extremely familiar with SHLI's work
4. The greatest share of respondents (44%) indicated that they had no opinion or could not determine SHLI's effectiveness
5. 30% of respondents felt that SHLI is "somewhat effective" in informing health policy while 26% felt that SHLI was "very effective." Still, 28% had no opinion or could not determine the effectiveness
6. Just over 50% of respondents felt that SHLI is "very effective" in addressing health disparities
7. Roughly 49% of respondents felt that SHLI is "very effective" in advancing health equity
8. Close to 50% of respondents (48%) had no opinion or could not determine SHLI's effectiveness in engaging with human services
9. Roughly 44% of respondents felt that SHLI is "very effective" in addressing the social determinants of health
10. Roughly a quarter of respondents (24%) rated SHLI as being "somewhat effective" in population health with another quarter (29%) rating such as "very effective." However, 38% had no opinion or could not determine the effectiveness
11. ⅓ of respondents (33.33%) felt that SHLI is "somewhat effective" in mental and/or behavior health, while 29% felt that SHLI was "very effective" in this space
12. The greatest share of respondents (45%) indicated that they had no opinion or could not determine SHLI's effectiveness in Sexual Health
13. The greatest share of respondents (54%) indicated that they had no opinion or could not determine SHLI's effectiveness in Global Health
14. Roughly ⅓ of respondents (33%) rated SHLI as "somewhat effective" in community engagement, while another ⅓ (33%) rated SHLI as "very effective."
15. The greatest share of respondents (44%) rated SHLI effectiveness in leadership development and training as "very effective"
16. Some of the responses for what respondents believe sets SHLI apart from other leadership initiatives:
    a. Dr. David Satcher
    b. Health equity focused mission
    c. Engagement and training of underserved populations
17. Some of the responses for what respondents considered to be SHLI's strengths
    a. Leadership
    b. Commitment to diversity
    c. Community engagement
18. Some of the responses for what respondents considered to be areas that SHLI could improve upon/in
    a. Visibility/Branding
    b. Impact on state & federal policy
    c. Funding
19. The top 3 ways respondents hear about SHLI currently
    a. Personal Contact
    b. Collaborative Efforts
    c. Professional Meetings/Conferences/Symposia
20. Some of the responses from respondents as to what they feel SHLI should be known for moving forward
    a. Alumni who shape the field of health equity
    b. Leadership training
    c. Policy influence and transformation

21. Some of the responses from respondents as to the ways in which they can contribute to educating the next generation of health learners and leaders
    a. Mentoring and fiscal support
    b. Writing, lecturing, consulting
    c. Capacity building and research

Interview Questions
1. Describe in your own words what you think the SHLI does.
2. Based on your experiences with the SHLI, what would you say the Institute should be most proud of?
    a. What do you feel are SHLI's strengths?
    b. What is SHLI most known for?
    c. What do you think sets SHLI apart from other health leadership initiatives?
3. What are the areas in which SHLI should improve?
    a. What do you feel are SHLI's areas of weakness?
    b. What are some areas that you feel could be strengthened with some modifications and what are those modifications?
    c. What do you believe is keeping us from reaching our full potential?
4. As SHLI moves forward with its strategic planning efforts, what areas, initiatives, or activities would you like to see the Institute focus on in the future?
    a. What should SHLI be known for?
    b. What is SHLI not doing that you would like to see us do in the future?
5. What are some of the most dramatic impacts that the external environment has had on SHLI?
    a. How effectively is SHLI responding to current external influences?
6. Looking into the next 5-10 years, what do you feel the biggest impacts of the external environment will be on SHLI?
    a. How should SHLI move forward in addressing them?
    b. What are some trends that will significantly impact SHLI in a positive or negative manner?
    c. What are some potential opportunities that SHLI must take advantage of?

Interview Response Themes
Perspectives of SHLI
● SHLI is an "untapped jewel" and underappreciated at Morehouse School of Medicine
● SHLI is known for its community engagement work
● SHLI's location, based in a historically black institution with a focus on health, is impactful for its work
● SHLI's programs strengthen health in diverse communities
● SHLI's training programs focus on application work and skill-building, which is transferable outside of academia and across other areas of work and expertise

What SHLI Should be Most Proud of
● Building diverse types of health leaders through various initiatives
● Engaging policy and decision-makers
● Uniquely filling training gaps in ways other programs are not
● Training people of color in leadership
● Convening various multidisciplinary leaders

Opportunities for Improvement
● Build a business model and structure that does not collapse based on financial support
● Dissemination of major outcomes

- Work to create internal stability and address SHLI's mission, vision, and values
- Improve and implement intentional branding, marketing, and web presence

Considerations for the Future
- Become nationally recognized as the training ground for where the next generation of diverse leaders are trained to advance health equity
- Take a disciplined and intentional approach to creating a portfolio that is mission-centered
- Lead the growing national conversation around the integration of behavioral health, clinical care, public health, and social determinants
- Maintain a sense of urgency as relates to ensuring a healthy nation for future generations

SWOT

A survey was distributed to several internal and external individuals. Respondents were asked a series of questions relative to SHLI's strengths, weaknesses, areas for opportunity, and future opportunities towards its development. Selected responses are indicated below, representing a synopsis of results.

Strengths	• Legacy of strong leadership • Professional reputation and track record of success • Commitment to training/developing future leaders
Weaknesses	• Improvement of marketing and advertising/branding/visibility • Lack of sustainability and infrastructure instability • Prioritization of efforts/areas of focus
Opportunities	• Development of a sustainable business model • Ongoing leveraging of internal and external partners • Translation of existing research findings into future endeavors
Threats	• Changes to the funding climate • Lack of capacity and resources • Fragmentation of efforts

Lessons Learned

One of the primary takeaways from this exercise of hearing directly from stakeholders is both concise and prescient: in order to remain relevant, SHLI has its work cut out for it, but a solid foundation already exists. As the health equity movement continues to advance and health policy simultaneously continues to maintain a leading role in national discourse, SHLI has to evolve to keep up with the times.

Repeatedly during this environmental scan, appropriate deference and admiration was paid to Dr. Satcher's enduring legacy not only at the forefront of the health equity movement, but more importantly as the founding director of SHLI. In light of his well-deserving and heard-earned retirement from leading the Institute, SHLI is now in a unique position to reshape its image and employ new tactics while still building on the goals, vision, and successes that have come before.

Based on what was gleaned from the environmental scan, coupled with the Director's vision, SHLI's next chapter will be marked by a period of necessary and fruitful change. This includes, but is not limited to, a concerted and strategic focus on rebuilding relationships with institutional donors, an intentional fostering of a spirit of team collaboration, and a reprioritizing of policy approaches.
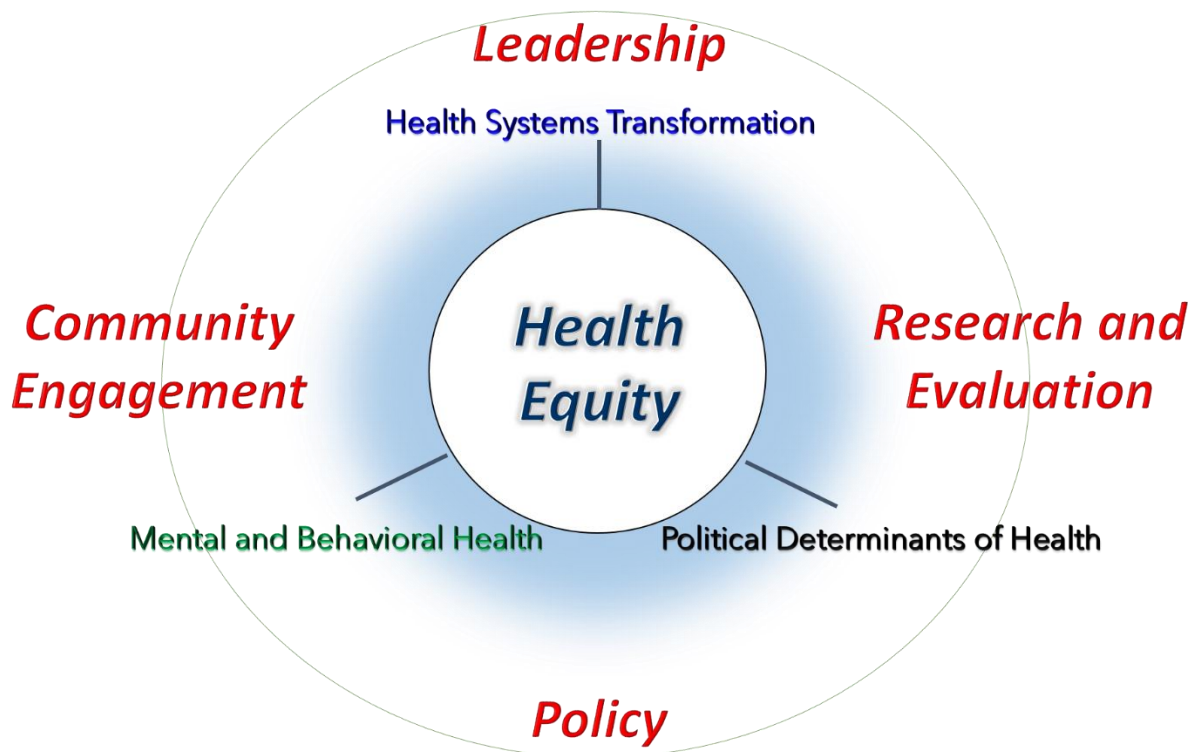
Vision
"To be the leading transformational force for health equity"

Mission
"Creating systemic change at the intersection of policy and equity"

Focus Model

At the core of all SHLI activities and efforts is advancing health equity. While health equity is the unwavering focal point of SHLI, there are three (3) main priorities that serve as guiding posts. These priorities include **health system transformation**, **mental and behavioral health**, and the **political determinants of health**. The vision imperatives that operationalize these priorities are policy, community engagement, research and evaluation, and leadership.

Priorities

Mental and Behavioral Health
There is no health without mental health. Since SHLI's founding, mental and behavioral health issues have been prioritized through research and programmatic efforts aimed at reducing, and ultimately eliminating, mental health disparities within vulnerable populations.   SHLI will continue its pursuits is advancing mental and behavioral health equity, improving efficiency within local, state and national health care systems, and supporting the agency of underserved communities in order to achieve optimal health and wellness.

Political Determinants of Health

As more and more individuals and institutions have begun to recognize the structural and institutional barriers to health equity, and subsequently have begun grappling with such, the opportunity to introduce a new framework that disrupts that status quo and get to the true drivers of the disparities has presented itself. The political determinants of health create the social drivers - including poor environmental conditions, inadequate transportation, unsafe neighborhoods, and lack of healthy food options - that affect all other dynamics of health. By understanding these determinants, their origins, and their impact on the equitable distribution of opportunities and resources, we can be better equipped to develop and implement actionable solutions to close the health gap. SHLI will continue to be at the forefront of research of the political determinants of health dissemination.

Health System Transformation

Reduced life expectancy, worsening health outcomes, health inequity, and declining health care options are all realities for most Americans because of the health system currently in play. SHLI has always been a strong supporter of and breeding ground for health learners and leaders that are focused on transforming the health system in measurable and equitable ways. Understanding the need to continue to advance research and thought leadership in areas that can be operationalized to lead to lasting change will remain a priority of SHLI for many years to come.

Vision Imperatives

Vision Imperative 1: Leadership Development

SHLI is dedicated to enhancing diversity in health leadership at the local, regional, national, and international levels. Through its signature leadership development programs, SHLI prioritizes approaches that contribute to the elimination of health disparities and ultimately, the achievement of health equity, by encouraging leadership among diverse leaders and scholars across multiple sectors and disciplines.

Goal
To develop and bolster a diverse group of emerging and current health equity leaders and scholars.

Strategies
1. Execute interactive and experiential learning opportunities that target diverse health equity leaders and scholars.
2. Target and recruit leaders and scholars across multiple sectors and disciplines to participate in specialized training opportunities, while ensuring alignment with existing SHLI priority areas.
3. Strategically expand existing training and programming to reach broader audiences and develop additional curricula for enhanced learning experiences.
4. Lead health policy and health leadership efforts within the "School of Public Health" at MSM.
5. Build and sustain an internal cadre of leaders with expertise in SHLI's primary focus areas: Political Determinants of Health, Mental/Behavioral Health, and Health System Transformation.

Vision Imperative 2: Research & Evaluation

Led by MSM's principle of T^X, and appreciating the role that data plays in both learning as well as moving the health equity needle, SHLI has established expertise in multidisciplinary research and in developing innovative community-based programming. With T^X representing the exponential effect of implementation science in communities, SHLI's efforts in health disparities research, health policy research, and health science and system research (T_3), contribute to the institutional vision imperative of *Translating Discovery into Health Equity*.

Goal

To innovate and advance comprehensive health equity-focused policy research, resulting in evidence-based discoveries and solutions that impact individuals, systems, and population health.

Strategies
1. Collaborate with multi-sectoral and governmental entities, both internal and external to MSM, to produce high-quality, novel, and innovative research proposals and opportunities.
2. Develop and sustain a centralized research database within SHLI to support research implementation efforts.
3. Pursue diverse sources of funding and collaborative opportunities to sustain and expand SHLI research and programming.
4. Serve as the health policy subject matter experts within the "School of Public Health" at MSM.
5. Disseminate diverse scholarly products promoting outcomes resulting from SHLI research and programming.

Vision Imperative 3: Policy Analysis & Development

Achieving health equity requires a comprehensive, health-equity-in-all-policies approach that extends across sectors and disciplines. SHLI is uniquely positioned to employ multidisciplinary faculty and staff and foster collaborative efforts in order to analyze, inform, develop, advance, and implement health policies.

Goal

To promote policies, processes, and practices that eliminate health inequities and achieve health equity.

Strategies
1. Promote SHLI as the authority on health policy at MSM and serve as the primary health policy expert within the future "School of Public Health."
2. Analyze current policy trends and increase public awareness of existing and future health policies.
3. Pursue novel approaches towards informing health policy by examining the Political Determinants of Health.
4. Convene local, state, regional, and national stakeholders to translate health equity-focused policy into action.

Vision Imperative 4: Strategic Partnerships / Community Engagement

SHLI is acutely aware of the reality that the fight for health equity is not one that can be waged alone. Collaboration with key strategic partners is necessary to not only raise the national profile of SHLI, but to also advance the work performed by SHLI. Further, and arguably most crucial to informing the direction of SHLI is interfacing with and hearing directly from the selected communities we aim to transform.

Goal

To strengthen, streamline, and leverage key partnerships that will both inform and advance SHLI's vision and mission.

Strategies

1. *HELEN* - The Health Equity Leadership and Exchange Network (HELEN) is a national network designed to bolster leadership and the exchange of ideas and information among communities of color and other vulnerable populations relative to the advancement of health equity in laws, policies, and programs. With its network of over 2,000 thought leaders, advocates, and academics, SHLI is able to plug into HELEN and leverage this network to increase the global footprint while advancing the mission. SHLI will manage,

coordinate, and revamp HELEN while also infusing the lessons learned from the Transdisciplinary Collaborative Center in order to improve upon that model of collaboration.

2. *Community Health Leadership Program* - The Community Health Leadership Program is a training program for established and emerging community health leaders, community advocates, leaders of non-profit organizations, faith-based leaders, and public health scholars. It is centered on developing and enhancing the capacity of diverse leaders to assess and evaluate community needs, develop health programming, and influence health policies through advocacy and research. SHLI will continue to improve and expand upon the successes of the Community Health Leadership Program.

3. *Healthy Communities Initiative* - Funded by the Kresge Foundation, Community Voices launched the Healthy Communities Initiative (HCI). HCI is designed to close the gap between academic medicine or academic health centers and communities of greatest need by connecting to people who are most affected by disparities. It mobilizes and engages mayors, county officials, other elected officials and their teams by enhancing their health leadership skills, providing community health resources, and motivating leaders to influence policies and implement equity-focused health projects to eliminate health disparities. This program provides an opportunity for in-depth engagement in exploring panoply of topics that will give participants concrete tools to enable effective engagement of multidisciplinary sectors, and resources required to improve health and community well-being.

Imperative Metrics

SHLI Vision Imperative 1: Leadership Development		
GOAL	**STRATEGY**	**TARGET METRIC**
To develop and bolster a diverse group of emerging and current health equity leaders and scholars.	Appoint an Imperative Champion to monitor progress and effectiveness in leadership development.	1 Imperative Champion
	Create and execute interactive and experiential learning opportunities and programs focused on enhancing diversity in health leadership.	3 health equity-focused fellowship programs
	Target and recruit leaders and scholars across multiple sectors and disciplines to participate in specialized training opportunities.	40 participants
SHLI Vision Imperative 2: Research & Evaluation		
GOAL	**STRATEGY**	**TARGET METRIC**
To innovate and advance comprehensive health equity-focused policy research, resulting in evidence-based discoveries and solutions that impact individuals, systems, and population health.	Appoint an Imperative Champion to monitor progress and effectiveness in research development.	1 Imperative Champion
	Develop a centralized research infrastructure to support research implementation efforts.	1 Research Core

| | Develop high-quality, innovative research proposals. | 4 submitted proposals/year |
| | Disseminate diverse scholarly products with results from research and programming efforts. | 5 products/year |

SHLI Vision Imperative 3: Policy Analysis & Development		
GOAL	**STRATEGY**	**TARGET METRIC**
To promote policies, processes, and practices that eliminate health disparities and achieve health equity.	Appoint an Imperative Champion to monitor progress and effectiveness in policy development.	1 Imperative Champion
	Analyze current policy trends and increase public awareness of existing and future health policies.	Weekly messaging across multiple channels
	Convene local, state, regional, and national stakeholders to translate health equity-focused policy into action.	2 professional convenings

SHLI Vision Imperative 4: Strategic Partnerships/Community Engagement		
GOAL	**STRATEGY**	**TARGET METRIC**
To strengthen, streamline, and leverage key partnerships that will both inform and improve the efficacy of SHLI's efforts.	Appoint an Imperative Champion to monitor progress and effectiveness with strategic partnerships and community engagement.	1 Imperative Champion
	Utilize HELEN to advance SHLI's global footprint	Targeted expansion outside of the United States

Governance Model
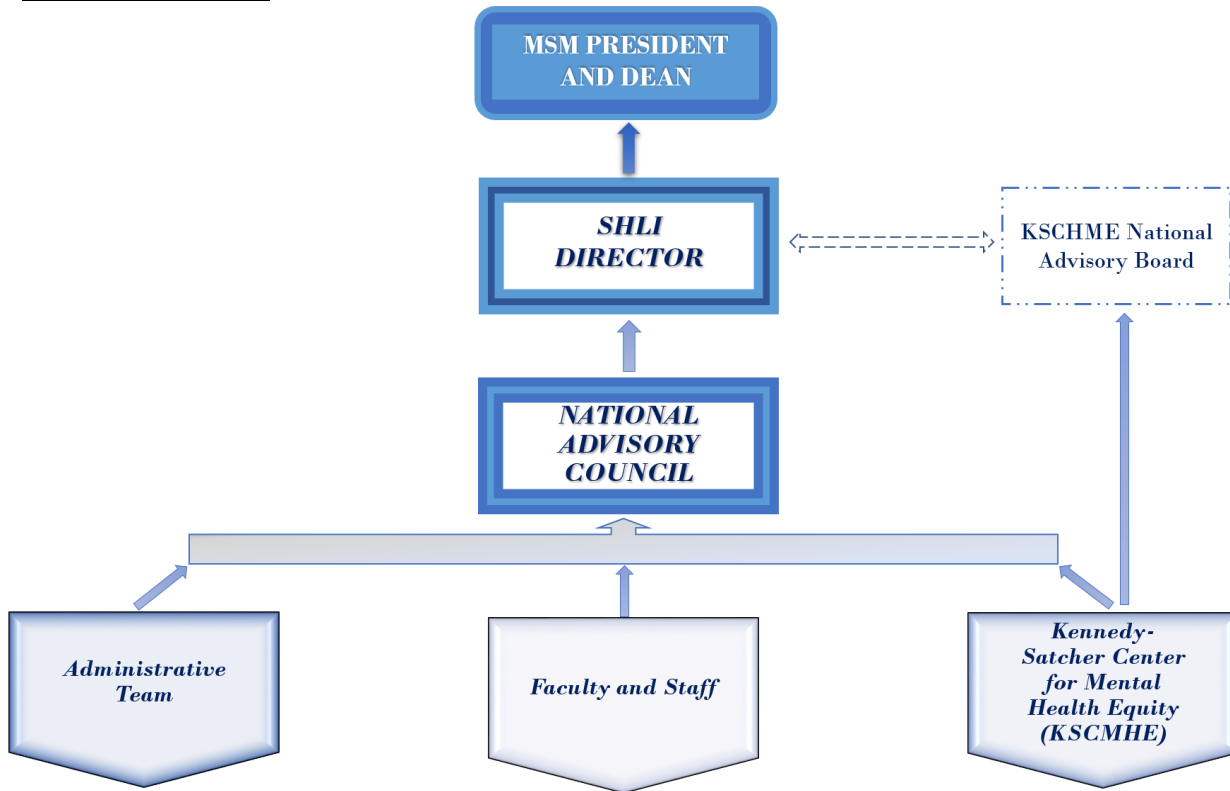
Centralized Database Approach

In an effort to improve the pipeline of funding opportunities that flow in and through SHLI, a more tailored approach to targeting external funding sources will be implemented. In order to accomplish this, a centralized database of currently active funding proposals will be devised and implemented. The overarching goal of this database will be to create a repository of potential funding opportunities, that will be updated weekly, and accessible by SHLI team members to utilize in their search for funding.

As the funding proposals are compiled, the opportunities will be listed by theme or relevant keyword, as related to the various centers, departments, and individual areas of expertise present in SHLI. This will in turn allow every SHLI team member to take ownership in the continued financial viability of the Institute by periodically monitoring the database for potential opportunities that relate specifically to their given areas of expertise or interest.

While this approach is one example of the reshaping that SHLI is currently posed to undergo, it more importantly highlights the most vital key to SHLI's continued and future success: teamwork. By having a central repository of active funding proposals, organized by areas of research that correlate to SHLI team member expertise, the entire Institute will now be able to employ a proactive, high-level view of the funding landscape and, as a team, identify areas of internal collaboration.

External Partnerships

SHLI will position itself to serve as the trusted partner among a diverse group of sectors. This will in turn allow SHLI to operate as the premier entity capable of bringing the converging and diverging sectors that impact our health, to the same table in order to foster open and honest dialogue.

In an effort to bolster and enrich the roster of well-suited external partners, SHLI has entered into preliminary discussions with one of the nation's leading healthcare professional associations as well as one of the nation's largest philanthropic foundations. For both of these, uniquely tailored partnerships are currently being devised and implemented that will allow for SHLI to utilize its existing skill set and resources, while simultaneously advancing innovative thought leadership in pursuit of health equity.

The partnership in conjunction with a professional association will tackle the severe deficiency in health equity leadership, particularly in regard to physician leaders, that currently plagues the healthcare system. This joint venture is intended to create a fellowship program that specifically motivates, equips, and increases the number of physician leaders that employ a health equity lens as they operate at the forefront and top levels of healthcare institutions, political spaces, and clinical spaces alike.

Comparatively, the current iteration of the partnership between SHLI and a large philanthropic foundation is focused squarely on diversifying the types of academics and professionals that enter into health policy, advocacy, and leadership roles. In this undertaking, SHLI is working hand-in-hand with the foundation to introduce a groundbreaking framework into the academy by supporting scholarly research, motivating the next generation of health learners, and challenging academic institutions to focus on health equity.

The driving force behind both of these partnerships is to explore opportunities for synergy between SHLI and renowned partners, in service of advancing health equity. More importantly, both of these endeavors will serve as the model moving forward for how SHLI can build on the complementary strengths of our partnerships to not only raise the national prominence of the Institute, but also to do so while bringing in new financial resources.

Internal Partnerships
MSM School of Public Health
Given SHLI's historical significance and unique accessibility to Morehouse School of Medicine writ large, SHLI is in a premier position to service as a value-added resource for the newly created School of Population Health. By virtue of strong integration between the Institute and the School of Population Health, MSM will continue on its track of serving as the preeminent voice in this space.

Next Steps

Implementation
Tracking the success and impact of SHLI moving forward will be absolutely vital to ensuring the successful implementation of the strategic plan. In order to continually monitor the effectiveness of SHLI's vision imperatives, internal champions will be assigned to the task of overseeing on-going monitoring of vision imperatives. These individuals presently serve in leadership capacities within the Institute and will be tasked with building out tailored approaches to measuring the effectiveness of their respective imperatives.
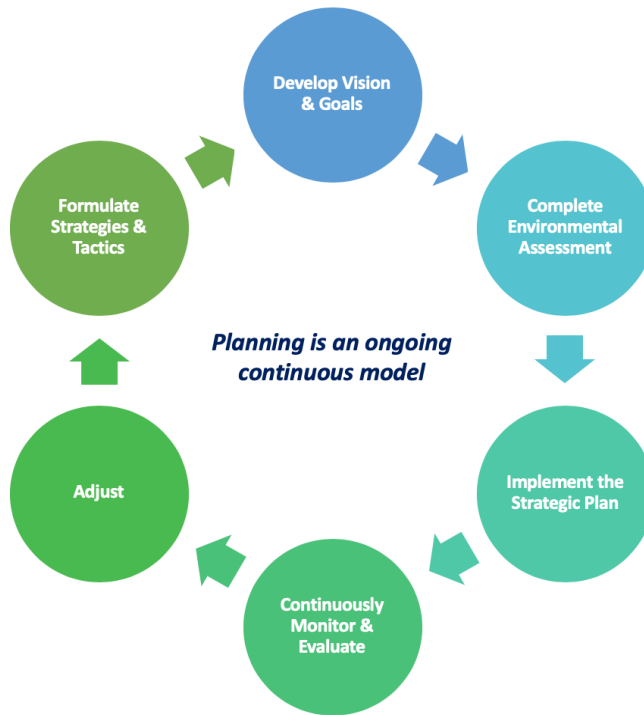
The scope and timeline for the implementation of details of this strategic plan is for a defined term of three (3) years.

Acknowledgements