Community Health Sciences

STRATEGIC PLANNING PROGRESS REPORT 2014-2017

Submitted Oct. 2017
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MESSAGE FROM THE DEPARTMENT HEAD

DEAR COMMUNITY HEALTH SCIENCES DEPARTMENT AND FRIENDS:

I am pleased to present the Department of Community Health Sciences 2014 – 2017 DEPARTMENT REPORT. The Report highlights some of the outstanding achievements of our students, faculty, and staff in fulfillment of our mandate to enhance the well-being of individuals and our communities through education, research and service. These achievements reflect an ambitious, committed and cohesive community that embraces excellence for its members and our Department.

The vision and priorities developed during our retreats in November 2015 and 2016, and collectively articulated in OUR STUDENTS, OUR STRENGTHS strategic plan, helped guide and focus our efforts. This document marked the beginning of an examination and transformation of our educational mandate. It also included a renewed commitment to meaningful engagement with the communities that we serve, within and outside of our Department.

Some of the activities that contributed to our Department’s success include:

- Recruitment of 9 faculty members;
- Recruitment of a Director of Operations and Strategic Initiatives who supports operational, strategic and research activities of the Department;
- Recruitment of a Research Administrator who provides senior research support to faculty engaged in research activities (cost-recovery);
- Launch of the Engagement Committee, and a Wellness Committee;
- Annual Departmental Retreats; and
- Departmental Council meetings structured to ensure that information is shared in a timely manner.

These initiatives, and many others that we will continue to develop, would not be possible without the support of the communities we serve. I would like to thank our students, faculty and staff for their continued support and contributions to the Department of Community Health Sciences. Your commitment to excellence is what sets us apart.

Sincerely,

Brenda Hemmelgarn MD PhD
Professor and Head
INTRODUCTION

The Department of Community Health Sciences (CHS) engaged in a strategic planning process in 2015 that included on-going consultations among faculty in the Department, and two annual Departmental retreats with the purpose of obtaining perspectives and input from Department members. These processes resulted in the development of a Strategic Plan entitled OUR STUDENTS, OUR STRENGTHS which outlines a common vision and objectives around the theme of education, and summarizes meaningful discussions and feedback from faculty to inform the Cumming School of Medicine’s Precision Health Strategy.

The two retreats were as follows:
1. November 25, 2015
   OUR STUDENTS, OUR STRENGTHS
   66 Department members in attendance
   PRECISION PUBLIC HEALTH
   71 Department members in attendance

The Department strategic priorities were built upon three foundational pillars:
1. A Culture of Community
2. High Quality Training Programs
3. Precision Health

The Department is supported in achieving these initiatives by students, staff, and faculty. Directors who led initiatives to further these priorities include:

Dr. Fabiola Aparicio-Ting  Co-Director, Health and Society Program, BHSc
Dr. Jason Cabaj  Director, PHPM Residency Program
Dr. Jennifer Hatfield  Director, Health and Society Program, BHS
Dr. Anne Hughson  Director, CRDS Undergraduate Program
Dr. Katrina Milaney  Director, CRDS Graduate Program
Dr. Elizabeth Oddone-Paolucci  Director, Graduate Programs
Ms. Leda Stawnychko  Director, Operations and Strategic Initiatives

This report outlines the progress achieved towards these priorities. The strategic plan “OUR STUDENTS, OUR STRENGTHS” was formally launched early in 2016, and progress towards key initiatives commenced almost immediately.
MISSION

“The Department of Community Health Sciences is committed to enhancing the well-being of individuals and communities through education, research and service. We value the diversity of our Department, which is evident in the multidisciplinary nature of our faculty and student body. Our commitment to our community is reflected in responsive educational programs; collaborative, relevant research; and consulting and clinical services that make the expertise of the Department available to a wide constituency.”

ORGANIZATIONAL STRUCTURE

The organizational structure of the Department is outlined below in figure 1. Additional contributors that provide administrative support to the Department Head include Beth Cusitar and Charlene Fouqueray.

Figure 1: Organizational structure, Department of Community Health Sciences.

COMMITTEES

Advisory Committee

Tom Feasby
Bill Ghali
Tom Noseworthy
Elizabeth Oddone-Paolucci
Hude Quan
Leda Stawnychko

Engagement Committee

Jesse Hendrikse (Chair)
Juliet Guichon
Charlene Fouqueray
Jocelyn Lockyer
Heather McIntosh
Bria Mele
Melanie Rock
Leda Stawnychko
Billie Thurston

Wellness Committee

Meaghan Edwards
Rebecca Saah
Leda Stawnychko

Mentorship & Leadership Committee

Aliya Kassam (Chair)
Jamie Day
Diane Lorenzetti
Marie-Claude Proulx
Leda Stawnychko
DEPARTMENT AT A GLANCE

The Department includes 243 academic faculty, with 40 Primary, 71 Joint, 123 Adjunct and 9 Emeritus appointments (Figure 2). A list of faculty with primary appointments in the Department is included in Table 1. Primary appointments have increased from 34 in 2014 to 40 in 2017 (Figure 3). Currently, of the 40 primary appointments, there is a relatively equal distribution among the professorial ranks, with 4 Instructors.

Table 1: List of faculty, by rank, for Primary appointments in the Department of Community Health Sciences.

<table>
<thead>
<tr>
<th>Professor</th>
<th>Associate Professor</th>
<th>Assistant Professor</th>
<th>Instructor</th>
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<tbody>
<tr>
<td>Beran, Tanya</td>
<td>Clement, Fiona</td>
<td>Guichon, Juliet</td>
<td>Aparicio-Teng, Fabiola</td>
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<td>Bulloch, Andrew</td>
<td>Hatfield, Jennifer</td>
<td>Kassam, Aliya</td>
<td>Edwards, Meaghan</td>
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<td>Ellaway, Rachel</td>
<td>Hebert, Marilynne</td>
<td>Leslie, Myles</td>
<td>Hendrikse, Jesse</td>
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<td>Hick, Gordon</td>
<td>Hughson, E. Anne</td>
<td>Milaney, Katrina</td>
<td>Rankin, Joanna</td>
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<tr>
<td>Hemmelgarn, Brenda</td>
<td>Lashewicz, Bonnie</td>
<td>Olstad, Dana</td>
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<td>Henderson, Elizabeth</td>
<td>Marlett, Nancy</td>
<td>Page, Stacey A.</td>
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<td>Lockyer, Jocelyn</td>
<td>McCaughey, Deirdre</td>
<td>Ronksley, Paul</td>
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<td>Marshall, Deborah</td>
<td>McCormack, Gavin</td>
<td>Haines-Saah, Rebecca</td>
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<td>Noseworthy, Tom</td>
<td>McLaren, Lindsay</td>
<td>Sajobi, Tolulope</td>
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<td>Patten, Scott</td>
<td>Oddone P., Elizabeth</td>
<td>Spackman, Eldon</td>
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<td>Quan, Hude</td>
<td>Rock, Melanie</td>
<td>Williamson, Tyler</td>
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<td>Stahnisch, Frank</td>
<td>Russell, Margaret</td>
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<td>Wolbring, Gregor</td>
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Figure 2: Academic appointments in the Department of Community Health Sciences (effective July 2017).

Figure 3: Primary appointments in the Department of Community Health Sciences, by rank, 2014 to 2017.
RESEARCH CHAIRS

A number of Community Health Sciences faculty members hold Research Chairs in a variety of areas that reflect the diversity of interests in our Department:

Dr. Brenda Hemmelgarn
Roy and Vi Baay Chair in Kidney Research

Dr. Deborah Marshall
Canada Research Chair, Health Services and Systems Research, Arthur J. E. Child Chair of Rheumatology Outcomes Research

Dr. Lindsay McLaren
Applied Public Health Chair

Dr. Hude Quan
Chiu Family/AstraZeneca Chair in Health Promotion and Disease Prevention

Dr. Frank Stahnsich
AMF/Hannah Professorship in the History of Medicine and Health Care

OUR COLLABORATIONS

The 71 faculty members with joint-appointments in the Department of Community Health Sciences have primary appointments in various other Departments and Faculties (Figure 4).

Figure 4: Primary Departments in the Cumming School of Medicine, and other Faculties, for 71 faculty with cross appointments in the Department of Community Health Sciences (effective July 2017).
FACULTY RECRUITMENT

From 2014 to 2017, the Department recruited nine full time faculty members. During this time period there were six retirements. Ongoing recruitment includes two Assistant Professor positions in the areas of Healthcare Policy and Big Data Science, as part of the Cumming School of Medicine Precision Health Strategy.

PRIMARY FACULTY RECRUITED IN 2014 – 2017

Dr. Meaghan Edwards  
Instructor

Dr. Rachel Ellaway  
Professor

Dr. Jesse Hendrikse  
Instructor

Dr. Myles Leslie  
Assistant Professor

Dr. Deirdre McCaughey  
Associate Professor

Dr. Dana Olstad  
Assistant Professor

Dr. Joanna Rankin  
Instructor

Dr. Rebecca Saah  
Assistant Professor

Dr. Eldon Spackman  
Assistant Professor
STRATEGIC PRIORITIES

The Department strategic priorities were built upon three foundational pillars:

1. A Culture of Community
2. High Quality Training Programs
3. Precision Health

1. A CULTURE OF COMMUNITY

1.1 Department Engagement Committee
1.2 New Website

1.1 DEPARTMENT ENGAGEMENT COMMITTEE

Over eighty percent of the 51 faculty and staff who participated in a survey conducted in the fall of 2015 supported the current Department Mission Statement. The majority of the respondents were optimistic about the future of the Department and believed that it was effectively managed. General comments indicated that there was a need to create more opportunities for social interactions among faculty and students; as one respondent commented “we stay in our boxes way too much”.

The Department’s Engagement Committee was launched in response to the need for enhanced collaborations and engagement within the Department. The Terms of Reference were drafted in the summer of 2016, and invitations to participate as members were issued to faculty, staff, students, and key collaborators including the O’Brien Institute for Public Health (OIPH) and Global Health and International Partnerships (GHIP) of the Cumming School of Medicine (CSM).

The Engagement Committee is responsible for encouraging the development of a positive, supportive, and inclusive community environment for Department members. Specifically, the Committee aims to:

• Develop, foster, and sustain a sense of community for all Department members;
• Identify and implement appropriate strategies to create or enhance relationships within and outside the University community;
• Initiate subcommittees to facilitate the execution of specific strategies; and
• Propose an annual budget and work plan to the Department Head.

The Committee’s first mandate was to establish Terms of Reference and baseline metrics to measure ongoing progress, and to develop a Work Plan that would ensure the implementation of specific engagement strategies. During the first year, the Committee focused its efforts on strengthening collaborations and engagement within the Department including students, faculty, alumni, and staff, to create an environment that is collaborative, positive, supportive and inclusive.

The 2016-2017 Work Plan was implemented while committee members engaged in ongoing discussions to evaluate the success and appropriateness of specific activities. Appendix A includes a list of Key Initiatives. The Committee is currently evaluating results from its first year of operations, and creating new priorities for the 2017-2018 Work Plan.
### 1.2 WEBSITE COMMITTEE

The Department’s website ([ucalgary.ca/communityhealthsciences](http://ucalgary.ca/communityhealthsciences)) was redesigned in early 2015 to ensure it met the information needs of the communities we serve. The aim was to create a site that complemented the websites of the Graduate Science Education office ([ucalgary.ca/gse](http://ucalgary.ca/gse)) and the O’Brien Institute for Public Health ([obrieniph.ucalgary.ca](http://obrieniph.ucalgary.ca)).

The features of the website include videos highlighting various aspects of our training programs and researchers, the use of rotating banners, a faculty listing that includes biographies, a news/recognition front-page, and an employment opportunities page.

We are in the process of reviewing the website, with ongoing design updates and realignment of content.

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**Figure 5: 2016-2017 Engagement Committee Work Plan.**

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<td>Departmental Coffee Hour</td>
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<td>Council Meetings</td>
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<td>Invite a Colleague to Coffee</td>
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<td>2. In Collaboration with Others</td>
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<td>OiPH CHS Research Showcase</td>
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<td>CHSSE TIGF (Nov 4, May 19)</td>
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<td>CHSSE Games Night</td>
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<td>CHSSE Social Media Workshop</td>
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<td>CHSSE Linkedin Workshop</td>
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<td>CHSSE Food Bank Bake Sale</td>
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2. HIGH QUALITY TRAINING

2.1 MSc/PhD in Community Health Sciences

2.2 Public Health and Preventive Medicine (PHPM)

2.3 Community Rehabilitation and Disability Studies (CRDS)

2.4 BHSc Health and Society (HSOC)

2.1 MSc/PhD IN COMMUNITY HEALTH SCIENCES

The graduate programs in Community Health Sciences are organized around areas of shared teaching and research interests. Currently there are seven specializations with MSc and PhD degree offerings:

- Biostatistics
- Community Rehabilitation and Disability Studies
- Epidemiology (includes Clinical and Healthcare)
- Health Economics
- Health Services Research
- Medical Education
- Population/Public Health

Recruiting the next-generation of leading researchers is one of the top priorities of this Department. The Graduate Science Education (GSE) office is the first point of contact for prospective students who are interested in applying to one of the graduate programs we offer. We admit an average of 40 students each year into one of 7 specializations in our graduate program (Figure 6), with over 150 graduate students currently enrolled (Figure 7).

![Figure 6: Trainees admitted into the Department of Community Health Sciences graduate programs, 2014 to 2016.](image1)

![Figure 7: Total number of trainees in the Department of Community Health Sciences graduate programs, 2014 to 2016.](image2)
FACULTY MENTORSHIP

A workshop entitled “Introduction to Supervision” is now offered to all faculty seeking supervisory privileges in the Department. A new renewal process for supervisors, launched in 2016, also supports faculty mentorship by promoting timely feedback and the deployment of additional supports and resources when needed.

ADMISSIONS AND STUDENT FUNDING

To better meet the needs of potential international and domestic students, the Department piloted a flexible admissions intake process in the winter of 2017 for all specializations. We are also in the process of revising the overall application process, and developing new admission deadlines.

Our Department’s funding policy has also been revised. This new policy emphasizes the provision of financial support to PhD students commencing studies in the fall of 2017, and a guaranteed funding model for all doctoral students that will be launched in the fall of 2018.

A new communications strategy was developed to promote employment opportunities available to students, and we developed a new Teaching Assistant (TA) application process to foster openness, transparency, and fairness in hiring of TAs.

MARKETING, COMMUNICATIONS, AND STUDENT-FACULTY COLLABORATIONS

A new Graduate Science Education website featuring faculty profiles will further our new marketing and communications strategy. Brochures and postcards are also under development for all specializations. Various opportunities were created for students to interact with their peers and faculty, including:

- “Fireside Chat” April 2017;
- Fostering student engagement with main campus activities including the 3-minute thesis, programs facilitated by the Student Wellness Centre, and MyGradskills;
- Cosponsoring of student-led events including monthly workshops supported by faculty.

STUDENT SCHOLARSHIP APPLICATION

PEER-REVIEW/MENTORSHIP

In 2015, the Department launched an internal peer review/mentorship program for trainees applying for Alberta Innovates, and Canadian Institute for Health Research graduate scholarship awards (Figure 8). The main components of this program are the matching of students with faculty and peer mentors; workshops; and databanks of past successful applications accessible to students applying for these awards. The success of students from the Department of Community Health Sciences has increased over the past 3 years, with 8% of successful Alberta Innovates Graduate Studentships awarded to students in the Department in 2015, and 17% in 2017 (Figure 9).

A workshop entitled “Introduction to Supervision” is now offered to all faculty seeking supervisory privileges in the Department. A new renewal process for supervisors, launched in 2016, also supports faculty mentorship by promoting timely feedback and the deployment of additional supports and resources when needed.

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- “Fireside Chat” April 2017;
- Fostering student engagement with main campus activities including the 3-minute thesis, programs facilitated by the Student Wellness Centre, and MyGradskills;
- Cosponsoring of student-led events including monthly workshops supported by faculty.

Figure 8: Peer review program, Alberta Innovates Graduate Studentship program, number of Department participants, 2015-2017

Figure 9: Alberta Innovates Graduate Studentships, Department success rate, 2015-2017
2.2 PUBLIC HEALTH AND PREVENTIVE MEDICINE RESIDENCY PROGRAM

Public Health and Preventive Medicine (PHPM) is the medical specialty concerned with the health of populations. PHPM specialists assess population health and develop, implement, and evaluate health protection and health promotion strategies to prevent disease and injury. The goal of the Residency Program is to prepare graduates to be innovators and leaders in reorienting health systems, increasing health equity, creating healthy individuals and societies, and protecting the wellbeing of local, national, and global populations.

PHPM is a 5-year post-graduate training program, and the Canadian Medical Residency Matching Service (CaRMS) is the primary route of entry for both Canadian Medical School (CMG) and international medical (IMG) graduates. The number of trainees enrolled in the PHPM Residency program is outlined in Figure 10.

![Figure 10: Total number of trainees (PHPM), 2014-2016.](image)

FLEXIBLE ADMISSIONS

In the 2016-17 CaRMS match, a dual training position (leading to certification in PHPM and family medicine) was re-introduced at the University of Calgary, with integrated clinical and academic phases of training throughout the first 3 years of residency. During the 2017-18 CaRMS process, PHPM will reduce its intake to 2 (CMG) positions to achieve a balance between critical mass and program capacity/workforce planning, and enable the option of admitting residents through other routes of entry in future years.

CORE COMPETENCIES

PHPM is in cohort six of the Royal College of Physicians and Surgeons of Canada (RCPSC) staged transition to competency-based medical education (2019-2021). In advance of official RCPSC support, the University of Calgary and Queen’s University PHPM programs have developed and are piloting a provisional list of terminal Entrustable Professional Activities (EPAs). Work is underway to also develop draft EPAs for Transition to Discipline and Foundations stages of training. The PHPM program is currently undertaking a review of the objectives, activities, and resources for core field rotations and developing a refreshed Academic Half Day curriculum.

SURVEY OF GRADUATES

A survey of both recent PHPM graduates, and practice physicians on PHPM Academic Half Day curriculum was conducted in 2016. The PHPM National Specialty Committee is developing a survey of recent graduates on workforce planning and career development considerations.
2.3 COMMUNITY REHABILITATION AND DISABILITY STUDIES

Community Rehabilitation and Disability Studies (CRDS) is an interdisciplinary platform of academic inquiry. A five-year strategic plan (2011-2016) was developed in 2011 and many of the goals identified in this document have been met, including improved integration with other specialization streams in the Department, increased links with the O’Brien Institute for Public Health, shared courses and co-teaching, and collaborations with government and community to increase professional identity development in the disability sector.

In 2017, the program completed a curriculum mapping review, action plan, and executive reports for review by the Strategic Education Council and the Provost.

THE VISION

*Responsive, sophisticated and just understandings of people with diverse abilities.*

THE MISSION

*To generate research, education, policy and practice partnerships to improve well-being of people with diverse abilities.*

UNDERGRADUATE DEGREE OFFERED

- The Bachelor of Community Rehabilitation (BCR) program is delivered online and on campus, and is complemented by graduate degrees aimed at examining disability as a social, cultural, economic and political phenomenon Figures 11 outline the total number of students and annual admission rates for the years 2014 to 2016.

GRADUATE DEGREES OFFERED

- Thesis-based Masters in Community Health Sciences with a specialization in Community Rehabilitation and Disability Studies (MSc);
- PhD in Community Health Sciences with a specialization in Community Rehabilitation and Disability Studies.

![Figure 11: Student admissions and total number of students in the Bachelor of Community Rehabilitation (BCR) program 2014-2016](image)
STUDENT FUNDING AND NETWORKING

The Strategic Education Council awarded three scholarships valued at $2,000 each to the BCR program from funds raised at Giving Day 2017. Research assistant positions were also made available to students through the support of research grants, and opportunities for Teaching Assistant (TA) funding are currently being explored. Employment and volunteer opportunities are regularly advertised through the BCR pages on Facebook.

Many opportunities have been developed for BCR students to network and remain connected. They participate in a peer mentorship program offered by the Faculty of Arts, and take part in a number of leadership and networking roles during practicum projects in community placements. Students attend CRDS Undergraduate Student Association events including Orientation Week, Open House, and faculty meetings.

2.4 BHSC HEALTH AND SOCIETY

The Bachelor of Health Sciences (BHSc) is a research-intensive honours degree that provides an undergraduate experience designed to engage students in all aspects of health and health research. All BHSc students designate a program major when they apply: Bioinformatics, Biomedical Sciences, or Health and Society (HSOC).

Health & Society defines health as a holistic state of well-being that includes physical, mental and social dimensions. This perspective is rooted in an eco-systems approach that considers social, physical and environmental factors as important determinants of health. The goal of the Health & Society major is to foster students’ competencies to use social and medical sciences together to ask and answer crucial questions about complex modern issues in health and well-being. Figure 12 outlines the total number of students and annual admission rates for the years 2014 to 2016.
MARKETING AND COMMUNICATIONS STRATEGY

The Health & Society steering committee, made up of HSOC teaching faculty and directors, developed key recruitment messages that were circulated among HSOC students for feedback and revision. The final messages were shared with UofC recruiters in September 2015, prior to their recruitment campaign for the following academic year.

We continue to participate in key recruiting events, such as the UofC Open House and are working on ways to improve our social media presence both as the BHSc program and also as Health & Society distinctly.

MENTORSHIP OPPORTUNITIES FOR STUDENTS

In September of 2016, the Community Health Sciences Student Executive (CHSSE) held a lunch event to introduce undergraduate and graduate students to the various streams of study within the Community Health Sciences graduate program. The HSOC steering committee is working to identify other ways to promote this engagement.

The BHSc website now includes a web-page devoted to Graduate Teaching Assistantships available through the BHSc program. This website has facilitated extending these opportunities to a greater number of CHS graduate students. Links to this website were circulated to CHS graduate students through CHSSE.

3. PRECISION HEALTH

3.1 A Vision

3.2 The Opportunity

3.1 A VISION

The focus of our Departmental Retreat in November 2016 was “Precision Public Health”, to build upon and inform the Cumming School of Medicine Precision Health Strategy. Dean Meddings provided opening remarks, and defined precision health as “the ability to precisely define populations to prevent disease with public health methods”. He also briefly chronicled the recent evolution of the field of medicine, and charted a transition from what he called “intuitive medicine”, to a 30-year period of “evidence-based medicine”. We are now on the cusp of yet another transformative period, where scientific and technological advances allow us to more precisely define populations to prevent disease.

We recognize that aligning with the Cumming School of Medicine’s vision, Creating the Future of Health, involves a paradigm shift towards precision health. Precision health focuses on the targeted and detailed characterization of context-specific social determinants of health, so that targeted population interventions can be designed and delivered in ways that produce positive health impacts for specific populations. In this paradigm, the units of interest are the community specific patterns of social determinants of health that define populations.

The Cumming School of Medicine’s Precision Health Strategy will focus on developing the supports that will enable the healthcare system to enhance its ability to match patients with the most effective treatments in a timely and cost-effective manner. The School is also leading a provincial strategy in selected areas including microbiome, genomics, biobanking, imaging, clinical phenotype analysis, clinical trials infrastructure, precision public health, and bioinformatics and IT infrastructure.
3.2 THE OPPORTUNITY

The Department of Community Health Sciences is well positioned to contribute to the precision health strategy. The Department is the academic home of a robust cadre of faculty that specialize in areas of particular interest to the strategy, as follows:

1. Data Sciences
The large quantities of data available from genome sequencing, imaging, microbiomics and other molecular platforms make precision health a data intensive science. The Department is prepared to contribute a key skill set in the areas of machine learning, data mining, natural language processing, bioinformatics, database management, administrative data, big data methodology, and health informatics. This includes recruitment of faculty, as well as expansion of the graduate training program.

2. Population/Public Health
Precision health has important implications for patients and society. At the “Precision Public Health” retreat of 2016 faculty noted that population/public health stands at the intersection of health and medicine, and community and society. Collecting and interpreting data from individual patients and targeted populations will require quantitative and qualitative methodological expertise, which are also areas of significant strength in our Department.

3. Health Economics and Healthcare Policy
Precision health has important economic implications. Economic, ethical and social questions will arise related to implementing these specialized tests and treatments – topic areas that will be addressed by faculty with expertise in health economics and healthcare policy.

4. Medical Education
Precision health will require integrated approaches to education and this will require modifications to pedagogy, curricula and learner assessment. We will need interprofessional health teams, and strong collaborations between researchers and clinicians. A focus on patient centered care will be the new norm. The Department has major strengths in this area, and is committed to playing a key role in shaping the future of medical education through our experts in this field.

The Department of Community Health Sciences is well positioned to make a strong contribution towards the precision health strategy. Our faculty bring a unique appreciation of the interplay between patient data, social forces, and disease.
Key initiatives that were completed with the specific objective of providing opportunities for faculty, students and staff to engage around teaching and research interests included:

1. Annual UC President’s Stampede BBQ  
   July 6, 2016
2. Students, faculty and staff CHS BBQ  
   August 5, 2016
3. United Way BBQ  
   August 18, 2016
4. Students, faculty & staff CHSSE BBQ  
   September 7, 2016
5. OIPH/CHS Research Showcase  
   October 28, 2016
6. *Coffee Hour: Tips for Publishing*  
   October 24, 2016
7. Halloween Dress Up  
   October 31, 2016
8. Support Students TGIF and “Live Chef “  
   November 4, 2016
9. Behind the Scenes at Main Campus  
   November 17, 2016
10. Departmental Retreat  
    November 23, 2016
11. Students, faculty and staff CHSSE Potluck  
    December 2, 2016
12. *Coffee Hour: International Partnerships*  
    December 12, 2016
13. Departmental Seasonal Celebration  
    December 16, 2016
14. RenewFest: Surprise and Delight  
    February 21, 2017
15. Coffee Hour: Indigenous Strategy  
    February 22, 2017
16. OIPH/CHS Research Showcase  
    February 24, 2017
17. CHS Students + Faculty Games Lunch  
    April 7, 2017
18. *Coffee Hour: Rubrics of Abnormality*  
    April 18, 2017
19. *Coffee Hour: Mentorship/Leadership*  
    May 15, 2017
20. Support TGIF and “Live Chef“  
    May 19, 2017
21. Recognition Cards  
    Ongoing
22. Invite a Colleague to Coffee  
    Ongoing
APPENDIX B - SPECIAL PRESENTATIONS AT DEPARTMENT COUNCIL

Special presentations at Departmental council meetings included:

September 2015:  
*Understanding EnviroShred*  
Mr. Will Fiebelkorn  
Specialist Privacy and Records, Dean’s Office

February 2016:  
*Enhancing our Culture of Recognition*  
Mr. Jamieson Dunlop  
Recognition, Total Rewards, Human Resources

April 2016:  
*Enhancing a Culture of Respect*  
Mr. Marty Heeg  
Organizational Development, Human Resources

September 2016:  
*Understanding Copyright*  
Mrs. Rowana (Wake) Johnson  
Copyright Officer  
Copyright Management

November 2016:  
*Better teachers, better learners, better doctors*  
Dr. Rachel Ellaway  
Professor, Department of Community Health Sciences  
Co-Director, Office of Health and Medical Education

January 2017:  
*Creating a Community of Caring*  
Dr. Andrew Szeto  
Assistant Professor, Department of Psychology  
Director, Campus Mental Health Strategy, Office of the Provost

March 2017:  
*Understanding Financial Compliance and Eligibility: We Are Here to Help!*  
Ms. Marilou Stegmeier  
Compliance and Eligibility, Research Accounting

June 2017:  
*Connecting with the Taylor Institute for Teaching and Learning*  
Dr. Nancy Chick  
Academic Director, Taylor Institute