As the External Advisory Committee, we were charged by Dr. Pat Parmelee to provide an evaluation of the progress of the Center for Mental Health and Aging since our last review in March, 2010. As described at the end of this report, each of the External Advisory Committee members has expertise in directing university-based research Centers or Institutes. Our report is based on the Center’s 2013 Annual Report, presentations by the core and affiliate faculty, interactions with two of the Deans, and with the Executive Committee.

Overall Center Evaluation.

Strengths:

Dr. Parmelee has provided excellent leadership in maintaining the Center’s productivity and initiating new collaborations. The Center continues to receive support from the University which allows them to accomplish their commendable outcomes as detailed in their clear and positive annual report. The Center Leader, Dr. Pat Parmelee and the Core faculty, which has remained stable since our last visit four years ago, have been extremely successful in securing extramural grant funding from diverse sources. The addition of a geriatrician to their Core faculty provides an important connection to medicine, primary care and geriatrics. Their productivity in terms of publications and presentations is impressive. Their sustained and persistent effort has placed them in the top five University of Alabama Centers in terms of grant submission and total dollars awarded.

It is evident that there has been strong mentorship of junior faculty and affiliates. This has resulted in multiple funding successes among the affiliate members. The affiliate members were very positive about and complimentary of the grant submission support services that they received from the Center and noted that this same level of service would not otherwise have been available to them. The Emerging Geriatric Research Scholars program is an excellent use of their resources to attract talented faculty to do research within their Center and to provide the mentorship and training to assure the Scholar’s success.

Another strength of the Center is their outreach to others at the University for input into their Center. The Dean’s group has provided valuable input and the two Deans (Medicine and Nursing) who attended the External Advisory Committee meeting were very supportive of the Center and excited about collaborations. The Center faculty have also met regularly with the Executive Committee which seems to be meaningfully involved and engaged. In addition they are reaching out to the external community, have had regular external advisory committee meetings, and have initiated an Aging Coordination Research Workgroup in response to needs raised by their community advisory group. The Committee believes that it might be helpful if this workgroup was given official designation by the Vice President of Research and that it include members outside the Center for Mental Health and Aging.
Appendix C. External Advisory Board report 2014

The efforts of Dr. Strieffer to find space to house the Center are a very positive development. Being co-located with others with a similar mission could result in additional multidisciplinary collaborations.

Weaknesses:

The Center needs to develop a better description of the responsibilities of faculty associates and their obligation to report their scholarly activities to the Center if they are receiving services from the Center. This will allow the Center to do more accurate tracking and reporting of accomplishments and make a more comprehensive statement of the Center’s value to the University.

A concern is that the Center is becoming less interdisciplinary and needs to develop a plan for attracting faculty outside the psychology department. Another concern is that there seems to be a lack of clarity in the mission of the Center in light of the fact that many of the grants and publications of the Center are not specifically in mental health and aging.

Specific Issues:

Lack of clarity in mission. The External Advisory Committee believes that the Center needs to determine what its scope of involvement should be in research and research education versus education and service. These decisions need to be made in the context of the organizational structure in which the primary financial support comes from the Office of the VP for Research while the primary reporting relationship is through the Dean of the College of Arts and Sciences. Such clarification with all involved parties is critical to the Center’s sustainability.

Need for strategic planning. The Center needs to identify its long-term goals, priorities and timeline particularly as they relate to increasing their number of Core faculty and developing affiliate faculty. Such planning is critical preliminary work to prepare for submitting a program project or center grant. This planning could include partnering with other colleges to secure funding from donors.

Branding and name of Center. The name of the Center no longer encompasses the breadth of research being conducted by the Center’s Core faculty and affiliates. Much of the research is in aging in general and not specific to mental health. Therefore renaming the Center should be considered and the mission of the Center made better known to the University and the State. It was suggested that perhaps a renaming of the Center could co-occur with the relocation of the Center.

Reporting structure. As noted in the 2010 Report of the External Advisory Committee, it is difficult to understand the efficiency and effectiveness of an organizational structure in which primary financial support comes from the VP for Research while the primary reporting relationship is through the Dean of the College of Arts and Sciences. The Center needs to gain clarity from the Dean and VP research on what are the most important outcomes. This is a continuing issue that was brought up in last visit.