REVISED

COLLEGE OF PUBLIC HEALTH AND HEALTH PROFESSIONS

COLLEGE OF MEDICINE

Request for departmental restructuring and creation of two new departments shared between PHHP and COM

4/5/10

Request Summary: This is a three-part request supported by the deans and faculty of the affected departments in the Colleges of PHHP and Medicine. First, we recommend the establishment of two new departments - the Department of Epidemiology and the Department of Biostatistics. Each new department will belong to both the College of PHHP and the College of Medicine (i.e., one department aligned in two colleges.) Second, with the establishment of the two new departments, we request that the current PHHP Department of Epidemiology and Biostatistics be sunsetted. Third, we request that the COM Department of Epidemiology and Health Policy Research be renamed Health Outcomes and Policy, retaining two existing divisions (health policy/outcomes research and biomedical informatics).

Background and Details of Request. Currently, the College of PHHP has among its departments the Department of Epidemiology and Biostatistics. This department has two divisions, one in epidemiology and one in biostatistics. Similarly, the epidemiology and biostatistics faculty in the College of Medicine reside within divisions in the Department of Epidemiology and Health Policy Research. The establishment of separate departments of epidemiology and biostatistics will promote the recruitment of established independent investigators and provide clearer identities in each discipline area. In addition, the establishment of each discipline-specific department will create synergies for research grant submission and outcomes. Because the COM Department of Epidemiology and Health Policy Research houses two other divisions (health policy/outcomes research and biomedical informatics), this department would continue under the name Health Outcomes and Policy.

Faculty Support for the Independent Departments and for Shared Departments across

Colleges: The current faculty, defined as permanent faculty in the Departments of Epidemiology and Biostatistics in PHHP and Epidemiology and Health Policy Research in COM, supports the

establishment of Epidemiology and Biostatistics Departments that create discipline-specific faculties in the Colleges of PHHP and Medicine. Current faculty members will have the option to join one of the three departments (Epidemiology, Biostatistics, or Health Outcomes and Policy).

The idea for creating new departments was discussed at a faculty meeting that all members of the two affected departments were asked to attend on 2/10/10. At this meeting, Dr. David Guzick, senior vice president for health affairs, presented a model for creating a single epidemiology department and a single biostatistics department. Dean Perri met separately with PHHP faculty prior to and subsequent to this meeting to discuss concerns and questions. Similarly, Dr. Betsy Shenkman, chair of Department of Epidemiology and Health Policy Research in COM, met with faculty in her department to address faculty questions and concerns. During this meeting, the name change of the department was also discussed. Subsequent to these discussions, a vote was taken by each college regarding support for creating new discipline-specific departments. The initial vote of the current PHHP and COM faculty in the relevant departments for creating new departments of epidemiology and biostatistics was 27 in favor and none opposed. Eight faculty members (2 in PHHP and 6 in COM) did not cast a vote.

Subsequent to initial proposal submission, the proposal was revised based on a request for changes by the provost's office (e.g. define faculty, clarify IDC distribution, etc.). These changes are incorporated into this revised document, and resulted in a second vote of the PHHP and COM faculty. The total vote for creating the departments of epidemiology and biostatistics among the current PHHP and COM faculty based on the information described in this document was 33 in favor, 0 opposed, one absent (out of the country), and one ineligible (home dept. is in another college). (Thirty votes in favor were registered for the revised proposal during the departmental meetings in which votes were taken. Three faculty members who were not at the COM meeting provided their vote after the meeting.)

Although faculty expressed support for the name change in the COM departmental meeting, a formal vote for the specific name was taken at a separate meeting. Four possible names for the department were suggested, and faculty members were asked to rank order those options. Then, a mean ranking was calculated for each choice. The faculty's first choice was the Department of Health Outcomes and Policy based on this procedure.

Growth in Epidemiology and Biostatistics. Epidemiology and biostatistics are expected to have sustained growth for the foreseeable future. For example, the Department of Labor's Occupational Outlook Handbook 2010-2011 Edition indicated "faster than average" employment growth for epidemiologists, with excellent employment opportunities. The Handbook does not separate biostatisticians from other statisticians but indicated a projected growth rate of approximately 13%. This demand is coupled with the lack of qualified individuals being trained to fill the future job market. The recent Association of Schools of Public Health publication on employment, ASPH Policy Brief: Confronting the Public Health Workforce Crisis, indicated that by 2020, "the nation will be facing a shortfall of more than 250,000 public health workers" ... and that "over the next 11 years, schools of public health would have to train three times the current number of graduates to meet projected needs", which are created by "more than 100,000 government public health workers – approximately one-quarter of the current public sector workforce – [being] eligible to retire by 2012" (p.1). Two specific recommendations to address this looming crisis are to educate more graduate students and to significantly increase research training, both consistent with the growth in biostatistics and epidemiology. The establishment of independent departments will help focus and manage the growth and educational needs expected in these individual disciplines.

Other Universities with Independent Departments of Epidemiology and Biostatistics.

Among the 20 top ranked public universities by U.S. News and World Report, 11 had some representation of epidemiology and biostatistics. Almost two-thirds of these universities (64%; n=7) had independent departments of epidemiology and biostatistics, and one additional university had a department of epidemiology plus an independent multidisciplinary group of biostatisticians. Only three universities (Maryland, Georgia, and Penn State) combined epidemiology and biostatistics into a single department. Similarly, among the top ten accredited schools of public health, all had separate departments of epidemiology and biostatistics. Thus, separate departments is the most common structure for organizing epidemiology and biostatistics.

Establishing a department across two colleges is fairly unique but is not without precedent. The University of California at Berkeley comes the closest to this model for its biostatistics activities. Although it has an independent department of epidemiology, its biostatistics structure is called a

"group in biostatistics". This group is a combined effort of the Department of Statistics and the School of Public Health. The University of Wisconsin has an overarching structure – a combined School of Medicine and Public Health - that also reflects this concept more generally. We believe that establishing distinct departments of epidemiology and biostatistics across the two colleges will create a more unified identity for these disciplines and advance the education and research missions of UF.

Administrative Structure/Timeframe for Implementation. Faculty members would choose the department they plan to join at the time the proposal is approved by the UF Board of Trustees. The faculty would then be appointed to the department they select. As a point of clarification, it is not our intention to create a division of the department within each college, but rather for faculty to function within the department as a whole. Also upon approval, two new chairs – one for the Department of Biostatistics and one for the Department of Epidemiology – would be recruited in national searches. Current faculty would be eligible to apply for the chair position. Academic programs would move to the relevant department once each department was established. The biostatistics department would manage the biostatistics programs (biostatistics concentration in the MPH, MS and PhD), and the epidemiology department would manage the epidemiology programs (epidemiology concentration in the MPH, MS, and PhD). Majors would remain associated with the college of origin but teaching effort would be credited to each faculty member assigned effort in the curriculum. Academic programs would be governed in a manner consistent with public health accreditation by CEPH.

Indirect cost distribution for existing grants would remain in the college of origin. Indirect costs generated by new grants (after the department is established and a chair in place) by faculty housed in Epidemiology and Biostatistics departments would be split evenly between the two colleges. Combined research projects for each department would be encouraged in an ongoing manner. The department would establish an interdisciplinary promotion and tenure committee that would be governed by appropriate bylaws and rules for tenure and promotion decision making. These bylaws and rules would be created by the two departments (epidemiology and biostatistics, respectively) and sanctioned by both deans. The first level tenure and promotion review would occur at the departmental level. The second level review would occur by a promotion and tenure committee consisting of an equal number of faculty members from the

existing college level tenure and promotion committees in COM and PHHP. These individuals would be appointed by the deans of COM and PHHP at the time the department is established.

A governance structure would be established to ensure faculty input from both colleges on departmental matters, and the deans of both colleges or their representatives would be involved in decisions regarding the overall fiscal management of the department (such as college contributions to the departmental budget). The faculty would have the right to appeal decisions made by the chair and/or the deans to the senior vice president for health affairs and the provost.