

**Cover/Signature Page - Abbreviated Template**  
02/06/2014

Institution Submitting Request: *University of Utah School of Medicine*  
 Proposed Title: *Department of Population Health Sciences*  
 Currently Approved Title: *N/A*  
 School or Division or Location: *School of Medicine*  
 Department(s) or Area(s) Location: *Williams Building, Research Park*  
 Recommended Classification of Instructional Programs (CIP) Code<sup>1</sup> (for new programs): *00.0000*  
 Current Classification of Instructional Programs (CIP) Code (for existing programs): *00.0000*  
 Proposed Beginning Date (for new programs): *09/01/2014*  
 Institutional Board of Trustees' Approval Date: *MM/DD/YEAR*

Proposal Type (check all that apply):

R401-5		R401-6	
<i>Items submitted will be reviewed by OCHE. If there are any issues, the proposal will be returned for clarification/correction. If no issues, the proposal will be returned with a note of approval and the request will be placed on the General Consent Calendar of the next Regents' agenda.</i>		<i>Items submitted will be reviewed by OCHE. If there are any issues, the proposal will be returned for clarification/correction. If no issues, the proposal will be returned with a note of approval and the request will be placed on the General Consent Calendar of the next Regents' agenda.</i>	
Section #	Item	Section #	Item
4.1.5.2	<input type="checkbox"/> Minor*	6.1.1	<input type="checkbox"/> Reinstatement of Previously Suspended Program
5.1.1.1	<input type="checkbox"/> New Emphasis on an Existing Degree*	6.1.5	<input type="checkbox"/> Reinstatement of Previously Suspended Unit
5.1.2	<input type="checkbox"/> Certificate of Proficiency Not Eligible for Financial Aid		
5.1.3	<input type="checkbox"/> Out-of-Service Area Delivery of Programs		
5.1.4	<input type="checkbox"/> Name Change of Existing Programs		
5.1.5	<input type="checkbox"/> Program Transfer		
	<input type="checkbox"/> Program Restructure		
	<input type="checkbox"/> Program Consolidation		
5.1.6	<input type="checkbox"/> Program Discontinuation		
	<input type="checkbox"/> Program Suspension		
5.1.7	<input checked="" type="checkbox"/> Administrative Unit Creation		
	<input type="checkbox"/> Administrative Unit Transfer		
	<input type="checkbox"/> Administrative Unit Consolidation		
5.1.8	<input type="checkbox"/> New Center		
	<input type="checkbox"/> New Institute		
	<input type="checkbox"/> New Bureau		
5.1.9	<input type="checkbox"/> Graduate Certificate		

\*Requires "Section VI: Program Curriculum" of Abbreviated Template

**Chief Academic Officer (or Designee) Signature:**

I certify that all required institutional approvals have been obtained prior to submitting this request to the Office of the Commissioner.

\_\_\_\_\_  
Signature

Date: *MM/DD/YEAR*

Printed Name: *Name of CAO or Designee*

<sup>1</sup> CIP codes must be recommended by the submitting institution. For CIP code classifications, please see <http://nces.ed.gov/ipeds/cipcode/Default.aspx?y=55>.

**Program Request - Abbreviated Template  
University of Utah School of Medicine  
Department of Population Health Sciences  
02/06/2014**

**Section I: Request**

The University of Utah School of Medicine (SOM) requests permission to establish a Department of Population Health Sciences (PHS).

The Department of Population Health Sciences will provide three distinct but integrated roles: First, it will provide a durable basic science departmental infrastructure for faculty whose research focus is on patient and population oriented health care. Second, and equally important, it will provide support, expertise and mentorship for physicians and investigators across *all* departments who wish to pursue research interests and questions from their current academic homes. Third, it will advance the methodological bases for improving the care of patient and patient population-oriented health care delivery.

**Faculty Consultation**

In October 2013 the School of Medicine College Council Executive Committee unanimously approved the proposal for the new department. Following Executive Committee approval, department chairs were encouraged to provide information to their faculty on this proposal.

**School of Medicine Faculty Vote:** Between December 16 and 20, 2013, all SOM full-time faculty (1511) were asked to vote on the establishment of a Department of Population Health Sciences. Fifty-four percent of faculty participated, with 87% voting in favor of the proposal. The email invitation to faculty to vote, including background information, appears in **Attachment 1**. The voting summary is provided in **Attachment 2**.

**Section II: Need**

We recognize that both population health and health systems research expertise and successful scholarly work already exist within the University of Utah, but we also recognize the urgent need to broaden this knowledge and build on expertise in some specific areas. Cultivating these significant strengths will better equip the University to meet important challenges of evolving health care systems. The proposed Department of Population Health Sciences is designed to complement, strengthen and extend the capacity for scholarship within the School of Medicine, throughout the Health Sciences Center and across the entire University of Utah.

Specifically, this new department will be a hub for education, investigation and expertise in health services, cost, quality, outcomes, and health delivery systems research with the purpose of driving health care transformation. **It will facilitate increased efficiency and effectiveness of clinical operations through support of population health management and quality improvement initiatives. PHS will serve faculty, fellows, residents and students and will enable such trainees to embrace the rapidly changing challenges of health care.** The PHS department will help us fulfill our commitment to the state legislature that we will prepare our students to meet the demands of a transforming health care system. In addition, PHS will make us competitive for external funding in this burgeoning field, and it will position us as leaders in transforming health care in Utah and beyond.

The Population Health Sciences Department will work with existing graduate programs to integrate educational efforts aimed at population health and will also be able to host complementary programming to contribute to this field of scholarship. This educational functioning is designed to elevate existing academic programs and contribute to the University's impact on advancing population health by introducing emphases in areas that are currently underrepresented.

Historically, departments within the School of Medicine have followed a traditional structure of aligning along defined specialties, functions, educational and accreditation requirements. The introduction of the PHS represents a shift in this paradigm. With increasing emphases on team-based scholarship, the distinctions along these traditional academic lines are increasingly blurred, thus allowing for more collaborative approaches to the advancement of knowledge. The proposed PHS department is positioned to take advantage of this changing paradigm and provides opportunities for cross-institutional approaches in health services and health systems scholarship to meet the multi-faceted challenges of health care transformation. The PHS department represents a significant increase in the *durable* academic infrastructure and a contribution to the expansion of multi-disciplinary collaborations that engage clinicians and methodologists across different types of relevant academic domains.

In parallel, new practices, policies and accreditation standards are promoting integrated health systems that rely on interdisciplinary partnerships. As more inter-professional approaches to learning, innovation and care are adopted, the responsibility, accountability and authority for safety, quality, efficiency and effectiveness of patient care are shifting away from a more individual focus to one that incorporates a system-based approach; an organizational shift for academic programming addressing health systems practices and pressures is needed. Multiple elements, including the Affordable Care Act (ACA), are influencing transformation of health care systems. Payers (both public and private) are increasing the pressure on these health care systems to provide accurate and relevant data that speak to quality of care, efficiency and value.

The PHS department is poised to be at the forefront of these new health care system changes by supporting rigorous approaches to investigation and education in such areas as value-based patient outcomes, quality, new business and financial models and health care delivery. These efforts can also serve to increase the efficiency and effectiveness of University of Utah Health Care clinical operations by supporting population health management and quality improvement. A Department of Population Health Sciences will position the University of Utah to be a value-driven organization that can lead health care transformation scholarship and implementation, and define health care for the future.

Expertise and successful scholarly work in value-based outcomes, quality and health care delivery research currently exist within the School of Medicine, for example in the Epidemiology Division of Internal Medicine, in the Public Health Division of the Department of Family and Preventive Medicine, and in Pediatrics. However, there is a need to extend this expertise into the other divisions of Internal Medicine, for example those areas studying cancer, diabetes, heart disease and aging; into all of the surgical subspecialties; into Obstetrics and Gynecology, Orthopaedics, and the clinical neurosciences; and into the diagnostics-focused departments of Radiology and Pathology. Because of the scale and cost of what would be required, population health sciences cannot be extended throughout the School of Medicine from one of the current population health sciences-related divisions or programs. It must be extended from a new department with a goal of further expanding and enhancing existing relationships with University of Utah Health Care and across the health sciences and University. The PHS department will

serve as a hub from which to broaden knowledge and expertise, and it will significantly enhance the School of Medicine's academic and clinical missions and impact research and training for the health sciences and larger institution.

The creation of the PHS department will also afford an opportunity to more effectively compete for new federal funding from the Patient-Centered Outcomes Research Institute (PCORI) and the CMS Center for Medicare and Medicaid Innovation (CMMI), agencies with increased research funding in a time of decreased federal agency budgets.

### **Mission**

The mission of this new department will be to provide methodologic expertise and infrastructure that will advance capacity for population health scientists to pursue impact-driven research and allow clinical professionals to provide better patient and population-oriented care in an increasingly complex health care delivery system.

### **Department Goals**

- Achieve robust academic productivity as measured by the quality and quantity of funding and peer reviewed scholarship;
- Serve as a central educational backbone for population health sciences for the Center for Clinical and Translational Science (CCTS) to help advance investigation in this area and support graduate education;
- Provide a hub, through collaboration with clinical departments and University of Utah Health Care, for innovation and expertise in health services, cost, quality, safety, outcomes, and health care delivery systems research within our patient population;
- Facilitate increasing interactions between clinical and basic science departments in the School of Medicine: the PHS will work to advance health services and systems scholarship by expanding epidemiology, biostatistics and population studies capabilities and providing an additional and more direct path for basic scientists to impact health care;
- Provide interprofessional educational opportunities for the health sciences and vested interests in the main campus, including the College of Social and Behavioral Science and the David Eccles School of Business;
- Increase the efficiency and effectiveness of clinical operations through support of population health management and quality improvement; and
- Serve faculty, fellows, residents, and students by being a point from which they can engage in addressing the rapidly evolving challenges of health care.

### **Department Divisions**

Initially, the department will likely include the following divisions:

1. **Health System Innovation and Research (HSIR):** Rachel Hess, M.D., was recruited from the University of Pittsburgh to serve as the director of the Health System Innovation and Research Program, and will begin work at Utah March 1<sup>st</sup>. Part of the HSIR Program will become a division in the new PHS Department, and Dr. Hess will lead both.
2. **Cancer Population Sciences:** Huntsman Cancer Institute is an enthusiastic supporter of the proposed department. The immediate 5-year plan is to recruit the Senior Director of Cancer Population Sciences (interviews are underway), who will also be appointed as Division Chief. In addition, HCI is committed to three additional faculty recruitments, at mid to senior level. Three HCI endowed chairs have been created to support faculty holding these positions.
3. **Biostatistical Methods:** Key stakeholders will assist the new chair in developing a biostatistical methods division, a department priority.



### **Department Chair Recruitment and Responsibilities**

Our first priority, following appropriate approvals, will be for the Dean to recruit and appoint a department chair who shares the vision for this department and who understands the importance of moving forward expeditiously. While the goals, importance, and urgency for establishing this department have been described, it will be up to the chair to implement the vision. The new chair will recruit and retain faculty, facilitate connections and partnerships with clinical and basic science departments and with University of Utah Health Care, and lead the development and implementation of the department's academic and educational programs.

Dr. Dean Li, Associate Vice President for Research for the Health Sciences, will continue to lead the effort to establish the PHS Department until such time as it is appropriate to appoint an Interim Chair. The responsibilities of the interim chair are being defined and reviewed by the Health System Innovation and Research/Population Health Sciences Advisory Committee, as well as other key stakeholders, and names of qualified candidates are being collected and reviewed. Upon appropriate governance approvals, we will be poised to appoint an interim chair. The chair (and the interim chair) will report to Dr. Vivian Lee, Dean of the School of Medicine, as is the case with all other School of Medicine departments.

A critical and early task for the new department chair will be to establish appropriate graduate programming that will build on existing resources throughout the campus and serve as a catalyst for the academic mission of the PHS. As with all School of Medicine basic science departments (which are distinct from clinical departments), the PHS department will be an investigative PhD degree-granting department. It is anticipated that a new doctoral degree in *Population Health Sciences* will be needed to provide advanced educational capacity in health services and health systems research, including cost, quality, safety, and outcomes for patients and populations as they interact with health care delivery systems. It is recognized that collaborative cross-departmental teaching will enrich and strengthen the educational program by tapping into the expertise that exists across our university. The goal of the doctoral program will be to provide the knowledge and skills necessary for graduates to pursue an *academic* career in this field and to develop leaders in health care and health care transformation. Establishing a new degree is driven by the need to respond to changes in health care and by market forces. Planning for the program will be collaborative and will have broad representation of faculty to ensure a rich and rigorous program and also to ensure that programs are complementary.

### **Similar Units/Programs in the State and/or Intermountain Region**

Closely related to the academic scope of this proposed department is the field of Public Health. Along with the University of Utah Division of Public Health in the Department of Family and Preventive Medicine, there are several other accredited public health academic units in the Intermountain region. In Utah, both Brigham Young University and Westminster College have public health programs. In the surrounding states, there are public health units in Colorado (University of Colorado, School of Public Health), Nevada (both University of Nevada Reno and University of Nevada Las Vegas have Schools of Community Health Sciences), and Idaho (Idaho State Public Health Program). The distinction between the PHS and these Council on Education for Public Health-accredited programs is that the PHS will focus on health service and health systems research and will focus educational programming on research within the scope previously described. Additionally, Oregon State University has a School of Biological and Population Health Sciences that follows a traditional public health model with a multi-disciplinary approach linking biology and behavior to population and environmental health.

Intermountain Healthcare has an *Institute for Health Care Delivery Research* that emphasizes quality and safety in health care policy and practice by serving as a model learning organization. As such, its goal is to improve quality and reduce the cost of health care services by delivering education, providing technical support, and generating/disseminating evidence. Its research mission supports operational and service excellence and process management across the Intermountain Healthcare system and with its external partners. While this program is nationally recognized for its quality and safety accomplishments, it is not part of an academic institution. However, it does provide outstanding collaborative opportunities.

### **Section III: Institutional Impact**

#### **Impact on Enrollments in Instructional Programs of Affiliated Departments or Programs**

A number of units across the University of Utah are engaged in population or population health scholarship. After the department has been established and the department chair has been identified and recruited, the initial focus of the new chair will be to establish synergistic collaborations across units to strengthen research and educational efforts. The curriculum for a doctoral degree will be developed at that point. In collaboration with other units, that graduate program will be differentiated from existing programs and specifically designed to achieve synergies among similar programs.

#### **Potential areas of collaboration include:**

- Department of Family and Preventive Medicine
  - Division of Public Health
  - Division of Occupational and Environmental Health
- Department of Internal Medicine
  - Division of Epidemiology
  - Division of Genetic Epidemiology
- Department of Biomedical Informatics
- Department of Surgery
  - Surgical Systems Innovation Research Team
- College of Pharmacy
  - Department of Pharmacotherapy (and the Pharmacotherapy Outcomes Research Center)
- Department of Pediatrics
  - Intermountain Injury Control Research Center
  - Other pediatric research groups – may get input from Carrie Byington
- Huntsman Cancer Institute Cancer Control and Population Sciences
- Center for Clinical and Translational Sciences
  - Study Design and Biostatistics Core
  - Patient Centered Research Methods Core
  - Community Outreach and Collaboration Core
- College of Social and Behavioral Sciences
  - Economics – especially Health Economics
  - Family and Consumer Studies – especially Consumer and Community Studies (including health)
  - Geography
  - Psychology
  - Sociology – especially Population and Health emphasis
- College of Engineering
  - Mechanical Engineering – Ergonomics and Safety

David Eccles School of Business  
Master of Health Care Administration  
College of Health  
Health Promotion and Education  
College of Nursing  
Public Health Nursing  
College of Social Work  
Eccles Health Sciences Library

### **Impact on Existing Administrative Structures**

The PHS department will provide an enduring departmental infrastructure to:

- Move quickly *and* efficiently in response to specific Huntsman Cancer Institute (HCI) and Center for Clinical and Translational Science (CCTS) requests for a central population sciences structure;
- Provide increased support to established and new population health sciences programs such as the Health System Innovation and Research Program and the Department of Surgery's Surgical Systems Innovation Research team;
- Ensure that the University is competitive for new sources of funding (specifically the federally funded Patient-Centered Outcomes Research Institute [PCORI] and the CMS Center for Medicare and Medicaid Innovation [CMMI]) in this rapidly expanding field.

### **Organizational Structure**

The Department of Population Health Sciences will reside in the School of Medicine. The overall School of Medicine departmental infrastructure will not change.

### **Faculty and Staff Changes**

A Chair will be recruited, followed by recruitment of an estimated 5 to 6 faculty members over five years as well as support staff. The department will be built almost exclusively through external recruitment; there may be one or two transfers to the new department from an existing department (e.g., possibly Internal Medicine), but this would only happen with the full involvement and permission of the department chair. In addition, the PHS department will partner with clinical departments and Huntsman Cancer Institute to recruit additional population health sciences-focused clinicians and investigators. Faculty recruited through these partnerships will be housed in the partnering units, but will collaborate with PHS department faculty, thereby strengthening the PHS department, partnering department and institution.

The new department will provide investigative and educational expertise to faculty and trainees in such patient and population health care delivery focused areas as value-based outcomes, safety and quality. Mentors for trainees will be sought broadly in the health sciences and main campus. Faculty beyond the department who hold appropriate credentials--specific expertise and sufficient external funding to support trainees--may be eligible to serve as mentors.

Faculty appointments to this department, whether new faculty recruitments or adjunct appointments for faculty who hold primary appointments in other School of Medicine departments, will be managed through the School of Medicine's ARPT process. All policies and procedures that apply across the School of Medicine will apply to this department.

### **Physical Facilities**

- *Short-term.* The Department of Population Health Sciences will initially be housed in the Williams Building in Research Park.

- *Longer-term.* When construction of the new Medical Education and Discovery (MED) Building (the 521 School of Medicine replacement building) is complete, the goal is to colocate Population Health Sciences with related units, e.g., the Division of Epidemiology (Internal Medicine), the Pediatric Outcomes Research Unit, Biomedical Informatics, and the Surgical Systems Innovation Research team, to create a platform for academic investigation and health care delivery innovation.
- *HCI Cancer Population Sciences.* The Division of Cancer Population Sciences will be housed in Huntsman Cancer Institute space.

### Equipment for New Department

Computers and office equipment will be required.

## Section IV: Finances

The department will initially be funded with state and institutional dollars (allocation of these funds to a new department has been approved by the School of Medicine chairs). A new Department Chair will recruit 4 to 5 faculty members directly into the department over five years; he or she will also partner with clinical departments and Huntsman Cancer Institute during this same period to recruit an additional estimated 9 population health investigators (clinical departments 5-6; HCI 4). The faculty who come to the University as a result of these joint PHS/clinical department recruitments will be located in the partnering department rather than in the PHS department.

Huntsman Cancer Institute is interviewing for a Senior Director of Cancer Population Science, who will also serve as a division chief in the PHS department. HCI has also committed to three additional population science faculty recruitments that include endowed chairs.

The department will aggressively pursue external grant and contract funding from federal programs focused on population health sciences research and patient care improvements, e.g. PCORI, CMS/CMMI. PCORI and CMS/CMMI represent an island of increased federal funding opportunity in an otherwise difficult funding environment for medical science research. The expectation is that grant/contract funding will continue to increase, benefitting both the PHS department and partnering departments, and in the second five years of the department will become the predominant funding stream. **State funds allocations for any current basic or clinical department will not be diminished based on these changes.** The summary budget below includes support for a Chair and faculty recruitment described above. Support staff, including administrative and data management staff, and non-personnel costs are also included.

<i>PHS Department 5 Year Budget Projection</i>						
<i>Departmental Data</i>	<i>Year 1</i>	<i>Year 2</i>	<i>Year 3</i>	<i>Year 4</i>	<i>Year 5</i>	<i>5 Year Total</i>
<i>Personnel Expense</i>						
<i>Salaries &amp; Wages</i>	1,657,000	2,142,960	2,404,249	2,476,376	2,550,668	11,231,253
<i>Benefits</i>	507,350	663,258	746,106	768,489	791,544	3,476,746
<i>Total Personnel Expense</i>	\$ 2,164,350	\$ 2,806,218	\$ 3,150,355	\$ 3,244,865	\$ 3,342,211	\$ 14,707,999
<i>Non-personnel Expense</i>						
<i>Moving Expenses</i>	40,000	40,000	30,000	20,000	20,000	150,000

<i>Recruitment Funds</i>	40,000	40,000	15,000	15,000	15,000	125,000
<i>Program Discretionary Funds</i>	100,000	100,000	100,000	100,000	100,000	500,000
<i>Operational Costs</i>	30,000	30,000	50,000	50,000	50,000	210,000
<i>Total Non-personnel Expense</i>	210,000	210,000	195,000	185,000	185,000	985,000
<b><i>Total Expense</i></b>	\$ 2,374,350	\$ 3,016,218	\$ 3,345,355	\$ 3,429,865	\$ 3,527,211	<b>\$ 15,692,999</b>
<b><i>Funding Sources</i></b>						
<i>State/Institutional Funds</i>	1,254,500	1,537,544	1,561,012	1,796,226	1,844,563	7,993,843
<i>Grants and Contracts</i>	573,850	854,129	1,108,072	1,242,497	1,279,772	5,058,320
<i>Clinical Departments/HCI</i>	546,000	624,546	676,271	391,142	402,876	2,640,836
<b><i>Total</i></b>	\$ 2,374,350	\$ 3,016,218	\$ 3,345,355	\$ 3,429,865	\$ 3,527,211	<b>\$ 15,692,999</b>

**Section V: Program Curriculum**

**Certificate, and/or Degree(s) to Be Awarded:**

A proposal to create a PhD program will be submitted separately, following approval of the Department of Population Health Sciences and with the oversight of its inaugural department chair. A PhD program will become a foundational element in the new department, and preliminary, interdisciplinary discussions are underway to develop a framework complementary to the Department of Family and Preventive Medicine's PhD in Public Health.

**ATTACHMENTS INDEX**  
**PROPOSED DEPARTMENT OF POPULATION HEALTH SCIENCES**  
**FEBRUARY 2014**

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1. Email invitation to faculty to vote on the proposed department, with related language – 12/16/13
2. Faculty vote summary – 12/20/13
3. History and Charge - Health System Innovation and Research/Population Health Sciences Advisory Committee
4. Membership - Health System Innovation and Research/Population Health Sciences Advisory Committee

**5. Letters of Support**

Health Sciences College Deans/Eccles Health Sciences Library Director

Dean, School of Dentistry	Rena N. D'Souza , DDS, PhD
Interim Dean, College of Health	Robin L. Marcus, PhD
Dean, College of Nursing	Patricia G. Morton, PhD, RN, FAAN
Dean, College of Pharmacy	Chris M. Ireland, PhD
Director, Eccles Health Sciences Library	Jean P. Shipman, MSLS, AHIP, FMLA

School of Medicine Department Chairs and Division Chiefs

*Basic Science Chairs (1 letter)*

Biochemistry (Co-chairs)	Christopher P. Hill, DPhil; Wesley I. Sundquist, PhD
Biomedical Informatics	Wendy W. Chapman, PhD (separate letter follows)
Human Genetics	Lynn B. Jorde, PhD
Neurobiology and Anatomy	Monica Vetter, PhD
Oncological Sciences	Bradley R. Cairns, PhD

*Clinical Chairs*

Family and Preventive Medicine	Michael K. Magill, MD
FPM/Division of Public Health	Stephen C. Alder, PhD
Internal Medicine	John R. Hoidal, MD
IM/Epidemiology Division	Matthew H. Samore, MD
Neurology	Stefan M. Pulst, MD, Dr. Med.
Obstetrics and Gynecology	C. Matthew Peterson, MD
Ophthalmology/Moran Eye Center	Randall J. Olson, MD
Orthopaedics	Charles L. Saltzman, MD
Pediatrics	Edward B. Clark, MD
Surgery	Samuel R. G. Finlayson, MD, MPH

Other Health Sciences Leadership

Huntsman Cancer Institute CEO and Director	Mary Beckerle, PhD
Center for Clinical and Translational Science Directors	Don McClain, MD, PhD; Carrie Byington, MD
Health System Innovation & Research Program Director	Rachel Hess, MD

Main Campus Leadership

Interim Dean, College of Social and Behavioral Science	Cynthia Berg, PhD
Dean, David Eccles School of Business	Taylor Randall, PhD - letter to be submitted separately

## **ATTACHMENT 1**

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Email invitation to faculty to vote on the proposed department, including frequently asked questions – 12/16/13



## Christine Lasalle

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**From:** dean.li@u2m2.utah.edu  
**Sent:** Monday, December 16, 2013 8:01 AM  
**To:** Christine Lasalle  
**Subject:** TEST3 - SOM FACULTY VOTE ON NEW POPULATION HEALTH SCIENCES DEPT

The School of Medicine seeks to establish a Department of Population Health Sciences. The transition of the Physiology Department over the past two years to strengthen team science in a Neurosciences initiative and in a Cardiovascular initiative provides the School of Medicine an opportunity to form this new Department of Population Health Sciences. As a full-time faculty member, we are seeking your vote to establish this Department of Population Health Sciences in the Fall of 2014, with voting to take place the week of December 16-20. A simple majority of votes cast will determine the outcome.

The SOM Executive Committee, which comprises the Department Chairs as well as student and house officer representatives, unanimously approved the proposal to form the Department of Population Health Sciences in October. The SOM Mission-based Management Advisory Committee approved the funds allocation model to support this department.

More information and frequently asked questions can be found in the link below. Thank you for your consideration of this issue.

Dean Y. Li, M.D., Ph.D.

Associate Vice President for Research and Chief Scientific Officer, Health Sciences; Vice Dean for Research, School of Medicine; HA and Edna Benning Endowed Professor of Medicine and Cardiology

<https://securembm.uuhsc.utah.edu/ESurvey/index.cfm?event=Run.Remote&Run.RemoteKey=0676706A7309056A750400650078731170010161747275177607711072080515>



## Faculty Vote on Population Health Sciences Department

Page 1 of 1

Finish

\* = Required

The Department of Population Health Sciences will provide a durable basic science departmental infrastructure for faculty focusing exclusively on population health, but, importantly, it will also provide support, expertise and mentorship for physicians and investigators across all departments who wish to pursue studies in population health sciences from their current academic homes. It will **strengthen methodologically-oriented research in the population health disciplines throughout the health sciences campus and the greater University community**. We recognize that expertise and very successful scholarly work already exists in specific areas within the School of Medicine, but we also recognize that there is an urgent need to broaden this knowledge and expertise into additional existing specialties. This new Department will complement, strengthen and extend what we currently have.

The new department will be a center for education, investigation and expertise in health services, cost, quality, outcomes, and health delivery systems research. It will **increase the efficiency and effectiveness of clinical operations** through support of population health management and quality improvement initiatives. It will serve faculty, fellows, residents, and students and **will be the point from which we transition our medical school structure to enable all our trainees to address the rapidly changing challenges of health care**. We have committed to the state legislature that we will prepare our faculty, students, residents, and fellows for the demands of health care transformation, and as an organization, we are committed to providing this leadership. The Population Health Sciences department will also provide, in collaboration with the Department of Family and Preventive Medicine, a **broad-based graduate program** that encompasses the disciplines of population health.

1. Link to FAQs [Frequently Asked Questions](#)

2. I support the creation of a Department of Population Health Sciences in the School of Medicine. \*

- Yes  
 No  
 Abstain

\* = Required

Finish

### ***Frequently Asked Questions:***

#### ***I am an assistant professor in a basic science department. What relevance will this new department have for me?***

This new department will facilitate interactions between clinical and basic science departments. It will have strong epidemiology, biostatistics and population studies capabilities and will provide a new and easier path for basic scientists to potentially impact health care. Many of the databases required for outcomes research are also valuable for developing new genetic insights and biomarkers for human diseases.

#### ***What happens to the Physiology Department?***

Over the past 2 years, Physiology Department faculty members have been realigned with the School of Medicine departments of Neurobiology & Anatomy, Neurosurgery, and Internal Medicine to strengthen neuroscience and cardiovascular research initiatives. Physiology teaching responsibilities have been distributed successfully to other basic science departments.

#### ***If I am a faculty member in the Department of Internal Medicine, the Department of Surgery or any other clinical department and have an interest in population health sciences, do I have to change departments?***

No. The new department can serve as an invaluable resource for you to pursue those interests while you remain in your current academic home. For some investigators, there will be opportunities to hold secondary appointments in the new department.

#### ***If I am a faculty member in a clinical department, what specific advantages will this new department afford me?***

With expertise in epidemiology, biostatistics and population studies, this basic science department will be a critical partner to outcomes researchers in established divisions, such as Internal Medicine/Genetic Epidemiology, Pediatrics, and Family and Preventive Medicine. It will also provide a partnering department for the Surgical Systems Innovation Research team (SSIR) being developed by Samuel Finlayson, Chair of Surgery, and for Huntsman Cancer Institute's new section of Cancer Population Sciences, a strategic priority as defined by Mary Beckerle, HCI CEO/Director. For other clinical departments this department will provide an opportunity to develop a population health sciences research portfolio and to participate in advancing clinical practices.

#### ***How will this new department impact the funds allocation to my current department?***

We are allocating new state dollars to this department, with funding through the SOM MBM allocation model. **State funds allocations will not be reduced for any current department, basic or clinical.**

#### ***Are the clinical and basic science Department Chairs supportive of this new department?***

Clinical department and institute leadership appreciate the current basic science department structure that affords ample opportunity for research collaboration. **These same leaders have asked that the institution create an additional basic science structure to support development of population health sciences research in their departments.** This new department was formed partly in response to that need but also in response to the pressures and opportunities of health care transformation.

## ATTACHMENT 2

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Faculty vote summary – 12/20/13

# Population Sciences Faculty Vote Brief Report

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Generated: December 20, 2013 5:04 PM

## Campaign Settings

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Access Type: Invited

Anonymous: Yes

## Invitee Participation

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Total Invitees	Invitees Completed Questionnaire	Percent Completed
1511	820	54%

## Page 1: Page 1

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### 1. FAQ

*Invitees Answered = 0*

*Avg. Choice Number = 0.00*

### 2. Support Population Sciences

*Invitees Answered = 820*

*Avg. Choice Number = 1.19*

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1. Yes	2. No	3. Abstain
87% (711)	8% (66)	5% (43)

## **ATTACHMENT 3**

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History and Charge - Health System Innovation and Research/Population Health Sciences  
Advisory Committee



## **Committee History and Charge**

### **Health System Innovation and Research (HSIR) Program/ Population Health Sciences (PHS) Department Advisory Committee University of Utah Health Sciences**

The University of Utah has substantial expertise in health systems and outcomes research, but prior to 2012 it had been siloed. At the direction of Dr. Vivian Lee, Senior Vice President for Health Sciences and Dean of the School of Medicine, key stakeholders from the health science colleges, University of Utah Health Care, the Salt Lake City VA Medical Center and Intermountain Healthcare were brought together in mid-2012 in a planning retreat to address how best to align and integrate health services research and systems across the University. A strategy for building an HSIR Program was formalized, a program mission statement developed, and the recommendation made that a program director be recruited. Dr. Dean Li, Associate Vice President for Research for the Health Sciences and School of Medicine Vice Dean for Research, serves as committee chair.

Under the leadership of a working group of the HSIR Advisory Committee, a national search for a program director was launched and was eventually completed in the Fall of 2013. Dr. Rachel Hess, from the University of Pittsburgh, was selected as the inaugural director and will assume her position at the University of Utah starting March 1, 2014.

The HSIR Advisory Committee has also established a robust mentoring program and application review process for those seeking CMS/CMMI and PCORI funding under the purview of senior directors Drs. Diana Brixner and Carrie McAdam-Marx. This mentoring program regularly brings together junior and senior investigators from across campus.

With the HSIR Program underway and a Program Director recruited, the charge of the Advisory Committee has been expanded to include advising health sciences leadership on the development of a Population Health Sciences Department, including recruitment of a department chair. This highly effective committee includes stakeholders from across the health sciences, from main campus, and from the VA Medical Center and Intermountain Healthcare. It will continue to play a pivotal role in guiding the formation of the proposed new Department of Population Health Sciences.

An HSIR/PHS Advisory Committee roster follows.

## **ATTACHMENT 4**

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Membership - Health System Innovation and Research/Population Health Sciences Advisory  
Committee

**Health System Innovation and Research (HSIR)/Population Health Sciences (PHS) Advisory Committee  
02/01/2014**

<p><b>Alder, Stephen C., Ph.D.</b> Associate Professor Chief, Division of Public Health Department of Family and Preventive Medicine School of Medicine</p>	<p><b>Magill, Michael K., M.D.</b> Professor and Chair Dept of Family and Preventive Medicine, School of Medicine Executive Medical Director, University of Utah Health Plans</p>
<p><b>Beck, Susan L., Ph.D., APRN, FAAN</b> Professor Director, PhD Program, College of Nursing</p>	<p><b>McClain, Donald A., M.D., Ph.D.</b> Associate Vice President for Clinical Research Director, Center for Clinical and Translational Science (CCTS) Professor, Department of Internal Medicine Adjunct Professor, Departments of Biochemistry and Pediatrics</p>
<p><b>Brixner, Diana I., Ph.D., RPh</b> Professor and Chair Department of Pharmacotherapy Executive Director, Pharmacotherapy Outcomes Research Center, College of Pharmacy</p>	<p><b>Mooney, Kathleen, Ph.D., RN, FAAN</b> Professor, College of Nursing Co-leader, Cancer Control and Population Sciences Program, Huntsman Cancer Institute</p>
<p><b>Byington, Carrie L., M.D.</b> Associate Vice President for Academic Affairs and Faculty Development Associate Director, Children's Health, Center for Clinical and Translational Science (CCTS) Professor, Department of Pediatrics, School of Medicine</p>	<p><b>Pendleton, Robert C., M.D.</b> Chief Medical Quality Officer, University of Utah Health Care Associate Professor, Department of Internal Medicine, School of Medicine</p>
<p><b>Chapman, Wendy W., Ph.D.</b> Professor and Chair Department of Biomedical Informatics School of Medicine</p>	<p><b>Samore, Matthew H., M.D.</b> Professor, Department of Internal Medicine Adjunct Professor, Department of Biomedical Informatics Adjunct Associate Professor, DFPM, School of Medicine PI, Salt Lake VA Informatics Decision Enhancement and Surveillance (IDEAS) Center and VA Consortium for Healthcare Informatics Research</p>
<p><b>Finlayson, Samuel R. G., M.P.H., M.D.</b> Professor Claudius Y. Gates, MD, and Catherine B. Gates Presidential Endowed Chair in Surgery Department of Surgery School of Medicine</p>	<p><b>Savitz, Lucy A., Ph.D., M.B.A.</b> Professor, Department of Internal Medicine Adjunct Associate Professor, College of Nursing, DFPM, Department of Pediatrics, School of Medicine Institute for Healthcare Delivery Research, Intermountain Healthcare</p>
<p><b>Greene, Tom H., Ph.D.</b> Professor of Internal Medicine, Division of Epidemiology Director, Study Design and Biostatistics Center, Center for Clinical and Translational Science (CCTS) School of Medicine</p>	<p><b>Scammon, Debra L., Ph.D.</b> Professor, Marketing Department David Eccles School of Business Adjunct Professor, Department of Family and Preventive Medicine, School of Medicine</p>
<p><b>Horn, Susan D., Ph.D.</b> Research Professor, Division of Physical Therapy, COH Adjunct Professor, Nursing, DFPM, Physical Med &amp; Rehab Senior Scientist, Institute for Clinical Outcomes Research Vice President, Research, International Severity Information Systems, Inc., Salt Lake City</p>	<p><b>Srivastava, Rajendu, M.D., M.P.H.</b> Associate Professor, Department of Pediatrics, School of Medicine Fellow, Institute of Healthcare Delivery Research, Intermountain Healthcare</p>
<p><b>Jackson, Brian R., M.D.</b> Associate Professor Department of Pathology, School of Medicine Medical Director of Informatics, ARUP Laboratories</p>	<p><b>Strong, Michael B., M.D.</b> Chief Medical Information Officer, University of Utah Associate Professor, Department of Internal Medicine Adjunct Associate Professor, Department of Biomedical Informatics, School of Medicine</p>
<p><b>Kawamoto, Kensaku, M.D., Ph.D.</b> Director, Knowledge Management and Mobilization, UUHC Assistant Professor, Department of Biomedical Informatics, School of Medicine</p>	<p><b>Waitzman, Norman J., Ph.D.</b> Professor, Department of Economics, College of Social and Behavioral Sciences Co-director, Health Society and Policy Program University of Utah</p>
<p><b>Li, Dean Y., M.D., Ph.D. (Committee Chair)</b> Associate Vice President for Research and Chief Scientific Officer, Health Sciences Vice Dean for Research, School of Medicine Director, Molecular Medicine Program Professor, Department of Internal Medicine</p>	



## ATTACHMENT 5

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### Letters of Support

#### Health Sciences College Deans/Eccles Health Sciences Library Director

Dean, School of Dentistry	Rena N. D'Souza , DDS, PhD
Interim Dean, College of Health	Robin L. Marcus, PhD
Dean, College of Nursing	Patricia G. Morton, PhD, RN, FAAN
Dean, College of Pharmacy	Chris M. Ireland, PhD
Director, Eccles Health Sciences Library	Jean P. Shipman, MSLS, AHIP, FMLA

#### School of Medicine Department Chairs and Division Chiefs

##### *Basic Science Chairs (1 letter)*

Biochemistry (Co-chairs)	Christopher P. Hill, DPhil; Wesley I. Sundquist, PhD
Biomedical Informatics	Wendy W. Chapman, PhD (separate letter follows)
Human Genetics	Lynn B. Jorde, PhD
Neurobiology and Anatomy	Monica Vetter, PhD
Oncological Sciences	Bradley R. Cairns, PhD

##### *Clinical Chairs*

Family and Preventive Medicine	Michael K. Magill, MD
FPM/Division of Public Health	Stephen C. Alder, PhD
Internal Medicine	John R. Hoidal, MD
IM/Epidemiology Division	Matthew H. Samore, MD
Neurology	Stefan M. Pulst, MD, Dr. Med.
Obstetrics and Gynecology	C. Matthew Peterson, MD
Ophthalmology/Moran Eye Center	Randall J. Olson, MD
Orthopaedics	Charles L. Saltzman, MD
Pediatrics	Edward B. Clark, MD
Surgery	Samuel R. G. Finlayson, MD, MPH

#### Other Health Sciences Leadership

Huntsman Cancer Institute CEO and Director	Mary Beckerle, PhD
Center for Clinical and Translational Science Directors	Don McClain, MD, PhD; Carrie Byington, MD
Health System Innovation & Research Program Director	Rachel Hess, MD

#### Main Campus Leadership

Interim Dean, College of Social and Behavioral Science	Cynthia Berg, PhD
Dean, David Eccles School of Business	Taylor Randall, PhD – letter to be submitted separately as an amendment



UNIVERSITY OF UTAH  
SCHOOL OF DENTISTRY

Rena N. D'Souza, D.D.S., Ph.D.  
Dean and Professor

February 5, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

**RE: Proposed Department of Population Health Sciences in the School of Medicine**

Dear Dr. Lee:

As the new Dean of the new School of Dentistry, I fully support the creation of a Department of Population Health Sciences in the School of Medicine. I am in the process of building and recruiting my leadership team; a major consideration as I am recruiting faculty for the School is my strong commitment to pursue quality and outcomes research.

The new Department of Population Health Sciences will be an extremely valuable asset as we advance those research priorities. This department, and the opportunities it provides for interprofessional partnerships in research and education, illustrate the strong commitment of the Health Sciences Center to value based outcomes, high quality care and advancing the methodological bases for improving the care of patient populations. This commitment is a strength that serves our recruitment efforts well.

In summary, the Health Sciences Center provides remarkable expertise and resources for faculty, residents and students. This new department will complement the existing resources, will position us as leaders in this new academic field, and will increase our competitiveness for external funding.

Thank you for the opportunity to state my strong support for the Department of Population Health Sciences.

Best regards,

*Rena D'Souza*

Rena D'Souza, DDS, PhD, MS  
Dean, School of Dentistry

26 South 2000 East  
Salt Lake City, UT 84112-5750  
(801) 587-1199



COMMUNICATION SCIENCES  
AND DISORDERS

EXERCISE AND  
SPORT SCIENCE

HEALTH PROMOTION  
AND EDUCATION

NUTRITION

OCCUPATIONAL THERAPY

PARKS, RECREATION  
AND TOURISM

PHYSICAL THERAPY

January 10, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health Sciences in the School of Medicine

Dear Dr. Lee:

I am writing to strongly endorse the establishment of the Department of Population Health Sciences in the School of Medicine.

As the Dean of the College of Health, I am thrilled to support this new department in the School of Medicine, specifically as it relates to our developing portfolio of population health sciences research. Our vision is to become one of the recognized national leaders in Health Services and Comparative Effectiveness Research related to rehabilitation and disease prevention. The support, expertise and mentorship provided by this new department will greatly enhance our ability to do so.

With expertise in epidemiology, biostatistics and population studies, this department will be a critical partner to our established outcomes researchers in the departments of Physical Therapy, Communication Sciences and Disorders, and Nutrition. Dr. Julie Fritz, a professor in the Department of Physical Therapy, is a national leader in this area and will be an obvious collaborator with the new department. In developing this new department, the University of Utah is demonstrating an institutional commitment to innovative inter-professional education, practice, and research environments, all critical to the transformation of health care. Recruitment of top tier faculty and further program development to facilitate health services research across Campus will be greatly enhanced by the new Department of Population Health Sciences. This is an area of research that is sorely lacking in the rehabilitation fields, and one that our faculty and students can capitalize on for the overall improvement of health care and cost containment.

Sincerely,

Robin L. Marcus, PhD  
Interim Dean, College of Health





January 21, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health Sciences in the School of Medicine

Dear Dr. Lee:

As the Dean of the College of Nursing, I wish to express my enthusiastic support for the creation of a Department of Population Health Sciences in the School of Medicine.

Much of the research done by faculty and students in the College of Nursing is population health science, so the development of this new organizational unit offers great promise to complement the research in our college. This includes research in technology-assisted models of care such as the telephone-linked system of care, developed by Distinguished Professor Kathi Mooney, currently under investigation in several large NIH-supported studies or Dr. Mollie Cummins's AHRQ-funded studies linking Poison Control Centers and the Emergency Departments to improve the handoff of care and outcomes in children and adults who have ingested harmful substances. A few of the many examples of other relevant funded research of the College of Nursing faculty are a systems-level intervention to improve pain management in over 300 hospitals, compassionate and cost-effective hospice care in the growing number of prisoners who are approaching end of life, evaluation of interprofessional training on management of care transitions, and clinical decision support for prescribers in pediatric critical care. A growing number of the studies in the College of Nursing utilize "big data" approaches to elucidate patients at risk for adverse outcomes and the most effective nursing strategies to improve outcomes and reduce costs.

Recent initiatives in the health sciences on a national and campus level have increased the emphasis on interdisciplinary and interprofessional research, education, and practice. Virtually every current research project in the College of Nursing involves team science including investigators from multiple disciplines. Because nursing science focuses on prevention, management of symptoms that cross the traditional medical specialties, and life transitions such as end-of-life care, a Department of Population Health Sciences in the School of Medicine will be a natural source of interprofessional collaborations for scientists in the College of Nursing. Doctoral students and postdoctoral trainees in the college will benefit from enhanced training opportunities and mentored experiences. We can anticipate that the quality and quantity of studies and interprofessional education will be enhanced.

As you deliberate the creation of a Department of Population Health Sciences in the School of Medicine, please consider the great benefit for research, education, and practice throughout the Health Sciences campus, and even the entire university.

Sincerely,

A handwritten signature in cursive script that reads 'Patricia Gonce Morton'.

Patricia Gonce Morton, PhD, RN, FAAN  
Dean and Professor  
Louis H. Peery Endowed Chair  
Robert Wood Johnson Executive Nurse Fellow  
Office of the Dean  
10 South 2000 East  
Salt Lake City, UT 84112-5880  
801-581-8262 – Office  
801-587-9816 – Fax



**Chris M. Ireland**  
Phone (801) 581-3402  
(801) 581-8305  
FAX (801) 585-3716  
cireland@pharm.utah.edu

<http://www.pharmacy.utah.edu/medChem/faculty/ireland.html>

January 9, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health  
Sciences in the School of Medicine

Dear Dr. Lee:

I wish to express my support for the creation of a Department of Population Health Sciences in the School of Medicine. As you are aware The College of Pharmacy has major programs focused on outcomes research and personalized medicine. One of the primary aims of The Pharmacotherapy Outcomes Research Center is to utilize large patient population databases along with medical records to model comparative effectiveness of different therapeutics modalities. Thus, the core faculty of Clinical PharmDs, and research and tenured faculty involved in clinical pharmacy, outcomes, economics and health services research would be well complemented by physician clinicians in the field to address patient centric, personalized research questions.

Interactions with the PHS Department and the HSIR committee will strengthen our ability to recruit top notch researchers and clinicians into this field in the College of Pharmacy and to expand our expertise in PCORI, AHRQ, NIH and other federal grant opportunities. Students enrolled in our PhD program in Pharmacotherapy Outcomes Research and Health Policy will undoubtedly benefit through their interactions and collaborations with PHS faculty and students.

Sincerely,

Chris M. Ireland  
Professor and Dean  
L. S. Skaggs Presidential Endowed Chair for Pharmacy

College of Pharmacy  
L. S. Skaggs Pharmacy Institute  
Office of the Dean  
30 South 2000 East, Room 110B  
Salt Lake City, Utah 84112-5820





January 11, 2014  
Vivian S. Lee, M.D., Ph.D., M.B.A.  
Senior Vice President for Health Sciences  
Dean, School of Medicine  
CEO, University Health Care

Dear Dr. Lee,

The Spencer S. Eccles Health Sciences Library appreciates the opportunity to express strong support for the proposed new Department of Population Health Sciences in the School of Medicine, University of Utah. In particular, we encourage the development of programs with this department which create and build on the formation and enhancement of cross-discipline synergies.

The Spencer S. Eccles Health Sciences Library sees the need for this new department and is fully committed to supporting it, focusing on the development of the skills and expertise required to assure faculty and student success. Toward that end, Eccles Library can assist personnel within the new department with being productive and with learning new information discovery and management skills. It can offer collaborative space and interprofessional opportunities for faculty development and for team science to occur. Our research support service RISE (Research Information Services) will be available to all faculty and students within this new department as well as those who work in conjunction with the department. This service will support methodological-oriented research in the population health disciplines and can help to facilitate connections among those doing research in the areas of epidemiology, biostatistics and population studies. These services are offered to clinical and basic sciences faculty and students.

The Eccles Library expects to be able to provide required information resources in partnership with those offered by the Marriott Library. Of particular importance for this department is access to a wide variety of electronic information resources. Our three University libraries and the Utah Academic Library Consortium (UALC) work together to obtain access to a full range of electronic journals and databases. Eccles Library, in particular, provides access, training, and assistance on searching PubMed, environmental health, and CINAHL: The Cumulative Index to Nursing and Health Literature, and a wide range of other health resources including those geared to the lay individual (MedlinePlus). We also use an interlibrary loan service for students, staff and faculty through which access is provided to the collections of a nationwide network of health science libraries, including the National Library of Medicine. In addition, we have access to two companies that provide journal articles on demand to users' desktops within minutes.

In summary, there are significant benefits to be gained from the proposed new department; the Spencer S. Eccles Health Sciences Library fully supports its creation.

Sincerely yours,

A handwritten signature in black ink that reads 'Jean P. Shipman'.

Jean P. Shipman, MSLS, AHIP, FMLA  
Director

Spencer S. Eccles Health Sciences Library  
10 N 1900 E  
Salt Lake City, Utah 84112



January 27, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health Sciences

Dear Dr. Lee:

As Chairs of Basic Science Departments in the School of Medicine, we wish to express our strong support for the creation of a Population Health Sciences (PHS) Department. This department has the potential to have a profound positive impact on research carried out in clinical departments and on University of Utah Health Care clinical operations. Just as importantly, it will facilitate increased interactions between clinical and basic science departments. The new PHS department will work to advance health services and systems scholarship by expanding epidemiology, biostatistics and population studies capabilities and will provide a more direct path for basic scientists to impact health care.

Included below are specific examples of the expected positive impact of collaborations with the PHS Department on our units:

**Biochemistry Department:** Biochemistry investigators are intimately involved in research in infectious diseases, cancer mechanisms, and in a health sciences strategic initiative surrounding metabolism/diabetes. Investigators in this department are also increasingly interested in the role of the mitochondria in multiple diseases and conditions. Understanding how discoveries that emerge from these studies can be rapidly used to alter risk stratification and delivery of current treatments, for example in advanced heart failure, will be crucial to patient care.

**Biomedical Informatics Department:** Biomedical Informatics is at the center of a reorganization of our hospital-based data system. It is clear that this data will be invaluable in identifying patterns of successes and patterns of needed improvements in various integrated practice units (service lines). To become a learning health system, such data structure and mining must be optimized to facilitate the academic and operational missions of a PHS Department in health care delivery reorganization.

**Human Genetics Department:** Every new gene discovery being unveiled by the health sciences strategic initiative Utah Genome Project must be fodder for new diagnostics. The impact of such discoveries will undoubtedly unleash new mechanistic and therapeutic work—but such genetic/genomic information will also immediately risk-stratify patients for either treatment or no treatment of a certain kind. This principle is even clearer with the cost of undiagnosed and rare



Vivian S. Lee, MD, PhD, MBA  
Re: Proposed Population Health Sciences Department  
Page Two

diseases, which have a disproportionate genetic underpinning and disproportionate health care costs. Through the collaboration of Human Genetics and the proposed PHS Department, these discoveries will provide a clearer path for patients and their families, who often enter an unending diagnostic odyssey.

**Neurobiology and Anatomy Department:** Neurobiology and Anatomy is driving a neuroscience initiative with its cognate School of Medicine clinical departments to produce a basic/translational/clinical impact on neurologic and cognitive medicine. For this initiative to be successful, it must establish a clear focus, given that neuroscience diseases have not only enormous medical costs, but also disproportionate larger economic costs. Population Health Sciences has been proposed as a critical component of the neuroscience initiative, linking basic and translational research with clinical impact and outcomes.

**Oncological Sciences Department:** The Oncological Sciences Department is intimately linked to the Huntsman Cancer Institute's mission of improving cancer prevention, diagnosis, and treatment-- by facilitating and housing basic, translational and cancer population science programs. The Department houses faculty who continue to discover cancer-causing genes and pathways in human populations (e.g. BRCA1 and APC), as well as faculty with laboratory programs aimed at cancer gene diagnosis/detection, functional characterization, and therapy design. We also aim to maximize the impact of such discoveries into cancer delivery. Here, faculty within the new Department of Population Sciences will collaborate with our faculty on many levels, which will enable cancer gene discovery and facilitate an understanding of cancer gene/mutation prevalence and risk within populations. The PHS Department members will also be active in defining cost effective measures to reduce the burden of cancer in populations—while carefully considering outcomes and economic issues. Population health science investigators are sorely needed in this process, but their primary appointment in Oncological Sciences is not the ideal setting, as our faculty is largely focused on laboratory programs for cancer gene discovery, characterization, and therapy design – rather than population studies – but there will undoubtedly be close collaboration and synergy.

We look forward to the opportunity to work with the faculty of this new department.

Sincerely,



Christopher P. Hill, D.Phil.  
Leo T. and Barbara K. Samuels Presidential Endowed Chair  
Distinguished Professor and Co-Chair of Biochemistry



Wesley I. Sundquist, Ph.D.  
H.A. and Edna Benning Presidential Chair and  
Co-Chair of Biochemistry



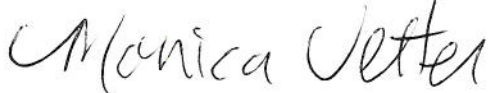
Vivian S. Lee, MD, PhD, MBA  
Re: Proposed Population Health Sciences Department  
Page Three



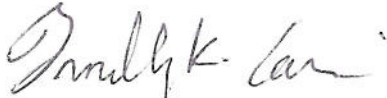
Wendy W. Chapman, Ph.D.  
Professor and Chair  
Department of Biomedical Informatics



Lynn B. Jorde, Ph.D.  
H.A. and Edna Benning Presidential Endowed Chair  
Professor and Chair, Department of Human Genetics



Monica Vetter, Ph.D.  
George and Lorna Winder Professor of Neuroscience  
Chair, Department of Neurobiology and Anatomy



Bradley R. Cairns, Ph.D.  
Professor and Chair  
Department of Oncological Sciences  
Investigator, Howard Hughes Medical Institute



January 21, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health Sciences

Dear Dr. Lee:

As Chair of the department of Biomedical Informatics, I am pleased to express my support for the establishment of the Department of Population Health Sciences (PHS) in the School of Medicine.

The creation of the department of PHS will provide additional opportunities for our faculty in the DBMI to participate in population's based studies. DBMI faculty will be able to contribute our expertise in building infrastructure for data acquisition and analysis necessary for PHS research and I envision that new and interesting collaborations will develop. Of particular interest to us is the ability to develop external collaborations that include both programmatic research and innovative infrastructure development, because it is increasingly difficult for us to secure funding for just infrastructure development outside the context of specific programmatic goals. I anticipate that this will also greatly benefit the Biomedical Informatics Core of the CCTS, as we anticipate the hiring of new faculty in the new department of PHS interested in the services of this core. I also expect that selected faculty from the new department of PHS will be offered adjunct faculty status in our department, creating new opportunities for research projects for our graduate students.

Overall I believe that the creation of the department of PHS will have a beneficial impact on the DBMI and I am happy to express my support for the creation of the Department of PHS in the SOM.

Sincerely,

A handwritten signature in blue ink, appearing to read "W. Chapman", with a long horizontal flourish extending to the right.

Wendy W. Chapman, PhD  
Professor and Chair  
Department of Biomedical Informatics



January 29, 2014

Michael K. Magill, M.D.  
Dr. Nymphus Frederick  
Hicken, Alta Thomas  
Hicken and Margarette  
Stahl Hicken Professor  
and Chairman,  
Department of Family  
and Preventive Medicine

Dean Y. Li, M.D., Ph.D.  
Associate Vice President for Research and  
Chief Scientific Officer, Health Sciences  
Vice Dean for Research, University of Utah School of Medicine  
George and Dolores Eccles Institute of Human Genetics  
Molecular Medicine  
15 N 2030 E  
Salt Lake City, UT 84112

Re: Letter of Support for Proposed Department of Population Health Sciences,  
University of Utah School of Medicine

Dear Dr. Li:

I am pleased to offer this letter of enthusiastic support for formation of the proposed new Department of Population Health Sciences (PHS) in the School of Medicine. This department will help position the University of Utah as a national leader in the extremely important transformation under way in the delivery of health care.

Health care delivery is changing more rapidly now than at any time in memory. Because of well-recognized high cost of care in the United States, combined with health outcomes that fall behind many other industrialized nations, we must transform health care to provide higher value. Value must be approached from the perspective of the care of populations in addition to our traditional focus of care of individuals. We provide some populations comprehensive care, everything from primary care to heart transplants. For other, regional and supra-regional populations, we provide only very subspecialized care. But value for either of these groups is defined as quality plus patient experience divided by cost. Another way of describing this is that we must achieve the so called "triple aim" in which we improve health of populations, experience care, and control cost.

The University of Utah is well positioned nationally and internationally to lead in this transformation. As a unified health sciences center (HSC) with an unusually



collaborative culture between the University of Utah Hospitals and Clinics, School of Medicine, and across the University, we are positioned to implement the new team-oriented approach to health care and scholarship that will characterize the transformation. We benefit from several existing building blocks in the School of Medicine in departments such as Family and Preventive Medicine, Internal Medicine, Pediatrics, and now the Department of Surgery, all of which have efforts underway in clinical research and development of health services. We have multiple new efforts across the HSC in areas such as Exceptional Patient Experience, LEAN Design, and health research training programs for faculty. I have been a part of this effort for the last decade, particularly in our primary care practice network transformation and resulting research and educational programs. More recently, I have taken on a new role in leadership with the University of Utah Health Plans (UUHP). Focused on maximizing value of care for defined insured populations such as University of Utah employees and Medicaid patients, UUHP is a key asset for accelerating transformation.

In the Department of Family and Preventive Medicine, our Division of Public Health is very focused on health of communities and linkages between advanced public health and clinical health care delivery. In addition, our Division of Occupational and Environmental Health focuses on work-based populations, including work related exposures, environmental exposures, illnesses and injuries resulting from these and programs to prevent them. Our Divisions of Family Medicine and Physician Assistants focus on provision of care at the front line, population-based, community level. The new Department of Population Health Sciences will complement these efforts by increasing our capabilities in care of identified patients.

The School of Medicine is also creating other building blocks that will help make our Department of Population Health Sciences successful. Notably, of course, the Health Systems Innovation and Research (HSIR) Program will facilitate work of clinicians in health services research in departments lacking critical mass of such faculty members at the present time. The Department of Population Health Sciences incorporating the HSIR Program will build our methodical strength with faculty who can work across the health system.

In addition, both the HSIR Program and the Department of Population Health Sciences are important steps toward an ambitious vision that we are proposing to call the Institute for Health Care Transformation (IHT). The proposed IHT will work closely with HSIR Program and PHS, while serving as a gathering place and facilitator of major interdisciplinary research collaboration across University of Utah Health Care, multiple health sciences colleges, other colleges and departments at the University, and with national and international academic and corporate collaborators. Indeed IHT has already stimulated exciting new programs of research and development for new health care delivery models in partnership with our more traditional health care delivery system. Examples include research on community perceptions and desires for health care transformation, developing a new program for direct employer contracting for health care, enhancing value of the full cycle of acute care episode from initial symptom to return to base line for the patient, and integration of care across of what is now a very fragmented continuum of care for the

vulnerable elderly from hospital to skilled nursing facility, hospice and palliative care, assisted living, home health, primary care, etc. The IHT is bringing together a multitude of collaborating entities to help the University of Utah be on the cutting edge creating the new health care delivery system. The Department of Population Health Sciences will be a key asset needed for a successful transformation and leadership role for the University and IHT.

In summary, the new department is a critical next step that will further enhance the stature and essential leadership role of the University of Utah. I look forward to its prompt creation and growth.

Sincerely,

A handwritten signature in black ink, appearing to read 'M. Magill', written in a cursive style.

Michael K. Magill, M.D.  
Professor and Chairman, Family and Preventive Medicine  
Executive Medical Director, University of Utah Health Plans  
University of Utah School of Medicine





January 28, 2014

Dean Y. Li, M.D, Ph.D.  
Associate Vice President for Research and  
Chief Science Office, Health Sciences  
Vice Dean for Research, University of Utah School of Medicine  
George and Dolores Eccles Institute of Human Genetics  
Molecular Medicine  
15 N 2030 E  
Salt Lake City, Utah 84112

Dear Dr. Li:

On behalf of the Division of Public Health in the Department of Family and Preventive Medicine, I am writing to express support for forming a Department of Population Health Sciences in the University of Utah School of Medicine. The need for scholarship to guide advances in health care delivery and managing patients from a population perspective is clear. This proposed department provides an opportunity for enhancing efforts in these critical areas by creating a new academic unit to facilitate expansion of relevant cross-institutional efforts. The Division of Public Health and the Department of Family and Preventive Medicine offer important collaborative resources that can both enrich the impact of this proposed department and benefit from these strengthened cross-institutional ties.

The field of Public Health is undergoing an important transformation. One relevant aspect of the emerging *New Public Health* is greater integration of *Classic Public Health* with the health care system. In this sense, the Division of Public Health offers an important complement to the mission of the proposed Department of Population Health Sciences – with Public Health originating from the community and population perspective and engaging the health care system while Population Health Sciences is starting with patient populations and extending into communities and populations. Such complementary perspectives augmented by a clear charge for Population Health Sciences to integrate scholarship efforts related to population health illustrate the potential institutional benefit that this new department provides.

Critical to the joint success of the Department of Population Health Sciences and academic units that have closely related scholarship missions, such as the Division of Public Health, will be adherence to the commitment to ‘augment and complement [existing academic units’ abilities] to strengthen their education and research programs’. Given the shared scholarly interests between this new department and other academic units, particular sensitivity will need to be exercised as the Department of Population Health Sciences becomes operational. However, given the breadth of opportunity in this area of scholarship and the clearly designated purpose of this new department, a complementary and collaborative relationship with these other units, including the Division of Public Health, can be attained.

As indicated in the *Program Request*, it is anticipated that this department will be developing a Doctor of Philosophy in Population Health Sciences degree. I encourage thoughtfulness in developing this degree to insure a clarified purpose that is consistent with the distinct Department of Population Health Sciences roles and that clearly complements existing graduate education in similar fields. I also encourage making efficient use of existing academic resources as the design of any additional graduate training is conceptualized.

In summary, I am pleased to offer the support of the Division of Public Health for the development and implementation of the Department of Populations Health Sciences. Linking with other academic units and finding areas of mutual benefit and collaboration will enhance the impact of this new department.

Respectfully,

A handwritten signature in black ink, appearing to read "Stephen C. Alder". The signature is written in a cursive, somewhat stylized font.

Stephen C. Alder, Ph.D.  
Chief, Division of Public Health



UNIVERSITY OF UTAH  
SCHOOL OF MEDICINE

Department of Medicine

January 23, 2014

Vivian S. Lee, M.D., Ph.D., MBA  
Senior Vice President for Health Sciences  
Dean, School of Medicine  
CEO, University of Utah Health Care

Dear Dr. Lee:

I write to enthusiastically support the creation of a Department of Population Sciences in the School of Medicine. This is the next logical step in the development of health services research within the University.

As you know, our department has made a strong investment in biostatistics and other aspects of population sciences. This has resulted in robust funding in these areas and a high level of activity within the Department of Internal Medicine in various aspects of health services research. However, the absence of a well-defined Department of Population Sciences has limited our ability to recruit and further develop these programs and provide the faculty for the education of residents and students that are necessary in developing population sciences. The next logical step to address these shortcomings is to create a department that will be able to robustly recruit additional faculty and provide the math logic support necessary for development within the clinical departments, including Internal Medicine, of health services research.

I enthusiastically support the proposed department and will be happy to have Internal Medicine partner in any way with recruitment and development of faculty and graduate students to this new department.

Sincerely,

A handwritten signature in black ink that reads "John Hoidal".

John R. Hoidal, MD  
Professor of Medicine  
The Clarence M. and Ruth N. Birrer Presidential Endowed Chair  
Chair, Department of Internal Medicine

JRH:kj





UNIVERSITY OF UTAH  
SCHOOL OF MEDICINE

February 5, 2014

Vivian S. Lee, M.D., Ph.D., M.B.A.  
Senior Vice President for Health Sciences  
Dean, School of Medicine  
CEO, University of Utah Health Care

Dear Dr. Lee,

I am writing this letter in support of the proposed new Department of Population Health Sciences. The new department addresses a high priority need for the University of Utah Health Sciences Center. Population health sciences is a multi-disciplinary field that broadly encompasses methods of inquiry for examination and improvement of health in communities of individuals.


The University of Utah has experienced significant growth in epidemiology, biostatistics, and health services research in the last decade. Within the School of Medicine, the development of these disciplines has been centered in the clinical departments, particularly Internal Medicine, Family and Preventive Medicine, and Pediatrics. Establishing a new Department of Population Health Sciences will facilitate further expansion particularly in areas that are currently underrepresented such as health policy.

Establishing a Department of Population Health Sciences demonstrates the University's recognition of the importance of population health sciences in the delivery of high quality clinical care. The commitment of resources will foster recruitment of new faculty who are leaders in methodologically-oriented research in population health sciences. The establishment of a graduate program in association with the new department will augment training opportunities for students and fellows. Faculty in the new department will contribute to education of students seeking professional degrees within the Health Sciences Center, most notably including the School of Medicine.

It is vital that the Department of Population Health Sciences work in a complementary and synergistic way with existing departments in the School of Medicine, as well as throughout the Health Sciences Center. Academic units such as the Divisions Epidemiology, Genetic Epidemiology, and Public Health which already do a substantial amount of work in the field of population health sciences should continue to be supported. It is expected that most of the faculty in the new department will be recruited from outside the University of Utah.

In summary, I enthusiastically support the creation of the Department of Population Health Sciences. I anticipate that many of the faculty members in the Division of Epidemiology will have adjunct appointments in this new department.

Sincerely,



Matthew Samore, MD

Director, Salt Lake Informatics, Decision Enhancement, and Analytic Science (IDEAS) Center

VA Salt Lake City Health Care System

The Elbert F and Marie Christensen Research Professorship

Chief, Division of Epidemiology

Professor of Internal Medicine

University of Utah



UNIVERSITY OF UTAH  
HEALTH CARE

Department of Neurology

January 13, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health Sciences

Dear Dr. Lee:

The Department of Neurology strongly supports the decision to establish a new Department of Population Health Sciences in the School of Medicine. Our department's research and clinical efforts could greatly benefit from a basic science department that emphasizes discovery research in health system research and delivery innovation.

The Department of Neurology has already engaged in expanding research in the area of population medicine. In particular, we have used the UPDB to query familial and environmental causes of Parkinson disease and Amyotrophic Sclerosis. We very enthusiastically await the growth of this department both in terms of intellectual expertise and provision of core services. I can currently foresee at least four junior faculty members who were just hired by my department and who would like to seek adjunct appointments in the Department of Population Science.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Stefan M. Pulst'.

Stefan M. Pulst, M.D., Dr. Med.  
Professor and Chair  
Department of Neurology  
University of Utah School of Medicine





January 27, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Department of Population Health Sciences

Dear Dr. Lee:

I write to express my strong support for the decision to establish a new Department of Population Health Sciences in the School of Medicine.

The Department of Population Health will provide a durable basic science departmental infrastructure for faculty focusing on population health, and provide support, expertise and mentorship for physician investigators in our department.

We have researchers in all six divisions (Family Planning, Gynecology, Gynecologic Oncology, Obstetrics - Maternal Fetal Medicine, Reproductive Endocrinology, and Urogynecology) who will have their methodologically-oriented research enhanced by the establishment of this department.

We have 58 faculty, 6 fellows, 24 residents and many health professions students who will utilize the expertise, mentorship and infrastructure within the new department.

The epidemiology, biostatistical core and population study resources located in this department will also reduce duplication of services while enhancing the spectrum of research available at this institutional. Clearly, top-tier medical schools have recognized the need for such a resource.

In summary the Department of Obstetrics and Gynecology enthusiastically support the establishment of this new department.

Sincerely,

C. Matthew Peterson, M.D.  
John A. Dixon Presidential Professor and Chair  
Department of Obstetrics and Gynecology





Moran Eye Center 

January 7, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Subject: Proposed Department of Population Health Sciences in the School of Medicine

Dear Dr. Lee:

As Chair of Ophthalmology and Visual Sciences and CEO of the John A. Moran Eye Center, I am delighted to extend my full support to the creation of a Department of Population Health Sciences in the School of Medicine. I believe the new department and its expertise in and advocacy for health systems outcomes and delivery research will be a critical addition to the School of Medicine and to the broader health sciences, and will also afford opportunities for additional collaborations with main campus. Current faculty across departments will greatly benefit, as new talent in the population health sciences field will be accessible for further collaboration and discovery.

Increasingly, we have faculty working on outcomes research and interested in pursuing population studies. We also have ongoing population research that will find the expertise provided by this department as critical to their success. It has been an important need for a long time that is now being addressed. I know that we have lost some vital recruits because of our lack of support in this area to date.

You have my full support for this new department and we, as a unit, will be very pleased to see this come to fruition.

Sincerely,



Randall J. Olson, MD  
Chair, Department of Ophthalmology and Visual Sciences  
CEO, John A. Moran Eye Center



CHARLES L. SALTZMAN, M.D.  
Department Chair

FOOT AND ANKLE  
Timothy C. Beas, M.D.  
Krisan Nekyach, M.D.  
Charles L. Saltzman, M.D.

HAND AND MICROSURGERY  
Don A. Coleman, M.D.  
Douglas T. Hutchinson, M.D.  
Andrew R. Tyler, M.D.  
Angela A. Wang, M.D.

HP AND KNEE  
TOTAL JOINT RECONSTRUCTION  
Harold K. Dunn, M.D.  
Jeremy M. Galland, M.D.  
Erik N. Kuback, M.D.  
Christopher E. Pelt, M.D.  
Christopher L. Peters, M.D.

PEDIATRIC ORTHOPAEDICS  
Chief: Suzanne Fenslow, M.D., FAACS  
Kristen L. Carroll, M.D.  
Jacqueline D. Astous, M.D., FRCS(C)  
John Haffin, M.D.  
Theresa Hennessy, M.D.  
Stephanie M. Holmes, M.D.  
Stephen D. Santosa, M.D.  
John T. Smith, M.D.  
Peter M. Stevens, M.D.  
Alan K. Stone, M.D.  
Marcello R. Wozniak, M.D.

SARCOMA AND  
ONCOLOGY SURGERY  
Kevin B. Jones, M.D.  
P. Lor Rendell, M.D., FACS

SHOULDER AND ELBOW SURGERY  
Robert Z. Tachjian, M.D.

SPINAL DISORDERS  
Dennis S. Brooker, M.D.  
Brandon D. Lawrence, M.D.  
William Ryan Spiker, M.D.

SPORTS MEDICINE  
Stephen K. Ask, M.D.  
Robert T. Bask, M.D.  
Patrick E. Giza, M.D.  
Trevor G. Maak, M.D.  
David J. Peterson, M.D.  
Amy P. Powell, M.D.

TRAUMA  
Thomas F. Higgins, M.D.  
Erik N. Kuback, M.D.  
David Rotberg, M.D.

RESEARCH  
Andrew E. Anderson, Ph.D.  
Kent N. Bachus, Ph.D.  
Roy D. Blevins, Ph.D.  
Catherine Lac Camille, Ph.D.  
Heath B. Henninger, Ph.D.  
Man Hung, Ph.D.  
Tuyen Jayapavan, Ph.D.  
Bruce A. MacWilliams, Ph.D.  
Sanna Saxena, Ph.D.

8 January 2014

**Re: Creation of Department of Population Health Sciences (PHS)**

**To Whom It May Concern:**

I am writing in full support of the creation of Department of Population Health Sciences (PHS). The department is needed to bring the SOM into a competitive position to develop strong clinical, health services, and population based scientific academic programs. This is an area of increasing importance to federal funding agencies (e.g., NIH, PCORI and AHRQ) at a critical time in the history of this nation's healthcare system realignment.

As articulated by those who have conceived this new department, the PHS will be a center for education, investigation and expertise in health services, cost, quality, outcomes, and health delivery systems research. The department's work will be both inward looking and outward facing - and in that process have the unique opportunity to transform healthcare within the University system as well as the state of Utah.

The Department of Orthopaedic Surgery has particular interest in supporting the creation of a Department of Population Health Sciences, as the nature of what we do clinically lends itself to analysis of the outcomes/cost effectiveness, and utility of interventions. A PHS department will bring together the academic expertise in epidemiology, biostatistics and population studies to help us improve our care processes and expand knowledge of outcomes for musculoskeletal care.

In summary, I want to express my full support of the creation of this new department. The potential benefits to our department, the SOM, the University and the state of Utah are outstanding.

Sincerely,

**Charles L. Saltzman, M.D.**  
**Louis S. Peery, M.D. Presidential Endowed Professor**  
**Chairman, Department of Orthopaedics**



January 8, 2014

EDWARD B. CLARK, M.D.  
Wilma T. Gibson Presidential Professor  
Chairman, Department of Pediatrics  
Chief Medical Officer, PCHMC

Vivian S. Lee, M.D., Ph.D., M.B.A.  
Senior Vice-President for Health Sciences  
Dean, School of Medicine  
CEO, University of Utah Health Care  
5<sup>th</sup> floor CNC

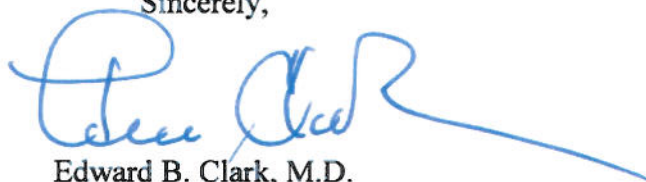
Dear Dr. Lee:

I am pleased to write this letter in support of the establishment of the Department of Population Health Sciences (PHS) at the University of Utah. As Chair of the Department of Pediatrics and Chief Medical Officer at Primary Children's Hospital, I believe this department will serve faculty, fellows, residents, and students and will assist in preparing them for the demands of health care transformation.

With expertise in epidemiology, biostatistics and population studies, this basic science department will be a critical partner to outcomes researchers in the Department of Pediatrics. It will also strengthen methodologically-oriented research in the population health disciplines throughout the health sciences campus and the greater University community.

We believe this PHS Department will be an asset to the University of Utah and to our Department of Pediatrics and look forward to working with this new Department in the near future.

Sincerely,



Edward B. Clark, M.D.

Wilma T. Gibson Presidential Professor  
Chair, Department of Pediatrics  
Chief Medical Officer, Primary Children's Medical Center

P.O. Box 581289  
Salt Lake City, Utah 84158 (mailing)

295 Chipeta Way, 2S010  
Salt Lake City, Utah 84108 (campus)  
Phone: 801-587-7415  
Fax: 801-587-7417  
Email: ed.clark@hsc.utah.edu



January 24, 2014

Vivian S. Lee, M.D., Ph.D., M.B.A.  
Senior Vice President for Health Sciences  
Dean, School of Medicine  
CEO, University of Utah Health Care  
University of Utah

Re: New Department of Population Health Sciences in the School of Medicine

Dear Dr. Lee:

I am writing to express my strong support for the formation of a *Department of Population Health Sciences* in the School of Medicine. Last year, I accepted the position of Surgery Chair in part because of the University of Utah's vision for health care transformation, its emphasis on health systems and health services research, and the commitment to use this research to improve patient care. These goals parallel my own interests: including health services research, education, global surgery and particularly, surgical access, quality, and outcomes.

The Department of Surgery is building a Surgical Systems Research and Innovation (SSIR) team to coalesce with Health System Innovation and Research (HSIR) Program investigators who, among many, would greatly benefit from the strengths of an academic department dedicated specifically to population health sciences.

In addition, with the support of Health Sciences Center central administration, we recently recruited Ben Brooke, MD, PhD, a vascular surgeon whose research interests include the design and execution of clinical studies to evaluate factors that influence the quality of care, patient safety, risk of readmission, clinical outcomes following cardiovascular interventions and other high-risk surgical procedures. He was recently awarded a PCORI grant to study "Patient-Centered Transitions for Episodes of Surgical Care" and heads the new Department of Surgery U-INQUIRE (Utah Intervention Quality and Implementation Research) group. The group meets bi-monthly to discuss research proposals, providing a rich forum for constructive feedback and collaboration among faculty in numerous departments throughout the University.

The resources and infrastructure provided by this new department would greatly complement departmental hiring packages; which in turn positively impact the caliber of faculty our School of Medicine departments are able to attract and recruit.



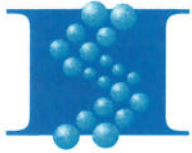
As Chair of the Department of Surgery, I lend my utmost enthusiastic support for the development of a prominent and productive Department of Population Health Sciences that will both inform our clinical practices and enhance academic productivity.

Sincerely,

A handwritten signature in blue ink, appearing to read 'S. Finlayson', written in a cursive style.

Samuel R. G. Finlayson, MD, MPH  
Professor and Chair  
Department of Surgery

January 17, 2014



**HUNTSMAN**  
CANCER INSTITUTE  
UNIVERSITY OF UTAH



MARY C. BECKERLE, PH.D.  
CEO AND DIRECTOR  
RALPH E. AND WILLIA T. MAIN  
PRESIDENTIAL PROFESSOR

2000 CIRCLE OF HOPE  
SALT LAKE CITY, UTAH 84112-5550  
OFFICE 801 581 4485  
FAX 801 581 2175  
mary.beckerle@hci.utah.edu

Vivian Lee, MD, PhD, MBA  
Senior Vice President for Health Sciences  
University of Utah Health Sciences Center  
Via email: [vivian.lee@hsc.utah.edu](mailto:vivian.lee@hsc.utah.edu)

Dear Dr. Lee:

On behalf of Huntsman Cancer Institute (HCI), I am writing this letter to express our strong support for the establishment of a Department of Population Health Sciences within the University of Utah Health Sciences Center. HCI has been among the earliest supporters of this initiative as we believe that the establishment of this department will provide much-needed resources and specialized leadership for existing population sciences researchers at the University, and will be key to taking our population sciences programs to the next level.

As one of 67 National Cancer Institute-designated Cancer Centers in the nation, our major goal is to translate high-impact laboratory findings into clinical applications through full integration of our laboratory, clinical, and population sciences research endeavors. Our Center is organized around the theme of cancer genetics and features four robust cancer research programs that span the basic cell biology to cancer control and population sciences. Indeed, one of our nine key initiatives in HCI's 2009-2014 strategic plan is the need to ensure full integration of our population sciences research program in the cancer center. Major goals of our population sciences-focused cancer research is to define genetic risk factors for cancer, explore how best to communicate genetic and genomic information, develop and improve adherence to cancer screening guidelines, and improve patient outcomes by, for example, addressing symptom management, survivorship, and disparities. From the perspective of HCI, the integration of robust population science in the medical research arena is essential to ensure the maximum impact of our work.

Growth of our research portfolio in cancer population sciences is a priority for HCI. This area of investigation is one of our defining signature research areas that builds on our institutional strength in genetics and our unique research assets such as the Utah Population Database and our well characterized high-risk cancer groups. In addition, a central requirement for National Cancer Institute designation as a comprehensive cancer center, the premiere national ranking, is depth and breadth of research in cancer population sciences. The development of this new Department will allow for the expansion of this critical area for HCI.

The establishment of a Department of Population Health will be critical to HCI's mission to integrate strong training within the cancer research efforts. The new department will create a framework for development of a central program of advanced graduate training in population health sciences. The availability of such a training program will dramatically enhance HCI's ability to recruit talented cancer population sciences researchers to our community.

There are tremendous research opportunities in cancer population sciences and HCI is committed to supporting new faculty by providing state of the art infrastructure and research space. HCI currently has a national search underway to recruit a Senior Leader of Population Sciences and essentially all of our top candidates have asked specifically about whether the institution is planning to establish an academic home for population health sciences, including cancer population sciences. I believe that the establishment of a new department that can serve as an academic hub for training and research, within the context of health sciences, will be a major attraction for recruitment of top talent in this critical area.



Strong endorsement for developing an academic home for Population Sciences in the School of Medicine was expressed by HCI's distinguished External Advisory Board, which includes a Nobel laureate and several members of the National Academy of Science and Institute of Medicine. In their written remarks after our March 2013 meeting, they commented: "*Strong consideration should be given to developing a Department of Population Sciences that would house faculty with epidemiologic, behavioral, or statistical expertise ...*" Support for this recommendation will be viewed as very strong institutional support for the mission of the Cancer Center when we are competitively reviewed by the National Cancer Institute.

Finally, I believe that the University of Utah Health Sciences has the opportunity to be a major contributor to developing research based best practices in healthcare. The fact that the University of Utah is home to the Utah Population Database (UPDB), the largest and most comprehensive genealogical and population database in the world, positions us to be international leader. For more than 30 years, researchers have used this resource to identify and study families that have higher-than-average incidence of cancer or other diseases, to analyze patterns of genetic inheritance, and to identify specific genetic mutations. There are extraordinary resources on campus, and extraordinary opportunity to make major impacts on human health. Our research partners in population health sciences are key to this effort and the new Department of Population Health Sciences will create a hub for research and education that will greatly enhance our ability to recruit outstanding faculty and students, as well as enhance the impact of our research. For HCI, this department will provide a focused academic home in which many of our cancer researchers will be able to participate in graduate training and engage collaboratively with others in their disciplines who work in non-cancer disease areas.

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In summary, I want to restate that HCI is in full support of the initiative to establish a Department of Population Health Sciences at the University of Utah. We believe that the establishment of this department will be essential to maintain and build upon our successes to date in this arena. Please let me know if there is any further information I can provide.

Sincerely yours,



Mary Beckerle, PhD  
Ralph E. and Willia T. Main Presidential Professor  
CEO and Director, Huntsman Cancer Institute  
Associate Vice President for Cancer Affairs, University of Utah

Cc: Dean Li, MD, PhD,  
Associate Vice President for Research and Chief Scientific Officer,  
University of Utah Health Sciences Center



UNIVERSITY OF UTAH  
SCHOOL OF MEDICINE

January 21, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health Sciences

Dear Dr. Lee:

As the Program Directors of the Center for Clinical and Translational Science (CCTS), we wish to confirm our enthusiastic support for the establishment of the Department of Population Health Sciences in the School of Medicine.

The CCTS serves as a home and laboratory for those engaged in Clinical and Translational Science. We also provide a significant educational resource for our community through the Masters of Science in Clinical Investigation and through our certificate programs in Personalized Healthcare, Comparative Effectiveness, and Patient Centered Outcomes Research.

The new Department of Population Science will serve as an invaluable resource and partner for the CCTS. The goals of the new department include serving as a central educational backbone for population health sciences. The CCTS welcomes the increased capacity in Population Science methods that will come from the faculty members in the new department. These individuals will be vital as we continue to grow our education programs and develop core resources including those for health economic analysis and systematic review.

In summary, the new Department of Population Science will advance the mission of the CCTS, the Health Sciences, and the University of Utah.

Sincerely,

Don McClain, MD, PhD  
Program Director, Utah Center for Clinical and Translational Science,  
University of Utah Health Sciences Center  
Professor of Internal Medicine and Bettilyon Chair in Diabetes Research  
Professor of Biochemistry  
Interim Chief, Division of Endocrinology and Metabolism

Carrie L. Byington, MD  
Program Director, Utah Center for Clinical and Translational Science,  
University of Utah Health Sciences Center  
H.A. and Edna Benning Presidential Professor of Pediatrics  
Associate Vice President for Faculty and Academic Affairs  
Vice Dean Academic Affairs and Faculty Development

The University of Utah  
School of Medicine  
Center for Clinical and Translational Science  
10 N. 1900 East, rm 22  
Salt Lake City, Utah 84112-5890  
Phone (801) 581-6736  
Fax (801) 585-1461





# University of Pittsburgh

## Center for Research on Health Care

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2/4/2014

**Wishwa N. Kapoor, MD, MPH**  
Director  
Falk Professor of Medicine  
Professor of Health Policy and  
Management

**Mark S. Roberts, MD, MPP**  
Co-Director  
Professor and Chair, Health  
Policy and Management

**Michael J. Fine, MD, MSc**  
Associate Director  
Professor of Medicine

**Lynn M. Rago, MBA**  
Administrator

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health Sciences

Dear Dr. Lee:

I am thrilled to join the University of Utah School of Medicine faculty March 1<sup>st</sup> to serve as the inaugural director of the new Health System Innovation and Research (HSIR) Program. The institution's commitment to developing additional expertise and resources dedicated to health care delivery and patient population research, and to improving the care of patient populations, is clear and was key in my decision to move to Utah.

HSIR will focus on building the University's health services research by connecting the University of Utah's academic and Health Care units, and partnering with other health systems. As director of the new HSIR Program I fully endorse the creation of a Department of Population Health Sciences in the School of Medicine. It is proposed that HSIR form a division in the new department. This will provide a stable academic home for the interdisciplinary work of HSIR, and position it within the larger Population Health Sciences unit.

Population Health Sciences will serve as the academic home for a variety of basic science researchers critical to the study of health care delivery and population health. These include individuals with advanced training in health policy and management, and community and behavioral health. In the current structure, these faculty are necessarily integrated into clinical departments. While close collaboration with clinicians is important, and a focus of HSIR, the clinical faculty model makes it challenging to recruit the best and brightest in these areas. The creation of a Population Health Sciences department will mitigate these challenges and allow us to ensure the University's programs in these areas grow to be exemplary.

The scientists housed in Populations Health Sciences will be able to provide mentorship and support for physicians and clinical investigators across the institution. As I interviewed for my new role directing HSIR, I met clinical and research faculty from multiple departments in the School of Medicine. The ideas and motivation exist to reshape the health care delivery system locally and inform the

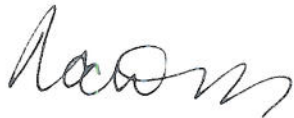
national debate, yet the mentorship and methodological expertise are not readily accessible. Population Health Sciences, and HSIR, will fill this critical gap and accelerate the development and productivity of these faculty.

In addition to applied work, Population Health Sciences, as a basic science department, will allow investigators the opportunity to develop new methods that can be used in service of its missions to study health care delivery and population health. By bringing together methodological expertise in one home, the intellectual capacity will exist not only to conduct applied research in these areas but also to advance the methods used in such research. While many of these skills exist in the University, an academic home will allow the sum to be greater than the individual parts.

The vision proposed for Population Health Sciences, and HSIR, is critical for the new models of research in this health care delivery and population health. Utah is at the leading edge of a trend exemplified by work coming out of new funding sources, such as the Patient Centered Outcomes Research Institute (PCORI). As the recipient of one of 11 Clinical Data Research Network infrastructure contracts from PCORI, I believe strongly that the infrastructure built through Population Health Sciences is essential to support research and evaluation of new models of care necessary that are necessary to create a sustainable health care infrastructure for both the State and Nation.

Population Health Sciences is critical to ensure the success of HSIR. It provides the academic home that will allow me to recruit the leading investigators in the area of health systems innovation. I fully support its creation and look forward to playing a part in its growth as a nationally recognized Department.

Sincerely,

A handwritten signature in black ink, appearing to read 'Rachel Hess', written in a cursive style.

Rachel Hess, MD, MS  
Associate Professor of Medicine, Epidemiology, and Clinical and Translational  
Sciences  
Department of Medicine  
Division of General Internal Medicine  
University of Pittsburgh School of Medicine

February 6, 2014

Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
CEO, University of Utah Health Care  
Senior Vice President for Health Sciences  
University of Utah

Re: Proposed Department of Population Health Sciences in the School of Medicine

Dear Dr. Lee:

I wish to express my enthusiastic support for the creation of a Department of Population Health Sciences in the School of Medicine.

There is great strength in health in the College of Social and Behavioral Science in numerous departments in the college (Psychology, Anthropology, Family and Consumer Studies, Sociology, Economics, and Geography). As many of our faculty members focus on patient populations dealing with chronic illnesses such as diabetes and cancer as well as issues surrounding health care delivery (e.g., risk communication; patient-doctor communication), the resources of this new department will be of great interest to many graduate students and faculty members in these departments.

Further, I can imagine a number of potential collaborations among faculty members in this new department and departments in my college. The methodological and content expertise available in the department will also pave the way for PCORI funding for a number of our investigators and enhance the likelihood of their success.

I look forward to the initiation of this department and the collaborations that will be made possible among our faculty.

Sincerely,



Cynthia A. Berg  
Interim Dean, College of Social and Behavioral Science  
Professor of Psychology





UNIVERSITY OF UTAH  
SCHOOL OF MEDICINE

**MEMORANDUM**

**TO:** Graduate Council  
Academic Senate Executive Committee  
Academic Senate

**FROM:** Vivian S. Lee, MD, PhD, MBA  
Dean, School of Medicine  
Senior Vice President for Health Sciences  
CEO, University of Utah Health Care

A handwritten signature in blue ink, appearing to be 'V. Lee', located to the right of the 'FROM' field.

Dean Y. Li, MD, PhD  
Associate Vice President for Research and Chief Scientific Officer, Health  
Sciences  
Vice Dean for Research, School of Medicine

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**DATE:** February 10, 2014

**SUBJECT:** Proposal to Establish a new School of Medicine Department of Population Health Sciences and to Discontinue the Department of Physiology in 2015

It is with great pleasure that we present two proposals for your consideration: the first to establish a School of Medicine Department of Population Health Sciences (PHS) and the second to discontinue the School of Medicine Department of Physiology after the final Physiology graduate student completes his degree requirements in Spring 2015. These two actions are proposed separately, but are presented together because they are part of a health sciences center strategic realignment in our clinical, research and education missions. The proposed changes position the University of Utah to lead the nation in health care transformation both academically and operationally.

The **Department of Population Health Sciences** will provide a durable basic science departmental infrastructure for faculty whose research focus is on health care delivery and broad-based *patient* populations; it will provide support, expertise and mentorship for physicians and investigators across *all* departments who wish to pursue research interests and questions from their current academic homes; and, finally, it will advance the methodological bases for improving the care of patient populations and health care delivery.

As a major academic health sciences center, we believe we have a unique and timely opportunity to position Utah at the forefront of health care transformation. The creation



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of this new department, which will extend existing population health and health systems research expertise at the University and build further collaborations across the campus, will be key to achieving this goal.

An enormous amount of creative work has gone into planning this new department. With the guidance of a large number of stakeholders, and the overriding support of the School of Medicine faculty, we believe we are proposing a structure that balances the need for departmental autonomy with integration and collaboration across departments and programs, and shared ownership of investigative processes. We are pleased to present this proposal for your consideration.

Over the past two years, the School of Medicine **Department of Physiology** has been reorganized in the service of strategic issues, specifically to strengthen neuroscience and cardiovascular research initiatives and to support the evolution of physiology in each of the School of Medicine basic science departments. Only the Acting Chair and one faculty member remain in the department, with plans for transition to another department of that faculty member; and two final graduate students are completing degree requirements. Permission to dissolve this department when the final graduate student meets his degree requirements will allow us to complete this strategic reorganization.

Thank you for your review of these proposals.