To:         Sarah Mangelsdorf, Provost  
            Jocelyn Milner, Director, Academic Planning and Institutional Research

From:      Robert N. Golden, M.D.  
            Dean, School of Medicine and Public Health

Date:      January 29, 2015

Subject:   Proposal to change the name of the Department of Family Medicine

I am pleased to forward the recommendation of the Academic Planning Council of the School of Medicine and Public Health (SMPH), that the name of the Department of Family Medicine be changed to the Department of Family Medicine and Community Health.

The SMPH Academic Planning Council, at its January 21 meeting, unanimously and enthusiastically endorsed the proposed change.

I would be pleased to respond to any questions you may have concerning this proposal.

Enclosure

Cc:         Valerie Gilchrist, M.D., Chair, Department of Family Medicine  
            Linda Haskins, Dept. Administrator, Department of Family Medicine
Proposed Name Change for the Department of Family Medicine at the University of Wisconsin School of Medicine and Public Health

OVERVIEW
Community health has been essential to the mission of the Department of Family Medicine (DFM) since it was established as the Department of Family Medicine and Practice in 1970 and when the name was changed to the Department of Family Medicine in 1992. By changing the name to the Department of Family Medicine and Community Health, the Department confirms its original mission in an era when the relationships between the clinical, social, environmental and demographic factors that affect health are critical. Renaming DFM to include Community Health will emphasize the importance of community for health for students and residents who study with us, for faculty research and scholarship, for the School of Medicine and Public Health, and for the communities we serve. This is consistent with both the name change of the UW SOM to the UW SMPH and the call for greater integration of public health and primary care nationally: http://www.iom.edu/Reports/2012/Primary-Care-and-Public-Health.aspx

HISTORY
The plan for the educational programs of the DFM began with communities from the outset. Postgraduate training was established to be community-based and statewide, reflecting different populations and different needs. Our goal was to produce graduates who would enter practice in communities throughout the state and nation, with an emphasis on service to communities of need. The over 1300 graduates of the UW Department of Family Medicine residency programs have distributed themselves throughout the state, nation and world. In 2013, 65% of residency graduates began practice in Wisconsin. On average, 30% of our graduates are practicing in rural communities in Wisconsin and other states. Without our graduates, Wisconsin would have an increase in Primary Care Health Professionals Shortage Areas (PCHPSA) of almost 50%, adversely affecting access, impact quality and costs of care. In addition, a disproportionate number of graduates who have moved outside of Wisconsin have practiced in underserved communities. (Data from Robert Graham Center http://www.graham-center.org/online/graham/home/tools-resources/maps/local/wi.html ) All residency campuses of the DFM have working relationships with FQHCs and community agencies, adding to the care of the medically disadvantaged.

MOVING FORWARD
Community Health is more than the delivery of services to populations in need. It is training the next generation of family physicians to truly be community responsive through a curriculum which emphasizes skills of population management, appropriate use of resources, partnering with communities for health and advocacy. Particularly since the passage of the Patient Protection and Affordable Care Act with its goal to insure tens of millions of Americans and its focus on prevention, our graduates will need to be prepared to find new ways to manage chronic diseases, deliver acute care, and provide effective preventive interventions for both the individual and designated populations in a practice environment that may be quite different from how the current health care delivery system is structured.

NAME OF PROGRAM AND IMPLEMENTATION
The Department of Family Medicine proposes to change its name to the Department of Family Medicine and Community Health. The timeline for implementation is tentatively scheduled for July 1, 2015, pending approval by the SMPH Academic Planning Council, University Academic Planning Council and reading at the Faculty Senate.
The Department of Family Medicine and Community Health will continue to use the administrative structure and governance that currently exist within the Department of Family Medicine. The residency programs within the DFM will assume the new name. There is no impact on admissions to the residency programs, completion requirements or undergraduate course listings.

Community health includes the following components:

1. **Practices** that are community based, community responsive, and that use management and clinical methods that address needs of patients at greatest risk for adverse clinical outcomes. We will not only aspire to excellence in clinical management, but also, necessarily, in population management collaborating with others to address four key modifiable determinants of health: access and quality of health care; individual health behaviors; physical environment; and socioeconomic factors (Ref: UW Population Health Institute / County Health Rankings).

2. **Educational programs** for students, residents, and fellows of the Department that emphasize clinical care in the context of specific communities, principles of public and population health, strategies for addressing disparities within practices and communities, and an understanding of health that includes partnerships with providers, agencies and community resources in a collaborative approach to health. These educational programs include community engagement and service, leadership and advocacy skill development, and both individual and population strategies for improving health.

3. **Research** which emphasizes clinical quality improvement, clinical health services, community engaged research, type II clinical translational research and the development and assessment of policies that affect health. Collaborative research requires partnering with other disciplines in the School of Medicine and Public Health in conjunction with other schools and programs in the University and the University of Wisconsin System, State and local and tribal Public Health departments, and local community groups.

**STRENGTHS, COLLABORATIONS AND PARTNERSHIPS**

**Department:**

- Statewide residency practices and affiliates in diverse communities with diverse populations.
- A UW Health system of family medicine clinics in diverse communities.
- A single source of clinical data collection (UWMF/Epic) which lends itself to understanding clinical populations, quality and access issues, data warehousing and use of resources for patient care.
- A strong record of externally sponsored clinical research funding which has featured research in community based practices.
- Fellowships that incorporate a community service and research perspective such as addiction.
- Statewide faculty with a long tradition of community involvement and services.
- A strong working relationship with the Milwaukee campus through Aurora Health Care, the City of Milwaukee Health Department and ICTR-CAP’s past support of Community Health Connections and its ongoing efforts in community engaged research as well as dissemination and implementation.
- Department leadership in rural training and education initiatives through the Wisconsin Academy of Rural Medicine (WARM) and in urban education with the Training in Urban Medicine and Public Health (TRIUMPH).
School of Medicine and Public Health Strengths:

- The commitment to, and recognition of, the context of health. Quality healthcare is necessary but not sufficient for health as summarized by the IOM definition of Public Health ("what we do, as a society, to create the conditions in which people can be healthy"). "...fulfilling society's interest in assuring conditions in which people can be healthy." IOM 1988¹, 2012²

- A transforming medical student curriculum which emphasizes the integration of basic sciences, clinical medicine, and public health. Several DFM faculty are key leaders.

- The Wisconsin Partnership Program support for OAC grants to community organizations and programs that emphasize academic partnerships and community health.

- The Institute for Clinical and Translational Research (ICTR), with training of scientists for clinical research, educational outreach programs to communities, Community/Academic Partnership (CAP) activities to help match scientists with communities, expanded support for dissemination and implementation of research findings into practice, and ongoing funding for faculty initiated translational research.

- The Community Engagement component of ICTR-CAP in collaboration with the Wisconsin Research and Education Network (WREN), a strong and widely respected primary care PBPN, the Collaborative Center for Health Equity (CCHE) with a focus on disparity research and community involvement, and Community Health Connections, which forged important connections between researchers and community stakeholders in the early days of ICTR-CAP. Faculty and staff affiliated with each of these efforts have developed research partnerships throughout the state, with emphases on underserved and high risk populations. Many of these components of community engagement are led by faculty members from the DFM.

- The University of Wisconsin Medical Foundation, the largest academic multispecialty group practice in the United States, has an ongoing commitment to supporting clinical health services research and quality improvement.

- The Department of Population Health Sciences and its UW Population Health Institute have been a state and national leader at developing pathways for assessing and improving health.

- The UW Master of Public Health Program, the UW Population Health Service Fellowship, the UW Preventive Medicine Residency all of which have key participation by DFM faculty.

- Partnerships with the WARM and TRIUMPH programs, both of which are led by DFM faculty.

State Strengths:

- Strong links with the Wisconsin Division of Public Health through ongoing clinical programs in surveillance and data analysis from DFM practices. Strong presence for family medicine in the major urban public health departments (Milwaukee and Madison).

- The Wisconsin Medical Society (WMS) has programs in clinical quality, workforce development, and a strong family medicine and generalist presence in WMS leadership. The Wisconsin Medical Journal is edited by a member of the DFM and other faculty members serve on the editorial board of the journal.

- Long and historic relationships between the DFM and the large health systems which characterize the delivery of care in Wisconsin. Family physicians are in leadership positions in many of the largest systems and there are strong affiliations in education and research between large health systems in the state.

• DFM members also contribute to State health department initiatives, including the Wisconsin Council on Immunization Practices and the development of the decennial State Health Plan ("Healthiest Wisconsin").
• The continuing commitment of state government to expand care to all residents of the state.

LIST OF FACULTY (tenured)
At the time of the vote by the Executive Committee, the Department had eight tenured faculty who comprised the Executive Committee: Alex Adams, MD PhD; Bruce Barrett, MD PhD; John Beasley, MD; Richard Brown, MD MPH; Michael Fleming, MD MPH; John Frey, MD; Valerie Gilchrist, MD; and Craig Gjerde, PhD. The Executive Committee unanimously voted to approve the name change proposal on April 7, 2010.

As of November 11, 2014, the Executive Committee is comprised of: Alex Adams, MD PhD; Bruce Barrett, MD PhD; John Beasley, Randall Brown, MD PhD; Richard Brown, MD MPH; John Frey, MD; Valerie Gilchrist, MD; David Rabago, MD; David Rakel, MD

FINANCIAL SUPPORT
There is no change requested in financial support.

SUMMARY
Adopting the name the Department of Family Medicine and Community Health would encourage clinicians, teachers and investigators from the department to continue to align the principles of community health with other activities of the Department and create additional pathways of excellence for faculty and learners. Nationally, 45 other academic departments of Family Medicine include the terms community health or community medicine as part of their titles and missions.

As the Department of Family Medicine and Community Health, we would have the opportunity to emphasize our educational, clinical, and research missions while furthering our commitment to individual, community, and population approaches to improving health.

APPENDIX
Population health has been defined as "the health outcomes of a group of individuals, including the distribution of such outcomes within the group". It is an approach to health that aims to improve the health of an entire human population.

Public health is "the science and art of preventing disease, prolonging life and promoting health through the organized efforts and informed choices of society, organizations, public and private, communities and individuals."

Community health, a field of public health, is a discipline which concerns itself with the study and improvement of the health characteristics of biological communities.

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ENCLOSED LETTERS OF SUPPORT

1. Access Community Health Centers
2. Associate Dean for Public Health
3. Department of Anesthesiology
4. Department of Civil Society and Community Studies
5. Department of Community and Environmental Sociology
6. Department of Dermatology
7. Department of Emergency Medicine
8. Department of Human Oncology
9. Department of Medicine
10. Department of Neurology
11. Department of Neurosurgery
12. Department of Obstetrics and Gynecology
13. Department of Ophthalmology
14. Department of Orthopedics and Rehabilitation
15. Department of Pathology and Laboratory Medicine
16. Department of Pediatrics
17. Department of Population Health Sciences
18. Department of Psychiatry
19. Department of Radiology
20. Department of Surgery
21. Department of Urology
22. Rural and Urban Scholars in Community Health (RUSCH)
23. Training in Urban Medicine and Public Health (TRIUMPH)
24. University of Wisconsin Population Health Institute
25. Wisconsin Academy of Rural Medicine (WARM)
26. Wisconsin Division of Public Health
October 24, 2014

Dear Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council.

Please let this letter serve as my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health.

Those of us who are Family Physicians understand that it is not possible to separate Family Medicine and Community Health. Family medicine is as much about the community as it is about each individual patient, and that is what distinguishes it from other medical specialties.

The University of Wisconsin Department of Family Medicine embodies the inherent values of the specialty: clinical excellence, training the physician workforce of tomorrow, and improving the health of communities. In fact, they have taken the profession’s commitment to community health to a new level by affiliating with my organization, Access Community Health Centers.

As a federally qualified healthcare clinic, we are devoted to removing barriers to care for underserved communities. We have a unique healthcare home model which incorporates medical, dental, behavioral health and low cost pharmacy services, along with a variety of enabling services, to better care for patients and build a stronger community. We prepare children for school and adults for the workplace.

The affiliation between the Department’s Wingra Clinic and our organization is a perfect example of why adding “Community Health” to the name will be a superior designation. The Department recognized that partnering with a community-based organization like Access would provide more care for people in need, strengthen the residency training experience and create stronger ties to the community.

From our affiliation, we expect to improve community health on a larger scale, and in more meaningful ways in the years to come.

Sincerely

[Signature]

Ken Loving, MD
Chief Executive Officer
Date: November 3, 2014

To: Members of the University of Wisconsin School of Medicine and Public Health
   Academic Planning Council

Subject: Proposal to change the name of the Department of Family Medicine to the Department of
         Family Medicine and Community Health.

I am very pleased to offer my support of the proposal to change the name of the Department of
Family Medicine, to the Department of Family Medicine and Community Health.

I believe that adopting this new name reflects the evolution of department and would encourage
continued collaborations between other departments, centers, and institutes that support a similar
public health mission.

Sincerely,

[Signature]

Patrick Remington, MD, MPH
Professor and Associate Dean for Public Health
October 21, 2014

UW-Madison
Academic Planning Council
170 Bascom Hall
500 Lincoln Dr.
Madison, WI 53706

Dear council members,

I hereby express my full and unqualified support for the name change from Department of Family Medicine to Department of Family Medicine and Community Health. Dr. Gilchrist and the department have presented a sound and compelling rationale. Indeed, the new name would better align with the expanded mission of the department, and with the recent integration of public health into the mission of our school.

Sincerely,

Robert A. Pearce, MD, PhD
Professor and Chair of Anesthesiology
Memorandum

To: Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council

From: Cynthia Jasper, Chair, Department of Civil Society & Community Studies, School of Human Ecology

Re: Support of Departmental Name Change

Date: November 24, 2014

The Civil Society & Community Studies (CSCS) Faculty approved a motion on November 20, 2014 to support the name change of the Department of Family Medicine to the Department of Family Medicine and Community Health.

We look forward to working together with the faculty on projects related to community health.

Cc: Soyeon Shim, Dean, School of Human Ecology
Wendy Way, Associate Dean, School of Human Ecology
Nov. 11, 2014

To Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council:

The Department of Community and Environmental Sociology is glad to support the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health.

Sincerely,

Jess Gilbert  
Professor and Chair
November 4, 2014

To Members of the Academic Planning Council
University of Wisconsin School of Medicine and Public Health

Please let this letter serve as my strong, unequivocal support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. Renaming the department to include Community Health will emphasize the importance of community health for students and residents, for faculty research and scholarship, for the School of Medicine and Public Health, and for the communities the department serves.

Sincerely,

[Signature]

Gary S. Wood, MD
Johnson Professor and Chair
Department of Dermatology
University of Wisconsin-Madison

www.dermatology.wisc.edu

Mailing Address:
Gary S. Wood, M.D.
Geneva F. & Sture Johnson Professor
Chairman-Dept of Dermatology
University of Wisconsin
One South Park St., 7th floor
Madison, WI 53715
E-mail: gwood@dermatology.wisc.edu

One South Park, 7th floor Madison, WI 53715 608-287-2620 Fax: 608-287-2676
October 20, 2014

Dear SMPH Academic Planning Council,

On behalf of the Department of Emergency Medicine (DEM), I am pleased to endorse the proposal initiated by the Department of Family Medicine, requesting a department name change.

Over the course of the past eight years, first as Division Chief and currently as Chair of the Department of Emergency Medicine, it has become clear to me that there is a greater call for integration of public health and primary care. Community health has been essential to the mission of the Department of Family Medicine (DFM) since it was established as the Department of Family Medicine and Practice in 1970 and when the name was changed to the Department of Family Medicine in 1992. By changing the name to the Department of Family Medicine and Community Health, Family Medicine confirms its original mission. This name change emphasizes the importance of community health for students and residents, for faculty research and scholarship, for the School of Medicine and Public Health, and for the communities they serve.

Renaming the Department of Family Medicine will recognize the accomplishments of existing faculty who have made great strides towards integration. More importantly, it will allow Family Medicine to further advance their community health mission, allowing them to train the next generation of family physicians to truly be community responsive through a curriculum which emphasizes skills of population management and appropriate use of resources.

Thank you for your consideration of this request. If you require additional information, please do not hesitate to contact me at (608)-695-7378 or via e-mail at agh@medicine.wisc.edu.

Sincerely,

Azita G. Hamedani MD MPH
Chair, Department of Emergency Medicine
November 3, 2014

Dear Members of the University of Wisconsin SMPH Academic Planning Council,

I am aware of the Department of Family Medicine interest to propose a change in their Department name for the future. I am supportive of this request by the UW Department of Family Medicine to change their name to the Department of Family Medicine and Community Health.

Sincerely,

[Signature]

Paul M. Harari, M.D., FASTRO
Jack Fowler Professor and Chairman
Department of Human Oncology
Associate Director, UW Carbone Cancer Center
University of Wisconsin School of Medicine and Public Health
October 31, 2014

Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council

Dear Colleagues:

Please let this letter serve as my support for the request by the University of Wisconsin Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. I have communicated directly with Dr. Gilchrist and, more important, Betsy Trowbridge (Associate Vice Chair for Primary Care, DOM) and Sandra Kamnetz (Vice Chair for Clinical Care, DFM) have discussed the matter; we are all in agreement that this name better reflects the nature of the activities performed by the Department of Family Medicine.

Sincerely

[Signature]

Richard L. Page, M.D.
George R. and Elaine Love Professor
Chair, Department of Medicine
Dear Members of the University of Wisconsin School of Medicine and Public Health
Academic Planning Council:

Please let this letter serve as my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. The Department of Neurology has a long-standing working relationship with primary care faculty physicians in the Department, and we are fully aware of their efforts in community settings as well as with individual patients that makes this name change highly appropriate.

Sincerely

[Tom Sutula]
Thomas P. Sutula, MD, PhD
Detling Professor and Chair
Department of Neurology

TSP/nabh
October 23, 2014

University of Wisconsin School of Medicine and Public Health
Academic Planning Council
University Academic Planning Council
Health Sciences Learning Center (HSLC), Room 4201
750 Highland Ave.
Madison, WI 53705

Dear Colleagues,

As Chair of the Department of Neurological Surgery, I am would like to add my support to the proposed name change in the Department of Family Medicine to the Department of Family Medicine and Community Health. I feel that this is far better aligned to the mission of that department and works well to make clear to the patients we serve that our goal is broad in all aspects of health in their lives. In many ways, this is also completely consistent with the transformation to the School of Medicine and Public Health.

I am supportive of this change and I think that it can only be good for the department, the School of Medicine and Public Health, and the patients we serve. Thank you for this opportunity.

Sincerely,

[Signature]

Robert J. Dempsey, MD, FACS
Chairman and Manucher J. Javid Professor of Neurological Surgery
Department of Neurological Surgery, University of Wisconsin
Chair, Coordinating Committee for International Initiatives of the WFNS
Chairman, Foundation for International Education in Neurological Surgery
Past President, Society of Neurological Surgeons

RJD:lvb
October 22, 2014

To: Members of the University of Wisconsin School of Medicine and Public Health
   Academic Planning Council

Please let this letter serve as my support for the request by the UW Department of
Family Medicine to change its name to the Department of Family Medicine and
Community Health.

Sincerely,

[Signature]

Laurel W. Rice, M.D.
Ben Miller Peckham, M.D., PhD, Distinguished Professor and Chair
Department of Obstetrics and Gynecology
November 3, 2014

UW School of Medicine and Public Health Academic Planning Council
750 Highland Ave
Madison WI 53792

Dear UW SMPH Planning Council:

Please let this letter serve as my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health.

Sincerely,

[Signature]

Terri L. Young, MD, MBA
Peter A. Duehr Professor and Chair
October 21, 2014

To Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council:

Please let this letter serve as my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. I believe that our physicians in Family Medicine are committed to improving the overall health of our community.

Sincerely,

[Signature]

[Name]
A.A. McBeath Professor and Chairman
Department of Orthopedics and Rehabilitation
October 21, 2014

To Members of the UW School of Medicine and Public Health Academic Planning Council:

I fully support the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. Not only is the name change in line with the strategic plan of that department but also with the renewed emphasis on public health in the mission of the UW School of Medicine and Public Health as a whole. Community health has increasingly become an important focal point of population-centered health care delivery and preventive medicine, both at our institution and across the country. Members of my department look forward to many productive collaborations with the Department of Family Medicine and Community Health to promote public health in the region.

Sincerely,

Andreas Friedl, MD
Professor and Chair
Pathology and Laboratory Medicine
UW-Madison
afriedl@wisc.edu
October 28, 2014

Academic Planning Council
School of Medicine and Public Health

Dear Members of the Council:

It gives me great pleasure to support the request by the Department of Family Medicine at the University of Wisconsin School of Medicine and Public Health (UWSMPH) to change its name to the Department of Family Medicine and Community Health. This change is consistent with the work and mission of the current department and the UWSMPH. Thank you for your consideration of this request.

Sincerely,

Ellen R. Wald

Ellen R. Wald, M.D.
Alfred Dorrance Daniels Professor on Diseases of Children
Chair, Department of Pediatrics
School of Medicine and Public Health
29 October 2014

To: Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council

From: F. Javier Nieto, MD, PhD
Professor and Chair
Department of Population Health Sciences

Re: Proposed Name Change for the Department of Family Medicine

On behalf of the faculty of the Department of Population Health Sciences, I wish to provide our support for the request by the Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. We believe this name change is consistent with the mission of the Department and with the process of transformation of the SMPH. This name change will make it explicit, the already implicit overlap our own Department’s mission (for developing research and education initiatives to improve population/community health). As a result, we see this as an opportunity to strengthen the collaborative research and educational links between Family Medicine and Population Health Sciences that will also build upon and grow our many joint programs and appointments.

Please let me know if I can provide any additional information.
October 31, 2014

University of Wisconsin
School of Medicine and Public Health
Academic Planning Council

Re: Name change for Department of Family Medicine

Dear Members,

Please let this letter serve as my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health.

Sincerely,

Ned H. Kalin, M.D.
Hedberg Professor and Chair
Director, HealthEmotions Research Institute
October 27, 2014

To Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council

Please let this letter serve as my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. As Chair of the Department of Radiology, I know how important our effort to advance health in our community is to our patients and to human health in our region. The proposed name change accurately reflects our commitment to improving well-being through health care as well as through the social and economic determinants of human health.

Sincerely,

Thomas M. Grist, MD, FACR
John H. Juhl Professor of Radiology,
Medical Physics and Bioengineering
Chair, Department of Radiology
CDMRP Research Proposal Consortium Partner
October 22, 2014

Academic Planning Council  
UW School of Medicine and Public Health  
750 Highland Avenue  
Madison, WI 53705

Dear Members of the UWSMPH Academic Planning Council:

I am writing to endorse the proposal from the Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. The Department has a strong history of grounding its clinical, educational and research missions in communities. As is presented in the proposal, the name change presents an opportunity to align the name of the department with the work that is already occurring. I wholeheartedly support this proposal.

Sincerely,  

K Craig Kent, MD  
A.R. Curreri Professor  
Chairman, Department of Surgery
October 29, 2014

To Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council:

Please let this letter serve as my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health.

Sincerely

Stephen Y. Nakada, MD, FACS
Professor of Urology, Medicine, and Radiology
Chairman, Department of Urology
The Uehling Chair of Urology
nakada@urology.wisc.edu

SYN/tam
October 29, 2014

Dear Members of the UW School of Medicine and Public Health Academic Planning Council,

I wish to express my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health.

With regard to health professions education, community health is clearly a large part of the Department’s mission and identity. Our undergraduate premed pipeline program, RUSCH (Rural and Urban Scholars in Community Health), has benefited immensely from the contributions of DFM faculty to teach community and public health concepts, particularly those related to issues of health equity, advocacy, and care for diverse populations, to our student scholars.

In addition to teaching, faculty members have served as research mentors for scholars undertaking studies investigating community health services and interventions, providing students with exposure to patients, community-based clinics, and community organizations in ways not often available in more traditional research settings.

The result has been undergraduates whose interest in care for underserved communities is supported, and whose aspirations to become medical students in the WARM and TRIUMPH programs are nurtured.

The addition of Community Health to the department’s name more accurately reflects the mission of the department and the expertise of its faculty. More importantly, it sends a clear message to our learners about the commitment of the DFM and SMPH to community engagement and the improvement of health for all.

Sincerely,

Lynne Cleeland, MSIE
Assistant Dean for Academic Affairs
Director, Rural and Urban Scholars in Community Health (RUSCH) Program
Director, Student Research Programs
University of Wisconsin School of Medicine and Public Health
Health Sciences Learning Center, Room 4119
750 Highland Avenue
Madison, WI 53704
lmcleela@wisc.edu
(608) 265-6045
November 3, 2014

Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council,

This is a strong letter of support for the proposal by the UW Department of Family Medicine (DFM) to change its name to the Department of Family Medicine and Community Health. The DFM that has served as my professional home for the majority of my career; I first joined as a post-graduate resident in family medicine (‘83–‘87), and then as a faculty member. I have worked for the DFM since ‘89 in addition to periods of time working in Uganda, Pakistan, the World Health Organization in Geneva, Switzerland, and Ethiopia.

Dr. Eugene Farley (Gene) was the chairman when I first joined the DFM. He and Dr. Marc Hansen, then residency program director, were passionate advocates for community health. They taught that an individual is best understood and treated in the context of their family and community. Gene reinforced that every patient we see is the numerator, but we must always keep in mind the denominator, that is the community in which the patient lives. The index patient may be a harbinger of greater problems in the community. The family and community are essential in the treatment of the patient. Additionally, physicians have important responsibilities beyond the care of individuals. Physicians should be health advocates, promoting health and healthy policies in communities and societies. I embraced these concepts as core to my identity as a family physician and teacher.

My training in family medicine and community health at the UW-Madison enabled me to serve as a community health advocate throughout my career in Wisconsin and beyond. During my residency I served for three months as medical director of a rural health center in Uganda where I trained village health workers and learned the vital importance of community and public health (‘86). Subsequently I was recruited to Dartmouth to lead their primary care educational programs and spearhead new international health efforts. Subsequently I received Fulbright awards to establish community based family medicine residency programs in Pakistan (‘91) and Uganda (‘05), and additional federal grants to establish family medicine in Ethiopia (‘13). Each of these programs includes strong community and public health elements.

When I returned to Wisconsin in ‘89 I joined the Belleville Family Medicine Clinic where I practiced for more than 19 years, caring for up to 5 generations of families. The Belleville clinic was established after community members approached UW faculty and asked for their help since dairy farm families were too busy to come to Madison for clinic visits. We worked closely with the Belleville Village Council and local leaders to establish the clinic and the Belleville Community Health Improvement Project (BCHIP), walking, educational outreach, youth and farm safety programs. This was community-engaged practice at its best.

Through my medical educational endeavors I have worked to strengthen family medicine, community and public health curriculum, engagement and service programs of our school. During my term as director of the DFM Office of Medical Student Education, I led the statewide Primary Care Clerkship and numerous community outreach programs including MEDIC to establish the Southside Clinic for the Uninsured (‘92), the Birth and Infancy Continuity Experience, Doctors Ought to Care outreach to schools, and Leadership Opportunities with Communities, the Underserved and Special Populations (LOCUS). Many of these programs have been sustained for decades. These programs helped set the stage for the transformation of our school to become a School of Medicine and Public Health, a recent $1.5 million training grant award from HRSA, and our recent recognition by the AAMC as the leading medical school in the nation for community service.
My global and community health experiences prepared me to serve as the founding director of the UW Center for Global Health (now Institute) that now offers courses and programs at the undergraduate, graduate and post graduate levels and global and community health programs throughout the world. Our undergraduate Global Health Certificate is now the most popular undergraduate certificate on the UW-Madison campus with hundreds of students enrolled. We offer community based global health field courses in more than 10 countries.

Since 2009 I have worked with Aurora colleagues to establish and lead Training in Urban Medicine and Public Health-TRIUMPH, the UW SMPH urban health track in Milwaukee. We selected Milwaukee due to the shortage of physicians in the central city and serious health disparities in poor and minority populations. Each TRIUMPH student participates in a core curriculum in community and public health and is matched with a community organization to spend more than 160 hours tackling a community health priority. TRIUMPH has enrolled 90 students to date, all have selected residencies serving urban medically underserved populations, 80% have selected primary care residencies, 4 have graduated and returned to work in the central city of Milwaukee. The program has been so successful that we received funding from the Wisconsin State Legislature to increase the enrollment. We are doubling the enrollment this year.

My early training in family medicine infused with community health had a powerful impact on my career. But I'm just one among hundreds of graduates of the DFM! Nevertheless, my experience provides additional evidence that the DFM has historical roots, significant outcomes and numerous strengths in community health.

Given the importance of public health within our school and many new initiatives underway within the DFM, the time has come to recognize our strengths in community health through a formal name change.

Please accept my most enthusiastic recommendation.

Sincerely,

Cindy Haq, MD
Professor of Family Medicine and Population Health Sciences (CHS)
Director, Training in Urban Medicine and Public Health (TRIUMPH)
Founding Director, UW Center for Global Health
November 3, 2014

University of Wisconsin
School of Medicine and Public Health
Academic Planning Council

Dear Council Members:

I am pleased to offer my support for the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health.

Our work at the Population Health Institute spans the multiple determinants of health. It is clear that increasing the formal engagement between health care training programs and clinical practices, and the community drivers of health, can only help all sectors arrive at our shared goal of longer, healthier lives for all.

We look forward to deepening our collaboration with the Department of Family Medicine and Community Health.

Sincerely,

Karen E. Timberlake
Director, UW Population Health Institute
11/3/14

To Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council

I write this letter in support of the request by the UW Department of Family Medicine (DFM) to change its name to the Department of Family Medicine and Community Health. The recognition of the importance of community health and the role the DFM plays in promoting community health aligns with this name change.

In my role as Associate Dean for Rural and Community Health, I see many roles community health plays as it impacts the health of individuals, families and communities. Not only is the delivery of health care influenced by the principles of community health, but so are the education activities of the DMF. The DFM has been active in providing students and residents experiences to provide the skills necessary for community engagement. These skills impact workforce throughout the state as physicians that actively engage in their communities and provide care to underserved peoples stay in those communities and continue to care for the underserved.

I fully support the UW Department of Family Medicine in their request to change its name to the Department of Family Medicine and Community Health.

Sincerely,

Byron J. Crouse, MD
Professor of Family Medicine (CHS)
Associate Dean for Rural and Community Health
Director, Wisconsin Academy for Rural Medicine
November 13, 2014

School of Medicine and Public Health Academic Planning Council
750 Highland Avenue
Madison WI 53705

Dear Members of the University of Wisconsin School of Medicine and Public Health Academic Planning Council:

The Wisconsin Department of Health Services, Division of Public Health, strongly supports the request by the UW Department of Family Medicine to change its name to the Department of Family Medicine and Community Health. The practice of medicine has continued to evolve, and it is therefore critical that residency programs also evolve to address the challenges of future medical practice by offering training that provides the residents who graduate from the program the skills to best meet those challenges.

The intersection of clinical medicine and community health continues to grow. It is becoming increasingly recognized that the best health outcomes are achieved when physicians view patients through the broader context of their lives and the communities in which they live. In addition, a growing priority for the Office of Health Informatics is finding ways to use electronic health records to better link clinical and population health data to improve the health of communities. The proposed name change aligns well with that focus and would open up the door to new areas of collaboration between the UW School of Medicine and Public Health and the Wisconsin Department of Health Services.

Thank you for the opportunity to offer support, and I enthusiastically look forward to even greater successful collaboration with the Department of Family Medicine under this new direction. Please do not hesitate to contact me at any time if I can be of further assistance.

Sincerely,

Mark V. Wegner, MD, MPH
Chief Medical Officer
Office of Health Informatics
Division of Public Health