

Cover Sheet: Request 10983

Department of Behavioral Science and Community Health

Info

Process	Unit New/Modify/Close Dept
Status	Pending
Submitter	Griffith,Casey Todd cgriffith@aa.ufl.edu
Created	4/28/2016 9:22:50 AM
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Description	Based on the vote of the faculty, the fiscal priorities of the college, and the ability of the college to maintain all academic operations previously housed under Department of Behavioral Science and Community Health, the College of Public Health and Health Professions request approval to close the BSCH department, effective August 1, 2016.

Actions

Step	Status	Group	User	Comment	Updated
Department	Pending	PHHP - Behavioral Science and Community Health 313304000			4/28/2016
No document changes					
College					
No document changes					
University Curriculum Committee					
No document changes					
Graduate Council					
No document changes					
Faculty Senate Steering Committee					
No document changes					
Faculty Senate					
No document changes					
Academic Affairs					
No document changes					
Board of Trustees					
No document changes					
Office of the Registrar					
No document changes					
OIPR Notified					
No document changes					

College of Public Health and Health Professions
Request to close the Department of Behavioral Science and Community Health

4/14/16

Background and Rationale: The Department of Behavioral Science and Community Health (BSCH) was established in 2006 as part of a structural re-organization to facilitate accreditation as a college of public health. The department had originally existed as rehabilitation counseling but this name was changed to BSCH to more accurately represent changes the department was undertaking related to the college's interest in becoming accredited as a college of public health. Shortly before the name change in 2006, we hired a new chair who would oversee the department's existing rehabilitation counseling master's program and the development of a doctoral level social and behavioral sciences curriculum in public health. Since establishment of the department, we have closed the rehabilitation counseling program and expanded our multidisciplinary public health infrastructure to support public health academics, including the PhD, which no longer necessitates a specific departmental structure. Both of our MPH and PhD program directors, who oversee public health operations, report directly to the associate dean for educational affairs. This reporting structure is the same as that used for the other interdisciplinary programs in our college (the rehabilitation science PhD and the bachelor of health science), which are not housed in specific departments either.

Our request to close the department also dovetails with changes in the requirements to maintain accreditation. Specifically, the structural requirements to ensure accreditation as a college of public health are shifting. The Council on Education for Public Health (CEPH) has proposed greater flexibility in the number and types of competencies required, reducing the need for a specific departmental structure to demonstrate compliance with accreditation standards. The accreditation changes are being made in response to a rapidly shifting work force landscape and to encourage innovation within a more flexible academic structure. This change will also encourage more multi/interdisciplinary creativity in the delivery of content consistent with accreditation requirements. In essence, the original reasons for which the department was established no longer exist.

Three other significant considerations in the request to close the department are the departure of the chair, the size/composition of the faculty, and the department's fiscal situation. The chair left the university in Summer 2014, necessitating the appointment of an interim chair in Summer, 2014. In addition, with the chair's departure, only one senior faculty member remained (who moved with her spouse to another university in Summer 2015). At the time of the chair's departure, the departmental budget was in a significant deficit situation. Therefore, we would need to identify and invest substantial resources to recruit and retain a chair and rebuild the department. Given the resource investment needed and the fact that the original reasons for

establishing the department no longer exist, saving college resources seems prudent, especially given the fact that departmental closure will have no appreciable effect on our ability to maintain current academic programming and our faculty and staff continuing to be supported in their professional responsibilities (see next section).

Faculty Engagement in Department Closure and Personnel/Financial Implications: Given the department's financial situation, over the course of the previous year and after the chair resigned, the dean and/or interim chair, Dr. Amy Blue, participated in a series of discussions with the departmental faculty related to the department's status and future. During the initial meeting, Dean Perri recommended consideration of departmental closure given the financial situation and the fact that all academic programming and personnel support would be preserved. Both individual and group faculty meetings were held over the course of the year (group meetings: 10/10/14, 10/22/14, 10/29/14, 11/12/14, 12/5/14, 1/20/15, 2/27/15, 3/13/15, 4/13/15, 6/5/15; individual meetings; January-February, 2015; meeting with students: 3/16/15, May 12, 2015). As part of these conversations, the faculty raised the option of moving to another department as a group. Faculty agreed to vote on this option and further agreed that if the vote to move as a group was not unanimous, faculty would individually explore other departments. The faculty vote was split, (e.g. 3 faculty wanting to move as a group; 3 faculty wanting to move individually.) Therefore, faculty proceeded with individual discussions about other departments of interest. As a result of these discussions and over the last several months, faculty members have been relocating; all have relocated to their department of choice on an interim basis (pending the outcome of the Senate vote). The Dean met with each faculty member individually in February 2016 to ensure no issues have arisen related to departmental transitions. None has been expressed. Indeed, all expressed satisfaction with the changes. There have been no transitional issues with tenure and promotion. Faculty affected who are in tenure track lines are tenured (i.e. there are no faculty in tenure-track positions who are not yet tenured). Promotion guidelines remain unchanged and require internal and external input. Our college is multidisciplinary by nature such that faculty in BSCH came from a multidisciplinary department and have moved to other multidisciplinary departments. Our departments are used to addressing tenure and promotion issues within a multidisciplinary environment.

The Dean also met with the Faculty Council, the college faculty governing body, to determine if the Council has any concerns as a result of personnel re-locations. The Faculty Council highlighted the importance of ensuring the PhD students have a clear space. The college has addressed this concern. As a result of a recent major reorganization of college space, the PhD students have been given a designated shared office. It is also important to note that the assigned mentors for the students are not affected by this request and all assistantships remain intact with no change in funding. The only change will be re-coding the designated department of the assistantship. In addition, going forward, personnel resources are being shifted from BSCH to the other relevant departments. There has been no effect on any faculty member's salary and associated professional support.

As a result of operational modifications associated with our public health enterprise, the BSCH staff have been retained. Of the two staff affected, one has transferred within the college with the same title and salary; the other has transferred within the college with a change in title (from coordinator1 continuing education to coordinator 1 academic support services) with no change in salary.

Faculty Voting: The potential departmental closure was presented and discussed with the PPHP Faculty Council, the faculty governance body of the college, as noted above. This request to close the department was also discussed with the faculty as a whole at the Spring college-wide faculty meeting. Subsequent to the college-wide faculty meeting, a formal vote of the college faculty to close the department but retain the academic programs associated with faculty assignments was taken with the result (n=70) being 84% in favor and 16% against.

Based on the vote of the faculty, the fiscal priorities of the college, and the ability of the college to maintain all academic operations previously housed under BSCH, we request approval to close the BSCH department, effective August 1, 2016.

Submitted by:




Michael G. Perri, Ph.D., Dean &
Robert G. Frank Endowed Professor of Clinical and Health Psychology

Office of the Provost
and Senior Vice President

235 Tigert Hall
PO Box 113175
Gainesville, FL 32611-3175
352-392-2404 Tel
352-392-8735 Fax

April 14, 2016

MEMORANDUM

FROM: Joseph Glover
Provost and Senior Vice President for Academic Affairs 

SUBJECT: Department Closing-Department of Behavioral Science and Community Health

I have reviewed the proposal to close the Department of Behavioral Science and Community Health in the College of Public Health and Health Professions. After discussion with Dean Perri, I am fully supportive of closing the Department of Behavioral Science and Community Health.

Thank you.

JG/rjh

1515 SW Archer Road, Suite 23C1
Gainesville, FL 32608
P.O. Box 100014
Gainesville, FL 32610-0014
Phone: 352.733.1700
Fax: 352.733.1701
UFHealth.org

April 7, 2016

Joseph Glover, PhD
Provost and Senior Vice President for Academic Affairs
235 Tigert Hall
PO Box 113175
University of Florida

SUBJ: Departmental Closure

Dear Provost Glover:

I have reviewed the College of Public Health and Health Professions' request to close the Department of Behavioral Science and Community Health (BSCH). The College has a strong interdisciplinary infrastructure to continue to support the academic missions that have been traditionally associated with the BSCH Department, consistent with accreditation standards. The faculty has voted to support the closure, and the closure represents a reasonable fiscal decision. I believe the departmental closure will have no impact on the College's ability to carry out its missions. Therefore, I am supportive of the request for the College of Public Health and Health Professions to close the Department of Behavioral Science and Community Health.

Sincerely,



David S. Guzick, MD, PhD
UF Senior Vice President for Health Affairs
President, UF Health