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An integrated school of medicine and public health—What does it mean?

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In 2005, the University of Wisconsin Medical School became the UW School of Medicine and Public Health, a move that signaled the plan to develop a new model that unites public health and medicine. The vision was to create a superior research, education, and community engagement enterprise that integrates biomedical sciences, care of individual patients, and the health of diverse populations.

We are convinced that this new integrated approach, which no other medical school has adopted, is the best way to address the evolving health and health care needs of Wisconsin. We believe that our example will ultimately serve as a national model.

Over the past year we have gone through an extensive, inclusive process to identify exactly what this transformation into an integrated school of medicine and public health will mean to us. The process has involved faculty, staff, community leaders, and both state and national consultants. The result, completed in February, is a “road map” that describes how the transformation will affect our service, education, and research missions.

What follows is a summary of the information contained in the plan.

Guiding Principles

- We will not establish an independent, freestanding school of public health, and then attempt to build bridges between it and our school.
- We will dismiss preconceived notions about public health and medicine, fields that historically have functioned independently, and will use our new integrated model to solve our most pressing health issues.
- We will increase levels of bilateral interaction with communities, local and state government agencies, and other organizations across the state, as well as with other components of our university.
- We will continue to advance the core aspects of our current strengths.
- We will establish a thoughtful process for setting priorities and using resources.
- We will assess our progress and direction on a regular basis and modify our plans based on those assessments.

Criteria for Selecting Priorities, Goals, and Strategies

- Determine Wisconsin's greatest needs as defined by disease bur-

den, potential for health impact, geography, and other criteria.

- Leverage our strengths and seek opportunities to collaborate.
- Focus primarily on areas and issues that are underserved or neglected, and avoid duplicating successful efforts of others.

Transforming Our Service Mission: Engagement

- As a school within a leading public university, we recognize the central role of service in our institution's purpose, as articulated in the “Wisconsin Idea.”
- We will use the term “engagement” to describe the bilateral relationships we will foster.
- Our transformation will expand our engagement with communities and organizations statewide.
- We will push forward with broader population and public health components, seeking direction from community and state organizations. Our Wisconsin Partnership Program's community grants program has already moved us in this direction.

Transforming Our Educational Programs

- Our health sciences students and trainees will become knowledge-

able in basic biomedical sciences, clinical sciences, and population health sciences.

- Cross-disciplinary education and “team teaching and team learning” will be expanded and developed.
- Our medical students will receive training in diverse and underserved settings, and our public health graduate students will learn to integrate clinical and biomedical perspectives into their work.
- The school will offer comprehensive and easily accessible training in global health, and will encourage its graduates to become leaders in academic medicine and in public service.

Transforming Our Research Mission

- We will ensure that new knowledge moves from the laboratory bench to the bedside, from the bedside to the community, and

from the community to the laboratory bench and bedside.

- We will expand our research portfolio, making it strong and vibrant in all areas, with a continuum that spans basic science through Type I translational research and clinical investigations, Type II translational research, as well as population and community based studies.
- We will push to integrate and synthesize knowledge across these areas and focus on research in high-priority areas.
- Basic, clinical, and population health sciences will be connected through a cadre of interdisciplinary faculty.
- Community-based research will be targeted as an area of emphasis and, whenever possible, linked to basic and clinical sciences.
- Training opportunities in public health research will be developed with an emphasis on its interface with clinical and basic sciences.

Launching Our Transformation

- A Transformation Executive Operations Committee will develop a timeline for setting goals and strategies, create mechanisms for monitoring progress, and provide periodic reviews of goals and strategies.
- A Transformation External Advisory Board will provide review and guidance, and facilitate external relations and resource development.
- We will create the position of Associate Dean for Public Health.
- A Research Advisory Committee will begin scanning the environment in preparation for its report on research priorities integrating basic, clinical, and population health science approaches.

For more information, I invite you to visit www.med.wisc.edu/about/transformation.php.

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