



UNIVERSITY OF KENTUCKY

**College of Medicine**  
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and Environmental Health*  
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**MEMORANDUM**

**TO:** Thomas Samuel, JD  
Acting Director, University of Kentucky School of Public Health  
  
David Watt, PhD  
Vice Provost, University of Kentucky

**FROM:** Richard R. Clayton, PhD  
Interim Chair  
Faculty Members of the Department

**SUBJECT:** Issues Regarding Proposed Movement of the Department to  
The School/College of Public Health from the College of Medicine

**DATE:** November 12, 2003

It is our collective understanding that:

1. The Department will move to the School/College of Public Health as a unit.
2. Funding for the current residency program in Occupational Medicine will continue including primary care state funding (with faculty support) and funding from the VA will also continue to be provided to the Department.
3. Current faculty members can retain their KMSF affiliation and benefits. Among those joining the faculty in the Department in the future, only practicing clinicians will have an opportunity to become part of the KMSF.
4. The department will continue to be listed as a clinical department in College of Medicine "marketing, informational, and public relation materials." The department and its faculty would continue to participate fully in all health care insurance plans in which the university participates, *similar to other COM clinical departments and faculty.*
5. The Department will continue to have an opportunity for representation and participation at meetings of the clinical chairs and other benefits accorded clinical departments and their faculty regarding KMSF meetings and activities.
6. The School/College of Public Health will develop policies and procedures related to granting access to salary reimbursement and incentive dollars generated by faculty members.
7. The School/College of Public Health will continue current Department policies and procedures regarding clinical "profit" returned to the faculty as incentive.

8. Clinical expenses shall remain limited to those items directly related to clinical operations and clinical faculty support. As salary support for state-line faculty with clinical practices increases, an expense would be added (similar to salary savings) to reimburse the Department and the School/College of Public Health for the increased amount of supported time they spend in clinical practice.
9. The School/College of Public Health is committed to honoring the DOE (distribution of effort) agreed upon between each faculty member and the Chair and to insuring faculty members will not be asked to engage in activities that are not reflected in their DOE. This is especially important for faculty in the department whose state base is relatively small compared to other faculty in the School/College of Public Health.

The faculty members in the Department of Preventive Medicine and Environmental Health have several remaining issues with regard to the proposed move of the administrative location of the department to the School/College of Public Health from the College of Medicine. The purpose of this document is to articulate those issues and request that the school/university provide the Department and faculty with some assurances regarding these issues.

First, we appreciate the energy and effort expended in securing an agreement with KMSF allowing existing faculty members to retain their involvement with KMSF and the accompanying benefits, and for allowing future clinical faculty members to participate in KMSF.

We believe there should be three clarifications and perhaps amendments regarding this document. The first concerns provision of assurance for uninterrupted continuity of coverage of medical malpractice insurance. The second concerns a statement in the agreement with KMSF that seems to require that the Chair of the Department of Preventive Medicine and Environmental Health be a practicing physician. Faculty members in the Department believe that it is important to have a physician, perhaps someone designated as the Medical Director of the department, representing them with KMSF and clinical units within the university and dealing with issues specific to the clinical activities of the department and its faculty. It is not necessary and perhaps inappropriate in the comments to specify that the Chair of the Department must be a "practicing" physician. The third involves the provision that current faculty members in the department who are not physicians retain their eligibility to participate in KMSF and receive the benefits accorded members of KMSF.

*Therefore, we are asking for written assurances regarding medical malpractice coverage, an amendment to the document with KMSF regarding the disciplinary expertise of the Chair of the Department, and the continued access to KMSF for current faculty members who are not physicians.*

Second, the Department has been without a Chair and thus permanent leadership for a number of years now. We believe the lack of permanent leadership for the department has significantly limited progress toward developing a strong and common vision for the future of the department.

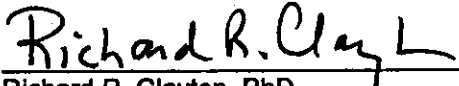
*Therefore, we are requesting assurances that recruitment of a permanent chair of the department is a high priority for the School/College of Public Health and the university.*

Third, the Department has recently lost key members of its administrative infrastructure and, because of this loss, a reduction of the chances for success in its clinical and research activities.

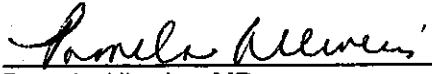
*Therefore, we are requesting assurances that the School/College of Public Health and the university will provide an adequate administrative infrastructure and support and will, in a strategic and timely fashion, move to fill these key positions.*

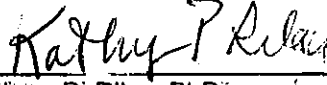
Fourth, because Preventive Medicine and Environmental Health has been a "clinical" department in the College of Medicine, the state base salary for its faculty members is significantly smaller than the state salary base received by faculty members in "basic science" departments in the College of Medicine. When the Department moves into the School/College of Public Health from the College of Medicine, its faculty members will be entering an academic unit in which there are inequities in the percentage of the salary that is state base. We believe the presence of such inequities will be a source of contention within the School/College.

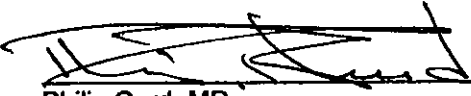
Therefore, we are requesting assurances that the administration of the School/College and university will explore ways to address these issues concerning inequity in a serious and timely fashion as soon as possible.

  
Richard R. Clayton, PhD  
Interim Chair

  
Robert McKnight, ScD


  
Pamela Allweiss, MD

  
Kathryn P. Riley, PhD

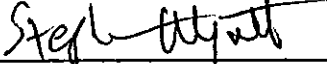
  
Philip Curd, MD

  
F. Douglas Scutchfield, MD

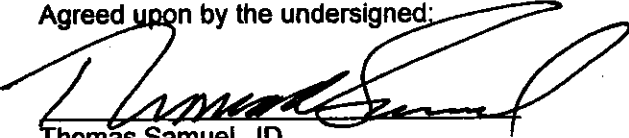
  
Deborah Danner, PhD


  
Susan Spengler, MD

  
Scott Prince, MD

  
Steven Wyatt, DMD

Agreed upon by the undersigned:

  
Thomas Samuel, JD  
Acting Director, School of Public Health

  
David Watt, PhD  
Associate Provost

Date: 12/03/2003

Date: 12.22.03