

Laboratory of Physiological Hygiene School of Public Health Stadium Gate 27 611 Beacon Street S.E. Minneapolis, Minnesota 55455

August 18, 1981

CONFIDENTIAL TO MYSELF (from Henry Blackburn) School of Public Health File

An August 6th meeting with Dean Stauffer reconfirmed his interest in an amalgamation of Physiological Hygiene with Epidemiology to which he has a strong commitment. The commitment does <u>not</u> include, at this time, all nine full tenured slots, but we must look at this in greater detail, as to which would be tenured slots and which tenure track.

We agreed on the importance of a strong Environmental Health track in the newly organized Program or Division of Epidemiology. The Dean is apparently sold on the worth of the Iron Range study which we have not seen in detail. We also addressed issues of laboratory space, the availability of Epidemiology and Physiological Hygiene laboratory-type space to other programs. I indicated that I couldn't talk intelligently on this without knowledge of the Epidemiology facilities, but that I imagined we would continue to work on the same principles in which truly collaborative research by staff would use any facilities within the School of Public Health, but that contractual research or the use of other's facilities without direct collaboration would be carefully specified in terms of scheduling, responsibility, liability and procedure.

We discussed the SPH Health Behavior track without any new resolution. The Dean's reticence to appoint an outside committee to make recommendations for a discreet program became clear and better understood. He seemed supportive of my attempts to get Ray Carlaw and Maury Mittelmark to make a concerted recommendation to him.

We reviewed the courses now being given by Epidemiology and the need for covering the occupational medicine and environmental health courses, the questionable state of the Nutritional Epidemiology course now handled by McLaughlin and Wannamaker (since they've now both left), the need to replace the Environmental Epidemiology course of Stebbings, and the likelihood of dropping the Societal Decision-Making course by Stebbings, the need to cover Epidemiological Principles, presumably to be handled by Mandel, R. K. Anderson, Schuman and graduate students.

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We discussed how to proceed with the two existing faculty appointments that need to be made promptly in Epidemiology. I proposed a mechanism in which there would be a search committee, a procedure in which the Dean and I would make the appointments (based on the long-term commitment of the School beyond the retirement date of Len Schuman) and I would participate in recruitment. The Dean indicated that he was currently having discussions with the Graduate School concerning mechanisms for having qualified LPH staff appointed to the graduate faculty in Epidemiology. I indicated that I would go ahead to gather documentation on proposed appointments. We discussed the appointment of an Acting Director of Graduate Studies for Epidemiology and I outlined my suggestions, which require more thought on his part. We discussed the possible "disappearance" of the LPH, and its graduate program, on merger.

HB:b1h

pc: L. Stauffer



School of Public Health 1360 Mayo Memorial Building 420 Delaware Street S.E. Minneapolis, Minnesota 55455

August 19, 1981

CONFIDENTIAL

Dr. Leonard M. Schuman Director Epidemiology School of Public Health 1-117 HSUnitA

Dear Len:

This letter is a followup to our conversation of last Thursday, August 13, about the future directions of epidemiology. As you recall, we discussed some of the implications for you, personally, at some length, but I will leave that for further personal conversations.

I wish to deal, here, with the summary of my thoughts about future organizational changes for Epidemiology, and the steps that will have to be taken to bring those changes about. My thinking about that was triggered and accelerated by your request of August 4 to advertise for a tenured, full-time associate professor.

I concede that there is a personnel problem, and I wish to help you solve that in the best way possible on a short range basis. Since we must be looking ahead to your retirement, however, I do not feel that we would be successful in filling such a position, now, with the optimum person, and, certainly, I must be concerned with preserving as many options as possible for the faculty and the new director in the future. Our chances for large sums of new hard money are not great, and if I commit all the options now we will not have the opportunity to redeploy resources in the future. Certainly, it is my intent to retain those position monies for Epidemiology, however.

To minimize the growing possibility for uncertainty and confusion among staff and students, alike, I feel I must, in the very near future, be able to outline to the current staff and students what we are planning toward, following your retirement. Those who will remain at that time will surely want to be involved in planning for the commitments to be made beyond that time, and we are beginning to think of such commitments now.

It is certainly my intent that you leave behind a strong program, in which the transfer has been phased and everyone is comfortable and working toward the same goals. I have come to some conclusions, as I outlined to you, and I would hope you would agree to be the architect of them so we might begin to bring them about. I believe that you and I have to start moving on some of these plans now to bring about the transition and begin building the continuity into the program.

As I mentioned, I am concerned that we create adequate time for you over these last two years to complete the advising of your Ph.D. advisees, and build the base to permit us to continue to admit others into the program. This will require us to expand the graduate advising capabilities of the program, and give a clear signal to faculty, and potential students, as well, as to our commitment to the continuity of the program. We also need time to develop and phase in other principal investigators into grants and contracts you now hold, so their continuity can be assured.

As we discussed, one other crucial thing you can do for the School in the next two years is to create a firm base for the Iron Range project, and forge strong ties with Environmental Health in the process. I believe this will be extremely crucial to both Epidemiology and Environmental Health, not to mention the School in general for many years to come.

In line with our discussion, I suggest we take the following steps. Obviously, I would hope you would concur and be willing to initiate the steps to bring it about. I believe we can develop an exciting and lasting tribute to your time as director.

- 1. I propose that we suggest the merger of the Laboratory of Physiological Hygiene and the Program in Epidemiology. The single unit remaining would be called Epidemiology, and the Laboratory would cease to exist as a separate organizational unit. I am mindful of the admonitions not to submerge epidemiology in other organizational units. I believe that in this arrangement that Epidemiology will not have been submerged, but will have emerged.
- 2. I suggest that we request, immediately, Epidemiology Program Graduate School status for Dr. Blackburn, Dr. Prineas, Dr. Taylor, Dr. Luepker, and Dr. Gillum. I believe the first three would merit full nominations, and the latter two associate status. (Parenthetically, as we discussed, the status of Katz, Gibson, and Mandel should also be reviewed to make certain they're appropriately identified.)
- 3. It is my intention to ask Dr. Blackburn to be the Director of Epidemiology, upon your retirement, so as we move through the transition I will want to involve him in the planning activities. As soon as we initiate the request for Graduate School status, which I believe could be coupled with our long range plans, I suggest we meet with Dr. Blackburn to define what kinds of teaching contributions the above faculty could make, this year and the next. If some changes in reimbursement or budgeting are necessary, I will negotiate that to assure that faculty could be available and accountable.

- 4. I suggest we use whatever is necessary of the \$40,000 TBA item to purchase teaching time from Dr. Gibson or some other source for the next two years. I believe you are working on this. I will do what I can to arrange any necessary exemptions from the affirmative action process.
- 5. We must also move promptly to purchase the time necessary to teach environmental epidemiology and occupational health epidemiology. I am not certain how to accomplish this, but we did talk about the possibility of you developing the content in these courses if we were able to relieve some of your seminar and other obligations through Dr. Gibson's help or other ways.
- 6. As a step to free up some of your administrative time in the near future, to help increase academic stature for Dr. Mandel, and as a commitment to continuity, I suggested you have a graduate faculty meeting and suggested vote to nominate Dr. Mandel as Director of Graduate Studies. I believe this would give you some freedom the next year and a half, and permit Jack to gain some identity and growth and better status in the emerging unit.

Anticipating your retirement, we would be in a position, next year, to advertise for strong teaching positions in Epidemiology using your salary, Stebbings' and Dr. Taylor's, who will have to retire at essentially the same time. I am committed to the preservation and enhancement of a strong teaching program in Epidemiology.

These steps would leave a strong unit, the largest in the School in faculty, program, and dollars, identified as Epidemiology.

I am prepared to discuss these issues with the faculties of the units concerned, as well as with the Council of Division Heads. As you can imagine, I have already explored the feasibility of such changes, in a general, not detailed, way with the Vice President for Health Sciences and Dean Ibele, and have their concurrence to proceed.

I, of course, would wish your support to proceed. I believe we could have an exciting, building, two years, and you could retire, secure in the knowledge that you were leaving behind one of the strongest, if not the strongest, epidemiology unit in the country.

Can we discuss this again, soon, to agree on our strategy for proceeding? I assure you I wish to do all I can to insure that Epidemiology will remain a strong program after your retirement.

Very truly yours,

Lee D. Stauffer, Dean

LDS:me