

## MEMORANDUM

TO: Academic Programs Committee (APC);  
FROM: V. Joseph Hotz  
DATE : Oct. 18, 2012  
RE: APC resolution concerning proposal for the Division of Neurology within the Department of Medicine to become a freestanding Department of Neurology

The Academic Programs Committee has examined the materials provided by the Division of Neurology; has met with the Division's Interim Chief, Dr. Morgenlander, and with Dr. Pappas, Vice Dean for Medical Affairs in the Medical School; and has discussed the merits of the Medical School's request to transform the Division of Neurology within the Department of Medicine into a freestanding department.

Overall, the case for the transition to a Department of Neurology is strong. Historically, the Duke Medical School has had a fairly small number of departments compared to its peer institutions. Because its organizational structure is so at variance with that of its peers, the Medical School has experienced some difficulty in recruiting faculty. It has also had difficulty properly managing and incentivizing its largest departments. As a result, the Medical School began a process seven years ago to convert several of its largest divisions into freestanding departments. To date, Dermatology and Orthopedics have become departments. The Division of Neurology is the next to be considered for this transformation, with strong support for making this change within the Medical School, the Department of Medicine, and the current Division of Neurology.

The APC found the overall case for this division-to-department conversion persuasive. As a result, we support this change and recommend it move forward. At the same time, we offer some recommendations concerning the resources that need to be devoted to this new Department and the understandings that need to be in place for it to be successful.

- 1) The Medical School has established a criterion that all of its departments should be or become top 10 research departments. During our meeting with Dr. Morgenlander, he indicated a more relevant goal should be for "the field of neuroscience" to be strong at Duke, since neuroscience-related research is spread out at Duke and will not be concentrated in the proposed Department of Neurology. While this caveat to the Medical School's criterion is plausible, the APC urges the new Department of Neurology to have a clear and well-articulated understanding about what the School's expectations are for the new Department with respect to research, and the criteria the School will use to judge success in this domain. In particular, the Committee thinks it is important that these issues be resolved between the Medical School and the inaugural chair of this Department and its members.
- 2) Related to the previous point, the APC is somewhat concerned about whether the initial funding commitment for a new Department of Neurology by the Medical School will be adequate to allow the Department to attain excellence. This concern arises in no small measure from the current and anticipated pressures on NIH funding, as well as other funding sources for biomedical research, combined with the Medical

School's on-going efforts to reduce unfunded clinical research within its various departments. The APC is concerned that without real commitments of resources to this Department, especially during its first five years, Duke's efforts to enhance its research and clinical care in Neurology may be severely hampered. Again, the APC urges that the inaugural Chair of a Department of Neurology and the leadership within the Medical School to develop a funding model that enables whatever growth in research and clinical care is expected of a new Department of Neurology.

- 3) While the APC found the overall case for the transition of the Division of Neurology to departmental status to be strong, the Committee was concerned with the lack of a well-articulated case for the intellectual and research benefits to the Medical School and Duke for making this change. The supporting documents based the case for this transition almost exclusively on arguments that Duke's peers had departments rather than divisions, and that Duke needed to be more like its peers ("everyone else is doing it"). The case would have been stronger if some vision had been offered about the new areas of research and training that might be realized as a result of this organizational change, and/or more discussion of new areas of collaboration that would be fostered by it. The Interim Chief did provide some examples of what some of these benefits might be during his meeting with the Committee. We would urge the inaugural Chair of a Department of Neurology, in collaboration with its members and related faculty (e.g., members of the Duke Institute for Brain Sciences), to articulate such a vision for a Department of Neurology along with a set of initial goals for research and collaboration to be fostered by this new Department.