

State University System Florida Board of Governors Instructions for Completing the Revised Operating Budget (OB) Form I

The OB Form I is designed to capture the data needed to align a university's operating budget issue with the goals and objectives of the State University System (SUS) Strategic Plan <u>and</u> the New Florida Initiative.

Each university should submit <u>one sequential priority list</u> of all budget issues for the university. Any issues unique to a branch campus or a special unit (e.g., IFAS, health science center) should be incorporated into the single university priority list, even if the university decides to separate the base allocation into prorated amounts for each branch campus or special unit.

For each budget issue, please indicate the primary goal from the SUS Strategic Plan that the issue will address, and complete the form according to the instructions provided.

Keep all responses brief. All issues must have been identified in the 2011 University Work Plan submitted to the Board of Governors and must align with the goals and objectives of the SUS Strategic Plan and the New Florida Initiative.

State University System Education and General 2012-2013 Legislative Operating Budget Issue Form I

University:	University of Florida
Work Plan Issue Title:	Enhancing the size and diversity of the dentist workforce through expansion of DMD enrollment
Priority Number	
Recurring Funds Requested:	\$823,094 (in Year 1, incrementally increases in Years 2-5)
Non-Recurring Funds Requested:	\$3,150,000 (Year 1)
Total Funds Requested:	\$3,973,094 (Year 1)

Although an issue might address multiple SUS Strategic Plan Goals, please check a single <u>primary</u> goal that this issue will address:

Access to and Production of Degrees (Examples of issues that might support this goal could include services such as outreach programs, new enrollment growth, new e-learning opportunities, or increased financial aid to improve student access; academic tracking, advising, tutoring, supplemental instruction, or other support services to improve undergraduate retention and graduation; or enhanced support to develop competitive recruitment packages for recruiting and retaining outstanding graduate and professional students.)
Meeting Statewide Professional and Workforce Needs (Examples of issues that might support this goal could include services that focus on the recruitment and retention of highly qualified students and faculty in disciplines associated with high-skill, high-wage jobs (e.g., STEM fields) or other areas of strategic emphasis in the State University System.)
Building World-Class Academic Programs and Research Capacity (Examples of issues that might support this goal could include focused support for academic programs on the cusp of national or international preeminence; support to achieve specialized accreditation in specific disciplines; new and/or expanded research initiatives built on the core strengths of the institution; or focused support to more quickly move cutting-edge university research to application and/or commercialization.)
Meeting Community Needs and Fulfilling Unique Institutional Responsibilities (Examples could include issues important to a region or specific to an institution's mission – e.g., extension services, service learning initiatives, lifelong learning opportunities, community engagement initiatives, or targeted degree programs to meet regional needs.)

2012-2013 Legislative Budget Request Education and General Position and Fiscal Summary Operating Budget Form II

(to be completed for each priority issue)

University of Florida

Expansion of DMD Enrollment

University:

Issue Title:

Special Category (Specific)

Total All Categories

Library Resources

Tuition Revenue

Renovations

	NON-				
	RECURRING	RECURRING	TOTAL		
Positions					
Faculty	2.00	0.00	2.00		
Other (A&P/USPS)	1.00	0.00	1.00		
Total	3.00	0.00	3.00		
Salary Rate (for all positions	noted above)				
Faculty	\$150,000	\$0	\$150,000		
Other (A&P/USPS)	\$31,294	\$0	\$31,294		
Total	\$181,294	\$0	\$181,294		
	=======	========	=======		
Salaries and Benefits	\$380,700	\$0	\$380,700		
Other Personal Services	\$50,557	\$0	\$50,557		
Expenses	\$682,309	\$0	\$682,309		
Operating Capital Outlay	\$12,100	\$0	\$12,100		
Electronic Data Processing	\$10,587	\$0	\$10,587		
-					

\$0

\$0

\$3,967

(\$317,126)

\$823,094

\$0

\$0

\$0

\$3,150,000

\$3,150,000

\$0

\$3,967

\$3,150,000

(\$317,126)

\$3,973,094

I. Need and Justification:

- A. Identify the need as addressed explicitly in the **2011 University Work Plan**, and indicate where this budget issue is referenced in the Plan.
- **A.1. Proposal Summary.** The University of Florida (UF) College of Dentistry (COD) is proposing to enhance the size and diversity of the dentist workforce though expansion of its Doctor of Dental Medicine (DMD) program. This proposal reflects the priorities of the Board of Governors (BOG) Strategic Plan and the University of Florida Strategic Work Plan and is consistent with the New Florida Initiative. The proposal builds on the strong reputation and successes of the UF COD, which is recognized as one of the leading colleges of dentistry in the United States.

An important component of UF's mission is service to the nation and state by addressing critical workforce needs as reflected on page 2 of the University of Florida 2010 Work Plan. The 2011 UF Work Plan would be updated to reflect the additional DMD student enrollment. Recognizing the need for an expanded and more diverse dentist workforce and the economies of scale afforded through the expansion of an existing dental school as compared to the costs associated with instituting a new school, the University of Florida proposes to phase-in an enrollment increase of 80 students, graduating 20 additional DMD students per year using a five-year implementation plan. Currently the college enrolls 80-83 students per class with a current total enrollment of 331 DMD students. The program expansion would require renovation of the Dental Science Building on the UF campus and equipment purchases (estimated non-recurring cost \$3.15M), and modest additions of faculty and staff for the additional students (estimated \$823,094 for Year-1 with incremental increases in Years 2-5).

Expected outcomes of this proposal and benefits to Florida include:

- **Expansion of the DMD class size** from 80 to 100 students per year following the five-year expansion, allowing additional qualified dental school applicants to study dentistry in Florida.
- Increased diversity of the DMD student body through expanded outreach and recruitment efforts targeting underrepresented minority and disadvantaged students, in collaboration with other SUS schools.
- Expanded research. To support the expanded enrollment, faculty would be recruited who are not only excellent clinicians and academicians, but also have an interest in clinical and translational research. These additional faculty members would enhance the college's capacity to expand its research program. Expected outcomes would include an increase in the college's research funding and scientific breakthroughs to improve oral health.
- **Expanded patient care services.** Dental students provide the full scope of general dental care under the direct supervision of faculty. Expanding the number of enrolled DMD students will result in improved access to affordable dental services for children and adults living in the communities served by our clinical education and outreach programs, which specifically target underserved populations.

• **Economic development** related to the recruitment of additional students, faculty, and support staff as well as facility renovations and/or new construction. In addition, anticipated research funding generated will deliver economic growth within the surrounding Florida communities.

While this Legislative Budget Request is not seeking funding to build or operate any additional community-based clinical teaching facilities, UF COD would be willing to pursue such opportunities individually or in collaboration with other educational institutions and/or other organizations to expand our service to urban and dentally-underserved communities outside of Gainesville. DMD students would complete the first two years of the four-year DMD curriculum on the Gainesville campus and learn their basic and behavioral foundation knowledge and develop their preclinical skills during five semesters of study in Gainesville. Students would then complete their six semesters of clinical education on either the Gainesville campus or in an underserved community (e.g. Orlando, Jacksonville, Tampa/St. Petersburg, Tallahassee, the Panhandle area). Students would also continue to participate in six weeks of clinical service learning through our Statewide Network for Community Oral Health. UF COD has developed this network of community-based clinics over a period of more than 30 years. It includes affiliations with federally-qualified community health centers, Florida Department of Health clinics, health care facilities associated with homeless shelters, and other private not-for-profit organizations.

- A.2. Proposal Justification. The proposed expansion of the DMD class size and related Dental Science Building renovation is justified based on: (a) the quality of the existing academic program and our almost 40 years of experience educating dental students; (b) the economies of scale afforded by the expansion of an existing program rather than building new dental schools; (c) the need for a modestly expanded, well-prepared and ethnically diverse dentist workforce; and (d) the economic impact of UF and the COD.
 - a. The quality of the existing DMD program at UF. The UF COD enrolled its charter DMD class in 1972, and has developed into a dental school that is nationally recognized for the quality of its academic programs, scholarship and research funding, and clinical care including community outreach and service learning. Dental schools do not participate in the U.S. News & World Report or other reputational ranking systems. However, in FY 2010, the college ranked fifth among 61 U.S. dental schools with DDS/DMD programs in terms of National Institutes of Health (NIH)/NIDCR grant funding. A recent article from the *Journal of Dental Research* ¹analyzed total NIH funding awarded to dental schools to assess dental institutions' research performance and standing relative to other schools. Based on overall NIH funding from 2005-2009, this report ranks UF COD as fourth among all dental schools during this time period.

http://jdr.sagepub.com/content/early/2011/01/10/0022034510390215.abstract?patientinformlinks=yes&legid=spjdr;0022034510390215v3. Accessed July 18, 2011.

¹ Lipton, JA, Kinane DF. Total NIH Support to US Dental Schools, 2005-2009. *J Dent Research* December 29, 2010. See:

The evidence for the high quality educational program and commitment to diversity of the UF DMD program is abundant.

Applicant pool. Currently, the applicant pool for the DMD program enrolled in Fall of 2010 included 578 Florida resident applicants, or about 7 Floridians per first-year DMD position. The UF COD applicant pool is consistently comprised of about one-third Florida residents and two-thirds out-of-state applicants.

Since the mid-2000's, dental applicant pools have been deep, diverse and talented. At UF COD, we have developed a holistic approach to admissions considering factors including excellence in academics, knowledge of the profession and contributions to the community in admissions decisions. This has resulted in a diverse and talented student body with average undergraduate grade point averages in the 3.5-3.6 range, average Dental Admissions Test (DAT) scores of 19-20 ² and a population of dental students with demonstrated commitments to research, community service, and/or leadership.

UF's Commitment to Diversity. Dental graduates with disadvantaged backgrounds cannot provide care to the underserved when they are heavily burdened by educational debt. The UF COD has consistently worked to minimize student indebtedness at graduation through controlling costs to students and also through a need-based financial aid program which awarded in excess of \$544,000 in scholarships to more than 90 dental students with demonstrated financial need. UF COD remains an excellent value with tuition currently at about the mean of all research-intensive state-supported dental schools. We continue to fund raise and seek grants to support scholarships and loans for dental students to ensure an economically and culturally diverse study body.

Academic Excellence. Evidence of UFCD's educational quality can be found in graduates' career paths. In the 2011 graduating class, 53 percent of the DMD students applied for advanced and graduate education programs. Since 2000, the UFCD acceptance rate into advanced and graduate programs after dental school is a remarkable 88 percent. In contrast to medical education, dental degree graduates are not required to complete internship or residency training for licensure. The majority of practicing dentists are general dentists without additional postdoctoral training. In a profession of generalists, such high application and acceptance rates for postgraduate education is strong evidence of a high quality, well-regarded educational program.

UFCD students perform well on outcomes measures including the National Board Dental Examinations, Parts I and II and dental licensure examinations in Florida and also in other states. Recently, the college celebrated the third consecutive year of 100

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² Note: Standard DAT scores range from 1 to 30; a score of 17 typically signifies the average national performance). http://www.ada.org/sections/educationAndCareers/pdfs/dat_faq.pdf Accessed on August 10, 2011.

percent first-time pass rates on the National Boards, Part I examination with our third-year DMD students.

b. The economies of scale related to the expansion of an existing program.

Given the increasing costs of dental education and skyrocketing educational debt of many dental graduates, it makes sense to consider potential efficiencies inherent in expanding an existing, successful academic program rather than opening new dental schools.

Our proposal to expand the DMD enrollment would benefit from economies of scale. Specific cost savings related to expanding an existing successful program include administrative savings in items such as marketing the academic program to secure the highest quality applicants, handling and evaluation of applications, curriculum development, and processes for student evaluation. In addition, expensive dental equipment such as simulation work stations, dental treatment rooms, instrument sterilizers, computer software supporting the electronic dental record, radiology equipment including cone-beam CT scanners, organizational structures and support units, and library resources already exist and can be expanded to a larger student body with relative ease. Because dental education is such a faculty-intensive academic program, additional faculty will be needed to maintain adequate student to faculty ratios. Given the national shortage of dental faculty, it will be much easier to recruit faculty to an existing program with a strong track record of supporting faculty career development, than to new untested dental schools.

Based on our experience at UF, it typically takes a dental school ten to 15 years or longer to develop a strong extramurally-funded research program. The UF COD has the strong advantage of being part of one of the nation's leading health science centers on the main university campus, facilitating collaborative research that is essential to solving complex human health problems and conditions. UF COD has a well-organized Office of Research to assist faculty in their grant development and submission, and more importantly, has the ability to leverage existing expertise and grants such as a federally-funded Clinical and Translational Science Award (CTSA) to create the economies of scale in developing world class research programs. UF COD has demonstrated its capacity in this regard, and program expansion would allow us to recruit additional faculty to further support our teaching, research and service activities.

Similarly, UF COD' Division of Community-based Programs administers the Statewide Network for Community Oral Health. With more than 30 years of experience developing and administering collaborations with clinical facilities statewide, we can leverage our experience, expertise and excellent relationships with practicing dentists to expand and serve new communities, assuming available resources to support such a program.

c. The need for a modestly expanded, well-prepared and ethnically diverse dentist workforce.

Dentist workforce size. The adequacy of the dentist workforce and the challenge of ensuring adequate access to dental services for underserved and vulnerable populations in Florida has been the subject of great interest and debate in recent months. In fact, concerns about workforce adequacy and distribution have occupied policymakers and the profession for many years. ³ As described by Brown, in the span of 17 years from 1983 to 2000, the views on the dental workforce "have gone from an assessment that the workforce may be too large, to an assessment that the workforce is about the right size, to an assessment that the workforce will likely prove too small." In his thorough examination of dental workforce issues he warns us about the "cycle of perceptions" and reminds us of the complexity of dental workforce issues.

When considering the adequacy of the dentist workforce, one should consider similar work conducted by the Council for Educational Policy, Research and Improvement to study the physician workforce. The Medical Education Needs Analysis study published in 2004 reported the results of an extensive effort to quantify the adequacy of the State's physician workforce and to critique "various alternatives to produce the required number of additional physicians." While physician and dentist workforce issues are not identical, this thoughtful study can help inform the decisions regarding the most cost-effective strategies to ensure an adequate dentist workforce. Policy recommendations included funding incentives to attract physicians to Florida such as the Florida Health Service Corps and the Medical Education Reimbursement and Loan Repayment program, and "When expansion of medical school capacity is pursued, the options of expanding existing medical schools should be prioritized based on cost-efficiency." The study noted that "expanding capacity at existing medical schools had many benefits." ⁴

The dentist to population ratio in Florida in 2007 was approximately 49.4 per 100,000population and varied widely across the state with higher concentrations of dentists in the urban areas, leaving many rural and less densely populated communities underserved. The dental workforce does not reflect Florida's ethnic and racial diversity, with a significant underrepresentation of African American dentists. With the growth of Florida's population, the dentist to population ratio in our state has declined in recent years, and many communities remain dentally underserved. A recent study assessing the impact of approximately ten new dental schools nationally by 2022 projected a likely increase in dentist to population ratio. However, the report concluded that the "increase in dentists will not noticeably

³ Brown LJ. *Adequacy of Current and Future Dental Workforce*. Chicago: American Dental Association, Health Policy Resources Center; 2005.

⁴Council for Education Policy, Research and Improvement. Medical Education Needs Analysis. November, 2004. See:

http://www.doh.state.fl.us/Workforce/Workforce/Articles/CEPRI.pdf. Accessed August 3, 2011.

improve access to care for low-income and rural populations absent additional public funding to support demand for these populations and concurrent measures to effect even distribution of dentists throughout the country."⁵

Thus, adding new dental schools or educating additional dentists does not necessarily result in improved access to dental services for underserved children and adults, and could be considered a very expensive "remedy" for the complex societal and national challenge of improving access to dental services for all Americans.

The recent paper, "Dental Education and Dental Care: Eight Contextual Observations for Future Planning," by Dr. LeMon⁶ provides an excellent summary of issues related to the dentist workforce, access to dental services, the dental Medicaid program in Florida, and the potential impact of new and/or expanded dental schools on these challenges. The paper acknowledges the national challenge of providing affordable dental care to children and adults. The paper also cites the conclusion of the Florida Health Practitioner Oral Healthcare Workforce Ad Hoc Committee ⁷ that implementing new dental schools is considered the most ineffective strategy for addressing Florida's dental care needs (ranked 50 of 50 strategies under consideration) due to:

- The high cost of dental education. As reported by the American Dental Association, costs increased more than 90 percent since 1995 and total costs average between \$82,468 and \$101,222 per dental student per year⁸.
- The increasing indebtedness of US dental graduates. UF DMD graduates' average educational debt in 2010 was \$154,000. The average graduating educational debt of dental school graduates in 2010 was \$187,235 for all schools, \$166,223 for public schools, and \$220,591 for private and state-related schools. Student debt impacts career decisions including practice location and the types of patients served.
- The poor reimbursement for dental services under Medicaid, which has
 made it untenable for private-practice dentists to provide dental care to
 patients covered by Medicaid. Despite a recent fee increase for children's
 dentistry paid by Medicaid, the fees remain far below the usual and
 customary dental fees.
- The national shortage of dental faculty and dental researchers.9
- The shortage of loan forgiveness programs for dentists who agree to practice for a defined period of time in underserved communities.

⁵ Guthrie D. Valachovic RW, Brown LJ. The Impact of New Dental Schools on the Dental Workforce through 2022. *JDE* December, 2009.

⁶http://www.flbog.org/documents_meetings/0126_0528_4235_513%20SPC%2003b_Dental_Education_a nd_Dental_Care_in_Florida_3_1_11.pdf. Accessed July 18, 2011

⁷(http://www.doh.state.fl.us/Family/dental/OralHealhcareWorkforce/200903Dental_Workforce_Report.pdf, accessed July 18, 2011)

⁸ American Dental Association, Health Policy Resource Center, 2009. *Survey of Dental Education*. Summarized in the ADA News, May 16, 2011, page 4.

⁹ American Dental Education Association (2006). *Trends in dental education*. Washington, DC: ADEA.

Considering the sluggish national and Florida economy, the increasing cost of dental education, operational challenges including the recruitment and retention of dental faculty, and the opening of at least one new private dental school in Florida in 2012, the SUS is wise to be diligent in its consideration and evaluation of all requests to expand or create new colleges of dentistry.

Dentist workforce diversity. Because there is a need for an ethnically and culturally diverse dental workforce, UF would expand its outreach activities to recruit underrepresented and disadvantaged dental students. Enrolling underrepresented minority students into the DMD program continues to be a goal in the college's strategic plan, as we strive to achieve a multicultural student body representative of Florida's population. Slightly more than half of UF's DMD students (57 percent) are women and 40 percent report belonging to a minority group. The college actively participates in recruiting tours throughout Florida, at African American and Hispanic career fairs, in collaboration with other UF minority recruitment programs, through individual minority student mentoring, and through student minority dental organizations such as the Student National Dental Association (SNDA) and Hispanic Dental Association (HDA). For example, the UF COD SNDA chapter presents a very successful *Dental Impressions Program* for pre-dental students each year.

The UF COD offers a two-week Summer of Learning Program for minority and economically disadvantaged college students interested in exploring dentistry as a career. Through a grant from the DHHS HRSA entitled "Pre-doctoral Training in General, Pediatric and Public Health Dentistry and Dental Hygiene," the program was recently enhanced and expanded to three weeks with a total of 20 student participants. Of the 88 students who have participated in the program as of 2010, 42 percent are attending dental school and 22 are enrolled at UF.

In addition to these outreach activities, the UF COD is open to expanding its partnership with Florida Agricultural & Mechanical University (FAMU) as well as other SUS and non-SUS colleges to increase the proportion of under-represented minority students entering dental school.

d. The Economic Impact of UF and the College of Dentistry. UF has a significant economic impact to the state through its academic and physical operations, capital outlays, allied organizations, healthcare services, spending by faculty, staff, students, and visitors, and technology spin-off business enterprises. UF's contributions to the state extend beyond educating 50,000 students and leading one of the nation's largest research enterprises. UF infuses \$8.76 billion into the Florida economy each year and provides more than 106,000 jobs directly and indirectly. The College of Dentistry contributes to this impact from activities associated with our clinical practice, personnel expenditures, technology spin-offs, student and patient spending.

 $^{^{10}}$ http://www.fred.ifas.ufl.edu/economic-impact-analysis/pdf/UF%20Impact%20Report%20FY2009-10.pdf accessed July 18, 2011.

Direct employment by the University of Florida and affiliated organizations in 2010 was calculated to total 41,434 fulltime and part-time jobs. The University itself has an employment of 26,271 jobs, 13,484 of which are permanent, and 12,787 temporary.

The UF COD is a comprehensive dental education institution, with current enrollment of 331 students in its DMD program at the Gainesville campus. In addition, the UF COD conducts research in dentistry and oral health, and provides clinical dental services to the public through its practice plan, Faculty Associates, Inc. About 90 percent of the students are Florida residents, and about 70 percent of clinical services are rendered to Florida residents, while 90 percent of research funding is from federal agencies.

The UF COD currently employs 139 fulltime faculty, 35 adjunct faculty, 255 support staff members, and 376 courtesy faculty from other health-related professions who contribute approximately one day per month to the academic and clinical programs, or a total of 409 fulltime equivalents (FTE). The FY 2010-11 operating budget for UF COD is \$60.1 M, including \$19.1M for tuition, fees, and state appropriations, \$21.2M for clinical services revenues, \$14.4M for research expenditures, and \$5.4M for other activities. The UF COD is an important contributor to the economic health of the communities in which it is located, including Alachua, Pinellas, Miami-Dade and Collier counties.

The annual economic impacts of UF COD to the State of Florida were estimated based on these budget and direct employment numbers, and regional assumptions, together with the *Implan* regional economic modeling system (MIG, Inc.), which accounts for indirect multiplier effects of supply chain activity and re-spending of earnings by employee households. The total economic impacts currently include 784 jobs, \$103.0M in output or business revenues, \$67.9M in value added impacts, \$50.3M in labor income, \$15.1M in other property income (interest, rents, dividends, royalties, etc.), and \$2.6M in indirect business taxes paid to local and state governments, as shown in the table below. The value added impact represents the net contribution to the Gross Domestic Product of Florida. It should be noted that these impacts do not include local spending by dental college students and dental clinic patients.

With the requested additional funding for UFCOD facility renovations and expansion (\$3.2M) and educational and outreach expenses for increased dental student enrollment (\$15.2M over 5 years), the average annual total economic impacts in Florida would be increased by 40 jobs, \$7.2M in output and \$4.3M in value added (see table below). The ratio of the average annual value added impact of the expansion (\$4.3M) to the average annual public outlay (\$3.7M) indicates a benefit-cost ratio of 1.17 to 1.

Annual economic impacts of the University of Florida – College of Dentistry under current operations and with requested funding for expansion

Economic Measure	Impact of Current operations (FY 2010-11)	Average Annual Impact for Requested Expansion	
Employment (fulltime and part-time jobs)	784	40	
Output (M\$)	\$103.04	\$7.23	
Value Added (M\$)	\$67.91	\$4.30	
Labor Income (M\$)	\$50.30	\$3.24	
Other Property Income (M\$)	\$15.05	\$0.97	
Indirect Business Taxes (M\$)	\$2.56	\$0.10	

Expansion of the DMD enrollment and related expansion of faculty, support staff, clinical and research activities and facility renovation would further enhance the economic impact of the college.

In addition to the economic impact from dental education, the additional dentists who graduate from our DMD program will also significantly impact Florida's economy as they open their practices. It has been estimated that the annual impact of the addition of one dentist on the economy is \$1,278,253. The average number of employees per dental establishment is estimated at 5.62. The level of economic activity from the addition of a dentist in small counties can be significant and has an impact on surrounding counties and the state. Dentistry is considered a high-value added economic sector.¹¹

B. Indicate how this budget issue aligns with the goal selected above from the **SUS Strategic Plan**.

The expansion of the DMD program aligns with the goal outlined in the SUS Strategic Plan to meet statewide professional and workforce needs. Specifically, the SUS Plan has targeted a critical need for expanding health professions by 5,375 by 2012-2013. This proposal would increase the number of dental students being enrolled by approximately 80 positions within a five year period commencing in FY'13, and would graduate an additional 20 dentists per year.

C. Indicate how this budget issue aligns with the objectives of the **New Florida** initiative.

This expansion will support the New Florida initiative which recognizes that health care and education are vital to developing a knowledge and innovation economy in the state. Additionally, the UF COD is currently ranked fourth in the nation in federal research funding to dental schools. The expansion of the DMD program would result in the recruitment of additional faculty, increasing our capacity to conduct extramurally-funded research and to provide affordable and high quality dental services. This is

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¹¹ House DR, Fry CL, Brown LJ. The Economic Impact of Dentistry. *JADA* March 2004.

consistent with focusing each university on its distinctive mission as outlined in the New Florida Initiative.

II. Description/Proposed Budget:

A. **Description of service or program to be provided:** (*Include whether this is a new or expanded service/program. If expanded, what has been accomplished with the current service/program?*)

Under the proposed plan, the college is requesting funds for: (a) facility renovation and purchase of equipment, (b) support for expanded outreach efforts and collaboration to increase the diversity of the DMD student body, and (c) operating funds to support the recruitment of additional faculty and staff needed to teach the additional DMD students. The Operating Budget Form II reflects only the recurring and non-recurring funds needed in Year 1. However, the proposed expansion of the DMD class will occur over a five-year time period. Full funding of the five years and the recurring funds thereafter will be required for the programmatic expansion.

- a. **Diversity outreach**. Funds will be used to support the exploration of expanded academic partnerships such as with FAMU and/or other SUS schools, and additional outreach efforts to recruit and retain underrepresented minority and disadvantaged students. We estimate the cost of this program, in constant dollars, at \$200,000 per year.
- b. Facility expansion and renovation. UF COD received a federal grant to add ten work stations to its 80 station dental simulation laboratory, so the college can begin program expansion by 10 students in Year-1. In order to expand the DMD class size to 100 students per year, the simulation laboratory would be further expanded by ten additional simulation stations. The original simulation units were installed in 1995 and require maintenance and upgrades to the current equipment standards. Space is available for this expansion, and the renovation and equipment costs are estimated at \$950,000. In addition, we would need to renovate a classroom at an approximate cost of \$800,000, and would need to renovate clinical space to accommodate the additional students at the cost of approximately \$1.4M.
- c. **Operating funds**. This proposal requests recurring funds to support the educational costs associated with the class size expansion. Enrollment increases incrementally over five years, and the recurring expenses increase proportionately with enrollment as demonstrated in the proposed budget. The expansion to 100 DMD students per class and ongoing diversity outreach activities will require continued annual funding as indicated in the following table (in constant dollars, with no accounting for incremental increases in the cost of delivering the education) to maintain the increased enrollment of the 80 additional dental students.

The proposed budget summarizes the five-year projections for recurring and non-recurring costs associated with the program expansion.

	FY'12	FY'13	FY'14	FY'15	FY'16	FY'17
-	Base Year	(1)	(1)	(1)	(1)	(1)
REVENUE						
Tuition and Fees (3)	(A)	317,126	951,377	1,585,628	2,219,879	2,537,005
Financial Aid	P#0		260	*	84	¥8
Community Donations	645,546	645,546	645,546	645,546	645,546	645,546
Clinical Practice (Student and Faculty)	20,557,356	20,557,356	20,557,356	20,557,356	20,557,356	20,557,356
Contract and Grants	13,523,188	13,523,188	13,523,188	13,523,188	13,523,188	13,523,188
Auxiliaries and Other	4,151,259	4,151,259	4,151,259	4,151,259	4,151,259	4,151,259
Total Revenue	38,877,349	39, 194, 475	39,828,726	40,462,977	41,097,228	41,414,354
OPERATING EXPENSES						
Faculty Salaries and Benefits	22,056,610	22,437,310	22,627,660	22,818,010	23,008,360	23,198,710
Support Salaries and Benefits	16,476,778	16,527,336	16,698,083	16,698,083	16,824,139	16,824,139
OPS	3,005,366	3,005,366	3,005,366	3,005,366	3,005,366	3,005,366
General Expenses	12,879,373	13,561,682	15,027,719	16,664,504	18,175,232	18,898,450
Operating Capital Outlay	400,000	412,100	436,299	460,498	484,697	496,796
Electronic Data Processing (IT)	1,396,772	1,407,359	1,428,532	1,449,705	1,470,879	1,481,465
Library Resources	388,134	392,101	400,034	407,967	415,901	419,868
Total Operating Expenses	56,603,034	57,743,254	59,623,693	61,504,134	63,384,573	64,324,793
FACILITIES INVESTMENTS						
Renovation Cost (2)	200	3,150,000	540	¥	¥	293
Total Facilities Investments	8507	3,150,000	17751	8	æ	10-77
Net Income (Loss), Before State Appropriations	(17,725,685)	(21,698,779)	(19,794,968)	(21,041,157)	(22,287,345)	(22,910,440)
TATE APPROPRIATIONS (4), Net	18,356,340	18,356,340	18,356,340	18,356,340	18,356,340	18,356,340
TATE APPROPRIATIONS (5), Gross	21,327,297	21,327,297	21,327,297	21,327,297	21,327,297	21,327,297
let Income (Loss)	630,655	(3,342,439)	(1,438,628)	(2,684,817)	(3,931,005)	(4,554,100)
Cash Reserve FY'12 / Profit Base Year FY'13-FY'17	630,655	630,655	630,655	630,655	630,655	630,655
-unding Request, Current Period:		(3,973,094)	(2,069,282)	(3,315,472)	(4,561,660)	(5,184,755)
Recurring Non-Recurring		823,094 3,150,000	2,069,282	3,315,472	4,561,660	5,184,755
Cash Reserve + Funding Request, Current Period	630,655	(3,342,439)	(1,438,628)	(2,684,817)	(3,931,005)	(4,554,100)
of Incremental Students Added		10	30	50	70	80
# of Incremental Faculty / Staff Added		2/1	3/5	4/5	5/8	6/8

Budget notes:

- (1) Assumes constant dollars and includes no consideration to CPI or other economic factors that would impact budget projections in FY'12 FY'17.
- (2) Renovation of the dental simulation learning laboratory, one classroom, and one student clinic necessary to accommodate the additional DMD students.
- (3) Based on FY'12 tuition rates held constant at \$31,712; assumes tuition is retained by UF.
- (4) Includes tuition; net of overhead allocation for university infrastructure and operations.
- (5) Includes tuition; before overhead allocation for university infrastructure and operations; presented for reference only.

B. Description of current university initiatives and resources that will strengthen the provision of this service or program:

The UF College of Dentistry is considered a "top five" dental school in the United States by all available measures, including research ranking, clinical productivity, and the academic accomplishments of its students. We continue to experience a high demand for the DMD program, with more than 1,500 applications received each year for 80-83 positions in the DMD class. For the class enrolling in August 2010, there was a large increase in the proportion of Florida applicants seeking admission to dental school. Enrollment expansion would allow for additional qualified Florida residents to access dental education without the accumulation of significant educational debt if UF continues to offer these educational opportunities at the subsidized rate of \$31,712.56 for in-state tuition and \$10,131.44 in fees, including university fees and instrument leasing.

- C. **Description of outcome(s) anticipated or dashboard indicator(s) to be improved:** (Be specific. For example, if this issue focuses on improving retention rates, indicate the current retention rate and the expected increase in the retention rate. In addition, identify the following, if applicable.)
 - 1. Number of Headcount Students receiving services or participating in the program by year, for the next five years:

DMD enrollment* would be phased in over five years as follows:

	Year 1*	Year 2	Year 3	Year 4	Year 5
1DNs	90	100	100	100	100
2DNs	80	90	100	100	100
3DNs	80	80	90	100	100
4DN	80	80	80	90	100
Total	330	350	370	390	400
Increase from baseline	10	30	50	70	80

- * Note: Headcount estimates assume constant enrollment, and do not take into account attrition from the DMD program which typically ranges from 0- 2 percent each year. When a vacancy occurs, the position can be filled by a student who is retracked in the curriculum, or by a transfer student.
- 2. Number of FTE Students receiving services or participating in the program by year for the next five years:

Not applicable.

- 3. Additional degrees, if any, produced as a result of this initiative: (Indicate the additional number of Bachelor's, Master's, Doctoral, & Professional degrees to be produced by school year.)
 - Following the phased-in implementation, the college would produce an additional 20 DMD degrees each year beginning in Year 5.
- 4. Other outcomes:

Expected outcomes of this proposal and benefits to Florida include:

- **Expansion of the DMD class size** from 80 to 100 students per year following the five-year expansion, allowing additional qualified dental school applicants to study dentistry in Florida.
- Increased diversity of the DMD student body through expanded outreach and recruitment efforts targeting underrepresented minority and disadvantaged students, in collaboration with other SUS schools.
- Expanded research. To support the expanded enrollment, faculty would be recruited who are not only excellent clinicians and academicians, but also have an interest in clinical and translational research. These additional faculty members would enhance the college's capacity to expand its research program. Expected outcomes would include an increase in the college's research funding and scientific breakthroughs to improve oral health.
- Expanded patient care services. Dental students provide the full scope of general dental care under the direct supervision of faculty. Expanding the number of enrolled DMD students will result in improved access to affordable dental services for children and adults living in the communities served by our clinical education and outreach programs, which specifically target underserved populations.
- **Economic development** related to the recruitment of additional students, faculty, and support staff as well as facility renovations and/or new construction. In addition, anticipated research funding generated will deliver economic growth within the surrounding Florida communities.

III. Facilities:

- A. Does this issue require an expansion or construction of a facility?
 - The proposal requires renovation of the Dental Science Building on the UF campus and the purchase of dental equipment and classroom technology.
- B. If yes, is the project identified on the Capital Improvement List? If so, identify the project, fiscal amount, year requested, and priority number.

The Campus Master Plan for 2005-2015 was adopted by the University of Florida Board of Trustees on March 31, 2006 following a final review by the Trustees' Committee on Finance and Facilities on March 30, 2006. The Dental Science Building expansion is currently listed as an unfunded project on the plan. 12 However, recognizing the age of the dental sciences building and the changing nature of dental education, patient care and research, the University of Florida has engaged an architectural firm to conduct a visioning and conceptual planning activity that would address space planning and facility space analysis to establish and accommodate innovative, collaborative, and high-tech student learning activities, an inviting clinical environment for patients, community space, and other future college needs. The selected firm will provide facility master planning (program) and conceptual design images for the referenced project for future capital campaign needs.

Facilities background information. In 1957, the Florida legislature authorized the addition of a College of Dentistry to the Health Science Center at the University of Florida. However, funds were not appropriated until 1968, with \$20M from the National Institutes of Health, and \$13M from the State of Florida. The \$13M appropriated in 1968 is the one and only significant state capital investment in dental education in Florida's history. As a result, UF's Dental Science Building is almost 40 years old and has serious design and infrastructure problems that need to be addressed in order to continue the level of achievement expected of the college.

Today, the College of Dentistry occupies 183,772 square feet of the Dental Sciences Building, and 5,745 square feet of space in the Health Science Center 1329 Building in Gainesville. Current facilities challenges include problems related to the aging infrastructure as well as issues with wayfinding, size, configuration, and design.

Space constraints limit the college's ability to expand its activities, including enrollment increases in the DMD and advanced education programs and expansion of our research programs. The Dental Sciences Building was designed to accommodate 60-80 DMD students per year. We currently enroll more than 80 per class for a total enrollment of approximately 330 students, and we are proposing to increase our enrollment to 100 DMD students per class for a total enrollment of approximately 400 DMD students. In addition, the college has added 16 advanced and graduate education programs since its inception and currently hosts 125 advanced and graduate education students. Our faculty and staff have expanded to deliver these academic, clinical and research

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¹² http://www.masterplan.ufl.edu/mpdocs/13_CIP%20Element%202005.pdf. Accessed July 18, 2011.

programs. Further growth is constrained based on the current space and its configuration.

In addition to challenges related to facility size to accommodate our current and proposed expanded programs, the facility has challenges related to its age and accumulated deferred maintenance. Also, dental education and patient care delivery has changed since 1972, and the facility has not kept pace with these changes. The outdated configuration poorly accommodates contemporary dental care delivery, research programs, and new regulations related to these activities. There is limited natural light due to the original building design without windows. And there is little common or social space to support faculty, staff and student interactions. The college's simulation laboratory is too small for additional DMD enrollment at this level and the new dental simulation technology being used at other dental schools. We have inadequate small group teaching/learning space to accommodate innovations in dental education being employed at our peer institutions. Finally, research space would be upgraded to reflect the needs of a contemporary basic and clinical research program.

Estimated renovation costs. An estimate for the cost to renovate the Dental Science Building to accommodate additional DMD students, as well as contemporize the classroom, simulation laboratory, research and clinical care spaces is approximately \$3.15M. This renovation would accommodate the additional students. However, this relatively minor renovation will not overcome the challenges indicative of a 40 year-old facility. We estimate that a top-to-bottom renovation and expansion of the dental building would cost approximately \$50M. In addition to state support, UF would actively pursue private donations, and if possible, the college would direct clinical revenue to support this more extensive renovation project.

While we are not requesting funding for additional community clinics at this time, the UF COD could expand its Statewide Network for Community Oral Health and created one or more clinical teaching facilities outside of Gainesville. The estimated cost of a 40-chair clinical teaching facility, excluding any land costs and necessary site work, would be approximately \$18M per site. Each clinical training site could accommodate 40 clinical DMD students, and faculty and support staff.