

Proposal for College of Health Sciences Organizational Realignment

(Revised 10-1-2018)

Executive Summary

This proposal outlines an organizational realignment in the College of Health Sciences (CHS) that would change the two-department structure with divisions to a 5-department structure and no divisions. Such realignment would include transferring commensurate degrees/academic programs and reporting faculty to the new departments.

The proposed realignment will flatten the organizational structure and streamline reporting lines for more efficient decision-making and operations. The proposal is designed to support a) program autonomy and efficiency, b) educational programs, c) the success of undergraduate and graduate students, d) faculty development and advancement, and e) coordination of shared processes at the College level to promote collaboration and minimize duplication of effort.

There are no changes requested for any CHS degrees and academic programs themselves; the proposal requires only moving existing academic degrees and programs to newly established departments.

No changes in faculty lines (other than department assignments) will result from this realignment effort. The College has consulted with the Office of the Associate Provost for Faculty Advancement for procedural and process advice regarding transition of faculty appointments to newly established departments. No reduction or additions to staff will result from this re-alignment and is thus budget neutral.

Regulations, procedures, and expected processes at the University and College levels were followed and will continue to be employed post-change approval. No changes to College-level rules will result from this realignment. The Appointment, Promotion, and Tenure process for promotion are currently at the College level. Evidences for promotion and tenure were developed by the CHS Faculty Council and adopted by each department via faculty vote and are the same across all departments. Following approval of the proposal and the establishment of new departments, rules and regulations will be constructed by each new department that align with those of the College. Existing faculty members operating under current evidences for promotion and tenure will not have a shift in expectations unless they individually choose to do so. Following Senate approval, the Faculty Handbook will be revised by the faculty to reflect the new department names and any other changes for rules and regulations at the College and department level.

The effective date requested for this organizational change is July 1, 2019.

The CHS Faculty Council in collaboration with the CHS Academic Affairs Committee circulated the proposal to all CHS Faculty and convened a meeting on September 28, 2018 for discussion. An electronic vote opened following the meeting. At its close at 5:00pm on October 1st 47 faculty votes were received out of a possible 71, representing a 66% response rate. The proposal was approved with 46 votes in support, 1 abstention, and 0 votes not in support.

The specific details of the process used to create the Proposal follow this summary.

Current CHS Organizational Alignment

The academic units of the CHS currently consists of 7 divisions divided into 2 departments- the Department of Clinical Sciences and the Department of Rehabilitation Sciences:

- 1) The Department of Clinical Sciences consists of the divisions of Clinical Nutrition**, Physician Assistant Studies, Medical Laboratory Sciences, Health Sciences Education & Research (in which the Human Health Sciences and Clinical Leadership Management programs reside) – and their respective degrees and reporting faculty. Each Division has a Director and the Department has a Chair.

****Note:** The Division of Clinical Nutrition consists only of reporting faculty and a Certificate in Nutrition for Human Performance. The Clinical Nutrition degree program was established in the Department of Medicine in 1966 and transferred to the College of Health Sciences (then the College of Allied Health Professions) in 1968. In 2002 a Graduate Center for Nutritional Sciences was established, which consolidated two master's programs into one with integration into the PhD program. The Graduate Center reported directly to the Graduate School. Administrative functions moved to the College of Medicine. Faculty teaching in the clinical nutrition program remained in their respective Colleges/Departments. In 2006 the Graduate Center for Nutritional Sciences was moved to the College of Medicine, with faculty reporting lines unchanged. Clinical Nutrition faculty in the CHS Division of Clinical Nutrition remain in this College.

The Department of Rehabilitation Sciences consists of faculty assigned to the Divisions of Physical Therapy, Athletic Training, Communication Sciences and Disorders, and their respective degrees. The Rehabilitation Sciences Doctoral program is located in this department. The Rehabilitation Sciences PhD Program is multidisciplinary with primary contributions from CHS faculty in Divisions of Athletic Training, Physical Therapy, Communication Sciences and Disorders and Occupational Therapy (who are faculty at Eastern Kentucky University).

The current department structure of College of Health Sciences is below as Figure 1:

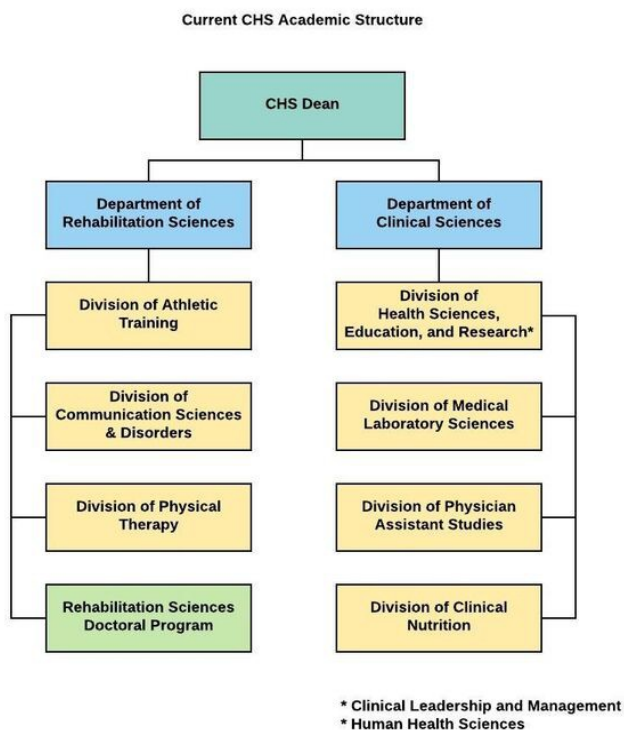


Table 1. Current placement of academic programs and degrees

Department of Clinical Sciences	Department of Rehabilitation Sciences	Housed at the College level in the Dean's Office
Clinical Leadership and Management (BHS)	Athletic Training (MS)	Certificate in Research in Human Health Sciences
Human Health Sciences (BS)	Communication Sciences and Disorders (BHS and MS)	
Medical Laboratory Sciences (BHS)	Physical Therapy (DPT)	
Minor in Health Advocacy	Rehabilitation Services (PhD)	
Clinical Healthcare Management Certificate		
Physician Assistant Studies (MSPAS)		
Certificate in Nutrition for Human Performance		

Please see Appendix 1 for a diagram of the current CHS organizational structure in its entirety. Please see Appendix 2 for the current placement of faculty.

Proposed CHS Organizational Structure

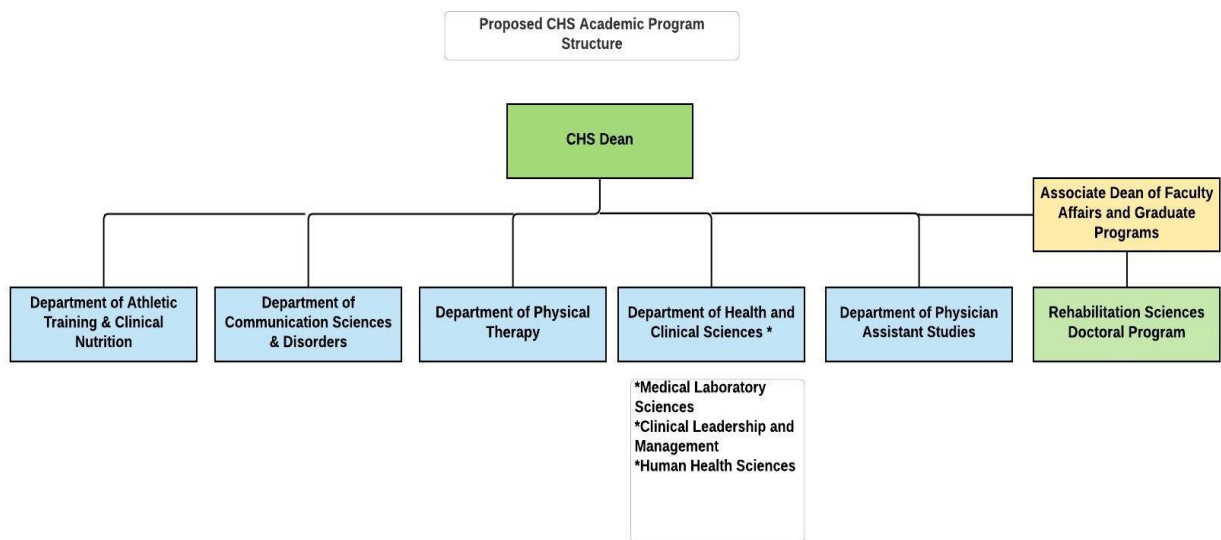
In response to College of Health Sciences' self-study/external review processes and subsequent internal workgroup recommendations, the CHS is requesting approval for the following structural realignment (see Figure 2 and Table 2) and the commensurate transfer of academic degrees and reporting faculty. The aim of this effort is to enhance CHS undergraduate and graduate education, support the advancement of faculty and the College, and streamline the current administrative structure and communications:

- 1) Changes related to the Department of Clinical Sciences:
 - a. Move the Divisions of Physician Assistant Studies and Clinical Nutrition from the Department of Clinical Sciences to new Departments. The Department would then consist of undergraduate programs/degrees (Human Health Sciences, Clinical Leadership and Management, Medical Laboratory Sciences).
 - b. Change the name of the Department of Clinical Sciences to Department of Health and Clinical Sciences to better reflect the emphasis of its educational programs and research focus with commensurate transfer of academic programs/degrees and reporting faculty. (See Appendix 3 for Faculty support) The department will be led by a Chair with direct report to the Dean.
 - Reorganize the Health Sciences, Education, and Research Division through the establishment of Clinical Leadership Management and Human Health Sciences as separate programs.
 - Eliminate the use of 'division' and establish Medical Laboratory Sciences, Clinical Leadership and Management and Human Health Sciences as programs within a shared department. Medical Laboratory Sciences would have a Program Director in place (per accreditation requirements) and Clinical Leadership Management and Human Health Sciences would each have a Director of Undergraduate Studies.

- 2) Changes related to the Department of Rehabilitation Sciences:
- a. Dissolve the Department of Rehabilitation Sciences
 - b. Create individual departments named a) Department of Physical Therapy and b) Department of Communication Sciences and Disorders – which are currently housed in the Department of Rehabilitation Sciences—with commensurate transfer of academic degrees and reporting faculty to their respective new departments. Each department will have a Program Director and/or other positions as required by accreditation bodies and will be led by a Chair with direct report to the Dean. Use of Divisions will be eliminated.
 - c. Create a department named Department of Athletic Training and Clinical Nutrition, with the commensurate transfer of reporting faculty and the Athletic Training MS degree and the Certificate in Nutrition for Human Performance to the new department. The Department will have a Program Director and/or other positions as required by corresponding accreditation bodies of its programs. The department will be led by a Chair with a direct report to the Dean. This change reflects the requests of faculty in both the Clinical Nutrition and Athletic Training divisions and creates opportunities for collaborations around research, education, and service initiatives. (See LOS from CAFÉ and COM Nutritional Sciences for department name, Appendix 14a and b)
 - d. Establish the Physician Assistant Studies program as its own department with commensurate transfer of academic degrees and reporting faculty. The department will have a Program Director and/or other positions as required by accreditation bodies and be led by a Chair with direct report to the Dean.
 - e. Move the Rehabilitation Sciences Doctoral program (RHB) from the Department of Rehabilitation Sciences to the Dean’s Office with commensurate transfer of the academic degree and students enrolled in the RHB PhD program. The faculty of record remain unchanged and are in support of this shift (see Appendix 4 for faculty Letter of Support). The Program Director will report to the Associate Dean of Faculty Affairs and Graduate Programs.
 - f. Already housed in the Dean’s Office, the Undergraduate Certificate in Research in Human Health Sciences will move from the Associate Dean of Research to the Associate Dean of Undergraduate Education (a recently established position). The Faculty of Record remains unchanged. (See Appendix 5 for Certificate Faculty of Record Support).
 - o **Note:** The following programs are currently under review by the University Senate for suspension:
 - BACH-AH Undeclared
 - RESI-MS Reproductive Biology
 - RESI-PHD Reproductive Biology
 - RESI-CERTG Reproductive Biology

The suspension of these courses is the result of an administrative cleanup of SAP. These programs are not part of the current structure and are not included in this proposal.

The proposed structure of the departments of the College of Health Sciences is below as Figure 2 and Table 2:



Department/Office	Academic Programs/ Degrees
Department of Health and Clinical Sciences	Medical Laboratory Sciences (BHS) Clinical Leadership and Management (BHS) Human Health Sciences (BS) Minor in Health Advocacy Clinical Healthcare Management Certificate
Department of Athletic Training and Clinical Nutrition	Athletic Training (MS) Certificate in Nutrition for Human Performance (undergraduate)
Department of Communication Sciences and Disorders	Communication Sciences and Disorders (BHS and MS)
Department of Physical Therapy	Physical Therapy (DPT)
Department of Physician Assistant Studies	Physician Assistant Studies (MSPAS)
Housed at the College level in the Dean's Office	Rehabilitation Sciences (PhD) Undergraduate Certificate in Research in Human Health Sciences

Table 2. Proposed location of Academic Programs and Degrees

Please see Appendix 6 for a diagram of the proposed CHS organizational structure in its entirety, Appendix 7 for a Diagram of Proposed Structural Change and Reporting Lines, and Appendix 8 for the proposed placement of faculty.

Rationale for the Proposed Realignment

CHS External and Unit Review Recommendations: This proposed structural realignment is supported by recommendations from both internal and external review and CHS committee activities. A number of CHS reviews occurred from 2009 through 2016 that included the periodic review of the Department of Clinical Sciences, self-studies of the undergraduate programs (Human Health Sciences, Clinical Leadership and Management, and Medical Laboratory Sciences), and the periodic review of the Department of Rehabilitation Sciences (and self-study of Communication Sciences and Disorders). The College of Health Sciences External Review took place in 2017 after all other review activities.

Recommendation examples:

- The CHS External Review Committee (CHS ERC) endorsed the intention shared by the Dean to review the structure of the CHS to “create a “flatter,” more efficient organization (with transparency and input from the CHS community)” (CHS ERC Report, p. 7). The ERC shared some possible ways through which this goal could be achieved, including to “convert some professionally oriented divisions (and perhaps other divisions) to departments with a direct report to the Dean or his designee” (CHS ERC Report, p. 7.) The proposed realignment is consistent with this ERC recommendation.
- The Department of Rehabilitation Sciences (DRS) ERC recommended: (1) “The Department and College should engage in conversation about its administrative structures that may appear awkward to the outside reviews, and (2) “Broader review of roles and responsibilities of each program and faculty/staff role in relationship to the College’s mission” (DRS ERC Report, p. 10).
- The CHS ERC recommended “...an undergraduate department to oversee admissions standards, advising, policies and procedures, and curricula, and collaborate with the Office of Research on the undergraduate research certificate...” (CHS ERC report, page 7) and “may want to consider appointing a (College) Director of Undergraduate Studies to coordinate and facilitate the curriculum management process.” (CHS ERC report, page 7).

CHS Undergraduate Education Initiative Workgroup: The Dean initiated a college-wide Undergraduate Education Student Success Project in 2016. Subsequent recommendations and those of previous reviews resulted in the creation of a faculty position of Director of Undergraduate Initiatives and the establishment of an Undergraduate Education (UGE) Initiative Workgroup in 2017. The goals of the CHS UGE Initiative Workgroup were to: 1) establish a college-level identity for CHS UGE, 2) recommend/develop initiatives and programs to enhance CHS UGE, and 3) formulate CHS UGE structural/functional recommendations to increase efficiency, reduce redundancy, carry-out the CHS undergraduate mission, and design programs/courses to best meet CHS UG students’ needs.

The membership of UGE Workgroup included faculty and professional staff from each CHS program, support unit, and the Dean’s office. The UGE’s Workgroup recommendations (consistent with previous recommendations) were: (1) create a College-level Undergraduate Education Office with faculty leadership and strong collaboration with Office of Student Affairs for CHS exploratory and undergraduate pre-major students, (2) establish a College-level UGE Leadership Committee to connect all undergraduate programs and tie to the professional/graduate programs and other CHS resources (Office of Student Affairs), (3) establish a faculty Director of Undergraduate Studies for each undergraduate program, and 4) *re-configure the Clinical Sciences Department by removing Physician*

Assistant Studies and Clinical Nutrition, eliminate its divisions, separate the Clinical Leadership and Management and Human Health Sciences programs, and revise the leadership structure.

The workgroup's recommendations (particularly # 4) had implications for other areas of the College, such as the professional and graduate programs. The CHS UGE Workgroup's report and recommendations were discussed by the CHS Executive Council (consisting of CHS Associate and Assistant Deans and the Dean), Division Directors, and faculty and professional staff in each educational program and support unit. These discussions informed this re-alignment proposal.

Benchmark Data: The College of Health Sciences (CHS) UG Student Success Initiative Report (AY 2016-17) and CHS UGE Initiative Workgroup Report (2017-2018) included organizational structure benchmarking data. This proposed re-alignment is consistent with benchmarking results.

University of Kentucky College Benchmarking: Benchmarking included a review of administrative structures found on UK Colleges' websites (See Table 3). The proposed re-alignment will organize CHS using Chairs and Departments-- consistent with the majority of UK's Colleges. Without exception, Departments also appear to have their own faculty Chairs. All but five of the UK Colleges employ solely a Department structure for academic programs. Three of these Colleges include one or more Schools in addition to Departments. One College (Design) has only Schools. Dentistry is the only College with Departments made up of Divisions (which is similar to how CHS is currently organized) and the College of Medicine has a combination of Departments and Chairs and Divisions and Division Chiefs. The College of Communication and Information has a Division in addition to Schools and a Department.

Table 3: UK College academic program and leadership structure summary*

UK College	Schools	Director	Depts.	Chair	Division	Chief	Associate Deans **
Agriculture, Food &	1 (has 4)	1	14	14			
Arts & Sciences			18	18			
Business &			5	5			
Communication &	2	2	1	1	1		
Dentistry			2	2	Depts. have Divisions & Division		
Design	2	2					
Education			7	7			
Engineering			8	8			
Fine Arts	2	2	2	2			
Law							X
Medicine			Has a structure of Departments and Chairs; Divisions & Division Chiefs				
Nursing							X
Pharmacy			2	2			
Public Health	MHA	1	6	6			
Social Work							X

* DUS and DGS positions are not included in the above table

** Associate Deans are noted only for Colleges in which the role of chairs, directors, or chiefs were not found on College websites- all Colleges use an Associate Dean structure of some sort.

External Institution Benchmarking: The CHS Undergraduate Education Initiative effort included benchmarking with other institutions on a number of variables, including organizational structure. A sampling of top Physical Therapy, Communication Science and Disorders, Physician Assistant Studies, and Athletic Training programs served as benchmarks. Structure varied across these institutions as did the use of unit terms such as “program”, “department”, and “division”. Websites were reviewed for evidence of free-standing status (or direct report to the Dean or School Director) of programs similar to the professional and graduate programs in UK CHS.

Physical Therapy: The top Physical Therapy programs were commonly their own departments with a faculty Chair (e.g., University of Delaware, University of Pittsburgh, and University of Iowa). The Physical Therapy program at Washington University in St. Louis was located in the School of Medicine and therefore had a Director. Only Duke University had Physical Therapy as part of a Division; at this institution Physical Therapy was part of the Department of Orthopaedic Surgery in the School of Medicine.

Communication Sciences and Disorders: Likewise, a review of the top Speech-language pathology programs showed that programs were usually constructed as their own Departments (e.g., University of Iowa, Vanderbilt University, and Purdue University). A review of similar programs at other institutions showed programs as part of a Department (rather than a stand-alone Department) to be an exception. The organizational structure of a Communication Sciences and Disorders Department with leadership by a faculty Chair is also one that its’ accrediting organization views as simpler and more standard.

Physician Assistant Studies: We reviewed the organizational structure of the top 10 Physician Assistant Studies programs and found multiple structural arrangements summarized below.

- One program is organized as a Department in a College (University of Iowa)
- Two programs are organized as Departments in Schools (George Washington University, Wake Forest University),
- One program is a free-standing Division (Oregon University),
- One program is a Division housed in a College (University of Nebraska Medical Center)
- Two are programs located in Schools (University of Colorado, Quinnipiac University)
- Three are Divisions located in Departments that are housed in Schools (Duke University, Emory University, University of Utah).

Athletic Training Program: We examined the organizational structure of 10 strong Athletic Training programs. Two of these institutions benchmarked for Athletic Training are also part of the Santa Fe consortium (discussed below). Eight schools (in addition to the Santa Fe consortium) offered Athletic Training as a specific degree or as a specialization or concentration in Kinesiology. All eight programs were housed with other programs. Five programs were located in a College Department consisting of multiple programs (Temple University, Boston University, University of Illinois-Champaign, Michigan State, and University of Connecticut).

In two Colleges, the Athletic Training program counterparts were located in multi-program Divisions as housed within a School (University of Michigan-Ann Arbor and Ohio State University). University of Michigan-Ann Arbor also co-located a Certificate of Physical Activity and Nutrition with the Athletic Training program, which is a comparable arrangement with our proposal that calls for co-locating Athletic Training and Clinical Nutrition in the same Department. One Athletic Training program was located in a Department that consisted of multiple programs (University of North Carolina) and was located in the College of Arts and Sciences.

Santa Fe Consortium: In 2004 a small group of Deans of Schools of Health Sciences with specific NIH agendas met in Santa Fe New Mexico and formed a consortium to learn from one another and advance the research agendas of Colleges of Health Sciences. Six of the CHS counterparts in the Santa Fe Consortium with programs similar to those offered by UK CHS were examined as overall organizational structure benchmarks. Although structures varied, many of the Colleges organize their professional/graduate programs as Departments with a faculty Chair, similar to the proposed CHS realignment (See Table 4). Only graduate/professional programs housed in a Medical College/University were called Divisions.

In this sample, Physical Therapy and Athletic Training programs were found as co-existing in the same Department in addition to being organized as separate Departments. Communication Sciences and Disorders programs in the Santa Fe group were all organized as independent Departments. Physician Assistant Studies graduate programs were organized as Divisions or a Program in the Santa Fe Consortium universities.

This benchmarking effort did not include a comparison of number of faculty, clinical services, or research dollars and their correlation to level of program autonomy.

Table 4: Santa Fe Consortium Structure Benchmarking for Graduate/Professional Programs

University	Structure	Organization	PT	AT	CSD	PAS
Boston U	College of Health and Rehabilitation Sciences	Depts. Of program(s)	Together – one Department		Own	Division in School of Medicine
U of Missouri	School of Health Professions	Depts. of program(s)	Together in one Department (AT is a Division in PT Dept)		Own	Division in School of Medicine
Medical U of S. Carolina	College of Health Professions	Depts. of divisions (s)	Division in Dept. of Health	NA	NA	Division in Dept. of Health
Alabama-Birmingham	School of Health Professions	Depts. of program(s)	Own	NA	NA	Program in Dept. of Clinical & Diagnostic
Ohio State	School of Health and Rehabilitation	In COM-divisions in School	Own Division	Own Division	NA	NA
Utah	College of Health	Depts. of program(s)	Together- one Department		Own	Division in Depart. Family & Preventive Medicine

Rationale and Benefits

Benefits for the College: The rationale for the proposed realignment is multi-dimensional and has advantages for CHS undergraduate and professional programs.

Graduate and Professional Education: The proposed structure allows for increased program autonomy, creates a direct line of communication to the Dean (via each Department Chair) for more efficient decision-making, allows for coordinating shared processes at the College level and strategic targeting of program specific needs with Department-level faculty, staff, and resources.

This proposed structure would allow departments to better focus student initiatives to more easily demonstrate compliance with their specific professional accreditation standards. The CHS graduate and professional degree programs are accredited—each by different organizations. The simpler arrangement of independent Departments with faculty Chairs provides the autonomy and leadership within the program to support program-specific efforts, in accordance with expectations of their respective accrediting bodies rather than requiring universal norms of a shared Department:

- *Physician Assistant Studies (PAS):* Accreditation Review Commission on Education for the Physician Assistant (ARC-PA)
- *Physical Therapy (PT):* Commission on Accreditation in Physical Therapy Education (CAPTE)
- *Athletic Training (AT):* Commission on Accreditation of Athletic Training Education (CAATE)
- *Communication Sciences and Disorders (CSD):* Council on Academic Accreditation (CAA) in Audiology & Speech-Language Pathology of the American Speech-Language-Hearing Association

Clinical Nutrition does not consist of enough faculty to be an individual Department, which necessitated completing the process outlined in the CHS Faculty Handbook (<https://www.uky.edu/chs/faculty-handbook>) through which faculty were asked about their preferences for assignment. The decision to create a Department of Athletic Training and Clinical Nutrition was a result of the request from the Clinical Nutrition and Athletic Training Faculty (See Appendix 9). This co-location arrangement creates opportunities for synergistic research and educational efforts that align compatible areas of interest and initiatives for innovative and collaborative programming.

This proposal calls for the Communication Sciences and Disorders (CSD) Division to be its own Department, a structure consistent with that of counterpart programs in other institutions and accreditation expectations. Both the undergraduate and graduate CSD programs would be housed in this department since the faculty is shared across programs and there is an educational trajectory driven by accreditation standards. The faculty support this arrangement to best serve its students. The CSD Director of Undergraduate Studies would be connected to the other CHS undergraduate programs via participation in a CHS Undergraduate Leadership Team, in which all CHS Directors of Undergraduate Studies will be members.

Shifting the Physician Assistant Studies Division from the Department of Clinical Sciences to create an independent Department would align it with the other accredited graduate and professional programs in the College as it would have a similar structure. Moving it from its existing Department also allows for the creation of a Department of Health and Clinical Sciences that consists of only undergraduate programs, thus allowing for Department planning to focus on the needs and success of undergraduates.

Although departmental/program autonomy is supported by this proposal, communication processes will be established to promote cross-college collaboration and function and is consistent with the College's overall goal of Interprofessional education and practice. Each Department will have a faculty Chair to serve as a liaison and participate in College planning in interprofessional education and as well as practice, with support from the Associate Dean of Clinical Engagement. The proposed structure includes communication processes/forums facilitated by the Associate Dean of Faculty Affairs and Graduate Programs that includes all Chairs and Program Directors to maintain the collaborative culture in CHS and promote shared operations where appropriate, joint planning and programming, avoid isolation of individual programs, and guard against the creation of silos.

Undergraduate Programs and Students: Creating one department that includes only undergraduate programs (with plans to collaborate and coordinate with the Communication and Sciences Disorders undergraduate program) allows faculty and professional staff to provide support and services to the CHS undergraduate students as a total cohort while also meeting their program-specific needs. The other recommendations of the UGE Workgroup's report that were previously outlined have already been implemented in CHS to better serve our undergraduate students, particularly the exploratory and pre-major students. This proposal outlines implementation of the final recommendation of the report. These changes are anticipated to positively impact student retention rates, progression and time to degree.

Rehabilitation Sciences Doctoral Program: The Rehabilitation Sciences Doctoral Program is multidisciplinary with primary contributions from associated faculty in the CHS Department of Rehabilitation Sciences Divisions of Athletic Training, Physical Therapy, and Communication Sciences and Disorders; along with Occupational Therapy faculty from Eastern Kentucky University (a partnering institution). All faculty associated with the Rehabilitation Sciences Doctoral program are aligned with a division in the current Department of Rehabilitation Sciences. To date, in CHS, only the graduate/professional programs in the Department of Rehabilitation Sciences have contributed. Moving this program to the College level will not change the current faculty involvement in the Rehabilitation Sciences Doctoral Program, but it will create the opportunity for the Physician Assistant Studies and the Department of Clinical Sciences Faculty to also contribute to the program. The reporting line of the RHB Program Director will change from the Chair of the Department of Rehabilitation Sciences to the Associate Dean of Faculty Affairs and Graduate Programs, in recognition of the multidisciplinary and collaborative nature of the degree and faculty contributions. The Rehabilitation Sciences Doctoral Program will continue to have faculty leadership via a Program Director who will hold regularly scheduled forums to foster the collaboration among department faculty that is integral to the success of the program and its students.

Support Services for Student Success: In addition to the College level and Department specific support previously described, the professional/graduate programs and undergraduate programs will continue to interface with and be supported by the Associate Dean and CHS Office of Student Affairs (OSA). The OSA will continue to offer program and student engagement support at all program levels and serve as a resource for faculty. For example, OSA would continue to be involved and facilitate student applications to programs, provide support for admissions processes, provide professional advising, assist with student registration, orientations, and address student behavioral concerns for all CHS programs and students. This re-structuring effort creates an opportunity to strengthen the OSA and academic program interface in areas such as co-curricular events and program initiatives to support students.

Proposal Development Process

This proposal is the result of an extended examination of recommendations received from external College, Department, and Academic Program Reviews and CHS initiated projects. An inclusive process that allowed for broad-based faculty and staff involvement was used. Phases of the development process are described below and outlined in the Development Process Timeline (Appendix 10).

CHS Undergraduate Success Initiative: In Fall 2016, the Dean initiated the faculty-led *CHS Undergraduate Success Project*. Created in response to increased undergraduate enrollment and external review recommendations, its aims were to build upon the previously generated external reviews and self-reports and 1) assess the current state of CHS Undergraduate education (UGE), 2) identify strategies (including structural) to improve student outcomes, and 3) describe potential models to consider to support CHS student success moving forward. A CHS Undergraduate Success Project Advisory Committee with cross-college representation provided input throughout by serving as representatives of their respective areas, reviewing data summaries of meetings with divisions and units, and discussing recommendations to finalize the report.

Discussions were held with faculty of each CHS UG program, Division Directors, Department Chairs, CHS Undergraduate Research Director, Directors of the Graduate and Professional Programs, professional staff from the Interprofessional Healthcare Residential College (IHRC) and Office of Student Affairs (OSA), as well as undergraduate student representatives. All meeting summaries were member checked. A draft of report content and recommendations were reviewed by the Advisory Committee and Dean Lephart and discussed in two open meetings to which all CHS faculty and staff were invited.

Resulting recommendations were shared College-wide in Spring 2017 that highlighted opportunities for collaboration, program/service enhancement, and structural change. A faculty position - Director of Undergraduate Initiatives—was created to provide leadership for continued development of this effort.

CHS Undergraduate Initiative Workgroup: The *CHS Undergraduate Education Initiative Workgroup* was formed to 1) establish a College-wide identify for undergraduate education, 2) make recommendations to enhance undergraduate program/support, and 3) review options for structure re-organization to meet undergraduate student needs and enhance efficiency and reduce redundancy. Workgroup members included representatives from each CHS division and undergraduate program, program, and the Offices of Student Affairs, Assessment, and the Dean, in addition to the Director of the Undergraduate Research Certificate and Department Chairs. Workgroup members represented their areas in all activities and served as liaisons for their respective divisions/units. Meeting notes were member-checked and posted on a password protected webpage accessible to all CHS faculty and staff, created to share information about this Initiative. The site also has a link through which any CHS faculty/ staff member could submit questions/comments to the Director of Undergraduate Initiatives.

Workgroup Members worked together to articulate a common CHS Undergraduate Educational Framework and associated learning outcomes that also had relevance for graduate and professional programs. This shared conceptualization—along with recommendations from CHS self-studies and external reviews, benchmarking information, the CHS UGE Initiative Project Report, and the extant literature – informed the Workgroup’s discussion and subsequent recommendations related to function and potential structural realignment. Since the focus of the CHS UGE Initiative Workgroup was on CHS undergraduate education, its structural recommendations did not include how the graduate programs recommended for removal from their current department (or other graduate programs) should be structurally accommodated. Subsequent vetting and discussion of the Workgroup’s proposal did address these topics, beginning with Executive Council (Dean, Associate and Assistant Deans).

The recommendations that emerged from the CHS Executive Council discussion of the CHS UGE Initiative Project Report and agreed upon by Division Directors shaped those found in this proposal. The simpler and flatter CHS organizational chart created by establishing separate Departments with faculty Chairs who report directly to the Dean was requested unanimously by the Division Directors during structural discussions. Following the roll-out of the proposed plan in the All College Meeting, the Dean and the Assistant Dean of Operations met with each College Division (program) and Unit to discuss the plan, answer questions, hear suggestions, concerns, etc. This feedback was discussed by the Dean with the Executive Council and then the Division Directors before finalizing a draft proposal.

Timeline of Proposal Vetting Events: Following the receipt of the *CHS Undergraduate Education Initiative Workgroup* report on February 2, 2018, the Dean began the process of vetting the realignment proposal:

- The CHS Executive Council was provided the report and met on February 5, 2018 for an overview of its recommendations, summarized by the Director of Undergraduate Initiatives.
- This initial CHS Executive Council meeting was followed by another CHS Executive Council meeting on February 7, 2018 to answer questions that were asked since the first meeting.
- The Dean then sent a College-wide announcement to all faculty and staff on February 12, 2018 that summarized the Workgroup recommendations and the subsequent vetting process that involved a full vetting and discussion across the College.
- A meeting with the CHS Division Directors occurred on February 14, 2018 to discuss the Workgroup's structural/organizational recommendations. Division Directors were asked to forward the proposal to their faculty and staff, discuss it, and forward questions, ideas, etc. to the Dean to then discuss with the Executive Committee.
- A CHS Leadership Retreat was held on February 15, 2018, which was attended by all CHS Executive Council members to further discuss and operationalize the recommendations.
- The report was posted on the UGE Initiative website (password protected and available to all CHS faculty and staff). The Dean distributed an email College-wide on February 26, 2018 to inform all faculty and staff of its availability and that Division Directors would be discussing the report and its recommendations with their respective areas and would forward comments, questions, and concerns to the Dean and Leadership Team.
- All Division Directors forwarded any questions and comments they received to the Dean's Office for response. Additionally, several questions were submitted via the UGE Initiative Webpage, which were forwarded for response. This feedback was received prior to the Dean's visits to each Division/Unit and were specifically addressed during each of these discussions.
- The Associate Dean of Faculty Affairs and Graduate Programs and the Assistant Dean of Operations met with the staff of the CHS Dean's Office, IT, Advancement, Creative Services, and the Business Office on March 8, 2018 to review the report, its recommendations and gather feedback and questions to bring back to the Dean.

- The Dean and the Assistant Dean of Operations met with each Division’s faculty and staff, support units/staff, and College and Department level staff to discuss the proposed structure, gather ideas, hear concerns, and answer questions. These meetings began on March 26, 2018 and were completed by April 12, 2018. The Assistant Dean took notes at the meetings (filed in OneNote) and also answered resource/budget-related questions. Department Chairs were asked not to attend any of the Division meetings so that faculty and staff could speak more freely.
 - Schedule of meetings the Dean and Assistant Dean of Operations held with the faculty and staff of the Divisions and Units of CHS:
 - 3/26/18: Communication Sciences and Disorders Faculty and Staff
 - 3/30/18: Physician Assistant Studies Faculty and Staff
 - 4/02/18: Athletic Training Faculty and Staff
 - 4/03/18: Human Health Sciences and Clinical Leadership and Management Faculty and Staff (HSER Division)
 - 4/09/18: Physical Therapy Faculty and Staff
 - 4/10/18: Department Administrative Staff
 - 4/11/18: College Administrative Services (CHS Dean's Office, IT, Advancement, Creative Services, Business Office, Office of Student Affairs)
 - 4/12/18: Clinical Nutrition Faculty and Staff
 - 4/12/18: Medical Laboratory Sciences Faculty and Staff
- The Dean also met with the Division Directors and Executive Council together on March 20, 2018 to discuss the proposed realignment.
- The Dean and Assistant Dean of Operations met only with the Division Directors on April 25, 2018—after concluding all division/unit visits—to continue to vet and develop a plan.
- A resulting draft of a CHS realignment plan was shared with CHS faculty and staff at the Spring College Meeting on April 27, 2018. The Dean also announced the forming of a new Workgroup to create a proposal describing the proposed CHS structural realignment for vetting by CHS faculty and other College constituents and submission through the approval process according to University Rules and Regulations and College of Health Sciences By-laws (as outlined in the CHS Faculty Handbook: <https://www.uky.edu/chs/faculty-handbook>).
- The CHS Graduate and Professional Program Restructuring Proposal Workgroup was established and held its inaugural meeting on May 24th. The Workgroup membership included representatives from each professional and graduate program, and the CHS Associate and Assistant Deans.
- CHS Directors and Executive Council were provided an update of the CHS Graduate and Professional Program Restructuring Proposal Workgroup process in a July 30, 2018 meeting.
- A draft of the structural realignment proposal was provided to the CHS Realignment Workgroup for review and discussion in a meeting on August 9, 2018.
- The proposal was revised in response to the feedback/comments received from the CHS Realignment Workgroup in a follow-up meeting on August 14, 2018. The Workgroup agreed that

an edited report should be sent to the CHS Faculty Council for continued vetting as described in the College procedures outlined in the *Faculty Involvement in Proposal Vetting* section below.

- An update of the proposal development process and remaining steps for vetting was shared at the College-wide meeting on August 13, 2018 by the Workgroup co-chairs.

Faculty Involvement in Proposal Vetting: CHS faculty participated in all phases of the Realignment effort. Each academic program had faculty representation on the Workgroups, CHS faculty were able to review documents, ask questions, receive answers, express concerns and objections, as well as offer ideas throughout the process. The CHS followed its internal procedures in reviewing this proposal, and acted in accordance with University expectations. According to the GR VII.A.4, the faculty of each college shall establish its own rules—which includes the committee or council structure deemed necessary for the performance of the faculty’s functions in educational policy-making.

To assure that proper processes were followed, we adhered to CHS guideless as outlined in the Faculty Handbook (available at <https://www.uky.edu/chs/faculty-handbook>), specifically the Ad Hoc Policy for Determining the Future of Academic Programs that was approved by the CHS Faculty Council in 2017 (<https://www.uky.edu/chs/sites/chs.uky.edu/files/Ad%20Hoc%20Policy%20for%20Academic%20Programs%20Final%20Version.pdf>). The policy outlines the process and procedures for consolidation, transfer, discontinuation or significant reduction of an academic program that may occur under two conditions: 1) requests resulting from a proposal initiated from within a unit and 2) requests that originate from a source outside of an academic program. The second condition applies to this proposal.

The policy states that the Faculty Council will lead this process in cooperation with the Academic Affairs Committee: *“Because the Academic Affairs Committee, a committee appointed by the Faculty Council, has the final vote to determine the recommendation about a given proposal, the Faculty Council will be designated as the faculty governance body to handle this process”* (page 1).

Based on College policy and guidelines, subsequent CHS proposal review included:

1. Faculty Council met with Academic Affairs Committee to review the submitted proposal and discussed how to proceed and present the proposal to the faculty.
2. Faculty Council elected to engage the broader faculty in further discussion. Faculty Council sent the proposal to the broader faculty (*and CHS staff*).
3. Faculty Council members scheduled and led a forum for discussion. Faculty representing both the affected unit(s) and the originator(s) of the proposal were present to review the proposal and discuss their positions.
4. Faculty in attendance were able to submit questions in writing to discussion leaders or pose questions during the discussion. Time was allotted during the forum to allow for open discussion. Faculty who were unable to attend were asked to submit questions in writing before and after the discussion.
5. Following the forum, a few edits were made to the proposal reviewed in response to faculty discussion and feedback. The revised proposal was sent to Faculty Council and then out to all CHS faculty with a tracking sheet that identified changes made. A faculty vote was taken by electronic ballot- each faculty member received an electronic ballot after the meeting to allow each faculty member to vote on the motion put forward by the Faculty Council. The ballot form provided an option for respondents who voted ‘yes’ or ‘no’ to provide comments..
6. The results of the vote were tallied by Faculty Council and forwarded with a recommendation (See Appendix 11) to the Academic Affairs Committee for final disposition.

7. Academic Affairs Committee (See Appendix 12), approved the proposal and it was forwarded to the Health Care Colleges Council (HCCC) for vetting/approval.
8. Following approval by HCCC, the proposal will be forwarded to the University Senate Academic Organizations and Structure Committee for review.
9. Once approved the proposal is forwarded to Senate Council. Following Senate Council approval, the proposal progresses to the full University Senate for vote and approval.
10. The Board of Trustees issues final approval.

Reassignment of Reporting Faculty: The College has consulted with the Office of the Associate Provost for Faculty Advancement for guidance in realigning faculty appointments in the newly established departments and has followed these recommendations. The current departmental placement of faculty and the proposed realignment should this proposal be approved are delineated in Appendices 2 and 8 respectively. Following CHS Faculty approval of the proposal, each Division Director will ask Division faculty members if they agree with a move to the appropriate newly formed Department. Those in agreement will sign one letter prepared at the Division letter. Stated also in the letter is that the undersigned faculty understand that they will be evaluated on the current College-level Evidences of the appropriate title series for appointment, promotion and tenure. These evidences will not change in the realignment. Rules and regulations will be constructed by each new department that align with those of the College, but faculty already operating under current evidences for promotion and tenure will not have a shift in expectations unless they individually choose to do so. See Division Faculty letters in Appendix 13.

Appointment of Department Chairs: A transition from 2 departments and 7 divisions to 5 departments will also require the discontinuation of Division Directors and the appointment of Chairs in the 4 newly created departments. The procedure by which chairs for these departments will be selected is outlined in the CHS Faculty Handbook (p. 13), GR VIII at <http://www.uky.edu/regis/sites/www.uky.edu/regis/files/files/gr/gr8.pdf> and guidelines from the Associate Provost of Faculty Advancement (http://www.uky.edu/ofa/sites/www.uky.edu/ofa/files/uploads/Chairs%20Guide%20Appointment_Reappointment.pdf).

Staff Involvement in Proposal Vetting: CHS staff members have been included in the vetting process of the proposed realignment (see Proposal Development Process). Staff that work within Divisions were included in Division meetings and those based in Units had separate meetings to discuss the proposal and give feedback and participated in the College-wide meetings. Policies and procedures of UK and CHS were followed throughout proposal vetting process. The CHS HR Director and Assistant Dean of Operations met several times with Catie Lasley, UK Human Resources Executive Director and Bill Verble, Senior HR Business Partner, throughout the planning process to review pertinent policies and procedures and discuss the realignment process and its potential impact on staff. The CHS Dean's Office completed an activity analysis of staff positions within the College to identify common processes and responsibilities and those duties that could be impacted by re-alignment. The CHS Director of HR met individually with two staff members impacted by the realignment to identify work-related interests, skills, career goals, and those duties they preferred to which they currently were assigned. Any resulting changes to staff positions will be addressed per UK HR policy #30.00 Compensation Administration. No staff positions are to be eliminated or added as a result of this realignment.

Budget and Resource Implications: This change in organizational structure will have minor implications on budget, but will not negatively affect the financial stability of the college. In our current structure all divisions and departments receive both recurring operating funds and nonrecurring operating funds (funded through the salary reimbursement process). The college will need to review current allocations of these funds and create new formulas for allocation. This will allow for additional funds to be allocated at the new department level, giving them more autonomy in the way they operate their departments. The change in the college structure will have an impact on our administrative DOEs.

Some current faculty administrative positions will be eliminated and others added or transformed. The overall increase in administrative DOE is less than 18% FTE and distributed across the departments. We were able to decrease the overall administrative effort to deliver the programs. The increase in DOE was the result of adding Directors of Undergraduate Studies in two departments and normalizing the DOE for Directors of Undergraduate Studies and Director of Graduate Studies across the college. This proposal will have a very minimal impact on the college budget and time allotment and the additional funding has been allocated and approved from the current recurring budget, and as such is best described as budget neutral.

Faculty Proposal Review and Vote: The CHS Faculty Council in collaboration with the CHS Academic Affairs Committee circulated the Proposal for College of Health Sciences Organizational Realignment to all CHS Faculty for their review and convened a meeting on September 28, 2018 for discussion. Forty-two CHS faculty members were in attendance. Action items in the proposal were reviewed, open discussion and Q & A occurred, and two requests for additional amendments to the proposal made and approved. An electronic vote opened following the meeting and the announcement of the vote included mention of the changes made to the proposal since its first circulation to the faculty. The revised proposal was also sent to all faculty following the close of the Faculty Meeting. Meeting minutes and wording of the voting ballot can be found in Appendix 11.

When the vote closed at 5:00pm on October 1st 47 faculty votes were received out of a possible 71, representing a 66% response rate. The proposal was approved with 46 votes in support, 1 abstention, and 0 votes not in support. Faculty were able to make comments on the voting ballot and the following comments were received:

- I appreciate the thoroughness of the process and communication to all involved. Well done.
- The wording for the PAs has not been changed to be lead by a Chair and a Division Director or Chair/Division Director as one position. There are concerns having one person filling both positions of the Chair and Division Director
- Thanks to the committee and leadership for all of the hard work in bringing this concept to fruition.
- Makes good sense