

April 24, 2015

Andrew Hippisley Chair, University of Kentucky Senate Council

Dear Dr. Hippisley,

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The Senate Academic Organization and Structure Committee (SAOSC) members individually reviewed the proposal to change the name of the Multidisciplinary Research Center "Center for Interprofessional Health Education, Research and Practice" to "Center for Interprofessional Health Education". The proposal was distributed by email to all 11 members of the Senate Academic Organization and Structure Committee for review. As of this date, 8 of the 11 members of the committee responded by email indicating approval of the proposal.

Dr. James C. Norton, Director of the Center, was the author of the proposal. The Center is designated to promote Inter-professional Education (IPE) for students pursuing education involving the Colleges of Communication and Information, Dentistry, Health Science, Medicine, Pharmacy, Public Health and Sociology. They define IPE as education, training or teaching involving more than one profession in joint, interactive learning. The Center was approved by the Board of Trustees in 2010 following a discussion of the proposal at the May 3, 2010 Senate Meeting.

The explanation for the change in the name is that the Center makes a significant contribution to the educational aspect of the IPE while the research and practice components are better served in other programs. Specifically, they reported that research on IPE falls within the purview of the Center for Health Systems Research and practice aspects fall within the scope of UKHealthCare. This name change more accurately reflects the activities of this Center, specifically education, and reduces the appearance of conflict with other programs involved in IPE research and practice.

The name change was proposed by a faculty committee representing the constituent colleges and endorsed by the board of directors for the Center (Deans of affiliated colleges) and the Provost.

The SAOSC committee voted to send the proposal to the University of Kentucky Senate Council with a recommendation for endorsement.

Respectfully and on behalf of the SAOSC,

Ernest Bailey, PhD Professor Chair of SAOC 4/8/15

Memo

To: Andrew Hippisley, PhD, Senate Council Chair

From: James C. Norton, PhD, Director, UK Center for Interprofessional Health Education, Research and Practice (CIHERP, herein after, 'Center')

Re: Center name change

Attached please find the following documents:

**SAOSC Form Rev** 

Senate Council Organizational Structure Committee Guidelines

Minutes-Final Report Recommendations\_Notes from Board Meeting-4.3.15

These documents are submitted to request approval by the Senate Council of a change in the name of the Center. This request is supported by Center Leadership, including its Director, Board of Directors and the Provost, and reflects the recommendations of a committee charged by the Provost in late 2014 to review the Center and to make recommendations regarding its future course. This committee was chaired by Dr. James Holsinger, MD and included the following members representing the health professions colleges:

Dr. James Holsinger – Public Health (Chair)

Dr. Patricia Burkhart - Nursing

Dr. Pinar Emecen-Huja – Dentistry

Dr. Christopher Feddock – Medicine

Dr. Janice Kuperstein - Health Sciences

Dr. James Norton - IPE Center

Dr. Frank Romanelli – Pharmacy

Its recommendations were approved unanimously by the committee and were discussed by the Center Board of Directors, modified by that body, approved unanimously, and sent to the Provost on 4/3/15. He approved them on 4/5/15. The first recommendation was to change the name of the Center, better to reflect its current, and expected future, functions.

I respectfully ask that the Senate Council favorably consider this request and am happy to provide additional information if needed.

#### COVER PAGE FOR CHANGES TO ACADEMIC ORGANIZATION OR STRUCTURE OF AN EDUCATIONAL UNIT

The Senate's Academic Organization and Structure Committee (SAOSC) is tasked by the University Senate with the review of proposals to change academic organization or structure. The information needed by the SAOSC for the review of such proposals is set forth in *Senate Rules 3.4.2.A.5*<sup>1</sup>.

The SAOSC has developed a set of guidelines (from the Senate Rules) that are intended to ease the task of proposal submission (available at <a href="http://www.uky.edu/Faculty/Senate/forms.htm">http://www.uky.edu/Faculty/Senate/forms.htm</a>). As proposal omissions usually cause a delay in the review process, the individual(s) responsible for the proposal is (are) urged to familiarize themselves with these guidelines before submitting their proposals for review. In particular, the individual responsible for the proposal must fill out Sections I, II and III of this form, as well as include statements and documentation that provide a full accounting of the items a - i, below.

- a. Disposition of faculty, staff and resources (financial and physical);
- b. Willingness of the donating units to release faculty lines for transfer to a different educational unit;
- c. Consultation with the faculty of the unit to which the faculty lines are proposed to be transferred;
- d. Consultation with the faculty of educational unit that will be significantly reduced;
- e. Summary of votes and viewpoints (including dissents) of unit faculty and department/college committees;
- f. Ballots, votes expressing support for or against the proposal by unit faculty and staff and committees;
- g. Letters of support or opposition from appropriate faculty and/or administrators; and
- h. Letters of support from outside the University.

#### Section I – General Information about Proposal

One- to two-sentence description of change:	We propose to change the Research and Practice. It w				
Contact person name:	James C. Norton, PhD	Phone:	32057	Email:	jnorton@email.uky.edu
Administrative position (dean, chair, director, etc.): Director					

#### Section II – Educational Unit(s) Potentially Impacted by Proposal

Check all that apply and name the specific unit(s).				
	Department of:			
	School of:			
	College of:	Communcation and Information, Dentistry, Health Sciences, Medicine, Pharmacy, Public Health, Social Work,		
		Ficulti, Social Work,		
	T			
	Graduate Center	for:		
	Interdisciplinary Instructional Program:			
	Multidisciplinary I	Research Center/Institute:		

#### Section III – Type of Proposal

Check all that apply.		

<sup>&</sup>lt;sup>1</sup> Items a-i are derived from *Senate Rules 3.4.2.A.5*. The Senate Rules in their entirety are available at <a href="http://www.uky.edu/Faculty/Senate/rules\_regulations/index.htm">http://www.uky.edu/Faculty/Senate/rules\_regulations/index.htm</a>.)

#### COVER PAGE FOR CHANGES TO ACADEMIC ORGANIZATION OR STRUCTURE OF AN EDUCATIONAL UNIT

A.	Changes
$\boxtimes$	Change to the name of an educational unit.
	Change to the type of educational unit (e.g., from department to school).
В.	Other types of proposals
	Creation of a new educational unit.
	Consolidation of multiple educational units.
	Transfer of an academic program to a different educational unit.
	Transfer of an educational unit to a different reporting unit.
	Significant reduction of an educational unit.
	Discontinuation, suspension or closure of an educational unit.
$\boxtimes$	Other (Give a one- or two-sentence description below; a complete description will be in the proposal.
	We propose to change the name of the Center for Interprofessional Health Education, Research and Practice.
	It will be called, the Center for Interprofessional Health Education.

#### Section IV is for internal use/guidance.

#### Section IV – Guidance for SAOSC, Senate Council and University Senate

#### SAOSC Review of Type A Proposals (Changes to Type of, or to Name of, an Educational Unit)

- ✓ SAOSC review of proposal.
- ✓ SAOSC recommendation for an additional or joint review by other Senate committee(s) (e.g. Senate's Academic Programs Committee).

#### SAOSC Review of Type B Proposals (All Other Changes)

- ✓ SAOSC review of proposal.
- ✓ SAOSC recommendation for an additional or joint review by other Senate committee(s) (e.g. Senate's Academic Programs Committee).
- ✓ SAOSC review of proposals for creation, consolidation, transfer, closure, discontinuation, or significant reduction and educational unit, or transfer of an academic program to a different educational unit (attach documentation).
- ✓ Program review in past three years (attach documentation).
- ✓ Request to Provost for new program review (attach documentation).
- ✓ Open hearing (attach documentation).
  - SAOSC information must be shared with unit 10 days prior to hearing.
  - Open hearing procedures disseminated.

#### Voting by SAOSC, Senate Council and University Senate

- ✓ Endorse (or do not endorse) the academic organization, reporting, infrastructure, etc.
  - o This vote is taken by the SAOSC, SC and Senate for every SAOSC proposal.
- Approve (or do not approve) the academic status or content of academic program.

# COVER PAGE FOR CHANGES TO ACADEMIC ORGANIZATION OR STRUCTURE OF AN EDUCATIONAL UNIT O This vote is taken by the SAOSC, SC and Senate only when the review involves an MDRC.

Senate Academic Organization and Structure Committee (SAOSC)

Guidelines for Preparing a Proposal for Change in Organization

May 5, 2011 (revised December, 2013; October 2014)

This document provides guidance on the preparation of proposals to change (modify or create) the organizational structure of an academic unit focused primarily on the academic aspects of the structural change. The recommendations are based on the experience of previous proposal documents and issues that have come up through the vetting process. Your proposal should consider that some members of the SAOSC committee, Senate Council, and University Senate may not be familiar with the relevant academic disciplines. Some suggested questions may not be applicable to every proposal but after reviewing a number of proposals these areas are often brought up during discussion. The hope is to shorten the time it takes to reach a proposal decision for proposers.

When submitting a proposal that may be reviewed by multiple Senate committees, anticipate that these committees will focus on different criteria in accordance with their charges. The SAOSC committee devotes much attention to issues such as the rationale for a unit's existence and structure, staffing sources, leadership selection processes, evidence of sustained financial viability and documentation of consultation with affected parties.

The following is a list of questions that may be applicable to your proposal. Address those items which are pertinent in the text of your proposal.

1) What is the impetus for the proposed change?

The UK Center for Interprofessional Health Education, Research and Practice (CIHERP) was established in 2010 with the following Mission and Vision Statements:

MISSION: Promote teamwork and excellence in patient and community centered care through interprofessional education, research, and practice.

VISION: The University of Kentucky Center for Interprofessional HealthCare Education, Research, and Practice will lead U.S. universities and academic medical centers in developing, validating and promoting interprofessional education and care models that improve patient and population health.

These statements reflect the fact that the initial intent in founding the Center was to address a threefold mission. First, it was to provide interprofessional education (IPE) for students in the health professions and related disciplines (e.g., Social Work). Second, it was to foster research on interprofessional health care delivery with a focus on team-based care. Finally, it was to facilitate modification and improvement of practice patterns to increase the prevalence of team-based, interprofessional care. This was a very ambitious collection of expectations and, in fact, it has not been met.

In 2014, the Provost named a committee, chaired by Dr. James Holsinger, to review CIHERP and IPE more generally and to make recommendations for IPE going forward. Among the findings of the

committee, perhaps the most fundamental was the fact that the CIHERP was not meeting meaningfully addressing the last two elements of the mission and, furthermore, that it was unreasonable to expect that it would. Research on interprofessional health care is more logically the purview of the Center for Health Systems Research and implementation of changes in the direction of team-based care is more reasonably left to UK HealthCare. What the CIHERP was doing effectively, however, was addressing the first element of the mission, facilitating IPE. Accordingly, the committee recommended and the Board of Directors and Provost agreed that the mission should be limited to IPE. The committee further recommended that the name of the CIHERP be changed to reflect this reorientation of mission.

We ask, therefore, that the Senate consider and approve a change of the name of CIHERP to, The UK Center for Interprofessional Health Education (CIPHE).

2) What are the benefits and weaknesses of the proposed unit with specific emphasis on theacademic merits for the proposed change?

The proposed name change reflects the actual function of the unit. The present name is misleading.

- 3) Describe the organization of the current structure and how the proposed structure will be different and better. N/A
- 4) How does the change fit with department, college, and/or university objectives and priorities? N/A
- 5) How does this change better position the proposers relative to state and national peers, as well as University Benchmark Institutions? How does the change help UK meet the goals of its strategic plan? N/A
- 6) Who are the key personnel associated with the proposed unit? N/A.
- 7) Discuss leadership and selection process for appointing a chair, a director, or interim leader and search process, etc. N/A
- 8) What is the function of the faculty/staff associated with the proposed change and how is that relationship defined? Discuss DOE, adjunct, full time, voting rights, etc. N/A
- 9) Will the proposed change involve multiple schools or colleges? N/A
- 10) If the proposed change will involve transferring personnel from one unit to another, provide evidence that the donor unit is willing and able to release the personnel. N/A
- 11) What is the arrangement of faculty associated with the proposed change and how is that relationship defined? Discuss faculty DOE and status as adjunct, tenure track, or tenured. Describe the level of faculty input in the policy making process including voting rights and advisory. N/A
- 12) Discuss any implications of the proposal for accreditation by SACS and/or other organizations.

Having an accurate title for the unit is important in conveying to accrediting bodies and other constituents it's nature.

13) What is the timeline for key events in the proposed change? Student enrollments, graduates, moved programs, closed courses, new faculty and staff hires, etc. N/A

- 14) If the proposal involves degree changes \* , describe how the proposed structure will enhance students' education and make them more competitive. Discuss the impact on current and future students. State assumptions underlying student enrollment growth and describe the plans for student recruitment. N/A
- 15) Include evidence that adequate financial resources exist for the proposed unit to be viable. A general description of the new costs and funding should be provided. A letter from the Provost, Dean, or other relevant administrators may affirm commitment to provide financial resources as appropriate. An exhaustive budget is not expected. N/A
- 16) The proposal should document any faculty votes and departmental or school committee votes as appropriate leading up to this point in the process. The SAOSC recommends that faculty votes be by secret ballot. Include in your documentation of each vote taken the total number of eligible voters and the number that actually voted along with the breakdown of the vote into numbers for, against and abstaining. A Chair or Dean may appropriately summarize supporting and opposing viewpoints expressed during faculty discussions. N/A
- 17) The committee will want to see evidence of academic merit and support from key parties.

  Letters of support (or opposition) are encouraged from the relevant senior faculty and administrators. Relevant faculty and administrators include those in units directly involved in the proposed change (including existing units from which a new unit may be formed.)

The proposed name change was unanimously endorsed by the Holsinger Committee, by the CIHERP Board of Directors and by the Provost.

- 18) Indicate how the new structure will be evaluated as to whether it is meeting the objectives or its formation. Timing of key events is helpful. N/A
- 19) LLetters of support from outside the University may be helpful in understanding why this change helps people beyond the University. \* N/A

Note that new programs and courses will need to be vetted through appropriate channels beyond this committee.

**Present:** Drs. Adams (by phone), Heath, Stewart, Griffith, Tracy, Sanderson, Norton (guests: Dr. Holsinger, Jim Ballard)

AGENDA ITEM	PRESENTATION/DISCUSSION	ACTION/FOLLOW-UP	
Recommendations from the Report			
Discussion of the recommendations of the CIHERP internal review committee report chaired by Dr. James Holsinger	- Recommendation 1: Rename the Center: Center for Interprofessional Education in the Health Professions (CIEHP) or Center for Interprofessional Health Education (CIHE)	Discussion: There was concern that this name did not adequately represent all participating colleges  Outcome & Follow-up: The name, Center for Interprofessional Education in Health Care was considered. Dr. Tracy will ask Deans of participating colleges to review. Another possibility mentioned was, Center for Interprofessional Health Education.	
	- Recommendation 2: Refocus the mission of the Center on interprofessional healthcare education and its associated pedagogical research.	Discussion: All agreed this is a more focused and appropriate mission. The goals is to transform the Center to an IP educational support unit.  Outcome: Recommendation approved in theory but Drs. Tracy and Norton will determine the requirements for making this change within UK Administration (i.e., must it be voted on by Faculty Senate?)	

	Recommendation 3: Locate interprofessional practice and its associated research in the Center for Health Services research (CHSR).	Discussion: All agreed that this is consistent with the revised focus of the IPE center.  Outcome & Follow-up: This will be discussed with Erika Erlandson, regarding the Nexus project and Mark Williams. However, since funding for one of the Center's staff comes from a grant that supports this effort, formal transition is pending
-	Recommendation 4: Assure that the Center Director reports to a senior member of the Provost's staff with knowledge of interprofessional healthcare	determination of funding for the staff member going forward.  Discussion: All agreed that this is not actionable until the new Provost is selected.
		Outcome & Follow-up: Table for discussion with the new Provost.
	Recommendation 5: Staff the Center with a Director (a minimum of 0.4 FTE), FT Associate Director, FT Program Coordinator, FT Educational Specialist, 0.5 FTE Administrative Assistant, and a financial officer in the Provost's office assigned to the Center for managing grants including financial liaison with OSPA.	Discussion: There was significant discussion about this with consensus that it is difficult to determine a priori the staffing needs of the Center when the mission, scope, breadth, and depth of the work have changed. There was confusion about the specific roles that each member of the staff would have (i.e., how does the educational specialist differ from the associate director role?)
		Outcome & Follow-up: The Center was charged with

	defining the roles of each staff member and developing a workforce analysis with FTW estimates, based on the projected direction of the Center, this document to be discussed and refined with Tim and shared with the Board.
- Recommendation 6: Appoint an Academic Leadership Committee composed of healthcare colleges' Associate Deans or representatives to function as the governing body of the Center, chaired by the Center Director.	Discussion: The deans thought it inappropriate to transfer Center governance to associate deans due to the latter's inability to allocate resources. There also was concern that the original Center proposal contained language that the deans would govern the Center. There was general agreement that the deans should govern and the associate deans provide leadership for operational decisions.  Outcome & Follow-up: replace the word "governing" with
	"operations." and confirm that the BOT action establishing the Center states that the deans are the governing body. Add the word "participating" to define colleges included.
- <b>Recommendation 7:</b> Fund the Center, during FY 2015-2016, through the The Fund for the Advancement of Education and Research in the Medical Center and UK Healthcare, setting a benchmark for subsequent fiscal years.	Discussion: Unable to consider until discussions are held with the Provost and Dr. Karpf  Outcome & Follow-up: Tabled

		until a Provost is appointed
-	<b>Recommendation 8:</b> During FY 2016-2017, fund the Center by UK Healthcare and Academic Support allocated expense funds. Each college's faculty DOE and staff time will be funded through each college's budget.	Discussion: Unable to consider until discussions are held with the Provost and Dr. Karpf  Outcome & Follow-up: Tabled until a Provost is appointed
-	<b>Recommendation 9:</b> Continue iCATS Year 1 curriculum with appropriate revisions as necessary.	Discussion: All agreed.  Outcome & Follow-up: Recommendation approved
-	<b>Recommendation 10:</b> Replace iCATS Year 2, with education modules developed to support interprofessional practice, which can be utilized as needed by various participating colleges. (Revised from the original, reflecting the discussion described in adjacent column.)	Discussion: All agreed  Outcome & Follow-up: Recommendation approved but need to change wording to "participating" colleges.
	Recommendation 11: Charge the Center with facilitating the development of various authentic interprofessional health education experiences supported by appropriate educational modules for team use.	Discussion: There was misunderstanding about the phrase, "Authentic interprofessional Experiences." This was clarified to be defined as experiences in existing clinical settings that might be transformed to become interprofessional.  Outcome & Follow-up: Recommendation approved but with a rephrasing of the recommendation
-	<b>Recommendation 12:</b> Assure that each college and program designates faculty members as its IPE champions, with appropriate DOE allocation, who	Discussion: The consensus was that questions 12 and 13 are too

 will facilitate existing IPE opportunities, work with other IPE champions to develop new opportunities, and assist in developing appropriate curricular IPE modules. (Revised from the original, reflecting the discussion described in adjacent column.)  Recommendation 13: Assure that faculty receive appropriate DOE allocation for IPE activities. (Revised from the original and has been incorporated as above, reflecting the discussion described in adjacent column.)	similar to stand alone as recommendations. Also, there was confusion as to the differences and responsibilities of a "faculty champion" versus a "faculty facilitator".  Outcome & Follow-up: Board Chair and Director will provide draft new language that combines recommendations 12 and 13
Recommendation 14: Support efforts to assure that each healthcare college and appropriate program participate in iCATS1.	Discussion: Consensus was that this recommendation is redundant (with question #9) and should be deleted.  Outcome & Follow-up: Recommendation not approved