

#### **NEW ACADEMIC UNIT – APPROVAL REQUEST**

See Guidelines for Requesting Academic Unit Changes for Renaming, Mergers, Transferring or Disestablishment of an Existing Academic Unit

I. Campus and Location Offering – indicate by highlighting in yellow the campus(es) and location(s) where this academic unit will reside.

Southern AZ Campus	UA Main	<b>Distance Campus</b>
Douglas	<mark>Tucson</mark>	Chandler
Nogales		Flowing Wells High School
Pima CC East		Gilbert
Sierra Vista	<b>Phoenix Biomedical Campus</b>	Paradise Valley
	Phoenix	Sunnyside High School
Online		Yuma
Online		

**II. Academic College**—Provide the name of the academic college where this unit will be housed.

In this document we are proposing a creation of The University of Arizona College of Health Sciences (UACHS).

#### III. Purpose and Activities of the Unit

#### A. Identify the basic goals and objectives of the new unit.

As the only land grant university in the State of Arizona, the University of Arizona (UArizona) is committed to meeting the needs of the residents of the state. This is particularly relevant in the health care environment where workforce shortages across various specialties have contributed to challenges in access to high quality health care in some communities.

The decision to create this college and affiliated departments was both strategic and necessary. Strategically, it is designed to support the strong interprofessional focus of the health science and professional programs that will reside within this new college (Clinical Translational Sciences, Genetic Counseling, Midwifery, Physician Assistant, and Physical Therapy) and their respective accreditation requirements related to interprofessional education. It also strategically addresses ongoing health workforce challenges in Arizona that limit access to health care for our communities.

It is also necessary because four of the five programs have specific accreditation requirements (See Appendix A) which require a level of institutional support that are unable to be fully met by current academic homes including clinical site development, equity, diversity, and inclusion efforts, equitable faculty appointments, and student affairs support. These programs can also benefit from a college support structure that focuses on a strong evaluative process with data collection, analyses,

and program improvement, particularly when many of the accreditation self-study processes have overlap with each program.

UACHS will focus its efforts on supporting current health professional and translational science programs with their academic needs (Clinical Translational Sciences, Genetic Counseling, Midwifery, Physician Assistant, and Physical Therapy programs) while identifying new degree programs that seek to serve the State of Arizona and the ongoing and projected health workforce needs within the state. Two new departments (see separate application requests) will be created to support these programs and future degree and residency programs that are being considered. A Department of Clinical Health Professions (DCHP) will house the Genetic Counseling, Midwifery, Physician Assistant, and Physical Therapy programs. In addition, a Department of Health Sciences Graduate Studies (DHSGS) will be created that will house the Clinical Translational Sciences program and additional degree programs that are being considered as outlined later in this document. The UACHS will be located at the University of Arizona – Tucson campus and will serve as a conduit to support students, faculty, and staff in the delivery of high-quality academic programs focused on vital health care professions and cutting-edge translational sciences. This includes infrastructure for student support services, a focus on wellness for all, faculty affairs, and curricular support. The University of Arizona Health Sciences (UAHS) administrative unit will provide administrative support related to finance administration, facilities, human resources, marketing, and research administration.

The new college provides a unique opportunity to support interprofessional collaboration in health care and clinical translational sciences. For example, clinical translational research for students can be interprofessional in nature and the planned programs within the new college are interested in exploring opportunities for their students to be involved in this research. The health professional programs have also identified cross cutting areas of emphasis that could be taught as part of an interprofessional collaborative including content on blood borne pathogens, ethics, professionalism, cultural humility, diversity, equity, and inclusion in health care. All of these opportunities could contribute to the professional programs meeting their own respective accreditation and curricular requirements.

Currently the Colleges of Medicine in Tucson and Phoenix (COM-T and COM-P) have their own unique accreditation requirements that require them to be focused on preparing future physicians, the College of Nursing (CON) is similarly focused on the future nursing workforce, and the R.L. Coit College of Pharmacy is focused on future pharmacists, but the programs supporting the need for current and future workforce of health care professionals with other specialties lack a college focused specifically on their professions and their unique needs. Commonly, institutions will utilize a College of Health Science to meet the needs of these unique programs to provide the level of support required by professional accrediting bodies as it relates to institutional sponsorship criteria. The unique opportunity to build this new academic college and focus on interprofessional health education at UArizona will allow for expanded educational, research, and community engagement activities facilitating collaboration among the college's programs with other UArizona colleges and with external clinical and industry partners. Graduates of the UACHS programs will be poised to contribute high-quality precision health care to Arizona's population and to enhance the knowledge base for evidence-based medical care via significant translational research and culturally relevant, person-centered care.

The UACHS is focused on these core objectives with support from specific goals (goals (immediately below) and metrics (Section G) are listed further down in the document):

#### Objective 1 (supported by goal 1 and metric 1)

The UACHS will provide optimal support for current and developing departments and programs that facilitate the innovative and interprofessional education of health care providers and health science professionals as well as cutting-edge research by students and faculty; thereby advancing the quality of care provided for the people of Arizona and improved health outcomes.

#### Objective 2 (supported by goal 2 and metric 2)

The UACHS will develop the infrastructure to support best practices in recruitment and retention focused on diversity, equity, and inclusion for all for students, faculty, and staff within the college.

#### Objective 3 (supported by goal 3 and metric 3)

The UACHS will develop equitable structure and support for faculty in all roles and all departments to include appointments, promotion, and tenure; thereby allowing for recruitment of outstanding diverse faculty, well supported in their focus for innovative teaching, scholarship, and research.

#### • Objective 4 (supported by goal 4 and metric 4)

The UACHS will provide the means to build a workforce equipped to deliver healthcare while ensuring the next generation of health care education faculty are prepared and highly educated in relevant areas of expertise. Development of a planned Doctor of Health Science (DHS) degree will have several emphases to ensure graduate learners can build experiences in research, education, health policy, and/or interprofessional activities that seek to remove the traditional silos from health professions while building problem-solving solutions to complex health care and scientific challenges.

#### Objective 5 (supported by goal 5 and metric 5)

The UACHS will support clinical and translational research training and promote faculty and student interprofessional collaboration to support the development of certificate programs focused on next generation clinical practice and original scientific inquiry. This would include existing programs such as clinical translational sciences as well as aspirational programs focused on artificial intelligence in health delivery for medical professionals, and other potential innovations that will contribute to the workforce competencies of the 21<sup>st</sup> century.

#### • Objective 6 (supported by goal 6 and metric 6)

The UACHS will support and give back to the community with the provision of much needed healthcare assistance through innovative interprofessional service learning, community-based practice research, community-based education, and community collaboration.

#### Objective 7 (supported by goals 7, 8 and metrics 7, 8)

The UACHS will continue to explore and develop unique opportunities and programs to address critical gaps in healthcare-related fields (e.g., prosthetic and orthotics, others) based on federal and state workforce data.

#### **UACHS Specific Goals:**

- Goal 1: Create and support a teaching, learning, and research environment that promotes
   evidence-based approaches to health care provision, interprofessional competence, cultural
   humility and understanding, and critical problem-solving skills. The UACHS would develop future
   healthcare providers and leaders through innovative curricular offerings and transformational
   teaching modalities.
- **Goal 2:** Foster a diverse, equitable, inclusive, and anti-racist community that exemplifies values-based culture and community and personal wellness.
- Goal 3: Provide best practice faculty development programs in collaboration with the university
  and other partners to implement and maintain active, inclusive learning strategies for all
  students.
- Goal 4: Identify health workforce needs within the state, to include the need for future health
  professions educators with advanced degrees and build and support transformational programs
  with high quality educational offerings that reflect the rich diversity of our communities.
- **Goal 5:** Advance scholarly activities among faculty and students by providing an infrastructure and an environment which supports interprofessional clinical evidence-based knowledge and practice as well as cutting-edge clinical and translational research.
- **Goal 6**: Promote health and wellness of communities through the provision of care utilizing innovative technologies and services through meaningful partnerships and collaboration.
- Goal 7: Build and sustain an infrastructure that operates effectively and efficiently to meet the
  mission of the college and the future needs of its developing programs, students, faculty, and
  staff.
- **Goal 8:** Using an evidence-based approach, identify future programs that may contribute to any workforce shortage challenges being experienced by Arizona communities.

#### B. Describe the activities, projects, and programs that will be conducted by the new unit.

UArizona strategic pillars include initiatives that specifically relate to solutions that the programs proposed to be housed in this new UACHS will contribute towards. This includes initiatives to strengthen a commitment to equity and support of diverse communities by recruiting, educating, and graduating students from underrepresented backgrounds that may contribute to removing health disparities experienced in our communities. It also includes a commitment to advancing Native Americans and tribal engagement. A commitment to community engagement through

experiential learning is another focus of the university. The proposed UACHS and their departments/programs are poised to serve these initiatives with excellence including interprofessional service-learning experiences. Currently, these programs all aim to enhance the critical health workforce and health research training needs of the state. The UAHS will provide central support related to finance administration, facilities, human resources, marketing, and research administration. Instructional design and curricular support will be built in the college using a model that aligns with the UArizona Digital Learning Initiatives and Online Education and the University Center for Assessment, Teaching, and Technology (UCATT) model while potentially utilizing the instructional design team that is currently supporting other strategic plan initiatives within the UAHS structure. Shared resources between the institution and college will be explored to maximize support while maintaining alignment with best practices. Additional college specific support directly related to accreditation requirements for professional programs will be developed including:

#### I. Clinical Partnerships and Community Engagement

- a. Develop an office for clinical partnerships and community engagement that seeks to build pathways from the communities our college stakeholders serve to the university and back to those communities and explore collaborative opportunities between other health and behavioral health programs at UArizona to support clinical placements. This will directly impact health care workforce shortages and access issues that many of our rural and indigenous communities experience in Arizona.
- b. Provide support for interprofessional service learning among college participants.
- c. Work with community partners to establish new certificates and degree programs that meet the future needs of those partners.
- d. Build meaningful outreach programs for college participants that provide rich, diverse learning activities for program requirements.
- e. Support ongoing clinical training partnerships in alignment with health professional accreditation requirements for institutional support.

#### **II.** Education and Development

- a. Support faculty development to equip all college faculty with the competencies and skills for inclusive excellence in mentorship and teaching, teaching with technology, outcomes assessment, collaborative learning, disability services and resources, design thinking/reverse design, and other relevant strategies. The UACHS would develop certificate programs and/or specific learning badges for faculty and staff to build their health science teaching excellence.
- b. Provide instructional design expertise to support faculty and curricular delivery based on best practices in teaching and learning.
- c. Provide learning management support for curricular deployment across all college programs.

- a. Support best practice initiatives for recruitment and retention of underrepresented minority students, faculty, and staff.
- b. Work collaboratively with the UAHS Office of Equity, Diversity, and Inclusion to maximize their efforts for all health professional colleges.
- c. Engage community stakeholders to strengthen partnerships in building pathways from communities and tribal nations to the UACHS programs.

#### IV. Evaluation and Assessment

- Develop infrastructure within the college to support a rich culture of evaluation, assessment, and improvement for the college and its departments and programs.
- b. Create statistical support for ongoing programmatic self-study related to accreditation requirements.

#### V. Faculty Affairs & Career Development

- a. Support faculty appointments in alignment with institutional approaches for promotion tracks including Professional Practice, Educational Scholar, Clinical and other relevant promotional paths for eligible faculty, which may not be available in the current college structure.
- b. Build a Faculty Council for governance within the college.
- c. Support a college Promotion and Tenure committee.

#### VI. Student Affairs

- a. Build a focus on wellness from recruitment to commencement that establishes best practices for student wellness.
- b. Provide support mechanisms in collaboration with the Graduate College and other institutional resources related to learning strategies, disability support, and other key aspects for student success.
- c. Align with UAHS Equity, Diversity, and Inclusion practices to build an inclusive environment that seeks to support the various intersections that comprise the faculty, staff, and students in UACHS while championing key learnings for future health care providers and scientists who carry on the work of inclusion in their careers.
- d. Provide mental health support specific to graduate and health professional students that is accessible to their unique classroom and clinical training demands.

#### VII. Research

- a. Create opportunities for collaborative research activities between UACHS training programs in alignment with the values of the university and the commitment to interprofessional education.
- b. Provide research training and scholarly projects for students within and across UACHS training programs.
- c. Provide support for original research by faculty while supporting the scholarly development of new faculty entering the college.

- d. Identify new research opportunities in scientific and training areas to support faculty scholarship growth and development.
- e. Provide mentorship and mentorship training for faculty seeking to expand their research endeavors.

#### VIII. New Program/Degree/Certificate Development

- a. UACHS will explore the development of a new Doctor of Health Sciences (DHS degree program that allows for collaboration among all of the planned departments/programs within UACHS to support the degree as well as explore collaborative opportunities with our other institutional colleges. The faculty within the college could contribute to the development of the degree program and specific emphases within the program that complement one another. These emphases within the DHS would be developed to allow for specialization in research, leadership, interprofessional education, and health policy. There will also be an emphasis designed specifically for the development and transition from clinician to future faculty in healthcare professions. The new degree program could also contribute to the shortage of doctorally-trained educators in the health professions.
- b. Explore the development of other degree programs that align with the college, UAHS, and UArizona including degree programs or certificates to support the development of key knowledge and skills for our health and behavioral health stakeholders. Examples could include a Master of Health Sciences, Master of Prosthetics and Orthotics, etc.
- Explore the potential development of certificate programs in artificial intelligence and intelligence-based medicine, health care compliance, and patient safety all focused on medical professionals.

#### **IX.** Current Programs

#### a. Clinical Translational Sciences:

- i. Faculty will maintain their current appointments while receiving joint appointments in the newly approved proposed department of XXX.
- ii. In response to a growing demand for formal degrees in Clinical Translational Sciences (CTS), in 2014 the University of Arizona established the CTS graduate program. CTS currently offers a M.S., Ph.D., and M.D./Ph.D. at both the Tucson and Phoenix campuses. Eligible applicants include those who have completed a bachelor's degree in health sciences or a related biological or basic science field, as well as those holding a terminal health sciences degree such as an MD, PharmD, DNP or DPH.
- iii. The M.D./Ph.D. Dual Degree Program in Clinical Translational Sciences (CTS) prepares students for academic clinical careers involving patient care, research, and teaching, as well as other research careers (biotechnology, government laboratories, industry, and health-related organizations) in response to the need for more physician-scientists identified by the National Institutes of Health. CTS students gain practical experience in translational research while completing their courses, then

develop and complete their own research, which is reported in the dissertation or thesis.

#### b. Genetic Counseling Program:

- i. The University of Arizona Genetic Counseling Program (GCGP) is a two-year master's degree program located on the University of Arizona Health Science campus in Tucson, AZ. The mission of the GCGP is to provide a well-rounded education in genetic counseling through rigorous and diverse academic, clinical and research experiences, preparing the next generation of genetic counselors in an ever-evolving landscape. Faculty will maintain their current appointments while receiving joint appointments in the newly approved proposed Department of Clinical Health Professions.
- ii. The GCGP combines classroom-directed instruction in medical genetics and genetic counseling with significant hands-on fieldwork experiences working with practicing clinical genetics teams throughout Arizona. In addition to coursework and clinical rotations, GCGP students also complete a scholarly project as part of their education. Graduates of this program receive a Master of Science degree in Genetic Counseling from the UArizona, preparing them for a career in the broad field of genetic counseling. The GCGP was the first genetic counseling program in Arizona and has been accredited by the Accreditation Council for Genetic Counseling since 2019.
- iii. The rapid expansion of genomic and precision medicine in the past decade has led to a quickly growing need for clinical genetic services and a deficit in genetics healthcare professionals. Past workforce studies of medical geneticists and certified genetic counselors have documented a shortage in these professionals (Jenkins et al., 2021; Hoskovec et al., 2018). To support the growing needs for clinical genetics services, the UAGCGP is poised to encourage graduates of our program to address the need in Arizona. Currently, the terminal degree in genetic counseling is a master's degree. However, should our national certification board consider implementing a PhD degree, our program would be able to explore the advanced degree.

#### c. Midwifery Program:

i. The Midwifery Program will be a 2-year master's level program, located in Tucson. This hybrid program will prepare students to provide independent care during pregnancy, childbirth, and the postpartum period. Certified - Midwives provide care across the life span to include gynecologic care, family planning, preconception care, and care of the healthy newborn for the first 28 days of life. The rates of maternal mortality are at a crisis level in the United States and continue to rise annually according to CDC data. The data in Arizona is consistent with the national rates. The lack of access to maternity care in many parts of Arizona make this program critical to improving the maternal and newborn health for members of the Arizona

communities. Faculty will maintain their current appointments while receiving joint appointments in the newly approved proposed Department of Clinical Health Professions.

#### d. Physician Assistant Program:

i. The Physician Assistant program, located in Tucson, works towards promoting health sciences and increasing the local availability of qualified health professionals. Following program professional accreditation, the program will be providing a 26-month curriculum that includes the required curricular aspects for a Master of Physician Assistant Practice. Students will participate in didactic and clinical experiential courses to prepare them to practice medicine in Arizona as part of a healthcare team with a strong emphasis on primary care for rural and indigenous communities and additional focus on behavioral medicine. Faculty will maintain their current appointments while receiving joint appointments in the newly approved proposed Department of Clinical Health Professions.

#### e. Physical Therapy Program:

i. The developing Physical Therapy (DPT) program, located in Tucson, will be the only DPT program in Southern Arizona where there is currently a severe shortage of qualified and licensed Physical Therapists. The program will include extensive service learning to give back to the community per the University and program mission. The program will also include interprofessional and experiential learning, early clinical experiences, and professional skill building. Faculty will maintain their current appointments while receiving joint appointments in the newly approved proposed Department of Clinical Health Professions.

## C. Describe demonstrable partnerships and partnership support that arise from the creation of the unit.

The partnerships that will arise from the creation of UACHS include the opportunity for cross-collaboration between the various colleges at UArizona as well as the departments/programs within the new proposed college. These graduate health professional programs can provide a pathway for undergraduate students at UArizona who have an interest in entering health professions or developing their research skills in translational sciences. Interprofessional curricular planning and delivery will occur between the various programs and colleges to better prepare health professional students for practicing in collaborative team-based models. Shared opportunities within the UAHS Arizona Simulation Technology and Education Center (ASTEC) for interprofessional skills experiences as well as standardized patient cases with their Interprofessional Clinical and Professional Skills Center currently exist among the programs in development as well as opportunities for faculty to participate in the delivery of educational content that cross professions. In addition, opportunities for research on interprofessional exploration, scientific discovery, and training programs may provide opportunities for additional funding within UACHS.

Partnerships between the other UArizona colleges will continue including basic science education, skills training, and public health education that will enhance the experiences of all health professional students. Existing partnerships with clinical entities including Banner Medical Center, private clinical affiliates, Arizona Rural Health affiliates, and community health centers will allow for stronger, cross-collaborative institutional support for clinical training programs with UACHS. Finally, UACHS would support shared clinical site development that could provide stronger ongoing support for clinical programs and reduce duplication of efforts with external health and rehabilitation entities. Additional collaborative partnerships will be developed for all of the clinical professional programs for experiential training both in clinics and as part of service-learning activities.

The students in the proposed college are exposed to a myriad of basic and translational science, as well as health-related specialties. CTS students are trained and taught by faculty across a wide spectrum of disciplines within COM-T, COM-P, CON, COP, the Mel and Enid Zuckerman College of Public Health, College of Science (COS), Eller College of Management, and from Research, Innovation, and Impact services (e.g., Tech Launch Arizona and FORGE). Midwifery students are taught by nursing, physical therapy, genetic counseling, and PA faculty. PT students will have cross collaborative coursework with PA students and vice versa. In addition, given the rapid advances in clinical genetic and genomic medicine, the Genetic Counseling program is poised to provide educational opportunities to all programs within UACHS. All programs hope to build bridges between the undergraduate communities at UArizona and UACHS with pathways that lead to future careers in the graduate health professions and clinical translational science fields. Creation of the UACHS will strengthen our network of collaborations across these disciplines while allowing us to forge new bonds with those housed within our developing home college.

# D. How does formal creation of this unit directly promote the fostering of collaborative and synergistic research and outreach beyond what is already happening on campus with existing entities?

Housing multiple health professional and health science programs within the same unit will encourage not only interprofessional educational experiences but promote collegiality between faculty and students and opportunities to develop new and innovative projects. These can include interprofessional service-learning experiences where students from multiple disciplines work together to provide community support, as well as faculty working together on research both within and across disciplines. Cross collaborative scholarly projects may come from informal connections between departments and programs within the college but will also likely come related to new degree programs focusing on health professions. The college will explore the development of a Master of Health Sciences as well as a Doctor of Health Sciences which will have several emphases that align with current program needs. Theses emphases would likely encompass research, health policy, leadership, interprofessional education, and the educational skills to teach in higher education health professional and science related programs. Students within these new degree programs could be encouraged to conduct their capstone and/or research projects in alignment with college and departmental/program priorities including interprofessional education and practice, health policy, higher education, and other key scientific projects related to clinical translational sciences.

E. Alignment of the proposed unit's purpose to the reporting unit and the University's strategic goals.

The UACHS has strong alignment with several key UArizona's strategic pillars (Wildcat Journey, Grand Challenges, Arizona Advantage) and UAHS strategic initiatives. The unique programs within the proposed college touch on each of the five pillars with translational research, genetics, and health workforce being strong components of the overarching themes. More specific alignment includes:

- I. Wildcat Journey: Designing a college with a strong focus on a culture of health and wellness coupled with student success aligns with the UArizona's Wildcat Journey. The UACHS will both support current student mental health and wellness through robust student services aligned with the institution, but also play a strong role in training students for Arizona communities. The Physician Assistant Program (PA) is currently highlighted in this UArizona strategic initiative and the other current and future health professional programs provide similar alignment. Interprofessional education and practice will be a strong component of UACHS which further aligns with the Wildcat Journey.
- II. Grand Challenges: Graduates of the various UACHS programs will play very important roles in health-related challenges which make up a large portion of the grand challenges society experiences. Addressing those challenges in a college which is composed of both research and health professions-oriented departments and programs provide a unique diversity of perspectives to foster success with these current and future challenges. The Midwifery program has intentionally focused on addressing racism, systemic racism, and implicit bias as an influence and cause of maternal morbidity and mortality. Their curriculum is designed intentionally to use the American College of Nurse-Midwives toolkit, "Addressing Racism and Advancing Equity in Midwifery Education." The Physician Assistant program will have specific focus on addiction and behavioral health. Students will receive medication assisted therapy training as part of their curriculum to support strengthening health care response to the opioid epidemic. Physical therapy provides opportunities to build pathways from health profession shortage communities to the university and back to strengthen those communities and the access to rehabilitative care that is critically needed. Expanding access to genetic counseling will provide communities with the education required to make wellinformed decisions related to complex health conditions. Aspirational programs focused of telehealth, and artificial intelligence in health care for medical professionals could further contribute to the Grand Challenges: Advanced Technologies in Healthcare initiative.
- III. Arizona Advantage: The UACHS and its proposed departments and programs will place a strong emphasis on diversity, equity, and inclusion. This includes a focus on recruitment, retention, and redeployment of health-related professions into underserved communities in Arizona. Tribal leaders have indicated a desire to work with institutional experts and President Robbins a desire to build a health workforce that reflects their cultures. Current and developing programs within UACHS have an emphasis on recruiting, retaining, and redeploying indigenous health professionals for the 22 Federally recognized tribes in Arizona. Additional curricular emphases are being placed on educating all health professional students within UACHS on cultural humility and appropriate care for

indigenous patients or clients. The PA program has a required medical Spanish curriculum under development with the University of Arizona Department of Spanish and Portuguese that will further support the Arizona Advantage and its focus on a commitment to Hispanic advancement. The Midwifery, PA and PT programs are also committed to building interprofessional service-learning initiatives to support community engagement. Finally, additional collaboration with several of the UACHS programs and the university's Innovations in Health Aging efforts will further contribute to successful alignment with institutional goals.

F. Documented support from affiliated faculty, department heads, and deans. At the college level, alignment of the proposed unit's goals and objectives to the college's recruitment plan and programmatic priorities.

Please see Appendix B.

G. Clear statement of the evaluative criteria to be used in the comprehensive review. How will the proposed unit demonstrate success (Goals from B1 are highlighted with affiliated proposed metrics)?

As proposed, the UACHS would initially include two departments that include the four previously approved clinical programs that require periodic external professional accreditation review (Genetic Counseling, Midwifery, Physician Assistant, and Physical Therapy) (DCHP) as well as the Clinical Translational Sciences programs and future degree programs (DHSGS). The UACHS would propose to build infrastructure to support the development of programmatic structures that support ongoing self-study practices for programs with external review agencies and align with institutional evaluation mechanisms for periodic comprehensive review. Additional degree programs would fall into one of the two categories with either external accreditation review or academic program reviews as required by the Academic Affairs. Comprehensive review of the UACHS would include annual evaluations aligned with specific goals as well as annual evaluations and 5-year required evaluations of the Office of the Dean. Specific evaluation metrics may include:

Goal 1: Create and support a teaching and learning and research environment that promotes
evidence-based approaches to health care provision, interprofessional competence, cultural
humility and understanding, and critical problem-solving skills. Thereby developing future
healthcare providers and leaders through innovative curricular offerings and transformational
teaching modalities

#### **Metrics:**

- 1. Attrition rates below national and state averages
- College wide annual studies that demonstrate graduate and employee satisfaction with evidence-based approaches, interprofessional competence, cultural humility, and problem-solving skills
- 3. Annual evaluation by faculty and students on innovative curricular offerings and teaching

- 4. Matriculation and graduation numbers, successful career placements and career progression of graduates from various UACHS programs
- **Goal 2:** Foster a diverse, equitable, inclusive, and anti-racist community in health sciences that exemplifies values-based culture and community and personal wellness.

#### **Metrics:**

- 1. Diversity of students, faculty, and staff compared to state and national institutions
- 2. External evaluations on a culture of inclusion within the college (periodic culture surveys)
- 3. External and internal wellness experiences and evaluations for students, faculty, and staff
- **Goal 3:** Provide best practice faculty development programs in collaboration with the university and other partners to implement and maintain active, inclusive learning strategies for all students.

#### Metrics:

- 1. Number of faculty development offerings provided to college faculty
- 2. Participation rates for faculty development sessions among active faculty
- 3. Annual administrative evaluation by faculty-on-faculty development support
- 4. Annual assessment of innovative teaching concepts introduced because of faculty development
- **Goal 4:** Identify health workforce needs within the state, to include the need for future profession educators with advanced degrees and build and support transformational programs with high quality educational offerings that reflect the rich diversity of our communities.

#### Metrics:

- 1. Number of new programs identified for establishment
- 2. Number of graduates from programs within the college that contribute to the state health workforce needs through employment rates and those working in local underserved communities
- 3. Diversity numbers related to participation in college offerings as they relate to the diversity of the state
- 4. Numbers of students from healthcare professions seeking advanced degrees and education to meet future faculty requirements
- **Goal 5:** Advance scholarly activities among faculty and students by providing an infrastructure and an environment which supports interprofessional clinical evidence-based knowledge and practice as well as cutting-edge clinical and translational research

#### **Metrics:**

- 1. Scholarly productivity of faculty and students within the college programs
- 2. Number of collaborative scholarly activities or grants with college departments/programs
- **Goal 6**: Promote health and wellness of communities through the provision of care utilizing innovative technologies and services through meaningful partnerships and collaboration.

#### Metrics:

- 1. Number of external partnerships or collaborative programs that are created from college departments or programs
- 2. Community engagement surveys to evaluate the effectiveness of established partnerships
- Goal 7: Build and sustain an infrastructure that operates effectively and efficiently to meet the
  mission of the college and the future needs of developing programs, students, faculty, and
  staff.

#### Metrics:

- 1. Annual internal evaluations on administrative support for departments and programs.
- 2. Annual budget evaluations for efficiency and responsibility
- 3. Number of programs being sustained and in development
- **Goal 8:** Using an evidence-based approach, identify future programs that may contribute to any workforce shortage challenges being experienced by Arizona communities.

#### Metrics:

1. The number of new initiatives developed within the first five years.

#### IV. Resources

#### A. Faculty and Staff

1. Provide the name and employee ID of the unit head.

Kevin Lohenry, PhD, PA-C will serve as the interim Dean for the new UACHS.

A national search for the UA UACHS Dean will be conducted once the proposal has been approved by the various university committees and the Arizona Board of Regents.

List the name, rank, highest degree, primary department and estimate of the level of involvement of all current faculty and professional staff who will participate in the new unit. Also, indicate the position each person will hold in the new unit.

#### **UACHS Administrative Team:**

- 1. <u>Kevin Lohenry, PhD, PA-C</u>: Interim Dean, UACHS; Assistant Vice-President, Interprofessional Education, UAHS; Clinical Professor of Medicine and Program Director, Physician Assistant Program. Dr. Lohenry is responsible for all aspects of leading and managing the proposed College of Health Sciences, all strategic plans and implementation, and representation until a permanent Dean is selected. Upon the hiring of a permanent Dean by Provost Folks, the title of interim Dean of UACHS will be withdrawn from Dr. Lohenry's list of responsibilities. He will continue to support the development and implementation of the Physician Assistant Program at 80% effort and focus on interprofessional education at 20% effort once a permanent Dean is hired.
- 2. TBD Associate Dean for Faculty Affairs & Career Development: An Associate Dean will be identified to support the development of key faculty support services including faculty appointment processes that align with current institutional practices around professional practice and career tracks. They will develop a faculty council for shared governance. They will work to provide best practice recruitment and retention strategies for college faculty that includes institutional approaches to diversity, equity, and inclusion. They will also focus on key faculty development activities to equip all college faculty with the competencies and skills for inclusive excellence in mentorship and teaching, teaching with technology, outcomes assessment, collaborative learning, disability services and resources, design thinking/reverse design, and other relevant strategies. It is anticipated that this individual will dedicate 80% time in this role with additional consideration once a permanent dean has been appointed. Once the college is approved an interim Associate Dean will be appointed to help begin the development of these priorities.
- 3. TBD Associate Dean for Education: Once the college is approved an interim Associate Dean will be appointed to help begin the development and implementation of key education components for all the departments and programs within the college. This includes curriculum oversight and assessment, admissions, student support services including student wellness, mental health services, graduate financial aid, and academic and career advising to enhance the student experience and ensure successful completion of their program. They will develop a focus on wellness from recruitment to commencement that establishes best practices for student wellness. They will develop support mechanisms in collaboration with the Graduate College and other institutional resources related to early identification of at-risk students, providing early intervention with learning strategies, personal academic advising and individual educational plans, disability support, and other key aspects to optimize student success. They will focus on developing key data collection strategies for program accreditation with alignment to the UArizona Office of Instruction and Assessment. They will also focus on developing a college wide curriculum committee to support program development. They will support the development of partnerships for both clinical training and interprofessional service learning for the programs within the college. Finally, they will be supporting the development of new degree and certificate programs as part of the college strategic priorities. Once the college is approved an interim Associate Dean will be appointed to help begin the

- development of these priorities. It is anticipated that this individual will dedicate 80% time in this role with additional consideration once a permanent dean has been appointed.
- 4. TBD Associate Dean for Equity, Diversity, and Inclusion: An interim Associate Dean will be identified to support the development of new recruitment and retention efforts for students, faculty, and staff from underrepresented minority in medicine backgrounds. They will work in concert with the UAHS Office of Equity, Diversity, and Inclusion to align programs and pathways for students to enter the health professions and/or clinical translational sciences. It is anticipated that this individual will initially dedicate 30% time in this role with additional consideration once a permanent dean has been appointed. Once the college is approved an Interim Associate Dean will be appointed to help begin the development of these priorities.
- 5. <u>Department Chair, Clinical Health Professions</u>: A department chair will be selected to lead this new unit (see separate application) and will be responsible for supporting the Genetic Counseling, Midwifery, Physician Assistant, and Physical Therapy programs.
- 6. <u>Department Chair, Health Sciences Graduate Studies</u> A department chair will be selected to lead this new unit (see separate application) and will be responsible for supporting the Clinical Translational Sciences program as well as potential new graduate education programs outlined in this application.

#### **UACHS Program Faculty:**

<u>Clinical Translational Sciences Administration:</u> This unit is currently housed within UAHS with primary academic appointments in various departments at the university. Upon approval, the faculty will move into the UACHS with the following faculty continuing to support its work. The primary academic appointments will either shift to the respective departments in the new college plan while retaining joint appointments or continue to be shared with the currently listed home departments:

- 1. Ron Hammer, PhD: Co-Director, CTS-Phoenix (Primary Home department Basic Medical Sciences, COM-P, 20% effort)
- 2. Julie Ledford, PhD: Co-Director, CTS-Tucson (Primary Home department Cellular and Molecular Medicine 20% effort)

#### Clinical Translational Sciences Faculty\*:

- 1. Nigit Agarwal, MD, Clinical Associate Professor (Affiliate) (Primary Home department Internal Medicine, COM-P 10% effort)
- 2. Alicia Allen, PhD, Associate Professor (Primary Home department Family and Community Medicine, COM-T 10% effort)
- 3. Michael Berens, PhD, Research Professor (Primary Home department Neurology, COM-P 10% effort)
- 4. Eugene Change, MD, Professor (Primary Home department Otolaryngology, COM-T 10% effort)
- 5. Ying-Hui Chou, SciD, Associate Professor (Primary Home department Psychology Science 10% effort)

- 6. H-H. Sherry Chow, PhD, Research Scientist (Primary Home department Internal Medicine 10% effort)
- 7. Zelieann Craig, PhD, Associate Professor (Primary Home department Animal and Comparative Biomedical 10% effort)
- 8. Shirin Doroudgar, PhD, Assistant Professor (Primary Home department Internal Medicine 10% effort)
- 9. Michael Fallon, MD, Professor (Primary Home department Internal Medicine, COM-P 10% effort)
- 10. Amelia Gallitano, MD, PhD (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 11. Pamela Garcia-Filion, PhD, Associate Research Scientist (Primary Home department Medical Bioinformatics, COM-P 10% effort)
- 12. Christopher Glembotski, PhD, Professor (Primary Home department Internal Medicine, COM-P 10% effort)
- 13. Rayna Gonzales, PhD, Associate Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 14. Michael Grandner, PhD, Associate Professor (Primary Home department Psychiatry, COM-T 10% effort)
- 15. Kurt Gustin, PhD, Associate Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 16. Taben Hale, PhD, Associate Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 17. Karen Hastings, MD, PhD, Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 18. Melissa Herbst-Kralovetz, PhD, Associate Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 19. Robert Hooker, MD, Associate Clinical Professor (Primary Home department Surgery, COM-T 10% effort)
- 20. Matthew Huentelman, PhD, Research Associate Professor (Affiliate) (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 21. Suwon Kim, PhD, Associate Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 22. Won Hee Lee, PhD, Assistant Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 23. Jonathan Lifshitz, PhD, Research Professor (Primary Home department Psychiatry, COM-P)
- 24. Purnima Madhivanan, MBBS, PhD, Associate Professor (Primary Home department Public Health, MEZCOPH 10% effort)
- 25. Timothy Marlowe, PhD, Assistant Research Professor (Primary Home department Internal Medicine, COM-P 10% effort)
- 26. Shwetal Mehta, PhD, Research Associate Professor (Affiliate) (Primary Home department Neurosurgery, COM-P 10% effort)
- 27. Ghassan Mouneimne, PhD, Associate Professor (Primary Home department Cellular and Molecular Medicine, COM-T 10% effort)
- 28. Paulo Pires, PhD, Assistant Professor (Primary Home department Physiology, COM-T 10% effort)

- 29. Shenfeng Qiu, MD, PhD, Associate Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 30. Olga Rafikova, MD, PhD, Associate Professor (Primary Home department Internal Medicine, COM-T 10% effort)
- 31. Peter Reaven, MD, Professor (Affiliate), (Primary Home department Internal Medicine, COM-P 10% effort)
- 32. Kathleen Rodgers, PhD, Professor (Primary Home department Pharmacology, COM-T 10% effort)
- 33. Casey Romanoski, PhD, Associate Professor (Primary Home department Cellular and Molecular Medicine, COM-T 10% effort)
- 34. Lee Seabrooke, PhD, Instructor (Affiliate) (Primary Home department Child Health, COM-P 10% effort)
- 35. Shalini Sharma, PhD, Associate Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- 36. Yi Su, PhD, Research Associate Professor (Affiliate) (Primary Home department Neurology, COM-P 10% effort)
- 37. Theresa Thomas, PhD, Associate Professor (Affiliate) (Primary Home department Child Health, COM-P 10% effort)
- 38. Cynthia Thomson, PhD, Professor (Primary Home department Public Health, MEZCOPH)
- 39. Craig Weinkauf, MD, PhD, Associate Professor (Primary Home department Surgery, COM-T 10% effort)
- 40. Justin Wilson, PhD, Assistant Professor (Primary Home department Immunobiology, COM-T 10% effort)
- 41. Frederic Zenhausern, PhD, Professor (Primary Home department Basic Medical Sciences, COM-P 10% effort)
- \*These faculty provide educational support to CTS, but hold a primary appointment in other departments

Genetic Counseling Graduate Program (GCGP): This unit is currently housed within UAHS with primary academic appointments in various departments at the university. Upon approval, the faculty will move into the UACHS with the following faculty continuing to support its work. The primary academic appointments will shift to the respective departments in the new college plan while retaining joint appointments with the currently listed primary home departments:

- 1. Dorothy (Dee) Quinn, MS, Director, Senior Lecturer (Primary Home department Cellular and Molecular Medicine, COM-T 60% effort)
- 2. Valerie Schaibley, PhD, Associate Director, Assistant Professor, Educator Scholar Track (Primary Home department Cellular and Molecular Medicine, COM-T 95% effort)
- 3. Chris Stallman, MS, MLS, Clinical Coordinator, Lecturer (Primary Home department Cellular and Molecular Medicine, COM-T 50% effort)
- 4. Esteban Symonds, MD, Assistant Professor, Clinical Scholar Track (Primary Home department Internal Medicine, COM-T 20% effort)
- 5. Shannon Kieran, MS, MBA, Senior Genetic Counselor (Primary Home department Cellular and Molecular Medicine, COM-T 20% effort)

6. Catelyn Slayback, MS, Instructor (Primary Home department - Cellular and Molecular Medicine, COM-T –20% effort)

<u>Midwifery Program:</u> This unit is currently housed within UAHS with primary academic appointments in various departments at the university. Upon approval, the faculty will move into the UACHS with the following faculty continuing to support its work. *The primary academic appointments will shift to the respective departments in the new college plan while retaining joint appointments with the currently listed primary home departments:* 

- 1. Erin McMahon, EdD, Assistant Clinical Professor (Primary Home department Doctor of Nursing Practice Community, CON– 100% effort)
- 2. Lisa Kiser, DNP, Assistant Clinical Professor (Primary Home department Doctor of Nursing Practice Community, CON– 100% effort)
- 3. TBD Faculty, (Primary Home department Doctor of Nursing Practice Community, CON– 100% effort)

<u>Physician Assistant Program:</u> This unit is currently housed within UAHS with primary academic appointments in the Department of Medicine in COM-T. Upon approval, the faculty will move into the UACHS with the following faculty continuing to support its work. *The primary academic appointments will shift to the respective departments in the new college plan while retaining joint appointments with the currently listed primary home departments:* 

- 1. Kevin Lohenry, PhD, PA-C, Clinical Professor of Medicine, Program Director (Primary Home department Internal Medicine COM-T 100% effort)
- 2. TBD Medical Director, Terminal Degree (Home department (Primary Home department Internal Medicine COM-T 50% effort)
- 3. TBD Director of Accreditation, Terminal Degree (Home department (Primary Home department Internal Medicine COM-T 100% effort)
- 4. TBD Director of Didactic Education, Terminal Degree (Primary Home department Internal Medicine COM-T 100% effort)
- 5. TBD Director of Clinical Education, Terminal Degree (Primary Home department Internal Medicine COM-T 100% effort)
- 6. TBD Faculty, Terminal Degree (Primary Home department Internal Medicine COM-T 100% effort)
- 7. TBD Faculty, Terminal Degree (Primary Home department Internal Medicine COM-T 100% effort)
- 8. TBD Faculty, Terminal Degree (Primary Home department Internal Medicine COM-T 100% effort)
- 9. TBD Faculty, Terminal Degree (Primary Home department Internal Medicine COM-T 100% effort)
- 10. TBD Faculty, Terminal Degree (Primary Home department Internal Medicine COM-T 100% effort)

<u>Physical Therapy Program:</u> This unit is currently housed within UAHS with primary academic appointments in the Department of Orthopedics in COM-T. Upon approval, the faculty will move into the UACHS with the following faculty continuing to support its work. *The primary* 

## academic appointments will shift to the respective departments in the new college plan while retaining joint appointments with the currently listed home departments:

- 1. Chris Childers, PhD, Program Director (Primary Home department Orthopedics COM-T 100% effort)
- 2. TBD Director of Clinical Education, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 3. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 4. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 5. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 6. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 7. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 8. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 9. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 10. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 11. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 12. TBD Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 13. TBD Adjunct Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 14. TBD Adjunct Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)
- 15. TBD Adjunct Faculty, Terminal Degree (Primary Home department Orthopedics COM-T 100% effort)

#### B. List the clerical and support staff positions that will be included in the new unit.

- 1. Mike Renning, MA: Director of Graduate Affairs, (Clinical Translational Sciences 100% effort)
- 2. Anabel Moreno: CTS Administrative Affairs Coordinator Tucson (100% effort)
- 3. Katherine Gonzales, Med: CTS Academic Affairs Officer Phoenix (CTS, COM-P 20% effort)
- 4. Mary Ellen Wing, Administrative Coordinator (Primary Home department (Home department Senior Vice-President for Health, UAHS 100% effort)
- 5. Judith Burrola, Clinical Coordinator (Primary Home department Doctor of Nursing Practice Community, CON– 100% effort)
- 6. Kathy Ben, BS, Program Coordinator (Primary Home department Cellular and Molecular Medicine, COM-T 50% effort)

- 7. TBD Program Manager TBD (Home department (Primary Home department Senior Vice-President for Health, UAHS 100% effort)
- 8. TBD Clinical Placement Coordinator (Primary Home department (Home department Senior Vice-President for Health, UAHS 100% effort)
- 9. Theresa Martinez, Administrative Coordinator (Primary Home department Senior Vice-President for Health, UAHS - 100% effort)

## 1. Project the number and type of new faculty and staff positions that will be needed by the unit during each of the next three years.

The UACHS will build an administrative support team that reflects the priorities as previously described. This will include the following administrative support in the UACHS Administrative structure:

- 1. Counselor, Health and Wellness (Student Services 100%)
- 2. Administrative Assistant to the Dean (100%)
- 3. Administrative Assistant, Faculty Affairs & Career Development (100%)
- 4. Administrative Assistant, Education (100%)
- 5. Administrative Assistant, Equity, Diversity, and Inclusion (50%)
- 6. Statistician, Curriculum, Evaluation & Assessment (50%)
- 7. Director of Admissions (100%)
- 8. Admissions Counselor (100%)
- 9. Admissions Counselor (100%)
- 10. Administrative Assistant (100%)
- 11. Instructional Designer (100%)
- 12. Instructional Designer (50%)
- 13. Instructional Designer (50%)

#### C. Physical Facilities and Equipment

1. Provide the Unit address for the new department. Include the following:

Mailing address

Building Name: Health Science Innovation Building

Building # 216

Room # 953

PO Box 21026

Zip Code 85721

Unit phone number 520-626-

2. Identify the physical facilities that will be required for the new unit and indicate whether those facilities are currently available.

(HSIB) for their administrative needs. Current utilization studies demonstrate ample space availability. Programs will continue to be housed in HSIB as well as on the Phoenix and Tucson campuses for the Clinical Translational Sciences team. Genetic Counseling utilizes the Arizona Simulation Technology and Education Center (ASTEC) space for simulation, and they utilize three classrooms in HSIB for their current course schedules. Midwifery is a hybrid program that will utilize on campus lecture, small group, and simulation space in HSIB an average of once per month with the remainder of their coursework being available digitally. The Physician Assistant program will be utilizing space in HSIB for classrooms and they will utilize shared laboratory space with the Physical Therapy program in the lower level. The Physical Therapy program will provide a large majority of their classes in a newly developing shared lab space in the lower level of HSIB. This 8586 square foot lab will be completed in time for their anticipated 2025 start date. Additional space will be utilized in the AZ Health Sciences Library, Medical Bookstore, Gross Lab, and the Health Science Innovation Building. Clinical Translational Sciences will continue to provide the majority of their courses in the Bioscience Research Laboratories building. Additional courses are scheduled in the HSIB building or online. Genetic Counseling utilizes the Arizona Simulation Technology and Education Center (ASTEC) space for simulation, and they utilize three classrooms in HSIB for their current course schedules. Additional space will be utilized in the AZ Health Sciences Library, Medical Bookstore, Gross Lab, and the Health Science Innovation Building.

#### **Health Science Innovation Building (HSIB)**

The Health Sciences Innovation Building (HSIB) is a nine-floor, 220,000 square foot facility in the heart of the health sciences campus that welcomed students and faculty in 2019. The HSIB is a cutting-edge venue that builds and fosters collaborations among multidisciplinary teams of health professionals, students and faculty in medicine, nursing, pharmacy, and public health. In addition to providing world-class spaces for simulation practice, clinical skills learning and community interaction on the University of Arizona Health Sciences campus in Tucson, this building serves as the vanguard for interprofessional health education in the U.S.

#### **Key Design Elements**

- Approximately 350+ people can be accommodated in the Forum for special events
- Two 150-person classrooms that can be converted to a 300-person room; four 60-person classrooms that convert to two 120-persons; and eight 20-person
- 60 individual study rooms, 11 group study rooms (4-6 person capacity), two collaboration rooms (8-person capacity)

#### Floors & Spaces

Lower Level – PT/PA Class Laboratories to include PT/PA Class Lab, Flex Lab, Neuro Lab and Storage (Fall 2025)

Floor 1 – Forum, Food Service

- Floor 2 Advisory, Faculty Commons
- Floor 3 Classrooms, Study Rooms, Student Lounge
- Floor 4 Classrooms, Study Rooms
- Floor 5 Classrooms, BioCommunications, Study Rooms
- Floor 6 Classrooms, Health Sciences design (HSd)
- Floor 7 Arizona Simulation Training and Education Center (ASTEC),

ASTEC is a 30,000 sq. ft. facility that provides interprofessional learning opportunities in a high-tech, realistically simulated environment. The facility is equipped with a 6,000 sq. ft. Sim Deck that includes six patient rooms, three of which can be converted to any type of hospital environment and three that represent an operating room, intensive care unit, and labor and delivery suite, each equipped with hospital-grade gasses. Also included on the floor is a synthetic cadaver and 3D immersive anatomy lab, two debriefing rooms and a large flexible classroom.

Floor 8 – Interprofessional Clinical and Professional Skills Center (iCaPS)
The iCaPS facility allows students in Medicine, Nursing, Pharmacy, Public Health, and
Veterinary Medicine to learn and develop their clinical skills through the Standardized
Patient (SP) program as a resource for medical sciences curricula. The 8<sup>th</sup> floor has 30
exam rooms, 12 small group debrief rooms, and a dedicated monitoring station.

Floor 9 – Administrative Offices housing UAHS senior leadership, research administration, planning & facilities, marketing & communications, finance and faculty and staff offices and student support services.

**UA Main Campus:** Student Health Services

<u>Clinical Affiliate Facilities:</u> Affiliation agreements with privately owned hospitals and clinical facilities are in place for our CTS, Nurse Midwife and Genetic Counseling programs and will be established for our PT and PA programs to form a distributive clinical network for all clinical experiences.

<u>Non-Profit and Industry Partners:</u> Affiliations will be developed with local nonprofit and industry partners to provide service-learning opportunities for students. These will provide critical community services and partnerships.

3. List all additional equipment that will be needed during the next five years and the estimated cost.

Please see Appendix C.

#### D. Library Resources, Materials, and Supplies

1. Identify any additional library acquisitions that will be needed during the next three years and the estimated cost.

Library

The University of Arizona medical library currently supports all the usual medical search engines and access to relevant and appropriate journals for the proposed departments and established programs including student and faculty research. This availability through the library will limit the need for students to purchase texts and allow faculty to utilize sections from multiple books within one course at no additional expense to the students.

2. List any special materials or supplies, other than normal office supplies, that will be required by the new unit.

Please see Appendix C.

#### E. Other Information

1. Identify any implications of the proposed change for regional or programmatic accreditation.

The creation of this new unit will provide a stronger foundation for programmatic accreditation as it relates to 4 of the initial 5 programs that were previously identified in this application (Genetic Counseling, Midwifery, Physician Assistant, and Physical Therapy). Issues related to equity in faculty appointments and student support services, requirements for clinical site development, faculty development, and recruitment and retention of underrepresented minority students will be possible with, and it will provide stronger alignment between the UArizona resources for other colleges and this new college. In addition, accrediting bodies continue to place a strong emphasis on interprofessional education, which will be a key component for this new interprofessional college.

2. Provide any relevant information, not requested above, that will assist reviewers in evaluating this proposed addition.

#### F. Financing

1. Explain the university's plan for providing adequate financing for the unit.

Start-up funding for the College of Health Sciences and its affiliated departments includes a combination of State appropriations for development of New Economy Initiatives (NEI), Strategic Investment funds, general operating funds and other University unrestricted funds.

Budgeted expenditures include faculty and staff, operations, travel, continuing education, capital equipment, educational software, costs for clinical rotations, and fees for accreditation and society memberships. Revenues and expenditures increase annually, from FY2024 through FY2027 as the various programs become fully established.

The College will receive activity-based revenue through the University's Activity Informed Budget (AIB) model. Based on financial proformas, the College will require startup funding of just under \$10 million over the first four years and permanent state funding of \$1.1 - \$1.3 million per year, with the latter funded from permanent NEI dollars. State funds will be provided from New Economic Initiative appropriations. No new funding from the University or State is being requested. The Regents' set-aside for scholarships is estimated at approximately \$1.2 million in FY2028.

The College is expected to generate future funding streams from research activity, philanthropy and new educational programs, but those revenues and associated expenses are not included in the initial budget.

Shared support services, including marketing and communications, finance and accounting, human resources, information and educational technology management, research administration, and philanthropy are provided through the Office of the Senior Vice President for Health Sciences. Memorandum of Understanding to affect service level agreements and the expense assigned to the College will be developed for each administrative function.

Renovation to the lower level of the Health Sciences Innovation Building to provide teaching space for the Physician Assistant and Physical Therapy program was funded in FY2023. In addition to that space, the programs will utilize other already existing teaching and study facilities, including the simulation center and clinical skills labs, libraries and educational technology hardware available in Health Sciences.

#### 2. Identify potential sources for external funding for the unit.

The College anticipates pursuing philanthropic development for naming of the college and/or individual programs, and to establish endowed chairs. The UA Foundation currently holds \$825,000 earmarked for the development of a PharmD/PA dual degree program and placement of graduates in rural and underserved areas of Arizona. Other potential sources include federal and non-federal grants, particularly training grants, and Arizona Area Health Education Centers (AHEC) funding to support access to healthcare in rural and urban medically underserved areas.

3. If state funds will be used, indicate whether new appropriations will be requested or existing appropriations will be reallocated. If reallocating existing appropriations, indicate where these will be drawn from.

In FY2021, Health Sciences received \$2 million of Strategic Initiative funds (\$500k per year for four years) to Train Students for Arizona Communities. Beginning in FY2022, Health Sciences received an allocation of State New Economy Initiative funds equaling \$6.5 million in One-Time funds and \$13 million in Ongoing funds to support the development of sixteen programs. Approximately \$11.3 million of these funds were budgeted to cover the start-up costs of the Physical Therapy, Physician Assistant, and Certified Nurse Midwife programs.

None of the \$13 million in Ongoing NEI funding from FY2027 forward has been budgeted or encumbered. As noted in section III.E.1, a portion of these funds will be allocated permanently to the new College of Health Sciences.

Existing fund sources support the Clinical and Translational Science and Genetic Counseling programs and will transfer from Health Sciences to the College with the units.

4. Complete the Budget Projection Form, projecting the operating budget for the proposed unit for the next three years.

Please see Appendix D.

5. Estimate the amount of external funds that may be received by the unit during each of the first three years.

The UA Foundation received a total of \$825,000 from the Blank Foundation to support the development of the PharmD/PA dual degree program. Health Sciences does not anticipate other significant external funding during the first three years.

6. Provide the unit account number (if previously assigned).

PA – 1101831 PT – 1101833 CNM – 1101832 CTSGR - 1470700 GCGP - 5299918

**V.** Additional Information --provide any other information not requested above that may be useful in evaluating this proposal.

See Appendix E.

#### V. Signatures

Senior Vice-President's Signature: <u>In charlo</u> Date: <u>2/28/20</u>23

Michael D. Dake, MD,

**Senior Vice-President for Health Sciences** 

Profession	Standard	Focus	Explanation	Oversight & Support
			The program has documented goals3 that are based on its	
			mission, that reflect contemporary physical therapy	
			education, research and practice, and that lead to	
PT	1B	Faculty Affairs	expected program outcomes.	PD/Faculty Affairs
			The program meets required student achievement measures4	
		Curriculum Evaluation &	and its mission and goals as demonstrated by actual program	PD/Curriculum Evaluation &
CAPTE PT Standards Rev 11/2/20)	1C	Assessment	outcomes.	Assessment
			Ultimate licensure pass rates6 are at least 85%, averaged	
			over two years. When two years of data are not available,	
			the one-year ultimate rate must be sufficient to allow the	
		Curriculum Evaluation &	program to meet the expectation for an ultimate two-year	PD/Curriculum Evaluation &
	1C2	Assessment	licensure pass rate of at least 85%.	Assessment
			Employment rates7 are at least 90%, averaged over two	
			years. If the program admits more than one cohort per	
			year, the two year employment rate for each cohort must	
			be at least 90%. When two years of data are not available,	
			the one-year employment rate must be sufficient to allow	
		Curriculum Evaluation &	the program to meet the expectation for a two-year	PD/Curriculum Evaluation &
	1C3	Assessment	employment rate of at least 90%.	Assessment
		Curriculum Evaluation &	The program graduates meet the expected outcomes as	PD/Curriculum Evaluation &
	1C5	Assessment	defined by the program.	Assessment
		Curriculum Evaluation &	The program meets expected outcomes related to its	PD/Curriculum Evaluation &
	1C6	Assessment	mission and goals.	Assessment
			The program has documented and implemented on-going,	
			formal, and comprehensive program assessment	
		Curriculum Evaluation &	processes that are designed to determine program	PD/Curriculum Evaluation &
	2A	Assessment	effectiveness and used to foster program improvement.	Assessment
			For each of the following, the program provides an analysis	
			of relevant data and identifies needed program change(s)	
			with timelines for implementation and reassessment. The	
		Curriculum Evaluation &	assessment process is used to determine the extent to	PD/Curriculum Evaluation &
	2B	Assessment	which:	Assessment
		Curriculum Evaluation &	<b>2B1</b> the admissions process, criteria and prerequisites	PD/Curriculum Evaluation &
	2B1	Assessment	meet the needs and expectations of the program.	Assessment
		Curriculum Evaluation &	program enrollment appropriately reflects available	PD/Curriculum Evaluation &
	2B2	Assessment	resources, program outcomes and workforce needs.	Assessment

Profession	Standard	Focus	Explanation	Oversight & Support
	2B3	Curriculum Evaluation & Assessment	the collective core, associated and clinical education faculty meet program and curricular needs.	PD/Curriculum Evaluation & Assessment
	284	Curriculum Evaluation & Assessment	program resources are meeting, and will continue to meet, current and projected program needs including, but not limited to, financial resources, staff, space, equipment, technology, materials, library and learning resources, and student services.	PD/UAHS Facilities
	2B5	Evaluation and Assessment	program policies and procedures, as well as relevant institutional policies and procedures meet program needs. This includes analysis of the extent to which program practices adhere to policies and procedures.	PD/UAHS General Counsel
	2C	Curriculum Evaluation & Assessment	The curriculum assessment plan is written and addresses the curriculum as a whole. The assessment plan includes assessment of individual courses and clinical education. The plan incorporates consideration of the changing roles and responsibilities of the physical therapy practitioner and the dynamic nature of the profession and the health care delivery system. Assessment data are collected from appropriate stakeholders including, at a minimum, program faculty, current students, graduates of the program, and at least one other stakeholder group such as employers of graduates, consumers of physical therapy services, peers, or other health care professionals. The assessment addresses clinical education sites including, at a minimum, the number and variety and the appropriate length and placement within the curriculum.	PD/Curriculum Evaluation & Assessment
	3C	Faculty Affairs	Institutional policies9 related to academic standards and to faculty roles and workload are applied to the program in a manner that recognizes and supports the academic and professional aspects of the physical therapy program, including, but not limited to, providing for reduction in teaching load for administrative functions.	PD/Faculty Affairs
	3D	Faculty/Student Affairs	Policies and procedures 10 exist to facilitate equal opportunity and nondiscrimination for faculty, staff and prospective/enrolled students.	PD/Faculty/Student Affairs

Profession	Standard	Focus	Explanation	Oversight & Support
			Policies, procedures, and practices11 that affect the rights,	
			responsibilities, safety, privacy, and dignity of program faculty12 and staff are written, disseminated, and applied	
	3E	Faculty Affairs	consistently and equitably.	
			Policies, procedures, and practices exist for handling	
			complaints13 that fall outside the realm of due process14,	
			including a prohibition of retaliation following complaint	
			submission. The policies are written, disseminated, and applied consistently and equitably. Records of complaints	
			about the program, including the nature of the complaint	
			and the disposition of the complaint, are maintained by the	
	3F	Faculty Affairs	program.	PD/Faculty Affairs
			Program specific policies and procedures are compatible	
	3G	Legal	with institutional policies and with applicable law.	PD/General Counsel
			Program policies, procedures, and practices provide for	
	211	Manhatin a	compliance with accreditation policies and procedures including:	DD /I I A LIC A 4 a planting
	3H	Marketing		PD/UAHS Marketing
			3H1 maintenance of accurate information, easily	
			accessible16 to the public, on the program website	
			regarding accreditation status (including CAPTE logo and	
			required accreditation statement) and current student	
	3H1	Marketing	achievement measures;	PD/UAHS Marketing
			3H2	
			timelysubmissionofrequiredfeesanddocumentation,includin	
	מעמ	Curriculum Evaluation &	greportsofgraduationrates, performance on state licensing examinations, and employment rates;	PD/Curriculum Evaluation &
	3H2	Assessment	Each core faculty19 member, including the program	Assessment
	4A	Faculty Affairs	director and clinical education coordinator, has	
		,	Standard 4:	
			The program faculty are qualified for their roles and	
			effective in carrying out their responsibilities.	

Profession	Standard	Focus	Explanation	Oversight & Support
			doctoral preparation20, contemporary expertise21 in assigned teaching areas, and demonstrated effectiveness in teaching and student evaluation. In addition, core faculty who are PTs and who are teaching clinical PT content	PD/Faculty Affairs/Curriculum Evaluation & Assessment
	4B	UAHS Research Administration	Each core faculty member has a well-defined, ongoing scholarly agenda23 that reflects contributions to: (1) the development or creation of new knowledge, OR (2) the critical analysis and review of knowledge within disciplines or the creative synthesis of insights contained in different disciplines or fields of study, OR (3) the application of findings generated through the scholarship of integration or discovery to solve real problems in the professions, industry, government, and the community, OR (4) the development of critically reflective knowledge about teaching and learning, OR (5) the identification and resolution of pressing social, civic, and ethical problems through the scholarship of engagement.	PD/Faculty Affairs
	4C	Clinical Partnerships and Community Engagement	Each core faculty member has a record of institutional or professional service24	PD/Clinical Partnerships & Community Engagement
	4D	Curriculum Evaluation & Assessment	Each associated25 faculty member has contemporary expertise in assigned teaching areas and demonstrated effectiveness in teaching and student evaluation.	PD/Curriculum Evaluation & Assessment
	4E	Faculty Affairs	Formal evaluation of each core faculty member occurs in a manner and timeline consistent with applicable institutional policy. The evaluation includes assessments of teaching, scholarly activity and service, and any additional responsibilities. The evaluation results in an organized faculty development plan that is linked to the assessment of the individual core faculty member and to program improvement.	PD/Faculty Affairs
	4F	Curriculum Evaluation & Assessment	Regular evaluation of associated faculty occurs and results in a plan to address identified needs.	PD/Curriculum Evaluation & Assessment

Profession	Standard	Focus	Explanation	Oversight & Support
			The program director provides effective leadership for the program including, but not limited to, responsibility for communication, program assessment and planning, fiscal	
	4H	Faculty Affairs/Dean's Office	management, and faculty evaluation.	PD/Faculty Affairs/Dean's Office
	<b>4</b> J	Curriculum Evaluation & Assessment	The clinical education coordinator is effective in developing, conducting, and coordinating the clinical education program	PD/Curriculum Evaluation & Assessment
	4N	Curriculum Evaluation & Assessment	The collective core faculty are responsible for assuring that students are professional, competent, and safe and ready to progress to clinical education.	PD/Curriculum Evaluation & Assessment
	5A	Admissions Office	Program policies, procedures, and practices related to student recruitment and admission are based on appropriate and equitable criteria and applicable law, are written and made available to prospective students, and are applied consistently and equitably. Recruitment practices are designed to enhance diversity30 of the student body.	PD/Admissions
	5B	Admissions/Marketing	Prospective and enrolled students are provided with relevant information about the institution and program that may affect them including, but not limited to, catalogs, handbooks, academic calendars, grading policies, total cost to student, financial aid, the program's accreditation status, the process to register a complaint with CAPTE, outcome information, and other pertinent print and/or electronic information. Materials related to the institution and program are accurate, comprehensive, current, and provided to students in a timely manner.	PD/Admissions/Marketing
	5D	Legal	Policies, procedures, and practices that affect the rights, responsibilities, safety, privacy, and dignity of program students are written and provided to students and applied consistently and equitably.	PD/General Counsel

Profession	Standard	Focus	Explanation	Oversight & Support
	5E	Equity, Diversity, and Inclusion	Policies, procedures, and practices related to student retention,32 student progression33 and dismissal through the program are based on appropriate and equitable criteria and applicable law, are written and provided to students, and are applied consistently and equitably. Retention practices support a diverse student body.	PD/EDI Team
	6D	Curriculum Evaluation & Assessment	The curriculum plan includes a description of the curriculum model36 and the educational principles on which it is built.	PD/Curriculum Committee
	6F	Interprofessional	The didactic and clinical curriculum includes interprofessional education40; learning activities are directed toward the development of interprofessional competencies including, but not limited to, values/ethics, communication, professional roles and responsibilities, and teamwork. NOTE: this element will become effective January 1, 2018.	PD/Curriculum Committee/Interprofessional Team
	6H	Curriculum Evaluation & Assessment	The curriculum plan includes learning objectives41 stated in behavioral terms that reflect the breadth and depth42 of the course content and describe the level of student performance expected.	PD/Curriculum Committee
	6J	Curriculum Evaluation & Assessment	The curriculum plan includes a variety of effective tests and measures44 and evaluation processes45 used by faculty to determine whether students have achieved the learning objectives. Regular, individual testing and evaluation of student performance in the cognitive, psychomotor, and affective domains is directly related to learning objectives and includes expectations for safe practice during clinical education experiences.	
	6L1, L3, L5	Curriculum Evaluation & Assessment	The curriculum plan includes clinical education experiences48 for each student that encompass, but are not limited to:	PD/Curriculum Evaluation & Assessment
			6L1 management of patients/clients with diseases and conditions representative of those commonly seen in practice across the lifespan and the continuum of care;	PD/Curriculum Evaluation & Assessment
			6L3 involvement in interprofessional practice4	PD/Curriculum Evaluation & Assessment

Profession	Standard	Focus	Explanation	Oversight & Support
			6L5 other experiences that lead to the achievement of the	PD/Curriculum Evaluation &
			program's defined expected student outcomes.	Assessment
			Financial resources are adequate to achieve the program's	
			stated mission, goals, and expected program outcomes	
			and to support the academic integrity and continuing	
	8C	Finance	viability of the program	PD/Finance Administration
			The program has, or has ensured access to, space,	
			equipment, technology and materials of sufficient quality	
			and quantity to meet program goals related to teaching,	
	8D	Facilities	scholarship and service.	PD/Facilities Team
		Curriculum Evaluation &	<b>8D1</b> Classroom and laboratory environments are	PD/Curriculum Evaluation &
	8D1	Assessment	supportive of effective teaching and learning.	Assessment
			<b>8D2</b> Space is sufficient for faculty and staff offices, student	
			advisement, conducting confidential meetings, storing	
		Curriculum Evaluation &	office equipment and documents, and securing confidential	PD/Curriculum Evaluation &
	8D2	Assessment	materials.	Assessment
		Curriculum Evaluation &	8D3 Students have access to laboratory space outside of	PD/Curriculum Evaluation &
	8D3	Assessment	scheduled class time for practice of clinical skills.	Assessment
			<b>8D4</b> Equipment and materials are typical of those used in	
			contemporary physical therapy practice, are sufficient in	
		Curriculum Evaluation &	number, are in safe working order, and are available when	PD/Curriculum Evaluation &
	8D4	Assessment	needed.	Assessment
		Curriculum Evaluation &		PD/Curriculum Evaluation &
	8D5	Assessment	<b>8D5</b> Technologyresourcesmeettheneedsoftheprogram	Assessment
		Curriculum Evaluation &	8D6 Core faculty have access to sufficient space and	PD/Curriculum Evaluation &
	8D6	Assessment	equipment to fulfill their scholarly agendas.	Assessment
			<b>8E</b> The resources of the institutional library system and	
			related learning resource centers are adequate to support	
		Curriculum Evaluation &	the needs and meet the goals of the program, faculty and	PD/Curriculum Evaluation &
	8E	Assessment	students.	Assessment
			The clinical sites available to the program are sufficient to	
			provide the quality, quantity and variety of expected	
		Clinical Partnerships and	experiences to prepare students for their roles and	PD/Curriculum Evaluation &
	8F	Community Engagement	responsibilities as physical therapists.	Assessment

Profession	Standard	Focus	Explanation	Oversight & Support
			There are effective written agreements between the institution and the clinical education sites that are current and describe the rights and responsibilities of both parties. At a minimum, agreements address the purpose of the agreement; the objectives of the institution and the clinical education site in establishing the agreement; the rights and responsibilities of the institution and the clinical education site, including those related to responsibility for patient/client care and to responsibilities for supervision and evaluation of students; and the procedures to be	
	8G	Clinical Training Sites	followed in reviewing, revising, and terminating the agreement.	PD/Clinical Partnerships & Community Engagement
	8H	Student Affairs	Academic services, counseling services, health services, disability services, and financial aid services are available to program students.	PD/Student Affairs
PA	A1.02		The sponsoring institution is responsible for:	
ARC-PA 5th Edition Standards	A1.02a	Curriculum Evaluation & Assessment	a) supporting the planning by program faculty of curriculum design, course selection, and program assessment,	PD/Curriculum Committee/Curriculum Evaluation & Assessment/Instructional Designers
	A1.02b	Faculty Affairs	b) hiring faculty and staff,	
	A1.02c	Faculty Affairs	c) ensuring effective program leadership,	PD/Curriculum Evaluation & Assessment/Faculty Affairs
	A1.02d	Compliance	d) complying with ARC-PA accreditation <i>Standards</i> and policies,	PD/Dean's Office
	A1.02f	Legal	f) ensuring that all PA personnel and student policies are consistent with federal, state, and local statutes, rules and regulations,	PD/General Counsel/Curriculum Committee
	A1.02i	Faculty Affairs	i) defining, publishing, making <i>readily</i>	PD/Faculty Affairs
			available and consistently applying to faculty, its policies and procedures for processing faculty grievances and allegations of harassment,	

Profession	Standard	Focus	Explanation	Oversight & Support
			j) defining, publishing, making readily available and consistently	
			applying to students, its policies and procedures for processing	
	A1.02j	Student Affairs	student allegations of harassment, and	PD/Student Affairs
			The sponsoring institution <i>must</i> provide <i>sufficient</i> release time	( , , , , , , ,
		- 1	and financial resources in support of the <i>program director</i> and	PD/Faculty Affairs/UAHS Finance
	A1.02	Faculty Affairs	principal faculty , as applicable to the job description, for:	Administration
			a) maintenance of certification and licensure and	
			b) professional development directly relevant to PA education.	
			The sponsoring institution <i>must</i> provide academic support and	
			student services to PA students that are equivalent to those	
	A1.04	Student Affairs	services provided other <i>comparable</i> students of the institution.	PD/Student Affairs
			The sponsoring institution <i>must</i> provide the	
			program with sufficient financial resources to operate the	
			educational program and fulfill obligations to matriculating and	PD/UAHS Administration/Dean's
	A1.06	Financial Resources	enrolled students.	Office
			The sponsoring institution <i>must</i> provide the program with the	
			human resources, including sufficient faculty, administrative and	
			technical staff, necessary to operate the educational program,	
			comply with the Standards, and fulfill obligations to	PD/UAHS Administration/Dean's
	A1.07	Human Resources	matriculating and enrolled students.	Office
			The sponsoring institution <i>must</i> provide the	
			program with the physical facilities to operate the educational	DD (MANG Administration 12 / D
	44.00	Facilities	program in accordance with the <i>Standards</i> and to fulfill its	PD/UAHS Administration/Dean's
	A1.08 A1.10	Facilities	obligations to matriculating and enrolled students.  The sponsoring institution <i>must</i> support the program in:	Office/Facilities
	A1.10			
			a) securing clinical sites and <i>preceptors sufficient</i> in number to	DD/Clinical Partnershins 9
	A1.10a	Clinical Partnerships	allow all students to meet the program's <i>learning outcomes</i> for supervised clinical practice experiences and	PD/Clinical Partnerships & Community Engagement
	A1.10d	Cililical Partiferships	b) ensuring all <i>required rotations</i> are located within the <i>United</i>	PD/Clinical Partnerships &
	A1.10b	Clinical Partnerships	States.	Community Engagement
	A1.100	Cirilical Fai therships	States.	Community Engagement

Profession	Standard	Focus	Explanation	Oversight & Support
	A1.11	Equity, Diversity, and Inclusion	The sponsoring institution <i>must</i> demonstrate its commitment to student, faculty and staff <i>diversity</i> and <i>inclusion</i> by:	EDI
	A1.11a	Equity, Diversity, and Inclusion	a) supporting the program in defining its goal(s) for $\mbox{\it diversity}\ \mbox{\it and}\ \mbox{\it inclusion}$ ,	EDI
	A1.11b	Equity, Diversity, and Inclusion	b) supporting the program in implementing recruitment strategies,	PD/UAHS EDI/Associate Dean for EDI
	A1.11c	Equity, Diversity, and Inclusion	c) supporting the program in implementing retention strategies, and	PD/UAHS EDI/Associate Dean for EDI
	A1.11d	Equity, Diversity, and Inclusion	d) making available, resources which promote diversity and inclusion .	PD/UAHS EDI/Associate Dean for EDI
Genetic Counseling				
STANDARDS OF ACCREDITATION FOR GRADUATE PROGRAMS IN GENETIC COUNSELING Adopted 02/13/2013 Revisions published 10/01/2019 Compliance start date 6/15/2021				
	A1.1.2	Faculty Affairs	The mission, goals, and expected outcomes of the program are aligned with those of the sponsoring institution, reflect professional standards and guidelines, and consider the needs and expectations of the community of interest.	PD/Faculty Affairs
	A1.1.3	Legal/Clinical Partnerships	Programs must maintain affiliation agreements for clinical site rotations in accordance with institutional requirements.  Affiliation agreements are strongly encouraged when other institutions contribute to the program.	Community engagement

B3.1 Clinical Partnerships    B3.1.1.3.1.4 The program must ensure that the students have sufficient access to fieldwork supervisions by board-certified genetic counseling techniques and styles. At least 40 of the 50 required participatory cases must be with unduals being evaluated for risk of or affected by diverse genetic conditions across the lifespan (i.e., patients; not individuals who are being consented to research, and not standardized patients). The 50 required participatory cases described above must be supervised by an experienced ABG/ABMGG/CABC/GABMGG/CABC some studies pecialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other uncomments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.    B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must other adult with no one specialty dominating. Programs must outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.    B3.6 Programs must maintain documentation of all student fieldwork experience, become must student progress, and monitor student activities during the placement.    B4.1   Clinical Experiences   In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental   In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-participatory cases, teaching and community outreach.	Profession	Standard	Focus	Explanation	Oversight & Support
genetic counselors who represent a broad range of genetic counseling techniques and styles. At least 40 of the 50 required participatory cases must be with individuals being evaluated for risk of or affected by diverse genetic conflictions across the lifespan (i.e., patients), not indust who are being consented to research; and not standardized patients). The 50 required participatory cases described above must be supervised by an experienced ABGC/ABMGG/CAGC certified genetic counselor. Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialities, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental experience succordinator/Community augmented with supplemental experience such as additional non-		B3.1	Clinical Partnerships	l	PD/Curriculum Evaluation and
counseling techniques and styles. At least 40 of the 50 required participatory cases must be with individuals being evaluated for risk of or affected by diverse genetic conditions across the lifespan (i.e., patients; not individuals who are being consented to research; and not standardized patients). The 50 required participatory cases described above must be supervised by an experienced ABGC/ABMGG/CAGC certified genetic counselor.  Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-fengagement				sufficient access to fieldwork supervision by board-certified	Assessment/Community
participatory cases must be with individuals being evaluated for risk of or affected by diverse genetic conditions across the lifespan (i.e., patients; not individuals who are being consented to research; and not standardized patients). The 50 required participatory cases described above must be supervised by an experienced ABGC/ABMG/CAGC certified genetic counselor. Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  In order to enhance a student's acquisition of the PBCs, program Clinical programs must ensure that fieldwork training for students is augmented with supplemental experience, such as additional non-fingagement				genetic counselors who represent a broad range of genetic	Engagement
risk of or affected by diverse genetic conditions across the lifespan (i.e., patients; not individuals who are being consented to research; and not standardized patients). The 50 required participatory cases described above must be supervised by an experienced ABGC/ABMGG/CAGC certified genetic counselor. Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service divery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory cases just be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  Program Clinical programs must ensure that fieldwork training for students is augmented with supplemental augmented with supplemental augmented with supplemental augmented with supplemental programs on the fieldwork training for students is augmented with supplemental augmented with				<u> </u>	
Ilfespan (i.e., patients; not individuals who are being consented to research; and not standardized patients). The So required participatory cases described above must be supervised by an experienced ABGC/ABMGG/CAGC certified genetic counselor. Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialities, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialities and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, acquisition of the PBCs. programs must ensure that fieldwork training for students is augmented with supplemental  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental				participatory cases must be with individuals being evaluated for	
to research; and not standardized patients). The 50 required participatory cases described above must be supervised by an experienced ABGC/ABGC certified genetic counselor.  Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental				risk of or affected by diverse genetic conditions across the	
participatory cases described above must be supervised by an experienced ABGC/ABMGG/CAGC certified genetic counselor. Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialties, including prematal, pediatric, cancer, and other adult; (2) in a variety of diverse intigs that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  Program Clinical Coordinator/Community augmented with supplemental experience such as additional non-fragagement				lifespan (i.e., patients; not individuals who are being consented	
experienced ABGC/ABMGG/CAGC certified genetic counselor. Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required articipatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental augmented with supplemental coordinator/Community Engagement				to research; and not standardized patients). The 50 required	
Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical programs must ensure that fieldwork training for students is augmented with supplemental experiences uch as additional non-				participatory cases described above must be supervised by an	
field experiences are conducted (1) across multiple specialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, programs Clinical experiences used as additional non-grograms must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-grograms must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-grograms must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-grograms must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-grograms must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-grograms must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-group and such as a such				experienced ABGC/ABMGG/CAGC certified genetic counselor.	
including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  In order to enhance a student's acquisition of the PBCs, program Clinical Coordinator/Community augmented with supplemental experience such as additional non-				1 · · · · · · ·	
variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical coordinator/Community augmented with supplemental experience such as additional non-Engagement					
research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				including prenatal, pediatric, cancer, and other adult; (2) in a	
more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Smust ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				<u> </u>	
in-person, and/or telemedicine.  B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical programs must ensure that fieldwork training for students is augmented with supplemental Coordinator/Community augmented with supplemental experience such as additional non-Engagement				research, industry, and/or other environments; and (3) using	
B3.1.5 Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-				more than one service delivery mode, such as telephone, group,	
that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical Coordinator/Community augmented with supplemental experience such as additional non-Engagement				in-person, and/or telemedicine.	
specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				B3.1.5 Programs must provide sufficient opportunities such	
minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				that students are prepared to practice in each of the main	
across prenatal, pediatric, cancer, and other adult with no one specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				specialties and settings. All participatory encounters (not just the	
specialty dominating. Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				minimum 50 required participatory cases) must be distributed	
for each fieldwork experience, document student progress, and monitor student activities during the placement.  B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical Coordinator/Community augmented with supplemental experience such as additional non-Engagement				across prenatal, pediatric, cancer, and other adult with no one	
B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program clinical programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				specialty dominating. Programs must outline outcome measures	
B3.6 Programs must maintain documentation of all student fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program clinical programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				for each fieldwork experience, document student progress, and	
fieldwork experiences. In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences  In order to enhance a student's acquisition of the PBCs, program Clinical programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				monitor student activities during the placement.	
acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental  B4.1 Clinical Experiences In order to enhance a student's acquisition of the PBCs, program Clinical programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				B3.6 Programs must maintain documentation of all student	
B4.1 Clinical Experiences In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				fieldwork experiences. In order to enhance a student's	
B4.1 Clinical Experiences In order to enhance a student's acquisition of the PBCs, program Smust ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement				acquisition of the PBCs, programs must ensure that fieldwork	
programs must ensure that fieldwork training for students is Coordinator/Community augmented with supplemental experience such as additional non-Engagement				training for students is augmented with supplemental	
programs must ensure that fieldwork training for students is augmented with supplemental experience such as additional non-Engagement		B4.1	Clinical Experiences	In order to enhance a student's acquisition of the PBCs,	Program Clinical
				•	Coordinator/Community
participatory cases, teaching and community outreach				l. –	Engagement
				participatory cases, teaching and community outreach	

tandard	Focus	Explanation	Oversight & Support
2.1		Individuals in program leadership positions are expected to have academic appointments and privileges comparable to other faculty with similar academic responsibilities in the institution.	PD/Faculty Affairs
			, , , , , , , ,
2.1	Faculty Affairs	Program Leadership Program Directors must: Hold a master's degree in the discipline of genetic counseling; Have current certification in genetic counseling by the ABGC or the American Board of Medical Genetics and Genomics (ABMGG); Have been the course instructor/instructor of record for at least six credit hours of post-secondary education; Have at least five years of experience as a certified genetic counselor, a minimum of three of which must be in a patient-facing role (clinic or research); Be available for program administration year-round; Complete two hours per year of continuing training/coursework in curriculum design, assessment, evaluation, or educational andragogy; Have completed at least 10 hours of training/coursework in curriculum design, assessment, evaluation, or educational andragogy, within the last 10 years; Have provided fieldwork supervision for at least five genetic counseling graduate students for a minimum of 500 total contact hours in the last 10 years; and Document training, workshops or other experiences related to: leadership, cultural competancy, andragogy, mentoring, academic advising, management  Programs may have no more than two (2) co-directors. At least one must have a minimum of 0.5 FTE dedicated time to program administration and leadership. At least one other additional program leadership position must be filled to complement the role of the program director. There is a required minimum ratio	PD/Faculty Affairs Program Clinical Coordinator/UAHS Research Office/Curriculum Evaluation and Assessment
			Individuals in program leadership positions are expected to have academic appointments and privileges comparable to other faculty with similar academic responsibilities in the institution.  Program Leadership Program Directors must: Hold a master's degree in the discipline of genetic counseling; Have current certification in genetic counseling by the ABGC or the American Board of Medical Genetics and Genomics (ABMGG); Have been the course instructor/instructor of record for at least six credit hours of post-secondary education; Have at least five years of experience as a certified genetic counselor, a minimum of three of which must be in a patient-facing role (clinic or research); Be available for program administration year-round; Complete two hours per year of continuing training/coursework in curriculum design, assessment, evaluation, or educational andragogy; Have completed at least 10 hours of training/coursework in curriculum design, assessment, evaluation, or educational andragogy, within the last 10 years; Have provided fieldwork supervision for at least five genetic counseling graduate students for a minimum of 500 total contact hours in the last 10 years; and Document training, workshops or other experiences related to: leadership, cultural competancy, andragogy, mentoring, academic advising, management  Programs may have no more than two (2) co-directors. At least one must have a minimum of 0.5 FTE dedicated time to program administration and leadership. At least one other additional

Profession	Standard	Focus	Explanation	Oversight & Support
	A2.6	Faculty Affairs		
			Clinical supervisors must have current genetic counselor certification by ABGC, the Canadian Association of Genetic Counsellors (CAGC), or ABMG[G]; At least one year of experience as a clinical genetic counselor or in relevant fieldwork placement;	
	A1.1.4	Faculty Affairs	Resources are allocated to support continuing professional development of the program leadership, staff and principal faculty, including the development of leadership, clinical, teaching, scholarly, and administrative skills needed to carry out position responsibilities	PD/ Faculty Affairs
	B2.5	Faculty Affairs	Individuals on the instructional faculty/staff must be qualified through academic preparation and/or experience to teach assigned subjects, be knowledgeable in course content and the roles and responsibilities of genetic counselors, and be effective in teaching.  Submit ACGC biosketches of primary instructional faculty/course directors as part of the accreditation application or the self-study or for new instructors at the time of the annual report of current status.  The program is required to review its curriculum annually and subsequently update the corresponding syllabi. Personel and course evaluations occur each semester	PD/Faculty Affairs/Curriculum Evaluation and Assessment

Standard	Focus	Explanation	Oversight & Support
A3.2.2	Equity, Diversity and Inclusion	Admission of students must be made in accordance with clearly defined and published practices of the institution.	PD/Student Affairs/Community Engagement/DEI Office
		The ACGC supports increasing diversity in the genetic counseling profession. Programs are expected to develop strategies to promote applications from underrepresented populations and to summarize their efforts and progress in the accreditation application.	
		We receive approximately 150 applications each year for 5 positions in our program	
B5.1	Teaching and Outreach experience	Programs are required to include teaching opportunities in the community for their students.	
B5.2	Research	Programs must require that students perform research and other scholarly activities.  Programs can utilize a variety of ways to meet this requirement, including a formal thesis, other independent research project, or capstone project. Programs should encourage and facilitate dissemination of their students' research and scholarly endeavors.	Program Research Director/Curriculum Evaluation and Assessment/Community Engagment
C1	Outcome Measures and Assessment	Programs are required to establish and maintain an Advisory Board that is familiar with the genetic counseling profession, the clients served by genetic counselors, and the requirements for accreditation. The Advisory Board meets annually	Curriculum Evaluation and Assessment
	B5.1 B5.2	B5.1 Teaching and Outreach experience  B5.2 Research  Outcome Measures and Assessment	Admission of students must be made in accordance with clearly defined and published practices of the institution.  The ACGC supports increasing diversity in the genetic counseling profession. Programs are expected to develop strategies to promote applications from underrepresented populations and to summarize their efforts and progress in the accreditation application.  We receive approximately 150 applications each year for 5 positions in our program  B5.1 Teaching and Outreach experience  Programs are required to include teaching opportunities in the community for their students.  Programs must require that students perform research and other scholarly activities.  Programs can utilize a variety of ways to meet this requirement, including a formal thesis, other independent research project, or capstone project. Programs should encourage and facilitate dissemination of their students' research and scholarly endeavors.  Outcome Measures and Assessment  Programs are required to establish and maintain an Advisory Board that is familiar with the genetic counseling profession, the clients served by genetic counselors, and the requirements for

Profession	Standard	Focus	Explanation	Oversight & Support
	C2	Outcome Measures and Assessment	Outcome measures must be collected: First-time board pass rate of 80% over a three-year period; job placement of all graduates Programs are required to conduct surveys and/or interviews with their alumniand their employers at least once every four years Programs that fall beneath a first-time board pass rate of 80% over a three-year period must submit a plan for remediation at the time of submission of their Report of Current Status or self-study.	Curriculum Evaluation and Assessment
	C3.1	Student Affairs	There must be a formal mechanism by which the program leadership regularly communicates with each student about his/her overall progress, individual educational needs, and goals (minimum of twice per year). Program leadership must conduct a formal evaluation of each student's readiness for graduation at least three months prior to program completion.	PD/ Student Affairs
ACME Midwifery	II.A.	Faculty	A. All faculty will be recruited, appointed, and promoted according to the institution's non-discrimination policy in a process that actively fosters diversity and inclusiveness in the faculty.	Faculty Affairs
	II.D.	Faculty	D. Core faculty will have education credentials appropriate to the level at which they will teach and meet the academic institution's requirements for faculty.	Faculty Affairs
	II.F.	Faculty	F. Instruction, supervision, and evaluation of students in didactic courses containing ACNM Core Competencies for Basic Midwifery Practice will be the responsibility primarily of core faculty.  G. Core faculty will be responsible for development and/or implementation and evaluation of the curriculum.	Faculty Affairs  Curriculum Evaluation and  Assessment
	II.H.	Faculty	H. Core faculty will participate in selection, advisement, evaluation, and advancement of students.	Admissions

Profession	Standard	Focus	Explanation	Oversight & Support
			I. Core faculty will participate in recruitment, selection, and	
	11.1.	Faculty	promotion of faculty.	Faculty Affairs
			K. Core faculty will participate in development and/or	
			implementation of a mechanism for student evaluation of	Curriculum Evaluation and
	II.K.	Faculty	faculty, courses, and midwifery program effectiveness.	Assessment
			L. Core faculty will participate in ongoing development and	
			annual evaluation of the midwifery program's resources,	Curriculum Evaluation and
	II.L.	Faculty	facilities, and services.	Assessment/Faculty Affairs
			M. Core faculty will participate in or will have input into	
			councils and committees of the academic unit. Clinical	
	II.M.	Faculty	faculty will participate or have input as appropriate.	Faculty Affairs
			M. Students will have opportunities for involvement in	
			development and implementation of midwifery program	
	III.M.	Students	policies.	
			Q. The midwifery program will attend to students' well-being	
	III.Q.	Students	through the mitigation of fatigue related to clinical learning.	Student Affairs
			R. The midwifery program will have processes to support student	
	III.R.	Students	health and well-being.	Student Affairs
			J. The curriculum will be consistent with the ACNM Core	Curriculum Evaluation and
	IV.J.	Curriculum	Competencies for Basic Midwifery Practice.	Assessment
			L. The curricular content will be regularly updated to include	
			current evidence for midwifery practice and will be congruent	
			with ACNM Standards for the Practice of Midwifery; ACNM	
			Position Statement on Racism and Racial Bias; ACNM Code of	
			Ethics; ACNM Transgender/Transsexual/Gender Variant	Curriculum Evaluation and
	IV.L.	Curriculum	Healthcare, and other ACNM documents.	Assessment
			M. The midwifery program will provide content throughout the	
			curriculum about implicit bias and health disparities related to	
			race, gender, age, sexual orientation, disability, nationality, and	Curriculum Evaluation and
	IV.M.	Curriculum	religion.	Assessment/EDI team
			N. The midwifery program will have a plan for interprofessional	
			education (IPE) to prepare students for team-based collaborative	
	IV.N.	Curriculum	practice that includes outcomes of student learning.	Interprofessional Team

Profession	Standard	Focus	Explanation	Oversight & Support
			S. The midwifery program will maintain final responsibility for	Clinical Partnerships and
	IV.S.	Curriculum	assessing and approving clinical sites.	Community Engagement
	V.A.	Resources	A. The midwifery program will have an adequate number of qualified core faculty to meet the program objectives/outcomes.	Finance Administration
	V.B.	Resources	B. The midwifery program will have an adequate number of staff for administrative, technical, and student support to meet program objectives/outcomes.	Finance Administration
	V.F.	Resources	F. The midwifery program will secure clinical sites for students. These sites will provide access to clinical experiences to ensure that each student has the opportunity to attain competence in the midwifery practice areas of primary care, gynecologic, antepartum, intrapartum, postpartum, and newborn care.	Clinical Partnerships and Community Engagement/UAHS Research Administration
	VI.A.	Assessment & Outcomes	A. The midwifery program will have a comprehensive plan for ongoing assessment of the program philosophy, mission/purpose, and objectives/outcomes to achieve continuous quality improvement.	Curriculum Evaluation and Assessment/EDI team

### DEAN'S ADMINISTRATION EQUIPMENT LIST

Item	Quantity	Vendor/s	Cost per unit	Total cost
COMPUTER SETUPS				
Laptop / Dual Monitors / Docking Station	11	TBD	\$2,200	\$24,200

# CNM EQUIPMENT LIST

Item	Quantity	Vendor/s	Cost per unit	Total cost
COMPUTER SETUPS				
Laptop / Dual Monitors / Docking Station	6	TBD	\$2,200	\$13,200
CAPTIAL EQUIPMENT				
Surgical Instruments	1	TBD	\$1,000	\$1,000
SIM Equipment	1	TBD	\$80,000	\$80,000

# PA EQUIPMENT LIST

Item	Quantity	Vendor/s	Cost per unit	Total cost
COMPUTER SETUPS				
Laptop / Dual Monitors / Docking Station	12	TBD	\$2,200	\$26,400
PA LAB				
Atlas VI pack and practice tables for the flex lab	15	Cardon	\$2,500	\$37,500
Mobile cart for storing Atlas VI tables each cart stores 5 tables	3	cardon	\$850	\$2,550
Misc. Capital Equipment	1	TBD	\$355,000	\$355,000

# PT EQUIPMENT LIST

Item	Quantity	Vendor/s	Cost per unit	Total cost
COMPUTER SETUPS				
Laptop / Dual Monitors / Docking Station	12	TBD	\$2,200	\$26,400
PT/PA LAB				
Adjustable high low tables	26	Cardon Treatment table	\$2,900	\$75,400
Available now as battery from Cardon		(CTT) battery operated		
Rolling stools (black and adjustable)	50 and	AliMed all purpose stool	169.15	13,600
	30 for	black (price based on >3)		
	the flex	712681		
	lab			
Footstools	5	Alimed extra strong	69.75	348.75
		footstool 9-771		
Chairs with arms	4	Office chair with arms,	74.99	3,120.00
		such as staples 25087-CC		
Battery	30	Li-Ion Battery Installed on	550	16,500
		Table		
Mobile Charging Station with chargers	5	Mobile Charging cart with	1,420	7,100
		battery charger		
Wheelchairs standard	25	18 inch with removable	219.75	5475.00
		arms and swing away leg		
		rests alimed 710563		

Wheelchairs lightweight (para)	hairs lightweight (para)  4					
Front wheeled walkers	5	Two button release	TBD 170.25	851.25		
FIGHT WHICEICA WAIREIS	3	folding walker 4 count	1,0.23	031.23		
4 wheeled walker	2	Drive medical aluminum 4	227.75	455.50		
4 Wilecieu Walkei		wheeled rollator alimed	227.73	455.50		
		77016				
Hemi walker	10	Side walker, Alimed 70804	53.75	537.50		
Axillary Crutches	30 pairs	8 small 70099	320 for 8	1280.00		
Axillary Crutches	30 pairs	16 medium 70099	320 101 8	1280.00		
		8 tall 70099				
forearm crutches	12 pairs	Adult forearm medium,	76.76	921.12		
Torcarm crateries	12 pans	alimed 72777	70.70	321.12		
Single point canes	10	Alimed 7379	22.75	227.50		
ingle point canes arge base quad canes 10 mall base quad canes 10 liding boards 12		Alimed 7380	29.75	297.50		
		Alimed 7380	29.75	297.50		
	for Assistive devices Idea roon hang a one commode chairs  12 6 alii 8502 6 alii with 2 6 alii 8502 6	6 alimed maple 24 inch	60.50	363.00		
Shame boulds	12	•	82.80	496.80		
		6 alimed maple 30 inch	02.00	+50.00		
		with slots				
Storage options for Assistive devices		Ideally built into the	TBD			
storage options for Assistive devices		rooms but including wall	100			
		hangings and tub boxes				
Freestanding 3 in one commode chairs	2	AliMed Drive medical	60.75			
	_	adjustable height folding	55.75			
		steel commode 71845				
Drop arm commode	1	AliMed, Drop arm	196.00			
	_	commode 75564				
Hoyer lift		Med Mart Advance E 340	2199.00	2199.00		
•		patient lift, SKU # HOY-				
		ADVANCE-E/ITEM ID #				
		9443				
		Slings: includes 1 free sling				
50 pillows	(12 sets)	Eg amazon set of 4	42.74	512.88		
Pillow cases and sheets	•					
		Laundry service				
Towels, various sizes		Laundry service				
Neuro lab						
Large stationary mat tables, attached to the wall	3		895			
so access from 3 sides and able to be folded up						
onto the wall when not in use						
Eg clinton						
Staircase (ideally built in)		Ideally built into the record				
Staircase (ideally built in)		Ideally built into the room or the entryway but if				
		or the entryway but II	L			

	Appendix C (	JACI IS		
		need an item. Alimed	1259.82	1259.82
		Bailey straight training		
		stairs 71148		
Parallel bars	1	Hausmann parallel bars 12	2404.75	2404.75
raialiei bars	1	foot alimed 7283	2404.75	2404.73
Chairs with arms	4	Office chair with arms,	74.99	
Citalis with arms	4	<u> </u>	74.99	
-1		such as staples 25087-CC		
Floor mats	15	Alimed universal 6x8 foot	535.00	
		folding black 32345		
Bosu ball	4	TOGU dynair pro ball	193.67	774.68
		alimed 33101		
dynadiscs		Vestibular discs		
	2	35cm 51648	25.75	51.5
	2	60 cm 31826	57.75	115.5
High volume pump	1	Pump alimed 3448	54.00	54.00
Rocker boards		Wobble and rocker board	125.00	
		stand 3357		
		Advanced wobble board	91.75	
		3272	31.73	
		Intermediate board 3273	101.75	432.25
		Square board 3274	113.75	432.23
NA/a-d-a-a		<u>'</u>	113.73	
Wedges		Alimed large positioning		
		wedge black		.== 00
	2	91-269	239.50	479.00
	2	9 - 060	183.50	367.00
Rolls		Alimed skillbuilders rolls		
		and half rolls		
		24 x 4 30 – 1000	132.75	
		24x6 30 – 1001	180.75	
		36x10 30 – 1004	303.75	
		4 x 18 x 2 30 – 1230	81.75	
		6 x 24 x 4.5 30 - 1232	163.00	862.00
General equipment		0 X 24 X 4.5 50 1252	103.00	002.00
Anatomy models	2	Anatomy warehouse	846.00	1692.00
Skeletons	-	<b>SKU:</b> A-105172	0.000	1032.00
SKEICLONS		UPC:616316879416		
		Life size skeleton with		
		flexible spine and		
		ligaments		
Arm and leg musculature models	4	<b>SKU</b> :A-108674	1088.00	4352.00
Functional joint anatomy models	10 sets	SKU:	248.00	2480.00
-		A-108668		
Articulated foot	10	SKU:	39.00	390.00
A desired for		A-105671	33.00	330.00
Foot with muscles and ligaments	10	SKU:A-105857	185.00	1850.00
		UPC:646819823388		

	Аррепаіх С			
Flexible hand	10	SKU:A-106889 UPC:646819823357	45.00	450.00
Hand with muscles and ligaments	10	SKU:A-105856 UPC:646819823371	146.00	1460.00
Skeletons basic	6	SKU: A-104267 UPC: 616316878372	249.99	1499.94
Heart and lung model	5	SKU: A-105184 UPC: 616316879539	288.00	1440.00
Flexible spine	4	SKU: A-100177 UPC: 4053083003914	307.00	1228.00
Basic spine	6	SKU: A-104282 UPC: 616316878419	139.00	834.00
Pelvis	10	SKU: A-108310 UPC: 646819824439	64.00	640.00
Vertebrae	10 sets	SKU: A-108670	338.00	3380.00
Female pelvic floor	5	SKU:A-100189 UPC:4053083002702 MPN:H20/4	616.00	3080.00
Skull with brain	10	SKU: A-108311 UPC: 646819824354	215.00	2150.00
Human ear	5	SKU: A-104280 UPC: 616316878464	99.00	495.00
Pediatric equipment				
Peabody developmental motor scales 2 <sup>nd</sup> ed	d	Pearsonassessments.cor	n	

A	ppenaix C (		1	
	5	Complete kit	585.30	2926.50
	1	Record forms	93.60	93.60
	1	Profile summary forms	41.10	41.10
Bruininks oseretsky test of motor proficiency 2 <sup>nd</sup>	5 sets	Pearsonassessments.com		
ed		BOT-2 complete kit	1005.60	5028.00
Alberta infant motor scale		No items needed to		
		purchase		
Pediatric evaluation of disability inventory	5 packs	Pearsonassessments.com		
computer adaptive test	of 100	PEDI-CAT Q-global		
		administration report (per	1.80	9.00
		100 item cost 1.80 each)		
ed Alberta infant motor scale  Pediatric evaluation of disability inventory		No purchase needed.		
School function assessment	5 sets	Pearsonassessments.com		
		SFA complete kit 261.40		1307.00
- In				
General items	2 of	Alimod color as dad		
Weights cuff	2 of	Alimed color coded	10.75	
	each	1lb blue 3302	18.75 20.75	
		2lb white 3304		
		3lb gold 3306	22.75	
		4lb turquoise 3307	23.00	
		5lb black 3308	29.75	
		8lb red 3312	35.75	272.00
		10lb brown 3314	35.75	373.00
Weights dumbell		20 piece set 2 each 1 – 10	707.75	707.75
		lb		707.75
	4	Alimed 33217	702.75	
Storage rack for weights	1	Combo storage rack,	703.75	700 75
	2 !!	alimed 3349		703.75
Theraband	2 rolls	25 yard roll each:	67.50	799.50
	each	Yellow 52358	67.50	
		Red 52359	73.25	
		Green 52360	78.25	
		Blue 52361	88.25	
		Black 52362	95.50	
Airex balance pads	25	Alimed 31063	74.97	1874.25
Free standing mirrors	2	Plate glass mirrors alimed	633.75	1267.50
		7337		
Therapy balls	1 each	Theraband exercise balls		
		17 inch alimed 30-1700	28.75	
		21 inch 30 – 1701	35.00	
		25 inch 30 – 1702	45.25	
		29 inch 30 – 1709	52.50	
		33 inch 30 - 1703	57.00	2185.00
Peanut balls for peds	2	Amazon, gaiam peanut	19.98	39.96
	1	bounce chair		
	1.0			
Inclinometers	10	Baseline bubble	75.75	757.50
		inclinometer alimed 6139		

	Appendix C 0	ACID		
Tuning forks	10	Baseline hammer with tuning fork 5005 alimed	31.00	
Pen lights,	10	Alimed high intensity pen lights pack of 6 98PEN2-1	17.00	170.00
Hand held dynanometers	5	B and L engineering alimed 52470	298.82	1494.10
Volumeter sets	2 2	Hand 51970 Arm 51971	223.00 612.75	446.00 1225.50
Fitness testing equipment:  Not needed if we can access the gym or the athletic training room for 2 – 3 classes per year				
Treadmills	3	Bowflex treadmill 10	1999.00	5997.00
Stationary bicycles	2	Bowflex C6 bike	999.00	1998.00
Sci fit all body ergometer	1	Sci fit pro 2 all body ergometer (total rehab solutions)	5433.00	5433.00
Modalities: All TBD due to changes in accreditation				
? Traction table and traction unit	1	Traction unit alimed 31860 Traction table black 31858	4243.12 5602.08	4243.12 5602.08
TENS	10	Impulse 3000T Tens unit 32761	60.00	600.00
NMES units	10	EMS muscle stimulator 60493	146.25	1462.50
Combo modality	5	Dynatronics solaris combo machines (estim, us and light combos) 709 plus/D719T Price quote:	Quote for all 5 with accessories	48,640.00 quote from Orthoout Pete Rajala
Intermittent compression	3	Biocompression sequential circulator model 2004 Alimed 3411	1285.25	3855.75
	4 of each	Sleeves Arm 3412 Half leg 3415 Long leg 3417	233.60 233.60 233.60	2803.20
Ultrasound gel		1 Liter dispenser bottles, alimed 921376 pack 12	90.75	90.75
Electrode pads	1 case of each	Alimed 2 inch round 31759	114.00	114.00
Thermex Ice/heat works on alcohol and distilled water	2	2 inch square 31758  Machine Knee, ankle and elbow garment (4 each)	4850.00 379.99	9700.00 4548.00

	Appendix C	UACHS		
	2	Split cord to work 2 patients at once	393.00	786.00
		Coolant (10 bottles)	30.00	309.90
Diagnostic ultrasound			TBD up to 50,000	Est 50,000
Splinting				
Hot pan for faculty demo	1	Forma splint half thermal bath alimed 7890	1808.07	1808.07
	10	Splint pan netting alimed 5546	19.00	190.00
Hot pans for student use	10	Electric fry pan, Alimed 7070	115.00	1150.00
Hot gun	10	Economy heat gun alimed 72127	71.75	717.50
Scissors	5	Light duty spring open scissors, Alimed 8410	43.50	217.50
Velcro strapping	3	Alistrap soft, alimed 930382 Cost based on purchasing 3 or more rolls (per roll)	51.25	153.75
Thermoplastics	5	Alimed multiform max 4663	253.30	1266.50
	5	Multiform perforated 4665	266.81	1334.05
	5	Multiform plastic 4031	216.50	1082.50
	25	Multiform trial pack 4691	54.00	1350.00
Casting materials	5	Plaster of paris bandages Fast blue 3 x 3 box of 72 4890	218.47	218.47
		Stockinette alimed 4353 3 inch x 25 pack of 12 435712	425.75	425.75
Casting saw		Cast cutter, alimed 7158	1758.16	1758.16
Taping supplies				
Taping – KT tape Leuko tape, athletic tape	2 each	Leukotape 1 roll alimed 65943 Therapand kinesiology tape bulk rolls: Black Grey Beige	77.53 (each color same price)	620.24

1		
	1.1	
	l blue	

Prices are from catalogues and web sites, they do not include shipping, handling and applicable taxes and also do not include any bulk purchase discount that might be offered. Some items pending due to inability to locate item with a company or no prices given due to back order.

THE LIN	NIV/F	RSITV							
THE UN OF A	RIZC	DNA							
BUDGET PROJECT									
Name of Dranged Dragram or Unit. The University of Arizana	Callaga	of Hoolth Co	iona	os (IIACUS)					
Name of Proposed Program or Unit: The University of Arizona	College	от пеани эс	ience	Projected					
Budget Contact Person:		4 -+ 1/			2-17		Asla Valar		Etle Vees
budget contact i ci son.		<b>1st Year</b> 023 - 2024		<b>2nd Year</b> 2024 - 2025	<b>3rd Year</b> 2025 - 2026	2	<b>4th Year</b> 2026 - 2027		<b>5th Year</b> 027 - 2028
METRICS									
Net increase in annual college enrollment UG Net increase in college SCH UG									
Net increase in annual college enrollment Grad		93		135	242		313		372
Net increase in college SCH Grad		1,264		1,718	4,562		7,140		9,454
Number of enrollments being charged a Program Fee		1,204		40	124		182		240
New Sponsored Activity (MTDC)		10		40	124		102		240
Number of Faculty FTE		11.80		22.80	29.90		33.90		33.90
·		11.60		22.80	29.90		33.30		33.30
FUNDING SOURCES Continuing Sources									
Continuing Sources  UG AIB Revenue									
Grad AIB Revenue		743,626		1,415,137	3,035,021		/ 201 F/2		E 101 0FC
Program Fee Revenue (net of revenue sharing)		32,120					4,281,542		5,181,056
F and A AIB Revenues		32,120		466,220	1,238,170		1,785,120		2,232,070
Reallocation from existing College funds (attach description)									
Other Items (attach description)									
Total Continuing	\$	775 746	۲.	1 001 257	¢ 4 272 101	Ś	6.066.663	۲.	7 412 126
Total Continuing	Ş	775,746	\$	1,881,357	\$ 4,273,191	Þ	6,066,662	\$	7,413,126
One-time Sources									
College fund balances		2,755,090		4,696,219	3,702,260		2,555,948		1,270,958
Institutional Strategic Investment		500,000							
Gift Funding					200,000		200,000		200,000
Other Items (attach description)									
Total One-time	\$	3,255,090	\$	4,696,219	\$ 3,902,260	\$	2,755,948	\$	1,470,958
TOTAL SOURCES	\$	4,030,836	\$	6,577,576	\$ 8,175,451	\$	8,822,610	\$	8,884,084
EXPENDITURE ITEMS									
Continuing Expenditures									
Faculty		1,658,642		3,182,813	4,099,250		4,586,297		4,678,023
Other Personnel		623,912		1,250,117	1,275,119		1,300,622		1,326,634
Employee Related Expense		742,255		1,428,508	1,713,313		1,864,398		1,901,686
Graduate Assistantships		135,150		137,853	140,610		143,422		146,291
Other Graduate Aid		123,480		123,480	123,480		123,480		123,480
Operations (materials, supplies, phones, etc.)		208,475		454,805	823,679		804,391		707,970
Additional Space Cost				-	-		-		-
Other Items (attach description)		_		_	_		_		_
Total Continuing	\$	3,491,914	\$	6,577,576	\$ 8,175,451	\$	8,822,610	\$	8,884,084
One-time Expenditures									
Construction or Renovation									
Start-up Equipment		538,922		_	_				=
Replace Equipment		JJ0,322		-	_				-
Library Resources									
Other Items (attach description)									
Total One-time	\$	538,922	\$		\$ -	\$		\$	
					-				
TOTAL EXPENDITURES	\$	4,030,836	\$	6,577,576	\$ 8,175,451	\$	8,822,610	\$	8,884,084
Net Projected Fiscal Effect	\$	0	\$	(0)	\$ n	\$	(0)	\$	(0)

THE LIN					
IHE UI	NIVERSITY RIZONA				
BUDGET PROJECT	ION FORM				
Name of Proposed Program or Unit:		Projected			
Budget Contact Person:		Projected			
Budget Contact Person:	<b>1st Year</b> 2023 - 2024	<b>2nd Year</b> 2024 - 2025	<b>3rd Year</b> 2025 - 2026	<b>4</b> th Year 2026 - 2027	<b>5th Year</b> 2027 - 2028
METRICS					
Net increase in annual college enrollment UG					
Net increase in college SCH UG					
Net increase in annual college enrollment Grad					
Net increase in college SCH Grad					
Number of enrollments being charged a Program Fee					
New Sponsored Activity (MTDC)					
Number of Faculty FTE		4.00	4.00	4.00	4.00
FUNDING SOURCES					
Continuing Sources  UG AIB Revenue					
Grad AIB Revenue					
Program Fee Revenue (net of revenue sharing)					
F and A AIB Revenues					
Reallocation from existing College funds (attach description)					
Other Items (attach description)		^	*		
Total Continuing	\$ -	\$ -	\$ -	\$ -	\$ -
One-time Sources					
College fund balances					
Institutional Strategic Investment					
Gift Funding					
Other Items (attach description)					
Total One-time	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL SOURCES	_	4	A .		\$ -
	\$ -	\$ -	\$ -	\$ -	\$ - 
EXPENDITURE ITEMS					
Continuing Expenditures					
Faculty	-	704,000	718,080	732,442	747,090
Other Personnel	-	472,000	481,440	491,069	500,890
Employee Related Expense	-	375,144	382,647	390,300	398,106
Graduate Assistantships					
Other Graduate Aid					
Operations (materials, supplies, phones, etc.)	-	30,000	30,000	30,000	30,000
Additional Space Cost					
Other Items (attach description)					
Total Continuing	\$ -	\$ 1,581,144	\$ 1,612,167	\$ 1,643,811	\$ 1,676,086
One-time Expenditures					
Construction or Renovation					
Start-up Equipment					
Replace Equipment					
Library Resources					
Other Items (attach description)					
Total One-time	\$ -	\$ -	\$ -	\$ -	\$ -
		7	*	т	T

\$

TOTAL EXPENDITURES

Net Projected Fiscal Effect

\$

- \$

1,581,144 \$

(1,581,144) \$

1,612,167 \$ 1,643,811 \$ 1,676,086

(1,612,167) \$ (1,643,811) \$ (1,676,086)

THE UN	 JIVEF	RSITY							
THE UN OF AR	(IZO	NA							
BUDGET PROJECTI	ON FOR	.M				+			
Name of Proposed Program or Unit: Clinical & Translational Scie		ad Drogam							
Name of Proposed Program of Offic. Chilical & Translational Scie	inces or	au Progam		Projected		+			
Budget Contact Person:		st Year 3 - 2024	2	2nd Year 024 - 2025	<b>3rd Year</b> 2025 - 2026		<b>4th Year</b> 026 - 2027		ith Year 27 - 2028
METRICS	+			+		+			
Net increase in annual college enrollment UG	+					+			
Net increase in college SCH UG	+					+			
Net increase in annual college enrollment Grad	+	73		75	7	8	81		82
Net increase in college SCH Grad	+	876		900	93		972		984
Number of enrollments being charged a Program Fee	+	-		-		-	_		-
New Sponsored Activity (MTDC)	+					+			
Number of Faculty FTE	<u> </u>	0.40		0.40	0.4	0	0.40		0.40
FUNDING SOURCES						$\mp$			
Continuing Sources	+					+			
UG AIB Revenue	+					+			
Grad AIB Revenue	+	490,000		505,000	525,00	0	545,000		552,492
Program Fee Revenue (net of revenue sharing)	+			- /	,	-			,
F and A AIB Revenues									
Reallocation from existing College funds (attach description)									
Other Items (attach description)	+					+			
Total Continuing	\$	490,000	\$	505,000	\$ 525,00	0 \$	545,000	\$	552,492
One-time Sources	+					+-			
College fund balances	+	+		+		_			
Institutional Strategic Investment	+					+-			
Gift Funding	+					+-			
Other Items (attach description)	+					+-			
Total One-time	\$	_	\$	_	\$	- \$	_	\$	-
		122 200		505,000			545,000		552.402
TOTAL SOURCES	\$	490,000	\$	505,000	\$ 525,00	0 \$	545,000	\$	552,492
EXPENDITURE ITEMS									
Continuing Expenditures									
Faculty		77,704		79,258	80,843	3	82,460		84,109
Other Personnel		152,030		155,071	158,172	_	161,336		164,562
Employee Related Expense		90,855		92,672	94,525	5	96,416		98,344
Graduate Assistantships		135,150	<u> </u>	137,853	140,610		143,422		146,291
Other Graduate Aid		123,480		123,480	123,480		123,480	·	123,480
Operations (materials, supplies, phones, etc.)		10,475	<u> </u>	10,475	10,475	5	10,475	·	10,475
Additional Space Cost			<u> </u>			$\perp$			
Oth 1t / - tt			l			<del> </del>			
Other Items (attach description)	-	$\longrightarrow$					647 500		627,261
Total Continuing	\$	589,694	\$	598,809	\$ 608,10	5 \$	617,589	\$	027,201
	\$	589,694	\$	598,809	\$ 608,10	5 \$	617,589	<u> </u>	
Total Continuing	\$	589,694	\$	598,809	\$ 608,10	5 \$	617,589	<u> </u>	
Total Continuing  One-time Expenditures	\$	589,694	\$	598,809	\$ 608,10	5 \$	617,589	<u> </u>	027,201
Total Continuing  One-time Expenditures  Construction or Renovation	\$	589,694	\$	598,809	\$ 608,10	5 \$	617,589	- -	027,201
Total Continuing  One-time Expenditures  Construction or Renovation  Start-up Equipment	\$	589,694	\$	598,809	\$ 608,10	5 \$	617,589		027,201
Total Continuing  One-time Expenditures  Construction or Renovation  Start-up Equipment  Replace Equipment	\$	589,694	\$	598,809	\$ 608,10	5 \$	617,589	<u> </u>	027,201
Total Continuing  One-time Expenditures  Construction or Renovation  Start-up Equipment  Replace Equipment  Library Resources	\$	589,694	\$	598,809		- \$	617,589	\$	-
Total Continuing  One-time Expenditures  Construction or Renovation  Start-up Equipment  Replace Equipment  Library Resources  Other Items (attach description)			\$	-	\$	- \$		\$	- 627,261

(99,694) \$

(93,809) \$

(83,105) \$

(72,589) \$

(74,769)

Net Projected Fiscal Effect

THE UI	NIVE	RSITY								
BUDGET PROJEC	TION FO	RM								
Name of Proposed Program or Unit: Genetic Couseling Grad P	rogam			Drainatad						
G Budget Contact Person:		Lst Year 123 - 2024		Projected  2nd Year 2024 - 2025		<b>3rd Year</b> 025 - 2026		4th Year 126 - 2027	_	5th Year 27 - 2028
METRICS	20	723 - 2024		2024 - 2023		023 - 2020	20	120 - 2027	20	27 - 2028
Net increase in annual college enrollment UG Net increase in college SCH UG										
Net increase in annual college enrollment Grad		10		10		10		10		1
Net increase in college SCH Grad		220		308		352		396		44
Number of enrollments being charged a Program Fee		10		10		10		10		1
New Sponsored Activity (MTDC) Number of Faculty FTE		2		2		2		2		
				2						
FUNDING SOURCES										
Continuing Sources  UG AIB Revenue										
Grad AIB Revenue		120,829		155,067		172,185		189,304		206,423
Program Fee Revenue (net of revenue sharing)		32,120		41,220		45,770		50,320		54,870
F and A AIB Revenues		32,123		.1,220		10,7,7		33,323		0 .,07
Reallocation from existing College funds (attach description)										
Other Items (attach description)										
Total Continuing	\$	152,949	\$	196,287	\$	217,955	\$	239,624	\$	261,293
One-time Sources										
College fund balances										
Institutional Strategic Investment										
Gift Funding										
Other Items (attach description)										
Total One-time	\$	-	\$	-	\$	-	\$	-	\$	-
TOTAL SOURCES	\$	152,949	\$	196,287	\$	217,955	\$	239,624	\$	261,293
EXPENDITURE ITEMS										
Continuing Expenditures										
Faculty		211,438		215,666		219,980		224,379		228,867
Other Personnel		153,390		156,458		159,587		162,779		166,034
Employee Related Expense		112,932		115,190		117,494		119,844		122,241
Graduate Assistantships										
Other Graduate Aid		56.050		56.050		56.050		56.050		F.C. F.O.F.
Operations (materials, supplies, phones, etc.)		56,050		56,050		56,050		56,050		56,505
Additional Space Cost Other Items (attach description)										
Other items (attach description)  Total Continuing	\$	533,810	\$	543,364	Ś	553,111	\$	563,052	\$	573,647
	7	555,610	7	343,304	۲	333,111	7	303,032	7	373,047
One-time Expenditures										
Construction or Renovation Start-up Equipment										
Start-up Equipment Replace Equipment										
Library Resources										
Other Items (attach description)										
Total One-time	\$	-	\$	-	\$	-	\$	-	\$	-
TOTAL EXPENDITURES	\$	533,810		543,364		553,111		563,052		573,647
								· · · · · · · · · · · · · · · · · · ·		
Net Projected Fiscal Effect	\$	(380,861)	\$	(347,077)	\$	(335,156)	\$	(323,428)	\$	(312,354

546,613 179,597 231,661 100,500
546,613 179,597 231,661 100,500
546,613 179,597 231,661
546,613 179,597 231,661
546,613 179,597 231,661
546,613 179,597
546,613 179,597
546,613 179,593
546,613
. 829,98.
829,98
829,988
-
J2J,30.
829,98
829,98
920.00
4.60
,
1,20
5
7 - 2028
n Year
7



OF AF	RIZONA	4								
BUDGET PROJECT	TION FORM									
Name of Proposed Program or Unit: Physician Assistant Progran	n									
				Projected						
Budget Contact Person:	1st Y 2023 -			<b>2nd Year</b> 024 - 2025	2	<b>3rd Year</b> .025 - 2026	2	<b>4</b> th Year 026 - 2027	2	<b>5th Year</b> .027 - 2028
METRICS										
Net increase in annual college enrollment UG										
Net increase in college SCH UG										
Net increase in annual college enrollment Grad		-		30		64		72		80
Net increase in college SCH Grad		-		1,350		2,880		3,240		3,600
Number of enrollments being charged a Program Fee		-		30		64		72		80
New Sponsored Activity (MTDC)										
Number of Faculty FTE		3.20		6.20		10.00		10.00		10.00
FUNDING SOURCES										
Continuing Sources										
UG AIB Revenue										
Grad AIB Revenue		-		400,945		909,268		1,204,978		1,323,742
Program Fee Revenue (net of revenue sharing)		-		425,000		900,000		1,150,000		1,300,000
F and A AIB Revenues										
Reallocation from existing College funds (attach description)										
Other Items (attach description)										
Total Continuing	\$	-	\$	825,945	\$	1,809,268	\$	2,354,978	\$	2,623,742
One-time Sources										
College fund balances										
Institutional Strategic Investment	Į	500,000								
Gift Funding		,				200,000.00		200,000.00		200,000.00
Other Items (attach description)						,				· · · · · · · · · · · · · · · · · · ·
Total One-time	\$ 5	00,000	\$	-	\$	200,000	\$	200,000	\$	200,000
TOTAL SOURCES		500,000	\$	825,945	\$	2,009,268		2,554,978	\$	2,823,742
TOTAL SOCIACES	7 3	,00,000	}	023,343	Y	2,003,200	7	2,334,370		2,023,742
EXPENDITURE ITEMS										
Continuing Expenditures										
Faculty	5	74,600		979,092		1,532,874		1,563,531		1,594,802
Other Personnel	1	124,680		200,800		204,816		208,912		213,091
Employee Related Expense	2	223,070		376,386		554,323		565,410		576,718
Graduate Assistantships										
Other Graduate Aid										
Operations (materials, supplies, phones, etc.)		58,000		256,880		540,004		472,016		369,640
Additional Space Cost										
Other Items (attach description)										
Total Continuing	\$ 9	80,350	\$	1,813,158	\$	2,832,017	\$	2,809,869	\$	2,754,251
One-time Expenditures										
Construction or Renovation										
Start-up Equipment										
Replace Equipment										
Library Resources										
Other Items (attach description)										
Total One-time	\$	-	\$	-	\$	-	\$	-	\$	-
TOTAL EXPENDITURES		28U 3EU		1 912 150				2,809,869		2 754 251
		80,350	\$	1,813,158		2,832,017			\$	2,754,251
Net Projected Fiscal Effect	\$ (4	80,350)	\$	(987,213)	\$	(822,749)	\$	(254,891)	\$	69,491

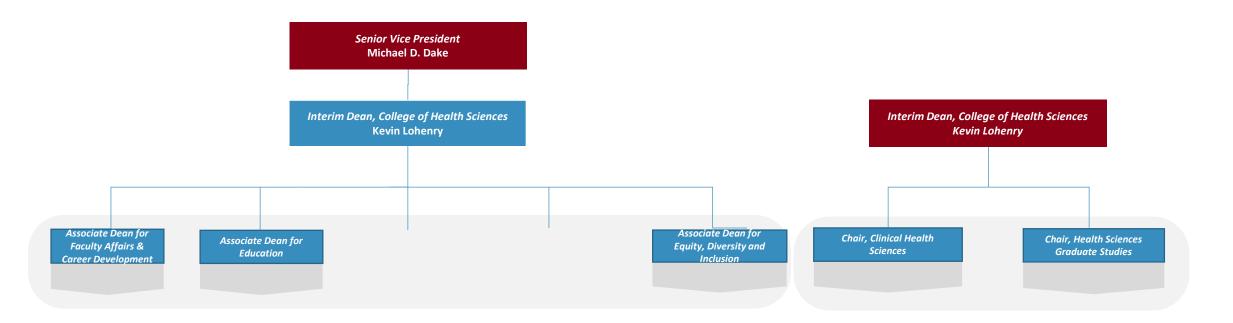


of AR										
BUDGET PROJECTIO	ON FC	DRM								
No. of December 1 Dece										
Name of Proposed Program or Unit: Physical Therapy Program				Projected						
Budget Contact Person:		1st Vaar				3rd Year		4th Year		5th Year
		<b>1st Year</b> 023 - 2024		<b>2nd Year</b> 024 - 2025	Ź	2025 - 2026	2	2026 - 2027		) 127 - 2028
METRICS										
Net increase in annual college enrollment UG										
Net increase in college SCH UG										
Net increase in annual college enrollment Grad		-		-		50		100		150
Net increase in college SCH Grad		-		-		2,250		4,500		6,750
Number of enrollments being charged a Program Fee		-		-		50		100		150
New Sponsored Activity (MTDC)		-								
Number of Faculty FTE		4.00		6.00		9.30		13.30		13.30
FUNDING SOURCES										
Continuing Sources										
UG AIB Revenue										
Grad AIB Revenue		-		-		746,139.00		1,512,278.00	2,	,268,417.00
Program Fee Revenue (net of revenue sharing)		-		-		292,400.00		584,800.00		877,200.00
F and A AIB Revenues										
Reallocation from existing College funds (attach description)										
Other Items (attach description)										
Total Continuing	\$	-	\$	-	\$	1,038,539	\$	2,097,078	\$	3,145,617
One-time Sources										
College fund balances										
Institutional Strategic Investment										
Gift Funding										
Other Items (attach description)										
Total One-time	\$	-	\$	-	\$	-	\$	-	\$	-
TOTAL SOURCES	\$	-	\$	-	\$	1,038,539	\$	2,097,078	\$	3,145,617
EXPENDITURE ITEMS										
Continuing Expenditures										
Faculty		476,188		689,711		1,022,085		1,447,590		1,476,542
Other Personnel		64,657		96,550		98,481		100,451		102,460
Employee Related Expense		172,529		250,817		341,659		465,309		474,616
Graduate Assistantships										
Other Graduate Aid										
Operations (materials, supplies, phones, etc.)		52,450		48,400		105,150		140,350		140,850
Additional Space Cost										
Other Items (attach description)										
Total Continuing	\$	765,824	\$	1,085,478	\$	1,567,375	\$	2,153,700	\$	2,194,468
One-time Expenditures										
Construction or Renovation										
Start-up Equipment		463,922								
Replace Equipment										
Library Resources										
Other Items (attach description)										
Total One-time	\$	463,922	\$	-	\$	-	\$	-	\$	-
TOTAL EXPENDITURES	\$	1,229,746	\$	1,085,478	\$	1,567,375	\$	2,153,700	\$	2,194,468
Net Projected Fiscal Effect	\$	(1,229,746)	Ś	(1,085,478)	Ś	(528,836)	Ś	(56,622)	\$	951,149



College of Health Sciences

# **DRAFT**



Name	Title				
Robert Robbins	President of the University				
Michael Dake	Senior Vice President, Health Sciences				
Liesl Folks	Senior Vice President for Academic Affairs and Provost				
Lisa Elfring	Associate Vice Provost, Office of Instruction/Assessment				
Melody Buckner	Associate Vice Provost, Digital Learning and Online Initiatives				
Francisco Moreno	Associate Vice President, Diversity and Inclusion				
Iman Hakim	Dean, Public Health				
Kathleen Insel	Interim Dean, College of Nursing				
Michael Abecassis	Dean, College of Medicine				
Rick Schnellmann	Dean, Pharmacy				
Christine Childers	Director, Physical Therapy Program				
Dee Quinn	Director, Genetic Counseling Services				
Erin McMahon	Director, Nurse Midwife Program				
Julie Ledford	Co-Director, Clinical Translational Sciences Graduate Program				
Ronald Hammer	Co-Director, Clinical Translational Sciences - Phoenix				
Mike Renning	Director, Graduate Affairs - Clinical Translational Sciences				
Daniel Derksen	Director, Center for Rural Health				



1200 E. University Blvd. Rm. 200 P.O. Box 210021 Tucson, AZ 85721-0021

Ofc: 520-621-5511 Fax: 520-621-9323

president.arizona.edu

March 9, 2023

Kevin Lohenry, Ph.D., PA-C
Assistant Vice President for Interprofessional Education
University of Arizona Health Sciences
1670 E. Drachman Street
Tucson, AZ 85721

Re: University of Arizona College of Health Sciences

Dear Dr. Lohenry:

As President of the University of Arizona, I am writing to voice my support for the proposed College of Health Sciences. As a physician, I believe we must do everything possible to train culturally competent health care professionals and remove the health disparities that exist within Arizona communities. The College of Health Sciences is strongly aligned with the University's strategic plan through its commitment to enhancing the critical health workforce and health research training needs of the state of Arizona.

The College of Health Sciences will strengthen the University's commitment to health equity and support of diverse communities by recruiting, educating and graduating students from underrepresented backgrounds, advancing tribal engagement, increasing community engagement through experiential learning, and providing interprofessional service-learning experiences. By creating a culture of health and wellness coupled with student success, the College will play a strong role in training students to serve the needs of Arizona's diverse and rural communities.

The College will comprise both research and health professions-oriented departments and programs that provide a unique diversity of perspectives to foster success. The five initial programs — Clinical Translational Sciences, Genetic Counseling, Midwifery, Physician Assistant and Doctor of Physical Therapy — will produce skilled graduates capable of addressing our society's largest health-related challenges, including systemic racism and implicit bias as related to health care, addiction and behavioral health in response to the opioid epidemic, and access to specialized care including personalized medicine solutions such as genetic counseling.

Kevin Lohenry March 9, 2023 Page 2

The strategic development of the College of Health Sciences will enhance the University of Arizona's reputation as a leading academic medical center in the Southwest. It will achieve this goal by educating health care professionals who will expand access to high-quality precision health care for Arizona's residents and enhance the knowledge base for evidence-based medical care through significant translational research and culturally relevant, person-centered care.

Sincerely,

Robert C. Robbins, M.D.

Robert C. Kolans

President



Office of the Senior Vice President for Health Sciences Phoenix Campus 435 North 5<sup>th</sup> Street Executive Suite Phoenix, AZ 85004-2230 Tucson Campus 1670 E. Drachman PO Box 210216 Tucson, AZ 85721-0216 Tel: (520) 626-1197 Fax: (520) 626-1460

March 8, 2023

Kevin Lohenry, PhD, PA-C
Assistant Vice-President for Interprofessional Education
Clinical Professor of Medicine
University of Arizona Health Sciences
1670 E Drachman Street
Tucson AZ 85721

Re: University of Arizona College of Health Sciences

Dear Dr. Lohenry:

I am writing to express my support of the proposed College of Health Sciences, which is strategically aligned with the University of Arizona Health Sciences' mission to improve health and human potential by educating the next generation of health care professionals.

Access to health care services can help prevent chronic conditions, fend off diseases and allow people to live longer with a better quality of life. But approximately 3.2 million Arizonans — nearly 40% of the state's population — live in an area with a current health care shortage. Recent research shows that 1 in 5 Maricopa County residents are worried about accessing health care, and the concern is even more dire for people in rural areas. The College of Health Sciences will play a vital role in alleviating health disparities in Arizona by expanding the workforce in key areas.

Through the proposed departments of Clinical Health Professions and Health Sciences Graduate Studies, we will train students in interprofessional health care areas including Clinical Translational Sciences, Genetic Counseling, Midwifery, Physician Assistant and Physical Therapy. Each of these programs will contribute to creating an expanded pipeline of skilled professionals to provide greater access to care for patients in Arizona's diverse rural and urban communities.

The College of Health Sciences will be uniquely positioned to support health professional and translational science programs with their accreditation and academic needs while serving Arizona's residents by meeting the ongoing and projected health workforce needs in the state. I look forward to future discussions as the college develops with the full support of UArizona Health Sciences.

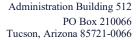
Sincerely,

Michael D. Dake, MD

Senior Vice President for Health Sciences

Michael D. Moles

University of Arizona





Of: 520-621-1856 Fax: 520-621-9118

3/10/2023

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical Professor of Medicine University of Arizona Health Sciences 1670 E Drachman Street Tucson AZ 85721

Re: University of Arizona College of Health Sciences

Dear Dr. Lohenry:

As Provost at the University of Arizona, I am pleased to offer my support for the proposed College of Health Sciences, to include the Department of Clinical Health Professions and the Department of Health Sciences Graduate Studies. The development of this new college aligns with our mission to continuously improve how we educate and innovate so we can lead the way in developing disruptive problem-solvers capable of tackling our greatest challenges. When it comes to health care, those challenges include significant workforce shortages that have contributed to health inequities, especially in Arizona's rural and diverse communities.

The College of Health Sciences will create a pipeline of new health care professionals trained to respond to current and future challenges and opportunities while raising the quality of educational programs available to our students. The College's five initial programs – Clinical Translational Sciences, Genetic Counseling, Midwifery, Physician Assistant and Doctor of Physical Therapy – will focus on graduate-level health and research degree programs and clinical experiential training to produce highly competent health care providers. The addition of this new college alongside the other five existing colleges in the University of Arizona Health Sciences will provide significant synergy related to interprofessional education, team-based health care, and clinical translational research.

The five programs each have unique accreditation requirements that can be best met through the interprofessional focus of the College of Health Sciences. The college's strategic development and vision will ensure success in academic appointments, curriculum support, student support services, support for recruitment and retention of underrepresented minority students and faculty, and clinical training sites that meet the needs of each professional program. Additionally, the College of Health Sciences will serve as a conduit to provide critical university resources to support students, faculty and staff in the delivery of high-quality academic programs focused on vital health care professions and cutting-edge translational sciences. I look forward to working with you in the future as the college is developed.

Sincerely,

Liesl Folks, Ph.D., M.B.A., FNAI

Senior Vice President for Academic Affairs and Provost

University of Arizona



February 22, 2023

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical Professor of Medicine University of Arizona Health Sciences 1670 E Drachman Street Tucson, AZ 85721

Re: College of Health Sciences

Dear Dr. Lohenry:

On behalf of the University Center for Assessment, Teaching, and Technology, we want to express our support for the newly developing College of Health Sciences and its affiliated departments including the Department of Clinical Health Sciences and the Department of Health Sciences Graduate Studies. The development of a college with a primary focus on graduate health professional education and research is an exciting proposition for the university. In addition, the commitment from your leadership to build a college with a strong emphasis on inclusive teaching and evidence-based teaching practices and best practice faculty development aligns with our passion to serve the University of Arizona community.

Our center is focused on supporting instructors as they think creatively about teaching and learning. We would welcome the opportunity to collaborate with the leadership of the new college and departments on building faculty development programs that support the delivery of high-quality programs and courses for the graduate students in the college. Our experts can support your colleagues in building competencies for new faculty while establishing a model of excellence for future programs that the college and departments may develop. We are also enthusiastic about developing a faculty learning community within the college that may benefit from continued development and train the trainer programs in alignment with the college's stated goals.

Finally, we believe that building pathways from the many undergraduate programs that focus on health professions and research to graduate programs within the new college and departments will benefit the institution in many ways. We look forward to our future collaboration as you and your colleagues begin to develop their structures.

Sincerely,

lisa K. Ey

Lisa K. Elfring, Ph.D.

Melody J. Buckner

Associate Vice Provost, Instruction and Assessment

Melody J. Buckner, Ph.D.

Associate Vice Provost, Digital Learning

Integrated Learning Center, Room 103 1500 E. University Blvd. | Tucson, AZ 85721 520-621-7788 ucatt.arizona.edu



# OFFICE OF THE ASSOCIATE VICE PRESIDENT FOR EQUITY, DIVERSITY, AND INCLUSION

1501 N. Campbell P.O. Box 245140 Tucson, AZ 85724

Ofc: (520) 621-0235 Fax: (520) 626-2895

http://diversity.uahs.arizona.edu

March 7, 2023

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical Professor of Medicine University of Arizona Health Sciences 1670 E Drachman Street Tucson AZ 85721

Re: University of Arizona College of Health Sciences

Dear Dr. Lohenry:

On behalf of the University of Arizona Health Sciences Office of Equity, Diversity, and Inclusion, I am happy to support the newly developing College of Health Sciences and its affiliated Department of Clinical Health Professions and the Department of Health Sciences Graduate Studies. The development of a college and these departments with a primary focus on graduate health professional education and research is an exciting proposition for the university. In addition, the commitment from your leadership to build a college with a strong emphasis on equity, diversity, and inclusion is in direct alignment with our focus. We look forward to supporting the college and all of its departments and programs as you focus on using best practices in inclusive excellence for recruitment and retention of faculty, staff, and students. We support your goals related to developing a college focused on wellness for all and for your focus on building a health care workforce that reflects the diversity of our communities within Arizona. We look forward to our future collaboration as the college begins to develop.

Sincerely,

Francisco Moreno, MD

Professor, of Psychiatry with Tenure, College of Medicine-Tucson Associate Vice President for Equity, Diversity, and Inclusion University of Arizona Health Sciences

#### OFFICE OF THE DEAN



Roy P. Drachman Hall 1295 N. Martin Ave., Bldg.202A P.O. Box 245163 Tucson, AZ 85724-5163 Tel: (520) 626-7083

Fax: (520) 626-8685 www.publichealth.arizona.edu

March 7, 2023

Kevin Lohenry, PhD, PA-C
Assistant Vice-President for Interprofessional Education
Clinical Professor of Medicine
University of Arizona Health Sciences
1670 E Drachman Street
Tucson, AZ 85721

Re: College of Health Sciences

Dear Dr. Lohenry:

On behalf of the Mel & Enid Zuckerman College of Public Health, I want to express our support for the newly developing College of Health Sciences and its affiliated Department of Clinical Health Professions and the Department of Health Sciences Graduate Studies.

The development of a college with a primary focus on graduate health professional education and research is an exciting proposition for the university. In addition, the commitment from your leadership to build a college with a strong emphasis on diversity, equity, inclusion, community health and service, research, and health professions aligns with our college. Throughout the course of our 23-year history, we have focused on building a college of public health that meets the needs of communities throughout Arizona while preparing students for education, research, and community involvement. The alignment between our college and this new college and departments is obvious and the commitment to serving our Arizona rural, Hispanic, and Indigenous communities will provide opportunities for collaboration with our students, faculty, and alumni throughout the state. We look forward to our future collaboration as the college begins to develop.

Sincerely,

#### Iman Hakim

Iman A. Hakim, Dean Mel and Enid Zuckerman Endowed Chair in Public Health



PO Box 210203 Tucson, AZ 85721-0203 Tel: (520) 626-6152 Fax: (520) 626-2669 www.nursing.arizona.edu

February 22, 2023

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical Professor of Medicine University of Arizona Health Sciences 1670 E Drachman Street Tucson, AZ 85721

Re: College of Health Sciences

Dear Dr. Lohenry:

On behalf of the University of Arizona College of Nursing, I want to express our support for the newly developing College of Health Sciences and its affiliated Department of Clinical Health Professions and the Department of Health Sciences Graduate Studies. The development of a college and these departments with a primary focus on graduate health professional education and research is an exciting proposition for the university. In addition, the commitment from your leadership to build a college with a strong emphasis on interprofessional education and health professions aligns with our college. The College of Nursing has been developing the nursing workforce in Arizona since 1957 and we are proud of the generations of providers who have graduated from our institution. In addition, our innovative focus building the next generation nursing workforce and our focus on transforming the knowledge base of healthcare has led to a wide variety of collaborative efforts within the institution that have resulted in interprofessional endeavors between the other UArizona Health Sciences Colleges. Our PhD program, one of the first in the U.S., has further contributed to a workforce of nurse scientists and faculty around the country. The alignment between our college and this new endeavor around preparing the next generation of clinicians and scientists is obvious and the commitment for serving our Arizona rural and indigenous communities will provide opportunities for collaboration with our students, faculty, and alumni throughout the state. We look forward to our future discussions as the college begins to develop.

Sincerely,

Kathleen C. Insel, PhD, RNInterim Dean, College of Nursing

Khun Carl



1501 N. Campbell Ave. P.O. Box 245017 Tucson, AZ 85724 Ofc: 520-626-4555 Fax: 520-626-6252 medicine.arizona.edu

March 7, 2023

Kevin Lohenry, PhD, PA-C
Assistant Vice-President for Interprofessional Education
Clinical Professor of Medicine
University of Arizona Health Sciences
1670 E Drachman Street
Tucson, AZ 85721

Re: College of Health Sciences

Dear Dr. Lohenry:

On behalf of the College of Medicine - Tucson, I want to express our support for the newly developing College of Health Sciences and its affiliated Department of Clinical Health Professions and the Department of Health Sciences Graduate Studies. The development of a college and these departments with a primary focus on graduate health professional education and research is an exciting proposition for the university. In addition, the commitment from your leadership to build a college with a strong emphasis on interprofessional education and health professions aligns with our college. In addition, we support the transition of the Physician Assistant, Physical Therapy, and Genetic Counseling programs from our college to this new College of Health Sciences upon approval from the Arizona Board of Regents and the various institutional committees. The College of Medicine – Tucson has been developing the physician workforce in Arizona since 1967 and we are proud of the generations of providers who have graduated from our institution. In addition, our focus on being a leader in scientific discovery and innovation has led to a wide variety of collaborative efforts within the institution that have resulted in interprofessional endeavors between the other UArizona Health Sciences Colleges. The alignment between our college and this new endeavor around preparing the next generation of clinicians and scientists is obvious and the commitment for serving our Arizona rural and indigenous communities will provide opportunities for collaboration with our students, faculty, and alumni throughout the state. We look forward to our future discussions as the college begins to develop.

Sincerely,

Michael M.I. Abecassis, MD, MBA Dean, College of Medicine - Tucson Professor, Immunobioloby Professor, Surgery

University of Arizona



Phoenix Campus 650 E. Van Buren St. Phoenix, AZ 85004-2222 Tel: (602) 827-2426 Fax: (602) 827-2490 Tucson Campus 1295 N. Martin Ave. P.O. Box 210202 Tucson, AZ 85721-0202 Tel: (520) 626-1657 Fax: (520) 626-0546

March 10, 2023

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical Professor of Medicine University of Arizona Health Sciences 1670 E Drachman Street Tucson, AZ 85721

Re: College of Health Sciences

Dear Dr. Lohenry:

I am writing to express the support of the R.K. Coit College of Pharmacy for the newly developing College of Health Sciences, and its affiliated Department of Clinical Health Professions and Department of Health Sciences Graduate Studies. The development of a college and these departments with a primary focus on graduate health professional education and research is an exciting proposition for the university. In addition, the commitment from your leadership to build a college with a strong emphasis on interprofessional education and health professions aligns with our college. Throughout the course of our 75-year history, we have focused on building a premier pharmacy program that meets the needs of our communities while developing new therapies and standards of care for drug discovery, aging, neurodegeneration therapeutics, health and pharmaceutical outcomes, pharmacology, toxicology, and environmental health. The alignment between our college and this new college and departments around preparing the next generation of clinicians and scientists is obvious and the commitment for serving our Arizona rural and indigenous communities will provide opportunities for collaboration with our students, faculty, and alumni throughout the state. We look forward to our future collaboration as the college begins to develop.

Sincerely,

Rick G. Schnellmann, Ph.D.

Dean Endowed Chair

Howard J. Schaeffer Endowed Chair

Professor of Pharmacology and Toxicology

schnell@pharmacy.arizona.edu



#### PHYSICAL THERAPHY PROGRAM

Health Sciences Innovation Building (HSIB) 1670 E. Drachman PO Box 245120 Tucson, AZ. 85721-0216

Fax: 520-626-1460

#### k2/16/2023

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical professor of Medicine University of Arizona Health Sciences 1670 E Drachman Street Tucson AZ 85721

Re: University of Arizona College of Health Sciences, Department of Clinical Health Professions

Dear Dr., Lohenry

I am writing to you on behalf of the developing Doctor of Physical Therapy Program to express my support for the development of both the new College of Health Sciences and the new Department of Clinical Health Professions. The development of a college with a primary focus on graduate health professions and science education and research is a very exciting prospect.

Currently the Doctor of Physical Therapy program is housed in the Orthopedic Surgery Department in the College of Medicine, and although the department has been extremely welcoming and supportive, it is challenging for them to meet the needs of faculty and students of a non-MD program. A college of Health Sciences would allow the supportive collaboration for both students and faculty to enhance development of interprofessional education and experiences as required by the Physical Therapy accreditation body.

A newly developed College of Health Sciences would allow for the Doctor of Physical Therapy program to be supported and successfully navigate their accreditation requirements and be more suitable for an easy integration of interprofessional curriculum components and experiences. The new college would also allow for alignment with institutional appointments, promotion, and tenure processes between the health professional programs, which are often significantly different from a College of Medicine, providing a more supportive environment for the faculty. We are highly supportive of both the college and the department and believe that they would support an outstanding and innovative Doctor of Physical Therapy Program.

Sincerely,

Christine Childers PT, PhD

Director, Doctor of Physical Therapy Program





Dee Quinn, MS, CGC
Director, University of Arizona Genetic Counseling Graduate Program
Health Sciences Innovation Building (HSIB)
1670 E. Drachman, Room 930M
Tucson, AZ. 85721

Re: University of Arizona College of Health Sciences, Department of Clinical Health Professions

Dear Dr. Lohenry:

I am writing to you on behalf of the University of Arizona Genetic Counseling Graduate Program (UAGCGP) to express my strong support for the development of both the new College of Health Sciences and the new Department of Clinical Health Professions. The development of a College with a primary focus on graduate health professions, science education and research is a truly exciting prospect.

The UAGCGP University of Arizona is currently housed in the COM, Department of Cellular and Molecular Medicine (CMM). This program existed from 1995-2005 and was then reinstated in 2019. Since then, we have graduated 5 students per year for a total of 10. All alumni who have taken the ABGC certification exam have passed, and all are employed.

The College of Health Sciences, with a strong emphasis on inclusive and interprofessional teaching, as well as evidence-based teaching practices and best practice faculty development aligns with our passion to serve the Arizona community. The college's strategic development and vision will ensure success in academic appointments, curriculum support, student support services, support for recruitment and retention of underrepresented minority students and faculty, and clinical training sites that meet the needs of the Genetic Counseling program. This in turn will begin to meet the needs of Arizona's residents projected health workforce needs in the state.

The significant clinical training required for our program would benefit from an interprofessional approach and community engagement. The College's focus on preparing the next generation of clinicians and scientists by establishing community collaboration with our students, faculty, and alumni throughout the state would additionally increase the number of clinical genetics professionals to serve our Arizona rural and indigenous communities. Recruiting individuals from these communities and providing community-based, experiential rotations during their health professional training will increase the likelihood that they will work in Arizona's rural and urban underserved and health professional shortage areas after graduation and then serve as community-based preceptors for our students. The innovative focus of the college will prepare and expand the pipeline of genetic counselors with next





generation knowledge and clinical skills to contribute to an already rapidly transforming healthcare system.

The Genetic Counseling Graduate program has unique accreditation requirements that can be best met through the interprofessional focus of the College of Health Sciences. Although the College of Medicine, Dept. of Cellular and Molecular Medicine has been extremely welcoming and supportive, it has been challenging to meet the needs of faculty and students of a non-MD program. The new college would also allow for alignment with institutional appointments, promotion, and tenure processes between the health professional programs, which are often significantly different from a College of Medicine, providing a more supportive environment for the faculty. A College of Health Sciences would foster the supportive collaboration for both students and faculty to enhance development of interprofessional education and experiences as required by the Accreditation Council for Genetic Counselors (ACGC). Additionally, the College of Health Sciences will serve as a conduit to provide critical university resources to support students and faculty to conduct high level, clinically oriented research projects in clinical genetics that will help inform all health care practitioners.

In summary, the College of Health Sciences will build a stronger, more diverse health workforce for the communities in Arizona. The collaboration between new and existing health professional training programs will provide clinical expertise, translational knowledge, and team-based research to train and deploy a health workforce that reflects Arizona's diverse populations. The Genetic Counseling program would benefit immensely from this directed approach to health provider education, training, and research.

Sincerely,

Dorothy Lynn Quinn Dee Quinn, MS, CGC

Director, University of Arizona Genetic Counseling Graduate Program



Tucson Campus 1670 E. Drachman PO Box 210216 Tucson, AZ 85721-0216 Tel: (520) 626-1197 Fax: (520) 626-1460

February 21, 2023

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical professor of Medicine University of Arizona Health Sciences 1670 E Drachman Street Tucson AZ 85721

Re: University of Arizona College of Health Sciences, Department of Clinical Health Professions

Dear Dr. Lohenry,

I am writing to you on behalf of the Nurse-Midwifery Program to express my support for the development of both the new College of Health Sciences and the new Department of Clinical Health Professions. The development of a college with a primary focus on graduate health professions, science education and research is a brilliant concept.

The Nurse-Midwifery Program is currently housed within the Doctor of Nursing Practice (DNP) at the College of Nursing. Midwifery is often found within schools of nursing despite being a separate profession. The existing DNP program requires 3 years to complete the midwifery plan of study. A College of Health Sciences would allow for an independent midwifery program at the master's level. This change in degree is a time and cost savings for our students and will benefit the communities of Arizona by increasing access to care. A newly developed College of Health Sciences would allow for the Midwifery Program to develop a Doctorate of Midwifery. This would be the second degree of its kind in the United States, making the University of Arizona a premier educational program for midwives in the country.

The new college would also allow for alignment with institutional appointments, promotion, and tenure processes between the health professional programs, which are often significantly different from a College of Medicine or Nursing, thereby providing a more supportive environment for the faculty.

We are highly supportive of both the college and the department and believe that they would support an outstanding and innovative Midwifery Program.

Sincerely,

Erin McMahon EdD, CNM, FACNM

Director, Nurse-Midwifery Program



Office of the Senior Vice President for Health Sciences Phoenix Campus 435 North 5<sup>th</sup> Street Executive Suite Phoenix, AZ 85004-2230 Tucson Campus 1670 E. Drachman PO Box 210216 Tucson, AZ 85721-0216 Tel: (520) 626-1197 Fax: (520) 626-1460

March 2, 2023

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical Professor of Medicine University of Arizona Health Sciences 1670 E. Drachman Street Tucson AZ 85721

Re: University of Arizona College of Health Sciences (UACHS)

Dear Dr. Lohenry,

We are writing to you on behalf of the Clinical Translational Sciences (CTS) Graduate Program to provide our unwavering support for the development of both the new UACHS and the new Department of Health Sciences Graduate Studies, which is expected to house the CTS MS and PhD graduate programs. The development of a college with a primary focus on graduate health professions and science education and research is a very exciting prospect and we are excited to be a contributing partner in its inception.

Currently, the CTS graduate program is housed in the University of Arizona Health Sciences, which serves both Phoenix and Tucson campuses. CTS students are trained and taught by faculty across a wide spectrum of disciplines within the College of Medicine – Tucson (COMT), College of Medicine – Phoenix (COMP), College of Nursing (CON), Mel and Enid Zuckerman College of Public Health (COPH), R. K. Coit College of Pharmacy (COP), College of Science (COS), College of Agriculture and Life Sciences (CALS), and Impact services (e.g.,Tech Launch Arizona and FORGE). We expect that these partnerships will continue in our quest to provide translational science education, skills training, and public health education that will enhance the experiences of all health professional students. While the CTS program will continue these collaborations, its inclusion in the new UACHS and in the Department of Health Sciences Graduate Studies will simplify and clarify the place of CTS in the UAHS administrative structure as an intercollegiate, interdisciplinary training program spanning the UAHS colleges.

With the creation of the new UACHS, we envision future degree programs, such as a Doctor of Health Sciences, focused on building an education workforce that will be equipped to deliver health education for other professional programs that allows for interprofessional tracks highlighting teaching, research and health policy. This new doctoral degree program, housed within the same department as the existing CTS graduate program, will provide a path to train future faculty with advanced academic credentials who are qualified to take on leadership roles in health professions training programs in UACHS and elsewhere. It will also provide graduate learners with an opportunity to attain skills and knowledge related to interprofessional activities that seek to remove the traditional silos from health professions while building problem-solving solutions to complex health care and scientific challenges.

Sincerely,

Ronald Hammer, PhD Co-Director, Phoenix

Ron Hom

Julie Ledford, PhD CTS Co-Director, Tucson

Julie D. Ledford

Mike Renning

Mohales

CTS Director of Graduate Affairs

Kevin Lohenry, PhD, PA-C Assistant Vice-President for Interprofessional Education Clinical Professor of Medicine University of Arizona Health Sciences 1670 E Drachman Street Tucson, AZ 85721 March 1, 2023

Re: Proposed College of Health Sciences

Dear Dr. Lohenry:

I write in enthusiastic support of the proposed College of Health Sciences and its Department of Clinical Health Sciences and Department of Health Sciences Graduate Studies at the University of Arizona.

I serve as Director of the University of Arizona Center for Rural Health (AzCRH) in the Mel and Enid Zuckerman College of Public Health. The AzCRH core mission is to improve the health and wellness of Arizona's rural and underserved populations. The proposed College of Health Sciences and Departments housed within it will help us build a diverse, well-trained and distributed health workforce for Arizona while providing new health professional education opportunities. These goals are aligned with the University of Arizona's land grant mission, its strategic initiatives and grand challenges.

The proposed College of Health Sciences will create and house new health professional training programs, increase clinical, translational, and team-based research and train and deploy a health workforce that reflects Arizona's diverse populations.

We are eager to collaborate with you to develop pathways for individuals from Arizona's rural and urban underserved areas to the College's education and training programs. Our experience and data demonstrate that recruiting individuals from these communities and providing community-based, experiential rotations during their health professional training increase the likelihood that they will work in Arizona's rural, urban underserved and health professional shortage areas after graduation and then serve as community-based preceptors for our students.

We look forward to collaborating with you to build these innovative approaches to educating and graduating a health care workforce for Arizona.

Sincerely,

Daniel Derksen, MD

Director, Arizona Center for Rural Health Professor of Public Health, Mel & Enid Zuckerman College of Public Health

The University of Arizona

DOG GEN M.D.

dderksen@arizona.edu