EAB

RESEARCH BRIEF

Establishing a College of Health Sciences

Academic Affairs Forum

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1) Executive Overview

Key Observations

Senior leaders at profiled institutions initiated plans to establish Colleges of Health Sciences to centralize all health-related programs within one academic unit. In addition to creating more efficient organizational structures, contacts intended for new Colleges to expand interdisciplinary and inter-professional opportunities for students and faculty (e.g., courses, simulation centers, research projects). Establishing one college dedicated to health sciences also supports institutional priorities to grow health sciences programs and train more health professionals. Through reorganizations, contacts also aimed to reduce costs and centralize administrators and staff.

At profiled institutions with existing health sciences programs, administrators and faculty reorganized current colleges, departments, and programs to form Colleges of Health Sciences. The composition of Colleges of Health Sciences at profiled institutions varies based on existing programs and structures prior to reorganizations. In some cases, administrators dissolved existing colleges and distributed those programs across multiple colleges, including the College of Health Sciences. Primarily, contacts report that faculty supported plans to establish Colleges of Health Sciences, but some faculty members expressed concerns about the impact of reorganizations on students and budgets.

Faculty committees at profiled institutions selected which academic programs would comprise Colleges of Health Sciences, including dental hygiene, health sciences, kinesiology, public heath, speech language pathology, and social work. Administrators encouraged faculty committees to provide recommendations for academic programs to include in new Colleges, with final approval from Faculty Senates. Primarily, faculty committees shifted all health-related programs based on a sense of "fit" within colleges dedicated to health, rather than specific criteria. Additionally, Colleges of Health Sciences may include schools of nursing and pharmacy, although faculty committees at profiled institutions often debated whether to shift these programs within Colleges, citing accreditation requirements.

By centralizing programs and offices within Colleges of Health Sciences, administrators at profiled institutions improved student services, increased efficiency, and reduced costs. After establishing Colleges of Health Sciences, administrators launched new health-related programs, expanded interdisciplinary courses and inter-professional training (e.g., simulations centers), co-located programs and constructed new facilities, and provided college-wide scholarships, research funding, and research centers. Administrators also centralized offices within Colleges, including student advising, research, admissions, and development. By providing college-wide services and opportunities, contacts report that they better serve students and faculty; administrators at profiled institutions cite growing enrollment in health sciences programs, improved retention rates within their Colleges of Health Sciences, and increasing research funding as success indicators. Additionally, establishing Colleges of Health Sciences generated cost savings at profiled institutions, primarily through elimination of duplicated positions and the centralization of administrative processes.

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2) Introducing a College of Health Sciences

Motivations and Goals

Create Colleges of Health Sciences to Centralize and Grow Health Programs, Expand Interdisciplinary and Inter-Professional Education, and Increase Efficiency

Administrators at profiled institutions established Colleges of Health Sciences for a variety of reasons, including to

- organize all health-related disciplines within one unit
- train more health professionals in fields with increasing market demand
- expand inter-professional training for health sciences students
- encourage interdisciplinary education and research
- create enrollment pipelines for undergraduate to graduate programs in health sciences disciplines
- elevate institutional prestige in health sciences disciplines
- better serve students (e.g., provide centralized advising), and
- reduce costs.

By the late 2000s, administrators also observed that peer institutions had established such colleges.

While names for colleges vary at profiled institutions, this report uses "College of Health Sciences" to refer to all colleges focused on health programs.

Name and Date Established of Colleges of Health Sciences at Profiled Institutions

Institution Name	College	Date Established
Northern Kentucky University (NKU)	College of Health Professions	2009
St. Bonaventure University	School of Allied Health	Currently in formation
University of Alaska Anchorage (UAA)	College of Health	2011
University of North Carolina (UNC) at Greensboro	School of Health and Human Sciences	2011
University of Wyoming	College of Health Sciences	Mid-1980s

Senior Leaders Proposed College Formation at Most Profiled Institutions

Senior leadership (e.g., Board of Regents, Chancellor, Provost) often initiate plans to create Colleges of Health Sciences at profiled institutions. If reorganizations are not proposed by senior leaders, contacts note that their support is critical to successfully establish new colleges.

At **St. Bonaventure University**, a board member donated funds to support the creation of the School of Allied Health. The funding has accounted for the majority of the budget to create the college, including the search process to hire a new dean and external consultant fees. Another board member who worked as a medical executive has also provided suggestions for the new school.

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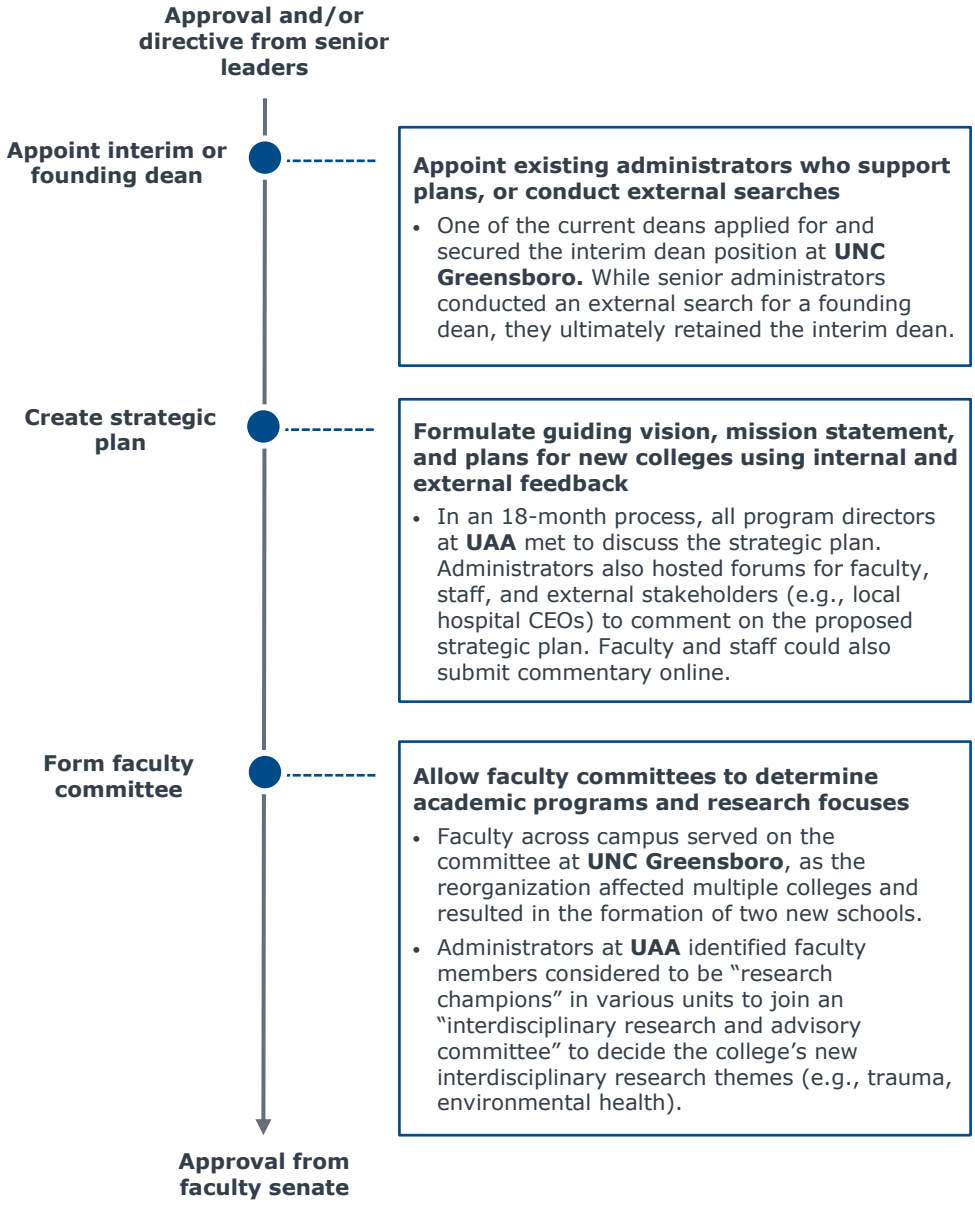
Processes to Establish Colleges

Empower Faculty Committees to Lead Processes to Select Programs for Colleges of Health Sciences

Administrators at profiled institutions typically create preliminary strategic plans, which outline the vision and goals of new colleges. Faculty committees then determine which academic programs and departments will form Colleges.

Processes to Create Colleges of Health Sciences at Profiled Institutions



Hold Forums and Provide Information during Transitions to Secure Faculty Buy-In

While contacts report that most faculty at profiled institutions supported plans to establish Colleges of Health Sciences, some individuals expressed disapproval, especially faculty in existing colleges or departments that would be dissolved through reorganizations. At some institutions, securing approval from the Faculty Senate was the greatest challenge in the process to establish Colleges of Health Sciences.

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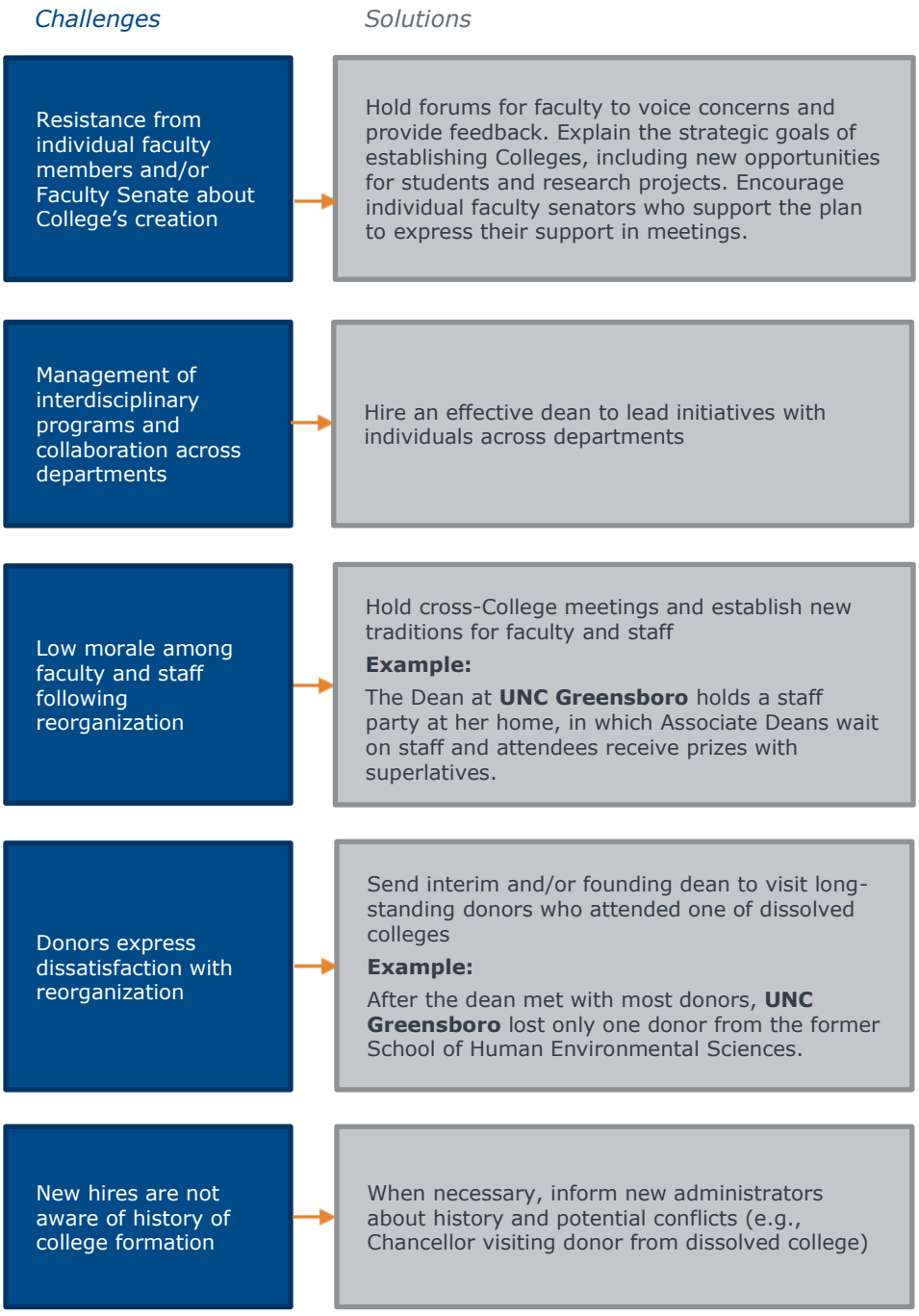
Concerns from faculty included the ability to accommodate more students, provide space on-campus, and support Colleges with existing budgets. Faculty at profiled institutions also expressed concern about timelines (e.g., provided with too little time to decide structure of new Colleges) and transparency.

To address these concerns, administrators held open forums and met with faculty individually. Administrators strove to provide answers to all questions and transparently share information throughout the processes.

Challenges and Solutions throughout Processes to Establish Colleges of Health Sciences



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3) Selection of Health Science Programs

Departments and Programs

Combine Health-Related Programs across Existing Colleges to Form a College of Health Sciences

Based on recommendations from faculty committees, administrators moved existing health-related programs and colleges to establish Colleges of Health Sciences. Contacts lacked specific criteria for these decisions, which were based primarily on perceived "fit." Programs included in Colleges of Health Sciences vary by institution; see Appendix A on page 17 for a listing of degree programs at each profiled institution.

Common Programs at Profiled Colleges of Health Sciences

UAA created its College of Health by combining the College of Health and Social Welfare with departments with other colleges (e.g., School of Allied Health from the Community & Technical College).

Creation of *UAA's* College of Health

College of Health and Social Welfare

School of Allied Health
Community & Technical College

WWAMI School of Medical Education
College of Arts and Sciences

College of Health

- Center for Human Development
- Department of Health, Physical Education & Recreation
- Department of Health Sciences
- Department of Human Services
- Institute for Circumpolar Health Studies
- Inter-professional Health Sciences Simulation Center
- Justice Center
- National Resource Center for American Indians, Alaska Natives and Native Hawaiian Elders
- Occupational Therapy Program
- Pharmacy Programs
- Physical Therapy Program
- School of Allied Health
- School of Nursing
- School of Social Work
- WWAMI School of Medical Education

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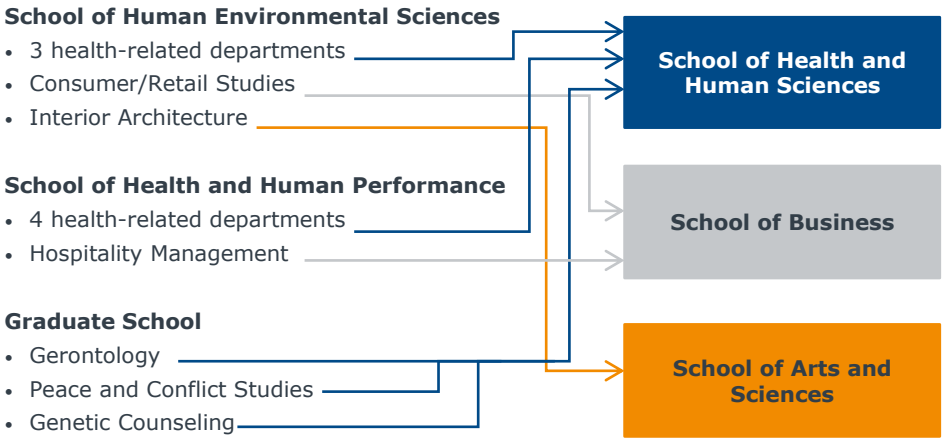
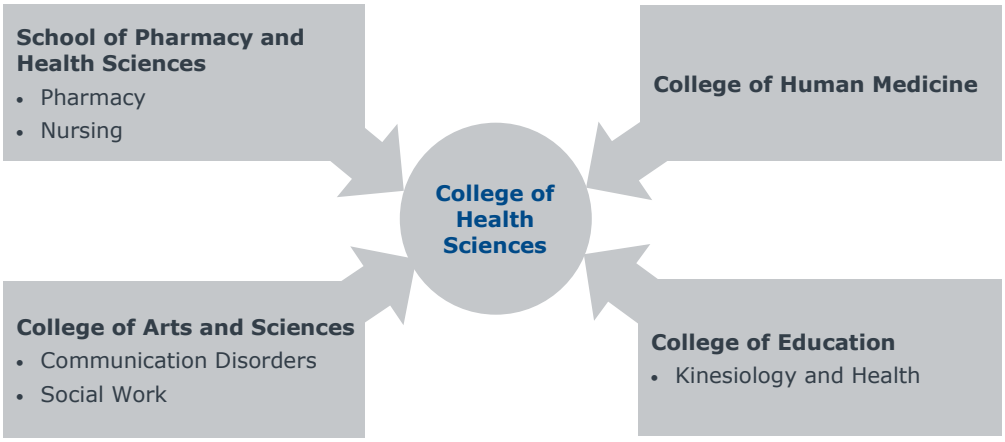
UNC Greensboro formed the School of Health and Human Sciences through a reorganization of two existing colleges. Three of five departments from the School of Human Environmental Sciences, four of five departments from the School of Health and Human Performance, and several free-standing departments (e.g., Gerontology, Genetic Counseling) moved to the new school. UNC Greensboro simultaneously created a new College of Visual and Performing Arts.

Creation of *UNC Greensboro's* School of Health and Human Sciences



As at UNC Greensboro, the **University of Wyoming** created their College of Health Sciences by combining existing colleges (i.e., School of Pharmacy and Health Sciences, College of Human Medicine) and programs housed in other departments across the institution (e.g., Kinesiology from College of Education, Social Work from College of Arts and Sciences).

Creation of the *University of Wyoming's* College of Health Sciences



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Utilize Synergies of Newly Formed College to Launch New Programs and Expand Existing Departments and Programs

After establishing Colleges of Health Sciences from existing programs, deans sought to grow Colleges through new creating programs and departments.

Strategies to Grow Health Sciences Programs at Profiled Institutions

Launch New Programs	**NKU** • Potentially launching nutrition, population health, and public health **St. Bonaventure** • Potentially launching occupational therapy, physical therapy, and a physician's assistant program **UAA** • Physical therapy assistant program • Pharmacy program **UNC Greensboro** • Online EdD in Kinesiology
Grow Existing Programs into Departments	**UNC Greensboro** • Peace and Conflict Studies
Continue to Shift Health-Related Programs to College of Health Sciences	**UAA** moved the Dietetics and Nutrition program and the Department of Health, Physical Education & Recreation from the Community & Technical College to the College of Health
Expand Interdisciplinary Course Offerings	Faculty across departments at **NKU** teach designated inter-professional "health professions" courses. No department houses these courses.

Contacts Express Uncertainty about Organizational Structure of Nursing and Pharmacy Programs

Deans at profiled institutions report that faculty and directors of professional programs (e.g., nursing, pharmacy) may express concern that reorganizations will cause their programs to lose accreditation. Contacts note that professional accreditation is discipline-specific, and that each program maintains responsibility for its accreditation. Therefore, reorganizations typically do not impact accreditation, but administrators and faculty continue to discuss whether these programs should exist as separate schools.

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At **UNC Greensboro,** nursing faculty served as members of the reorganization committee, which discussed whether the nursing program should join the new College of Health and Human Services or remain a separate school. At the time, administrators and faculty hoped to form a College of Health composed of three schools: Health and Human Services, Nursing, and Pharmacy. However, the pre-pharmacy program remained in the Department of Chemistry & Biochemistry, and the School of Nursing did not join the College of Health and Human Services.

At the **University of Wyoming,** the College of Health Sciences houses the School of Nursing and School of Pharmacy. Due to accreditation requirements, the nursing and pharmacy programs are led by deans; therefore, three deans serve in the College of Health Sciences. While only the Dean of the College has appointing authority and control of the budget, individuals sometimes approach the two other deans about hiring and budget decisions, causing internal confusion. Administrators have suggested adjusting titles to differentiate the three positions (e.g., associate vice provost), and discussed whether the School of Nursing and/or Pharmacy should be separate from the College of Health Sciences.

Additionally, individuals may question the organization of certain research centers and programs. For example, the Dean of the College of Health at **UAA** often receives questions about why the College houses the Justice Center. Contacts report that researchers in the center view crime as a public health issue, and research topics at the intersection of crime and public health (e.g., domestic violence, sexual assault, substance abuse).

While most health sciences programs at profiled institutions have been successful, the gerontology program at **UNC Greensboro** has low enrollment. Because administrators believe there is market demand for gerontology programs, administrators will shift to an online masters and undergraduate minor. The gerontology program will also move to the Department of Social Work.

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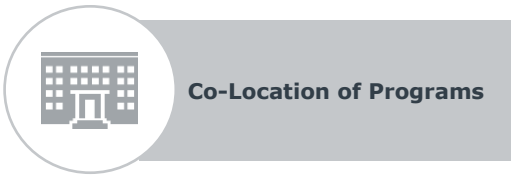
4) Outcomes of Establishing a College of Health Sciences

Results and Assessment

Centralize Services and Expand Interdisciplinary Opportunities through Colleges of Health Sciences

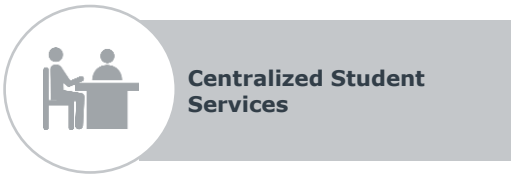
After establishing Colleges of Health Sciences, administrators at profiled institutions were able to centralize student services and administrative offices, and therefore, increase efficiency through the "economies of scale" of operating one large college. Organizing all health-related programs within one college has also allowed deans to encourage collaboration across departments and train students in inter-professional teams, similar to the teams they will work on as health professionals. Centralization also provides deans more flexibility to utilize funding. For example, the dean's office at the **University of Wyoming** retains about 10 percent of funding for summer programs to address shortfalls in divisions (e.g., fewer students enroll in summer courses than expected) and support special projects.

Outcomes of College of Health Sciences Formation at Profiled Institutions



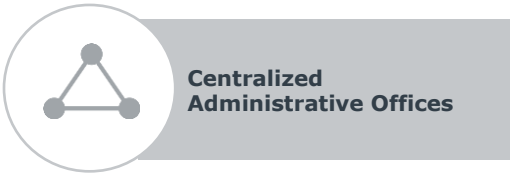
Co-Location of Programs

- Co-located departments and programs, including educational, clinical, and administrative spaces
- New facilities specifically for College of Health Sciences



Centralized Student Services

- Student advising and success offices within Colleges staffed with academic advisors that provide academic advising and workshops
- College-wide scholarships, in addition to unit based scholarships, and college-wide research funding



Centralized Administrative Offices

- Centralized offices (e.g., admissions, community engagement, diversity and inclusion) across programs
- One college-wide MOU with each clinical site, rather than program-specific MOUs

Interdisciplinary and Inter-Professional Education and Curricula

- Interdisciplinary courses taught by faculty across departments
- Simulation centers to train students across programs together
- Research seminars and practice seminars open to students across programs

Interdisciplinary Research

- Faculty work across departments on interdisciplinary research projects
- Inter-professional research conferences and collaboratives, including with community health partners
- College research offices to assist faculty with pre and post awards
- College-wide research committees, poster days, and research grants

Inter-professional Fundraising

- Fundraising priorities and sharing of donors across departments
- One development officer dedicated to the College

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Creation of Colleges May Reduce Staff and Administrative Positions, with Lesser Impact on Faculty

Administrators at profiled institutions report that creating new Colleges did not significantly impact faculty lines, as most departments remained unchanged. In fact, many faculty members welcomed the opportunity to work with colleagues within new Colleges and create more interdisciplinary opportunities. Centralization also allows deans to move faculty lines between departments, although this happens infrequently at profiled institutions.

Contacts report greater impact on staff and administrative positions. Following the reorganization at **UNC Greensboro**, administrators hosted meetings with all individuals whose positions were duplicated. Ultimately, some staff members found new positions at the institution, while some left to seek external roles.

Cost Savings

$900K

The then-chancellor at **UNC Greensboro** aimed to save $1 million from the reorganization, including through the elimination of one dean position. Contacts estimate they ultimately saved about $900,000.

Staff and Administrator Transitions at *UNC Greensboro*

College Staff

The Dean attempted to secure new positions on-campus for duplicated staff, primarily administrative assistants. Some staff members chose to take jobs elsewhere.

Dean's Assistant

The Dean hired an external candidate, believing in the political importance of not employing someone previously affiliated with either school.

Associate Deans

The Dean selected one Associate Dean from each previous College to serve as the Associate Deans for the new College. Other Associate Deans returned to the faculty or retired.

Assess Success of College with Metrics and Improvement to Quality of Educational Experiences and Research

To evaluate their Colleges, deans at profiled institutions track data, including student enrollment, graduates' job placement, faculty satisfaction, research funding and contracts, and donations to Colleges. In particular, contacts cite high enrollment in health sciences programs (e.g., about 1,100 pre-nursing majors at **UAA**) and improved retention rates. For example, one year after establishing a centralized advising center within the College of Health Professions, **NKU** saw a five percent improvement in retention rates, especially for students in online programs. Administrators at profiled institutions also consider student and faculty engagement with interdisciplinary and inter-professional courses and research.

In addition to improving across various metrics (e.g., enrollment, donations), contacts at **UNC Greensboro** consider this data in comparison to the institution's other schools. For example, the School of Health and Human Services ranks first for research productivity, and contains an Office of Community Engagement that manages about 800 state contracts. However, administrators have not yet explored how the school compares to other health science colleges within the state or nationally.

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5) Research Methodology

Project Challenge

Leadership at a member institution approached the Forum with the following questions:

- Which academic programs did administrators include in Colleges of Health Sciences?
  - How and why did contacts choose particular academic programs?
  - Which academic programs do administrators find to be most successful to house in a College of Health Sciences? Why?
- How have contacts utilized synergies resulting from a unified College of Health Sciences to improve existing programs, create new programs, or obtain efficiencies?
- Which, if any, academic program combinations have proved problematic? If so, why have those combinations proved problematic?
- What were the primary considerations when creating a College of Health Sciences?
- How did administrators manage the establishment of the College internally?
- How did contacts incorporate feedback and suggestions from faculty and staff into this process?
  - Did faculty support plans to create new colleges, before and after the transition?
- What challenges or obstacles did contacts encounter when introducing a College of Health Sciences? How did contacts navigate these challenges?
- Ultimately, what were the results of establishing a College of Health Sciences?
- Do contacts believe that students are better served by the new College of Health Sciences? Why or why not?
- How do contacts measure impact of the College on students?
- How did Colleges of Health Sciences affect faculty and staff?
- In what ways, if any, has a unified College of Health Sciences increased efficiency?
- What, if any, cost savings have administrators at profiled institutions gained from creating Colleges of Health Sciences?

Project Sources

The Forum consulted the following sources for this report:

- EAB's internal and online research libraries (eab.com)
- The Chronicle of Higher Education (http://chronicle.com)
- National Center for Education Statistics (NCES) (http://nces.ed.gov/)
- Institutional websites
  - http://healthprofessions.nku.edu/
  - http://www.sbu.edu/academics/schools/school-of-allied-health
  - https://www.uaa.alaska.edu/academics/college-of-health/
  - https://www.uncg.edu/hhs/
  - http://www.uwyo.edu/hs/

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Research Parameters

The Forum interviewed deans and directors in Colleges of Health Sciences at the following institutions.

A Guide to Institutions Profiled in this Brief

Institution	Location	Approximate Institutional Enrollment (Undergraduate/Total)	Classification
Northern Kentucky University	South	12,800 / 15,100	Master's Colleges: Larger Programs
St. Bonaventure University	Northeast	1,800 / 2,200	Master's Colleges: Medium Programs
University of Alaska Anchorage	Pacific West	16,300 / 17,200	Master's Colleges: Larger Programs
UNC Greensboro	South	15,300 / 18,700	Doctoral Universities: Highest Research Activity
University of Wyoming	Mountain West	10,100 / 12,800	Doctoral Universities: Higher Research Activity

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Networking Contacts

St. Bonaventure University
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University of Alaska Anchorage
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Dean, College of Health
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UNC Greensboro
Celia Routh Hooper
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University of Wyoming
Joseph Steiner
Dean, College of Health Science
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Appendix A) Program Listings[1]

NKU

Department of Allied Health

- BS in Health Science
- BS in Radiological Science
- BS in Respiratory Care
- MS in Health Science

Department of Nursing

- BS in Nursing (BSN)
- Accelerated BSN

Department of Advanced Nursing Studies

- Registered Nurse to BSN Program (RN to BSN)
- Master of Science in Nursing (MSN)
- Post-Master's Certification
- Nurse Practitioner Advancement
- Doctor of Nursing Practice (DNP)

UAA[2]

Center for Human Development (CHD)

Department of Health, Physical Education & Recreation (HPER)

- BS in Physical Education
- MA in Teaching (MAT), Physical Education

Department of Health Sciences

- BS in Health Science
- Master of Public Health (MPH)

Department of Human Services

- Bachelor of Human Services

Institute for Circumpolar Health Studies

Interprofessional Health Sciences Simulation Center

Justice Center

National Resource Center for American Indians, Alaska Natives and Native Hawaiian Elders

Occupational Therapy Program

- OTD (partnership with Creighton University)

[1] Program listings as reported through EAB research conversations and stated on institutional websites.
[2] UAA also offers associate-level degrees, not included in this list.

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Pharmacy Programs

- Doctor of Pharmacy (partnership with Idaho State University)

Physical Therapy Program

- Doctorate in Physical Therapy (in development)

School of Allied Health

- BS Dental Hygiene
- BS in Dietetics
- BS in Medical Laboratory Science

School of Nursing

- BS in Nursing Science
- MS in Nursing Science
- DNP

School of Social Work

- Bachelor of Social Work (BSW)
- Master of Social Work (MSW)

WWAMI School of Medical Education

- MD

UNC Greensboro

Department of Communication Sciences and Disorders

- BS in Communication Sciences and Disorders
- MA in Speech Language Pathology
- PhD in Communication Sciences and Disorders

Department of Community and Therapeutic Recreation

- BS in Recreation and Parks Management Degree Programs
- MS in Parks and Recreation Management Degree Programs

Department of Human Development and Family Studies

- BS in Human Development and Family Studies
- MS in Human Development and Family Studies
- PhD in Human Development and Family Studies

Department of Kinesiology

- BS in Kinesiology
- MS in Kinesiology
- MS in Athletic Training
- Combined MS/PhD in Kinesiology
- PhD in Kinesiology
- EdD in Kinesiology (online)

Department of Nutrition

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- BS in Human Nutrition and Dietetics
- BS in Nutrition and Wellness
- BS in Nutrition Science
- MS in Nutrition
- PhD in Nutrition

Department of Peace and Conflict Studies

- BA in Peace and Conflict Studies
- MA in Peace and Conflict Studies

Department of Public Health Education

- BS in Community Health Education
- BS in Health Studies (online)
- Master’s of Public Health Education (MPH)
- Ph.D. in Community Health Education

Department of Social Work

- BSW
- MSW (joint program with North Carolina A & T State University)

Genetic Counseling Program

Genetic Counseling Program

- MS in Gerontology

University of Wyoming

Division of Communication Disorders

- BS in Speech, Language, and Hearing Science
- MS in Speech Language Pathology

Division of Kinesiology and Health

- BS in Kinesiology and Health Promotion
- BS in Physical Education Teacher Education (PHET)

Division of Medical Education and Public Health/Family Medicine Residency Programs: WWAMI

- MD

Division of Social Work

- BSW
- MSW

Fay W. Whitney School of Nursing

- BSN
- BRAND (Bachelor's Reach for Accelerated Nursing Degree)
- ReNEW Program (Revolutionizing Nursing Education in Wyoming)
- RN-BSN Completion Program

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- MS Nurse Leader
- DNP
- Interdisciplinary PhD in Biomedical Sciences

School of Pharmacy

- MS in Health Services Administration (online)
- Doctor of Pharmacy (PharmD)
- Pharmacy, Preprofessional Program

Wyoming Institute for Disabilities (WIND)

BioMedical Sciences PhD Program

Dental Hygiene Program

- BS in Dental Hygiene

Medical Laboratory Sciences

- BS in Medical Laboratory Sciences

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