

Notice of Change for

Creation of the Academic Health Collaborative at the University of Rhode Island

Date: April 2015

A. PROGRAM INFORMATION

1. Name of institution

University of Rhode Island

2. Name of department, division, school or college:

Formation of the Academic Health Collaborative with three colleges: Health Sciences, Nursing, and Pharmacy; Institute for Integrated Health and Innovation; and an Office of Shared Services

3. Intended initiation date of program change. Include anticipated date for granting first degrees or certificates, if appropriate.

Implementation date: Fall 2016

4. Intended location of the program

Kingston, RI

5. Summary description of proposed program (not to exceed 2 pages).

The proposal is to create an Academic Health Collaborative (AHC) with the following vision:

The URI Academic Health Collaborative is dedicated to cross-cutting innovation in broad aspects of health-related education, research, and community engagement with a focus on interprofessional education, population health, health promotion and recognition and elimination of health disparities. The work of the Academic Health Collaborative includes preparation of contemporary health literate citizens and health care providers and individuals prepared to contribute to new kinds of health organizations and workforce opportunities, including promoting health in our own community and state.

Currently, URI's health disciplines are spread across multiple units within five colleges (i.e., Arts & Sciences, Environment & Life Sciences, Pharmacy, Nursing, and Human Science & Services). To foster cooperative effort across these respective disciplines and areas of expertise, we propose re-organizing these units into an *Academic Health Collaborative* that will house three colleges (i.e., Pharmacy, Nursing, and Health Sciences), each led by a Dean. This re-organization will involve creating a College of Health Sciences

THE
UNIVERSITY
OF RHODE ISLAND
Notice of Change RIBGHE

composed of the Departments of Communicative Disorders, Human Development and Family Studies, Kinesiology, Nutrition and Food Science, Physical Therapy, and Psychology, and the Health Studies Program. Each college Dean will have dual responsibilities: to lead his or her respective college but also to lead integrative activities across the colleges and the Collaborative. Each Dean will report to the Provost and each college will have its own budget. To create a centralized and pervasive support system for Collaborative activities, the Deans will comprise an Executive Committee, engaging in strategic visioning and planning for integrated health programs, research, services, outreach, and entrepreneurial activities, with a percentage of each of the dean's time allocated to strategic planning, development, and fundraising for the Collaborative. One of the college Deans would serve as a "Coordinating Dean," who would ensure that administrative functions of the Collaborative were carried out effectively. The "Coordinating Dean" would serve a three-year term, with possibility of reappointment, and allowing for rotation of the position among the three Deans.

An Institute for Integrated Health and Innovation, that will be dedicated to creating, supporting, and promoting cross-disciplinary initiatives and innovations in education, research, service provision, and entrepreneurial ventures, will be created as part of the AHC and serve as the major mechanism for collaborative efforts and innovation. A Director will oversee the Institute and will report to the Executive Committee of the Collaborative. The Institute will launch wide-ranging education, service, and research activities, while providing access to expertise and a variety of supports to promote these efforts. The Institute will be a place where any faculty member with an interest in health is welcome and encouraged to participate, including those in areas outside of the Collaborative (e.g., biomedical engineering, business administration, medical lab science, etc.). Therefore, the Institute will have an open structure, serving not only the needs of the three colleges but all members of the University community with an interest in integrated and innovative health efforts.

An Office of Shared Services will support the AHC, headed by a Director and staffed with appropriate supervisory management, and will oversee budgets, business operations, technology and data management, and contract management of experiential learning sites for all three colleges. In an era of limited resources, centralizing otherwise duplicate efforts will increase efficiency and reduce costs. At the same time, the Shared Services Office will improve administrative support for the three colleges in areas such as outcome assessment, accreditation, and other administrative tasks. The Director will report to the Coordinating Dean of the Collaborative Executive Committee.

The proposed organizational design of the AHC is in Appendix A. The faculty in the departments and colleges affected by the re-organization have voted to join the collaborative (see voting results in Appendix B). In Appendix C, the report of the Phase II Health Committee that provides background information to support the proposed design is presented.

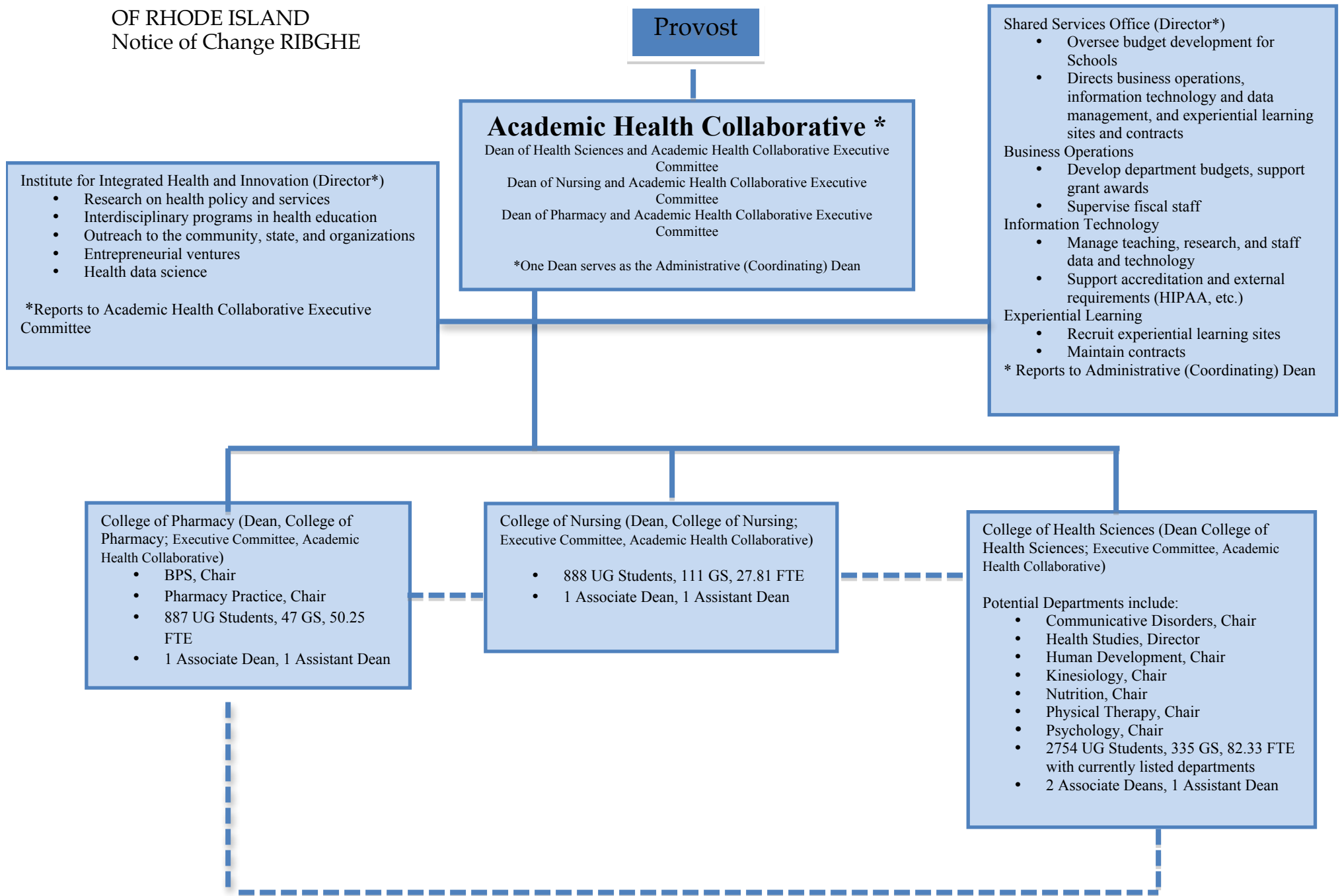
THE
UNIVERSITY
OF RHODE ISLAND
Notice of Change RIBGHE

If applicable, please include the existing URI catalog language and proposed catalog language changes that relate to your request.

6. Signature of the President

David M. Dooley

Appendix A



Appendix B

AHC Voting Results*

Department/College	Yes	No	Abstain	Not present or did not vote
Pharmacy	39	6	3	3
Nursing	19	0	0	7
Communicative Disorders	Unanimous			
Human Development & Family Studies	12	2	0	
Kinesiology	14	3	0	
Nutrition and Food Science	8	0	1	
Physical Therapy	8	0	0	
Psychology	24	7	0	

*The Colleges of Arts & Sciences, ~~Environment & Life Sciences~~, and Human Science and Services also voted in favor of the above departments in their respective colleges to leave and join the AHC. The vote of the faculty from the College of Environment & Life Sciences for releasing the Nutrition and Food Sciences Department is scheduled for April 13.

Report of the Phase II Planning Committee

Reshaping Health Education, Research & Outreach at URI:

The Academic Health Collaborative

February 2015

Committee Members

Laura Beauvais – Provost’s Office (Co-Chair)

Deb Riebe – Kinesiology (Co-Chair)

Jerome Adams, Human Development and Family Studies

Pat Burbank, Nursing

Becky Carley, Nursing

Cathy English, Nutrition and Food Sciences

David Faust, Psychology

Mikyong Kim, Communicative Disorders

Jeff Konin, Physical Therapy

Rita Marcoux, Pharmacy

Jim Prochaska, Psychology

Brian Quilliam, Pharmacy

Mary Sullivan, Nursing

Executive Summary

The University of Rhode Island has an array of outstanding faculty with proven track records of success, and various but disjointed colleges and departments with a sole or major focus on health, including the Colleges of Pharmacy, Nursing, and Human Science and Services, and the departments of Nutrition and Food Sciences, Communicative Disorders, Human Development and Family Studies, Physical Therapy, Kinesiology, and Psychology. Given the quality of these departments and the growing emphasis on integrated health and healthcare, there is much to be gained by fostering cooperative efforts across these respective disciplines and areas of expertise. However, much of health education and the health industry remain wedded to antiquated models organized around specialized structures and functions, thereby creating fragmentation in health practice, research, education, and outreach.

Improving individual and population health outcomes and preparing students to address challenges as health providers, knowledge producers, and innovators require institutions organized around integrated processes (i.e., integrated health systems). In response to these pressing needs and emergent opportunities, a committee of University faculty and administrators engaged in intensive examination of URI's health disciplines and their potential reorganization into a more effective and productive integrated structure. A clear and fundamental consensus emerged from these discussions: Given the growing emphasis on integrated health and healthcare, much can be gained by fostering cooperative efforts across our University's faculty, colleges, and departments, dedicated to health. This document overviews the resulting vision of the new health organization, named the *URI Academic Health Collaborative*.

The World Health Organization's definition of health, which extends beyond the absence of disease and risks for disease and equally encompasses social, emotional, financial, and occupational wellbeing, provides the foundation for our vision statement:

The URI Academic Health Collaborative is dedicated to cross-cutting innovation in broad aspects of health-related education, research, and community engagement with a focus on interprofessional education, population health, health promotion and recognition and elimination of health disparities. The work of the Academic Health Collaborative includes preparation of contemporary health literate citizens and health care providers and individuals prepared to contribute to new kinds of health organizations and workforce opportunities, including promoting health in our own community and state.

Currently, URI's health disciplines are spread across multiple units within five colleges (i.e., Arts & Sciences, Environment & Life Sciences, Pharmacy, Nursing, and Human Science & Services). Although productive collaboration has sometimes occurred across units, integrated initiatives have been seriously compromised by various factors, in particular organizational design. To foster cooperative effort across these respective disciplines and areas of expertise, we propose re-organizing these units into an *Academic Health Collaborative* (see chart on p. 9). The Collaborative will house three colleges (i.e., Pharmacy, Nursing, and Health Sciences), an Institute for Integrated Health and Innovation¹, and an Office of Shared Services. Each college dean will have dual

¹ The ultimate name of the Institute will be determined at the time of its formation, following University Manual procedures in Chapter 8. For the purposes of this report, "Institute for Integrated Health and Innovation" is used.

responsibilities: to lead his or her respective college but also to lead integrated activities across the colleges and the Collaborative. Each dean would report to the Provost. To create a centralized and pervasive support system for Collaborative activities, the deans will comprise an Executive Committee charged with strategic visioning and planning for integrated health programs, research, services, outreach, and entrepreneurial activities.

The Institute for Integrated Health and Innovation, a key feature of the new organization, is organized around the theme of interdisciplinary collaboration for integrated health initiatives. The Institute is designed to facilitate interdisciplinary collaboration among faculty, students, and professionals in the community through vertical and horizontal teams of multidisciplinary health experts. Interdisciplinary collaboration for integrated health is necessary not only for research, but also for teaching, service and entrepreneurship as well.

Integration includes multi-level programs that cross systems levels and approaches health from the perspective of cell, self and society. Traditional medical paradigms have emphasized biological and individual levels of health and health care. However, health care reform is directing greater and greater attention to population health initiatives and innovations, and it has become apparent that far too few health professionals are trained to intervene at the group or population level. Hence, we anticipate that one area of emphasis will be on population health and will include Health Services research. At the same time, it is essential that multiple disciplines and multi-level research be an integral part of the Institute's mission. All levels of research will be expected to be collaborative in nature and be aimed at rapid translation from bench to bedside and when possible, to entire populations. The Institute will have an open structure, serving not only the needs of the three colleges but all members of the University community with an interest in integrated health and collaboration. Some potential initiatives and activities of the Institute include, but are not limited to:

- Identification of opportunities, funding and data sources that promote interdisciplinary research (e.g., Health Services research)
- Creation of faculty-run health clinics that integrate research, teaching and outreach activities and involve undergraduate and graduate students in the delivery of interventions
- Development of new interdisciplinary academic health programs, such as health policy, public health, health literacy, health "big data" and informatics, including short courses and certificate programs for the adult workforce seeking to upgrade skills (e.g., "Affordable Health Care for Small Businesses" and "Health Management and Leadership")
- Disease-based interdisciplinary hubs (e.g., cancer, diabetes, obesity) that integrate research in the basic and applied sciences, including work from the molecular to holistic levels
- Development of integrated interprofessional programs for clinical education
- Integration of faculty from areas outside of the Academic Health Collaborative in teaching, research, and outreach projects (e.g., business, biomedical engineering, neuroscience), perhaps using a Faculty Fellows model
- Development of worksite based employee health programs and other private/public partnerships
- Drug studies that integrate basic and clinical research or trials; focus areas for drug research that include basic and applied science
- Creation of a health educational resource hub for the community
- Development of consultative teams for school settings addressing such issues as illness prevention, healthy lifestyle changes, and prevention of violence

- Development of a retirement community with provision of health services
- Collaboration with the State of Rhode Island on Medicare and Medicaid research and policy

In the full report that follows, as per its charge, the Committee sets forth recommendations addressing policies for annual review, promotion, tenure, workload, and overhead distribution. In addition, we describe future opportunities that the new structure creates for engagement in health research, education, outreach, and entrepreneurship. Lastly, we suggest a process and timeline for faculty review and vote on the proposal.

The Planning Committee clearly recognizes that this proposal will not answer everyone's questions, and may not result in ideal outcomes overnight. The Collaborative is viewed as a work in progress that will change to meet the needs of the health and academic environments through the process of frequent assessment and re-design.

Introduction

The Phase II Health Planning Committee

Following the Health Exploration Committee's recommendations (see "Report of URI Committee on Reshaping Health Education, Research & Outreach at URI" (http://web.uri.edu/academic-planning/files/Health_Committee_Final_Report.pdf), the Phase II Health Planning Committee was formed in late February 2014 and charged with developing "a plan that formally outlines the details of an organizational structure, reporting relationships, the roles of administrators, the Institute mission and structure, academic policies and procedures, transitional steps to the new organization, and other pertinent operational issues" as they relate to the establishment of a newly formed health unit at URI. The Phase II Health Planning Committee met regularly from March to September to consider various structural options (see Appendix A for preliminary research on URI health units and potential opportunities of collaboration). In addition, a Health Summit was held on May 1, 2014 entitled "Framing the Opportunities in Health Education, Research, and Outreach" (http://web.uri.edu/provost/files/health_summit_program_final.pdf) to bring "together faculty from different units to share current and future health related activities, plans, and possibilities for URI." Further, the committee hosted a breakfast meeting on October 10, 2014 for URI alumni and donors, health and health care providers and administrators to obtain feedback on its model for organizing the university's health programs. Overall, external constituents were excited about the proposed ideas and encouraged us to move forward on the reorganization. At the end of October 2014, the report was released to the University community and placed on a web site that solicited comments on the committee's recommendations. On November 18, 2014 a public forum for the University community was held to gather additional feedback. In November and December 2014, committee members visited departments and colleges, when requested, to discuss the recommendations and gather feedback.

Based on this extensive work, the committee is now presenting its final report. This report proposes a vision for health education, research, outreach, and entrepreneurship at URI, a new organizational structure, including the creation of an Institute, to support interdisciplinary collaboration across faculty and students interested in health-related work, and a set of opportunities and a transition plan that will position URI to become a leader in health and healthcare in the state and region.²

Background

The health industry and the University are both based on industrial models organized around specialized structures and functions. In the industrial model, departments and other units are constructed for specialized functions. Specifically, the health industry is commonly organized around biological structures like bones, brains, hearts, lungs and cells. In the University model, there are classroom structures where the function of teaching occurs; laboratory and library

² The committee used the definition of health as defined by the World Health Organization (WHO): "Health is a state of complete physical, mental and social well being and not merely the absence of disease or infirmity" (<http://www.who.int/suggestions/faq/en/>). Therefore, the recommendations in this report try to reflect the need to organize units within URI that are broadly engaged in not only disease prevention but also on promotion of healthy well being and lifestyles.

structures where the function of research is based; and clinics and committees where service functions reside. This classic silo structure within the University prohibits synergy across functions and inhibits productivity and creativity. Integration of healthcare and higher education are left to the populations who are least prepared to do so, namely patients and students.

What is needed to improve health outcomes and prepare students for effectively addressing challenges as professional health providers is the development of knowledge institutions organized around more integrated processes and more creative jobs (i.e., the integrated health system). This provides URI with a tremendous opportunity and serves as the driving force for the current proposal for a Health Collaborative.

The University of Rhode Island already has an array of outstanding faculty with proven track records of success. Colleges and departments with a sole or major focus on health include the Colleges of Pharmacy, Nursing, and Human Science and Services, and the departments of Nutrition and Food Science, Communicative Disorders, Human Development and Family Studies, Physical Therapy, Kinesiology, and Psychology. Given the quality of these departments and the growing emphasis on integrated health and healthcare, there is much to be gained by fostering cooperative effort across these respective disciplines and areas of expertise.

By combining the existent components already in place at our University with a deeply held commitment to collaborative effort and the needed structures and incentives to support integrated activities, URI can create an exceptional Health Collaborative that will provide many benefits to our students, faculty, local community, and state. Such a Health Collaborative can develop into a major force for garnering new resources for the University of Rhode Island through the formation of private-public health partnerships, by becoming a significant player in national and international health initiatives, and by competing successfully for funding in the private and public sector.

The Academic Health Collaborative

We propose that the health departments and colleges at URI be grouped into an umbrella organization called the Academic Health Collaborative (hereafter referred to as the “Collaborative”), guided by the following vision.

The URI Academic Health Collaborative is dedicated to cross-cutting innovation in broad aspects of health-related education, research, and community engagement with a focus on interprofessional education, population health, health promotion and recognition and elimination of health disparities. The work of the Academic Health Collaborative includes preparation of contemporary health literate citizens and health care providers and individuals prepared to contribute to new kinds of health organizations and workforce opportunities, including promoting health in our own community and state.

Initially, the Collaborative will be centered on four major pillars that will help guide this new initiative:

1. The Academic Health Collaborative will promote interaction among faculty and students.

At the core of the Collaborative is the creation of an entity that will promote cooperation, collaboration, unification, and synergy among faculty and students interested in health, including not only those within the Collaborative but other members of the University community sharing related interests in integrated health initiatives involving research, teaching, and/or service. The goal is to create dynamic partnerships to promote optimal health and improved health care in the 21st century. In universities with medical schools and teaching hospitals, integrated health units are organized into “Academic Health Centers.” We selected “Academic Health Collaborative” as the over-arching name of the new health unit to communicate the core commitment to integration and collaboration that will nourish and support faculty, staff, and administrators who work within these areas. In contrast to many medical school and teaching hospital-based academic health centers, the Collaborative will place major emphasis on creating and fostering opportunities for cooperative efforts in teaching, service, outreach and entrepreneurship among our health programs and within our University. It is envisioned that the Collaborative will be a strongly positioned unit within the University and will serve as a leader in interdisciplinary and cross-institutional ventures. Thus, it needs a unique designation within the Division of Academic Affairs.

Various mechanisms are described in this report to attenuate or remove obstacles to collaboration and to promote and support integrated activities. Examples of proposed changes fostering collaboration include:

- Incorporating cross-disciplinary initiatives as a core responsibility for each college dean, along with the creation of a Deans’ Advisory Committee, in particular the creation and support of interdisciplinary research, teaching, health services, and outreach
- Placing high priority on interests and activities that cross disciplinary lines for new faculty hires and including such responsibilities in job descriptions
- The creation and dissemination of an interactive directory of faculty activities, interests, and areas of expertise to help link individuals together
- Cross-disciplinary teaching in such areas as multiculturalism and health promotion that will draw students and faculty together from multiple departments
- Formation of integrated healthcare clinics and multi-disciplinary consultative teams engaged with various healthcare settings and services
- Where applicable and beneficial, development of standardized measures, models, and research methods across areas of health
- The creation of an Institute for Integrated Health and Innovation (described below), whose primary objective and role will be to create and support integrated and interdisciplinary research, teaching, service, and entrepreneurship across the health collaborative. During the Institute’s start-up phase, particular attention will be given to areas in which multiple faculty across multiple departments share interests and expertise, thereby maximizing opportunities for interdisciplinary and collaborative engagement.

We strongly recommend the formation of an Advisory Board comprised of external and internal stakeholders to assist the Collaborative in staying abreast of trends, opportunities, and challenges within the health and wellness industry. Key external stakeholders such as hospitals, insurance and medical companies, community members, healthcare organizations (e.g., clinics, home care, hospitals, RI Department of Health), as well as other government agencies are appropriate sources for board members. The board would help internal stakeholders stay attuned to needs and trends in the external environment and foster public-private partnerships.

2. Creation of a new three-college model to support the Academic Health Collaborative

Although the entities within the Collaborative will function in an integrated fashion, each of the three colleges (i.e., Pharmacy, Nursing, and Health Sciences) will maintain its own budget and be headed by a dean who would report directly to the Provost and be responsible for maintaining standards for its academic programs. Together, the three deans will serve as the Academic Health Collaborative Executive Committee, engaging in strategic visioning and planning for integrated health programs, research, services, outreach, and entrepreneurial activities, with a percentage of each of the dean's time allocated to strategic planning, development, and fundraising for the Collaborative. One of the college deans would serve as a "Coordinating Dean," who would ensure that administrative functions of the Collaborative were carried out effectively. The "Coordinating Dean" would serve a three-year term, with possibility of reappointment, and allowing for rotation of the position among the three deans. The deans' titles and job descriptions have been revised to reflect their roles as leaders of their respective colleges and board members of the executive committee (see Appendix B for drafts of new dean job descriptions).

With new responsibilities of fostering integrated efforts in the Collaborative, the deans would be provided with enhanced personnel support to free them from administrative activities that could be handled capably by other staff. Specifically, expanded roles for the associate deans are necessary, requiring a full-time associate dean within each of the three colleges. The associate dean will assume some of the current day-to-day duties of the dean (see Appendix B for a draft associate dean job description) and will serve as the chief operating officer for each of the colleges. A major component of the associate dean's role will be to effectively and efficiently oversee college functions including supporting and managing faculty, staff and academic programs. However, the Deans themselves would retain primary responsibility for such essential matters as annual, tenure, and promotion review and other functions critical to each college.

In our previous report, the committee originally recommended naming the three major Collaborative subunits "schools." However, after receiving extensive feedback from the University community, particularly from the faculty who would be directly affected by the reorganization, the committee is recommending that the units be named "colleges." Although faculty show much enthusiasm and readiness to embark on the collaborative initiatives in the reorganization, the extent of the concerns and objections in undertaking a naming change was too great to endanger the potential of the reorganization moving forward. Given that other major academic units are called "colleges" and that the existing colleges focused on health issues have established strong identities both among internal and external stakeholders as colleges, the committee is recommending that the three units retain this naming convention.

3. Creation of the Institute for Integrated Health and Innovation

The Institute for Integrated Health and Innovation, a key feature of the new organization, is organized around the theme of interdisciplinary collaboration for integrated health. The Institute is designed to facilitate interdisciplinary collaboration among faculty, students, and professionals in the community through vertical and horizontal teams of multidisciplinary health experts. Interdisciplinary collaboration for integrated health is necessary not only for research, but also for teaching, service and entrepreneurship as well.

Integration includes multi-level programs that cross systems levels and approaches health from the perspective of cell, self and society. Traditional medical paradigms have emphasized biological and individual levels of health and health care. However, health care reform is directing greater and greater attention to population health initiatives and innovations, and it has become apparent that far too few health professionals are trained to intervene at the group or population level. Hence, we anticipate that one area of emphasis will be on population health and will include Health Services research. At the same time, it is essential that multiple disciplines and multi-level research be an integral part of the Institute's mission. All levels of research will be expected to be collaborative in nature and be aimed at rapid translation from bench to bedside and when possible, to entire populations. The Institute will have an open structure, serving not only the needs of the three colleges but all members of the University community with an interest in integrated health and collaboration. A director will oversee the Institute and will report to the Executive Committee of the Collaborative.

The Institute will provide an exciting and productive environment to launch wide-ranging education, service, and research activities, while providing access to expertise and a variety of supports to promote these efforts. The Institute will be a place where any faculty member with an interest in integrated and multidisciplinary health is welcome and encouraged to participate, including those in areas outside of the Collaborative (e.g., biomedical engineering, business administration, medical lab science, etc.), perhaps through a Faculty Fellows program. The opportunities and needs in health are vast and diverse, and the Institute will provide a setting in which many different faculty and students can interact, share their knowledge, learn from one another, and initiate projects that will contribute to the betterment of others. In addition, funding agencies are increasingly seeking proposals for health research and services that have clear support from integrated teams of multidisciplinary experts.

Potential Institute initiatives include, but are not limited to:

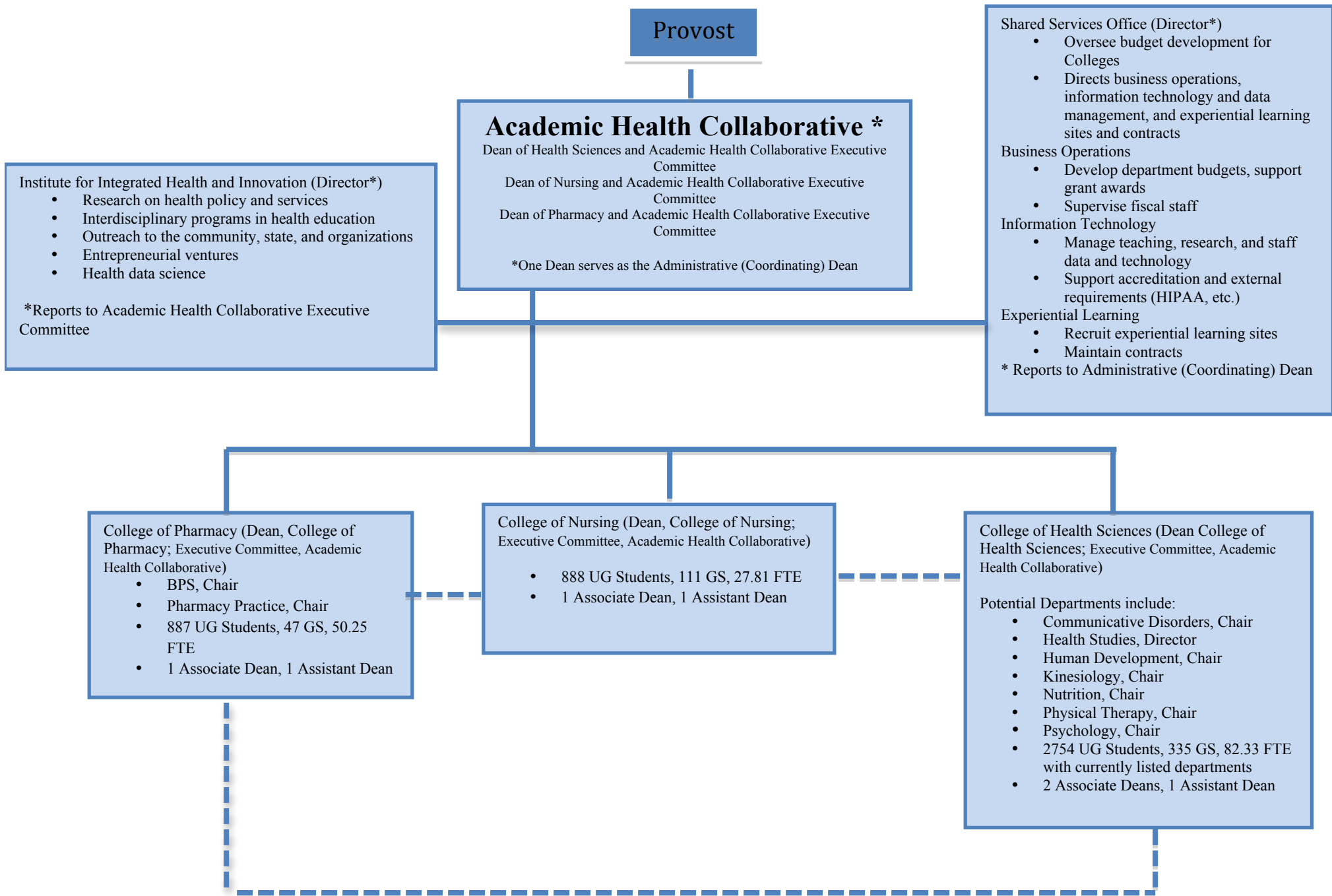
- Identification of opportunities, funding and data sources that promote interdisciplinary research (e.g., Health Services research)
- Creation of faculty-run health clinics that integrate research, teaching and outreach activities and involve undergraduate and graduate students in the delivery of interventions
- Development of new interdisciplinary academic health programs, such as health policy, public health, health literacy, health "big data" and informatics, including short courses and certificate programs for the adult workforce seeking to upgrade skills (e.g., "Affordable Health Care for Small Businesses" and "Health Management and Leadership")
- Disease-based interdisciplinary hubs (e.g., cancer, diabetes, obesity) that integrate research in the basic and applied sciences, including work from the molecular to holistic levels
- Development of integrated interprofessional programs for clinical education

- Integration of faculty from areas outside of the Academic Health Collaborative in teaching, research, and outreach projects (e.g., business, biomedical engineering, neuroscience), perhaps using a Faculty Fellows model
- Development of worksite based employee health programs and other private/public partnerships
- Drug studies that integrate basic and clinical research or trials; focus areas for drug research that include basic and applied science
- Creation of a health educational resource hub for the community
- Development of consultative teams for school settings addressing such issues as illness prevention, healthy lifestyle changes, and prevention of violence
- Development of a retirement community with provision of health services
- Collaboration with the State of Rhode Island on Medicare and Medicaid research and policy

4. *Creation of a Shared Services Office*

The Shared Services Office, headed by a director and staffed with adequate personnel and resources, will oversee budgets, business operations, technology and data management, and the administrative aspects of contract management of experiential learning sites for all three colleges. In an era of limited resources, centralizing otherwise duplicate efforts will increase efficiency and reduce costs. It is intended that the Shared Services Office will improve support for colleges in areas such as outcome assessment, accreditation, and other administrative tasks, but that the management of the academic parts of these functions will continue to be done by the faculty in the departments and colleges. The Director will report to the Coordinating Dean of the Collaborative Executive Committee.

The following chart depicts the proposed structure.



Academic Policies and Procedures

The Planning Committee realizes that faculty may have various concerns about moving forward. In response, we have developed guidelines and concepts to safeguard faculty interests and to maintain continuity in key areas as policy evolves over time to meet group needs and interests. If the re-organization plan is approved, the committee is recommending that implementation teams of faculty be developed to create the transition plans and actions. We begin with an overriding policy statement, followed by coverage of more specific areas that cannot be exhaustive but rather is directed towards key areas.

- *Three-Year Moratorium on Potential Changes in Resource Allocation*
A transition period is necessary for the smooth integration of the academic units as faculty implementation teams work with academic leaders to develop the new organization. As a result, for the first three years of the Collaborative, there will be no negative changes in resources for the participating departments and colleges. These resources include budgets, faculty/instructor/staff positions, workload plans, teaching assistants, space and other related items. This transition period will decrease concerns about administrative change and provide time for essential long-term planning. It will also foster an environment of collaboration rather than competition, which is critical to the success of this endeavor.
- *Annual Review, Tenure, and Promotion.* All annual review, tenure and promotion processes remain unchanged as specified in the AAUP contract and agreed upon within the colleges and departments. The planning committee recognizes the importance of preserving current processes that generally function effectively and are consistent with the collective bargaining agreement, and wishes to avoid unnecessary change or added layers of review. As the Collaborative is established, it is anticipated that faculty may be engaging in more interdisciplinary research and teaching, as well as new service and outreach activities. As appropriate, departments and colleges may incorporate additional performance metrics to reflect these new faculty activities.
- *Workload Policies.* The leaders of the Collaborative must recognize not only the major importance of undergraduate teaching and related activities, but also the value of faculty effort associated with graduate level coursework, clinically-oriented degree programs, experiential learning, and interdisciplinary initiatives when considering overall workload. In addition, some faculty have disproportionately higher workloads than others. Faculty workloads may need to be adjusted to ensure that equity, quality education, and scholarly productivity are enhanced. Assistance offered by the Institute will also serve as a resource for faculty to support research agendas, grant writing, community partnerships, and curriculum development.
- *Overhead.* Policies will be maintained or implemented to promote collaboration among the colleges and the Institute in a manner that does not diminish existing and/or future funding potential among departments and principal investigators. To the contrary, a model will be established that encourages shared resources, and a support structure to assist faculty with grant submission, partnerships, and other initiatives.

- *Faculty in Participating Departments without Health Interests.* It is understood that across departments and colleges with a core or major commitment to health, there will be faculty whose interests and activities lie mainly or entirely in other areas. All faculty must be accorded the prerogative of participating or not participating in the area of health and allowed to pursue their academic interests in an unencumbered fashion as a valued and respected member of their department or college.

Opportunities and Areas of Future Consideration

The proposed structure is intended to reorganize URI's health units in a manner that truly and effectively facilitates collaborative efforts. Such a revised structure is expected to create exciting new opportunities for health research, education, outreach, and entrepreneurship by fostering novel thinking and innovation. Some areas to consider in achieving these goals include:

- *Recruitment and retention of faculty.* Salaries, start-up funds, relocation expenses, and workloads must be competitive in an effort to recruit and retain productive, contributing faculty in an already difficult fiscal market.
- *Physical location of existing departments/programs.* Despite a change in the academic structure, the physical locations of many of our existing health-related programs are scattered throughout the campus (and off-campus with the Nursing Education Center). Although it will be up to implementation committees to determine the details, we suggest that the Deans' offices of the three colleges as well as the Shared Services Office be located in one building (e.g., Pharmacy building, Independence Square, Fogarty Hall, the Cancer Prevention Research Center). Some shared services might also be located at the satellite office of the new Nursing Education Center.
- *Faculty interactions.* Interactions will need to be encouraged using methods that increase exposure to one another, such as dedicated physical meeting spaces, technology-assisted meeting spaces, regularly scheduled Collaborative meetings, and conferences.
- *Future faculty positions.* Faculty with cross-disciplinary expertise are increasingly valued in contemporary and evolving health models. Hence, when recruiting new faculty, considerable emphasis may be placed on the ability to contribute across departments and assume joint appointments, possibly even with the Institute. At the same time, it is imperative to maintain, restore and grow existing discipline-specific faculty needs, in particular those programs required to meet accreditation standards.
- *Resources.* Although funding cannot guarantee success, insufficient administrative support and resources can all but ensure failure. The initial implementation and continued existence of any restructuring, and of the Institute, require a commitment of adequate resources. To date, the Provost has committed the following resources to the reorganization:
 - A recent gift endowment to the University of \$750,000 will be allocated to the Collaborative. The yearly payout will help support graduate students.

- Initial support of the Institute through the provision of funds for hiring a director who will be a full professor with tenure in a home department in one of the health units.
- The Collaborative will receive some of the 55 new faculty positions that the Strategic Budget and Planning Council has recommended for investment over the next four years.
- *Faculty engagement within the Institute.* The Institute will have an open structure and will emphasize inclusion. Hence, *all* University faculty interested in such areas as health education, research, outreach, and entrepreneurship, are welcome to participate in the Institute, potentially as “Faculty Fellows.”
- *Roles of the Deans.* Revisions in the deans’ job descriptions (see Appendix B), including facilitation of collaborative activities and initiatives as a core responsibility, will require an adjustment period for all faculty and administrators, in particular among the associate deans. It is important to recognize the nature and impact of this significant change in performance expectations of leadership.
- *Cultural Change.* The proposed restructuring to a larger group of aligned programs in health will create a wide variety of supports and incentives for collaboration, but the transformation of opportunity and possibility into concrete accomplishments and true success will require a cultural change. Faculty will need time to recognize the benefits and not feel threatened with losing one’s own established line of research, funding, and/or area of expertise.
- *Ensuring continued support from alumni and program donors.* If donors perceive that the proposed reorganization will result in diminishing resources, support, and independence for particular programs, then fundraising will be negatively affected. However, there are strong reasons to believe that programs will be strengthened through collaborative efforts among the health disciplines. Such positive results should include attracting and producing stronger graduates who will be more competitive in the job market, and building programs that are more attractive to funding agencies. If donors come to share this positive view of the Collaborative and its various benefits, then the effects will be highly positive.

At the October 10 breakfast meeting with external constituents, there was much enthusiasm and excitement regarding a potential reorganization of our health programs. In particular, it was pointed out that this was not only a desirable action to take, but also a necessary one if we are to be successful in meeting society’s health challenges in the future. It is clear that both time and effort are required to engage with the support base regarding the advantages and strengths of the new organization. The faculty, Deans, Provost, and President will need to actively support and communicate the powerful vision of the Collaborative and the critical roles of the units that constitute the new organization. A new structure will call for a review of the capacities and strengths of the development officers. A suggested model is to have a senior director of development for the Collaborative with two or three development directors accountable to the senior director.

Transition Plan

The last part of the Phase II Health Planning Committee's charge was to propose a transitional plan to move from the current structure to the new structure. The following materials outline the recommended process for ensuring that units affected by a re-organization have a period to review the proposals as well as significant input in the approval of any changes. As stated earlier, we suggest that teams of faculty and academic leaders in the health areas be created to implement the new structure upon approval of the committee's recommendations.

The Provost's charge to the committee stated, "The report will be shared with the Provost Office, all health-related academic units, Faculty Senate Executive Committee, and the Council of Deans as well as other interested parties on campus. Please be assured that any proposed changes will be appropriately subjected to University shared governance review and approval processes."

Process of Approval and Timeline

- The Committee completes a draft report by end of summer and submits the report to the Provost (September 2014).
- The Committee meets with external constituents and incorporates input into the report (October, 2014)
- The report is released to the URI community with a public comment period (electronic posting and encourage comments/questions). During the comment period, members of the committee will visit with departments if requested. The Phase II committee will consider public comments for possible amendments to the proposal. (October-December, 2014)
- The committee will hold an open forum with internal constituencies to discuss the report (November). The Phase II Committee will consider feedback for possible amendments to the proposal.
- A final report and recommended structural reorganization will be completed in early February 2015. Colleges and departments that will be part of the Collaborative will vote on the proposal during the month of February, using the guidance provided by the President in his memo dated January 16, 2015. The vote is on the recommended proposal—no amendments will be allowed at this point.
- The University's Curricular Affairs Committee (CAC) considers the proposed re-organization and votes to approve/not approve. See Appendix C for the University Manual bylaw that establishes the CAC as having purview over this matter. (February-March, 2015)
- If CAC vote is positive, the proposal moves forward to the Faculty Senate, then the President, and then the Council for Postsecondary Education and the Board of Education (April-May)

Once approved through the process of shared governance, we recommend that an interim director be appointed for the Institute so that collaboration in certain areas might begin. In addition, the basic infrastructure of support staff transitions, marketing, website, etc. need to commence. Next, the search for new deans of the three colleges should be initiated. Lastly, the recruitment and hiring of a permanent Institute director will proceed.

The Planning Committee clearly recognizes that this proposal will not answer everyone's questions, and may not result in ideal outcomes overnight. The Collaborative is viewed as a work in progress that will change to meet the needs of the health and academic environments through frequent assessment and re-design.

Appendix A

Preliminary Research of the Committee

Prior to the committee developing models of organizational designs, it collected data on the numbers of students, faculty and staff in the health units on campus (Fall 2013 data). In addition, the committee did an analysis of the critical functions that would need to be performed in the organization, as well as brainstormed potential new areas of innovation and collaboration that would be stimulated by a collaborative structure.

Data on the number of students, faculty, and administrative/support staff (Fall 2013) were collected and are presented below.

Program	Faculty FTE	Number of Undergraduate Majors	Number of Graduate Majors	Total # students
College of Pharmacy	50.25	887	47	934
College of Nursing RN to BSN Program	27.81	888 175	111	999
College of Health Sciences (potential members)	82.33	2754	335	3089
Communicative Disorders	8.0	252	48	
Health Studies	0.5	213	0	
Kinesiology*	17.0	790	18	
Human Dev. & Family Studies	14.5	448	47	
Nutrition & Food Sciences*	7.67	209	22	
Physical Therapy	8.0	0	92	
Psychology*	26.66	842	108	
Total	160.39	4704	493	5022

***Includes enrollment in waiting programs**

Note: Numbers reflect filled positions and exclude faculty who are full time administrators.

Health Studies has 1.0 FTE tenure track position that is vacant.

The following table provides the current administrative and staff positions for each potential unit of the URI Academic Health Collaborative, their funding source, and any sharing of resources that currently is in place.

DEPARTMENT	POSITION TITLE	% TIME	FUND	SHARED WITH
Human Science and Services				
HSS Dean's Office	Dean	100%	100	
	Associate Dean	75%	100	EDC
	Assistant Academic Dean	100%	100	
	Associate Dean – Development	50%	100	NUR
	Business Manager	100%	100	
	Information Technologist	50%	100	Provost
	Executive Assistant I	100%	100	
	Senior Word Processing Typist	100%	100	
	Experiential Education Liaison Coordinator	50%	100	UC
	Academic Advisor	67%	100	UC
Center for Human Services	Fiscal Clerk	100%	500	
	Director	100%	500	
	Research Associate III	100%	500	
	Research Associate IV	100%	401	
Human Development & Family Studies	Fiscal Clerk	100%	100	
	Senior Word Processing Typist	100%	100	
	Coordinator Childhood Development Center	100%	100	
	Cooperative Extension Specialist	50%	100	CELS
	Senior Word Processing Typist (CDC)	100%	100	
	Coordinator, URI Family Clinic	100%	100	
Communicative Disorders	Senior Word Processing Typist	100%	100	
	Fiscal Clerk	50%	101	PT
	Clinical Director	100	100	
	Staff Audiologist	100	101	
Physical Therapy	Senior Word Processing Typist	100%	100	
	Fiscal Clerk	50%	101	CMD

Kinesiology	Senior Word Processing Typist	100%	100	
College of the Environment and Life Sciences				
Nutrition and Food Sciences	Scientific Research Grant Assistant	100%	100	
College of Arts and Sciences				
Psychology	Senior Word Processing Typist	100%	100	
	Senior Word Processing Typist	100%	100	
	Fiscal Clerk	100%	100	
Nursing				
	Dean	100%	100	
	Associate Dean Academic Affairs	49%	100	
	Associate Dean Development	50%	100	HSS
	Associate Dean External Affairs	49%	100/401/500	
	Assistant Dean	100%	100	
	Clinical Coordinator	100%	100	
	Senior Word Processing Typist	100%	100	
	Senior Word Processing Typist	100%	100	
	Senior Informational Technologist	100%	100	
	Budget Manager	50%	100	Library
	Fiscal Clerk	60%	100	
	Finance Director	50%	100	Pharm
	Executive Assistant	100%	100	
Pharmacy				
Dean's Office	Dean	100%	100	
	Assistant Dean Development	100%	100	
	Associate Dean Research and Graduate Programs	50%	100	BPS
	Associate Dean Academic and Student Affairs	50%	100	
	Finance Director	50%	100	Nursing

	Business Manager	100%	100	
	Executive Assistant I	100%	100	
	Fiscal Clerk/Coordinator	100%	100	
	Manager of Technology Services	100%	100	
	Web Content Strategist	10%	100	
	Grant Specialist	100%	110	
	Director Student Affairs	50%	100	PHP
	Coordinator Student Affairs	100%	100	
	Specialist, Continuing Professionals Development Program	100%	100	
	Senior Word Typist	100%	101	
Pharmacy Practice (PHP-2602)	Principal Clerk Stenographer	100%	100	
	Co-Director Patient Sim Lab	100%	100	
	Director of Experiential Learning	100%	100	
	Coordinator, Professional Experiential Education	100%	100	
	Coordinator Experiential Education	50%	100	
	Data Control Clerk	100%	100	
	Coordinator Pharmacy Outreach	100%	100	
	Coordinator Pharmacy Outreach	100%	100	
Biomedical Pharmaceutical Sciences (BPS-2606)	Coordinator, Experiential Ed Liaison	100%	100	
	Senior Word Processing Typist	100%	100	
	Animal Lab Technician I	100%	100	
	Senior Gardener	100%	100	
	Fiscal Manager, RI-INBRE	10%	110	
	Core Facility Assistant	100%	101	
	Technical II	100%	100	

This analysis indicates that sharing of support services across departments and colleges is already occurring as well as where there may be greater efficiencies in further centralization of some services.

Changes in the Numbers of Undergraduate Students in Health Units from Fall 2008 to Fall 2013

	Description	Fall 2008 Freshmen Deposits	Fall 2013 Freshmen Deposits	Freshmen 6 Year Delta	6 Year % Change		Fall 2008 All Students	Fall 2013 All Students		All Students 6 Year Delta	6 Year % Change
A&S	Psychology BA/BS*	177	127	-50	-28%		738	842		104	14%
CELS	Nutrition and Dietetics*	33	40	7	21%		194	209		15	8%
HSS	Communicative Disorders	28	56	28	100%		182	252		70	38%
	Health Studies		52					213		213	
	Kinesiology*	114	162	48	42%		577	790		213	37%
	Human Development & Family Studies	43	31	-12	-28%		456	448		-8	-2%
NUR	Nursing	105	208	103	98%		796	888		92	12%
PHAR	Pharmacy	83	126	43	52%		576	728		152	26%
	Pharmacy BPS		56					159		159	

***Includes enrollment in waiting programs**

Note: URI Total Paid Deposits: Comparisons of May 11, 2008-2012, May 20, 2013.

Oct 15 Institutional Research Data - includes 1st and 2nd major. Data available at www.uri.edu/ir

Changes in the Numbers of Graduate Students in Health Units from Fall 2008 to Fall 2013

	PhD Enrolled - Fall 2008-2013						Masters Enrolled - Fall 2008-2013					
	2008	2009	2010	2011	2012	2013	2008	2009	2010	2011	2012	2013
Psychology	77	85	86	84	92	82	21	20	21	30	22	26
Interdisciplinary Neuroscience PhD/MS					3	5					4	8
Nutrition and Food Sciences	1	0	1	2	2	2	30	27	27	26	21	22
Human Development							63	53	52	60	57	47
Speech Language Pathology							45	48	48	49	56	48
Kinesiology							16	18	18	18	23	18
Doctor of Physical Therapy	76	85	98	87	88	92						
Nursing	29	25	30	22	25	22	63	65	56	76	82	81
Doctor of Nursing Practice			2	5	5	8						
Pharmaceutical Sciences	42	42	44	43	39	33	10	11	14	13	14	14

Critical Functions of Proposed Health Organization

- *Clinical and internship Placements:* Placing and tracking students will need to continue at the department level. However, contract management, background checks, legal issues, data warehousing, and the development of team-based clinical experiences and internships could be done at the level of the Collaborative in a Shared Services Office. A Coordinator of Internships and Experiential Learning would be the responsible administrator of the centralized support, and this person would need to work closely with the departments and colleges. Additional resource needed: legal assistant who would work with University General Counsel.
- *Research and Grant Support:* Support provided at the Collaborative level for the entire unit and also within the proposed Institute for Integrated Health and Innovation (described below) for collaborative projects at the Institute level. The central research support will also help units outside of the Collaborative on a fee basis. Grant management support will be provided at the department and college levels. There will need to be close working relationships between the Collaborative level of research support and the departments, as well as the Collaborative level having strong links with the Institute.
- *Budget and Business Affairs:* This function should be located at the college level and in the Shared Services Office. All Human Resource functions should be at the Collaborative level.
- *Assessment and Accreditation.* Assessment of courses and programs need to be at the department and/or college level, but the information technology support and data warehousing of these functions need to be at the Shared Services Office. There need to be strong links between the Collaborative central support of these functions with the University's Institutional Research Office and the Office of Student Learning Outcomes, Assessment, and Accreditation (SLOAA).
- *Technology Support:* This should be at the Shared Services Office, ensuring that there is no duplication of effort and resources are planned for, purchased, and managed efficiently. These functions would include technology support for the simulation, research, computing, and teaching laboratories, including maintenance of equipment, software upgrades, licensing, safety measures, calibration of equipment.
- *Student Advising and Degree Audits:* These functions need to occur at the department and college levels.
- *Graduate Recruitment and Admissions:* Recruitment of students must happen at the department (program) level, with assistance of the Graduate School. There need to be strong links to the Graduate School.
- *Professional Licensure:* This function needs to be located at the level of the program (i.e., department or college)
- *Administrative Support (fiscal and clerical):* This support needs to be at every level, but many functions can be centralized for efficiency.
- *Community Service and Outreach:* External outreach must be at all levels.
- *Fundraising:* Deans and Development Officers at the Collaborative as well as college level will be responsible for fundraising.
- *Interdisciplinary Teaching Support:* This needs to happen at the departmental level but incentives and credit accounting systems will need to change to accommodate new models of interdisciplinary teaching. This activity will need to coordinate closely with Enrollment Services to ensure that E-campus can be programmed to

count multiple faculty contributions to a course. IDEA assessments should also reflect such involvement and allow for appropriate faculty teaching evaluations.

- *Simulation and Online Teaching:* The Shared Services Office will support the efficient use of centralized Simulations Labs and online teaching initiatives.
- *Marketing and Promotion of Health Programs:* This needs to be done at the Collaborative level with essential input from the departments and colleges.
- *Promotion and Tenure:* With the three-college model, no changes in the promotion and tenure process are anticipated. Goals to formally recognize interdisciplinary teaching and scholarship should be implemented and highly considered as valuable contributions.
- *Strategic Vision and Planning:* The Deans will work together at the Collaborative level, with input from faculty in the colleges and departments.
- *Multidisciplinary/Integrated Initiatives:* The Deans will work together at the Collaborative level, with input from faculty in the colleges and departments. The Institute Director will assist/collaborate when appropriate.
- *Clinics:* The development of new, integrated clinics will be part of the Institute. Some clinics will continue to be at the department level. Some clinics might be external to the University. Details on revenue sharing between departments and the Institute must be determined. Some successful models currently exist, and can serve as templates for future development.
- *Budgeting:* No change to the budget process is anticipated. The three Deans will continue to participate in budget hearings with the Provost. However, some routine fiscal tasks will be shifted from colleges into the Shared Services Office.

New Areas for Potential Development for the Academic Health Collaborative

The Phase II Planning Committee brainstormed a list of ideas that could be developed further in a collaborative spirit. We expect that faculty members who become part of the Collaborative will generate additional innovative ideas. Some of these ideas and initiatives might form the basis for the work of the Institute, but others might be embedded in the colleges or in the Shared Services Office, depending on if and how they evolve. However, we believe that further development of any of these ideas will require collaborative processes and approaches to have sustained impact.

a. Research Areas

- Sharing research expertise, common areas of interest, theoretical models, qualitative and quantitative research design approaches, and forming research clusters.
- Developing common measures and methods and models
- Sharing central space and resources; having a physical center helps secure grants by listing resources available;
- Seeking funds from AHRQ, CMS, HRSA, NIH, PCORI, and others that support interdisciplinary projects
- Sharing statistical support expertise
- Collaborating on identifying grant opportunities
- Publishing a URI-sponsored journal

b. Teaching and Students

- Developing interprofessional education initiatives that help students understand what other health professionals do
- Developing living and learning communities that are health-related not major-related
- Creating interdisciplinary Grand challenge health classes
- Teaching students how to communicate across health specialties
- Promoting ethics and multicultural competence in the curriculum by offering a course or two that all majors take.
- Assigning faculty from one discipline to teach in another discipline every semester

c. Areas to Explore for Development

- Health Informatics
- Healthcare Management & Leadership
- Healthcare Outcomes Assessment
- Integrated graduate programs
- Social determinants of health and well-being

d. Outreach

- Collaborate with and outreach to the community
- Create a web resource center for community members

- Build a local clinic to enhance community based participatory, student training, and community outreach
- Develop worksite based employee health programs
- Develop private-public partnerships
- Create a facility that all people can come to (exercise, nutrition....) that is convenient and has parking
- Provide consultant services
- Provide continuing education for professionals
- Create a web site that highlights the expertise of faculty
- Provide interventions in school settings
- Develop a retirement community with provision of health services
- Develop a community that allows for “aging in place”

e. Marketing and Promotion

- Develop web site and logos for the Collaborative
- Create interactive kiosks
- Develop products such as apps that can be given out to make our name known
- Have a social media presence

f. Expertise in Simulation

- Expand our expertise

Appendix B

Draft Job Descriptions

Draft Position Description

Dean, College of Health Sciences and Academic Health Collaborative Executive Committee

TITLE: Dean, College of Health Sciences and Academic Health Collaborative Executive Committee

DIVISION: Academic Affairs

REPORTS TO: Provost and Vice President for Academic Affairs

GRADE: 22

SUPERVISES: Professional, technical and clerical support staff

BASIC FUNCTION:

Provide leadership to the education, research, community engagement, and fundraising efforts of the College of Health Sciences within the Academic Health Collaborative. In addition, along with the Dean of the College of Pharmacy and the Dean of the College of Nursing, serve as a member of the Academic Health Collaborative Executive Committee. As Dean of Health Sciences, work with the faculty of the College to ensure contemporary, robust, and forward-looking educational and research programs relevant to the evolving roles of health and healthcare in the 21st century, including interprofessional education, experiential learning, advancing externally funded programs of research, and sustaining the College's excellent reputation throughout the state, region, nation, and world. As a member of the Academic Health Collaborative Executive Committee, work with faculty across all health programs within the Collaborative to create an interdisciplinary vision for "health" at URI, a health programs strategic plan, and financial investment strategy in support of health education, research, and outreach at the University with attention to contemporary issues, such as population health, recognition and elimination of health disparities, and health promotion. In addition, as a member of the Executive Committee, provide oversight of the Institute for Integrated Health and Innovation that will facilitate collaboration among multidisciplinary faculty, students, and community health agencies in integrated health programs. Serve as a member of the Provost's leadership team, actively supporting the missions and goals of the University, the Health Collaborative, and the College. Aggressively promote the University's commitment to diversity, equity, and justice. As a member of the Council of Deans, participate in the development of the strategic priorities of the Division of Academic Affairs. Assure that the goals of the College align with those of the Health Collaborative and the University, and serve as the principal advocate for the faculty, staff, and students of the College of Health Sciences.

ESSENTIAL DUTIES AND RESPONSIBILITIES:

Co-lead the Academic Health Collaborative, including creating an integrated vision, strategic plan, and financial plan, with the Dean of Pharmacy and the Dean of Nursing.

Provide oversight with the Dean of Pharmacy and the Dean of Nursing of the Institute for Integrated Health and Innovation, in multidisciplinary education, research, and outreach programs

Responsible for management of the College of Health Sciences, including academic planning, budgeting, resource development, and implementation of University academic and administrative policies. Oversee faculty recruitment in compliance with Affirmative Action policies and procedures.

Provide leadership of faculty in developing and implementing academic and professional goals in teaching, scholarship, research and service. Responsible for faculty promotion and tenure.

Participate in the Council of Deans and facilitate interdisciplinary efforts across the Health Collaborative and develop partnerships within and outside the University.

Actively represent the College and the Academic Health Collaborative to internal and external constituencies by developing effective relationships on a local, state, national and international level.

Collaborate with healthcare organizations in the community to meet interprofessional education needs of students through provision of integrated patient care services, as well as to foster the mission of the College, the Health Collaborative, and University.

Provide leadership in fundraising efforts in the College and Health Collaborative and enhancement of alumni and community relationships.

Promote a climate of accessibility to students and faculty.

Encourage diversity among faculty, staff and students.

Demonstrate personal and intellectual integrity and leadership in promoting ethical standards within the College and Academic Health Collaborative in professional practice.

OTHER DUTIES AND RESPONSIBILITIES:

Within area of responsibility, oversee adherence to rules, regulations and procedures mandated and/or recommended by the NCAA and the University.

Perform other duties as assigned.

LICENSES, TOOLS AND EQUIPMENT:

Personal computers, printers and word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

Earned doctorate in a relevant health-related field from an accredited institution of higher education required. Must be qualified to obtain licensure in one's field, if relevant, in Rhode Island, and possess a minimum of three and preferably five years of successful

administrative, managerial, and planning experience in a complex academic setting with a record of increasing responsibility. The following are also required: significant teaching experience, preferably at both the undergraduate and graduate levels, and a record of a sustained scholarly/research program; demonstrated accomplishments in education, research, clinical practice, and community service commensurate with a tenured professorial academic rank; evidence of collaborative leadership style, fundraising capabilities, and commitment to the advancement of health disciplines and effective interpersonal and constituent relations; evidence of personal integrity and intellectual inquiry along with the ability to lead a college with strong participatory management skills; effective interpersonal and communication skills, specifically in the areas of students, university-based faculty and administration, and health-related professionals.

**ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY
ACCOMMODATE INDIVIDUALS WITH DISABILITIES.**

Draft Position Description

Dean, College of Nursing and Academic Health Collaborative Executive Committee

TITLE: Dean, College of Nursing and Academic Health Collaborative Executive Committee

DIVISION: Academic Affairs

REPORTS TO: Provost and Vice President for Academic Affairs

GRADE: 22

SUPERVISES: Professional, technical and clerical support staff

BASIC FUNCTION:

Provide leadership to the education, research, community engagement, and fundraising efforts of the College of Nursing within the Academic Health Collaborative. In addition, along with the Dean of the College of Pharmacy and the Dean of the College of Health Sciences, serve as a member of the Academic Health Collaborative Executive Committee. As Dean of Nursing, work with the faculty of the College to ensure contemporary, robust, and forward-looking educational and research programs relevant to the evolving roles of health and healthcare in the 21st century, including interprofessional education, experiential learning, advancing externally funded programs of research, and sustaining the College's excellent reputation throughout the state, region, nation, and world. As a member of the Academic Health Collaborative Executive Committee, work with faculty across all health programs within the Collaborative to create an interdisciplinary vision for "health" at URI, a health programs strategic plan, and financial investment strategy in support of health education, research, and outreach at the University with attention to contemporary issues, such as population health, recognition and elimination of health disparities, and health promotion. In addition, as a member of the Executive Committee, provide oversight of the Institute for Integrated Health and Innovation that will facilitate collaboration among multidisciplinary faculty, students, and community health agencies in integrated health programs. Serve as a member of the Provost's leadership team, actively supporting the missions and goals of the University, the Health Collaborative, and the College. Aggressively promote the University's commitment to diversity, equity, and justice. As a member of the Council of Deans, participate in the development of the strategic priorities of the Division of Academic Affairs. Assure that the goals of the College align with those of the Health Collaborative and the University, and serve as the principal advocate for the faculty, staff, and students of the College of Nursing.

ESSENTIAL DUTIES AND RESPONSIBILITIES:

Co-lead the Academic Health Collaborative, including creating an integrative vision, strategic plan, and financial plan, with the Dean of Pharmacy and the Dean of Health Sciences.

Provide oversight with the Dean of Pharmacy and the Dean of Health Sciences of the Institute for Integrated Health and Innovation, in multidisciplinary education, research, and outreach programs

Responsible for management of the College of Nursing, including academic planning, budgeting, resource development and implementation of University academic and administrative policies. Oversee faculty recruitment in compliance with Affirmative Action policies and procedures.

Provide leadership of faculty in developing and implementing academic and professional goals in teaching, scholarship, research and service. Responsible for faculty promotion and tenure.

Participate in the Council of Deans and facilitate interdisciplinary efforts across the Health Collaborative and develop partnerships within and outside the University.

Actively represent the College and the Academic Health Collaborative Executive Committee to internal and external constituencies by developing effective relationships on a local, state, national and international level.

Collaborate with healthcare organizations in the community to meet interprofessional education needs of students through provision of integrated patient care services, as well as to foster the mission of the College, the Health Collaborative, and University.

Provide leadership in fundraising efforts in the College and the Academic Health Collaborative and enhancement of alumni and community relationships

Promote a climate of accessibility to students and faculty.

Encourage diversity among faculty, staff and students.

Demonstrate personal and intellectual integrity and leadership in promoting ethical standards within the College and the Academic Health Collaborative and in professional practice.

OTHER DUTIES AND RESPONSIBILITIES:

Within area of responsibility, oversee adherence to rules, regulations and procedures mandated and/or recommended by the NCAA and the University.

Perform other duties as assigned.

LICENSES, TOOLS AND EQUIPMENT:

Personal computers, printers and word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

Earned doctorate from an accredited institution of higher education required, nursing preferred. Must be qualified to obtain nursing licensure in Rhode Island, and possess a minimum of three and preferably five years of successful administrative, managerial, and planning experience in a complex academic setting with a record of increasing responsibility. The following are also required: significant teaching experience, preferably at both the undergraduate and graduate levels, and a record of a sustained

scholarly/research program; demonstrated accomplishments in education, research, clinical practice, and community service commensurate with a tenured professorial academic rank; evidence of collaborative leadership style, fundraising capabilities, and commitment to the advancement of health disciplines and effective interpersonal and constituent relations; evidence of personal integrity and intellectual inquiry along with the ability to lead a college with strong participatory management skills; effective interpersonal and communication skills, specifically in the areas of students, university-based faculty and administration, and health-related professionals.

**ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY
ACCOMMODATE INDIVIDUALS WITH DISABILITIES.**

Draft Position Description

Dean, College of Pharmacy and Academic Health Collaborative Executive Committee

TITLE: Dean, College of Pharmacy and Academic Health Collaborative Executive Committee

DIVISION: Academic Affairs

REPORTS TO: Provost and Vice President for Academic Affairs

GRADE: 22

SUPERVISES: Professional, technical and clerical support staff

BASIC FUNCTION:

Provide leadership to the education, research, community engagement, and fundraising efforts of the College of Pharmacy within the Academic Health Collaborative Executive Committee. In addition, along with the Dean of the College of Nursing and Dean of the College of Health Sciences, serve as a member of the Academic Health Collaborative Executive Committee. As Dean of Pharmacy, work with the faculty of the College to ensure contemporary, robust, and forward-looking educational and research programs relevant to the evolving roles of health and healthcare in the 21st century, including interprofessional education, experiential learning, advancing externally funded programs of research, and sustaining the College's excellent reputation throughout the state, region, nation, and world. As a member of the Academic Health Collaborative Executive Committee, work with faculty across all health programs within the Collaborative to create an interdisciplinary vision for "health" at URI, a health programs strategic plan, and financial investment strategy in support of health education, research, and outreach at the University with attention to contemporary issues, such as population health, recognition and elimination of health disparities, and health promotion. In addition, as a member of the Executive Committee, provide oversight of the Institute for Integrated Health and Innovation that will facilitate collaboration among multidisciplinary faculty, students, and community health agencies in integrated health programs. Serve as a member of the Provost's leadership team, actively supporting the missions and goals of the University, the Health Collaborative, and the College. Aggressively promote the University's commitment to diversity, equity, and justice. As a member of the Council of Deans, participate in the development of the strategic priorities of the Division of Academic Affairs. Assure that the goals of the College align with those of the Health Collaborative and the University, and serve as the principal advocate for the faculty, staff, and students of the College of Pharmacy.

ESSENTIAL DUTIES AND RESPONSIBILITIES:

Co-lead the Academic Health Collaborative, including creating an integrative vision, strategic plan, and financial plan, with the Dean of Health Sciences and the Dean of Nursing

Provide oversight with the Dean of Nursing and the Dean of Health Sciences of the Institute for Integrated Health and Innovation, in multidisciplinary education, research, and outreach programs

Responsible for management of the College of Pharmacy, including academic planning, budgeting, resource development, and implementation of University academic and

administrative policies. Oversee faculty recruitment in compliance with Affirmative Action policies and procedures.

Provide leadership of faculty in developing and implementing academic and professional goals in teaching, scholarship, research and service. Responsible for faculty promotion and tenure.

Participate in the Council of Deans and facilitate interdisciplinary efforts across the Health Collaborative and develop partnerships within and outside the University.

Actively represent the College and the Academic Health Collaborative to internal and external constituencies by developing effective relationships on a local, state, national and international level.

Collaborate with healthcare organizations in the community to meet interprofessional education needs of students through provision of integrated patient care services as well as to foster the mission of the College, Academic Health Collaborative, and University.

Provide leadership in fundraising efforts in the College and the Health Collaborative and enhancement of alumni and community relationships

Promote a climate of collegiality and accessibility among students, staff, and faculty.

Encourage diversity among faculty, staff and students.

Demonstrate personal and intellectual integrity and leadership in promoting ethical standards within the College and the Academic Health Collaborative and in professional practice.

OTHER DUTIES AND RESPONSIBILITIES:

Within area of responsibility, oversee adherence to rules, regulations and procedures mandated and/or recommended by the NCAA and the University.

Perform other duties as assigned.

LICENSES, TOOLS AND EQUIPMENT:

Personal computers, printers; word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

A degree in pharmacy with eligibility for pharmacy licensure in Rhode Island. A Pharm.D., M.D., or Ph.D. in pharmaceutical or biomedical sciences is strongly preferred. A demonstrated understanding of contemporary issues and opportunities in the rapidly changing areas of health and healthcare in the nation, including issues related to healthcare organizations, community health, and the competitive nature of pharmacy education and practice. A demonstrated commitment to and record of collaboration, building partnerships, advancement and fund-raising, and working across disciplinary lines to develop and promote programs.

The following are also required: 1) experience, achievement, and leadership related to pharmacy academia (preferred), industry, or practice; 2) a record of scholarly accomplishment in the fields of pharmacy or biomedical sciences relevant to the mission

and the goals of the College; 3) administrative experience in academic, private, or public sector pharmacy programming, including budget responsibility, human resources, and line management; 4) demonstrated comprehensive understanding of pharmacy education, research, and outreach; 6) a commitment to and demonstrated success in advancing diversity, inclusion, and equity, including an understanding of gender and multicultural issues; 7) demonstrated understanding of issues in higher education, including management and leadership skills necessary for a public learning-centered research university; 8) evidence of a professional affiliation in pharmacy organizations and/or communities; 9) demonstrated ability to create and sustain an academic culture aimed at attainment of excellence in education, research, and outreach; 10) experience and ability in promoting and marketing academic programs and The University of Rhode Island; 11) understanding of, and experience in, pharmacy academic program accreditation processes; 12) a demonstrated scholarly concern for the pharmacy profession in general, and for diverse aspects of pharmacy practice in particular; 13) a demonstrated entrepreneurial spirit and collaborative leadership skills; 14) excellent communication skills.

**ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY
ACCOMMODATE INDIVIDUALS WITH DISABILITIES.**

Draft Position Description

Associate Dean (Generic)

TITLE: Associate Dean
DIVISION: Academic Affairs
REPORTS TO: Dean (Pharmacy/Nursing/Human Sciences)
GRADE: 18
SUPERVISES: Professional, technical and clerical support staff

BASIC FUNCTION:

Responsible for the day-to-day activities of the College, functioning as the chief operating officer. Oversee and support the internal affairs of the College, coordination of support staff, college committees, faculty generated proposals, junior faculty mentoring program, routinely-occurring activities such as commencement; undergraduate, professional degree and graduate curriculum; graduate admissions; personnel searches and management; program accreditations; and new student recruitment and retention activities. Assist the Dean with strategic and budget planning, public relations, annual review and other duties as assigned.

ESSENTIAL DUTIES AND RESPONSIBILITIES:

Assist and advise the Dean on all matters of administration including strategic planning, budget preparation and implementation, personnel matters, including both faculty and non-faculty hiring, promotion, tenure, salary increases, terminations, salary review; planning; and program evaluation and review.

Oversee graduate and undergraduate academic programs.

Promote, support and identify resources for Interprofessional Education (IPE), cross-department collaboration, and cross-College programs.

Oversee compliance with accreditation programs and regulatory requirements.

Assist and support faculty development activities.

Coordinate and support College committees.

Oversee College publications and website development.

Oversee or support chairs/director (if applicable) in faculty assignments, assessment and development.

Perform academic scheduling and resource allocation to meet curricular needs.

Coordinate scholastic standing and program retention requirements.

Coordinate links for students to University Services (e.g. Disability Services, Counseling Center)

Represent the College on institutional committees, at assigned University functions, and at designated off-campus events.

Perform general administrative and management functions on behalf of the Dean. Act as the Dean, as assigned, or for matters requiring attention when the Dean is not available.

OTHER DUTIES AND RESPONSIBILITIES:

Perform other duties as assigned.

LICENSES, TOOLS AND EQUIPMENT:

Personal computers, printers, word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

An earned doctorate or equivalent required. Must be a tenured University of Rhode Island upper associate or full professor. Must have significant experience in higher education in faculty roles and experience in or demonstrated potential for administration. Proven leadership experience is essential (e.g. department chair, graduate program director, principal investigator of a major grant, director of a significant program). Must have demonstrated ability to communicate effectively orally and in writing. Must be able to organize, coordinate and supervise staff. Must be able to interpret institutional policies, plans, objectives, and rules and regulations and communicate the interpretation to the colleagues. Must be able to prepare and present detailed studies and reports. Must possess strong interpersonal skills and be able to prepare and deliver oral presentations before small, medium and large groups of people. Significant record of scholarship is preferred.

ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY ACCOMMODATE INDIVIDUALS WITH DISABILITIES.

Draft Position Description

Director of Shared Services, Academic Health Collaborative

TITLE: Director of Shared Services, Academic Health Collaborative

DIVISION: Academic Affairs

REPORTS TO: Administrative Dean, Academic Health Collaborative

GRADE: TDB

SUPERVISES: Professional, technical, and support staff

Basic Function:

Direct the operations of informatics, business services, and experiential learning. Oversee budget development for the Colleges of Health Sciences, Nursing, and Pharmacy.

Essential Duties and Responsibilities:

Direct the operations of the shared services of informatics, business operations, and experiential learning among three Colleges. Coordinate the shared service activities to ensure efficient and seamless operation.

Serve as the liaison between shared services personnel and the Deans of the Colleges of Health Sciences, Nursing and Pharmacy.

Supervise and evaluate the Managers of Informatics, Business Operations, and Experiential Learning.

Work with the Deans to develop a budget for each College. Ensure accuracy in budget preparation and monitoring for salaries, indirect cost rates, services and supplies, and cost sharing.

Oversee and implement the informatics needed by the three Colleges, striving to ensure that leading technologies are available and used by faculty, staff, and students. Work with the University's IT department to ensure faculty and staff requirements are met.

Assist in contracting of experiential learning sites for undergraduate and graduate students. Develop and coordinate experiential learning sites and negotiate financial compensation their use. Work with the University's legal department to develop and maintain a standard contract and contract processing procedure for all experiential learning sites. Maintain updated signed contracts with experiential learning sites. Develop quality assurance programs with Colleges for the sites including HIPAA and FERPA training for students and faculty.

Other Duties and Responsibilities:

Perform other duties as assigned.

LICENSES, TOOLS, AND EQUIPMENT:

Personal computer, printers, and word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

M.S. degree in business, information technology or related field. Must have excellent written and verbal communication, analytic, and organizational skills. Excellent problem solving skills to overcome obstacles that may prevent the Academic Health Collaborative from meeting goals. A minimum of 5 years in a supervisory position.

**ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY
ACCOMMODATE INDIVIDUALS WITH DISABILITIES.**

Draft Position Description

Manager of Information Technology and Data Management

TITLE: Manager of Information Technology and Data Management, Academic Health Collaborative
DIVISION: Academic Affairs
REPORTS TO: Director of Shared Services, Academic Health Collaborative
GRADE: TBD
SUPERVISES: Professional, technical, and support staff

Basic Function:

Direct the operations of information technology and data management for the Academic Health Collaborative including teaching support (software including simulations, teaching laboratories); office support (hardware, software), research support (databases, data support, assessment, outcomes); website design and maintenance; accreditation (data, support); and external requirements (HIPAA, FERPA).

Essential Duties and Responsibilities:

Plan, develop, and manage the technology-based services for teaching and learning. Supervise and evaluate the work of staff members who maintain and support teaching hardware, software, simulations, and facilities.

Plan, develop, and manage the technology-based operations for faculty and staff not available from University IT services. Oversee the purchase, installation, and operation of all computer hardware and software in compliance with University's guidelines to ensure a productive environment. Supervise and evaluate the work of staff members who maintain and support all computer hardware and software for faculty and staff.

Support computer-related hardware and software needs of research faculty. Assist and support faculty in providing resources to manage large and small data sets in accordance with grant awards.

Oversee the development and maintenance for the Academic Health Collaborative and all teaching, research, and outreach units. Supervise and evaluate the work of staff members who create and maintain websites.

Plan and oversee collection of data for accreditation and assessment including surveys of students and employers. Determine and update common information/data for accreditation reviews of programs.

Oversee all operations to ensure compliance with HIPAA and FERPA requirements.

Other Duties and Responsibilities:

Perform other duties as assigned.

LICENSES, TOOLS, AND EQUIPMENT:

Personal computer, printers, and word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

M.S. degree in information technology or related field. Must have excellent written and verbal communication, analytic, and organizational skills. Excellent problem solving skills to overcome obstacles that may prevent the Academic Health Collaborative from meeting goals. A minimum of 3 years in information technology and supervision.

**ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY
ACCOMMODATE INDIVIDUALS WITH DISABILITIES.**

Draft Position Description

Manager of Business Operations

TITLE: Manager of Business Operations, Academic Health Collaborative
DIVISION: Academic Affairs
REPORTS TO: Director of Shared Services, Academic Health Collaborative
GRADE: TBD
SUPERVISES: Technical, and support staff

Basic Function:

Direct the business operations for Academic Health Collaborative including oversight of College and Departmental Budgets, supervision of fiscal staff, and grant support.

Essential Responsibilities and Duties:

Advises and assists department chairs in a variety of matters pertaining to their human resource, fiscal, and administrative affairs.

Implement the budget as delivered by the Deans of the Colleges and monitor the use of money and other resources. Work with Department Chairs in the determination of needs and allocation of funds.

Coordinates the purchase of common resources among departments to ensure fiscal responsibility.

Develop and manage a fiscal team within each of the individual Colleges to provide support for all fiscal activities. Utilize training opportunities and management techniques to ensure efficient office operations. Supervise and evaluate the work of staff members who process purchasing, personnel, travel, and other fiscal requests.

Ensures accuracy in budget preparation and the monitoring of budgets for grant funding outside of the Institute. Works with PI in the development of the budget (pre-award) and the use of money post-award.

Other Duties and Responsibilities:

Perform other duties as assigned.

LICENSES, TOOLS, AND EQUIPMENT:

Personal computer, printers, and word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

B.S. degree in accounting, business, or related field. Must have excellent written and verbal communication, analytic, and organizational skills. A minimum of 3 years in fiscal management and employee supervision.

**ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY
ACCOMMODATE INDIVIDUALS WITH DISABILITIES.**

Draft Position Description

Manager of Experiential Learning

TITLE: Manager of Experiential Learning, Academic Health Collaborative
DIVISION: Academic Affairs
REPORTS TO: Director of Shared Services, Academic Health Collaborative
GRADE: TBD
SUPERVISES: Professional and support staff

Basic Function:

Assist faculty of the Academic Health Collaborative at experiential learning sites. Identify experiential learning sites, student intern placement, oversee the quality of internship sites and conduct audits of internship sites in accordance with program accreditation standards. Interface with the Center for Career and Experiential Education.

Essential Responsibilities and Duties:

Work with Program Internship Directors and coordinate placement sites for experiential learning.

Identify and place the appropriate students within each site. Maintain a master list of student placements annually.

Evaluate experiential learning activities for use in assessment and accreditation documentation.

Assist academic programs with the development of common materials for accreditation.

Coordinate contracting of experiential learning sites for undergraduate and graduate students. Develop and coordinate experiential learning sites and work with the University's legal department to develop and maintain a standard contract and contract processing procedure for all experiential learning sites. Maintain updated signed contracts with experiential learning sites.

Other Duties and Responsibilities:

Perform other duties as assigned.

LICENSES, TOOLS, AND EQUIPMENT:

Personal computer, printers, and word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

B.S. degree in adult education, college student personnel, business, or related field. Must have excellent written and verbal communication, analytic, and organizational skills. A minimum of 3 years in higher education.

**ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY
ACCOMMODATE INDIVIDUALS WITH DISABILITIES.**

Draft Position Description

Director of the Institute of Integrated Health and Innovation

TITLE: Director of the Institute of Integrated Health and Innovation, Academic Health Collaborative
DIVISION: Academic Affairs
REPORTS TO: Academic Health Collaborative Executive Committee
GRADE: TBD
SUPERVISES: Professional, technical, and support staff

Basic Function:

Provide leadership to the education, research, outreach, and entrepreneurial efforts of the Academic Health Collaborative. Work with faculty across all health programs to create an interdisciplinary vision for health at URI.

Essential Responsibilities and Duties:

Lead a multidisciplinary institute committed to integrated and collaborative activities within and across health sciences, services, studies and entrepreneurship.

Collaborate closely with Deans of the three health Colleges in the Academic Health Collaborative, coordinating activities and initiatives across the three major missions/undertakings of the Institute and Health Collaborative as a whole: research, education, and service, placing strong emphasis on integrated and coordinated activities within and across these areas, e.g., cross-disciplinary research integrating multiple areas of health; design and implementation of educational modules serving students across multiple departments and disciplines; creation and implementation of integrated health services on the URI campus.

Provide leadership for faculty, students and staff collaborating on one or more of the three major functions of the Institute.

Help create innovative approaches to cross-fertilization and integration of projects to serve multiple core purposes/missions simultaneously, e.g., service and training clinics generating data for research and providing educational placements for undergraduate and graduate students across disciplines; student placements creating opportunities for data gathering for research; research initiatives including a training component for junior faculty members.

Identify and implement areas for shared resources across the Collaborative, such as quantitative analyses/methodology, design and implementation of digital technology, and health finance; that attract leading faculty in these areas and maximally utilize their expertise to assist educational, service, and research activities across the Collaborative

Work closely with Associate Director of the Institute on planning and implementing range of shared resources to support collaboration (e.g., grant management, IT, quantitative analyses, and public-private partnership.

Lead Institute Advisory Board with public and private members who can identify and implement opportunities for funding, public-private partnerships, service and training sites.

Represent the Institute at the Academic Health Collaborative, University, State and National levels.

Serve as role model with major funded projects that integrate two or more major functions, e.g., research, training and service.

Help develop and implement short- and long-term plans to initiate and expand educational, service, and research activities that tap into shared faculty interests and expertise across the Health Collaborative and thereby maximize faculty involvement and collaboration.

Create supports and training opportunities for professional development, with an emphasis on junior faculty members developing their areas of expertise and senior faculty developing collaborative areas.

Other Duties and Responsibilities:
Perform other duties as assigned.

LICENSES, TOOLS, AND EQUIPMENT:

Personal computer, printers, and word processing, database management and spreadsheet software.

ENVIRONMENTAL CONDITIONS:

This position is not substantially exposed to adverse environmental conditions.

QUALIFICATIONS:

Earned doctorate in a relevant health-related field from an accredited institution of higher education required. The following are also required: experience with securing extramural funding, successful leadership of an interprofessional organization/initiative, excellent writing and communicative skills.

**ALL REQUIREMENTS ARE SUBJECT TO POSSIBLE MODIFICATION TO REASONABLY
ACCOMMODATE INDIVIDUALS WITH DISABILITIES.**

Appendix C

RELEVANT UNIVERSITY MANUAL LANGUAGE

4.11.10 Membership in the University Faculty, also referred to as the General Faculty, shall be based on appointment by the President and on direct participation in or supervision of any of the following activities: teaching, librarianship, and research, within the University. The General Faculty shall consist of continuing professors, associate professors, assistant professors, instructors ([see 7.10.10](#)); the President, the Provost, the Vice President for Research and Economic Development, the Vice Provost(s) and the academic dean of each college or school.

4.13.10 Clinical appointments shall be classified according to equivalent faculty title and shall be persons on limited appointments at the University supported by state, private or federal agencies. Clinical appointees may have faculty status and rank, but shall not have tenure. [[Administrative January 2013](#)]

4.21.10 Voting Membership. All members of the University faculty shall have voting privileges.

University Manual Bylaws: Language regarding powers of the Curricular Affairs Committee

4.75 The Curricular Affairs Committee. This committee shall study and make recommendations to the Faculty Senate on the following matters: the establishment, abolition, division or merger of colleges and Schools of the University, at the undergraduate and graduate level, including the College of Continuing Education; the establishment or abolition of undergraduate degrees or credit certificates awarded by the University in any of its divisions; the establishment, abolition, division or merger of departments of instruction, or other units or areas affecting instruction; the establishment, at the undergraduate level, of new experimental and interdisciplinary instructional programs not confined to one college; the establishment, modification or abolition of curriculums or programs of study leading to degrees or credit certificates at the baccalaureate level or lower, with due regard to requirements for accreditation when applicable; the introduction, modification or abolition of individual courses intended primarily for undergraduate instruction; unresolved problems arising in connection with the routine editing of course and curriculum numbers, titles, and descriptions to appear in the University Catalog.

4.76 In addition, the committee shall initiate action on matters within its jurisdiction by referring them to the faculties of colleges and Schools concerned, shall review all such proposals originating in college faculties, the Senate or elsewhere and shall recommend procedures that permit matters within its jurisdiction to be handled expeditiously.