To: Members of the Faculties of Medicine and Hygiene and Public Health

Subject: The Johns Hopkins University Program in the Allied Health Sciences

This memorandum sets forth a summary proposal on the above subject, taking into account the extensive exploration by faculty committees in the last three years and discussions in the Advisory Boards of Medicine and Hygiene and the Academic Council.

The purpose of the proposed program is the education at the upper division baccalaureate and master's levels of professional personnel in the several fields related to medicine and the delivery of health care. This goal would be served by a joint effort of the three Johns Hopkins Medical Institutions, with cooperation by appropriate members of the Faculty of Arts and Sciences. This effort would be under the general administrative supervision of the Medical Planning and Development Committee, composed of the Presidents of the University and Hospital and the Deans of Medicine and Hygiene and Public Health, and receive its academic guidance from an appropriately constituted Policy Committee, chaired by the Provost. With respect to nursing education, the academic responsibility would rest with nursing specialists appointed to the faculty in each interested department in the School of Medicine and the School of Hygiene. These persons, and certain others, would constitute a subcommittee of the Policy Committee for the planning and supervision of the curriculum in nursing.

This proposal is presented for consideration at your respective meetings of October 21st. Thereafter, the matter will be placed before the Advisory Boards of Medicine and Hygiene for formal action. If generally approved, it will then be submitted to the Board of Trustees. The subsequent step would be to recruit a Dean of Allied Health Programs with the guidance of an appropriately constituted search committee. His first task, in turn, would be, with the help of interested faculty members and administrative officers, to develop detailed program recommendations, including specific curricula and requirements for personnel, space, and financial resources. Particular consideration would be given to the possibility of a special role for Goucher College in program development. Serious and continuing attention would also be given to the eventual establishment of a new academic division of the University, or to other organizational arrangements of the type sometimes described as a "College of Health Sciences," at such time as success of the proposed program might warrant. In any event, there would be a review of the organizational arrangements for the Allied Health Sciences within five years of the program's initiation.
This matter is of importance to all branches of the Hopkins family. Consequently, it is hoped that you will find it possible to discuss it fully with your faculty colleagues, within departments and otherwise, as we look forward to the general faculty meeting of October 21st.

Background. The question of educational programs for the allied health professions has been debated within Hopkins for many years. The present consideration of the matter was begun almost two years ago. In February 1967, an ad hoc committee of the Faculty of Medicine, under the chairmanship of Dr. Russell Morgan, recommended that the University establish a new School of Allied Health Sciences. This recommendation was discussed and approved in principle by the Advisory Board of the School of Medicine on April 24, 1967, and in June of that year an ad hoc University-wide committee, also chaired by Dr. Morgan, was appointed to seek ways of implementing the action of the Advisory Board. In the course of its work, this committee, subsequently enlarged, undertook a feasibility study under the direction of Dr. John P. Young, Associate Provost of the University for Planning and Advanced Policy Studies, that was completed in December 1968. This document was discussed in an informal joint meeting of the Advisory Boards of Medicine and Hygiene and the Academic Council of the Faculty of Arts and Sciences in January of this year. The committee submitted its recommendations to the President of the University in the late spring. Discussion by the President and academic administrative officers of the University resulted in the President's memorandum of August 5th which was discussed in a second joint informal meeting of the Advisory Boards and the Academic Council on September 6th. This eventuated in a revised memorandum of September 22nd which was the basis of discussion in the September Advisory Boards meeting and of the present document.

Premises. All of the discussions in recent years have concurred in one major conclusion. This is that there is both a need and an opportunity for a new Johns Hopkins educational venture in the allied health fields. The program should be related to the development of new systems of health care delivery and to new problems of environmental and community health, and should be accompanied by a simultaneous effort to create new occupational categories for new types of professional employment opportunities. It is recognized that consideration must be given to the appropriate terminology which will describe the expanded responsibilities of these new types of health professionals, i.e., Physician Associate in Nursing, Laboratory Medicine, Mental Health, etc.

As the above titles imply, our first efforts should probably be directed toward the three specialties of nursing, laboratory medicine, and mental health sciences, with provision for additional specialties soon after initiation of the program. It is generally recognized that nursing poses a special problem because of the declining enrollment of high quality students in the present three-year diploma course of The Johns Hopkins Hospital and the continuing staffing needs of our own and other Metropolitan Baltimore hospitals.
Areas where opinions differ concern the level of education toward which we should direct our efforts (sub-baccalaureate; lower division undergraduate; upper division undergraduate; master's degree; and beyond); administrative organization and lines of responsibility; the participation of present faculties in any new program; the geographical location of any new undergraduate program; and the size of the market, both in numbers of prospective student applicants and the employment opportunities open to them after completion of the program.

Certain broader considerations have contributed to the conclusions set forth here.

1. Any Johns Hopkins program should be designed for students of high quality and directed toward the preparation of leadership groups (whether practitioners or teachers) in the new professional categories.

2. The major thrust should be toward innovation in both training programs and the ultimate professional activities of those trained.

3. Market uncertainties -- both as to the interest of high quality students and the occupational openings for them in the future -- make it unwise to begin the program with the establishment of a separate new School of the University, with all the financial and institutional commitments which such an action would imply.

4. It would be undesirable to create two separate Johns Hopkins undergraduate bodies of markedly differing quality.

5. New Johns Hopkins program in the allied health field should be closely interlinked with the revised M.D. curriculum, with master's and doctoral programs in the School of Hygiene and Public Health and with postdoctoral programs in the School of Medicine, and with the pertinent undergraduate, postgraduate, and postdoctoral programs in the Faculty of Arts and Sciences.

Conclusions

1. Level of Programs. The University should establish baccalaureate and master's programs in the allied health sciences to which students would normally be recruited at the conclusion of their undergraduate sophomore year, having completed stated prerequisites especially in the scientific fields. For the newer programs, the normal goal would be a combined baccalaureate-master's degree to be achieved in three or four years (a total of five or six after high school). There would also be provisions for terminating at the baccalaureate level, for accepting students after three or even four years of undergraduate work, and for offering through the Summer School means of supplementing the lower division undergraduate work elsewhere if required to meet the scientific prerequisites.

The programs would therefore draw from a nation-wide base of lower division undergraduates, including the regular Johns Hopkins undergraduate program itself within that base. In the nursing field, a relatively larger proportion of the total
student numbers would be expected to terminate at the baccalaureate level and might be drawn from a special freshman-sophomore year preparation at Goucher College. Such a program at Goucher might also lead into the other allied health specialties. If this possibility appears of major interest to both parties, it might be given the designation of the "Johns Hopkins-Goucher Program in Allied Health Sciences."

2. **Location.** Since the program content would be mainly in biomedical science and clinical application, with substantial time spent in the hospital environment, its location should be with the East Baltimore Medical Institutions. The faculty would be based mainly in the appropriate departments of the Schools of Medicine and Hygiene, but on the social and behavioral science and computing science sides the Faculty of Arts and Sciences would undoubtedly also be a significant contributor. The students in Allied Health Sciences would also be eligible to take elective courses at Homewood in any subject of interest to them.

3. **Organization.** Although the program would involve the participation of members of the Faculty of Arts and Sciences, and might also require the provision of special Summer School courses, the basic responsibility for its academic aspects would fall on the Faculties of Medicine and Hygiene. At the same time, The Johns Hopkins Hospital would be deeply involved in its operation, both as a location for clinical training and in the arrangements for coordination with sub-professional training in the community colleges.

Taking advantage of the successful precedent recently established in the Office of Health Care Programs, therefore, it is proposed that the new programs be a joint effort of the three Medical Institutions, headed by a Dean of Allied Health Programs reporting administratively to the Medical Planning and Development Committee, which is the administrative policy and executive agent of the Joint Board of Trustees of the University and Hospital. The Dean should also hold an academic appointment appropriate to his professional interests. The Policy Committee for the program should be chaired by the Provost of the University and include representation from the Departments of Medicine and Hygiene most closely concerned, the Faculty of Arts and Sciences, the Hospital Administration, and possibly the Evening College and outside institutional collaborators such as Goucher College and the Community College of Baltimore.

The Dean of Allied Health Programs would be charged with the direction of all educational planning for the Allied Health Sciences and would be responsible for recommendations concerning appropriate organizational structure. He would coordinate all faculty and staff recruiting and, as part of his responsibility for program management, give special attention to the development of effective working relationships among the several appropriate departments of the University and Hospital. Circumstances might dictate the appointment of an associate dean with special responsibilities for Nursing Science programs.

The Allied Health Sciences Policy Committee would be responsible for the academic aspects, including curriculum, student admissions, and recommendations for degrees, while the MPD would supervise such matters as budget, space, and general administration.
4. Academic Appointments in Nursing Science. Since the goals of the program on the nursing side include a strong scientific foundation in the training of nurse scientists and leaders of the nursing profession, together with broadened clinical responsibilities and new relationships with doctors in the care of patients, it is proposed that academic appointments for nurse specialists be established in appropriate departments of the Schools of Medicine and Hygiene. For the development of the nursing science curriculum, these professors would constitute a subcommittee of the Allied Health Science Policy Committee, chaired by the Dean of Allied Health Programs (or possibly an associate dean for nursing science programs), and also including the chief nurse of The Johns Hopkins Hospital, who would have administrative responsibility for nursing services and report to the Administrator of the Hospital.

It is recognized that a University-wide program for educating nurse scientists at Hopkins would have a limited output of graduates. Consequently, the approach proposed in this memorandum cannot in itself answer the serious needs of the Clinical Services for additional technically competent nursing personnel. Accordingly, it is recommended that The Johns Hopkins Hospital consider revision of its present nursing training program by strengthening and expanding its collaboration with community colleges and related institutions in the development of associate degree programs in nursing and the other allied health fields. Properly coordinated with the University program, such hospital-based programs would greatly enhance the possibility of University-level training for those associate degree recipients who are appropriately qualified. In addition, the Dean of Allied Health Programs and his faculty colleagues, through their role as consultants, could contribute significantly to insuring the high quality of the associate degree programs.

5. Scale of Program. The precise definition of scale will require market exploration and examination of space requirements as well as faculty needs and finances. As an order of magnitude for discussion, an initial goal might be an entering class of 100, of whom 50 would be in nursing science and 25 each in laboratory medicine and mental health science.

6. Resources. In the present financial condition of the University, it is evident that a new program in Allied Health Sciences cannot be financed without wholly new sources of funds. Except for the initial commitment to the Dean, therefore, implementation of the program would be dependent on the finding of new resources so as to avoid competition with existing programs or other new programs of high priority.