Minutes of meeting held July 3, 1975


All agenda items except the clinical chemistry proposal were tabled until chairperson Ballantyne could be present.

A discussion of whether the committee should attach a statement or summary of their deliberations to the proposal followed. It was decided to reconsider this matter after specific discussion.

The balance of the meeting followed a basic question-answer format. Objections to adoption were raised, not in an attempt necessarily to condemn the proposal, but as a means to clarifying and strengthening the formal proposal should it be found worthy of approval.

(These minutes will attempt to retain this method of organization. "Answers" will be indented.)

D. Johnson: How does the program differ from our present B.A. in Chemistry?

    It includes a practicum and 10 hours of specialized clinical chemistry courses.

Null: When would it begin?

    September 1976

Null: I see no hard evidence that this degree provides specific qualifications for specific jobs.

    Research needed on job surveys, number of jobs, locally and nationally.

    Tregarthen: See bureau of labor statistics information.

Null: Letters needed from local laboratorys committing facilities, etc. to program. What real demand will be made on those facilities?

    J. Johnson: No legal contract is possible but the committment is present.

Null: The two courses listed in Business and Personnel will not provide supervisory expertise.

    J. Johnson: High level administrative abilities are not required of clinical chemists.

Null: Are these two courses specifically appropriate to hospital administration? Other courses could perhaps be found that would be more relevant.
Null: Does this program include enough electives, especially social sciences?

D. Johnson: Is the program appropriate to the College of LAS?

College requirements will provide for some social sciences and humanities. Perhaps this should be spelled out in the proposal.

Null: The proposal should indicate how the need for extensive advising will be met.

Present procedures include (1) open houses for freshmen, (2) faculty advising.

Burns: The electives are not programmed in the first years of the program?

There are so many lower level pre-requisite courses that this is unavoidable.

Null: Could you not be more explicit about the number of potential students and student demand?

J. Johnson: See proposal, Part E. Numbers were compiled in Jerry Johnson's chemistry classes. Perhaps all students should have been polled.

Null: This portion of the proposal needs strengthening.

Eley: Could a lower level seminar (1 hour) be formed to maintain the interest of clinical chemistry majors since their first three years are taken up with preparation? It could be non-technical, open to all students.

D. Johnson: What is the purpose of the nursing and medical tech. sections of the proposal?

Funding.

D. Johnson: Why can't we just add the necessary clinical chemistry courses to our curriculum so that students could complete the necessary course work if they wanted?

1. Why not have a degree program?
2. The degree is helpful to student morale.
3. A degree program implies (a) commitment, (b) resources.
4. It makes it easier to get out-of-house funds.
5. The public doesn't understand that it is the transcript and not the program label that counts.

(A lengthy discussion followed concerning employers, job requirements, the job market, computer review of resumes, etc.)

D. Johnson: Are not resources a problem?
Null: If this program represented too much of a demand on resources, we (C&R) would be obliged to say so. I see no dollar figures for program cost. "Classroom space is adequate" is not a sufficient statement. What will the impact on other existing programs be of providing space, etc. for clinical chemistry?

Jerry Johnson: Approval of this program may in itself open up ways of generating more resources.

Null: Yes, but we have to know the cost, before we can approve.

Eley: What if the N.S.F. denies our requests?

Null: N.S.F. request dollar figures should be included as a potential cost.

J. Johnson: We can put in the numbers --- but there is the problem that we might be held to those numbers at a later date.

Eley: If the equipment is necessary, what if the grants aren't approved? The State will absorb the costs --- so they want to know what they are.

Tregarthen: You should attach the four page cost matrix to the proposal. (forms available from Dean Ballantyne)

D. Johnson: This program would have to be included in the campus Master Plan.

Tregarthen: This can still be done.

Null: The expense of library additions should be included: (1) space, (2) cost of books. Accreditation guidelines should be spelled out in the proposal. Will we meet them? Does approval of the program imply the hiring of a clinical chemistry professor for 1976?

J. Johnson: A chemistry position will be necessary in any case.

Eley: If we had a clinical chemist now would the program have a better chance?

J. Johnson: The problem is that we're relying on honorarium faculty for local expertise. Yes, that would be the optimum situation, but the clinical chemistry courses wouldn't be taught until the junior and senior year, so we have some time.

D. Johnson: I could not approve this program now: (1) the long term implications and (2) how it ties into other health programs, local needs, etc. need to be better explored. (D. J. excused)

Eley: It may be hard to see that far ahead.

Tregarthen: Are there similar programs in this field already offered in our region?
(1) No.
(2) There is a need for para-medical programs in the Colorado Springs area.

Tregarthen: Won't the CCHE claim that other slots are available in other parts of the State?

There is a need to show that (1) there are no such slots, (2) there is enormous local need for such a program.

Tregarthen: Are there "western slope" programs in existence?

Null: This proposal leads directly to the question of local potential for development of health-education programs.

Eley: Two current Biology professors weren't included in the list of personnel. An update is needed.

Eley: You should include an estimate of the cost of the additional honorarium instruction.

Yes, we could include a maximum figure.

Fernandez: Are remedial courses going to be available for minorities?

(1) Money would be a problem here, but HEW funds are available.
(2) An open admission policy would ensure entrance to minorities. This would need to be supported by a commitment to give remedial help when necessary.

Fernandez: Should not language study be encouraged within this program?

Clinical chemists have very little contact with the public.

This ended the discussion. A consensus was reached that the proposal should be rewritten in light of the preceding discussion. It will then be resubmitted to this committee.
I asked Dean Ballantyne about the obstacles to granting a Bachelor of Science degree through LAS. I called J. Russell Nelson's office at his suggestion, since he didn't know the answer, where I was able to talk to John Bartram, Director of the Budget. While insisting that they were informal, he had the following comments to make:

(1) The power to decide: (a) what are degree requirements and (b) what shall be considered appropriate degrees for a given college, is delegated to each faculty.

Until recently, the B.S. degrees in Physical Therapy and Medical Technology were granted through A&S. (They're now granted through the Med. Center.) A&S still grants B.S. degrees in P.E. and in Recreation. In addition, they grant a B.F.A. degree which requires a minimum of 50 hours in Fine Arts and which imposes a maximum of 67 hours.

(2) Before submitting the formal proposal, we should be consulting informally the various people who will play a part in making the final decision. This is a better way to allow the necessary "give and take" to enter into the approval process. He would recommend that a 2 or 3 page prospectus, stating that we are considering proposing a Clin. Chem. program be sent out, under Silverman's name to Russell Nelson and to Dean Ward of the Med. Center.¹

Bartram pointed out that all such programs are presented to CCHE by Nelson. Therefore it is essential that he be given an opportunity to review and provide input. He has much information on other programs, etc. which could be of help. In addition, it is certain that the Med. Center will be consulted at some point down the line. Therefore why not try to get their reactions and suggestions now and perhaps acquire their support.

¹The prospectus would discuss: The difference between Med. Tech. and Clin Chem., Local need, student interest, etc. He called such a presentation a "management summary".