



NEW GRADUATE CONCENTRATION PROPOSALS
ARIZONA STATE UNIVERSITY
GRADUATE EDUCATION

This form should be used for academic units wishing to propose a new concentration for existing graduate degrees.

A concentration is a subspecialty within a degree and major. It indicates the fulfillment of a designated, specialized course of study, which qualifies the student with skills and training in one highly concentrated area of the major. Concentrations are formally recognized educational designations (including the assignment of a university plan code for reporting/record-keeping purposes and appearance on the ASU transcript). Concentrations are distinguished from more informal academic distinctions such as “emphases,” “tracks,” “foci,” “options,” etc.

Submit the completed and signed (chairs, unit deans) proposal to the **Office of Graduate Academic Programs**, mail code 1003 and electronic copies to eric.wertheimer@asu.edu or amanda.morales-calderon@asu.edu. **Please type.**

Contact Name(s): Colleen Clemency Cordes	Contact Phone(s): 602-496-1356
College/School/Division Name: College of Health Solutions	
Academic Unit Name: College of Health Solutions (or proposing faculty group for interdisciplinary proposals)	
Existing Graduate Degree and Major under which this concentration will be established: Doctor of Behavioral Health (DBH) in Behavioral Health	
Proposed Concentration Name: Clinical	
Requested Effective Term and Year: Fall 2015 (e.g. Fall 2014)	
Do Not Fill in this information: <u>Office Use Only</u> Plan Code:	CIP Code:

1. Overview

- A. Provide a brief description (not to exceed 150 words) of the new concentration (including the focus of the new concentration, relationship to other concentrations within this degree program, etc.).**

The DBH program was developed for master’s-level clinicians interested in furthering their education through specific training in integrated primary care. Since its inception, the program has grown and evolved with the ever-changing healthcare marketplace, resulting in an expansion of program focus and recruitment. As the program now enrolls students without clinical credentials, we are seeking to establish a formalizing of the DBH Clinical concentration. This concentration would include additional clinical didactic coursework and a 400 hour clinical internship, only available to students who are licensed or license eligible as behavioral, medical, or allied health professionals (representative of roughly 75% of our current student body).

2. Impact Assessment

- A. Explain the unit’s need for the new concentration (e.g., market demand, research base, direction of the discipline, and interdisciplinary considerations). How will the new concentration complement the existing degree program, including enrollment, national ranking, etc.?**

This concentration serves to appropriately distinguish between DBH students with clinical background and DBH students without the appropriate licensure credentials. This formal designation of a concentration on a clinical student’s transcripts will allow for enhanced credibility upon graduation, and an ability to delineate between program focus. This concentration is consistent with the original vision of the DBH program, to train master’s level clinicians to work effectively in integrated primary care in the evolving marketplace. Enrollment is not anticipated to change dramatically based on this

concentration, but rather provide delineation that clinical concentration students have received the appropriate clinical training to be behavioral health consultants in the healthcare marketplace.

- B. Please identify other related ASU programs and describe how the new concentration will complement these existing ASU programs?** *(If applicable, statements of support from affected academic unit administrators should be included with this proposal submission.)*

Given that this concentration is consistent with the initial proposal for the DBH program and is a return to the originally approved curriculum (with slight adjustment to make the program more marketable for allied health professionals), it is not anticipated that this doctoral concentration, focusing exclusively on behavioral care in the integrated primary care environment, will impact other departments. To date, no other program at ASU exists with this focus. Programs with behavioral foundations (though not for the primary care marketplace) include doctoral programs Psychology, and Counseling Psychology, as well as programs within the School of Nutrition and Health Promotion; however, it is not anticipated that this program will impact enrollment for any of the above given the DBH Clinical Concentration's focus on integrated primary care.

- C. Is this an interdisciplinary concentration? If yes, please address the relationship of the proposed concentration to other existing degree programs and any parallel or similar concentrations in those degree programs.** *(Please include relevant Memoranda of Understanding regarding this interdisciplinary concentration from all applicable academic units.)*

Not applicable

3. Academic Requirements and Curriculum

- A. What are the total minimum hours required for the major and degree under which the proposed concentration will be established?**

The DBH program is an 84 credit doctoral program with students with 30 credits applied to the iPOS from students' master's degrees, resulting in the completion of 54 credits while enrolled at ASU.

- B. Please provide the admissions criteria for the proposed concentration.** *If they are identical to the admission criteria for the existing major and degree program under which this concentration will be established, you may attach a copy of these criteria as they appear on the departmental website, or other source (please indicate source). Please also list all undergraduate and graduate degrees and/or related disciplines that are required for admission to this concentration program.*

Clinical concentration admissions requirements include:

- Master's degree from a regionally accredited postsecondary institution in the U.S., or an equivalent degree from a recognized international postsecondary institution
- A copy of the applicant's license or license eligibility. "Licensed" or "licensed eligible" as defined as a license to practice issued by a state licensing board (e.g. Arizona Board of Behavioral Health Examiners, Arizona Board of Occupational Therapy Examiners, etc.). Examples include:
 - Licensed, master's level behavioral clinician
 - License-eligible, master's level behavioral clinician
 - Master's level, licensed medical or ancillary healthcare provider (nurse, dietician, occupational therapist)
- Personal Statement
- YouSeeU Video Interview
- Professional letters of recommendation
- Updated CV/resume
- Program policies acknowledgements
- Video/webcam interview (if indicated)

Degree(s): Master's degree. While there are no specific master's degrees required for admission, we anticipate many applicants will have master's degrees inclusive of, but not limited to:

- Master's in Social Work
- Master's in Counseling
- Master's in Family Therapy
- M.S. in Nursing
- Master's in Occupational Health

GPA: Minimum of a 3.00 cumulative GPA (scale is 4.0=A) in the last 60 hours of a student's first bachelor's degree program. Minimum of 3.00 cumulative GPA (scale is 4.0 = A) in the applicable Master's degree.

English Proficiency Requirement for International Applicants: (See Graduate Education policies and procedures) (http://graduate.asu.edu/admissions/international/english_proficiency):

Required Admission Examinations: GRE GMAT Millers Analogies X None required

- C. **If the proposed concentration is part of a larger, interdisciplinary agenda, please provide additional admission information related to students who may enter with various academic backgrounds, including expected entry-level competencies. As applicable, please also address the courses that must be taken to remedy any relevant deficiencies for incoming students.**

N/A

- D. **What knowledge, competencies, and skills (learning outcomes) should graduates have when they complete this proposed concentration program? Examples of program learning outcomes can be found at (<https://uoeee.asu.edu/programoutcomes>).**

Upon completion of the clinical concentration, students will be able to:

1. Apply the Primary Care Behavioral Health (PCBH) model and population health management to effectively and efficiently treat patients, utilizing triage and referrals to community resources as appropriate
2. Utilize a consultation approach that allows easy access by primary care providers, staff, and patients
3. Collaboratively demonstrate how primary care organizations can initiate changes leading to substantial improvements in access, patient and provider satisfaction, quality of clinical care, as well as increased revenue
4. Operate assertively to follow up with physicians and medical team members
5. Increase awareness and understanding of behavior change strategies among primary care providers and staff
6. Employ evidence-based protocols and outcomes measurement tools to track physical and mental health outcomes
7. Create clinical pathways that begin with evidence-based screening & assessment for conditions that have a high impact on primary care practice
8. Employ evidence-based medical and behavioral health practices to design interventions for conditions that have a high impact on primary care practice
9. Apply focused behavioral health interventions from a generalist perspective that interacts sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, and professional backgrounds, and with persons of all ages and lifestyle preferences.
10. Provide culturally-sensitive, evidence-based approaches to patient and population-based healthcare delivery
11. Analyze integrated care problems for the factors amenable to planned changes using tools that achieve the Triple Aim such as PDSAs

- E. **How will students be assessed and evaluated in achieving the knowledge, competencies, and skills outlined in 3.D. above?** *Examples of assessment methods can be found at (<http://www.asu.edu/oue/assessment.html>).*

Outcome 1: Apply the Primary Care Behavioral Health (PCBH) model and population health management to effectively and efficiently treat patients, utilizing triage and referrals to community resources as appropriate

Measure: 90% of students will receive a 90% or better on the IBC 712 (Population Based Health Management) Final Assignment

Outcome 2: Utilize a consultation approach that allows easy access by primary care providers, staff, and patients

Measure: 90% of students will receive an average rating of 4 or higher, where 1 = low skill, and 5 = high skill on the *Doctor of Behavioral Health Program Medical Provider Evaluation of Student Intern: Clinical Track* rating scale, specifically items III.1 (focuses on and responds to referral question), III.2 (tailors recommendations to work pace of medical units), and III.3 (conducts effective curbside consultations)

Outcome 3: Collaboratively demonstrate how primary care organizations can initiate changes leading to substantial improvements in access, patient and provider satisfaction, quality of clinical care, as well as increased revenue

Measure: 90% of students will receive an average score of 4 or higher, where 1 = non-proficient and 5 = master proficiency on the *Doctor of Behavioral Health Program Consultant Evaluation of Student Intern: Clinical Track* rating scale., specifically items IV.3 (develops patient-centered, outcome informed treatment plans based on clinical assessment and ongoing outcomes management), IV.4(supplements clinical assessments with relevant medical record data in order to comprehensively address overall patient health), V.4 (demonstrates proficiency in measuring and evaluating the outcomes of group treatment using structured assessment materials such as patient outcome), and VI.5 (demonstrates proficiency in the selection, implementation, and reporting of an evaluation of a disease management program that utilizes patient-level measures)

Outcome 4: Operate assertively to follow up with physicians and medical team members

Measure: 90% of students will receive a 4 or higher, where 1 = low skill, and 5 = high skill on *Doctor of Behavioral Health Program Medical Provider Evaluation of Student Intern: Clinical Track* rating scale, item III.4 (willing to aggressively follow up with physicians, when indicated)

Outcome 5: Increase awareness and understanding of behavior change strategies among primary care providers and staff

Measure: 90% of students will receive a 4 or higher, where 1 = low skill, and 5 = high skill on the *Doctor of Behavioral Health Program Medical Provider Evaluation of Student Intern: Clinical Track* rating scale, item III.6 (able to prepare and present a brief lunch hour presentation in primary care)

Outcome 6: Employ evidence-based protocols and outcomes measurement tools to track physical and mental health outcomes

Measure: 90% of students will receive an average score of 4 or higher, where 1 = non-proficient and 5 = master proficiency on items II.1. (demonstrates appropriate selection and implementation of various clinical assessment tools and processes for aiding in determination of patient treatment needs), IV.2 (demonstrates proficiency in the identification and utilization of appropriate clinical assessment tool(s) to track patient outcomes [e.g. Patient Health Questionnaire-9, PHQ-9, for a patient with depression, Generalized Anxiety Disorders -7, GAD-7, for a patient with anxiety] based on initial screening information) and IV.3 (develops patient-centered, outcome informed treatment plan based on clinical assessment and ongoing outcomes management) on the *Doctor of Behavioral Health Program Consultant Evaluation of Student Intern: Clinical Track* rating scale.

Outcome 7: Create clinical pathways that begin with evidence-based screening & assessment for conditions that have a high impact on primary care practice

Measure: 90% of students will receive an average score of 4 or higher, where 1 = non-proficient and 5 = master proficiency on the *Doctor of Behavioral Health Program Consultant Evaluation of Student Intern: Clinical Track* rating scale, items V.2 (demonstrates knowledge of selection criteria for group treatment, patient screening and evaluation, and patient preparation for group treatment), VI.2 (demonstrates knowledge of evidence supported individual and/or group-based disease management interventions for one or more chronic health condition), and VI.3 (demonstrates effective planning and implementation strategies launching a disease management program within a health care environment)

Outcome 8: Employ evidence-based medical and behavioral health practices to design interventions for conditions that have a high impact on primary care practice

Measure: 90% of students will receive an average score of 4 or higher, where 1 = non-proficient and 5 = master proficiency on the *Doctor of Behavioral Health Program Consultant Evaluation of Student Intern: Clinical Track*

rating scale, items II.2 (demonstrates proficiency in the application of brief, resolution-focused intervention strategies), II.3 (demonstrates proficiency in the application of evidence supported approaches to client engagement and strategies for promoting client treatment motivation, including but not limited to Motivational Interviewing), III.2 (demonstrates proficiency in integrated assessment of medical and behavioral conditions), III.3 (demonstrates proficiency in using the 5 A's of an initial appointment [assess, advise, agree, assist, arrange] and the patient-centered model of treatment)

Outcome 9: Apply focused behavioral health interventions from a generalist perspective that interacts sensitively, effectively, and professionally with persons from diverse cultural, socioeconomic, educational, and professional backgrounds, and with persons of all ages and lifestyle preferences.

Measure: 90% of students will receive a 90% or better on the IBC 702 (Brief Interventions in Primary Care) Final Project, Intervention Design for a Clinic or Hospital Setting

Outcome 10: Provide culturally-sensitive, evidence-based approaches to patient and population-based healthcare delivery

Measure: 90% of students will receive an average score of 4 or higher, where 1 = non-proficient and 5 = master proficiency on items I.2 (demonstrates effective verbal expressive skills in interactions with medical personnel) and I.3 (demonstrates an ability to effectively communicate medical concepts to patients) on the *Doctor of Behavioral Health Program Consultant Evaluation of Student Intern: Clinical Track* rating scale.

Outcome 11: Analyze integrated care problems for the factors amenable to planned changes using tools that achieve the Triple Aim such as PDSAs

Measure: 90% of students will receive a 90% or better on the IBC 714 (Quality and Performance Measurement, Improvement, and Incentives in Health Care) Final Performance Improvement Plan

F. Please provide the curricular structure for the proposed concentration.

- Additionally, please ensure that all **new** required course proposals have been submitted to the Provost's office through the Curriculum ChangeMaker online course proposal submission system for approval before this concentration is put on the University Graduate Council and CAPC agendas.

Required Core Courses for the Degree			Credit Hours
<i>(Prefix & Number)</i>	<i>(Course Title)</i>	<i>(New Course?) Yes or No?</i>	<i>(Insert Section Sub-total)</i> 12
IBC 712	Population Based Health Management	N	3
IBC 714	Quality and Performance Measurement, Improvement, and Incentives	N	3
IBC 718	Healthcare Systems: Organization, Delivery & Economics	N	3
IBC 720	Behavioral Health Entrepreneurship	N	3
Required Concentration Courses			Credit Hours
<i>(Prefix & Number)</i>	<i>(Course Title)</i>	<i>(New Course?) Yes or No?</i>	<i>(Insert Section Sub-total)</i> 15

IBC 604	Clinical Medical/Pathophysiology	N	3
IBC 608	Psychopharmacology for the Behavioral Care Provider	N	3
IBC 609	Clinical Neuropathophysiology	N	3
IBC 701	Models of Integrated Primary Care	Y	3
IBC 691 OR IBC 702 (IBC 702 has been submitted to Changemaker for Review)	Brief Interventions in Primary Care	Y	3
Elective or Research Courses <i>(as deemed necessary by supervisory committee)</i>			Credit Hours
<i>(Prefix & Number)</i>	<i>(Course Title)</i>	<i>(New Course?) Yes or No?</i>	(Insert Section Sub-total) 18
IBC 610	Behavioral and Psychological Assessment in Primary Care	N	3
IBC 613	Cognitive/Affective Bases of Health	N	3
IBC 624	Integrated Behavioral Health Care for Children and Adolescents	N	3
IBC 634	Strategies & Techniques of Behavior Change in Primary Care	N	3
IBC 660	Healthcare Legal, Ethical, and Professional Issues	N	3
IBC 598	Motivational Interview for Behavioral Care Provider	N	3
Culminating Experience <i>E.g. - Capstone project, applied project, thesis (masters only) – 6 credit hours) or dissertation (doctoral only) – 12 credit hours) as applicable</i>			Credit Hours (Insert Section Sub-total) 3
IBC 793: Applied Project (Culminating Project)			3
Other Requirements <i>E.g. - Internships, clinical requirements, field studies as applicable</i>			Credit Hours (Insert Section Sub-total) 6
IBC 684: Internship			6
For doctoral programs – as approved by the student's supervisory			30

<i>committee, the program can allow 30 credit hours from a previously awarded master's degree to be used for this program. As applicable, please indicate the total credit hour allowance that will be used for this program.</i>	(from accredited master's programs only)
Total required credit hours	84

- G. Please describe the primary course delivery mode, (e.g., online, face-to-face, off-site etc.). Please note: If this proposed initiative will be offered completely online, clearly state that in this section, and fill out the applicable section in the Operational Appendix.**

Consistent with the current DBH program, the Clinical Concentration will be offered entirely online.

- H. Please describe the culminating experience(s) required for completion of the existing degree and major, and the proposed concentration (e.g., thesis, dissertation, comprehensive exams, capstone course(s), practicum, applied projects, etc.).**

The culminating experience is an applied clinical project. Students complete the Culminating Project over the duration of their time in the program, with three one-credit offerings of IBC 793 taken at various time points to assist in the development of appropriate hypotheses, methodology consistent with the integrated primary care setting, and then finally data collection, analysis, and report. Students defend their project at the completion of their third credit of IBC 793. There are no comprehensive exams for the Clinical concentration.

- I. Please describe any other requirements for completion of the existing degree and major, and the proposed concentration (e.g., internships, foreign language skills, etc.).**

All Clinical Concentration students will complete a 400 hour clinical internship at a primary care clinic or other medical setting. This internship, which takes place over the course of two semesters (for a total of 6 credit hours) provides students with an opportunity to experience integrated behavioral care in a hands-on manner. While on the internship experience, students continue to have weekly one hour small group consultation around clinical cases with DBH Faculty Associates via Vidyo, a Health Insurance Portability and Accountability Act (HIPAA) compliant video-conferencing system

- J. For interdisciplinary programs, additional sample curricular structures must be included as appendix items to this proposal relating to students with various academic backgrounds who may pursue the proposed concentration, including expected mastery of core competencies (e.g., course work, skills, and/or knowledge).**

N/A

4. Administration and Resources

- A. How will the proposed concentration be administered (including recommendations for admissions, student advisement, retention etc.)? Describe the administering body in detail, especially if the proposed concentration is part of a larger interdisciplinary initiative. How will the graduate support staffing needs for this proposed concentration program be met?**

The proposed concentration will be administered under the current DBH program, with full-time clinical faculty members serving as the primary graduate advisors of enrolled student. The admissions process for this concentration will similarly be maintained as consistent with the current DBH program, utilizing specific admission criteria appropriate for this domain. Support staff for the concentration will be under the current DBH program format, inclusive of a Student Support Services Assistant responsible for admissions and internship programming, an Academic Success Analyst for all student iPOS concerns, course planning, etc., and an Administrative Assistant.

B. How many students will be admitted immediately following final approval of the concentration? What are enrollment projections for the next three years?

Enrollment expectations are on trend with the current DBH admission process, with roughly 70% of all current DBH students eligible for this concentration. Given the five start dates (consistent with ASU Online practices), it is anticipated that a total of 75 students will be admitted into the clinical concentration in the first year, with stable to slightly increasing admissions over the following three years.

C. What are the resource implications for the proposed concentration, including any projected budget needs? Will new books, library holdings, equipment, laboratory space and/or personnel be required now or in the future? If multiple units/programs will collaborate in offering this concentration please discuss the resource contribution of each participating program. Letters of support must be included from all academic units that will commit resources to this concentration.

Given that this concentration is housed under the current DBH program and is consistent with the initial vision for the department, resource implications are limited. As an online program, library holdings, equipment, and lab space are not needed. Personnel, particularly additional clinical faculty, may be required in the long-term to accommodate concentration growth; however, the current personnel for the DBH program are sufficient to manage this concentration at this time.

D. Please list the primary faculty participants in this proposed concentration.

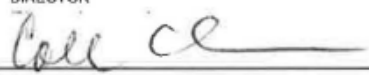
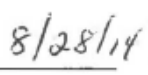


<i>Name</i>	<i>Title</i>	<i>Area(s) of Specialization as they relate to proposed concentration</i>
Colleen Clemency Cordes, Ph.D.	Interim Director, Clinical Associate Professor	Integrated primary care, behavioral health consultation, evidence-based practices
Ronald R. O'Donnell, Ph.D.	Clinical Professor	Health outcomes, population-based health
Lesley Manson, Psy. D.	Clinical Assistant Professor	Integrated primary care behavioral health, motivational interviewing, evidence-based practices
C.R. Macchi, Ph.D.	Internship Coordinator, Clinical Assistant Professor	Medical family therapy, evidence-based interventions
Sue Dahl-Popolizio, DBH	Clinical Assistant Professor	Integrated healthcare for allied health professionals, occupational health, pathophysiology
Toni Dougherty, DBH	Faculty Associate	Models of primary care integration
Beth West, DBH	Faculty Associate	Clinical implementation of primary care behavioral health integration
DeAnn Smetana, DBH	Faculty Associate	Brief treatment approaches in primary care, clinical skill development
Penny Goodman, DBH	Faculty Associate	Clinical implementation of primary care behavioral health integration
Warren Littleford, Ph.D.	Faculty Associate	Psychopharmacology
Angela Giles, DBH	Faculty Associate	Clinical implementation of primary care behavioral health integration, evidence-based practices

For a more complete list of DBH faculty associates, see: <https://chs.asu.edu/dbh/directory>

- E. Is there a graduate faculty structure for this concentration program that will differ from the original degree program graduate faculty structure (for PhD programs only)?** *If yes, please include the name of the graduate faculty group and whether they will participate in offering this concentration. No*

5. Additional Material — Please attach any additional information that you feel relates to the proposed concentration.
(Please label accordingly, i.e., Appendix or Attachment A, B, etc.)

Please see attached support memos from impacted units.

Approvals (if the proposal submission involves multiple units, please include letters of support from those units)	
DEPARTMENT CHAIR or SCHOOL DIRECTOR  SIGNATURE	 DATE
DEAN (Please print or type)  SIGNATURE	 DATE

The following section will be completed by Graduate Education following the recommendations of faculty governance bodies.

VICE PROVOST FOR GRADUATE EDUCATION	
 SIGNATURE	 DATE

Please note: Proposals for new concentrations also require the review and recommendation of approval from the University Graduate Council, Curriculum and Academic Programs Committee (CAPC), the Academic Senate (Information item only), and the Office of the Provost before they can be put into operation.

The final approval notification will come from the Office of the Provost.

GF1112E-92

APPENDIX OPERATIONAL INFORMATION FOR GRADUATE PROGRAMS

(This information is used to populate the [Graduate Programs Search](#)/catalog website.)

1. Provide a brief (catalog type - no more than 150 words) program description.

The Doctor of Behavioral Health Program – Clinical Concentration is an innovative doctoral degree that provides behavioral health, allied health, and medical providers with specific training on integrated primary care. Its unique curriculum focuses on three primary areas: medical literacy to enhance collaboration with medical providers, evidence-based interventions for the primary medical setting, and entrepreneurship in order to comprehensively address the evolving needs of the healthcare system. Graduates of the Clinical Concentration are positioned to transform healthcare delivery through evidence-based treatment that promotes overall health and wellbeing.

Breakdown of requirements for the academic catalog:

- Core (12)
 - IBC 712 Population Based Health Management (3)
 - IBC 714 Quality and Performance Measurement, Improvement, and Incentives (3)
 - IBC 718 Healthcare Systems: Organization, Delivery & Economics (3)
 - IBC 720 Behavioral Health Entrepreneurship (3)
- Concentration (15)
- Electives or Research (18)
- Other requirements - IBC 684 Internship (6)
- Previously awarded master's degree or other courses approved by the supervisory committee (30)
- Culminating experience - IBC 793 Applied Project (3)
- Total credit hours: 84

2. Contact and Support Information:

Office Location (Building & Room): NIH-1, 315	Campus mail code: 3020
Campus Telephone Number: 602-496-1354	Program Director: Colleen Cordes
Program email address: dbh@asu.edu	Program Support Staff: Brenda Madison Rachel Joles
Program website address: chs.asu.edu/dbh	Admissions Contact: Jessie Pewitt

3. Campus(es) where program will be offered:

* **To select desired box**, place cursor on the left side of the box, right click mouse, select **Properties**, under **Default Value** select **Checked**, press **OK** and the desired box will be checked.

X **ASU Online only (all courses online)** – (Office of the Provost and ASU Online approval is needed) **All**

4. Application and iPOS Recommendations: List the Faculty and Staff that will input admission/POS recommendations to Gportal **and** indicate their approval for Admissions and/or POS:

Name	ADMSN	POS
Jessie Pewitt	X	X

Rachel Joles		X
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5. **Keywords:** (List all keywords that could be used to search for this program. Keywords should be specific to the proposed program.) Integrated behavioral health

Integrated primary care

Behavioral health provider

Lifestyle medicine

Reverse primary/behavioral integration

Chronic disease management

6. **Area(s) of Interest:**

* **To select desired box**, place cursor on the left side of the box, right click mouse, select **Properties**, under **Default Value** select **Checked**, press **OK** and the desired box will be checked

A. Select **one (1)** primary area of interest from the list below that applies to this program.

- | | |
|---|---|
| <input type="checkbox"/> Architecture & Construction | <input type="checkbox"/> Interdisciplinary Studies |
| <input type="checkbox"/> Arts | <input type="checkbox"/> Law & Justice |
| <input type="checkbox"/> Business | <input type="checkbox"/> Mathematics |
| <input type="checkbox"/> Communication & Media | <input type="checkbox"/> Psychology |
| <input type="checkbox"/> Education & Teaching | <input type="checkbox"/> STEM |
| <input type="checkbox"/> Engineering & Technology | <input type="checkbox"/> Science |
| <input type="checkbox"/> Entrepreneurship | <input type="checkbox"/> Social and Behavioral Sciences |
| <input checked="" type="checkbox"/> Health & Wellness | <input type="checkbox"/> Sustainability |
| <input type="checkbox"/> Humanities | |

B. Select **one (1)** secondary area of interest from the list below that applies to this program.

- | | |
|--|--|
| <input type="checkbox"/> Architecture & Construction | <input type="checkbox"/> Interdisciplinary Studies |
| <input type="checkbox"/> Arts | <input type="checkbox"/> Law & Justice |
| <input type="checkbox"/> Business | <input type="checkbox"/> Mathematics |
| <input type="checkbox"/> Communications & Media | <input type="checkbox"/> Psychology |
| <input type="checkbox"/> Education & Teaching | <input type="checkbox"/> STEM |
| <input type="checkbox"/> Engineering & Technology | <input type="checkbox"/> Science |
| <input type="checkbox"/> Entrepreneurship | <input checked="" type="checkbox"/> Social and Behavioral Sciences |
| <input type="checkbox"/> Health & Wellness | <input type="checkbox"/> Sustainability |
| <input type="checkbox"/> Humanities | |

(NEW GRADUATE INITIATIVES)
PROPOSAL PROCEDURES CHECKLIST

Academic units should adhere to the following procedures when requesting new curricular initiatives (degrees, concentrations or certificates).

Obtain the required approval from the Office of the Provost to move the initiative forward for internal ASU governance reviews/approvals.

- Establishment of new curricular initiative requests; degrees, concentrations, or certificates
- Rename requests; existing degrees, concentrations or certificates
- Disestablishment requests; existing degrees, concentrations or certificates

Submit any new courses that will be required for the new curricular program to the Curriculum ChangeMaker online course approval system for review and approval.

- Additional information can be found at the Provost's Office Curriculum Development website: [Courses link](#)
- For questions regarding proposing new courses, send an email to: courses@asu.edu

Prepare the applicable proposal template and operational appendix for the proposed initiative.

- New degree, concentration and certificate templates (contain proposal template and operational appendix) can be found at the Provost's Office Curriculum Development website: [Academic Programs link](#)

Obtain letters or memos of support or collaboration. (if applicable)

- When resources (faculty or courses) from another academic unit will be utilized
- When other academic units may be impacted by the proposed program request

Obtain the internal reviews/approvals of the academic unit.

- Internal faculty governance review committee(s)
- Academic unit head (e.g. Department Chair or School Director)
- Academic unit Dean (will submit approved proposal to the curriculumplanning@asu.edu email account for further ASU internal governance reviews (as applicable, University Graduate Council, CAPC and Senate)

Additional Recommendations - All new graduate programs require specific processes and procedures to maintain a successful degree program. Below are items that Graduate Education strongly recommends that academic units establish after the program is approved for implementation.

Set-up a Graduate Faculty Roster for new PhD Programs – This roster will include the faculty eligible to mentor, co-chair or chair dissertations. For more information, please go to http://graduate.asu.edu/graduate_faculty_initiative.

Establish Satisfactory Academic Progress Policies, Processes and Guidelines – Check within the proposing academic unit and/or college to see if there are existing academic progress policies and processes in place. If none have been established, please go to http://graduate.asu.edu/faculty_staff/policies and scroll down to the **academic progress review and remediation processes** (for faculty and staff) section to locate the reference tool and samples for establishing these procedures.

Establish a Graduate Student Handbook for the New Degree Program – Students need to know the specific requirements and milestones they must meet throughout their degree program. A Graduate Student Handbook provided to students when they are admitted to the degree program and published on the website for the new degree gives students this information. Include in the handbook the unit/college satisfactory academic progress policies, current degree program requirements (outlined in the approved proposal) and provide a link to the Graduate Policies and Procedures website. Please go to http://graduate.asu.edu/faculty_staff/policies to access Graduate Policies and Procedures.

School of Nutrition and Health Promotion-Support Statement

Monday, August 11, 2014 at 10:02:10 AM Mountain Standard Time

Subject: RE: DBH Academic Plan Proposals
Date: Monday, August 11, 2014 at 7:43:54 AM Mountain Standard Time
From: Linda Vaughan
To: Colleen Cordes

I am pleased to support the proposals for the DBH Clinical Concentration and the DBH Management Concentration. Neither overlap or duplicate any degree programs in the School of Nutrition and Health Promotion.

From: Colleen Cordes
Sent: Thursday, August 07, 2014 2:57 PM
To: Linda Vaughan
Subject: DBH Academic Plan Proposals

Linda,

The DBH Program is requesting SNHP's support for three proposals that we would like to add to the Academic Strategic Plan. In particular, we are requesting support for:

- DBH Clinical Concentration (formalization of current track into concentration within the Doctor of Behavioral Health Program)
- DBH Management Concentration (formalization of current track into concentration within the Doctor of Behavioral Health Program)
- Master's of Integrated Behavioral Care Delivery

Please let me know if you or your team have any questions about the attached proposals,

Colleen Clemency Cordes, Ph.D.
Interim Director, Clinical Associate Professor
Nicholas A. Cummings Behavioral Health Program (DBH)
College of Health Solutions
Arizona State University
Colleen.clemency@asu.edu
(602) 496-1356

ASU Online Impact Statement

Thursday, August 14, 2014 at 12:17:05 PM Mountain Standard Time

Subject: Re: FW: DBH Concentrations
Date: Thursday, August 14, 2014 at 12:14:32 PM Mountain Standard Time
From: Kari Barlow
To: Patricia Feldman
CC: Rebecca Newton, m.valdez@asu.edu, Colleen Cordes

Hello
These proposals look fine.
Thanks for keeping us informed.
Kari

On Aug 12, 2014 4:46 PM, "Patricia Feldman" <Feldman@asu.edu> wrote:

Hi Colleen,

Thanks and I am forwarding your note to Kari Barlow for review and next steps.

Patty

From: Colleen Cordes
Sent: Tuesday, August 12, 2014 3:40 PM
To: Patricia Feldman
Subject: DBH Concentrations

Hi Patty,

I'm not sure if you are the right person to outreach to for this, but DBH is hoping to formalize our current management and clinical tracks into concentrations. Attached are the two proposals for each concentration that will be going for approvals in the upcoming weeks with CHS and further.

Can you point me in the direction of who we need to have review these for approval, as they are both intended to be offered as part of DBH and therefore ASU Online?

Thanks for your help/guidance,

: Colleen Clemency Cordes, Ph.D.

: Interim Director, Clinical Associate Professor

Nicholas A. Cummings Behavioral Health Program (DBH)

College of Health Solutions

Arizona State University

College of Nursing and Health Innovation – Support Statement



August 19, 2014

To: Colleen Clemency Cordes, Ph.D., Interim Director, Nicholas A. Cummings Behavioral Health Program (DBH), College of Health Solutions, Arizona State University

From: Brenda Morris, EdD, RN, CNE, Associate Dean, Academic Affairs

Re: Letter of support for new DBH clinical concentrations; and MS of Integrated Behavioral Care Delivery

Dear Dr. Cordes,

On behalf of the College of Nursing and Health Innovation, I am writing to express our support of the proposed new Clinical and Management concentrations in the DBH program; and the proposed Masters of Integrated Behavioral Care Delivery. These new concentrations and Master's degree are complimentary to the Doctor of Nursing Practice in Psychiatric/Mental Health.

These are very exciting programs which may lend themselves to collaboration opportunities between our colleges. Best wishes as you launch these new programs.

Sincerely,

Brenda C. Morris, EdD, RN, CNE

Brenda C. Morris, EdD, RN, CNE
Associate Dean, Academic Affairs

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Phone: 602.496.2644 • Fax: 602.496.0886
E-mail: nursingandhealth@asu.edu WEB: www.nursing.asu.edu

School of Letters and Sciences
Counseling and Counseling Psychology
Support Statement

Subject: RE: DBH Academic Plan Proposals
Date: Friday, August 8, 2014 at 4:32:34 PM Mountain Standard Time
From: Terence Tracey
To: Colleen Cordes

I have no problem with the concentrations.

Terence J. G. Tracey, Ph.D., ABPP
Professor and Faculty Head
Counseling and Counseling Psychology
School of Letters and Sciences
Arizona State University
446 Payne Hall, mc-870811
Tempe, AZ 85287-0811
(480) 965-6159
Terence.Tracey@asu.edu
<http://tracey.faculty.asu.edu/index.html>

From: Colleen Cordes
Sent: Thursday, August 07, 2014 2:59 PM
To: Terence Tracey
Subject: DBH Academic Plan Proposals

Terry,

Hope this email finds you well. The DBH Program is requesting Counseling Psychology's support for two proposals that we would like to add to the Academic Strategic Plan. In particular, we are requesting support for:

- DBH Clinical Concentration (formalization of current track into concentration within the Doctor of Behavioral Health Program)
- DBH Management Concentration (formalization of current track into concentration within the Doctor of Behavioral Health Program)

Please let me know if you or your team have any questions about the attached proposals,

Colleen Clemency Cordes, Ph.D.
Interim Director, Clinical Associate Professor
Nicholas A. Cummings Behavioral Health Program (DBH)
College of Health Solutions
Arizona State University
Colleen.clemency@asu.edu
(602) 496-1356

Department of Psychology-Support Statement

From: Keith Crnic
Sent: Thursday, August 28, 2014 6:34 AM
To: Colleen Cordes
Subject: Re: DBH Program Proposals

Hi Colleen,

Thank you for sharing the plans for the establishment of formal concentrations in the DBH program. These plans do not conflict with Department of Psychology programs, and the formalizations of the current tracks into specific concentrations for the DBH program seems appropriate to program goals. We offer our support for the proposal to formalize the Clinical and Management concentrations.

Best,

Keith

From: Colleen Cordes <Colleen.Clemency@asu.edu<mailto:Colleen.Clemency@asu.edu>>
Date: Thursday, August 7, 2014 2:54 PM
To: Keith Crnic <Keith.Crnic@asu.edu<mailto:Keith.Crnic@asu.edu>>
Subject: DBH Program Proposals

Hi Keith,

The DBH Program is requesting your support for two proposals that we would like to add to the Academic Strategic Plan. In particular, we are requesting support for:

- * DBH Clinical Concentration (formalization of current track into concentration within the Doctor of Behavioral Health Program)
- * DBH Management Concentration (formalization of current track into concentration within the Doctor of Behavioral Health Program)

Please let me know if you or your team have any questions about the attached proposals,

Colleen Clemency Cordes, Ph.D.
Interim Director, Clinical Associate Professor Nicholas A. Cummings Behavioral Health Program (DBH) College of Health Solutions Arizona State University Colleen.clemency@asu.edu<mailto:olleen.clemency@asu.edu>
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