Clinical Faculty Titles and Ranks in the UK Medical Center

Part I: The First Decade

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I. Prior to President John Oswald (before 1963)

Prior to 1963, the University of Kentucky had not been promulgated a system of more than one faculty “title series.” There did appear in the Board of Trustees minutes of action on faculty appointment, promotion and tenure the ranks of Instructor, Assistant Professor, Associate Professor and Professor, and occasional use of “Lecturer.” Because there was no policy about the criteria for these ranks, each rank could be applied to faculty doing either teaching, research, service (e.g., extension, or clinical patient care) or any combination. In the College of Medicine of the early 1960’s, there were faculty appointed to full-time, paid status as Instructor, Assistant Professor, Associate Professor or Professor who had primarily clinical duties. By fall 1961, there had become formally constituted a college “Faculty Council” (composed of the Dean and heads of academic departments), one function of which was to recommend on faculty selection and promotion policies and a second function of which was to review all recommendations for appointment to tenure positions. In the latter function, there was also formally constituted a “Committee on Faculty Appointments and Promotions” that was to advise the Dean and Faculty Council on proposals to appoint, promote or tenure faculty, and that would make annual reports to the Faculty Council.\(^1\) In 1962 the College of Medicine also devised a policy on what would be the corresponding relationships of the academic rank of a clinical faculty member and the staff rank that person would have in the UK Hospital staff structure, as follows:\(^2\)

<table>
<thead>
<tr>
<th>Academic Rank</th>
<th>Hospital Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professor</td>
<td>Senior Physician</td>
</tr>
<tr>
<td>Associate Professor</td>
<td>Associate Physician</td>
</tr>
<tr>
<td>Assistant Professor</td>
<td>Assistant Physician</td>
</tr>
<tr>
<td>Instructor/Assistant/Fellow</td>
<td>Clinical Assistant Physician</td>
</tr>
</tbody>
</table>

There were also other persons who were (what we would call today as “voluntary”) clinical-activity faculty in the College of Medicine. In 1962, the College of Medicine also proposed a system of correspondence between the Hospital ranks of these faculty, in correspondence with their academic rank in UK academic departments. These proposed ranks were (using the Department of Medicine as an example):\(^3\)

<table>
<thead>
<tr>
<th>Academic Rank</th>
<th>Hospital Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professor of Clinical Medicine</td>
<td>Visiting Physician</td>
</tr>
<tr>
<td>Associate Professor of Clinical Medicine</td>
<td>Associate Visiting Physician</td>
</tr>
<tr>
<td>Assistant Professor of Clinical Medicine</td>
<td>Assistant Visiting Physician</td>
</tr>
<tr>
<td>Instructor of Clinical Medicine</td>
<td>Clinical Assistant Visiting Physician</td>
</tr>
</tbody>
</table>

Up to that time in the establishment of the Medical Center, the interaction between the University President, Frank Dickey, and the Vice President of the Medical Center, William Willard, had not fully developed. As President Dickey described his perception to a member of the Board of Trustees,
“Perhaps the most significant problem is the integration of the Medical Center into the University community, administratively and otherwise... Dr. Willard is quite able [but] view[s] the Medical Center as something separate and apart from the University. For example, not until last year was it possible to get the Medical Center staff voluntarily to include in their orientation program for new staff members representatives of the overall University administration, including myself.”

The following year President Dickey resigned, and the Board of Trustees set about to appoint a new President and charge that new President with a new mandate for the University.

II. President Oswald Establishes Definitions of Various Title Series and Their Ranks (1963-1965)

In the summer of 1963, the UK Board of Trustees appointed the new President John Oswald, and assigned him a primary mandate to lead UK out of its status as a local institution with primary teaching emphasis and into the ranks of national research universities. As the first step in instituting a University mindset toward national-level research President Oswald in October 1963, with the support of the University Faculty Council (= Senate Council today), established (what the following year became called) the Regular Title Series of faculty ranks of Instructor, Assistant Professor, Associate Professor and Professor, along with new criteria relating research, teaching and service to appointment to each rank. The requirement for a major research component for professorial appointment in these ranks immediately created a problem for situations involving faculty assigned primarily with nonresearch duties, including faculty in the colleges associated with the University Hospital that had become newly activated the previous year.

In advance assessment of a draft of that policy statement, the University Faculty Council, determined that this criterial policy, that included a substantive research component,

“This concern was relayed in October 1963 through Doug Schwartz, Special Assistant to the President, who described to the President that these clinical faculty

“keep the hospital running, while at the same time serving as a good model of the clinical “scholar” for medical students.”

At the beginning of February 1964, there occurred in the University Faculty Council

“substantial discussion of the matter of needs for special ranks to meet the needs of particular colleges. Dr. Ed Pelligrino [Faculty Council Vice Chair and the Chairman of the Department of Medicine, College of Medicine] presented problems that would be created by the proposed lecturer and associate ranks in the College of Medicine for people in the clinical area whose responsibilities did not fit the teaching research concept of the professorial series. He indicated that in such an area a title of clinical professor or clinical associate professor would be quite palatable and workable from all standpoints.”

In view of the potential non-fit of the title “Lecturer” to the specialized nonresearch duties of faculty in the College of Medicine, the Faculty Council in mid-February 1964 decided that the deans of “all colleges where problems of specialized activities suggested
other series of ranks than the proposed lecturer and associate ranks should be consulted,” by Ralph Weaver, the Faculty Council Chair. This situation spawned a process of identifying another suitable title series and ranks that would accommodate the special clinical emphasis of some faculty in the medical departments. In addition “Dr. Pelligrino reported that he would soon have a specific set of recommendations in the clinical series.”

(Parallel activities were initiated in relation to the extension activities of some faculty in the College of Agriculture; in relation to the special activities performed by librarian faculty; in relation to the status of clinical faculty whose lines were funded through the VA hospital; and in relation to full-time Dept. of Agriculture-funded adjunct faculty).

William Willard, (then) both Vice President of the Medical Center and Dean of the College of Medicine, had on September 18, 1964 expressed to President Oswald

“real reservations about a duel system of faculty titles…I don’t think it will be possible to avoid a second-class stigma,” but he was willing to endorse establishment of "one series for the full-time faculty who have research attainment" and another for full-time faculty who “are deemed competent in teaching and in other respects but who have little research productivity,” the former to be titled "Associate Professor of Medicine" and the latter titled "Associate Clinical Professor of Medicine," as long as "all colleges … have a dual title system" so that the medical colleges are not stigmatized by having a second title.

One day earlier, the Area Committee in a College of Nursing case recommended that promotion of a teaching (nonresearch) assistant professor be made to "Lecturer," but Med Center faculty resistance to the title of "Lecturer" was even stronger than to a publicly titled "Clinical" professorial series (UK had been, and U of L still was, publicly titling its voluntary faculty as "Clinical"). In the first use of VP Willard's Sept. 18, 1964-suggested establishment of a "Clinical" professorial series, President Oswald on 09/21/64 promoted the candidate, ad hoc, to the title "Associate Professor of Clinical Nursing."

III. Apparent Establishment of Medical Center Full-time “Clinical Series” - December 1964

An official solution proposed to the President in November 1964, by the new Special Assistant Tom Lewis, was that for internal personnel record keeping, the words “clinical” would be used in certain modifying ways to have particular intramural meanings: a paid, full-time clinical faculty with nonresearch assignment in teaching and patient care would be “Professor (Clinical Series)” while the volunteer would be “Clinical Professor.” However, in public references to the titles of the full-time clinical faculty the parenthetic modifier (Clinical Series) would not be included and only “Instructor,” “Assistant Professor,” “Associate Professor,” or “Professor” would be written or stated for either Regular Title Series or Clinical Professor Series faculty member; the Voluntary Title Series faculty member would be publicly designated as “Clinical Professor.” Support for this proposal came from Department of Medicine Chairman Howard Bost, who persuaded VP/Dean William Willard, who in turn on December 22, 1964 communicated his support (and that of the chairpersons of each department), and of Dean Al Morris (Dentistry), to the President. On that crucial December 1964 memorandum from VP Willard to President Oswald, the President by handwritten notation seeks a confirmation from Special Assistant Tom Lewis “is this OK?,” not with reference to the section of the memo describing the “Clinical Series,” but instead with reference to the section stating that the designation “Clinical Series” would appear only on internal documentation and not appear in the University catalogue, publications and in curriculum vitae.”
That is, Oswald is not questioning the adoption of a stand-alone “Clinical Series” concept, but only about its intramural vs. extramural notation. Tom Lewis by hand-written counternote on the memo responds

“This is the understanding I had with them. I think WRW wants to make sure you approve. TL.”

This is the closest extant documentation that can be located to what would constitute the acceptance and adoption by President Oswald of the stand-alone “Clinical Series” as proposed by VP Willard for use only in the Colleges of Medicine and Dentistry.16-21

IV. Stand-Alone Clinical Professor Series Becomes Subsumed as a Clinical Title Within Special Title Series

As the new year turned to 1965, President Oswald was still wrestling with the nature of this nonresearch “Clinical Professor Series” and what relationship it would have to the University-wide Nonresearch Title Series, which his office (i.e., Tom Lewis) had just drafted in a parallel activity [see Chapter on History of Special Title Series]. In that draft for a Nonresearch Title Series, which the University Senate Council in Feb. 1965 renamed and approved as a “Special Title Series,” (which the President had not yet officially approved) the unique “Special Title” conferred to the given faculty member would designate the special area of that faculty member’s assignment.22 This mental gestation by the President is reflected in his Feb. 1965 written denial of promotion of a College of Dentistry associate professor “in the regular series, on account of a paucity in research.” That the President at that moment (but see later, below) envisioned the “Clinical Series” as being a variation of a (not yet promulgated) tenure-track “Special Title Series” can be seen in his final statement in that action of

“I am inclined to recognize his advancement in the clinical series but before making a final decision, I would welcome your recommendation on the best manner by which the clinical designation can be incorporated into the rank and title.”23

Acting VP Howard Bost responded that he would recommend the title “Professor of Clinical Fixed Prosthodontics” in line with the original recommendation for promotion

“in a clinical series and in line with the general pattern of implementation which we would see following with the adoption of the University Faculty Council recommendation to you on faculty titles” [i.e., on “Special Title Series”].24

However, the relationship between the University Professor Series” was still not settled with the President. The President had provided the November 1964 description of “Clinical Professor Series” to the University Faculty Council, which in late March 1965 decided to delay its discussion of that topic, and then in early April 1965 decided schedule a special breakfast with the President on the proposed “Clinical Professor” series.25 After that breakfast, and after the April 1965 meeting of the University Senate, the President went ahead to very publicly promulgate and widely circulate the final policy on definition of “Special Title Series” and “Lecturer” and “Adjunct Series” but at that time did not openly promulgate an official policy document for a separate “Clinical Professor Series.”26 The extant documentation suggests that by April 1965, perhaps on account of his discussions that month with the University Senate Council, President Oswald was still decisionally wrestling with whether the Clinical Professor Series was its own, nonresearch stand-alone title series, or a sub-set of positions in the University Special Title Series, or in a transition period between the two, much as the way what was initially the nonresearch “Extension Special Title Series” years later became its own, stand alone, “Extension Title Series.” (See: History of Extension Title Series).

The coming 1965-1966 academic year would continue to reflect the tension between President Oswald’s hesitation to openly establish a tenure track Clinical Professor Series for Dentistry/Medicine faculty whose duties were primarily patient care and intern/resident training, with little research or classroom teaching assignment, and whose title and ranks would be the same as those of Regular Title
Series faculty vs. the conviction by Dentistry Dean Al Morris and VP William Willard that such academic clinical faculty deserved exactly that. Both Morris and Willard remained convinced that faculty in the Special Title Series, being publicly recognizable as such by the descriptive adjective in the person’s title itself (e.g., “Professor of Clinical Medicine) would stamp the faculty member with a second class status. Both were determined that clinical faculty were to be appointed and promoted in the Regular Title Series or in a stand-alone Clinical Series that had the same professorial ranks as the Regular Title Series, and that as few faculty as possible would be assigned to the new Special Title Series. At its Sept. 4, 1965 meeting the University Senate Council discussed with President that “certain new titles and ranks yet remain to be defined and approved.”27 There has not been located any 1965 or 1966 publicly disseminated, nor administratively disseminated, policy document that officially approved per se, a “Clinical Professor Series.” Interviews in July 2004 with persons who were academic administrative officers in the Medical Center during 1965 and 1966 yields the inference that there never was such a formal, public University-wide policy announcement establishing a stand-alone “Clinical Professor Series” of the kind supported by VP Willard and Dean Morris.16-21

This tension between VP Willard and President Oswald on the professorial status of clinical faculty came to a head in the following summer of 1966. Executive Vice President A. D. Albright (acting for President Oswald) accepted the Biological and Medical Sciences Area Committee’s June 1966 recommendation against the VP Willard’s recommendation to promote two clinical faculty in the Regular Title Series, and accepted that Area Committee’s alternative recommendation

“to promote in the clinical series ...to the rank of Associate Professor of Clinical Medicine and ... to the rank of Associate Professor of Clinical Pathology.”28

The disapproval of promotion (above) in the Regular Title Series of the two College of Medicine faculty by the Biological and Medical Sciences Area Committee in June 1966, and the final adoption of that disapproval by Executive VP Albright with diversion of the promotions into two positions of a Special Title Series,28 infuriated VP Willard,29 especially since at least one of the faculty was anticipated by Willard to be of national caliber. Both VP Willard, and Dean of Dentistry Al Morris, exasperated, immediately wrote to President Oswald two impassioned, long memoranda lecturing/explaining that the teaching, research and service activities performed by clinical faculty in Medical Center were unique to the clinical disciplines, and were simply not understood by the other University faculty who predominated the Academic Area Advisory Committees30,31 In a portent of what would eventually come in 1967 and 1968, Willard urged either

“the creation of a new area committee...this committee would review Medical Center clinical faculty, and might review also faculty in other professional schools or departments that have somewhat analogous service obligations to those of the Medical Center faculty” or, as an alternative, that the University “consider all clinical faculty as falling in the Special Title Series for purpose of internal University administration.”30

Three weeks later, the Senate Council discussed that President Oswald had asked it for a slate of names

“from which he might appoint a committee to consider the procedures and criteria to be use in the appointment and promotion of the clinical faculty of the College of Medicine.”32

Senate Council Chair Ed Pelligrino then drafted that list, which the Senate Council then approved at the next meeting, for submission to the President. That fall, the Senate Council then received the Nov. 22, 1966 report of the committee,33 in which the committee fervently objected that
“undue emphasis is placed on research publications as requisites for promotion in the regular series” and that “Prior to April 1965 our volunteer faculty were designated as ‘clinical,’ in keeping with nationwide practices,” but after “[t]he ‘special title’ series was adopted as, University policy, in April 1965” ...[that required full-time faculty in the special clinical series to carry the descriptor ‘clinical’ in their professorial title]... “[t]he implication is that persons assigned to the ‘clinical series’ have less status in the faculty than those in the other [Regular Title Series] line.”

In a quite prophetic moment, the committee report anticipated much of the anguish of the upcoming next several decades, with its warning:

“Indeed, if the clinical responsibilities now being performed by the non-research group should be shifted to the research-oriented faculty members patient care as well as the research program would inevitably suffer.”

On Dec. 1, 1966 the Senate Council discussed the report’s startling recommendations to: abolish the Special Title Series, return the Special Title Series clinical faculty to their status as Regular Title Series faculty as was the case before 1963, and to exempt promotion and tenure of clinical faculty from review by any University-level Academic Area Advisory Committee that is above the level of the Dean. Essentially, undo everything President Oswald had done. The Senate Council reported to President Oswald the next day that it “approves in principle” the report. President Oswald, who was miffed by the committee report, did not accept any of these recommendations, but the committee report catalyzed further assessment of the scope of application of the 1963 criteria for Regular Title Series faculty onto the Medicine/Dentistry clinical-faculty.

Shortly after the above committee issued its report, President Oswald wrote to VP Willard that he would establish a new clinical Area Committee. President Oswald suggested to VP Willard that a first task of the new Area Committee ought to be to establish criteria for clinical area faculty (criteria which VP Willard had been asking for since the previous June 1966). VP Willard responded with particular enthusiasm to the role of the new Area Committee to “recommend criteria governing promotions and appointments.” VP Willard also stressed that he wanted President Oswald to delegate to the VP of the Medical Center (i.e., to Willard) “the final authority ... to take final action upon proposed appointments and promotions.” The following month, President Oswald formally established a new “Area Committee for Clinical Sciences of Medicine and Dentistry,” and expressly delegated to VP Willard the authority to make final decisions on the nature of the position assignment to individual faculty and final decisions (pending final Board approval) on appointment and promotion of faculty. President Oswald at the same wrote to the faculty of College of Medicine and Dentistry announcing establishment of this “Area Committee for Clinical Sciences of Medicine and Dentistry,” and again describing its first assignment as “To recommend [to VP Willard] criteria governing promotions and appointments,” and that VP Willard would then forward the criteria to the President, who would then refer the criteria to the Senate Council for “concurrence.” Shortly thereafter, President Oswald directly wrote to the members that he appointed to this new Area Committee, specifically reiterating its charge to “recommend criteria covering appointments and promotions within the University-wide criteria” and specifically reiterating the Feb. 15, 1967 deadline.

The phrase “within the University-wide criteria,” is underlined here to show Oswald still resisting Willard’s efforts to cause the clinical faculty to be outside the reach of the Oct. 28, 1963 research-heavy requirements for ‘north campus’ Regular Title Series faculty. In the above transactions, VP Willard was making great effort to, in essence, accomplish by several indirect means what the Nov. 22, 1966 committee report had directly recommended that Oswald had rebuffed, i.e., that WP Willard regain final authority control over the hiring, assignment, promotion and determination of qualifications of clinical faculty in the Medical Center. In the above transactions, VP Willard had succeeded in causing that clinical faculty would be evaluated by a new Area Committee, membered by clinical faculty, reporting directly to him, over which cases he had final decisional authority, and the Area Committee would develop and recommend to him the
clinically-relevant criteria for evaluation of clinical faculty. However, as shown by the underlined phrase above, the equally astute President Oswald insisted that these new clinically-relevant criteria to be applied to specialized duties of Regular Title Series clinical faculty would be an elaboration within the framework of the 1963 Regular Title Series policy, and would not be a separate criterial statement that contradicts the 1963 policy. In addition, President Oswald specified that the clinically-relevant criteria would first be submitted to him for approval and the University Senate for concurrence. That is, President Oswald intended to keep the new Area Committee on a short leash of accountability with respect to the elaboration of criteria.

A year later, the Chair of this new Area Committee, in review of the preceding year’s activities on individual cases, also wrote

“Our particular committee was charged with the drafting of a statement concerning the promotion and tenure in the medical and dental areas,”

showing that this new Area Committee did come to exist in 1967, and that at least this member claimed the Area Committee had performed this special initial function of criterial elaboration (it was also making recommendations on specific cases of individuals by late February 1967).

However, there has not been located a copy of this criterial elaboration in the archival files of either President Oswald or Executive VP Albright, nor is there any record in the Senate Council archives that such a criterial elaboration was submitted to the Senate Council for its “concurrence.” It is the opinion of this author that VP Willard would have been of an inclination not to subject this long-labored-for criterial elaboration to potential disapproval, and that he might not have ever forwarded the criterial elaboration to the President, Executive Vice President, or University Senate for approval (if in fact it was ever reduced to writing). In addition, VP Willard was now directly supervising the Area Committee, so that the supporting documentation of each case stopped at the level of VP Willard (i.e., not actioned by either President Oswald or Executive Vice President Albright). Apparently, VP Willard utilized this new authority to cause that every case of promotion and tenure of clinical faculty that was submitted to this new Area Committee for Clinical Sciences of Medicine and Dentistry was handled as an appointment or promotion in the Regular Title Series (as VP Willard had wanted all along), instead of to the Special Title Series: the Board minutes for 1967 and 1968 do not explicitly show any new appointments to, nor any promotions to, or tenure of, faculty in the Colleges of Medicine or Dentistry for which the title as shown in the Board minutes is a title indicative of the faculty member being handled as a Special Title Series employment.

V. VP Willard Attempts to Establish a Superceding “Medical Center Special Title Series” - 1968

As a result of the above changes, the Special Title Series lines in the Colleges of Medicine and Dentistry had their own criteria for evaluation at the Area Committee level, were evaluated by a Medicine/Dentistry Area Committee, and would be noted as Special Title Series only for internal administrative purposes. The single remaining procedural caveat that kept VP Willard subject to President Oswald’s close-scrutiny in the Special Title Series procedures of April 28, 1965 was the requirement that Special Title Series positions be justified, established, and appointment criteria developed, on a case-by-case basis. President Oswald's resignation announcement, effective September 1968, to be succeeded by President A.B. Kirwan, provided the opportunity for VP Willard to complete the conversion of clinical STS lines into the Med Center's "own" clinical title series. His first step was to write to the Senate Council in May 1968 his view that:

(although the original intent was) “the special title series be used infrequently”.... “the special title series needs further development ... as it applies to certain kinds of faculty members which are becoming more numerous in the Medical Center [in] the growing service programs for which we carry significant responsibilities.”

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In that communication to the University Senate Council, VP Willard described that in response to needs for more Special Title Series faculty as related to the increasing clinical service responsibilities of the Medical Center,

“We have been endeavoring to generalize criteria as far as possible in the special title series in order to minimize the number of different special series but not necessarily the number of faculty holding appointments in this series.”

Under President Oswald’s enforcement of the Special Title Series, VP Willard had not been successful in that “endeavor” to “generalize” the Special Title Series criteria up to that time (which he had been endeavoring for two years since June 1966), because President Oswald viewed this series as an occasional position-specific use, and not of “general” use. However, following up on his seed planted with the Senate Council in May 1968, and just one month after President Oswald departed UK in September 1968, VP Willard drafted a proposal, that in December 1968 he then submitted Executive VP A.D. Albright, wherein his proposed new policy would “simplify” the many individual Special Title Series descriptions in the Medical Center into a single

“generic special title series for the Medical Center [that] could apply to all, or at least most, of the Medical Center special title series.”

The already existing, approved, individualized criteria for STS positions in the College of Nursing, the School of Allied Health Professions and the Department of Medicine “would be superceded” by this single generic criteria statement, and “as the need for a special titles series develops with new programs, we would propose that these criteria be applied.” The criteria contained in this Dec. 1968-proposed generic “Special Title Series for the Medical Center” focused on professional and clinical service activities, and did not contain requirement for publication in “research” as that term was used in the Oct. 28, 1963 definition of the criteria for the Regular Title Series. This new single Medical Center-wide special title

(a) would subsume the several position-specific criterial statements established during 1965 and 1966 for individualized Special Title Series positions in Medicine and Dentistry,

(b) would subsume the previously developed criteria for appointment, promotion and tenure of clinical faculty for which the January-1967-established “Area Committee for Clinical Sciences of Medicine and Dentistry” was charged by the President in early 1967 to develop,

(c) would subsume the separate, previously approved College of Nursing special title series criterial statement, and

(d) would subsume the separate special title series criteria previously approved for the School of Allied Health Professions.

However, in developing during fall 1968 the above proposal for a single, Medical Center-wide title series statement that would subsume the previous special titles for all five Medical Center colleges, VP Willard did not have the concurrence, or even input, of the Dean of Nursing (Marcia Dake) nor of the Biological Sciences Area Committee (chaired at the time by Jack Hiatt, Agronomy). Hence, once Dean Dake’s objection was lodged, the proposed new statement of the Medical Center Special Title Series was amended to include the clause

“These criteria will supercede those already established and approved with the exception of those for the College of Nursing.”
Although VP Willard submitted in Dec. 1968 his intent to Executive VP Albright to create this single, Medical-Center-wide Special Title Series description, no record can be located in the archives of the papers of President Oswald, President Kirwan, Executive VP Albright, or the Senate Council, that shows Executive VP Albright ever approved of this proposal. Perhaps concordantly, the next event appears to be that one year later, after Otis Singletary has become the newly appointed President, VP Willard on Nov. 20, 1969 again submitted an apparently similar proposal to President Singletary.49

VI. President Singletary’s action to officially establish policy for Medical Center Special Title Series - 1970

Continuing his desire to put all Medical Center special title series under a single umbrella, VP Willard in Nov. 1969 requested that President Singletary rename the Jan. 1967-established Area Committee for “Clinical Sciences of Medicine and Dentistry” (note: two colleges) as the “Medical Center Clinical Sciences and Special Title Series Area Committee” (that would be responsible for all five medical colleges and for “other faculty in the Special Title Series”).49,50 The President in Jan. 1970 agreed, and prescribed this new Area committee to use

“criteria which exists for promotion and appointment of clinical faculties in Medicine and Dentistry, and approved criteria for faculty of the College of Nursing. It is my understanding that the document dated October 10, 1968 entitled “Medical Center Special Title Series,” sets forth criteria which will apply in the case of other recommendations transmitted to the committee.” 51

Analyzing the President’s statement in its three parts:

(a) the “criteria which exists for promotion and appointment of clinical faculties in Medicine and Dentistry” would be the STS criterial statements established in 1965 and 1966 on a position-by-position basis, and more criteria for clinical faculty evaluation that were (presumably) established for the two colleges in early 1967 as the first activity of the predecessor Area Committee,

(b) the only “approved criteria for faculty of the College of Nursing,” i.e., the only college-wide statement of criteria for the College of Nursing, was the criterial statement that Nursing Dean Dake had secured in Dec. 1965, referred to by VP Willard in June 1966,30 and which were provided to be an exception to the December-1968 Medical Center-wide Special Title Series description,45

(The Board of Trustees minutes after 1969 show the full-time, tenure track faculty with primarily clinical Special Title Series duties thereafter being recorded internally with the special title series format of “Assistant Professor (STS)” or, later, Assistant Professor*” [i.e., asterisk designation]. However, this new Medical Center-wide Special Title Series for full-time, nonresearch clinical faculty needed to be distinguished from how voluntary clinical faculty would be recorded. So, the Board minutes in 1969, and for the next 25 years through 2004, have utilized the format of placing the word “Clinical” immediately after the rank and to put the parenthetical modifier at the end, as in “Assistant Clinical Professor (Voluntary)”.

(c) the reference to “other recommendations transmitted to the committee,” would be the other Medical Center colleges, e.g., Allied Health Professions and Pharmacy, and the reference to “other faculty in the Special Title Series” not in the five medical colleges likely refers to clinical STS cases from nonmedical colleges (such as the speech therapy clinics in the College of Education, or the clinical veterinarian faculty in the College of Agriculture, as WP Willard referred to in June 196630). For these “other recommendations”, and perhaps for these “other faculty,” President Singletary’s memo appeared to envision that this Area Committee would utilize the Medical Center-wide STS
criterial statement proposed by VP Willard in December 1968,\textsuperscript{45} reproposed by VP Willard in Dec. 1969, and finally approved in the January 1970 action of President Singletary.\textsuperscript{52}

This January 1970 version served as the established criterial policy for the \textbf{Medical Center Special Title Series} until it was held to be void in 1983 in a finding by the Senate Advisory Committee on Privilege and Tenure [see Chapter on History of the Special Title Series].

\textbf{Epilogue}

Despite the long journey narrated above, the original problem that had arisen in Oct. 1963 still remained, of the heavy nonresearch clinical assignments (that in 1971 were still) being made onto \textbf{Regular Title Series} faculty in the Colleges of Medicine and Dentistry. The issue continued to be such a significant problem that the new VP of the Medical Center, \textbf{Peter J. Bosomworth} in mid-1971 directed the \textbf{Medical Center Clinical Sciences and Special Title Series Area Committee} to investigate the criteria used at other universities to evaluate professional clinical faculty.\textsuperscript{53} The competing pressures of research-publication-accruing vs. patient-care-fee accruing faculty duties continued to build in the College of Medicine over the next decade, leading to an initiative in the mid-1980’s that culminated in the nontenure track, \textbf{Clinical Title Series} that we have today (see: \textit{History of Clinical Faculty Titles and Ranks in the UK Medical Center - Part II:}).

\textbf{References}

1. November 3, 1961 document on College of Medicine organization
2. Hospital employee list dated April 1962
3. April 15, 1962 document “Proposed Hospital Ranks For Voluntary Faculty”
4. Oct. 2, 1962 memo from President Frank Dickey to Ralph Angelucci
5. Faculty Council minutes Feb. 17, 1964
6. October 28, 1963 final policy memo sent to all faculty and academic administrators
7. October 10, 1963 minutes of Faculty Council
8. October 11, 1963 memo from Doug Schwartz to President Oswald
9. Faculty Council minutes Feb. 1, 1964
10. September 14, 1968 memo from Dean William Willard to President Oswald
11. Sept. 21, 1964 memo from President Oswald to “Dean” William Willard
12. November 5, 1964 memo from Special Assistant to President Tom Lewis to President Oswald
13. December 9, 1964 memo from Chairman Howard Bost to Dean William Willard
14. December 9, 1964 hand written cover note from Chairman Howard Bost to Special Asst to President Lewis
15. December 22, 1964 memo from Dean William Willard to President Oswald
16. Telephone conversation 07-30-04, with Peter Bosomworth, a College of Medicine faculty member/administrator during the Oswald years. I reviewed and he expressly remember the Oswald Oct. 28, 1963 memo, and the April 25, 1965 memo formally establishing Special Title Series, Adjunct Series and Lecturer. He specifically remembered that STS was for specific, unique positions. He remembered that there was still the situation that none of these satisfied the need for physicians who were needed for the patient care needed to carry the patient load in the hospital as a teaching hospital. It was his distinct memory that the Clinical Title Series did exist and was utilized, and that it was a tenure-track series.
17. Second telephone conversation 07-30-04, with Dr. Howard Bost, acting Chair of the Department of Medicine and Acting Vice President from the Oswald years. I reviewed and he expressly remember the Oswald Oct. 28, 1963 memo, and the April 25, 1965 memo formally establishing Special Title Series, Adjunct Series and Lecturer. He specifically remembered that STS was for specific, unique positions. He remembered that there was still the situation that none of these satisfied the situation that was becoming severed in Dentistry and Medicine, of the need for physicians who were
needed for the patient care needed to carry the patient load in the hospital as a teaching hospital. It was his memory that the Clinical Title Series did get established (at least in the sense that it existed to be used). It was his sense that because it was not tenure track, this is why Oswald went along with it for Willard’s use. He agreed with the inference that the Clinical Series was superseded or absorbed into the new Medical Center Special Title Series that Willard established in the fall of 1968. He said that he was one of the “four from Syracuse” that had originally come down to help Willard put the College of Medicine together. He said one of the other four was Bob Strauss, who was more of the academic side of things (Bost was more of the economic medical policy side of things), and that I ought call Bob Strauss as someone who would have been closer to this question of the Clinical Series.

18 Third telephone conversation 07-30-04, with Rob Strauss, and academic administrator who helped Willard get the College of Medicine launched. He specifically remembered that STS was for specific, unique positions. He remembered that there was still the situation that none of these satisfied the situation that was becoming severed in Dentistry and Medicine, of the need for physicians who were needed for the patient care needed to carry the patient load in the hospital as a teaching hospital. It was his impression that the “Clinical Series” was never formally established. It was his feeling that initially Willard entertained this idea as a solution for the need for heavily clinical academic faculty, but that after a short time Willard gravitated to the ultimate solution of using the Special Title Series. He agreed with the inference that the Clinical Series was superseded or absorbed into the new Medical Center Special Title Series that Willard established in the fall of 1968. He suggested I contact Al Morris, A.D. Albright and Dr. Rosenbaum as players from that time period who may have a better memory.

19 Telephone conversation 07-31-04, with Dr. A. D. Albright, Executive Vice President during the Oswald years. I reviewed and he expressly remember the Oswald Oct. 28, 1963 memo, and the April 25, 1965 memo formally establishing Special Title Series, Adjunct Series and Lecturer. He had no explicit memory that Oswald established the Clinical Series by overt policy memorandum. It was his feeling during this interview that the Clinical Series was a “shadow title series” (my language), existing “in the desk drawer” (my language) out of site of the Board of Trustees, for quiet ad hoc use when Willard absolutely needed it for a faculty appointment. He vaguely remembers the Oct. 1968 action by Willard to supercede all the individual special title series descriptions in the five medical colleges into the single Medical Center Special Title Series, and agreed with the inference that the Clinical Series was superseded or absorbed into this new Medical Center Special Title Series.

20 Second telephone conversation 07-31-04, with Dr. Rosenbaum, Chair of Radiology, College of Medicine, during the Oswald years. He did specifically remember the existence of a “Clinical Series” for those not doing research, and he remembers using it for the appointment of heavily clinical faculty.

21 Third telephone conversation 07-31-04, with Al Morris, Dean of College of Dentistry during the Oswald years. I reviewed and he expressly remember the Oswald Oct. 28, 1963 memo, and the April 25, 1965 memo formally establishing Special Title Series, Adjunct Series and Lecturer. He specifically remembered that STS was for specific, unique positions such as the STS position in Fixed Prosthodontics. He remembered that there was still the situation that none of these satisfied the situation that was becoming severed in Dentistry and Medicine, of the need for physicians who were needed for the patient care needed to carry the patient load in the hospital as a teaching hospital. It was his memory that Oswald, who did not have prior experience with a university that had a medical center, did not grasp the academic niche for such individuals and did not grasp that the mental model he had for “what is a faculty member,” and “what is an STS faculty member,” still did not encompass the need for a physician academic clinician whose primary activities centered around patient care. He specifically remembered that around the time of 1966, there was utilized by him as Dean of Dentistry and also in the College of Medicine a title series for faculty appointment of “Clinical Series” that was not the Regular Title Series, Special Title Series, Adjunct Series or Voluntary Series. He agreed that probably Oswald never did officially promulgate the “Clinical Series” series by a formal policy memorandum announcement, and that it was more of an arrangement agreed between Oswald and Willard on how Willard could handle situations where a full time faculty title was needed for a physician clinical faculty member. It is his bet that no other college other that Medicine and Dentistry used the Clinical Series. He did remember the action by Oswald to separate the Biological and Medical Sciences Area Committee into two Area Committees, and he did not have an active memory of seeing a work product from the resulting Medical and Dental Clinical Sciences Area Committee of drafting a set of criteria by which to evaluate appointment and promotion of clinical faculty. He had a faint memory of the Oct. 1968 Willard action to create the Medical Center Title Series, and noted that it occurred shortly after Oswald left the University. He felt that this was an effort by Willard to bring all of the situations of heavily clinical faculty (STS, Clinical Series) into one general solution, as a way to avoid the previous several years of having various different solutions applying to different variations of the same overall problem of appointing and evaluating heavily clinical faculty. He agreed with the inference that the Clinical Series was superseded or absorbed into this new Medical Center Special Title Series.
Many revisions were made to the title series criteria after approval was given on February 12. Some revisions were made because of discrepancies between the full-time clinical and voluntary professor titles. This was reported by the Medical Center VP, Willard Albright, in a memo dated June 30, 1966. The full-time Faculty were quite sensitive, as unpaid voluntary faculty at the University of Louisville were designated as clinical professor. President Singletary presumed the memo was issued on account of its citation. The Senate Advisory Committee Privilege and Tenure held that an umbrella title series is a contradiction and there is nothing special about it. They concluded that each special title position must be described by a unique document and criteria.
Photographs contained herein were provided by the UK Library Archives, with the generous assistance of Mr. Frank Stanger. The author greatly appreciates the access to the archival papers of President Oswald, Executive VP Albright, VP Willard, President Singletary and other former University officials was also greatly facilitated by Mr. Stanger and the access provided to the papers of the Senate Council Office that was facilitated by Rebecca Scott, Senate Council Office Administrator.

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