REVIEW FOR ACCREDITATION

OF THE

COLLEGE OF PUBLIC HEALTH

AT THE

UNIVERSITY OF KENTUCKY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
April 12-14, 2010

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the College of Public Health at University of Kentucky. The report assesses the college’s compliance with the Accreditation Criteria for Schools, amended June 2005. This accreditation review included the conduct of a self-study process by college constituents, the preparation of a document describing the college and its features in relation to the criteria for accreditation, and a visit in April 2010 by a team of external peer reviewers. During the visit, the team had an opportunity to interview college and university officials, administrators, teaching faculty, students, alumni and community representatives, and to verify information in the self-study document by reviewing materials provided on site in a resource file. The team was afforded full cooperation in its efforts to assess the college and verify the self-study document.

The Kentucky State Agricultural and Mechanical College was founded in 1865 as part of Kentucky University, now Transylvania University, a liberal arts university still located in Lexington, Kentucky. In 1878, the college separated from Kentucky University under the land grant provision of the Morrill Land-Grant College Act of 1862. In 1908, the college was renamed the State University and became the University of Kentucky (UK) in 1916.

UK created the Albert B. Chandler Medical Center and the colleges of Medicine, Dentistry and Nursing in 1956, adding the colleges of Allied Health Professions (now named the College of Health Sciences) and Pharmacy in 1966. The College of Medicine added a school of public health in 1998. Following a lengthy and detailed process involving review and approval by forty different committees, in May of 2004, the University of Kentucky Board of Trustees formally approved the College of Public Health as a new and independent college within the broader university.

More than 27,000 students enroll at UK from 115 foreign countries, all 50 states and each of the 120 counties in the Commonwealth of Kentucky. UK offers 88 bachelors-level degrees, 93 masters-level degrees and more than 60 doctoral, specialist and professional degree programs. UK is the only institution in Kentucky designated a Research University of the First Class by the Carnegie Foundation and a Carnegie Engaged University.

The UK College of Public Health received initial accreditation in July 2005. The Council awarded an accreditation term of five years, with an interim report due in two years. The Council accepted the interim report in 2007.
Characteristics of a School of Public Health

To be considered eligible for accreditation review by CEPH, a school of public health shall demonstrate the following characteristics:

a. The school shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education.

b. The school and its faculty shall have the same rights, privileges and status as other professional schools that are components of its parent institution.

c. The school shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research, and service. Using an ecological perspective, the school of public health should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem-solving, and fosters the development of professional public health concepts and values.

d. The school of public health shall maintain an organizational culture that embraces the vision, goals and values common to public health. The school shall maintain this organizational culture through leadership, institutional rewards, and dedication of resources in order to infuse public health values and goals into all aspects of the school's activities.

e. The school shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. As a minimum, the school shall offer the Master of Public Health (MPH) degree in each of the five areas of knowledge basic to public health and a doctoral degree in at least three of the five specified areas of public health knowledge.

f. The school shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the College of Public Health (CPH) at the University of Kentucky (UK). The college is housed within an institution accredited through the Southern Association of Colleges and Schools (SACS). The college faculty have the same rights, responsibilities, privileges and status characteristic of the other fifteen colleges at the university. College faculty include those employed in the college, other colleges across UK and adjunct working in public health related departments and agencies in the state.

The college supports interdisciplinary and collaborative approaches to solving public health problems in Kentucky. Faculty and students function as an integral part of Kentucky's public health system, actively applying professional public health concepts and values. Classroom and experiential learning promote solving real-world problems in public health. In addition, artwork in the physical space utilized by faculty and students highlights key public health competencies, attitudes and values important to public health practitioners.
UK provides expanding resources to the college (both budget and faculty). Currently, 48 core faculty members and 24 additional adjunct faculty members (university and community-based individuals) deliver courses and advise 210 FTE students for a student-faculty ratio (SFR) of 3.91 in various degree programs including MPH, PhD, DrPH and MS.

1.0 THE SCHOOL OF PUBLIC HEALTH.

1.1 Mission.
The program shall have a clearly formulated and publicly stated mission with supporting goals and objectives. The program shall foster the development of professional public health values, concepts and ethical practice.

This criterion is met. The College of Public Health (CPH) at the University of Kentucky established its mission statement as part of a comprehensive strategic plan developed at the formation of the college and which has guided its first five years of existence. The college states its mission is to “apply comprehensive public health approaches to better understand and to help reduce the burdens and disparities of public health problems on individuals, families, and communities.” The college shares this statement both internally and externally.

The vision statement asserts “The College of Public Health will be recognized locally, nationally and internationally for its outcomes and products addressing public health problems and for reflecting excellence in discovery, outreach, learning, service, community engagement and leadership.”

Five goals amplified by 24 measurable objectives and 23 strategic considerations describe the college’s commitment to teaching, service, research, diversity and fiscal integrity. The goals are:

1. Enhance intellectual and economic capital through growth in research, becoming a valuable resource of collaborative inquiry;
2. Prepare students for leadership in the knowledge economy and global society;
3. Engage Kentuckians through partnership to elevate quality of life;
4. Value diversity of persons; and
5. Manage the College’s resources optimally.

The site visitors’ conversations with college stakeholders indicated that the college recognizes the importance of the strategic plan to its overall operation and takes the achievements of its goals and objectives seriously. The college appointed an assistant dean for evaluation and planning who, in conjunction with the preparation of the college’s self-study and with the guidance of the college’s Administrative Committee, participated in the review and update of the current strategic plan in 2009, which was led by the Assessment and Evaluation Committee, a standing college committee. Faculty,
staff, students and the college’s External Advisory Council further enabled and informed the strategic planning process. The college's next strategic plan will align with the university's plan, once released in 2010. The college operates in such a manner that it will follow the same course of inclusion in its development and dissemination.

The college takes seriously its role as part of a land grant university by providing service to the State of Kentucky. Consequently, the college, as stated in goal 3, established a broad range of collaborative partnerships with both academic and practice organizations at the state and community level.

1.2 Evaluation and Planning.

The school shall have an explicit process for evaluating and monitoring its overall efforts against its mission, goals and objectives; for assessing the school’s effectiveness in serving its various constituencies; and for planning to achieve its mission in the future.

This criterion is met. The college has taken seriously its responsibility to hold itself accountable to faculty, staff, students, key stakeholders and the people of Kentucky. This includes establishing organizational mechanisms such as the Administrative Council, External Advisory Council and student, staff and faculty councils.

The Administrative Council consists of associate and assistant deans, department chairs, chairs of the faculty, staff and student councils as well as the directors of collegiate research centers. This council meets monthly to ensure communication and alignment of collegiate activities. The dean also meets individually on a monthly basis with the department chairs to review departmental issues, such as faculty and course evaluations and fiscal accountability. The External Advisory Council includes strong representation from Kentucky’s communities and practitioners and convenes twice a year to help the college evaluate its activities and suggest future directions. The university also mandates periodic external review of all academic units. The most recent assessment of the CPH occurred in 2007-2008.

Since its initial accreditation, the college created a new position of the Assistant Dean for Evaluation and Planning whose responsibilities include: 1) organizing systems to collect data on strategic plan accomplishment; 2) encouraging involvement in evaluation and planning by faculty, staff, student and members of the External Advisory Council; 3) guiding internal assessment teams; 4) reviewing data for completeness; 5) analyzing data and providing feedback as well as interpretation; 6) chairing the college assessment and evaluation committee (formally recognized as a collegiate standing committee pursuant to the bylaws of the college in 2008); 7) developing routine reports for review by the college faculty, staff, students, and external partners as well as administrative offices responsible for oversight of the colleges' work and activities, and 8) facilitating the college’s strategic planning process.
The college sets forth explicit measurements for each of the goals and objectives of the college’s strategic plan. Targets include:

- Each year of primary extramural funding will exceed the prior year;
- There will be at least 50 new MPH enrollments annually;
- 80% of MPH students will graduate in less than 8 years (soon to be changed to 6 years);
- Greater than 40% of extramural funding will be for service;
- The faculty will have diversity equal to or greater than the university; and
- Greater than or equal to 70% of students say they would recommend the college as a good place to work/study.

The college collects data on all goals and objectives and makes informed decisions based on that data. The college is at the beginning of its strategic planning for 2010-2014 and will use the findings to determine strategic initiatives in that plan. The site visit team concluded that, although the college has not achieved all targets, it is evident that the college set “stretch” goals for itself and was transparent in its release of results.

1.3 Institutional Environment.

The school shall be an integral part of an accredited institution of higher education and shall have the same level of independence and status accorded to professional schools in that institution.

This criterion is met. The University of Kentucky, a land-grant university with an enrollment of 27,000 students, is accredited by the Southern Association of College and Schools (SACS). The most recent 10-year reaccreditation by SACS took place in 2002.

The preventive medicine/occupational medicine residencies through the college are accredited through the Accreditation Council for Graduate Medical Education (ACGME) with the most recent reaccreditation review decision completed in October 2009. Figure 1 presents the university’s organizational structure.

The University of Kentucky administration occurs through a president, provost, three executive vice presidents (for research, administration and finance and health affairs) and three other vice presidents (for institutional research and planning, academic outreach and public service and university development). The Board of Trustees appoints the president who is responsible for university management.

The Kentucky Council on Postsecondary Education (CPE), a statewide coordinating body, works with the UK and the other seven public universities as well as the Kentucky Community and Technical College System to provide general planning, coordination, advocacy, and oversight. The CPE and institutions develop a budget for higher education, monitor productivity, broker development of new individual and cooperative programs, establish guidelines within which institutions set tuition and fees, and set institutional enrollment, retention and graduation goals.
The College of Public Health is one of sixteen independent colleges at the university, all of which report to the provost. The college is categorized as one of six colleges that comprise the Academic Health Sciences Center (along with dentistry, pharmacy, medicine, health sciences and nursing). The university requires that each college establish and abide by its own bylaws. The college bylaws establish the structure, titles and names of units as well as operations policies. The college administration and faculty recognize the need to continually reevaluate the efficacy of their governance structure as the college grows in both students and faculty.

The site visit team concluded that the CPH is an independent and autonomous college within the broader university with responsibility for its own academic, research, teaching, service, practice and fiscal decisions as outlined in the administrative and governing regulations of the university. The college enjoys equal status with the other 15 colleges. The provost meets twice monthly with all the college deans, including the college of public health dean, to discuss operations, budgets and programs. The dean develops and presents the annual budget request to the provost and the council of deans. The university substantially increased the funding base for CPH since 2004 indicating support by the university as well as translated value to the university.

The provost works closely with the deans of all colleges, and was especially knowledgeable about the college of public health. The president meets formally with all the deans, including the college of public health dean, once each semester, and as needed. The dean also has direct and ready access to the three executive vice-presidents and the three other vice presidents.

The president and provost support the college and view it as an essential and integral part of the university. The president, a native to Kentucky, has named the leading public health issues "the Kentucky uglies." His charge to the CPH has been to translate research into practice. The president said, "Without practice, we can be successful but we would fail the state." The provost, president and external stakeholders confirmed that the college dean is a respected leader who actively seeks collaboration and keeps public health prominent on the university scene. Stakeholders and faculty confirmed that the university and community seek out the college for the faculty members' expertise in research, policy and administration in ways that reach all corners of the state. The college also provides physicians with medicine/occupational medicine residencies.

The university provides various centralized services, including fundraising, recruitment, human resources and other. The college follows university policies for employee recruitment, evaluation and promotion. The college also provides various centralized services for departments, including fundraising, recruitment, student services and student affairs.
1.4 Organization and Administration.

The school shall provide an organizational setting conducive to teaching and learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration. The organizational structure shall effectively support the work of the school’s constituents.

This criterion is met. The college structure includes six departments: biostatistics, epidemiology, gerontology, health behavior, health services management, and preventive medicine and environmental health. The college also includes seven research centers and two institutes as well as a newly established Public Health Practice-based Network. Three associate deans, four assistant deans and a number of staff support the dean. Figure 2 presents the college of public health’s organizational structure.

This organizational structure reflects the newness of the college and its still relatively small size. Central administration adds efficiency, although administration acknowledged that departments may acquire more responsibility as the college and its programs grow. All finances and administrative functions run through this organizational model.

Department chairs meet monthly with the dean during the Administrative Council and periodically in individual sessions during which they discuss such topics as budgets and student and faculty evaluations.

Students are aware of the college’s documented grievance policy. Students felt the college administration and faculty members are responsive to student concerns and readily resolve problems.
1.5 Governance.

The school administration and faculty shall have clearly defined rights and responsibilities concerning school governance and academic policies. Students shall, where appropriate, have participatory roles in conduct of school and program evaluation procedures, policy-setting and decision-making.

This criterion is met. The CPH faculty drafted and officially adopted its bylaws in June 2004. The faculty review the bylaws annually and as needed. The last major revisions occurred in April 2008 and college faculty were voting on a set of additional revisions during the site visit. The 2010 proposed revisions resulted from the annual review process that occurred early in 2010.

The college coordinates its operations through the Faculty Council, the Staff Council, the Student Council, an Administrative Council and an External Advisory Council. The Administrative Council is the body through which all college policies are reviewed, considered and approved. The dean also convenes the associate and assistant deans in a weekly Leadership Team. The faculty believe this organizational model and the culture of the university provide a highly collaborative environment. Various research centers benefit from multi-disciplinary leadership and multiple dual degree programs foster academic alignments. The self-study recognized that the involvement required to maintain task forces and multiple committees is very time consuming for faculty. Each department in the college has its own structure for developing new programs, reviewing and evaluating existing programs, and generally ensuring high academic standards. Table 1 summarizes the CPH standing committees, their composition and charge.

There are also ad hoc committees formed as needed, such as the Self-Study Ad Hoc Committee and the Student Advisory Ad Hoc Council. Students felt the college and its faculty were particularly responsive to their needs and issues which might arise from time to time. Examples given reflect the dean and faculty immediately responding to general and specific inquiries, as well as having an open door policy for one on one access. The dean meets with the Student Advisory Council twice each semester to review any problems needing attention. In addition, an External Advisory Council (EAC) meets regularly and offers substantive advice to the dean and the college leadership. The EAC’s current eight members are knowledgeable and active participants in areas critical to public health.

The number and structure of the CPH committees provide for effective stakeholder involvement in governance. CPH faculty members are also adequately represented on university committees and actively participate in university-wide affairs.
<table>
<thead>
<tr>
<th>Committee</th>
<th>Composition</th>
<th>Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Council</td>
<td>Dean, Associate &amp; Assistant Deans, department chairs, Staff Council Chair, Faculty Council Chair.</td>
<td>Chief administrative policy-making committee within the College: facilitates administration of the College.</td>
</tr>
<tr>
<td>Faculty Council</td>
<td>Five elected representatives from among the College voting faculty.</td>
<td>Consider, represent, and act on the views of the College of Public Health faculty.</td>
</tr>
<tr>
<td>Academic Affairs Committee</td>
<td>Members of the voting faculty (one from each academic department); one representative each from the degree programs: MPH, DrPH, and PhD.</td>
<td>Develop, recommend and implement educational policy; and monitor and evaluate degrees.</td>
</tr>
<tr>
<td>Admissions and Student Affairs Committee</td>
<td>Members of the voting faculty (one from each academic department), selected by the Faculty Council; one student representative from each degree program.</td>
<td>Represents the College on all matters pertaining to student admissions, student affairs, and provides a liaison between faculty, administrators, and students.</td>
</tr>
<tr>
<td>Research Committee</td>
<td>Members from the voting faculty and student representatives.</td>
<td>Foster research among all faculty, staff, and students.</td>
</tr>
<tr>
<td>Practice and Service Committee</td>
<td>Members of the voting faculty and one representative from each degree program.</td>
<td>Provide counsel in promoting practice in the College’s research and education.</td>
</tr>
<tr>
<td>Assessment and Evaluation Committee</td>
<td>At least four members, one of whom is selected by the Faculty Council.</td>
<td>Monitor and facilitate the College’s assessment and evaluation activities in relation to its mission, goals, and objectives.</td>
</tr>
<tr>
<td>Appointment, Promotion and Tenure Committee</td>
<td>Tenured voting faculty members; when possible all departments should be represented.</td>
<td>Advise the Dean on matters related to promotion and tenure and on appointments above the rank of assistant professor.</td>
</tr>
</tbody>
</table>

1.6 Resources.

The school shall have resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

This criterion is met with commentary. The College of Public Health has shown significant growth since its last review and, despite troubled economic times, its funding has not been dramatically affected by state budget reductions. According to the university president, his priority has been to protect academic units such as the CPH from the effects of these cuts as much as possible. Consequently the college has actually seen an increase of more than 10% in the general fund appropriation from 2007-2008 ($4,902,718) to 2008-2009 ($5,487,549). This increase has enabled the college to continue its growth, and it demonstrates the strong level of university support for the college’s development.
The annual budget allocation to the college from the university consists of a composite of funds from recurring state appropriations and tuition. The provost, based upon collegiate performance and in consultation with the collegiate deans, annually determines the amount allocated to each college. The dean, working with his administrative council, then develops the collegiate budget for all departments and centers.

Overall revenues for the college increased during the last 5 years, as Table 2 demonstrates. Total revenues increased from $10,595,452 to $16,471,272 from 2004 until 2009. Research funding significantly increased during this period growing from $5,932,275 to $8,154,652.

### Table 2. Sources of Funds and Expenditures by Major Category, 2005 - 2009

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</thead>
<tbody>
<tr>
<td>Tuition &amp; Fees</td>
<td>10,000</td>
<td>12,950</td>
<td>12,150</td>
<td>12,150</td>
<td>12,150</td>
</tr>
<tr>
<td>State Appropriation</td>
<td>3,699,100</td>
<td>3,862,114</td>
<td>4,476,226</td>
<td>4,902,718</td>
<td>5,487,549</td>
</tr>
<tr>
<td>Grants/Contracts</td>
<td>5,932,275</td>
<td>6,633,278</td>
<td>7,753,385</td>
<td>6,835,179</td>
<td>8,154,652</td>
</tr>
<tr>
<td>Indirect Cost Recovery</td>
<td>117,749</td>
<td>186,959</td>
<td>246,672</td>
<td>246,377</td>
<td>227,025</td>
</tr>
<tr>
<td>Endowment</td>
<td>187,600</td>
<td>186,730</td>
<td>188,834</td>
<td>206,197</td>
<td>238,736</td>
</tr>
<tr>
<td>Gifts</td>
<td>306,500</td>
<td>81,462</td>
<td>77,018</td>
<td>154,275</td>
<td>1,306,225</td>
</tr>
<tr>
<td>Start up Funds (from university)</td>
<td>87,102</td>
<td>109,300</td>
<td>308,985</td>
<td>380,112</td>
<td>261,961</td>
</tr>
<tr>
<td>Research support (from university)</td>
<td>265,126</td>
<td>357,000</td>
<td>403,641</td>
<td>434,358</td>
<td>241,323</td>
</tr>
<tr>
<td>Clinical Revenue</td>
<td>489,916</td>
<td>512,070</td>
<td>386,925</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Misc. Revenue</td>
<td>59,523</td>
<td>115,412</td>
<td>37,867</td>
<td>51,820</td>
<td></td>
</tr>
<tr>
<td>Conference Revenue</td>
<td>69,943</td>
<td>67,631</td>
<td>190,672</td>
<td>102,906</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>10,595,452</td>
<td>11,546,309</td>
<td>14,137,720</td>
<td>13,912,775</td>
<td>16,471,272</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenditures</th>
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<tbody>
<tr>
<td>Faculty Salaries &amp; Benefits</td>
</tr>
<tr>
<td>Staff Salaries &amp; Benefits</td>
</tr>
<tr>
<td>Operations</td>
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<tr>
<td>Travel</td>
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<tr>
<td>Student Support</td>
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<tr>
<td>Clinical Operations</td>
</tr>
<tr>
<td>Clinical Faculty &amp; Benefits</td>
</tr>
<tr>
<td>Clinical Staff &amp; Benefits</td>
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<tr>
<td>TOTAL</td>
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</tbody>
</table>

The growth in research funding makes indirect cost recovery more important to college growth and the university and college have established a formula for the distribution of indirect funds. The university’s executive vice president for research returns 10% of the indirect recovery funds to the responsible department or center and returns 5% to the dean. Collaborative projects, which involve at least two departments, add an additional 6% to this return. Indirect recovery has increased from $117,749 to $227,025 during the 2004 to 2009 period.
The college established and filled the position of assistant dean for institutional advancement and student affairs who has the responsibility to continue the significant growth in this area of revenue development. Gifts and contributions have increased from $306,500 to $1,306,225, more than 400% growth since the last review.

College expenditures for the last five years, also shown on Table 2 reflect the growth of the college. The table demonstrates that faculty salaries have increased from $2,616,684 to $4,978,942 from 2004 to 2009 and staff salaries and benefits have increased from $497,725 to $1,502,527 during this same period. Unfortunately, collegiate summaries suffer from a university-based accounting system which does not adequately reflect annual expenditures in grants and contracts.

Overall faculty lines have increased from 44 core faculty members to 48 core faculty members and from a total faculty headcount from 51 to 72 during the 2006-2009 timeframe (see Table 3). It is noteworthy that the majority of these increases have occurred in the Department of Health Services Management. It is the opinion of the university provost that the college will soon have ownership of the Master in Health Administration degree currently offered through the Martin School of Public Policy and Administration. The college has begun the development of its faculty contingent in the Department of Health Services Management in anticipation of the transfer of this degree program.

<table>
<thead>
<tr>
<th>Table 3. Faculty Headcount* by Discipline and Year, 2006-2009</th>
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<tbody>
<tr>
<td></td>
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<tr>
<td>Biostatistics</td>
</tr>
<tr>
<td>Environmental Health and Preventive Medicine</td>
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<tr>
<td>Epidemiology</td>
</tr>
<tr>
<td>Gerontology</td>
</tr>
<tr>
<td>Health Behavior</td>
</tr>
<tr>
<td>Health Services Management</td>
</tr>
<tr>
<td>Totals:</td>
</tr>
</tbody>
</table>

* Includes teaching faculty only: full-time + (part-time and adjunct)

Student numbers in the college grew from 188.2 full-time equivalent (FTE) students in 2006 to 210 FTE students in 2009. Student to faculty ratios decreased from 4.26 in 2006 to 3.91 in 2008.

Fifty-five staff support the departments and management units within the dean’s office. Each collegiate unit, department or center has at least one administrative staff member. The central college research and business operations retain a significant number, almost 50%, of the college’s total staff.
As with any new college, and as the prior review documented, space continues to be a challenge. The college fully occupies 26,140 sq ft in an older building, identified as a temporary home, and must acquire additional facilities in order to grow. The university demonstrates support of this need in the announced plans to move the Department of Biostatistics to another area building with an additional 4,210 sq ft of space. This relocation will facilitate greater opportunity for collaboration with the College of Arts and Sciences’ Department of Statistics as well as with the university’s health sciences campus, but the department’s planned move also creates potential for CPH statisticians to feel disconnected from the rest of their public health colleagues.

Several faculty have additional space of very limited amount in other facilities as the result of their research collaborations. However, the issue of space merits a commentary in this review. The prior accreditation review cited the college space issues as a deficiency. In addition, the college’s self-study recognized unrealized space needs. Site visitors noted that space remains a pressing problem. The fact that there is no elevator access to the second floor of the existing facility is problematic. Additionally the lack of dedicated classroom space and the limited space available for student study, research and common areas for interaction are contrary to the interests of a college which relies upon collaboration and service. The need for a facility to enable these fundamental capacities and to accommodate the addition of new programs, such as the MHA, is critical.

The president and provost of the university, in their meeting with the site visit team, indicated their support for the college to find more useful space as the economy improves and the capitol development log jam clears. Achieving this goal is essential to the further development of the college.

Computer access appears to be modest but sufficient with some collegiate and university resources available. The college has its own information technology servers and staff. All faculty, research and administrative staff have personal computers in their offices and the equipment is scheduled for replacement every three to four years. The entire college has wireless internet access.

The University of Kentucky Library System is the primary library resource for the college. The University’s William T. Young Central Library, located on the main campus, houses over 2.6 million volumes. The UK libraries, supporting part time, commuting and distance based students, also provide internet access to their resources including nearly 8,500 electronic journals.

The college also enjoys a close collaborative relationship with both the State Department for Public Health and numerous local health departments, including the Lexington-Fayette County Health Department. Joint grant applications, internships and practicum opportunities mark this partnership and add significant resources to the college.
2.0 INSTRUCTIONAL PROGRAMS.

2.1 Master of Public Health Degree.

The school shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional masters degree in at least the five areas of knowledge basic to public health. The school may offer other degrees, professional and academic, and other areas of specialization, if consistent with its mission and resources.

This criterion is met. The college identifies 14 degree programs, including the MPH, DrPH and PhD. The college offers the MPH degree in five concentrations: biostatistics, epidemiology, environmental health, health behavior, and health services management. All MPH degree students take 15 credits of core curriculum. The site visit team reviewed the curricula for all concentrations and verified that it was of appropriate depth for a public health degree. Table 4 presents the degree requirements for the MPH degree.

<table>
<thead>
<tr>
<th>Public Health Curriculum</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core Courses</td>
<td>15</td>
</tr>
<tr>
<td>Required Overview Course</td>
<td>3</td>
</tr>
<tr>
<td>Research Elective</td>
<td>3</td>
</tr>
<tr>
<td>Required Field Experience</td>
<td>3</td>
</tr>
<tr>
<td>Capstone Course</td>
<td>3</td>
</tr>
<tr>
<td>Concentration Area Courses</td>
<td>15</td>
</tr>
<tr>
<td>TOTAL Credits</td>
<td>42</td>
</tr>
</tbody>
</table>

Table 5 provides the instructional matrix for the college. The college offers a PhD in gerontology, a new PhD in epidemiology/biostatistics (first cohort enrolled in fall 2009) and DrPH degrees in epidemiology, health behavior and health services management. The college admits students to the DrPH program who have either completed an MPH or MS in Public Health or have completed any master's degree plus required courses in public health. The college suspended enrollment in the environmental health DrPH due to low faculty numbers in this specialization. During the site visit, faculty reported that the college is recruiting for more environmental faculty so that they can again admit students to this degree. The DrPH in biostatistics has also suspended enrollment, and is not anticipated to be offered again due to the new student option for a PhD in epidemiology/biostatistics. The college assessed student interest and need for the biostatistics degree and found that students would prefer a PhD with a combination of epidemiology and biostatistics. The college also offers an MS degree in epidemiology and plans to enroll students in a developed, but not yet implemented, MS in clinical research design. The latter degree has been submitted to CEPH for review and approval through the substantive change process, and no students have yet been admitted to this degree program. Finally, the college offers two joint MPH degrees in conjunction with the College of Medicine and the College of Pharmacy.
The college clearly defines all degree programs in the appropriate handbooks, and courses online in the university bulletin.

<table>
<thead>
<tr>
<th>Table 5. Instructional Matrix - Degree/Specialization</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Master's Degrees</strong></td>
</tr>
<tr>
<td>MPH – Biostatistics</td>
</tr>
<tr>
<td>MPH – Epidemiology</td>
</tr>
<tr>
<td>MPH – Environmental Health</td>
</tr>
<tr>
<td>MPH – Health Behavior</td>
</tr>
<tr>
<td>MPH – Health Services Management</td>
</tr>
<tr>
<td>MS – Epidemiology</td>
</tr>
<tr>
<td>MS – Clinical Research Design * (not yet active)</td>
</tr>
<tr>
<td><strong>Doctoral Degrees</strong></td>
</tr>
<tr>
<td>DrPH – Biostatistics* (suspended)</td>
</tr>
<tr>
<td>DrPH – Environmental Health* (suspended)</td>
</tr>
<tr>
<td>DrPH – Epidemiology</td>
</tr>
<tr>
<td>DrPH – Health Behavior</td>
</tr>
<tr>
<td>DrPH – Health Services Management</td>
</tr>
<tr>
<td>PhD – Gerontology</td>
</tr>
<tr>
<td>PhD – Epidemiology and Biostatistics</td>
</tr>
<tr>
<td><strong>Joint Degrees</strong></td>
</tr>
<tr>
<td>MD/MPH</td>
</tr>
<tr>
<td>PharmD/MPH</td>
</tr>
</tbody>
</table>

2.2 Program Length.

An MPH degree program or equivalent professional masters degree must be at least 42 semester credit units in length.

This criterion is met. The college requires all MPH students to complete 42 semester credits. This includes students enrolled in joint degrees such as the MD/MPH and the PharmD/MPH. The college follows the university's definition for semester-credit hour, equating one semester credit to 800 minutes of contact or 2400 minutes (40 hours) minimum contact for a three credit course.

This credit-hour policy was implemented in 2007. Students enrolled in the MPH degree programs prior to fall 2007 completed 36 semester credit hours. Since May 2007, forty students have graduated under the 36 semester hour requirement (May 2007-16 students; May 2008-18 students and May 2009-6 students)

2.3 Public Health Core Knowledge.

All professional degree students must demonstrate an understanding of the public health core knowledge.

This criterion is met. The college meets its mission and goals and delivers core public health knowledge through a series of five courses that address the core knowledge areas and one additional course that
reinforces topics from all core knowledge areas. The site visit team reviewed the syllabi for these courses and determined that the courses meet the specifications outlined in criterion 2.1. Table 6 presents the required core courses for MPH students.

<table>
<thead>
<tr>
<th>Course</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPH 604 Public Health and Disease Prevention</td>
<td>3</td>
</tr>
<tr>
<td>STA 580 Biostatistics I</td>
<td>3</td>
</tr>
<tr>
<td>CPH 601 Occupational/Environmental Health I</td>
<td>3</td>
</tr>
<tr>
<td>CPH 605 Epidemiology</td>
<td>3</td>
</tr>
<tr>
<td>CPH 650 Management of Public Health Organizations</td>
<td>3</td>
</tr>
<tr>
<td>CPH 663 Public Health Practice and Administration</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>18</strong></td>
</tr>
</tbody>
</table>

Table 6. MPH Core Courses

Table 7 shows the required DrPH core courses. Students admitted to the DrPH programs must have successfully completed a MPH, a MS in public health or an appropriate degree with knowledge in the core areas of public health. If the student's prior degree did not include public health, then that student must complete the UK CPH core courses for no credit and achieve a B or above prior to enrolling in any DrPH courses.

<table>
<thead>
<tr>
<th>Course</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPH 940 Health Related Behaviors</td>
<td>3</td>
</tr>
<tr>
<td>CPH 930 Advanced Biostatistical Methods</td>
<td>3</td>
</tr>
<tr>
<td>CPH 920 Advanced Environmental Health</td>
<td>3</td>
</tr>
<tr>
<td>CPH 910 Advanced Epidemiology</td>
<td>3</td>
</tr>
<tr>
<td>CPH 950 Well Managed Public Health Org.</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>15</strong></td>
</tr>
</tbody>
</table>

Table 7. DrPH Required Core Courses

The college is piloting a core principles examination for all MPH students. Based on the core public health knowledge and adapted from the national certification in public health examination study questions, the college intends to use this exam's results to measure the college's success in adequately providing foundational public health knowledge through the 18 credits of core and required courses.

2.4 Practical Skills.

All professional degree students must develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to the students’ areas of specialization.

This criterion is met. The college requires all MPH students to complete a 200-contact hour practice placement (internship). All DrPH students complete two practical experiences: 120-contact hours for the first, and 240-contact hours for the second. The college does not allow any student to waive the practicum experience.
CPH also participates in an ACGME-accredited occupational medicine residency. All current residents completed an MPH at another institution prior to entering the university, and, consequently, residents do not enroll in any CPH academic program that would require examination under this criterion.

MPH students must complete 20 credits, including four core courses, before undertaking the field practicum. DrPH students must complete 39 credits, including all required doctorate core courses, before starting the field practicum process. Prior to beginning the practicum, the college requires students to complete trainings in sexual harassment, CPR, bloodborne pathogens, Health Insurance Portability and Accountability Act (HIPAA); complete immunizations and criminal background checks. Students also attend a seminar titled, "Preparing for the Practicum."

The college provides students with an orientation to the field practicum during the college’s general orientation and also provides information in the MPH and DrPH handbooks and field practicum manual. The assistant dean for practice and service coordinates all students' practical experiences, with the director for graduate studies (DGS) or the director for doctoral studies (DDS) acting as the course instructor. The college presents the practical experience as the opportunity for students to apply the knowledge and skills acquired throughout their classroom curriculum to real world experiences in local public health agencies and community-based organizations. A brief listing of practicum site examples include Bluegrass Care Clinic, St. Joseph HealthCare, Kentucky Department of Public Health, Lexington Fayette County Health Department, Markey Cancer Center, Area Health Education Center and Health Education through Extension Leadership.

The student, preceptor, course instructor (DGS or DDS) and assistant dean work together at the beginning of the field practicum to clearly outline the expectations for the student and the preceptor, specifying the competencies the student will gain through the experience. In 2008-2009, the assistant dean developed an online training tool for practicum preceptors to ensure consistency in approach by each preceptor.

The program attempts to place students in appropriate internships that enable them to experience working with and without supervision within the assigned organization; explore the general operations of the organization; examine the organization's responsibilities and constraints; be exposed to various staff, board and community meetings; and work with a variety of professionals, staff and community members. Students and preceptors commented on the value of the practicum to the students and the organizations. Students, in particular, mentioned how supportive the college has been in their efforts to match student interests with an agency or particular experience during the practicum.
The college clearly outlines the practicum process for both MPH and DrPH students and assists students in obtaining a site. The field placement handbook specifies the objectives of the practicum as follows:

- Demonstrate an awareness and knowledge of the core functions of public health;
- Facilitate the ten essential services of public health practice;
- Utilize the basic ASPH competencies in public health practice; and
- Apply the basic concepts of health service management, environmental health, epidemiology, health behavior and biostatistics in public health practice.

The student submits three interim field practicum reports to both the assistant dean, course instructor and also to the preceptor. Upon completion of the hours, the student submits a final field practicum summary report addressing their overall experience. The preceptor evaluates the student on performance, professionalism, skill and knowledge development in the Council on Linkages’ eight domains, and understanding of the essential public health services. The preceptor discusses the evaluation with the student prior to submitting the form to the college. The course instructor submits students’ final grades for the practicum.

The current assistant dean for practice and service will retire in 2010. The college values this position and the structure it provides to the practicum experience, so the college has invested in succession planning for this position and has already hired and begun training the individual who will take over this role after the incumbent’s retirement.

2.5 Culminating Experience.

All professional degree programs identified in the instructional matrix shall assure that each student demonstrates skills and integration of knowledge through a culminating experience.

This criterion is met. All MPH students and all DrPH students complete culminating experiences as the final requirement for their degree. The three semester-hour MPH capstone project represents the culmination of a major practice or research activity and consists of a formal written manuscript that will become part of the college archives. The DrPH capstone research (12 semester credits, ranging from 1-6 credits in any given semester) provides an opportunity for research that can impact the health of the public. The doctoral capstone assumes that scientific inquiry is the epistemology, students’ work will be guided by a doctoral committee, data must be involved and that appropriate coursework precedes the capstone experience. The college expects that the doctoral capstone project will be the foundation for a practice-oriented career and that the project will clearly demonstrate the application of capstone research findings to public health. Doctoral students may choose to complete a traditional dissertation as the final culminating project if such a decision aligns with the student's professional and/or career goals.

The college has developed significant, detailed documents describing responsibilities of the student, the course director, the faculty project guidance committee and the community site preceptor. College faculty introduce the culminating experience during new student orientation and discuss expectations during
courses. The college clearly outlines the capstone course and process in the MPH and DrPH handbooks. In addition, the MPH students enroll in a public health capstone course (CPH 608) that meets weekly and serves to guide students through the capstone process. The community site preceptor guides the student's field experience and evaluates the student's performance.

The graduate school and the CPH explicitly state deadlines for establishing, undertaking and completing the capstone, and subsequently, the degree for graduation. The MPH and DrPH capstone committees consist of three members who meet the criteria outlined by the graduate school. In addition, there is a structured process used to evaluate student progress toward culminating experience completion by term, and the college has made efforts to ensure that the project serves as an opportunity for integration of skills and knowledge across the curriculum.

Capstone committees guide the students in their capstone project. The committees must approve the project and methodology. Students' activities must also abide by the IRB requirements. The student's final manuscript adheres to specific criteria intended to prepare students for the rigors of publishing. The college encourages students to publish on their capstone topics.

The committee members evaluate the student's submitted manuscript and oral presentation. The student earns either a high pass, pass, or fail grade by the faculty committee. The college invites all faculty and students to attend oral presentations, all scheduled during a single week in the fall and spring semesters.

No waivers are allowed for the culminating capstone experience.

The site visit team reviewed multiple examples of capstone projects and verified that they demonstrate integration of skills from across the public health curriculum. Recent MPH capstone projects include "Correlates between asthma risk factor and health-related quality of life," "Health program use and health status indicators of Kentucky women's health," "Taking a prison tobacco-free: Inmates' behaviors, attitudes, and beliefs," "Heart disease and social determinants of health" and "Access to medical home among Kentucky's children with special health needs." Recent DrPH capstone titles include "Intravenous tissue plaminogen activator in acute ischemic stroke: An exploratory analysis of demographics and risk factors," "Trust relationships among public health workers: An application of the Leader-Member Exchange Theory" and "Evaluating the diagnostic potential of biomarker-based lung cancer classifiers: A comparison of flexible alternatives to logistic regression."

Students commented on the value of the capstone project in helping them connect with potential employers. Faculty and community members emphasized appreciation for the real work contributed by capstone students to Kentucky's public health system.
2.6 Required Competencies.

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of educational programs.

As a consequence of the college's submission of additional information after the site visit, the Council judges this criterion to be met with commentary. In 2005 the CPH reviewed and restated its learning outcomes based on the ASPH competencies. The college adopted the ASPH core competencies for the MPH program. CPH mapped its core and concentration required courses to the ASPH competencies to identify: 1) courses where students may acquire the competencies; 2) gaps and redundancies in the curriculum; 3) guide changes in the syllabi, prerequisites, and required courses; 4) interdisciplinary competency tracking across the curricula. The mapping process rated the extent to which the CPH core and discipline-specific courses fulfilled the ASPH competencies by ranking each as unaware (not covered), aware, knowledge or proficient.

The mapping was an exhaustive and labor intensive effort by the administration and faculty. While the mapping ranks the extent to which each course covers the ASPH competencies, there appear to be redundancies. Resulting from a concerted effort to ensure coverage of the ASPH competencies in each course. The matrix of the mapping shows that every course covers most of the concentration-specific competencies to some extent. A fresh examination of syllabi should help to eliminate redundancy and to allow for the development of selected competencies specifically appropriate to each course.

The commentary relates to the alignment of learning objectives with the competencies. The syllabi show well-developed courses that have course descriptions, learning objectives and schedule of topics; however these course learning objectives are not clearly connected to the concentration-specific competencies. Each syllabus lists the competencies and, while this is a very good way to ensure that students know the concentration competencies, the misalignment of the competencies with course learning objectives could be confusing to students.

CPH developed program objectives and competencies for the DrPH and for the academic degrees including the MS in Epidemiology, PhD in Epidemiology/Biostatistics and in Gerontology. These competencies seem to be aligned with the curriculum and courses.

CPH makes the MPH program competencies available to students by including them on each course syllabi and on large posters placed throughout the college.
2.7 Assessment Procedures.

There shall be procedures for assessing and documenting the extent to which each student has demonstrated competence in the required areas of performance.

This criterion is partially met. The college's assessment activities for each degree include exams, comprehensive exam or qualifying exam, and culminating experience. The core competency exam was instituted for students entering in 2009 to assess achievement in the core courses. CPH also conducts exit surveys of its graduates and a student evaluation of class quality.

Discussions with the faculty indicated they use several measures including pre- and post-tests, exams, papers and assignments.

The first area of concern relates to inconsistencies regarding the overall assessment of program competencies. It does not appear that CPH has implemented a consistent process to evaluate the attainment of program competencies beyond tracking the completion of the requirements, though the college is currently pilot-testing several measures aimed to address this concern. The college is pilot-testing a core principles examination that focuses on program competencies. Also, the college will sponsor 15 to 20 students to sit for the public health credentialing examination, the results of which will inform the college’s efforts to improve student learning and the curriculum.

The site visit team verified the student graduation rate of 87% within eight years for the MPH degree for 2008-09. It is worth mentioning that in 2005 the university changed the time to complete the degree from eight years to six years.

The self-study indicates that a more complete tracking process is being developed to determine graduation rates. It is understandable that the relatively short time the college has been in operation limits the calculation of the graduation rates. Further, the first students who entered primarily attended part-time, were working full time and some appear to have dropped out. The college has not analyzed the specific factors that contribute to trends in graduation rates. Assessment of graduation rates and time to complete the degree will provide important feedback to the college as it grows and matures. Longer times to graduation may indicate issues with academic functions such as admissions, advising and support of part time students or completion of capstones or practicum.

CPH convened focus groups with employers, graduates and practicum preceptors in 2006, 2007 and 2009. Reports in the resource file indicate that these groups included 6-8 employers or preceptors along with CPH faculty and students. Three recommendations emerged from the 2006 focus group regarding the improvement of graduates’ skills or competencies.
Additional concern relates to the fact that the college has not yet established mechanisms to track student achievement through data from alumni. Establishing a mechanism to receive regular feedback will be essential as the college grows.

2.8 Other Professional Degrees.

If the school offers curricula for professional degrees other than the MPH or equivalent public health degrees, students pursuing them must be grounded in basic public health knowledge.

This criterion is not applicable.

2.9 Academic Degrees.

If the school also offers curricula for academic degrees, students pursuing them shall obtain a broad introduction to public health, as well as an understanding about how their discipline-based specialization contributes to achieving the goals of public health.

As a consequence of materials submitted by the college after the site visit, the Council judges that this criterion is met.

The college offers four academic degrees: two masters, and two PhD degrees (see Table 4). The extent to which academic students are encouraged to pursue breadth of public health knowledge varies by degree. In some cases this includes courses in at least biostatistics and epidemiology. Other academic degree programs require courses in the same department that are intended to cover other aspects of public health. Beginning in 2010, the college will require all academic degree students to take a new public health survey course. It covers the areas of environmental health, health behavior and health services management and policy.

The college has added a course to the curriculum for the PhD in gerontology that responds to the site visit team’s concern that students in this degree program did not acquire sufficient knowledge of epidemiology. The new course, GN618, is entitled “Epidemiology and Aging.”

The culminating experience for the two MS degrees is the thesis. The PhD degrees require doctoral level dissertations that follow guidelines established by the Graduate School.

2.10 Doctoral Degrees.

The school shall offer at least three doctoral degree programs that are relevant to any of the five areas of basic public health knowledge.

This criterion is met. The college’s internal review of doctoral programs contributed to the decisions to suspend or discontinue several degree programs, as discussed in Criterion 2.1. Currently, the CPH offers 5 doctoral degrees. Three departments offer the DrPH, while two departments offer the PhD. Enrollment in these degrees has averaged 67 students per year over the past three academic years, with an average of 15 graduating per year.
The DrPH degree requires 63 semester hours beyond the master's degree. The site visit team assessed and accepted the depth of doctoral coursework and the availability of mentorship/research opportunities that are appropriate to each doctoral degree.

2.11 Joint Degrees.

If the school offers joint degree programs, the required curriculum for the professional public health degree shall be equivalent to that required for a separate public health degree.

This criterion is met. The University of Kentucky Graduate School approves joint degree programs. The College of Public Health offers two joint degrees: the MD/MPH and the PharmD/MPH. In each program, the students pursue 42-credit hours of MPH study. Students must take all MPH core and concentration core courses and complete their practicum in the College of Public Health with consultation and approval from their respective advisors in the other colleges. The Graduate School's credit sharing policy allows a maximum of 9 credits of coursework to be shared between the programs. However, there are no shared courses in the MD/MPH program. All PharmD/MPH students are required to take the same core courses as non-joint program MPH students, and all PharmD/MPH students are required to meet all concentration-specific courses for the degree program in which they are enrolled. In addition, students in these degrees must meet the admission requirements of, and be admitted to, both programs.

2.12 Distance Education or Executive Degree Programs.

If the school offers degree programs using formats or methods other than students attending regular on-site course sessions spread over a standard term, these programs must a) be consistent with the mission of the school and within the school’s established areas of expertise; b) be guided by clearly articulated student learning outcomes that are rigorously evaluated; c) be subject to the same quality control processes that other degree programs in the school and university are; and d) provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of adult learners. If the school offers distance education or executive degree programs, it must provide needed support for these programs, including administrative, travel, communication, and student services. The school must have an ongoing program to evaluate the academic effectiveness of the format, to assess teaching and learning methodologies and to systematically use this information to stimulate program improvements.

This criterion is not applicable.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

The school shall pursue an active research program, consistent with its mission, through which its faculty and students contribute to the knowledge base of the public health disciplines, including research directed at improving the practice of public health.

This criterion is met with commentary. The CPH has developed a strong research program that carries out the mission of the college; much of the research addresses health disparities relevant to Kentucky. In
2008-09 primary extramural funding was $8,561,908 and collaborative extramural funding was $25,081,955. The college has established partnerships with faculty throughout the university and has an excellent track record of research. The college houses seven research centers and two institutes: Kentucky Injury Prevention and Research Center, Southeast Center for Agricultural Health and Injury Prevention, Center for Prevention Research; Rural Cancer Prevention Center; Center for Public Health Systems and Services Research, Center of Excellence for Public Health Workforce Research and Policy, Graduate Center for Gerontology, Kentucky Public Health Leadership Institute and the Kentucky Institute for Public Health Practice Enhancement.

The university has established policies, procedures and practices that support research endeavors. The Office of Research Integrity promotes ethical conduct in research and provides education for faculty, staff and students regarding regulations for research-related conduct. The faculty report that the Kentucky IRB processes applications efficiently and is timely in providing approvals to facilitate research.

The commentary relates to the fact that research activity is mostly clustered among several established faculty researchers. Even with the substantial research funding, the mean percentage of extramural funding for full regular faculty is 32%; the target is 35%. This may indicate an imbalance in the distribution of research funding among a few faculty with substantial funding and others with little or no funding. It may be of benefit for the college to identify areas for building and expanding their research efforts. This could help carry out the mission of the college as well as to inform the recruitment of new faculty by anticipating type of space for growth or directing seed research funding. It also could increase opportunities for student involvement. While CPH research engages students, some students indicated they would like more research opportunities.

3.2 Service.
The school shall pursue active service activities, consistent with its mission, through which faculty and students contribute to the advancement of public health practice.

This criterion is met. The university is committed to activities that improve and enhance the lives of the residents of the Commonwealth and has been designated as an “engaged university” by the Carnegie Foundation. The College of Public Health was one of the first academic units to pilot an engagement survey at UK documenting the quality and quantity of community service.

The college established the Practice and Service Committee in 2005, a standing committee composed of faculty, students and practice partners. It provides counsel in establishing and promoting service and practice opportunities within the curriculum and works in collaboration with the assistant Dean for Practice and Service, including the development and dissemination of policies and procedures. The college’s official Practice and Service Policy explicitly defines practice and service. Service includes both an internal and external component. Internally, service assists and renders aid to the college and university
in administration and governance. Externally, service provides interdisciplinary consultation and assistance to federal, state, and local governments and non-governmental agencies involved with health of the populations served. The policy outlines the specific criteria for both practice and service and lists the types of service activities for the university, college, and individual.

The self-study acknowledges that the distinction between research and service is sometimes ambiguous, and the identification of a project as one does not necessarily exclude the other. Research grants received by College of Public Health faculty and staff members sometimes include service activities. CPH faculty members reflect the amount of time devoted to various activities (teaching, research, and service) in their DOE (distribution of effort). The DOE varies by appointment title and agreement of employment. A system is in place to capture the service efforts for the purpose of tenure and promotion. The college review these accomplishments annually.

The college increased the number of funded new proposals related to service annually. One of the college’s objectives, defined in the strategic plan sets a target of ≥ 40% of total value of new extramural awards will be service-related. The rate fluctuated from 21% to 44% to 35% over the past 3 years. The target for faculty committed to service is set at ≥ 25%, however the self-study reports a 15%, 15%, and 18% commitment for the past 3 years. The college recognized that this goal may not be appropriate because it can be achieved through a reduction in value of new awards for research with no increase in service. In addition, since multi-year awards are counted entirely in the year in which the account is established, activity may not be reflected within each year. Routinely reevaluating the methods for tracking and monitoring service activities could lead to appropriately adjusting the targets.

The self-study, conversations with faculty and staff and a review of the reference materials revealed that there is a strong emphasis placed on service to the community and that faculty and students are actively engaged with the community and the community is actively engaged with the college.

3.3 Workforce Development

The school shall engage in activities that support the professional development of the public health workforce.

As a consequence of additional information submitted by the college following the site visit, the Council finds this criterion to be met.

The university originally established the College of Public Health in order to address anticipated vacancies in the state and national public health workforce, and workforce development for current or future workforce members, aside from the college’s degree offerings, remains a core function. The college strives to provide a human capital, professional public health pipeline for the Kentucky
Department for Public Health, local health departments in Kentucky, and a variety of public health organizations within and beyond Kentucky.

In addition to the academic programs, the college implemented a number of specific initiatives and activities designed to meet public health workforce needs and strategically address workforce development needs. Over the past four years, the college worked with the Kentucky Department of Public Health and other state-supported institutions with public health schools/programs to delineate priorities, conduct needs assessments, and deliver needs-based training, continuing education, etc. to the broadly-defined public health workforce in Kentucky. Those identified as priority areas for workforce development leadership training, public health workforce routine skills enhancement/updates, public health systems, development/guidance, aging and health and substance abuse prevention and detection.

The college meets training and continuing education needs of individuals through several mechanisms. The Kentucky Public Health Leadership Institute conducts an assessment that guides the development of the next year’s program. The Institute for Public Health Practice Enhancement and the Southeast Public Health Training Center conduct an annual survey which leads to the planning for a summer epidemiology course. DrPH students conducted two training needs assessments, one on the level of confidence and the perceived need for training in emergency preparedness responders and the other capstone project compared the responses of public health managers with degrees in public health to those who did not with regard to their perceived importance of an proficiency in the nine public health competency areas from the Council on Linkages.

Some of the assessment activities have clear linkages to the workforce development activities while other efforts do not show a clear link to programming. Most of the efforts appear to be specific to the Institutes and Training Centers’ funding priorities and less related to addressing the five priority areas identified by the college and KDPH. The self-study stated that the two DrPH assessments served as the basis for the provision of workforce education and training, however the Kentucky Institute of Public Health Practice Enhancement has identified a separate set of priorities, public health workforce routine enhancements/updates and maternal and child health training which do not appear to relate to the assessments.

The college provides workforce development delivered largely through the Kentucky Public Health Leadership Institute, Kentucky Institute for Public Health Practice Enhancement, The Center for Public Health Systems and Services Research, The Center for Excellence in Workforce Research and Policy, Kentucky Public Health Practice Based Research Network, The Drug Endangered Child Training Network, University of Kentucky Summer Series on Aging and Geriatric Education, and the Department of Epidemiology all of which conduct some level of training needs assessment and develop and deliver
workforce development programs specific to their area of interest or funder priorities. The self-study reports that programs and activities through these offices have reached over 17,000 participants.

The self-study and discussions with the staff and faculty reveal that continuing education efforts are evaluated at the individual/course level. Advisory boards, funding agencies, and an occasional 6 month follow up evaluation are conducted which also inform future workforce development offerings. The college currently offers three certificate programs: 1) a Graduate Certificate in Gerontology, 2) a Graduate Certificate in Maternal and Child Health and 3) a Graduate Certificate in Global Health. Applicants to the certificate programs must meet the minimum requirements for admission to the Graduate School. The certificate programs align with the college’s mission and vision. The college markets the certificates through the web, and brochures are currently being developed.

The Graduate Certificate in Gerontology began in 1989 and offers students and professionals in aging the opportunity to expand their knowledge and to be recognized for their achievement. Students develop a plan of study, selecting courses from throughout the university to satisfy the certificate requirements. The certificate requires fifteen graduate credit hours in gerontology, including three hours of practicum or research with a focus on aging. Table 8 shows the number of students in the certificate programs.

<table>
<thead>
<tr>
<th>Year</th>
<th>Gerontology</th>
<th>MCH</th>
<th>Global Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>20</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>2008</td>
<td>20</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>2009</td>
<td>32</td>
<td>3</td>
<td>5</td>
</tr>
</tbody>
</table>

The new Graduate Certificate in Maternal and Child Health enrolled its first class in the fall of 2009. This program requires 15 graduate credit hours including practicum or research. A survey conducted in 2005 noting that not all workers would desire to work toward a terminal degree in public health but would be interested in enhancing their credentials in maternal and child health stimulated the development of this certificate program.

The college initiated a Certificate in Global Health in 2009 with the goal to provide a general foundation in the understanding of global health issues and the complex factors that affect them. The intent of this program is to be multidisciplinary and open to a variety of students. The curriculum includes a total of 15 graduate credits with 9 from a required list (CPH 751, CPH 605, CPH 709) and the remaining 6 graduate credits from a prescribed list of elective classes.

The college has been exploring the creation of an undergraduate certificate in public health. The initial plans were to launch this effort in the spring of 2009, but logistical and fiscal issues delayed this
Nothing is currently available for undergraduate students who may possess an interest in public health. Similarly, nothing is available for individuals who wish to pursue public health education without completing a specific degree in public health. The undergraduate certificate is designed to fill this void, introduce students to public health and encourage interest in public health through a sequence of courses. The certificate would also be offered to the existing public health workforce through distance and classroom learning.

The college plans, hosts, and conducts many workforce development offerings in collaboration across the university and with other governmental and non-governmental organizations. Community representatives and other public health partners were enthusiastic about CPH's involvement and service provided.

**4.0 FACULTY, STAFF AND STUDENTS.**

**4.1 Faculty Qualifications.**

The school shall have a clearly defined faculty which, by virtue of its distribution, multidisciplinary nature, educational preparation, research and teaching competence, and practice experience, is able to fully support the school's mission, goals and objectives.

This criterion is met. The full-time faculty, consisting of tenure, tenure track, clinical and special track as well as adjunct, part-time and secondary appointment faculty, has extensive training and expertise in both the core disciplines of public health and related disciplines supportive of public health achievement. This faculty is well qualified and experienced to support the college’s academic and professional programs and its research and service activities. The self-study reports the college utilizes 72 faculty including 45 full-time and 4 part-time faculty and 23 other faculty consisting of secondary, adjunct and part-time positions from within the college, across the university as well as other institutions such as Eastern Kentucky University. The site visit team was impressed with the collaborative spirit shown between the two accredited schools and two accredited programs in Kentucky.

Among the 72 faculty documented in the self-study, 2 are instructors, 35 are assistant, 19 are associate, and 16 are full professors. Sixty-nine of the total and 44 of the 45 core faculty are trained to the doctoral level. Tenured and tenure-track faculty contribute to the teaching, research and service activities of the college, whereas clinical and other faculty carry out responsibilities associated with the grants, contract or services they are contracted to perform.

Students, administrators and members of the community applaud the performance of the faculty, praising their knowledge, openness, responsiveness and collaboration in carrying out all of their responsibilities including academic counseling, teaching, research and community-based service.
The college identifies four quality measures for faculty performance, each tied to a distinct goal of the strategic plan. The college has established a set of outcome measures and targets to gauge the qualifications of its faculty complement.

4.2 Faculty Policies and Procedures.

The school shall have well-defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty, and to support the professional development and advancement of faculty.

This criterion is met. The CPH publishes policies for faculty recruitment, appointment, promotion and tenure in the university faculty handbook. CPH holds an annual faculty orientation that includes information on the university policies and resources. Faculty reported that CPH has established departmental criteria for tenure and promotion and these are well known to the junior faculty. The distribution of faculty workload among research, teaching or service may vary among faculty and is based on the individual faculty’s time allocation for these responsibilities.

The college measures faculty performance through use of the annual Distribution of Effort (DOE) report. This report specifies the number of hours worked per week and the allocation of those hours across the categories of instruction, research, public service, administration, and professional development. The department chair evaluates each non-tenured faculty member once a year and uses the DOE as a basis for the assessment. The chair prepares a written summary and reviews with the faculty member. Non-tenured faculty undergo two and four year reviews. The results of these reviews are provided in writing and are placed in the faculty’s permanent files; these are considered during tenure review.

Faculty development occurs in both a formal and informal manner. UK provides some centralized activities including a university-wide orientation and the Teaching and Academic Support Center. The university has workshops on a myriad of topics from grant writing, teaching assistance and other topics to help junior faculty develop within the university system. The college also has faculty development particularly for junior faculty. The departmental chair and other senior faculty mentor junior faculty. Senior faculty provided numerous examples of mentoring for research or teaching and junior faculty described how they looked to their departmental chairs for guidance. Faculty report that the informal mentoring works well and is beneficial. However, as the college grows, the mentoring and faculty development functions may need to be formalized. Since the college is still relatively small, the informal arrangements are currently adequate.

Community service is a factor in obtaining tenure and the weight depends upon the faculty’s DOE. However, service is typically a small portion of the DOE; research carries the greatest weight in most tenure decisions.
4.3 Faculty and Staff Diversity.
The school shall recruit, retain and promote a diverse faculty and staff, and shall offer equitable opportunities to qualified individuals regardless of age, gender, race, disability, sexual orientation, religion or national origin.

This criterion is met. The CPH has prioritized the hiring of women and minorities, and the efforts have produced documented gains. The CPH faculty is composed of 79% non-Hispanic white, 7% African-American, 3% Hispanic and 11% Asian/Pacific Islanders. The faculty is 60% male and 40% female. Since the last self-study in 2005, CPH has increased the number of African-American faculty from 1 to 3, and the number of African-American staff has increased to 10.

The progress in the last 5 years shows a strong commitment toward the development of a diverse faculty. The percent of females in the college stands at 35% and the number of women in leadership roles has increased from 0 to 6. African-American faculty has increased from 1% to 8.3% of the faculty and, of these, 2 are in leadership roles. The CPH has the largest percentage of minority faculty within the University of Kentucky. The president of the university and provost commented on the diversity efforts of CPH and recognize the college’s leadership on diversity issues.

The CPH has seen the benefits of increasing diversity among its faculty. Because of the diversity and more comfortable environment, CPH attracts minority students.

4.4 Student Recruitment and Admissions.
The school shall have student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the school’s various learning activities, which will enable each of them to develop competence for a career in public health.

This criterion is met. Recruitment efforts focus on attracting applicants not only from academic institutions, but also from the community of health and public health practitioners. The increased emphasis on collaboration among the state’s public health educational programs, the local health departments and the Kentucky Department for Public Health to meet the workforce development needs of the existing public health sector requires that the college direct attention to the educational needs of those employed in public health and develop recruitment policies accordingly.

The college uses a variety of approaches to recruit qualified students. For example, presentations and exhibits at professional health care and public health meetings (American Public Health Association (APHA), Kentucky Public Health Association (KPHA), Public Health Awareness Conference, Kentucky Coalition of Nurse Practitioners/Nurse Midwives), tracking of post-baccalaureate, non-degree students who enroll in graduate public health classes exploring the option of entering the program and choosing public health as a career, attendance at various graduate and career fairs sponsored by higher education institutions, particularly historically black colleges and universities (HBCUs) in Kentucky and contiguous
states, participation in programs planned and sponsored by the university’s Multicultural and Academic Affairs office, and maintaining a college website that is user-friendly and includes recruitment as one of its primary objectives.

The college currently admits students to four separate degree programs: the master of public health, the doctor of public health, the doctor of philosophy in gerontology, and the doctor of philosophy in epidemiology and biostatistics. The MPH is a graduate program that necessitates a dual application process, one application to SOPHAS (Schools of Public Health Application Service) and one to the University of Kentucky Graduate School. Students applying to the PhD degree programs also must apply to both the Graduate School and the individual program. The DrPH is a professional program that is independent of the Graduate School and is logistically supported by the college; it thus requires only an application to SOPHAS. The MPH, DrPH and PhD programs admit a class of students in the fall only.

Applications consist of a purpose statement, three letters of recommendation, transcripts, and test scores. Students mail completed applications to the College Admissions and Student Affairs Office. The Admissions and Student Affairs Committee includes faculty members from the five areas of concentration and the Graduate Center for Gerontology, a student representative from each degree program, the Director of Graduate Studies, the Director of Doctoral Studies, the Associate Dean for Academic Affairs and Student Affairs, the Director of Admissions, and the Director of Student Affairs. Each application is reviewed by three committee members who complete an application review form and make recommendations to the full committee, which then makes the final decision. The faculty reports that participation of representatives from all departments in consideration of all applicants has been important in creating a sense of collective ownership of the admissions process.

Procedures for application to the DrPH program require only the application submission to SOPHAS. Applicants submit a purpose statement, three letters of recommendation, transcripts, test scores, and all other required documents. In addition, two forty-five-minute interviews with faculty and DrPH students are required. Director of Doctoral Studies initially screens all applications. Because of the unique characteristics of the DrPH applicants, their varied professional and educational backgrounds, the program emphasis on leadership, standardized test scores, and even past academic performance are less important in the admissions consideration than is the level of their accomplishments in public health, a clear vision of their career goals, and the potential to reach senior leadership positions in public health with additional training. The Admissions and Student Affairs Committee considers the qualifications of each applicant and collectively makes admissions decisions.

The college determines admission decisions to the PhD Program in Gerontology based on a combination of undergraduate and graduate GPAs, GRE scores, a written statement outlining the student’s
professional goals and objectives, three letters of evaluation, and samples of written work. No single criterion is dominant, but the combination of application materials must demonstrate the applicant's potential for success in advanced graduate study and in a subsequent career.

The college's target audience for the new PhD in Epidemiology and Biostatistics includes students with a bachelor's or master's degree in an area of public health, a mathematical or physical science, a biological science, a social science, or computer science.

The overall grade point average for entering students over the last three years is 3.27 for the MPH, 3.51 for the DrPH and 3.7 for students in the PhD program in Gerontology as reported in the self-study. Some MPH applicants are admitted provisionally because they do not meet the Graduate School minimum GPA, but the number of students in this situation is very low. In 2008-2009, 40% of the MPH entering class presented an acceptable alternate credential (MCAT, PCAT, terminal degree) to the GRE.

The college identifies measures and targets for recruitment and admissions. The self-study and discussion with the faculty notes that the GRE scores are consistent with the average scores of other programs in the Graduate School. Overall the faculty are satisfied with the quality of applications and students admitted to the programs. The college is planning on reviewing its targets for GPA and GRE in the next round of strategic planning. The faculty expects to revisit the targets and determine an appropriate method for capturing data to reflect the students’ qualifications.

4.5 Student Diversity.

Stated application, admission, and degree-granting requirements and regulations shall be applied equitably to individual applicants and students regardless of age, gender, race, disability, sexual orientation, religion or national origin.

This criterion is met. The college organizes and participates in a number of activities designed to recruit and retain a diverse student body. Special attention is given to admitting Kentucky residents. The college’s Admissions Committee also focuses significant attention on establishing effective recruitment methods directed at the target populations.

Recruitment efforts include participation in public health conferences at Kentucky State University, Tennessee State University and Morehouse College, all historically black colleges and universities (HBCUs) and other colleges and universities in the area including Berea College, which is dedicated to serving students from Appalachia.

The college has also partnered on campus with the University’s Office of Multicultural Student Affairs and the Colleges of Pharmacy, Medicine, Dentistry, Nursing, and Health Sciences in discussions and
strategies for successful recruitment and retention of diverse students in the health professions. Scholarships are available for students with financial needs in attempts to increase the applicant pool.

The number of applications from diverse populations has increased since the college began accepting applications through SOPHAS. In the years analyzed, new enrollment of African-Americans as a percentage of total new enrollments has ranged between 19% and 29%; Hispanic/Latinos 1%-5%; Asian/Pacific Islanders 1%-3%, and 8%-18% international students.

The college is satisfied with the diversity of the students admitted to the program recognizing that the diversity in the CPH programs is generally greater than any other college on campus, the university and the Commonwealth. This notwithstanding, the college continues its efforts to maintain and increase the diversity of the student body.

4.6 Advising and Career Counseling.

There shall be available a clearly explained and accessible academic advising system for students, as well as readily available career and placement advice.

This criterion is met. The college initiated a formal process in 2006 and 2007 to develop and implement a model of academic advising that engages faculty members with students in planning their academic careers. The Admissions and Student Affairs Committee and the Academic Affairs Committee reviewed all issues related to advising raised by the previous self-study and created an Advising Task Force in the fall of 2007. Task force members conducted interviews with students, received feedback from faculty members, and identified areas needing action. The main goal of the task force was to help identify ways that the advising process could be decentralized to departments and made more effective.

The college transitioned from a model of academic advising being performed almost exclusively in the Office of Admissions and Student Affairs, to a model in which the primary responsibility for academic advising rests with faculty in the department of the student’s concentration. Each department has operationalized this in a different way, some departments designate selected faculty to attend to the academic counseling while other departments spread the responsibility across the entire department.

All new College of Public Health MPH and DrPH students attend a one-day orientation immediately before the fall semester begins.

Students admitted to the PhD in gerontology program are required to attend an eight-hour orientation session scheduled about one week before classes begin in the fall semester. The entire session covers key elements in the student handbook including information about registration, guidance regarding availability of academic advising and career development services, and guidance on being successful in graduate school, including the university’s policy on academic integrity.
All DrPH students meet with the director of doctoral studies (DDS) for their orientation. Breakout sessions are held by the major areas of concentration with the appropriate departmental faculty member serving as the student’s academic advisor. The DDS and the Associate Dean choose these advisors during the summer prior to orientation for Academic and Student Affairs, based upon a detailed pairing of the student's work experience, career goals, and professional statements and that of the college faculty member. Faculty members serving as DrPH student academic advisors also serve as mentors for the students until the completion of their courses and may or may not serve as the student’s mentor for the capstone process.

The director of graduate studies (DGS) for the PhD in gerontology provides a first line of advising to all first year PhD students in consultation with their assigned faculty mentor. He works with the students to identify career goals and make an initial selection of any elective courses to meet those goals. After doctoral students’ first year of course work, their reliance on the DGS decreases and primary responsibility for academic advising falls on the faculty mentor/advisor.

Students entering the epidemiology and biostatistics PhD program will be advised initially by the appropriate DGS. After passing the written comprehensive examination, a student will identify a faculty member in the Epidemiology or Biostatistics Department who can serve as the chair of his or her dissertation committee. Once the student has identified such a faculty member, and the faculty member has consented, the committee chair will become the student's advisor for the balance of the student's time in the PhD program.

The associate dean for academic and student affairs and the director of graduate studies conduct an annual intensive four-hour session for faculty members serving as student advisors that details all information regarding course requirements, deadlines, application procedures for graduation, priority registration, etc. Refresher courses are offered at least two weeks before the priority registration period. In addition, advisors have access to an academic calendar that provides a convenient roster of important dates and deadlines.

All public health students have access to campus-level career counseling services offered in the University of Kentucky Stuckert Career Center. Beyond the tradition of providing information and referrals for post-graduation employment, the career center offers advice and workshops on career fairs, mock interviews, and other important skills that aid in securing and maintaining employment. The Career Center often times prepares special sessions specific to the needs of the public health students. The college has taken further steps in the career counseling area by hiring an assistant dean for institutional advancement and student affairs. One result of this move is a monthly series of student development
workshops that deal with topics ranging from scientific and technical writing, problem solving in public health and policy, grant writing, résumé/CV design, interviewing techniques, job search skills, and panel discussions with public health professionals.

Students report satisfaction with academic counseling provided by faculty. Faculty have willingly accepted the responsibility and actively engage the students.
Monday, April 12, 2010

8:30 am - 9:00 am  Welcome and Introductions  Concierge Team

9:00 am - 10:00 am  Meetings with College Leadership  
Dr. Stephen Wyatt  
Dr. Linda Alexander  
Dr. William Pfeifle  
Mr. Anthony Hartsfield  
Ms. Kimberly Judd  
Dr. Michael Smith  
Dr. Larry Prybil

10:15 am - 10:45 am  Break

10:45 am - 11:25 am  Meeting with Self-Study Committee  
Dr. Richard Clayton  
Dr. Richard Charnigo  
Mr. Anthony Hartsfield  
Ms. Sharon Keys  
Dr. William Pfeifle  
Dr. Scott Prince  
Dr. Michael Smith  
Ms. Yelena Tarasenko  
Ms. Charlotte Wood

11:25 am - 11:30 am  Break

11:30 am - 12:15 pm  Meeting with Directors of Graduate Studies and Core Course Directors  
Dr. Richard Charnigo,  
Dr. Julia Costich  
Dr. Rodney Guttmann  
Dr. James Hosinger,  
Dr. William Pfeifle,  
Dr. Robin Vanderpool  
Dr. David Mannino  
Dr. Steve Fleming

12:15 pm - 12:30 pm  Break

12:30 pm - 2:00 pm  Lunch with Current and Former Students  
Joe Bell  
Timothy Crawford  
Gregory Dang  
Nicholas Gould  
Keisha Houston  
Naomi Hudson  
John Kim  
Tina Kruger  
Marimar Landron  
Yvonne Perry  
Lisa Peterson  
Jacob Sither  
Katie Wettstein  
April Young

2:15 pm - 2:30 pm  Escort and/or Transportation to CPH

2:30 pm - 3:25 pm  Meeting with Student Services  
Mr. Anthony Hartsfield  
Ms. Marilyn Underwood
Ms. Laverne Carter
Ms. Elizabeth Solyman
Dr. William Pfeifle

3:25 pm - 3:30 pm  Break

3:30 pm - 4:30 pm  Meeting with Senior Faculty
Dr. Linda Alexander
Dr. Richard Kryscio
Dr. Wayne Sanderson
Dr. Pamela Teaster
Dr. Richard Crosby
Dr. Julia Costich
Dr. Robert McKnight
Dr. Richard Clayton
Dr. Graham Rowles
Dr. James Holsinger
Dr. Rodney Guttman
Dr. Larry Prybil

4:30 pm - 5:30 pm  Executive Session

5:30 pm  Transportation to Hotel

Tuesday, April 13, 2010

8:30 am  Transportation to Campus

9:00 am  Site Visit Team Requests
Concierge Team

9:15 am -10:15 am  Meeting with Practice, Service and Workforce Development Constituents
Ms. Cynthia Lamberth, Associate Dean for Workforce Development; Director, KPHLI
Dr. James Lolsinger, Preventative Medicine Residency
Ms. Eula Spears, Assistant Dean for Practice and Service
Ms. Michelle Lineberry, Director, Practice and Service
Ms. Erin Louis, Director, Workforce Development, KPHLI & BBRLA
Ms. Melody Hall, Director, Workforce Development, KPHLI & BBRLA
Dr. Raymond Hill, Kentucky Institute of Public Health Practice Enhancement, Workforce Development
Ms. Karen Early, Preceptor, Lexington-Fayette County Health Department
Dr. Torrie Harries, Center for Health Equity, Workforce Development
Mr. Dudley J. Conner, Kentucky Public Health Association; Kentucky Health Department Association, Workforce Development

10:15 am -10:30 am  Break

10:30 am -11:25 am  Meeting with Junior Faculty
Dr. Patrick Breheny
Dr. Heather Bush
Dr. David Fardo
Dr. Marta Mendiondo
Dr. Steven Browning
Dr. Andrew Johnson
Dr. John Williams
Dr. Jeffery Jones
Dr. Mark Swandson
Dr. Robin Vanderpool
Dr. Terry Bunn
Dr. Larry Figgs

11:25 am -11:30 am  Break

11:30 am -12:25 pm  Meeting with Key Research Faculty
Dr. Pamela Teaster
Dr. Ann Coker
Dr. Richard Clayton
Dr. Robert McKnight
Dr. Rick Crosby
Dr. Tom Tucker
Dr. Jeffery Kurz
Ms. Kimberly Judd
Ms. Jeannette Graham

12:25 pm - 12:30 pm  
**Break**

12:30 pm - 1:00 pm  
**Escort and/or Transportation to Main Campus**
Student Ambassadors

1:00 pm - 1:30 pm  
**Meeting with University President and University Provost**
Dr. Lee Todd
Dr. Kumble Subbaswamy

1:30 pm - 2:00 pm  
**Escort and/or Transport to Boone**
Student Ambassadors

2:00 pm - 3:00 pm  
**Meeting with External Constituent Groups**
Dr. Peace Jessa, Alumnus, PMEH, Physician, Toyota Worksite; Wellness Project, Polk Dalton Clinic,
State Prison System
Ms. Debra Armstrong, UK Markey Cancer Control Program
Rev. Willis G. Polk, Pastor, Imani Missionary Baptist Church
Mr. Curt Rowe, Comprehensive Cancer Grant
Mr. William Hacker, Department for Public Health
Dr. Regina Washington, Alumnus, HSM, Director, Division of Prevention and Quality Improvement,
Department for Public Health
Ms. Jennifer Methvin-Schilling, Alumnus, HB
Dr. William Mase, Alumnus, HSM, Research Assistant Professor; Director, University of Cincinnati
College of Medicine Department of Public Health Sciences
Ms. Linda Sims, Public Health Director, Lincoln Trail District
Ms. Therese Yelser-Smith, Alumnus, HB, Emergency Management, UK
Dr. David Gale, Dean, College of Health Sciences, Eastern Kentucky University
Dr. Richard Wilson, School of Public Health and Information Sciences, University of Louisville
Dr. John Allen Bonagoe, Dean, College of Health and Human Services, Western Kentucky University
Dr. Melinda G. Rowe, Director, Lexington Fayette Urban County Government, CPH External Advisory
Committee member
Ms. Viola Brown, UKCPH Hall of Fame & External Advisory Committee
Ms. Jan Chamness, Director, Montgomery County Health Department
Ms. Connie Buckley Asthma Grant Partnership, Kentucky Government

3:00 pm - 3:30 pm  
**Escort and/or Transportation to CPH**
Student Ambassadors

3:30 pm - 5:00 pm  
**Executive Session**
Site Visit Team

5:00 pm  
**Transportation to Hotel**

**Wednesday, April 14, 2010**

8:30 am  
**Meet Site Visit Team at Hotel and Transport to CPH**
Student Ambassadors

9:00 am - 12:00 pm  
**Executive Session**
Site Visit Team

12:00 pm - 1:00 pm  
**Working Lunch**
Site Visit Team

1:00 pm - 2:00 pm  
**Exit Interview**
Dr. Stephen Wyatt
Dr. Linda Alexander
Dr. Richard Clayton
Dr. William Pfeifle
Dr. Michael Smith
Dr. James Holsinger
Ms. Kim Judd
Mr. Anthony Hartsfield

2:30 pm  
**Transportation to Airport**
Mr. Anthony Hartsfield