<table>
<thead>
<tr>
<th>Part 1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>UK External Review Committee Recommendation Report</strong></td>
</tr>
<tr>
<td>Department of Clinical Sciences</td>
</tr>
</tbody>
</table>

Program Information:
- Unit Name: Department of Clinical Sciences
- Year of Program Review: 2015
- Name of Accreditation Agency & Last Accreditation visit: (See Subcommittee Reports)

Submitted by:
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Contributed and submitted to:
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  Dean, College of Health Sciences

Date Report is Submitted: January 15, 2016
PART 2: EXECUTIVE SUMMARY

• Process and charge to the external review committee.

The University of Kentucky established a policy of regularly-scheduled self-study and review of all colleges and departments, academic degree programs, and administrative units. The purpose of the External Review Committee (ERC) is to provide the unit with additional perspectives and evaluation of the quality and effectiveness of the unit’s programs, services, resources, processes, and operations.

The ERC used the unit’s self-studies as a starting point and:

• Examined the self-study support and appendices;
• Confirmed the validity of the Report’s conclusions based on interviews with appropriate parties;
• Participated in the site visit and engaged in additional information-seeking, as necessary;
• Identified additional strengths and recommendations for quality enhancement, and;
• Prepared a written final report that briefly describes the ERC’s process and provides a data-driven rationale for each strength and recommendation.

The process involved ERC selection and assignment. Eight higher education faculty members and administrators from the College of Health Sciences and from other colleges within and outside the University of Kentucky served on the ERC. Dr. Cynthia Beeman, Associate Professor of Orthodontics in the College of Dentistry, served as Committee Chair. Collectively, the members of this Committee brought significant and diverse knowledge and experience about higher education and the health sciences disciplines to the review process. All members of the ERC participated in the review of the Clinical Sciences Department. Additionally, Committee members were assigned in pairs to review one of the four academic degree programs in the Department.

The Clinical Sciences Department and its academic programs submitted all self-studies and related documents to the UK Office of Planning and Institutional Effectiveness and the College of Health Sciences Dean in early May, 2016. These documents were reviewed, and permission was given for the Department and programs to proceed with the external review. The self-study reports completed by the Clinical Sciences Department and its academic degree programs included a summary of progress since the previous periodic review; overview of unit organization and
functioning (policies and procedures); description of academic program offerings and student success; summary of the adequacy of human, physical, and financial resources; evidence of program quality and productivity; and contribution to college and university mission and priorities, such as the UK QEP, Diversity goals, and engagement. Committee members were asked to review the Department and unit self-study reports and appendices and any other documentation of interest prior to the site visit.

The ERC completed a site visit on November 3-4, 2016 and met with the CHS Dean and other administrative services units integral to the Department and its programs, the Department Chair and Division/Program Directors, faculty, staff, and students.

Following the visit, the Committee collaborated to produce a written report for the Clinical Sciences Department using the UK External Review Committee Recommendation Report Template. The template indicated that the report include a summary of Strengths, Weaknesses, Opportunities and Threats/Challenges related to centrality, competitive and comparative advantage, cost effectiveness, demand, quality and distinctiveness of the unit, along with a summary of Committee findings/results relative to its charge. Using data driven rationale for each recommended action, the report provides suggested strategies to achieve enhancements, recommended resources needed and timelines, as appropriate.

Dr. Beeman and the External Review Committee members reviewed the 2015 self-study report and associated recommendations prior to the two-day site visit. They prepared this report using the template described above.

- Summary of major strengths, weaknesses, opportunities and challenges as each relates to centrality, competitive and comparative advantage, cost effectiveness, demand, and distinctiveness.

Overall, the findings of the External Review Committee are in agreement with the SWOT analyses in the Department of Clinical Sciences prepared Self-Study. The overarching strengths of the Department of Clinical Sciences and its Academic Programs are listed below. Findings for specific programs are described in the Sub-Committee Reports.

**Strengths of the Department of Clinical Sciences:**

- The Department is committed to the continued growth and development of its academic degree programs in Clinical Leadership and Management, Human Health Sciences, Medical Laboratory Science, and Physician Assistant Studies.

- The Department has experienced significant growth in undergraduate education with development and implementation of the Human Health Sciences degree program, major revisions and expansions to the Clinical Leadership and Management and Medical Laboratory Science programs, and addition of a Health Advocacy Minor and the Clinical Healthcare Management Certificate. In addition, the Physician Assistant Studies Master’s program has successfully enhanced academic rigor, as demonstrated by improved licensure pass rates, while maintaining its student numbers.
The Department is committed to student satisfaction and success with a diverse range of curricular and extracurricular programs, activities and advising. The student-centered focus of the Department is evident among staff, faculty and administration and College Leadership.

The Department provides significant university, professional and community service and engagement across all academic degree programs.

**Areas for Department of Clinical Sciences Growth:**

In addition to the successes of the Department, there are areas of concern in the Self-Study and from the Site Visit that the ERC confirmed.

- **Assessment**
  The Department of Clinical Sciences and its Academic Programs does not adequately assess student learning and programmatic outcomes. Whether or not the academic programs are required to evaluate outcomes for external accreditation agencies, this information should be collected to support the efforts of the Department and justify the need for increased resources.

- **Curriculum Management**
  The Department’s enthusiastic commitment to the development and growth of new and current programs is not adequately supported by a sound curriculum management plan. Lack of strategic planning of new curricula and programs is apparent and development of a curriculum management process to enhance current program and content should be established.

- **Research and Scholarship**
  The amount of faculty research and scholarly productivity, particularly in the area of sponsored research, is limited and declined during the review period. The External Review Committee concurs with the Self-Study that Research and Scholarship are the foundation of sound evidence-based education and clinical practice, and the Department should focus on efforts to increase research and scholarly activity. The Department needs vision and a mission statement regarding research that is communicated clearly to faculty, students and staff. It is suggested that the Department expand its vision of research to include not only basic scientific and clinical research, but also behavioral and educational research. It is also suggested that the Department encourage and acknowledge a diverse range of activities (in addition to peer-reviewed publications) as scholarship.

- **Diversity and Inclusion**
  There has been limited progress in attracting a diverse faculty, staff, and students since the last Self-Study. Difficulty in attracting faculty from diverse backgrounds has been exacerbated by the extreme shortage of qualified faculty in the disciplines, particularly in Physician Assistant Studies. Academic degree programs have attempted more holistic admissions processes, however these processes do not appear to be fully understood or supported. Academic degree programs are working to assist and create pipeline programs to attract students from diverse backgrounds. An atmosphere of inclusion and support helps
build diverse communities, and with that goal in mind, implementation of team-building and development activities for staff and faculty is encouraged.

- **Practicum and Clinical Sites** –
The ERC agrees with the Department’s Self-Study that there is a growing demand for clinical sites as more academic programs across this state and others utilize clinical practitioners as supervisors (sometimes with pay) for students shadowing, practicum, and clinical clerkships/rotation experiences. Further, the new and expanded undergraduate programs in the Department have significant requirements for student clinical engagement activities which further stress the already burdened system. In order to maintain and enhance clinical training, strategic, proactive and creative planning is needed to identify clinical training opportunities in an environment of limited space and location resources.

- **Resources**
The Department’s programmatic development and increased enrollment has increased the demand for classrooms large enough to accommodate expanding student cohorts, including distance learning classrooms with ITV capability. This will continue to be a growing problem affecting the ability of the Department to sustain and expand its programs. Further, the number of faculty and staff needed to deliver quality programs is increasing. The ERC recognizes this area for growth, and suggests strategic, proactive and creative planning to overcome this challenge in an environment of limited financial and space resources.

**Current and Future Opportunities**
- Outstanding, student-centered staff and faculty and new additions to leadership in the PA and Research programs.

- Opportunity to review and revise the mission of the Department and its programs and strategically plan for student learning and programmatic outcomes.

**Threats**
- Managing growth with available resources
  - Maintenance of teaching quality
  - Maintenance of clinical experiences.

- **Summary of ERC findings and results relative to its charge.**

Overall the ERC findings were in-line with the Department’s prepared Self-Study and strengths and areas for growth are outlined above. Additional strengths and recommendation for quality enhancement identified by the ERC include admirable student-centeredness of the Department and commitment on the part of staff, faculty and administration towards student success; strategic planning for curriculum development and management is a significant area for growth; the Department, with input from faculty, staff and administration will benefit from the development and implementation of a curriculum management process for all its academic programs. Suggestions for enhancing the Department and addressing areas for growth are addressed in Part 3 of this report.
### UK External Review Recommendation Report: Data driven rationale for each recommended action

Each Recommendation shall include the following:

- Suggested strategies to achieve enhancements
- Recommended resources needed to follow-through on strategies (as appropriate)
- Timeline for addressing enhancement (as appropriate)

### PART 3: UK EXTERNAL REVIEW RECOMMENDATION REPORT

The following recommendation report proposes enhancements, suggested strategies to achieve the enhancements, recommended resources needed for the strategies, and suggested timelines for addressing the recommended enhancement.

#### Recommendation - Assessment

The Department of Clinical Sciences should assess student learning and programmatic outcomes. Data should be collected on applicant quality and pipelines, admissions data (including metrics and non-cognitive quality), student learning outcomes for each program (including but not limited to board and licensing examinations), retention and graduation rates, placement of graduations, graduate and employer satisfaction. Attrition data should be collected and analyzed. It is the ERC’s understanding that the Office of Assessment has recently been expanded, and that Dr. Pat Kitzman in Research and Dr. Scott Black in PAS have strong backgrounds in assessment. Other talented staff and faculty in the Department should be encouraged to engage in assessment and be provided protected time to produce outcome reports. It is suggested that the Department and its academic units consult with the University of Kentucky’s Office of Assessment (Institutional Planning, Research and Effectiveness) for guidance and support. Appropriate software and survey instruments designed to provide meaningful data are available or should be developed. Data related to the Department’s successes and needs should enhance the ability to procure resources.

**TIMELINE:** present-1.5 years

#### Recommendation - Curriculum Management

It is suggested that the Department and its Academic Units develop a curriculum management process and sound curriculum management plans. New programs should not be developed by using current curriculum maps from existing programs, and omissions and redundancies in course offerings and content need to be closely examined. Sequencing of courses needs to be examined. It is recommended that curriculum management models from equivalent healthcare colleges be reviewed and a plan developed that fits the needs of the Department and its Academic Programs. The plan should include an overall review of each degree program curriculum, including feedback from faculty internal and external to the program, as well as information obtained from student focus groups at the end of each semester. Feedback from support staff who help coordinate programs is important as well. While curriculum software exists to help manage syllabi, identify content areas, track competencies, etc., it is not essential to the process. The Faculty are responsible for the
Curriculum, and should request support (time and staff support) from Administration to develop a sound curriculum management process. The Department may want to consider appointing a Director of Undergraduate Studies to coordinate and facilitate the curriculum management process.

TIMELINE: present-1.5 years

**Recommendation - Research and Scholarship**

The Department needs to articulate a mission and vision about research and scholarship that is communicated clearly to faculty, students and staff. It is suggested that the Department expand their vision of research to include not only sponsored basic scientific and clinical research, but also behavioral and educational research. Dr. Pat Kitzman has recently started this process and is exposing faculty to new research concepts. The College and Department may want to revisit its definitions of and requirements for research and scholarly activity if it plans to focus primarily on training highly qualified clinicians and pre-health professionals. Publication in peer-reviewed journals and external research funding should not be the only outcome measures of research and scholarly activity, and faculty with a large commitment to instruction should be mentored on ways to increase their scholarly contributions to the profession. The Department and individual Faculty may consider consultation with the University of Kentucky Office of Assessment for ideas to develop meaningful education research. Such research has the potential to enhance the Department’s Academic Programs and make contributions to associated healthcare professions. The ERC learned from several sources during the site visit that students have outstanding research opportunities in the Department, including the opportunity to obtain a Certificate in Undergraduate Research. These opportunities should continue to be encouraged and supported as a potential area to ‘grow’ internal research and scholarly activity. Most importantly, faculty who have significant time in their DOE’s for research should have this time protected, and when grants are developed and funded, release time to conduct the research should be provided. Junior faculty should be provided strong mentors to ensure their success with scholarly productivity and advancement.

TIMELINE – within 3 years

**Recommendation - Diversity and Inclusion**

Increasing diversity has been an ongoing challenge at the University of Kentucky, and the Department of Clinical Sciences has made commendable attempts to improve diversity in the student body through holistic admissions processes. During the site visit, the process was reviewed and it was determined that the approach to identifying a qualified and diverse student population needs improvement. Minimal metric cutoffs still exist for applicants who have the potential to succeed in programs, and as a result their applications do not receive holistic review. It is recommended that training in whole file review be refreshed and admissions personnel and faculty are exposed to this training.

The College and Department should continue practices focused on advising and retention of all students with the goals to improve student success, retention, admission to postgraduate and professional programs and/or procurement of high-quality employment.
The Department is encouraged to continue its recruitment efforts to diversify its students, faculty and staff, and to include diverse individuals on important committees related to Admissions, Curriculum, Staff and Faculty Recruitment and Development. An atmosphere of inclusion and support helps build diverse communities, and with that goal, implementation of team-building and development activities for staff and faculty is encouraged. It is suggested that the Department conduct an engagement survey to determine staff and faculty job satisfaction, work-life balance and to encourage suggestions to enhance an atmosphere of inclusion and empowerment among the Department’s members.

**TIMELINE** – within 1.5 years

- **Recommendation - Practicum and Clinical Sites** –

  The ERC agrees with the Department’s Self-Study that there is a growing demand for clinical sites as more academic programs across Kentucky and other states utilize clinical practitioners as supervisors for students’ shadowing, practicum, and clinical experiences. During the site visit, the growth in the number of practicum experiences was noted along with the management issues in the placement of students in practicum sites. In order to maintain and enhance clinical training, strategic, proactive and creative planning is needed to identify clinical training opportunities in an environment of limited space and location resources. It is suggested that the Department continue to investigate collaborative opportunities on campus, in Lexington and with other institutions. If reasonable, students can be asked to identify possible sites to complete their clinical experiences, and Memoranda of Understanding developed at new locations to ensure the students have uniform and high-quality experiences. As with all healthcare clinical training externships, providing equivalent experiences to individual students is challenging, and it is suggested that the Department research how other programs overcome this obstacle. There does not appear to be adequate staff support to manage all the practicum and clinical sites, and to monitor the student activities. It is suggested that additional staff support be considered to manage clinical rotations, and the Office of Information Technology should investigate scheduling software as well.

**TIMELINE** – within 1.5 years

- **Recommendation - Resources**

  The ERC recognizes that the Department has achieved outstanding growth of its academic programs and suggests strategic, proactive and creative planning to overcome this challenge in an environment of limited financial and space resources.

  It is recommended that the Department continue to hire a mixture of regular and special title faculty. The growth in student enrollment will require additional faculty to teach the students and maintain high teaching quality. It is recommended that the Department and its Academic Programs examine each new open line to determine needs and address each with a proactive plan towards the teaching/research needs of the program to maintain its strength. The Department should also explore the ability to add part-time faculty or
lecturers to provide release time for full-time faculty who are committed to research and scholarly activity and are seeking promotion and advancement.

A current challenge identified during the site visit is the limited large lecture hall space available for large enrollment courses, which are needed as enrollment grows. It is suggested that the Department continue to explore alternative options for content delivery, including blended and on-line learning. Students interviewed during the Site Visit welcomed the opportunity for more on-line courses and fewer large class meetings. Small group activities are also very much appreciated by the students. It is recommended that the program continue to explore and implement novel content delivery options. If course directors and instructors feel it is best to deliver in traditional face to face settings, it is recommended that the Programs investigate non-traditional scheduling options (for example, outside of the normal Monday-Friday 8am-5pm schedule). This may open up additional rooms around campus to fit the needs of the growing student enrollment. In addition, programs could offer multiple course sections. If more course sections are offered this may result in an additional strain on the faculty teaching load. As such, additional faculty lines for the program or part-time faculty, lecturers or teaching assistants may be needed.

The College of Health Sciences building is relatively new, but its programs are outgrowing this space. With current budget constraints on campus, the College, Department and Academic Programs may consider examining current space in order to determine if space can be reallocated or converted into multiple-use/multi-user areas.

The ERC recommends that the Department of Clinical Sciences hire additional staff to assist with clinical site placement and other student-related activities as student enrollment grows. The opportunity and experience the clinical site requirement provides for the students in this program is a strength, but is one that requires extreme coordination. Currently there is only one staff member responsible to manage these activities. The additional staff to support student clinical experiences is favorably viewed by the committee as these opportunities provide unique and key experiences for the students in the Department’s programs.

The Committee was encouraged to learn that new staff has been added to support Information Technology in the Department. It is suggested that the Department’s IT staff explore new technologies such as tracking software, curriculum management software and clinical management software and make recommendations about adding IT resources that will enhance staff, faculty and student productivity.

The External Review Committee commends the Department’s outstanding staff and faculty, and recommends that the College invest in development activities for both staff and faculty. There are several resources available on campus for staff and faculty development (for example, leadership programs and UK Information Technology/CELT workshops). It is suggested that the Department provide release time for faculty and staff development, as well as implement internal team-building and leadership activities.

**TIMELINE – within 3 years**
Please identify errors of fact in your unit (Dept; academic degree) report in the tables below. Your correction should be concise – full sentences are not necessary. Please remember that your corrections pertain to factual errors only; differences of opinion about recommendations or rankings should not be listed unless they involve a factual error. (A sample is provided for you).

<table>
<thead>
<tr>
<th>ERC Recommendation Report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Item Location</strong> (p. #, section, etc.)</td>
</tr>
<tr>
<td>---------------------------------</td>
</tr>
<tr>
<td>Page 8</td>
</tr>
<tr>
<td>Page 8</td>
</tr>
<tr>
<td>Page 8</td>
</tr>
</tbody>
</table>
**Part 1**

**UK External Review Committee Recommendation Report**  
**Clinical Leadership and Management BHS**

**Program Information:**
- Unit Name: Department of Clinical Sciences, Clinical Leadership & Management BHS, Track A and Track B  
- Year of Program Review: 2015  
- Name of Accreditation Agency & Last Accreditation visit (if applicable): NA

**Submitted by:**
- Martha C. Riddell, DrPH  
  Associate Professor and Director, MHA Program  
  UK College of Public Health

- Kay Ross. RN, MSN, AOCN  
  Vice-President, Clinical Services  
  Baptist Health Lexington

**Contributed and submitted to:**
- Cynthia Beeman, DDS, PhD.

**Date Report is Submitted:** November 21, 2016
UK External Review

Executive Summary: Informed by data presented to and examined by the Committee

- Brief description of external review committee process and its Charge (attach to report)
- Summary of major Strengths, Weaknesses, Opportunities & Threats/Challenges as each relates to centrality, competitive & comparative advantage, cost effectiveness, demand, quality and distinctiveness
- Summary of External Review Committee findings/results relative to its charge

PART 2: EXECUTIVE SUMMARY

The University of Kentucky established a policy of regularly-scheduled self-study and review of all colleges and departments, academic degree programs, and administrative units. The purpose of the External Review Committee (ERC) is to provide the unit with additional perspectives and evaluation of the quality and effectiveness of the unit’s programs, services, resources, processes, and operations.

The ERC used the unit’s self-studies as a starting point and:

- Examined the self-study support and appendices;
- Confirmed the validity of the Report’s conclusions based on interviews with appropriate parties;
- Participated in the site visit and engaged in additional information-seeking, as necessary;
- Identified additional strengths and recommendations for quality enhancement, and;
- Prepared a written final report that briefly describes the ERC’s process and provides a data-driven rationale for each strength and recommendation.

The process involved ERC selection and assignment. Eight higher education faculty members and administrators from the College of Health Sciences and from other colleges within and outside the University of Kentucky served on the ERC. Dr. Cynthia Beeman, Associate Professor of Orthodontics in the College of Dentistry, served as Committee Chair. Collectively, the members of this Committee brought significant and diverse knowledge and experience about higher education and the health sciences disciplines to the review process. All members of the ERC participated in the review of the Clinical Sciences Department. Additionally, Committee members were assigned in pairs to review one of the four academic degree programs in the Department.

The Clinical Sciences Department and its academic programs submitted all self-studies and related documents to the UK Office of Planning and Institutional Effectiveness and the College of Health Sciences Dean in early May, 2016. These documents were reviewed, and permission was given for the Department and programs to proceed with the external review. The self-study reports completed by the Clinical Sciences Department and its academic degree programs included a summary of progress since the previous periodic review; overview of unit organization and functioning (policies and procedures); description of academic program
offerings and student success; summary of the adequacy of human, physical, and financial resources; evidence of program quality and productivity; and contribution to college and university mission and priorities, such as the UK QEP, Diversity goals, and engagement. Committee members were asked to review the Department and unit self-study reports and appendices and any other documentation of interest prior to the site visit.

The ERC completed a site visit on November 3-4, 2016 and met with the CHS Dean and other administrative services units integral to the Department and its programs, the Department Chair and Division/Program Directors, faculty, staff, and students.

Following the visit, the Committee collaborated to produce a written report for the Clinical Sciences Department using the UK External Review Committee Recommendation Report Template. The template indicated that the report include a summary of Strengths, Weaknesses, Opportunities and Threats/Challenges related to centrality, competitive and comparative advantage, cost effectiveness, demand, quality and distinctiveness of the unit, along with a summary of Committee findings/results relative to its charge. Using data driven rationale for each recommended action, the report provides suggested strategies to achieve enhancements, recommended resources needed and timelines, as appropriate.

Dr. Riddell and Ms. Ross reviewed the 2015 self-study report and associated recommendations prior to the two-day site visit. They prepared this report using the template described above. In addition, they completed the checklist document entitled: “UK External Review Committee Institutional Recommendation; CPE Program Review Rubric”.

This report addresses the external review of the Clinical Leadership and Management Bachelor of Health Sciences (BHS) degree program in the College of Health Sciences. The purpose of the external review is to provide the Division of Health Sciences Education and Research (HSER) with additional perspectives and evaluation of the quality and effectiveness of the Clinical Leadership and Management (CLM) program, services, resources, processes, and operations.

- **Summary of major strengths, weaknesses, opportunities and challenges as each relates to centrality, competitive and comparative advantage, cost effectiveness, demand, and distinctiveness.**

  Strengths: The CLM program documents and site visit reflect a demonstrated focus on students. This student focus is central to the mission and vision of the College of Health Sciences and with the Kentucky Council of Postsecondary Education (CPE) goals. Within the CLM program, Track A is unique in accepting students who have an Associate Degree and/or experience while Track B accepts students as freshmen. Enrollment in Track B has increased each year following its approval in 2014.

  A second strength is the centralized support for students through the College of Health Sciences Student Affairs office. The “high touch model of advising” includes three advising appointments each semester with academic advisors in the Student Affairs office. Interviews with CLM students supported the positive college-wide graduating student exit surveys referenced in the self-study, though the number of CLM students participating in that survey would likely be a small number. In times of increasing enrollment, student advising is critical to retention and graduation rates and provides an advantage to the CLM program.
Another strength identified by the review team and noted during the site visit is the appointment of Dr. Scott Lephart as Dean of the College of Health Sciences in March of 2015. Dean Lephart brings extensive administrative experience within academia which undoubtedly provides leadership to all initiatives within the college.

Weaknesses: The tracking of alumni and program metrics has missing elements, as noted in the self-study report. For example, the program does not have a system for tracking job placement, employer satisfaction and alumni satisfaction. With increasing program enrollment in Track B, this information is critical for program assessment and continuing improvement.

Opportunities: The recently hired Associate Dean for Research shared plans and initiatives that will enhance support of junior faculty in regular title series. This support enhances the goals of increased research productivity within the CLM program and the College of Health Sciences.

The thoughtful review of the mission and vision of the CLM degree program(s) and the Health and Human Services degree program is an opportunity to address program growth and developments since the self-study period. With the increased demand for both Track B of the CLM and the HHS degree which utilize a high percentage of the same faculty, support, and space, the challenges on current resources were noted in the self-study and at the site visit. During the site visit, there were elements of the three degree programs that created questions by the review team re: duplication, clarity of the distinctiveness of each program, and the future ability to maintain quality with increasing enrollment.

With increased growth of faculty and students, the opportunity to develop a defined decision making structure is apparent (e.g. an academic affairs work group/committee). A structure to support curriculum review and management and defined decision making may provide enhanced efficiency to the unit.

Threats: As noted in the self-study report and during the site visit, managing the growth with the available resources is a potential threat. Of particular note is the impact of this growth on junior faculty working to develop a research portfolio.

The distribution of undeclared undergraduate students to the college was noted several times during the site visit. The decision to assign undeclared students to individual colleges was made after the self-study timeframe, but may further impact the concerns regarding increasing student enrollment and the capacity of the CLM program.

- **Summary of ERC findings and results relative to its charge.**

  Validity of the Self-Study Report Conclusions. The self-study report for the Clinical Leadership and Management BHS program includes eight major areas of concern and eight major recommendations. The review committee concurs with the self-study identification of the following major concerns:

  - Explosive growth in student numbers
  - Maintenance of teaching quality—largely due to increased number of students
  - Ensure quality student experiences – Adequate Clinical Sites
• Balance of research and teaching time for regular title series faculty
• Collecting data and the tracking of graduates and alumni
• Elimination of the RCM budget model on which the growth of the program was based.

Two major concerns are noted for further review and clarification.

• Retention of students and matriculation of students – student advising.

  This recommendation appears to contradict a strength in the report re: student advising and would benefit from further clarification. This appears to address the threat of increased student enrollment without concurrent increase in student advising.

• Retention of staff. Opportunity for staff to improve skills and pay.

The review committee seeks clarification re: barriers preventing development of skills and advancement opportunities.

Eight Major Recommendations:

- Three of the major recommendations address options to limit enrollment in the CLM and HHS program. During the on-site visit, it was reported that the options presented had not been approved.
- Several recommendations address the management of resources, including faculty time, increased development of expertise with on-line and large courses, and hiring more part-time faculty to allow junior faculty adequate time for research.
- One recommendation addresses the coordination with other colleges and universities re: practicum site development. During the visit, the growth in the number of practicum experiences was noted along with the management issues in the placement of students in practicum sites. Discussion of collaboration regarding placements warrants further exploration, but was not discussed in detail during the site-visit.

Additional Proposed Recommendations and Enhancements: Four recommendations/enhancements are proposed as priorities to assist in retaining the program strengths, addressing identified weaknesses, supporting opportunities as noted, and responding to current threats.

- Recommendation #1: A thoughtful review of the mission, vision and subsequent goals of the CLM and HHS programs be completed within six months.
- Recommendation #2: The formalization of structures to support curriculum growth, development and review follow completion of Recommendation #1.
- Recommendation #3: A revisiting of the recommendations in the self-study regarding with attention to balancing resources for all areas impacted to meet the overall goals of the program. This will occur following Recommendation #1.
- Recommendation #4: Define and operationalize support for junior faculty to balance multiple program needs with the requirements of building a successful research portfolio for tenure and promotion. This should be completed following Recommendation #1, though existing junior faculty would benefit from a shorter timeframe.
PART 3: UK EXTERNAL REVIEW RECOMMENDATION REPORT.

The following report proposes recommended enhancements, suggested strategies to achieve the enhancements, recommended resources needed for the strategies, and a suggested timeline for addressing the recommended enhancement.

Recommendation #1: Mission and Vision

The mission of the CLM program as outlined in the self-study includes assurance of student success through improved retention and graduation, increased diversity, expansion of the research agenda and continued/expanded community engagement. The vision aims to continue to provide a diverse learning environment that enables students to be successful in careers.

In the 2009 periodic review, self-study goals were established to increase student enrollment, evolve CLM into the core of a new Human Health Science program, establish an advising/mentoring program to help students and pursue membership in a professional organization. These goals were developed in the context of a Responsibility Centered Budget Model (RCM Model) which allocated resources to support growth. The CLM program quite admirably accomplished the goals of 2009. By 2015 the program saw significant growth, development of the HHS program, a student advising/mentoring program in place and pending approval of a third track for Health Services Executive. However, before the end of the self-study period the RCM model of budgeting was changed. The new budget model remained in development at the time of the self-assessment and was cause for the recommendation to restrict the number of incoming students through capped enrollment and higher admission criteria. At the time of the external review, faculty shared that this recommendation was not accepted by the University. This decision appears to have the program confounded to come up with other ways to manage the increased numbers of students while achieving the mission and vision of the CLM and HHS programs.

The review committee recommends a thoughtful review of the mission, vision and subsequent goals of the CLM and HHS programs. The review process should include input of key stakeholders including College, Division and Program leadership, faculty, staff, students and community advisors. The recommended review would:

- Clarify the goals and objectives for all tracks of the CLM and HHS programs
- Identify strategies for balanced growth of the programs that match student needs and expectations with the College resources and performance expectations
- Maintain quality of teaching to assure the high rates of student performance, graduation and career placement
- Establish a faculty and staff development plan that fosters success and engagement

Each Recommendation shall include the following:

- Suggested strategies to achieve enhancements
- Recommended resources needed to follow-through on strategies (as appropriate)
- Timeline for addressing enhancement (as appropriate)
• Defines the pathway and expectations for expansion of the research agenda, particularly important for junior faculty
• Strengthen the relationships with community partners for practicums, capstone projects and placing graduates

Timeline: The review of CLM and HHS Mission, Vision and Goals will be completed within 6 months.

Recommendation #2: Formalization of structures to support curriculum growth, development and review.

The CLM program includes Track A and Track B students. Track A students enter the program following completion of an Associate Degree and/or work experience. Enrollment in Track A remains around 19 students through the self-study period. Track B was approved for freshman enrollment in 2014 with 40+ students per year enrolling since the program began. The HHS degree program (reviewed by two other ERC members) has also proven to be in demand with increased numbers of students each year since it began. The addition of these two new programs increased the number of courses offered by the department. The number of faculty has also increased from 2.67 in 2013 to 3.65 in 2015. However, additional adjunct and part-time instructors have also been added to meet the demand. The increased demand has been addressed—at least in part—in a reactive manner following course registration by adding additional course sections or teaching larger sections based on course enrollment.

A structure to support curriculum review and development, such as a curriculum committee or work group which meets on a regular basis, provides a defined time to address curriculum concerns and issues by the faculty. In previous years, this review was likely completed informally at department meetings when the department had fewer faculty. With an increase in number of faculty, particularly junior faculty, a committee/work group that meets on a regular basis to discuss curriculum issues provides an opportunity for input from each faculty member. This system may be in place for the college, but appeared to happen more informally at the program level.

With the increased growth in student numbers, this is the time to develop a systematic plan for gathering alumni placement data, alumni satisfaction, employer satisfaction data, job placement and additional program metrics. Again, until the recent growth in numbers, the tracking of this data may have been accomplished informally, but that is not feasible now. The recent addition of staff in the assessment area may support this need but appears yet to be defined. There are likely other programs in the college—particularly programs with external accreditation—that are routinely gathering and tracking this data. It is recommended that the CLM program review and discuss ways to utilize existing processes to gather this information for the CLM program.

Timeline:

a) Begin CLM/HHS Academic Affairs Work Group:
   Within 6 months
b) Develop structure and begin tracking additional program data:
   Within 12 months.
**Recommendation #3: Managing resources to accomplish goals of the program**

The CLM program experienced a tripling of enrollment in 2014-15. That same year the HHS Program was established and faculty is shared between the two programs. Repeatedly in the documents and interviews the term “explosive” was used to describe the growth. The growth impacts resources in all areas of the program and department. The 2015 self-study recommendations for limiting enrollment or hiring additional faculty do not address all areas impacted by the growth. At the time of the external review, faculty said that the enrollment limits had been denied. In response to this information the review committee recommends revisiting the recommendations with attention to balancing resources for all areas impacted to meet the overall goals of the program.

**Timeline:**
- Within 12 months
  a. Identify all areas impacted by growth and develop plans for balancing the resources;
  b. Following review of mission and vision;

**Recommendation #4: Systems to support the success of junior faculty members.**

The CLM program has historically been delivered by faculty in special title series appointments with small percentages of research effort. With the addition of junior faculty with a regular title series appointment, these faculty require multi-dimensional support to achieve success in promotion and tenure. Since senior CLM faculty are not in a regular title series, mentors from outside the program have been identified with some success. The Research Office also appears equipped to support new junior faculty. However, with the existing increase in teaching demands, the need to define the expectations between teaching and research time for junior faculty members would be beneficial.

The CLM self-study report does address this issue in two recommendations (Recommendation #3 and #8). These recommendations would be best revisited following the review of mission and vision for the CLM and HHS programs.

**Timeline:**
- a) Define recommended DOE for junior faculty:
  Follows completion of Mission and Vision Review
  Within 12-18 months
- b) Assess current mentoring program for junior faculty:
  Within 18 months.

**Summary:** The review committee appreciates the diligence in the preparation of the self-study documents by the CLM program and the participation by administration, faculty, and students in the on-site visit. The over-arching theme of this report reflects issues of managing growth across all aspects of the program. In summary, the four recommendations/enhancements are proposed as priorities to assist in retaining the program strengths, addressing identified weaknesses, supporting opportunities as noted, and responding to current threats.
Recommendation #1: A thoughtful review of the mission, vision and subsequent goals of the CLM and HHS programs be completed within six months.

Recommendation #2: The formalization of structures to support curriculum growth, development and review following completion of Recommendation #1.

Recommendation #3: A revisiting of the recommendations in the self-study regarding with attention to balancing resources for all areas impacted to meet the overall goals of the program. This will occur following Recommendation #1.

Recommendation #4: Define and operationalize support for junior faculty to balance multiple program needs with the requirements of building a successful research portfolio for tenure and promotion. This should be completed following Recommendation #1, though existing junior faculty would benefit from a shorter timeframe.

Part 4 (Educational Programs ONLY): Complete the CPE Program Review Rubric (attach to ERC Recommendation Report) and provide ERC Recommendation (Continue without Modification, continue with Modification, Needs further Review)

ERC Recommendation: Continue without modification

Attach Brief Rationale (optional):

See attached
Please identify errors of fact in your unit (Dept; academic degree) report in the tables below. Your correction should be concise – full sentences are not necessary. Please remember that your corrections pertain to factual errors only; differences of opinion about recommendations or rankings should not be listed unless they involve a factual error. (A sample is provided for you).

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Part 1

UK External Review Committee Recommendation Report
Human Health Science Program

Program Information:
- Unit Name: Department of Clinical Sciences, Human Health Sciences
- Year of Program Review: 2015
- Name of Accreditation Agency & Last Accreditation visit (if applicable): NA

Submitted by:
- Cynthia Beeman, DDS, PhD, Associate Professor,
  Department of Orthodontics,
  College of Dentistry,
  University of Kentucky
- Jennifer L. Freeman, PhD, Associate Professor,
  School of Health Sciences,
  College of Health and Human Sciences,
  Purdue University

Contributed and submitted to:
- Cynthia Beeman, DDS, PhD.

Date Report is Submitted: November 25, 2016
PART 2: EXECUTIVE SUMMARY

• Process and charge to the external review committee.

The University of Kentucky established a policy of regularly-scheduled self-study and review of all colleges and departments, academic degree programs, and administrative units. The purpose of the External Review Committee (ERC) is to provide the unit with additional perspectives and evaluation of the quality and effectiveness of the unit’s programs, services, resources, processes, and operations.

The ERC used the unit’s self-studies as a starting point and:

• Examined the self-study support and appendices;
• Confirmed the validity of the Report’s conclusions based on interviews with appropriate parties;
• Participated in the site visit and engaged in additional information-seeking, as necessary;
• Identified additional strengths and recommendations for quality enhancement, and;
• Prepared a written final report that briefly describes the ERC’s process and provides a data-driven rationale for each strength and recommendation.

The process involved ERC selection and assignment. Eight higher education faculty members and administrators from the College of Health Sciences and from other colleges within and outside the University of Kentucky served on the ERC. Dr. Cynthia Beeman, Associate Professor of Orthodontics in the College of Dentistry, served as Committee Chair. Collectively, the members of this Committee brought significant and diverse knowledge and experience about higher education and the health sciences disciplines to the review process. All members of the ERC participated in the review of the Clinical Sciences Department. Additionally, Committee members were assigned in pairs to review one of the four academic degree programs in the Department.

The Clinical Sciences Department and its academic programs submitted all self-studies and related documents to the UK Office of Planning and Institutional Effectiveness and the College of Health Sciences Dean in early May, 2016. These documents were reviewed, and permission was given for the Department and programs to proceed with the external review. The self-study reports completed by the Clinical Sciences Department and its academic degree programs
included a summary of progress since the previous periodic review; overview of unit organization and functioning (policies and procedures); description of academic program offerings and student success; summary of the adequacy of human, physical, and financial resources; evidence of program quality and productivity; and contribution to college and university mission and priorities, such as the UK QEP, Diversity goals, and engagement. Committee members were asked to review the Department and unit self-study reports and appendices and any other documentation of interest prior to the site visit.

The ERC completed a site visit on November 3-4, 2016 and met with the CHS Dean and other administrative services units integral to the Department and its programs, the Department Chair and Division/Program Directors, faculty, staff, and students.

Following the visit, the Committee collaborated to produce a written report for the Clinical Sciences Department using the UK External Review Committee Recommendation Report Template. The template indicated that the report include a summary of Strengths, Weaknesses, Opportunities and Threats/Challenges related to centrality, competitive and comparative advantage, cost effectiveness, demand, quality and distinctiveness of the unit, along with a summary of Committee findings/results relative to its charge. Using data driven rationale for each recommended action, the report provides suggested strategies to achieve enhancements, recommended resources needed and timelines, as appropriate.

Drs. Freeman and Beeman reviewed the 2015 self-study report and associated recommendations prior to the two-day site visit. They prepared this report using the template described above. In addition, they completed the checklist document entitled: “UK External Review Committee Institutional Recommendation; CPE Program Review Rubric”.

- **Summary of major strengths, weaknesses, opportunities and challenges as each relates to centrality, competitive and comparative advantage, cost effectiveness, demand, and distinctiveness.**

The Human Health Sciences (HHS) major was approved in the spring of 2012 and had its first class begin in the fall of 2012. As such, the program is relatively new and this is the first self-study for the program. The first class of students in this major graduated in May 2016. Major strengths for the program include student-focused program, excellent placement of students, and large growth and popularity of the program (growing from 30 students in the first class to 92 admitted students in fall 2015). Reflective of the student numbers, the faculty has grown to five members in the Division of Health Sciences Education and Research (this includes the HHS and Clinical Laboratory Medicine Programs) with 30% DOE for the Division Director and from 0.25 FTE support staff to two full time staff positions. This growth reflects the distinct uniqueness and overall need for this type of program.

While the popularity and growth of the HHS program is excellent and presents a wonderful opportunity to promote continued growth and expansion of this program, including a platform to request additional faculty and staff lines, this growth has also created some challenges for the HHS program. One distinct challenge the unit is facing is limited availability of large lecture hall space to accommodate the growing student enrollment. The unit is exploring alternative content delivery options, including on-line learning.
Another strength of the HHS program is the mixture of regular and special title faculty positions enabling diversity in the focus of the faculty on teaching and research areas. The current teaching strength of the unit was evident throughout the visit and is essential to maintain the success of this program. A current challenge facing the junior Regular Title Faculty includes establishing their independent research programs while balancing their teaching requirements. The rapid growth in student enrollment has created strain in this area. This provides an opportunity for the program to continue to provide mentoring and ensure that adequate resources are available for the junior regular title faculty to support their success. In addition, the program has the opportunity to continue its guidance of all faculty regarding expectations for tenure and promotion based on their appointment and to differentiate between requirements for regular and special title faculty.

Additionally, a major strength is the inclusion of relevant and exciting coursework relative to the needs of the pre-professional students in HHS. The students felt that their coursework and knowledge set them above their peers at other institutions and promoted a successful entrance into the health professional schools. The students also felt there were some limitations in the university-wide assistance program available in the pre-professional office. This provides an opportunity for the unit to advise and assist these students in activities that will support successful entrance into the health professional schools. Examples include resources for letter writing (for example, a pre-health professional committee letter to satisfy application requirements) and a central location for providing resources (e.g., a study room where past student materials for preparing for the MCAT could be stored and used by future students).

- Summary of ERC findings and results relative to its charge.

Overall the findings of the ERC were in-line with the prepared self-study. The ERC viewed the growing enrollment in HHS as a wonderful strength and recognized the challenges associated with the growth, but encourages the program not to limit enrollment. Instead the ERC recommends working towards proactive planned solutions to the issues that arise with the growth in student numbers and the popularity of the program, including solutions and recommendations included in this report.

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PART 3: UK EXTERNAL REVIEW RECOMMENDATION REPORT.

The list of recommendations below is mainly driven by (1) the strain on the program as the result of the rapid growth in student enrollment since this program first began in 2012 and (2) the goal of maintaining a distinct curricular program with high quality teaching. The growth in this program is a major strength and demonstrates the distinct need and popularity, but it has also
resulted in some challenges for the program. Overall the recommendation from the ERC is not to limit/cap student enrollment, but instead determine and explore a variety of options to address and accommodate this growth as suggested below.

**Recommendation 1: To provide support and resources to address the rapid growth in student enrollment and classroom teaching space accommodations.** A current challenge identified is the limited large lecture hall space available for large enrollment courses, which are needed as the enrollment grows in this program. The program is actively investigating and exploring alternative options including blended and on-line learning. It is recommended that the program continue to explore and implement these options, but also consider other additional options. For instance, it is recommended that the program seek to schedule some courses outside of the normal busy course times. This may open up additional rooms around campus to fit the needs of the growing student enrollment in the program. In addition, the program could offer multiple course sections. If more course sections are offered this may result in an additional strain on the teaching load of the faculty. As such, additional faculty lines for the program may be needed.

   Timeline: 1.5 years

**Recommendation 2: To provide the needed support and mentoring to enable success of junior faculty and teaching quality of the program.** Growth in student enrollment typically results in strain on the faculty teaching loads and rebalancing of faculty responsibilities. This concern was observed during the site visit for the HHS program. The recommendation is to address this challenge with multiple strategies including: 1) ensuring that the faculty have adequate DOE allotted (and protected) for their teaching responsibilities and 2) providing mentoring for junior faculty to ensure success. Both teaching mentoring and research mentoring should be provided to Regular Title faculty seeking development and advancement. It is recommended that the Faculty review teaching loads at peer institutions as a guide for expectations (e.g., 1-2 courses per semester for Regular Title faculty).

   Timeline: 1.5-3 years

**Recommendation 3: To continue to hire a mixture of regular and special title faculty.** The committee observed the mixture of regular and special title faculty as a strength of the program. This mixture enables the faculty to have various responsibilities and focuses related to teaching and research. The growth in student enrollment will require additional faculty lines to teach the students and maintain high teaching quality. Alternatively, the program can explore the use of part-time faculty, lecturers or teaching assistants to support faculty if lines are not procured. It is recommended that the program examine each new open line to determine the needs of the program, Proactive plans to meet the teaching/research needs of the program and to maintain its strength should be developed following this examination.

   Timeline 2-4 years

**Recommendation 4: To continue practices focused on retention and advising of students.** Students that enter the HHS program are of the highest caliber. Unlike some other degree programs, the future goals of most (if not all) of the students are to gain entrance into a health professional school following graduation. Students in this program face enhanced pressure to maintain a very high GPA and high level of involvement in various extracurricular and health-
related activities (e.g., shadowing and research) to have competitive health professional school applications. It is recommended that the advisors continue their outstanding role in student advising. As enrollment continues to grow additional advisors will be needed to maintain this strength. The program has a clear GPA requirement for students to remain in this program, and student support services will continue to be highly utilized.

Timeline: 1.5-3 years

**Recommendation 5: To hire additional staff to assist with clinical site placement and other student-related activities as student enrollment grows.** The opportunity and experience the clinical site requirement provides for the students in this program is a strength, but is one that requires extreme coordination. Currently there is one staff member responsible for the coordination. Similar to the recommendations above, the program in this aspect also seems to be functioning near capacity and will soon need additional support to coordinate this activity if it is maintained in the curriculum. The additional staff to support this opportunity is favorably viewed by the committee as these opportunities provide unique and key experiences for the students in this program.

Timeline: 1.5-3 years

**Recommendation 6: To start tracking of graduates/alumni.** The HHS program is set to graduated its first class in May 2016. It is recommended that the program work closely with the Office of Advancement and Director of Assessment to develop methods for active tracking of graduates/alumni at this early stage of the process. The program can utilize methodologies, tools, and strategies in place in other programs in the college to maintain and track this information.

Timeline: 1.5 years

**Recommendation 7: To evaluate the curricula for the HHS and CLM programs.** Currently, many of the courses in the HHS program are shared between the HHS and CLM program. It was evident this is causing some issues based on different goals of these two programs. It is recommended that the HHS program take a proactive stance on evaluating the curriculum plan for the HHS program and consider limitations/advantages of cross-listing courses in these two programs. This will ultimately provide the optimal learning experience for students in these distinct programs. In addition, when the curricula are reviewed for these programs, content redundancies, reinforcements and omissions should be identified. For example, content on evidence-based clinical practice would be a valuable addition to both programs, and has the potential to enhance student research activity in the Department/College.

Timeline: 1.5-3 years

### Part 4 (Educational Programs ONLY): Complete the CPE Program Review Rubric (attach to ERC Recommendation Report) and provide ERC Recommendation (Continue without Modification, continue with Modification, Needs further Review)

**ERC Recommendation:** Continue without modification

**Attach Brief Rationale (optional):**

See attached
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<td>Susan Noblitt, MT (ASCP) Med</td>
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<td>Eastern Kentucky University</td>
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| Jennifer Holland, MT (ASCP) PreAnalytics Coordinator |
| University of Kentucky Clinical Lab |
| Jaholl3@uky.edu |

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PART 2: EXECUTIVE SUMMARY

- Process and charge to the external review committee.

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The ERC used the unit’s self-studies as a starting point and:

- Examined the self-study support and appendices;
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- Identified additional strengths and recommendations for quality enhancement, and;
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The process involved ERC selection and assignment. Eight higher education faculty members and administrators from the College of Health Sciences and from other colleges within and outside the University of Kentucky served on the ERC. Dr. Cynthia Beeman, Associate Professor of Orthodontics in the College of Dentistry, served as Committee Chair. Collectively, the members of this Committee brought significant and diverse knowledge and experience about higher education and the health sciences disciplines to the review process. All members of the ERC participated in the review of the Clinical Sciences Department. Additionally, Committee members were assigned in pairs to review one of the four academic degree programs in the Department.

The Clinical Sciences Department and its academic programs submitted all self-studies and related documents to the UK Office of Planning and Institutional Effectiveness and the College of Health Sciences Dean in early May, 2016. These documents were reviewed, and permission was given for the Department and programs to proceed with the external review. The self-study reports completed by the Clinical Sciences Department and its academic degree programs included a summary of progress since the previous periodic review; overview of unit organization and functioning (policies and procedures); description of academic program offerings and student success; summary of the adequacy of human, physical, and financial resources; evidence of program quality and productivity; and contribution to college and university mission and priorities, such as the UK QEP, Diversity goals, and engagement. Committee members were asked to review the Department and unit self-study reports and appendices and any other documentation of interest prior to the site visit.

Medical Laboratory Science BHS External Review Committee Report
The ERC completed a site visit on November 3-4, 2016 and met with the CHS Dean and other administrative services units integral to the Department and its programs, the Department Chair and Division/Program Directors, faculty, staff, and students.

Following the visit, the Committee collaborated to produce a written report for the Clinical Sciences Department using the UK External Review Committee Recommendation Report Template. The template indicated that the report include a summary of Strengths, Weaknesses, Opportunities and Threats/Challenges related to centrality, competitive and comparative advantage, cost effectiveness, demand, quality and distinctiveness of the unit, along with a summary of Committee findings/results relative to its charge. Using data driven rationale for each recommended action, the report provides suggested strategies to achieve enhancements, recommended resources needed and timelines, as appropriate.

Ms. Noblitt and Holland reviewed the 2015 self-study report and associated recommendations prior to the two-day site visit. They prepared this report using the template described above. In addition, they completed the checklist document entitled: “UK External Review Committee Institutional Recommendation; CPE Program Review Rubric”.

- **Summary of major strengths, weaknesses, opportunities and challenges as each relates to centrality, competitive and comparative advantage, cost effectiveness, demand, and distinctiveness.**

- **Strengths of the Medical Laboratory Science BHS Program**

The strengths of the University of Kentucky Medical Laboratory Science Program as cited in the periodic program review were corroborated in the onsite review.

- The first strength is the fact that this is an undergraduate degree, in a high demand allied health career, that can be completed in 3.5 years.
- The second strength, not necessarily discussed in detail in this periodic program review, is the history and longevity of the UK MLS Program. In 1933, the Program, then called Medical Technology, was approved by the American Society of Clinical Pathology Board of Registry (ASCP)
- The re-establishment in 2012 of the MLS Program at the Center of Excellence in Rural Health(CERH) with a purpose of meeting the workforce needs of southeast Kentucky.
- The fourth strength is the expansion of practicum site partnerships over the last four to five years. The contributing factors to this expansion included focused efforts on developing clinical practicum sites throughout the Commonwealth of Kentucky and increased enrollment.
- The last strength is the development and launch of the MLT to MLS articulation online track for MLT to MLS students.

The External review committee recognizes and applauds the stated strengths of the MLS Program. The Medical Laboratory employers and the members of the laboratory professional committee have a high respect for the graduates and alumni of the UK MLS Program. The students interviewed during the site visit had high praise for their faculty. CHS Administrators, faculty and staff spoke with high respect for the Program and its faculty.

The unique configuration with traditional, CERH, and online aspects of the program presents the state of KY an opportunity to obtain a MLS education that ranks high with any MLS Program in the nation.
• **Areas of Concern**

While there are several areas of concern of the MLS Program, the **principal concern** is the cost effectiveness of this Program while continuing to meet the needs of the Commonwealth of Kentucky’s allied health workforce. The student laboratory courses within the MLS Program are financially burdensome, yet necessary to prepare the students with hands on experience. The committee recognizes that the cost of MLS education with expenditure for laboratory supplies and reagents could be considered high; this is problematic for all MLS programs. However, UK faculty is strongly aware of the cost, and has done an excellent job in keeping the cost as low as possible. With the needs of the Commonwealth for highly educated MLS members for the allied health care workforce the investment in funds is well worth the outcome.

The **second area of concern** is ensuring the continued growth and success of the MLT to MLS articulation online track. This program has great potential and will help offset some of the financial burden of the student laboratory component (as the MLT to MLS track does not require student laboratory courses). However, to ensure its longevity and success student enrollment needs to increase. The initial course development for the program is excellent. However, additional resources and possible outside course development expertise would facilitate the quick advancement of the program.

The **third area of concern** is the need to improve the applicant pool, retention and graduation rates of the MLS Program based at the Center of Excellence in Rural Health. While there have been measures taken such as developing relationships with UPIKE to improve the student pipeline, the applicant pool must be strengthened. Effectively marketing the MLS Profession and showcasing the opportunities for MLS degreed educations will broaden the applicant pool and enable the Program to be more selective for admission, thus far, the MLS faculty have done an excellent job obtaining students with the time and effort they can commit, however without committed resources for recruitment in that area this program could become stagnant.

The **fourth area of concern** is to promote the profession, and increase recruitment. Since 2012 the MLS Program has expanded its promotion and recruitment efforts as demonstrated in this periodic program review; however, additional efforts must be made, it is our understanding that a Full-time Practicum Coordinator position has been approved and we applaud that decision. The Program Director feels that this position could share in some of the efforts for recruitment. Currently the recruitment duties are shared among faculty and this is a major concern of the program and there is a need to have dedicated resources for promoting the options offered by the Program.

The **fifth area of concern** is to ensure continued efforts are made in the expansion and strengthening of practicum site partnerships. The committee recognizes that the program needs strong working relationships with the practicum sites and that the expansion and the strengthening of the practicum site partnerships have been obtained. With the newly acquired, not yet hired, Practicum Coordinator this position will be critical in meeting the program goals for growth. We recommend this effort be continued.

• **Summary of ERC findings and results relative to its charge.**

**Medial Laboratory Science (MLS) consistency to the Institution’s Mission and Consistency with State Goals**

The Medical Laboratory Science (MLS) Program states the following mission in their 2015 Periodic Program review. The Medical Laboratory Science (MLS) Program is to help the people of the Commonwealth of Kentucky and beyond to gain and retain the highest level of health care by educating individuals to become high quality medical laboratory science practitioners and
healthcare professionals. This mission statement along with the program vision and goals are consistent with the Department of Clinical Sciences Periodic review. Both statements are aligned with the University mission to improve lives through education, service and healthcare.

The Program demonstrates a strong, committed contribution to the state’s economic and social welfare goals. Various facets of the program have been designed that forward the state’s commitment.

The MLS Program contributes to this mission and goals by the increase in high-quality degree production, increased completion rate and high employment rate of graduates. This strong commitment is demonstrated by the pipeline with the Kentucky Community and Technical College System in the southeast area of the state. The MLS program offers a program at the Center of Excellence in Rural Health in Hazard and also has a student pipeline with Bluegrass Community and Technical College’s Biotechnology Program.

The redesigning of the Program curriculum with the incorporation of hybrid and online courses has increased the student pool, enhanced requirements, and student success. Fall of 2012 started a cohort of students at the Center of Excellence in Rural Health in Hazard. Fall of 2015 the first cohort of Medical Laboratory Technology (MLT) to MLS articulation students was started.

The MLS Program contributes to the financial needs of the students by providing specific loans and scholarships. An increase in educational attainment and quality of life in communities have been advanced by the tripling of clinical practicum rotation sites while building a stronger relationship with these sites and developing a practicum consortium with the MLS Program at Eastern Kentucky University. These efforts have increased the number of graduates that will lead directly and indirectly to the improved health care of Kentucky citizens.

The MLS Program aligns with statewide strategic implementation plan by the increased enrollment and degrees conferment in the STEM+H field. This alignment has shown an increased enrollment and degree conferment throughout the timeframe of the Periodic Program Review. The program maintains entry year employment rate of over 94% job placement. Those not placed entered the UK Physician Assistant Program or applied to medical school. The External MLS Review Committee complements the MLS Program on excellent their mission and consistency with the state goals. The committee will suggest strategies for enhancement later in this report.

Program Quality and Student Success - Assessment

The MLS Program’s student learning outcomes were revised due to the curricular change/major program revision in 2009-2012. This implementation started with the graduating class of 2012. The Program provides a chart of the student learning outcomes in the 2015 Periodic Review. The CHS Office of Assessment and the MLS faculty developed an action for evaluation each year. Data is collected, analyzed and submitted for feedback from the University-wide committee. The current MLS Student Learning Outcomes Assessment was provided in the 2015 Periodic Program Review.

In 2012-2013 the program evaluated the student outcome “students will demonstrate entry level knowledge for a medical laboratory scientist. The American Society of Clinical Pathology (ASCP) Board of Certification (BOC) annual summary report. Where the target outcome of less than the mean scaled score on the sub-test of the BOC were obtained, curriculum changes were made. The pass rate for the BOC pass rate and sub-test scores have increased since the implementation of the changes.

In 2013-2014 the program evaluated the student learning outcome “the students will evaluate clinical data and results by applying knowledge and skills gleaned from this program”. A pre-test (mock BOC exam) and a post-test (mock BOC exam) were given in MLS 470 Clinical Correlations
capstone course. Before 2012, this capstone course had not been given. From the students’ improvement from pre-test to post-test were benefiting from the curriculum presented in MLS 470 and no changes were warranted. However continuous monitoring was indicated.

2014-2015 the program evaluated the student learning outcome “students will exhibit entry level psychomotor and clinical skills for a medical laboratory scientist. Though the students met expectation on performance level, the faculty concluded that annual review of the practicum rotation checklist should be completed to stay ensure they are consistent and current. Also, in 2014-2015 the SLO “students will model the professional traits of an entry level healthcare practitioner” The outcomes were assed using the Affective Behavior evaluations. This was the first time this pro-am had analyzed the Affective Behavior. No change was warranted in the data collected, but the benchmark for the outcome will be changed from “All students to achieve satisfactory on the practicum affective behavior with 50% of the students achieving outstanding”.

The External MLS Committee feels that the assessment plan the MLS Program has developed provides insight into the student learning outcomes to document success and make program changes. The committee recommends that the program consider further developing to the assessment plan to include the collection of more quantitative outcome data. This data could make evaluating if the changes made to the program were successful much easier to document.

External Awards

The American Society of Clinical Pathology granted approval to the MLS program (then known Medical Technology) in 1933 making the program one of the oldest university based program in the United States.

The MLS Faculty has received numerous professional awards during the review period. The students/alumni have also received many awards. As well as a long list of students who have received merit based awards.

Average time and credits to degree

The average ESCH at the time of degree reflects many transfer students and students completing an MLS degree as a second Bachelor’s degree. Over a five-year period 30% of the students graduated with over 200 hours and two graduated with over 300 hours each. It should be noted that the hours were earned outside of what was required to complete the MLS degree.

The percent of the students from entry cohort graduated from the major average is over 87%.

Though the number of hours the students complete may seem high, the External Committee notes that it seems in line with other MLS programs throughout the country.

Employer satisfaction with graduates as measured by surveys

The employer satisfaction with graduates is measured by annual survey. The report states that the students were rated excellent to good with most employers reporting the students were excellent.

Even though the return of the survey has gone 30% to 75%, the External Committee recommends that the program try to increase the employer response.

Graduating students’ and alumni satisfaction with program

The MLS Exit (Graduate) Survey is mandatory therefore response rate is approximately 100%. The overall response is that the program is strong. The students are asked to rate instruction, interest in instruction, and interpersonal relationships with students. The overall rating of the program was 3.6 on a 4-point scale.
The External Review Committee praises the program for the results on the review. They also suggest that a review of alumni be done at a follow-up to the graduates’ response after five to ten years.

Job Placement

MLS students’ job placement is assessed on an annual basis. The average for the last five years has been over 94% with the last two years at 100%.

The job placement of students is stellar and the External Review Committee will state in the recommendation the increased numbers are an example of the need of employee in the field needs to meet with an increased number of graduates from the program.

Certification Exam pass rates

The five-year percent passing rate on the first attempt of the exam for the program is 83.4% with the national being 84.4%. The percent ultimately passing is 90.2% with the national being 79.4%. The pass rate both first time and ultimate rates of passing has increased after the curriculum change. The faculty statement that they should continue to focus attention to the trend of increasing scores.

Number of students enrolled and credit hour production

The number of students and the credit hour production has increased from 2010 to 2015. With the change of the curriculum in 2011, the number of required credit hours increased. Also, the number of students has more than doubled in the five years with increase in students on campus, the CERH program, and the online MLT to MLS.

The External MLS review committee recommends the program consider continued increase in the numbers of students while giving consideration to the resources available.

Number of Degrees conferred

The number of degrees conferred has increased as the number of successful students have completed the program and graduated. Since the selection process for students to be admitted to the program allows for high quality students the number of degrees should maintain and will likely increase.

The committee would recommend that the program continue to maintain their recruiting efforts and suggest that the use of outside marketing advice might be sought, additional recommendations to follow.

Program Access to Students

The program clearly demonstrates that it provides access for students beyond the reach of other KY institutions. The CERH program offers students in Hazard and the surrounding southeastern portion of the state access to education within their area. The MLT to MLS online program offers the ability for student to continue their Medical laboratory education while maintaining their present position in the laboratory to students within Kentucky and throughout the nation. The different configurations of the program efficiently provide access to student that other institutions cannot.

The committee would recommend the continuation of different routes of education that the program provides to the students of KY.

Program proactively seeks or engages in collaborative opportunities similar programs at other KY institution
The University of Kentucky and Eastern Kentucky University have a practicum consortium which has added in the efficient placement of students in their local areas and provides for the most effective approach of utilizing the hospital laboratory practicum positions in the area.

The UK MLS faculty are leaders in the Region IV area of American Society of Clinical Laboratory Science. Through the society they are instrumental in providing professional opportunities for the states MLS students through their collaborative efforts with other MLS educators and laboratory personnel.

The committee applauds the UK MLS program director for her insight in suggesting and developing the UK/EKU practicum consortium. A strong recommendation to the continuation of the consortium is recommended. The continued outstanding work with the state professional society is essential to maintaining the much-needed connection of the state MLS laboratory professionals.

Student credit hour per instructional faculty FTE
The program has a strong FTE production that increased throughout the period of the program review. With the increase of students this production should remain strong.

The committee would recommend the program continues their strong operations plan and proceed with developing their five-year strategic plan

Extramural funding
The program receives moneys from scholarship endowments and/or gifts made to the program. The program also receives cost reductions from vendors that waylay the expense of reagent and supplies needed for the program. The program is actively seeking funds for student financial needs for both campuses.

The committee recommends the continued seeking of outside funds while recognizing the limited time the faculty has to devote to fundraising with their other responsibilities. It should also be noted that obtaining extramural funding is limited for all MLS programs throughout the country.

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PART 3: UK EXTERNAL REVIEW RECOMMENDATION REPORT.

Immediate Recommendations (18-month Timeline)

The first recommendation, to address the cost effectiveness of the MLS Program, is to promote the online MLT to MLS articulation track and develop targeted recruitment strategies to increase student enrollment thereby making the Program more cost effective. It is the recommendation of the committee that growth goals cannot be met without dedicated resources for recruitment, either provide within The Program or as an extension from the College or University. To grow this
program in the measure the Program needs to grow, a dedicated resources needs to be meeting face to face with employers to help identify candidates already in the workplace.

The second recommendation, to assist the MLT to MLS track, is to assign the online coordinator responsibilities to the MLS faculty member with the most online instruction experience and the committee agrees with these recommendations and in doing so there needs to be protected time for this faculty to develop this program effectively.

The third recommendation, is to continue to develop the student pipeline at the CERH, by engaging nearby four-year institutions so that more second bachelor’s degree students can be supplemented into the applicant pool. Developing these pipelines will take an intentional effort. It is the recommendation of the committee that an additional resource be added at CERH solely for recruitment. The staff currently at CERH would be an excellent candidate for this role as this person is native to that area and is an MLS with connections to facilities and campuses.

The fourth recommendation is to increase awareness of the profession and overall recruitment into the Program and improve retention rates in general. The immediate need for promotion and marketing cannot be stated enough. The Commonwealth will soon be in a task force crisis related to workforce ready MLS graduates. Projections show that the state will need at least 791 new graduates over the next 9 years and the current 3 programs in the state (UK, EKU and Bellarmine) only produce 495. Our students of today and tomorrow need to be informed of these statistics. A degree in this profession can provide them with a stable future in the workforce. Immediate steps should be taken to engage resources at the College and/or University Student Affairs level to develop ideas and an implementation to improve awareness.

The fifth and last recommendation, is to continue to expand and strengthen practicum site partnerships and to hire the full-time practicum coordinator, at time of this review the position was approved but not yet hired again the committee strongly support the CHS administration decision to fund the full time practicum coordinator position.

Future Considerations (3-year Timeline)

MLS faculty members have discussed the possibility of increasing student enrollment on the Lexington campus and though it is not currently possible due to limited student laboratory space, limitation of a 20 seat IVT room, personnel, and practicum sites, the committee agrees that this expansion should be seriously considered.

Faculty members have also discussed additional expansion projects, such as developing an undergraduate-level medical microbiology course or a master’s degree program, and these discussions are ongoing. The committee agrees with the expansion projects discussed for future development. These expansion projects can only take place with providing support of resources of funds, space, faculty and staff.

Discussions of increasing research initiatives and projects are also a high priority of consideration for the next strategic plan. The committee agrees with the increased research initiatives and projects should be considered a priority, but such initiatives should not take away from the maintaining a high-quality MLS program.

The MLS Program Director along with faculty and staff endeavors to be a nationally recognized program for our high standard of training and high quality graduates.
Long Term Considerations (5-year Timeline)

As stated previously throughout the review, this committee strongly encourages The MLS Program to consider developing their 5-year Strategic Plan. Per review, this committee feels that to begin to meet the needs of the Commonwealth the Program would need to see the following Long Term goals met:

- Strong CERH class of >12 with 100% graduation and BOC pass rates equal to or higher than the Lexington Campus, recommend growing this program more toward second degree students, thus increasing the strength and dedication of the students.
- MLT to MLS articulation online track enrollment and graduation of 20+ per year.
- Growth in enrollment at the Lexington campus, being respectful of limited space, however should desire to see a strong applicant pool of >50 and a waitlist of 10 per year,

We strive, every day, to:

a. To graduate versatile medical laboratory scientists prepared to meet the workforce needs in the Commonwealth of Kentucky and the nation.

b. To graduate healthcare practitioners that demonstrates professionalism reflective of the highest ethical standard of the medical laboratory science profession.

c. To provide an educational foundation that can be advanced such as in the areas of administration, academia, advanced healthcare roles, industry and research.

The committee agrees with the endeavors to be nationally recognized program with high standards both in quality of training and graduates. The committee also would like to state the MLS Program director, faculty and staff is considered a highly recognized nationally program of today and we hope in the future as well.

Part 4 (Educational Programs ONLY): Complete the CPE Program Review Rubric (attach to ERC Recommendation Report) and provide ERC Recommendation (Continue without Modification, continue with Modification, Needs further Review)

ERC Recommendation: Continue without modification

Attach Brief Rationale (optional):

See attached
Please identify errors of fact in your unit (Dept; academic degree) report in the tables below. Your correction should be concise – full sentences are not necessary. Please remember that your corrections pertain to factual errors only; differences of opinion about recommendations or rankings should not be listed unless they involve a factual error.  (A sample is provided for you).

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<td>Those not placed entered the UK Physician Assistant Program or applied to medical school.</td>
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# UK External Review Committee Recommendation Report
## Master of Physicians Assistant Studies Program

### Program Information:

Unit Name: College of Health Sciences, Master of Physicians Assistant Studies (MSPAS)
Year of Program Review: 2015
Year of External Review: 2016
Name of Accreditation Agency & Last Accreditation visit (if applicable): Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), Last accreditation visit, 2009

**Submitted by:**

Terry Malone EdD,  
C. Darrell Jennings MD

**Submitted to:**
Cynthia Beeman DDS, PhD, Chair, External Review Committee

**Date Report is Submitted:** December 2, 2016
PART 2: EXECUTIVE SUMMARY

- **Process and charge to the external review committee.**

The University of Kentucky established a policy of regularly-scheduled self-study and review of all colleges and departments, academic degree programs, and administrative units. The purpose of the External Review Committee (ERC) is to provide the unit with additional perspectives and evaluation of the quality and effectiveness of the unit’s programs, services, resources, processes, and operations.

The ERC used the unit’s self-studies as a starting point and:

- Examined the self-study support and appendices;
- Confirmed the validity of the Report’s conclusions based on interviews with appropriate parties;
- Participated in the site visit and engaged in additional information-seeking, as necessary;
- Identified additional strengths and recommendations for quality enhancement, and;
- Prepared a written final report that briefly describes the ERC’s process and provides a data-driven rationale for each strength and recommendation.

The process involved ERC selection and assignment. Eight higher education faculty members and administrators from the College of Health Sciences and from other colleges within and outside the University of Kentucky served on the ERC. Dr. Cynthia Beeman, Associate Professor of Orthodontics in the College of Dentistry, served as Committee Chair. Collectively, the members of this Committee brought significant and diverse knowledge and experience about higher education and the health sciences disciplines to the review process. All members of the ERC participated in the review of the Clinical Sciences Department. Additionally, Committee members were assigned in pairs to review one of the four academic degree programs in the Department.

The Clinical Sciences Department and its academic programs submitted all self-studies and related documents to the UK Office of Planning and Institutional Effectiveness and the College of Health Sciences Dean in early May, 2016. These documents were reviewed, and permission was given for the Department and programs to proceed with the external review. The self-study reports completed by the Clinical Sciences Department and its academic degree programs...
included a summary of progress since the previous periodic review; overview of unit organization and functioning (policies and procedures); description of academic program offerings and student success; summary of the adequacy of human, physical, and financial resources; evidence of program quality and productivity; and contribution to college and university mission and priorities, such as the UK QEP, Diversity goals, and engagement. Committee members were asked to review the Department and unit self-study reports and appendices and any other documentation of interest prior to the site visit.

The ERC completed a site visit on November 3-4, 2016 and met with the CHS Dean and other administrative services units integral to the Department and its programs, the Department Chair and Division/Program Directors, faculty, staff, and students.

Following the visit, the Committee collaborated to produce a written report for the Clinical Sciences Department using the UK External Review Committee Recommendation Report Template. The template indicated that the report include a summary of Strengths, Weaknesses, Opportunities and Threats/Challenges related to centrality, competitive and comparative advantage, cost effectiveness, demand, quality and distinctiveness of the unit, along with a summary of Committee findings/results relative to its charge. Using data driven rationale for each recommended action, the report provides suggested strategies to achieve enhancements, recommended resources needed and timelines, as appropriate.

Drs. Malone and Jennings reviewed the 2015 self-study report and associated recommendations prior to the two-day site visit. They prepared this report using the template described above. In addition, they completed the checklist document entitled: “UK External Review Committee Institutional Recommendation; CPE Program Review Rubric”.

- **Summary of major strengths, weaknesses, opportunities and challenges as each relates to centrality, competitive and comparative advantage, cost effectiveness, demand, and distinctiveness.**

The University of Kentucky Master of Physicians Assistant Studies (MSPAS) consists of a 57 semester hour didactic and 38 semester hour, clinical education experience completed through a continuous 27-month sequence. The Program is offered at two campuses (Lexington and Morehead) using distance education with dedicated faculties in each location. The overall existing faculty numbers 9 with several staff support personnel at each location. The Program matriculates 40 students to Lexington and 16 to Morehead each January. It is externally accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) with a site visit scheduled for December 2016.

This program, MSPAS, is currently successful in fulfilling its primary professional educational mission. This success is evidenced by the last two graduating cohorts approximating the national average pass rate on the licensing exam, PANCE (UK 98% and 94% vs 95% and 96% National data), and the essentially 100% job placement rate.

The two campus approach (Lexington and Morehead) has enabled a significant additional cohort of approximately 16 to compliment the 40 students in Lexington to provide a graduating class of 56+/-, better fulfilling the healthcare needs of Kentucky.
The program previously sponsored a dual degree program jointly with the College of Pharmacy which is described as follows in the 2015-2016 Graduate School Bulletin, Page 221:

**Dual Degree Programs**

*The College of Pharmacy and the Division of Physician Assistant Studies offers a dual degree program which allows enrolled students to distinguish themselves while completing the Doctor of Pharmacy degree. The dual degree program requires additional formal application, admissions and course work. Students are eligible to apply for the Master of Science in Physician Assistant Studies (M.S.P.A.S.) following the second semester of the second professional year in Pharmacy with a minimum pharmacy GPA of 3.0, 1000 direct patient care contact hours, 50 PA shadowing hours, and additional pre-requisite courses. Two courses in the Pharmacy program provide 320 hours toward the direct patient care hours needed for application.*

- **Summary of ERC findings and results relative to its charge.**
  - **Areas of Strength**
    - This program is currently successfully fulfilling its educational mission. This is evidenced by the last two graduating cohorts approximating the national average licensing exam PANCE passing rates: (UK 98% and 94% vs 95% and 96% National data)
    - The program has an essentially 100% placement rate of recent graduates.
    - The two campus process (Lexington and Morehead) has enabled a significant additional cohort of approximately 16 to compliment the 40 students in Lexington to provide a graduating class of 56+/-, better fulfilling the healthcare needs of Kentucky.
  - **Areas of Challenge:**
    - Challenge: The 2015 self-study states this program is in revision and the site visit team was told no students were being accepted at this time. However as referenced above, the program is still listed in the Graduate Bulletin. This represents a challenge to the program in that the status of this joint program is unclear at the time of the site visit and is potentially confusing to students and academic advisors.
      - Recommendation (to be discussed in detail, Part 3): The status of the joint MSPAS-D.Ph. program should be clarified and all listings should be consistent so as to minimize confusion on the part of prospective students and academic advisors.
    - Challenge: There are several documentation items related primarily to accreditation standards that have been neglected over the last few years that will be potentially problematic for the upcoming accreditation site visit. Some specific examples are as follows:
      - 2010 Report - “It is important for each program to survey students, alumni, and others such as donors concerning program effectiveness”.
      - Page 21 CHS 2015 Self Study - No surveys of alumni were conducted ... No job placement information has been collected. ...
Recommendation (to be discussed in detail, Part 3): During the site visit this issue was discussed with Dr. Scott Black, Program Director who has already taken multiple steps to address this gap. Consequently, our recommendation is that Dr. Black’s efforts be supported with appropriate resources and time to complete this component of program documentation.

Challenge: As noted in the 2015 Self Study, page 9: “Many of the current concerns in the Program can be explained by faculty turnover, which in turn can be explained by a relative lack of leadership and organization.” During the site visit, interviews with staff, students, and faculty, confirmed the significant turnover of faculty in recent years compromising the continuity of activities within the program. The leadership issue has been addressed with the recruitment of Dr. Scott Black as Program Director. Faculty vacancies remain, but are being addressed. The self-study suggested consideration of the Clinical Title Series in recruitment of Faculty, but discussions during the site visit revealed significant differences of opinion regarding the relative merits of using clinical title series positions.

Recommendation (to be discussed in detail, Part 3): The leadership issue has been addressed with the recruitment of Dr. Scott Black. The remaining faculty vacancies should be addressed with attention to the need for near term stability and longer term continuity in program activities. Although controversial, the pros and cons of greater use of the Clinical Title Series should at least be discussed within the program.

### Part 3: UK External Review Recommendation Report

#### Data driven rationale for each recommended action

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### PART 3: UK EXTERNAL REVIEW RECOMMENDATION REPORT.

**Master of Physician Assistants Studies program:**

- **Areas of Strength**
  - This program is currently successfully fulfilling its educational mission. This is evidenced by the last two graduating cohorts approximating the national average licensing exam PANCE passing rates: (UK 98% and 94% vs 95% and 96% National data).
  - The program has an essentially 100% placement rate of recent graduates.
  - The two campus process (Lexington and Morehead) has enabled a significant additional cohort of approximately 16 to compliment the 40 students in Lexington to provide a graduating class of 56+/–, better fulfilling the healthcare needs of Kentucky.
• **Areas for Enhancement and Specific Recommendations**

  • **Recommendation:** The status of the joint MSPAS-DPh program should be clarified and all listings should be consistent so as to minimize confusion on the part of prospective students and academic advisors.

  • **Recommendation:** During the site visit the issue of appropriate follow-up of recent graduates was discussed with Dr. Scott Black, Program Director, who has already taken multiple steps to address this data. Consequently, our recommendation is that Dr. Black’s efforts be supported with appropriate resources and time to complete this component of program documentation. As discussed with Dr. Black, on-going assessments must be done to enable decision making to be made on data not just collected every 6 years in coordination with accreditation – Professional educational program assessment should be regular and informative to Program changes and enhancement.

  • **Recommendation:** The issue of previous lack of consistent leadership has been addressed with the recruitment and appointment of Dr. Scott Black. The remaining faculty vacancies should be addressed with attention to the need for near term stability and longer term continuity in program activities. These recruitments would be helpful in the near term if feasible. Although clearly controversial among Program faculty, the pros and cons of greater use of the Clinical Title Series should at least be discussed thoroughly within the program.

  • **Recommendation:** The Program faculty and leadership are encouraged to carefully consider in depth their discussed change in Program curricular length from 27 months to 24 months. This change places the program outside of the normal range of current standard benchmarks (UF - 27; WI - 24; Neb - 28; Iowa - 28; IN - 27 and OU - 27). The two primary sources of concern are the stated desire, 2015 self-study page 8, to add several additional areas of emphasis (sports medicine, public health, geriatrics, healthcare administration, basic/clinical/translational research) while also cutting curricular time and the fact that PANCE data have only approximated the national average the last two years and were below the average the previous 4. There seems to be significant potential risk implementing this possible change such that it warrants careful study before proceeding. At the time of the site visit, multiple faculty were in general agreement with this proposed note of caution and expressed a desire to discuss any reduction in curricular time thoroughly.

  • **Recommendation:** Although improving, the faculty should continue to carefully monitor their TCE’s as they have been below both the Department average as well as the College. Appropriate continuing education opportunities could be considered if the TCE’s don’t continue to improve.

  • **Recommendation:** The faculty must determine if joint programs or specific residencies are of value and are desired by employers. This information could be collected as part of the regular surveillance of employers regarding recent program graduate’s performance as discussed above. This feedback could be crucial in determining how to develop such options to best fulfill the needs of the students and possibly graduates.

  • **Recommendation:** If the Clinical Title Series is not considered appropriate for the MSPAS program and faculty members continue to be appointed primarily in the Special
Title Series, there will be an ongoing expectation of scholarship given the Research Intensive nature of the Institution. This expectation will need to be satisfied by submissions of grants, performance of appropriate publications, and regional/national presentations by those that have significant research effort on their DOE.

**Part 4 CPE Program Review Rubric**

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