FOCUSED REPORT & ADDENDUM

FOR THE SOUTHERN ASSOCIATION OF COLLEGES AND SCHOOLS
COMMISSION ON COLLEGES

February/March 2018
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The University of Louisville response to the SACSCOC Off-Site Review was submitted as a Focused Report in February 2018. Each report lists the standards identified as non-compliant in the off-site review and the university response.

The addendum was added to UofL’s Focused Report as required by SACSCOC because the new Principles of accreditation were adopted in 2018 prior to the completion of the reaffirmation process.

For more information go to [http://louisville.edu/oapa/uofl-institutional-accreditation](http://louisville.edu/oapa/uofl-institutional-accreditation).
2.7.4

Coursework for Degrees

The institution provides instruction for all course work required for at least one degree program at each level at which it awards degrees. If the institution does not provide instruction for all such course work and (1) makes arrangements for some instruction to be provided by other accredited institutions or entities through contracts or consortia or (2) uses some other alternative approach to meeting this requirement, the alternative approach must be approved by the Commission on Colleges. In both cases, the institution demonstrates that it controls all aspects of its educational program. (See Commission policy “Core Requirement 2.7.4: Documenting an Alternative Approach.”)

(Note: If an institution does not offer all course work for at least one degree at each degree level, it must request approval and provide documentation for an alternative approach that may include arrangements with other institutions. In such cases, the institution must submit information requested in Commission policy, “Core Requirement 2.7.4: Documenting an Alternate Approach.” This information should be submitted as part of the Compliance Certification.)

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The documentation provided was not sufficient to demonstrate compliance with this standard. The institution provided no direct evidence that it provides instruction for at least one degree program at each level for which it awards degrees. Instead, in its response to CS 2.7.4, the institution asserted, but did not provide evidence, that its “annual course offerings are sufficient to completely offer academic programs at all authorized degree levels.” The institution provided a document, “Review of Coursework by Degree Level” that states that an internal review of five degrees found that the university did offer sufficient courses during 2014-2015 to satisfy this requirement. This document did not provide the specific data or evidence used by the institution to arrive at this conclusion. Further, the institution did not provide copies of transcripts or other records demonstrating that students had completed all degree requirements using only courses offered by the institution for any of these programs.

The “Review of Coursework by Degree Level.” document discussed five degrees including the A.A. in Paralegal Studies, the B.A./B.S. in Communications, the MS in Chemical Engineering, the Ph.D. in English, and the D.M.D. in Dentistry. For the A.A., M.S., Ph.D., and D.M.D. programs, the institution discussed the totality of the degree course requirements and provided a statement to the effect that the university did offer sufficient courses during 2014-2015 to satisfy this requirement. This document did not provide the specific data or evidence used by the institution to arrive at this conclusion. Further, the institution did not provide copies of transcripts or other records demonstrating that students had completed all degree requirements using only courses offered by the institution for any of these programs.

For the B.A./B.S. in Communications, the institution only provided a discussion of the requirements for the major and an assertion that “...required and elective course [sic] for both the BA and BS degrees were offered by The institution.” The institution did not discuss its general education and lower division course requirements for the B.A./B.S., and because of that it is not clear whether the quote above applies to these courses or whether the institution was only referring to the major course requirements discussed. The institution did not provide data or transcripts to indicate that it provided all instruction needed to complete the B.A./B.S. in Communications degree.
Judgment
☐ Compliance  ☐ Partial Compliance  ☐ Non-Compliance  ☐ Not Applicable

Narrative

The University of Louisville is accredited by the Southern Association of College and Schools Commission on Colleges to award associate, bachelor, master, specialist, doctoral, and first-professional degrees (D.M.D., J.D., M.D.).

UofL controls all aspects of its educational programs and provides instruction for the degrees it offers, including instruction for general education and lower division coursework. UofL provides all of the coursework required for at least one degree program at each of the levels at which it awards degrees.

A schedule of the courses offered by the university going back to Spring 2000 is available on the university’s website [1]. Course descriptions can be accessed through the online Schedule of Courses by clicking on the course listing. Program requirements and course descriptions are also available in other online formats:

- Undergraduate Catalog [2]
- Graduate Catalog [3] (course descriptions for graduate courses are accessed through the online Schedule of Courses)
- School of Dentistry Bulletin [4]
- School of Medicine Bulletin [5]
- School of Law Student Handbook [6a] [6b].

The documentation provided below demonstrates that the university provides all instruction for at least one program at each level of degree offered by the university. For each program, we have provided a transcript from a student who received a degree from that program at UofL, the program curriculum from the appropriate student catalog, and course schedules showing that the courses were offered in the years that they appear on the transcript. For the associate and bachelor degrees, the course schedules also include course listings for the general education and lower division coursework applied toward the degree.

General Education

The university offers all general education course work needed to meet its general education requirements. The online Schedule of Courses has a drop down window that allows students to search by general education category [7a].

- UofL General Education Requirements [7b]
  http://louisville.edu/provost/ger/ger-preface
- Sample--General Education Course Offerings [7c]
  This table shows one year of UofL General Education courses offered at UofL. The list in this table was extracted from the online Schedule of Courses.
  https://htmlaccess.louisville.edu/classSchedule/setupSearchClassSchedule.cfm

Paralegal (AA) (associate degree)

- Student Transcript [8a]
  The coursework applied toward the AA degree is highlighted in the transcript, including general education and A&S programmatic requirements applied toward the degree.
- Program Curriculum [8b]
  The courses from the student transcript that were applied to the general education, A&S programmatic, and AA major requirements are highlighted in this document.
- Courses from the Transcript Offered at UofL [8c]
  This table shows that the courses applied toward the degree in the transcript were offered at UofL during the semester the student completed them. The courses in the table were extracted from the UofL online Schedule of Courses.

Communication (BA) (bachelor degree)
- Student Transcript [9a]
- Communication Program Curriculum [9b]
  The courses appearing in the student transcript that were applied to the general education, A&S programmatic, and Communication major requirements are highlighted in this document.
- Courses from the Transcript Offered at UofL [9c]
  This table shows that the courses applied toward the degree in the transcript were offered at UofL during the semester the student completed them. The course listings in the table were extracted from the UofL online Schedule of Courses.

Chemical Engineering (MS) (master degree)
- Student Transcript [10a]
- Program Curriculum [10b]
  The courses from the student transcript that were applied to the elective components of the degree are highlighted in this document.
- Courses from the Transcript Offered at UofL [10c]
  This table shows that the courses applied toward the degree in the transcript were offered at UofL during the semester the student completed them. The course listings in the table were extracted from the UofL online Schedule of Courses.

Educational Leadership (EdS) (specialist degree)
- Student Transcript [11a]
- Program Curriculum [11b]
- Courses from the Transcript Offered at UofL [11c]
  This table shows that the courses applied toward the degree in the transcript were offered at UofL during the semester the student completed them. The course listings in the table were extracted from the UofL online Schedule of Courses. Please note that in the transcript, the student’s work toward the EdS degree began in Fall 2014.

Rhetoric and Composition (PhD) (doctoral degree)
- Student Transcript [12a]
- Program Curriculum [12b]
  The courses from the student transcript that were applied to the elective components of the degree are highlighted in this document.
- Courses from the Transcript Offered at UofL [12c]
  This table shows that the courses applied toward the degree in the transcript were offered at UofL during the semester the student completed them. The course listings in the table were extracted from the UofL online Schedule of Courses.

Dentistry (DMD) (first professional degree)
- Student Transcript [13a]
SUMMARY

UofL is in compliance with Core Requirement 2.7.4. The University of Louisville is accredited by the Southern Association of College and Schools Commission on Colleges to award associate, bachelor, master, specialist, doctoral, and first-professional degrees (D.M.D., J.D., M.D.). Documentation has been provided to demonstrate that the university provides all instruction (including general education and lower division coursework) for at least one degree program at each of the levels at which it awards degrees.

[1] Online Schedule of Courses
2_7_4_fn01.pdf
https://htmlaccess.louisville.edu/classSchedule/setupSearchClassSchedule.cfm

[2] Undergraduate Catalog
2_7_4_fn02.pdf

[3] Graduate Catalog
2_7_4_fn03.pdf

2_7_4_fn04.pdf

[5] School of Medicine Bulletin
2_7_4_fn05.pdf

[6] Law School

[6a] Law School Student Handbook
2_7_4_fn06a.pdf

[6b] Law School Course Catalog
2_7_4_fn06b.pdf
http://louisville.edu/law/academics/academics/course-catalog-pdf

[7] General Education

[7a] Online Schedule of Courses—Search by General Education Category
2_7_4_fn07a.pdf

[7b] UofL General Education Requirements
2_7_4_fn07b.pdf

[7c] General Education Course Offerings
2_7_4_fn07c.pdf
[8] Paralegal (AA)

[8a] Paralegal Program Student Transcript (AA)
2_7_4_fn08a.pdf

[8b] Paralegal Program Curriculum (AA)
2_7_4_fn08b.pdf

[8c] Courses from the Transcript Offered at UofL (AA)
2_7_4_fn08c.pdf

[9] Communication (BA)

[9a] Communication Program Student Transcript (BA)
2_7_4_fn09a.pdf

[9b] Communication Program Curriculum (BA)
2_7_4_fn09b.pdf

[9c] Courses from the Transcript Offered at UofL
2_7_4_fn09c.pdf

[10] Chemical Engineering (MS)

[10a] Chemical Engineering Program Student Transcript (MS)
2_7_4_fn10a.pdf

[10b] Chemical Engineering Program Curriculum (MS)
2_7_4_fn10b.pdf

[10c] Courses from the Transcript Offered at UofL (MS)
2_7_4_fn10c.pdf


[11a] Education Leadership Program Student Transcript (EdS)
2_7_4_fn11a.pdf

2_7_4_fn11b.pdf

[11c] Courses from the Transcript Offered at UofL (EdS)
2_7_4_fn11c.pdf

[12] Rhetoric and Composition (PhD)

[12a] Rhetoric and Composition Program Student Transcript (PhD)
2_7_4_fn12a.pdf

[12b] Rhetoric and Composition Program Curriculum (PhD)
2_7_4_fn12b.pdf

[12c] Courses from the Transcript Offered at UofL (PhD)
2_7_4_fn12c.pdf
[13] Dentistry (DMD)

[13a] Dentistry Program Student Transcript (DMD)
2_7_4_fn13a.pdf

[13b] Dentistry Program Curriculum (DMD)
2_7_4_fn13b.pdf

[13c] Courses from the Transcript Offered at UofL (DMD)
2_7_4_fn13c.pdf
2.11.1

Financial Resources

The institution has a sound financial base and demonstrated financial stability to support the mission of the institution and the scope of its programs and services.

The member institution provides the following financial statements: (1) an institutional audit (or Standard Review Report issued in accordance with Statements on Standards for Accounting and Review Services issued by the AICPA for those institutions audited as part of a systemwide or statewide audit) and written institutional management letter for the most recent fiscal year prepared by an independent certified public accountant and/or an appropriate governmental auditing agency employing the appropriate audit (or Standard Review Report) guide; (2) a statement of financial position of unrestricted net assets, exclusive of plant assets and plant-related debt, which represents the change in unrestricted net assets attributable to operations for the most recent year; and (3) an annual budget that is preceded by sound planning, is subject to sound fiscal procedures, and is approved by the governing board.

Audit requirements for applicant institutions may be found in the Commission policy entitled “Accreditation Procedures for Applicant Institutions.”

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

A review of audited financial statements for FY 2015, FY 2014, FY 2013, and FY 2012, other financial documentation, and 2016 bond rating letters from Moody’s and Standard & Poor’s indicate the institution has a sound financial base and demonstrated financial stability; however, the institution was unable to provide audited financial statements and a management letter for the year ended June 30, 2016.

BOND RATINGS

Per bond ratings published in February 2016, Moody’s affirmed The institution’s Aa3 rating with a stable outlook, and Standard & Poor’s affirmed its AA- rating with a stable outlook. These independent ratings provide its stable enrollment, strong research presence, and strong financial profile.

AUDITED FINANCIAL STATEMENTS AND MANAGEMENT LETTER

The University’s financial statements are audited annually by an independent audit firm (Crowe Horwath LLP for FY 2015 and BKD LLP for earlier years). The University received an unqualified opinion for FY 2015, FY 2014, FY 2013, and FY 2012, the most recent audit provided. The FY 2016 audited financial statements and management letter were not available for review by the Committee.

STATEMENTS OF UNRESTRICTED NET POSITION

The required Statements of Unrestricted Net Position were presented for FY 2012 through FY 2015. Unrestricted net position decreased from $67.6 million in FY 2012 to $12.3 million in FY 2015 (81.8% decrease); however net position did grow by $7.9 million in FY 2015.

ANNUAL BUDGET

The institution’s annual operating budget is preceded by sound financial planning linked directly to the strategic plan “2020 Plan: Making it Happen”. A rigorous internal process is established to provide a sound basis for budget allocations, including review and opportunity for input from a broad constituency of administration, faculty, staff, and students. The operating budget is reviewed and approved by the Board of Trustees annually. A scorecard of goals is maintained and updated regularly, with budget allocations and results as a key component of the evaluation process.
Judgment
☒ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) has a sound financial base and demonstrated financial stability to support the mission of the institution and the scope of its programs and services. Since the submission of the Compliance Certification Report in September 2016, the university has completed two sets of audited financial statements (Fiscal years: 2015-2016 and 2016-2017), which are provided in response to the off-site committee report. The financial statements include the management letters required by SACSCOC.

Board Approval of the FY 2015-2016 Audited Financial Statements

The UofL Board of Trustees voted to accept the final financial statements for the period ending June 30, 2016, at their monthly meeting on November 29, 2016 [1]. The Auditor’s Report and Financial Statements for the University of Louisville and Affiliated Corporations approved by the board reflect the fiscal years (FY) ended June 30, 2016 and 2015 [2].

Board Approval of the FY 2016-2017 Audited Financial Statements

The University of Louisville (UofL) Board of Trustees voted to accept the final financial statements for the period ending June 30, 2017, at their monthly meeting on October 18, 2017 [3]. The Auditor’s Report and Financial Statements for the University of Louisville and Affiliated Corporations approved by the board reflect the fiscal years ended June 30, 2017 and 2016 [4].

Financial Statement Highlights

A comparison of the FY 2016-2017 and FY 2015-2016 audited financial statements indicate the university’s financial position remains strong.

As of June 30, 2017 [5]:

- Total Net Position increased $28.7 million from prior year
- Unrestricted Net position increased from a deficit $6.9 million in FY 16 to a positive $2.7 million for FY 17
- Total Assets of $1.3 billion
- Total Liabilities of $495 million
- Ratio of 2:1 – of assets to liabilities signals a strong balance sheet

The audited financial statements letter for FY 2016-17 was issued by Crowe Horwath, LLP on October 19, 2017, and included a management letter [6]. These financial statements include an unqualified opinion from Crowe Horwath, LLP, the university’s independent auditors.

Bond Ratings

Moody’s [7] and Standard & Poor’s [8] downgraded the university’s debt in December of 2017 to A3 negative outlook and A+ stable outlook, respectively. Both independent rating agencies consider the institution’s debt to be at an investment grade quality. The downgrade was driven by its relatively low liquidity coupled with a negative outlook on appropriations from the Commonwealth of Kentucky and changes in governance over recent
years. The overall scope of university operations, cumulative growth, and strong brand recognition are considered strengths of the institution by the independent rating agencies.

SUMMARY

UofL has a consistent trend of financial health and stability that supports the university mission and the scope of its programs and services. Through its budget and planning process UofL has prioritized needs and adequately appropriated resources to meet those needs. The university continues to receive support from governmental and private sources for sponsored programs, grants, and contracts. Revenue from gifts and endowments in addition to general funds support many ongoing programs at the university, including teaching, research, and public service activities; intercollegiate athletics; and financial aid for the students.

[1] Board of Trustees Recommendation dated November 29, 2016 to approve the Audited Financial Statements for fiscal year ending June 30, 2016 (Fiscal Year 2015-2016)
2_11_1_fn01.pdf

2_11_1_fn02.pdf

2_11_1_fn03.pdf

2_11_1_fn04.pdf

2_11_1_fn05.pdf

2_11_1_fn06.pdf

[7] Moody’s Bond Rating for the University of Louisville – December 2017
2_11_1_fn07.pdf

[8] Standard & Poor’s Bond Rating for the University of Louisville – December 2017
2_11_1_fn08.pdf
2.11.2

Physical Resources

The institution has adequate physical resources to support the mission of the institution and the scope of its programs and services.

SACSCOC OFF-SITE COMMITTEE COMMENTS

The institution consists of three campuses: a 409 acre Belknap Campus that houses eight of the institution’s twelve colleges and schools, a 62 acre Health Sciences Center, and a 235 acre Shelby Campus that houses several centers and institutes.

A number of facilities planning and evaluation processes are in place. The institution has a master plan for each of the three campuses; however the Health Sciences Center master plan has not been updated since 2006. The most recent update for the Belknap and the Shelby campus was published in 2009. A number of projects identified as needs in the master plans have been completed or are underway.

The Kentucky Council on Postsecondary Education (CPE) routinely conducts an assessment of space needs for all State public institutions. The most recent report was published in 2014, using 2012 data for the base year. The CPE report concluded that there was a 21% overall space deficit, or over 597,000 ASF, required for the institution to meet benchmark guidelines. These deficits were particularly acute for research laboratories (74% deficit, over 357,000 ASF), teaching laboratories (58% deficit, over 53,000 ASF), and support space (78%, over 63,000 ASF). The institution presented a summary of the CPE assessment, however, information about how the deficits were calculated and whether the assessment was a comprehensive review of all University facilities was not presented. No information about the potential capital costs to rectify the space deficit was presented. The institution lists a number of projects completed based on the 2009 Belknap campus master plan and describes classroom renovations accomplished in many buildings subsequent to 2010; however, the Off-Site Reaffirmation Committee could not determine dates of completion for most projects, and could not determine the impact of completed projects on the space deficits indicated in the CPE assessment.

Judgment

☑ Compliance  ☐ Partial Compliance  ☐ Non-Compliance  ☐ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Core Requirement 2.11.2. UofL has adequate physical resources to support the mission of the institution and the scope of its programs and services.

UofL Mission: The University of Louisville pursues excellence and inclusiveness in its work to educate and serve its community through: 1) teaching diverse undergraduate, graduate, and professional students in order to develop engaged citizens, leaders, and scholars, 2) practicing and applying research, scholarship and creative activity, and 3) providing engaged service and outreach that improve the quality of life for local and global communities. The University is committed to achieving preeminence as a nationally recognized metropolitan research university.
Off-site Committee Feedback

The institution lists a number of projects completed based on the 2009 Belknap campus master plan and describes classroom renovations accomplished in many buildings subsequent to 2010; however, the Off-Site Reaffirmation Committee could not determine dates of completion for most projects, and could not determine the impact of completed projects on the space deficits indicated in the CPE assessment.

No information about the potential capital costs to rectify the space deficit was presented.

UofL Strategic Planning and Campus Master Planning

The University of Louisville has several processes for physical resource planning, including strategic planning, campus master plans, third-party reviews, and required Kentucky Council on Postsecondary Education (CPE) reporting.

The university’s current strategic plan, the 2020 Plan: Making it Happen [1], was approved by the Board of Trustees in 2008 and provides a structure for setting university goals and initiatives. The goals of the university’s 21st Century Initiative [2], started in 2012, are overlaid onto the 2020 Plan and provide further focus for accomplishing the 2020 Plan. The UofL Campus Master Plans are aligned with the goals of the 2020 Plan and the 21st Century Initiative.

The master planning process is broad in nature and includes many individuals from the university, community, and Board of Trustees. The President and the Board of Trustees always review and approve campus master plans and any revisions. Periodic updates (typically every 5-10 years as needed due to changing priorities or climate) are made to the master plans in order to address new university initiatives or to align with the university’s mission. The master plans were updated for the Belknap [3] and Shelby [4] campuses in 2009 and the Health Sciences Campus (HSC) in 2007 [5]. The HSC Master Plan is currently undergoing an update but has not received final approval.

In April 2016, the university hired a new Associate Vice President for Facilities Management and consolidated University Planning, Design and Construction; Physical Plant; and Environmental Health and Safety under his responsibility. Leading the development of a new university-wide campus master plan and future Six-Year (Agency) Capital Plans (see below) now falls under Facilities Management.

The campus master plans provide a conceptual framework for various areas of the Belknap, HSC, and Shelby campuses, including the development of additional research facilities. The master plans align with the 2020 Plan goals of increasing research FTEs and funding (Theme 2, Research, Scholarship, & Creative Activity), as well as the 21st Century Initiative goal to increase research awards (Revenue Enhancement, Goal 4).

The 21st Century Initiative includes proposals for a new classroom building on the Belknap Campus (to be completed in 2018), renovation of the Ekstrom Library (completed), increased housing options (in progress), the renovation of the Student Activity Center (in progress), and a proposed new classroom building for the Health Sciences Campus.

Agency Capital Plan

Every two years (in the odd-numbered years) the university develops an agency capital plan [6] that includes funding requests for new construction projects, renovations, and capital renewal (deferred maintenance) for existing facilities. The plan, which is a requirement of all state agencies, including public universities, covers six fiscal years and coincides with the state’s operating and capital budget development processes. The capital plan is approved by
the President and Board of Trustees and is submitted to the Kentucky Council on Postsecondary Education (CPE). It becomes the basis for CPE’s capital recommendation for the upcoming biennium. In turn, CPE submits its recommendation to the governor for inclusion in his version of the proposed capital budget.

The university has just completed the development of its 2018 – 2024 Capital Plan. The capital plan was accomplished through a new Capital Plan Development Committee that included the participation of leadership from Facilities Management, the Office of the Provost, the Office of the Executive Vice President for Health Affairs, the Office of the Executive Vice President for Research and Innovation, Deans for three colleges, the Chief Operating Officer, the Chief Technology Officer, Athletics, Faculty and Staff Senates, and the Student Government Association. During the development of the 2018 – 2024 Capital Plan many factors were taken into consideration, including, but not limited to, additional space requirements, student enrollment trends, sponsored research trends, the physical condition of the facilities portfolio, funding, and fund-raising possibilities. The plan includes over 80 high-priority projects totaling $1.4 billion (including projects that address space needs), which the group collectively prioritized prior to review and approval by the president and Board of Trustees. The university also testified to a legislative committee about the priorities contained in this capital plan.

**University Capital Projects since 2009**

A substantial number of capital projects have occurred in alignment with master plans to affect the university’s assignable square footage. Since 2009, as part of its strategic planning UofL has completed several construction and renovation projects. Table 1 lists university projects with a cost of $500,000 or higher by campus and provides the cost of each project and the funding source.

**Table 1. University Capital Projects Since 2009**

<table>
<thead>
<tr>
<th>Projects on Belknap Campus</th>
<th>Fund Source</th>
<th>Cost</th>
<th>Date(s)</th>
<th>Aligned with Belknap Master Plan?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Academic Facilities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business School Addition *</td>
<td>Private</td>
<td>$3.4M</td>
<td>2011</td>
<td>Yes</td>
</tr>
<tr>
<td>Belknap Classroom Building Construction (in progress)</td>
<td>State</td>
<td>$80.56M</td>
<td>2018</td>
<td>Yes</td>
</tr>
<tr>
<td>A&amp;S Classroom Renovation</td>
<td>University</td>
<td>$1.5M</td>
<td>2015</td>
<td>No</td>
</tr>
<tr>
<td>Ekstrom Library 1&lt;sup&gt;st&lt;/sup&gt; floor Renovation</td>
<td>University</td>
<td>$2.2M</td>
<td>2016</td>
<td>No (Project included in 21&lt;sup&gt;st&lt;/sup&gt; Century Strategic Plan)</td>
</tr>
<tr>
<td>Ekstrom Library 3&lt;sup&gt;rd&lt;/sup&gt; floor Renovation</td>
<td>University</td>
<td>$2.8M</td>
<td>2017</td>
<td>No (Project included in 21&lt;sup&gt;st&lt;/sup&gt; Century Strategic Plan)</td>
</tr>
<tr>
<td><strong>Research Facilities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Belknap Science and Engineering Research Park Infrastructure</td>
<td>Transportation/Private</td>
<td>$31.0M</td>
<td>2015</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Student Services and Housing</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Ville Grill Construction *</td>
<td>Dining Services</td>
<td>$3.5M</td>
<td>2010</td>
<td>Yes</td>
</tr>
<tr>
<td>University Tower Apartments Renovation</td>
<td>Housing</td>
<td>$800K</td>
<td>2010</td>
<td>Yes</td>
</tr>
<tr>
<td>Student Recreation Center</td>
<td>Student Fees/Private</td>
<td>$37.5M</td>
<td>2013</td>
<td>Yes</td>
</tr>
<tr>
<td>Project Description</td>
<td>Project Fund Source</td>
<td>Cost</td>
<td>Date(s)</td>
<td>Aligned with HSC Master Plan?</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td>--------------------------------------</td>
<td>------------</td>
<td>---------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>Student Activity Center Renovation &amp; Expansion (in progress)</td>
<td>Student Fees/Private Partnership</td>
<td>$38.5M</td>
<td>2018</td>
<td>Yes</td>
</tr>
<tr>
<td>Stansbury Park Housing University Pointe [532 beds]</td>
<td>Public-Private Partnership</td>
<td>N/A</td>
<td>2017</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Campus Auxiliary Services, Support and Beautification**

<table>
<thead>
<tr>
<th>Project Description</th>
<th>Project Fund Source</th>
<th>Cost</th>
<th>Date(s)</th>
<th>Aligned with HSC Master Plan?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stevenson Hall Renovation</td>
<td>University</td>
<td>$1.0M</td>
<td>2011</td>
<td>Yes</td>
</tr>
<tr>
<td>Eastern Parkway Beautification</td>
<td>Transportation</td>
<td>$7.9M</td>
<td>2010</td>
<td>Yes</td>
</tr>
<tr>
<td>Third and Eastern Parkway Gateway</td>
<td>Transportation/University</td>
<td>$2.5M</td>
<td>2011</td>
<td>Yes</td>
</tr>
<tr>
<td>Freedom Park Development</td>
<td>Transportation/Private</td>
<td>$2.0M</td>
<td>2011</td>
<td>Yes</td>
</tr>
<tr>
<td>North Entrance Improvements</td>
<td>Transportation/Private</td>
<td>$2.1M</td>
<td>2012</td>
<td>Yes</td>
</tr>
<tr>
<td>Oval Driveway Improvements</td>
<td>Transportation</td>
<td>$2.3M</td>
<td>2012</td>
<td>Yes</td>
</tr>
<tr>
<td>Storm Water Improvement Projects</td>
<td>Metropolitan Sewer District</td>
<td>$900K</td>
<td>2012/13</td>
<td>No</td>
</tr>
<tr>
<td>Floyd Street Project (3rd phase – planning stage)</td>
<td>Transportation/Private</td>
<td>$22.5M</td>
<td>2016</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Athletic Facilities**

<table>
<thead>
<tr>
<th>Project Description</th>
<th>Project Fund Source</th>
<th>Cost</th>
<th>Date(s)</th>
<th>Aligned with HSC Master Plan?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Papa John’s Cardinal Stadium Expansion – In progress</td>
<td>University of Louisville Athletic Association (ULAA)</td>
<td>$77.1M – East Expansion, $62.3M – in progress</td>
<td>2010 &amp; new project underway</td>
<td>No</td>
</tr>
<tr>
<td>Baseball Stadium Expansion</td>
<td>Private/ULAA</td>
<td>$4.2M</td>
<td>2013</td>
<td>No</td>
</tr>
<tr>
<td>Softball Stadium Expansion</td>
<td>Private/ULAA</td>
<td>$3.0M</td>
<td>2014</td>
<td>No</td>
</tr>
<tr>
<td>Soccer Stadium Construction</td>
<td>Private/ULAA</td>
<td>$17.0M</td>
<td>2014</td>
<td>Yes</td>
</tr>
<tr>
<td>Athletics Academic Center Construction</td>
<td>Private/ULAA</td>
<td>$16.2M</td>
<td>2016</td>
<td>No</td>
</tr>
<tr>
<td>Humana Gym Renovation</td>
<td>Private/ULAA</td>
<td>$4.2M</td>
<td>2013</td>
<td>No</td>
</tr>
</tbody>
</table>

*Project ASF included in CPE Space Study*


**Projects on Health Sciences Campus (HSC)**

<table>
<thead>
<tr>
<th>Project Description</th>
<th>Project Fund Source</th>
<th>Cost</th>
<th>Date(s)</th>
<th>Aligned with HSC Master Plan?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Tower 7th Floor Renovation</td>
<td>Federal</td>
<td>$500K</td>
<td>2010</td>
<td>Yes</td>
</tr>
<tr>
<td>Dental School Expansion/Renovation</td>
<td>University</td>
<td>$44.9M</td>
<td>2011</td>
<td>Yes</td>
</tr>
<tr>
<td>Kornhauser Library Renovation</td>
<td>University</td>
<td>$600K</td>
<td>2014</td>
<td>Yes</td>
</tr>
<tr>
<td>HSC Instructional Bldg. Renovation</td>
<td>University</td>
<td>$8.6M</td>
<td>2014</td>
<td>Yes</td>
</tr>
<tr>
<td>K-wing Classrooms Renovation</td>
<td>University</td>
<td>$1.1M</td>
<td>2015</td>
<td>No</td>
</tr>
</tbody>
</table>

**Research Facilities**

<table>
<thead>
<tr>
<th>Project Description</th>
<th>Project Fund Source</th>
<th>Cost</th>
<th>Date(s)</th>
<th>Aligned with HSC Master Plan?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baxter 1 Cleanroom Renovation</td>
<td>Private</td>
<td>$600K</td>
<td>2014</td>
<td>No</td>
</tr>
<tr>
<td>HSC Imaging Suite Renovation</td>
<td>Federal</td>
<td>$5.6M</td>
<td>2012</td>
<td>No</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) 4th Floor Renovation – Phase 1</td>
<td>University/Private</td>
<td>$600K</td>
<td>2012</td>
<td>Yes</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) 4th Floor Renovation – Phase 2/3</td>
<td>Private/Clinical</td>
<td>$600K</td>
<td>2013</td>
<td>Yes</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) 4th Floor South Renovation – Phase 4</td>
<td>Clinical</td>
<td>$700K</td>
<td>2013</td>
<td>Yes</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) 4th Floor Renovation – Phase 5</td>
<td>Clinical</td>
<td>$705K</td>
<td>2016</td>
<td>Yes</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) Masonry Restoration</td>
<td>Clinical/University</td>
<td>$1.4M</td>
<td>2018</td>
<td>Yes</td>
</tr>
</tbody>
</table>
The university completed a number of research-related projects during this timeframe. The Belknap Campus Master Plan identified several specific areas on campus for additional research facilities: East Campus (south of Hahn Street) and South Campus ("Belknap Research Park") areas [7]. Both of these sites required demolition and removal of existing buildings and structures as an initial phase to their development. The university completed this demolition work in 2014 for the East Campus location and in 2012 for the South Campus location. In addition, the university partnered with the Commonwealth of Kentucky to complete $25 million in substantial infrastructure work on the South Campus site, including the extension of South Brook Street that connects to 3rd Street South and provides vehicular access to the large parcel.

The Health Sciences Master Plan identified substantial improvements and additions to the research infrastructure on the HSC campus, including the construction of six new research buildings and renovations to several existing facilities [8]. In alignment with this plan, the university completed substantive renovations to several floors in the Medical-Dental Research Building (2012-2013), as well as renovations to the MRI imaging suite (2012) and cleanroom in the Baxter Research Building (2014). An additional project that created valuable research lab and lab support space was the 2014 expansion of the Shelby campus Regional Bio-containment Laboratory, which provided 5,985 ASF.

The university also addressed instructional space needs during this period. In 2009, the university began including a new Belknap Academic Classroom Building (BACB) in its biennial Capital Plan to add campus instructional space. Continuing for four consecutive Capital Plans, the university submitted the BACB as its top capital project priority to the State until it was funded in fiscal year 2016. The $80.56 million project is now under construction and is scheduled to open in August 2018. With 164,923 gross square feet—including 20 classrooms, 14 teaching laboratories, 4 learning labs, and 1 multi-purpose room—the opening of this building will relocate a number of existing offices, classrooms, and laboratories across the Belknap Campus. The university will be consulting with various stakeholders about how to most effectively repurpose some of the vacated space, including the opportunity to transform these spaces into research laboratories using funds from the renovation and adaptation pool. Consistent with the Belknap Campus Master Plan, the Crawford Gym was demolished to provide a site for the BACB. The demolition of Crawford Gym took 32,992 ASF out of service.

<table>
<thead>
<tr>
<th>Projects on Shelby Campus</th>
<th>Fund Source</th>
<th>Cost</th>
<th>Date (s)</th>
<th>Aligned with Shelby Master Plan?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Academic Facilities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Founders Union Renovation – Phase 1&amp;2</td>
<td>University</td>
<td>$1.4M</td>
<td>2010</td>
<td>No</td>
</tr>
<tr>
<td>Burhans Hall Renovation</td>
<td>University</td>
<td>$500K</td>
<td>2010</td>
<td>No</td>
</tr>
<tr>
<td><strong>Research Facilities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Center for Predictive Medicine Expansion (Regional Bio-Containment Laboratory)</td>
<td>Private</td>
<td>$9.9M</td>
<td>2014</td>
<td>Yes</td>
</tr>
</tbody>
</table>

* Project ASF included in CPE Space Study
Another significant project included in the Belknap Master Plan and recent Capital Plans is the $40 million renovation and expansion of the Student Activities Center (SAC), which is currently under construction and scheduled for completion in August 2018. The first phase of this project was completed in the fall of 2016 when former gymnasium and racquetball courts were renovated to provide an additional 6,655 ASF of instructional space (room codes 110, 210, and 220) and 3,221 ASF of office space. When the SAC expansion is completed in 2018, the project will provide a 29,399 ASF increase in special and general use space. The Student Service Annex was demolished to provide real estate for the expansion. Faculty from Studio Arts were moved to the SAC following its 2016 renovation, and their former space saw some reconfiguration.

**Current UofL Space – Net Assignable by Space Code**

Table 2 provides the university’s net assignable square footage by space category. UofL has increased overall space by 3.8 percent from 2012 to 2016.

<table>
<thead>
<tr>
<th>Space Type</th>
<th>2012 UofL Net ASF</th>
<th>2016 UofL Net ASF</th>
<th>Difference</th>
<th>Percentage Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classrooms (100's)</td>
<td>161,575</td>
<td>211,783</td>
<td>50,208</td>
<td>31.1%</td>
</tr>
<tr>
<td>Teaching Labs (210's)</td>
<td>92,761</td>
<td>109,908</td>
<td>17,147</td>
<td>18.5%</td>
</tr>
<tr>
<td>Open Labs (220's)</td>
<td>129,544</td>
<td>79,717</td>
<td>(49,827)</td>
<td>-38.5%</td>
</tr>
<tr>
<td>Research Labs (250's)</td>
<td>511,512</td>
<td>531,533</td>
<td>20,021</td>
<td>3.9%</td>
</tr>
<tr>
<td>Office Suites (300's)</td>
<td>1,069,875</td>
<td>1,198,338</td>
<td>128,463</td>
<td>12.0%</td>
</tr>
<tr>
<td>Library (400's)</td>
<td>319,153</td>
<td>278,490</td>
<td>(40,663)</td>
<td>-12.7%</td>
</tr>
<tr>
<td>Physical Ed and Recreation (520's)</td>
<td>108,918</td>
<td>142,656</td>
<td>33,738</td>
<td>31.0%</td>
</tr>
<tr>
<td>Special and General Use (600's)</td>
<td>441,360</td>
<td>378,598</td>
<td>(62,762)</td>
<td>-14.2%</td>
</tr>
<tr>
<td>Support Space</td>
<td>184,745</td>
<td>201,721</td>
<td>16,976</td>
<td>9.2%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>3,019,443</td>
<td>3,132,744</td>
<td>113,301</td>
<td>3.8%</td>
</tr>
</tbody>
</table>

Since the CPE study referenced in the SACSCOC Off-site Committee’s comments was completed, the university has implemented a new space management software system—Archibus—and finished a number of capital projects, both of which have impacted the assignable square footage (ASF) among room categories on campus. Using Archibus, a campus space verification survey was implemented by the University Planning Design and Construction Office from 2011 to 2015. This comprehensive review of space assignments resulted in the reassignment of many open laboratories to either classroom or teaching laboratories to better reflect their actual use. Some large building renovations also resulted in space being repurposed. For example, the Ekstrom Library renovation in 2016 and 2017 resulted in some previously assigned library space being changed to office space.

While the CPE study lists the UofL support space ASF as 82,414 for 2012, the university’s records for 2012 (see Table 2) indicate the ASF was 184,745 for 2012, a difference of 102,331. The CPE study only used educational and general (E&G) space. Using only E&G space results in minor differences for most of the room use categories, but for the support space category that approach eliminates many university buildings considered support space, particularly for a research institution. These eliminated spaces include central computer/telecommunications, shop space, central storage, vehicle storage, central service (mail and printing for more than one building), and hazardous materials. When these additional spaces are included, UofL’s 2016 support space total of 201,721 exceeds the CPE guideline estimate of 146,368 ASF (see Table 3).
Off-site Committee Feedback

The institution presented a summary of the CPE assessment, however, information about how the deficits were calculated and whether the assessment was a comprehensive review of all University facilities was not presented.

CPE Space Study

In 2014 the Kentucky Council for Postsecondary Education (CPE) published a 2012 study conducted by Vanderweil Facilities Advisors (VFA) and Paulien & Associates that had two primary goals [9]. The first was to determine whether State public institutions of higher education had adequate quantities of space to effectively support current and forecasted student, faculty, and staff populations as well as their volume of research expenditures. The second goal was to conduct a facility condition assessment to estimate the magnitude of each institution’s deferred maintenance backlog and 15-year capital renewal requirements. Study findings, which were based on 2012 data, were then used to inform state-wide capital planning and funding priorities.

The CPE Space Study reviewed 52 percent of the total assignable square footage at UofL: it was based on 26.4 percent or 36 university buildings out of a total of 136. The study’s space capacity projections included Education and General Space only. Library space was specifically excluded from the study analysis. The CPE Space Study was a tool to assist the state in determining priorities, but it did not represent a complete assessment of all the university’s physical facilities. The survey outcomes were intended for planning and budgeting purposes. As noted by the consultants in the report, “because such a limited portion of most institutions’ portfolio was studied, the ‘blended’ picture is far from complete” (p. 6) [10]. They also noted that “Since the buildings surveyed were not chosen to serve as a statistical sample of the overall university’s space adequacy, extrapolation of space adequacy results to model all adequacy needs for each institution is not recommended” (p. 7) [11].

The limitations of the CPE report preclude it from being used as a complete picture of UofL’s physical space and condition. The limitations were that:

- it assessed for State budgeting purposes only.
- it assessed for system renewals only. (The study notes: “The study collected no data and draws no conclusions about how institutions are budgeting to address daily operations and maintenance of their facilities” [p. 7] [12].)
- it delivered space capacity projections for education and general space only. (The study notes: “The Space Capacity Study accounted for the education and general space at each institution, the institution’s current enrollment, and the 2020 enrollment projections” [p. 7] [13]).
- it assessed only selected buildings.
- it reported only external research funding and did not include institutional funds.
- its goals for research needs were made based upon a projected level of NSF funding that did not materialize. In fact, there has been a reduction in NSF funding since 2012.

The CPE Space Study used 2012 student and staff Full-time Equivalent (FTE) enrollments and National Science Foundation (NSF) research expenditures to suggest benchmarks for space capacity based on assignable square footage (ASF) requirements for each space type.

For 2012 these values were:
- Student FTE’s = 18,296
- Staff FTE’s = 5,511
- National Science Foundation (NSF) Research Expenditures = $132,091,000

The model used the space allocation calculations outlined in Table 3 to determine the guideline ASFs used in the study. Comparing these guideline ASFs to the actual ASF available for each space type produced the 2012 space surplus / (deficit) identified in the CPE report.

**Table 3. Kentucky Postsecondary Education System Facility Condition and Space Study: Assignable Square Footage (ASF is for E&G Space Only)**

<table>
<thead>
<tr>
<th>Space Type</th>
<th>Formula</th>
<th>Calculation</th>
<th>Guideline ASF (Benchmark)</th>
<th>UofL Actual ASF*</th>
<th>Difference</th>
<th>Percentage Surplus / (Deficit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classrooms</td>
<td>10 ASF/Student FTE</td>
<td>10 ASF x 18,296</td>
<td>182,960</td>
<td>160,523</td>
<td>(22,437)</td>
<td>(14%)</td>
</tr>
<tr>
<td>Teaching Lab</td>
<td>8 ASF/Student FTE</td>
<td>8 x 18,296</td>
<td>146,368</td>
<td>92,761</td>
<td>(53,607)</td>
<td>(58%)</td>
</tr>
<tr>
<td>Open Labs</td>
<td>8 ASF/Student FTE</td>
<td>8 x 18,296</td>
<td>146,368</td>
<td>120,570</td>
<td>(25,798)</td>
<td>(21%)</td>
</tr>
<tr>
<td>Research Labs</td>
<td>900 ASF/$100,000 for first $50M</td>
<td>$50M / $100K x 900</td>
<td>450,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>600 ASF/$100,000 for second $50M</td>
<td>$50M / $100K x 600</td>
<td>300,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>350 ASF/$100,000 over $100M</td>
<td>$32.091M / $100K x 350</td>
<td>112,319</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research Labs Total</td>
<td></td>
<td></td>
<td>862,319</td>
<td>494,813</td>
<td>(367,506)</td>
<td>(74%)</td>
</tr>
<tr>
<td>Office Suites</td>
<td>195 ASF/Staff FTE</td>
<td>195 x 5,511</td>
<td>1,074,645</td>
<td>967,796</td>
<td>(106,849)</td>
<td>(11%)</td>
</tr>
<tr>
<td>Library</td>
<td>No Standard</td>
<td></td>
<td>316,663</td>
<td>316,663</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Physical Ed and Recreation</td>
<td></td>
<td></td>
<td>183,087</td>
<td>253,096</td>
<td>70,009</td>
<td>28%</td>
</tr>
<tr>
<td>Special Use</td>
<td>21 ASF/Student FTE</td>
<td>21 x 18,296</td>
<td>384,216</td>
<td>357,067</td>
<td>(27,149)</td>
<td>(8%)</td>
</tr>
<tr>
<td>Support Space</td>
<td>8 ASF/Student FTE</td>
<td>8 x 18,296</td>
<td>146,368</td>
<td>82,414</td>
<td>(63,954)</td>
<td>(78%)</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td></td>
<td><strong>3,442,993</strong></td>
<td><strong>2,845,703</strong></td>
<td><strong>(597,290)</strong></td>
<td><strong>(21%)</strong></td>
</tr>
</tbody>
</table>

**CPE Space Study Assumptions**

The CPE space study methodology for identifying projected research space needs was based on the university’s 2011 NSF Research and Development (R&D) expenditures. UofL research and development expenditures, as reported to NSF, have declined 7.6 percent from FY 2011 to FY 2016. Table 4 provides the trend data based on UofL reports to NSF from 2011 to 2016. Using the CPE Space Study methodology of deducting institutional funds from the total amount, the expenditures have declined 11.1 percent. The reduction in NSF R&D expenditures is reflective of a national trend in lower federal awards that started in FY 2012. UofL, like many higher education institutions, has felt the impact of this reduction, although funding has improved in the most recent reportable year.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal government</td>
<td>96,010,000</td>
<td>89,976,000</td>
<td>78,144,000</td>
<td>65,849,000</td>
<td>68,069,000</td>
<td>71,760,000</td>
<td>(25.3%)</td>
</tr>
<tr>
<td>State and local government</td>
<td>10,736,000</td>
<td>12,788,000</td>
<td>12,647,000</td>
<td>14,433,000</td>
<td>11,038,000</td>
<td>11,402,000</td>
<td>6.2%</td>
</tr>
<tr>
<td>Industry/Business</td>
<td>6,405,000</td>
<td>8,049,000</td>
<td>8,238,000</td>
<td>8,175,000</td>
<td>4,999,000</td>
<td>7,688,000</td>
<td>20.0%</td>
</tr>
<tr>
<td>Nonprofit organizations</td>
<td>7,073,000</td>
<td>8,860,000</td>
<td>6,933,000</td>
<td>8,844,000</td>
<td>8,330,000</td>
<td>11,402,000</td>
<td>17.8%</td>
</tr>
<tr>
<td>Institution funds</td>
<td>65,347,000</td>
<td>65,384,000</td>
<td>65,266,000</td>
<td>70,130,000</td>
<td>65,078,000</td>
<td>65,078,000</td>
<td>0.4%</td>
</tr>
<tr>
<td>All other sources</td>
<td>11,867,000</td>
<td>11,785,000</td>
<td>16,384,000</td>
<td>18,889,000</td>
<td>16,399,000</td>
<td>18,196,000</td>
<td>53.3%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>197,438,000</td>
<td>196,842,000</td>
<td>186,772,000</td>
<td>183,376,000</td>
<td>179,499,000</td>
<td>182,454,000</td>
<td>(7.6%)</td>
</tr>
</tbody>
</table>

CPE SPACE STUDY EQUIVALENT

132,091,000 131,458,000 121,506,000 114,265,000 109,349,000 117,376,000 (11.1%)

A recalculation of research needs using the CPE formula and the actual 2016 NSF R&D expenditure (minus institutional funds) would reduce the research lab CPE Guideline ASF to 810,816 (see Table 5).

Table 5. 2012 CPE Space Study – Revised Research ASF Calculation

<table>
<thead>
<tr>
<th>Formula</th>
<th>Calculation</th>
<th>ASF</th>
<th>CPE Guideline ASF</th>
<th>UofL 2012 Actual ASF</th>
<th>Difference</th>
<th>Percentage (Deficit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>900 ASF/$100,000 for first $50M</td>
<td>500</td>
<td>900</td>
<td>450,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>600 ASF/$100,000 for second $50M</td>
<td>500</td>
<td>600</td>
<td>300,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>350 ASF/$100,000 over $100M</td>
<td>320.91</td>
<td>350</td>
<td>112,319</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2011 Total (See Table 3.)</td>
<td>132,091,000</td>
<td>862,319</td>
<td>494,813</td>
<td>367,506</td>
<td>(74.0%)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Formula</th>
<th>Calculation</th>
<th>ASF</th>
<th>CPE Guideline ASF</th>
<th>UofL 2016 Actual ASF</th>
<th>Difference</th>
<th>Percentage (Deficit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>900 ASF/$100,000 for first $50M</td>
<td>500</td>
<td>900</td>
<td>450,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>600 ASF/$100,000 for second $50M</td>
<td>500</td>
<td>600</td>
<td>300,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>350 ASF/$100,000 over $100M</td>
<td>173.76</td>
<td>350</td>
<td>60,816</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016 Total</td>
<td>117,376,000</td>
<td>810,816*</td>
<td>494,813</td>
<td>316,003</td>
<td>(63.0%)</td>
<td></td>
</tr>
</tbody>
</table>

* Recognized decline in NSF research volume between 2011 and 2016

Impact of New UofL Projects on CPE Space Study Assumptions

Table 6 summarizes the impact of the university’s new construction and the support space and research space adjustments on the CPE-estimated assignable square foot (ASF) inventory by room type. In particular, these adjustments have eliminated the space deficits identified in the CPE study for classrooms, special use, and support space. In addition, the space deficits have been lowered for teaching labs (from -58% to -20.4%), research labs (from -74% to -36.3%), and office suites (from -11% to -9.6%). The overall space deficit
as defined by CPE has decreased from -21 percent (597,290 ASF) to -9.8 percent (339,026 ASF).

Table 6. Assignable Square Foot Adjustments Based on Completed Capital Construction Since 2012

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom (100s)</td>
<td>22,437</td>
<td>21.0%</td>
<td>32,075</td>
<td>2,434</td>
<td>2,548</td>
<td>2,750</td>
<td>7,512</td>
<td>7,512</td>
<td>32.9%</td>
<td>32.9%</td>
<td>597,290 ASF</td>
<td>-21%</td>
</tr>
<tr>
<td>Teaching Labs (210s)</td>
<td>53,607</td>
<td>58.0%</td>
<td>28,133</td>
<td>2,391</td>
<td>214</td>
<td>2,423</td>
<td>175</td>
<td>175</td>
<td>20.4%</td>
<td>20.4%</td>
<td>89,216 ASF</td>
<td>-9.8%</td>
</tr>
<tr>
<td>Open Labs (220s)</td>
<td>25,798</td>
<td>21.0%</td>
<td>3,893</td>
<td>207</td>
<td>15,203</td>
<td>20.4%</td>
<td>36,901</td>
<td>36,901</td>
<td>25.2%</td>
<td>25.2%</td>
<td>339,026 ASF</td>
<td>-9.8%</td>
</tr>
<tr>
<td>Research Labs (250s)</td>
<td>367,506</td>
<td>74.0%</td>
<td>554</td>
<td>531</td>
<td>5,985</td>
<td>3,141</td>
<td>51,503</td>
<td>313,263</td>
<td>36.3%</td>
<td>36.3%</td>
<td>339,026 ASF</td>
<td>-9.8%</td>
</tr>
<tr>
<td>Offices (300s)</td>
<td>106,849</td>
<td>11.0%</td>
<td>3,221</td>
<td>532</td>
<td>110</td>
<td>3,388</td>
<td>5,141</td>
<td>103,691</td>
<td>9.6%</td>
<td>9.6%</td>
<td>339,026 ASF</td>
<td>-9.8%</td>
</tr>
<tr>
<td>Library (400s)</td>
<td>0</td>
<td>0%</td>
<td>11,951</td>
<td>11,951</td>
<td>0%</td>
<td>0%</td>
<td>43,829</td>
<td>23.9%</td>
<td>30%</td>
<td>30%</td>
<td>339,026 ASF</td>
<td>-9.8%</td>
</tr>
<tr>
<td>PE &amp; Rec (520s)</td>
<td>70,009</td>
<td>28%</td>
<td>21,446</td>
<td>21,446</td>
<td>21,446</td>
<td>21,446</td>
<td>43,829</td>
<td>23.9%</td>
<td>30%</td>
<td>30%</td>
<td>339,026 ASF</td>
<td>-9.8%</td>
</tr>
<tr>
<td>Special &amp; General (600s)</td>
<td>27,149</td>
<td>8.0%</td>
<td>17,016</td>
<td>12,006</td>
<td>13,200</td>
<td>29,289</td>
<td>369</td>
<td>13,581</td>
<td>3.5%</td>
<td>3.5%</td>
<td>339,026 ASF</td>
<td>-9.8%</td>
</tr>
<tr>
<td>Support Space</td>
<td>63,054</td>
<td>7.8%</td>
<td>1,209</td>
<td>1,209</td>
<td>119,307</td>
<td>55,353</td>
<td>37.8%</td>
<td>37.8%</td>
<td>37.8%</td>
<td>37.8%</td>
<td>339,026 ASF</td>
<td>-9.8%</td>
</tr>
<tr>
<td>Total Surplus / Deficit</td>
<td>597,291</td>
<td>21.0%</td>
<td>89,216</td>
<td>52,992</td>
<td>735</td>
<td>39,722</td>
<td>119,307</td>
<td>339,026</td>
<td>9.8%</td>
<td>9.8%</td>
<td>339,026 ASF</td>
<td>-9.8%</td>
</tr>
</tbody>
</table>

Note * Research Space Adjustment is based on the recalculation of the research deficit based on the decline in NSF funding (862,319 - 810,816 = 51,503). The Support Space Adjustment is based on the difference between the CPE Support Space ASF and the actual UofL Support Space ASF in 2012 (201,721 - 82,414 = 119,307).

Future Projects

The state legislature is currently reviewing the recently submitted 2018-2024 six-year capital plan and will authorize specific projects in legislation that will be passed later in the spring of 2018. To help address remaining space deficits in research space, the plan the university submitted contains over $315 million in research-related projects that align with the goals in the UofL 2020 Plan and the 21st Century Initiative. Table 7 lists these projects.
<table>
<thead>
<tr>
<th>Project</th>
<th>Amount Requested</th>
<th>Campus</th>
<th>Anticipated Addition to ASF</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital Renewal Replace &amp; Upgrade Pool</td>
<td>$100.0M</td>
<td>All</td>
<td>To be determined</td>
<td>A portion of this deferred maintenance pool would be dedicated to research facilities</td>
</tr>
<tr>
<td>Renovation and Adaptation Projects for Various Campus Buildings</td>
<td>$50.0M</td>
<td>All</td>
<td>To be determined</td>
<td>This pool of funds will allow the university to respond to various project needs that arise during the next biennium (e.g., newly recruited faculty who require facility renovation to meet their laboratory needs)</td>
</tr>
<tr>
<td>Renovate School of Medicine Building 55A</td>
<td>$42.0M</td>
<td>HSC</td>
<td>35,000 ASF</td>
<td>Research Facility</td>
</tr>
<tr>
<td>Regional Biocontainment Lab Pressurization Control Upgrade</td>
<td>$5.0M</td>
<td>Shelby</td>
<td>N/A</td>
<td>Research Facility</td>
</tr>
<tr>
<td>Construct Plant-Based Pharmaceutical Research Facility</td>
<td>$1.7M</td>
<td>HSC</td>
<td>2,600 ASF</td>
<td>Research Facility</td>
</tr>
<tr>
<td>Upgrade Chemistry Fume Hoods (Phase II)</td>
<td>$9.8</td>
<td>Belknap</td>
<td>No additional square footage</td>
<td>Research Infrastructure</td>
</tr>
<tr>
<td>Construct Institute for Product Realization</td>
<td>$35.9M</td>
<td>Belknap</td>
<td>140,000 ASF</td>
<td>Institute is dedicated to fostering relationships between the university and manufacturing; would be initial building in Belknap Research Park</td>
</tr>
<tr>
<td>Implement Speed School Expansion Project Master Plan</td>
<td>$65.0M</td>
<td>Belknap</td>
<td>78,000 ASF</td>
<td>New classroom and research space</td>
</tr>
<tr>
<td>Purchase Research Computing Infrastructure</td>
<td>$7.0M</td>
<td>All</td>
<td>No additional square footage</td>
<td>Research Infrastructure</td>
</tr>
</tbody>
</table>

As mentioned above, the Belknap Academic Classroom Building (BACB) will provide 20 general-purpose classrooms; 14 new teaching laboratories that will be dedicated to undergraduate general education, chemistry, biology, and physics instruction; 4 learning labs in the Success Center; and 1 multi-purpose room. The university administration is analyzing data from a recent classroom scheduling/utilization study that will ultimately help determine a final course offering plan for the new BACB. As existing course offerings are shifted to the BACB, the utilization of existing instructional space will be reduced. When the impact of new classroom scheduling/ utilization rates in Chemistry, Life Science, and Natural Science are better understood, we expect some quantity of existing classrooms will no longer be required, permitting them to be converted to support funded research needs. A $50 million project for such space adaptations is included in the university’s 2018 – 2024 Capital Plan [14].

The $42 million planned renovation of the Medical Research Tower--Building 55A--already in initial design phase--will result in a more space-efficient open lab floor plan design that is expected to produce a net increase of 35,000 ASF in research laboratory and laboratory space.
support space. The partial renovation of building 55A re-purposed former laboratory and office space to technology-rich team-based instructional space, as well as converted library/student study areas.

With philanthropic gifts the university plans to develop a new $120 million, 200,000 square-foot Business School. Once constructed, the existing Business School building--the 128,000 square-foot Frazier Hall--will be re-purposed as a general-purpose classroom, research, and faculty office building that benefits the university’s seven other colleges on the Belknap campus. Its impact on space allocation is presently unknown.

The university commissioned a 2016 consultant study for the Speed School of Engineering to quantify additional space and new construction/major renovation requirements to satisfy increased student enrollment and funded research activities [15]. The consultants recommended implementation of five significant projects, each of which is included in the university’s 2018 – 2024 Capital Plan that is pending approval by the State. As this project is accomplished there will be a doubling of Speed School classroom space square footage and a tripling of research space. The Speed School Master Plan proposes the following projects:

- **Multidisciplinary Engineering Building #1**: This $65 million, 125,000 square-foot building will provide classrooms, instructional and research laboratories, faculty offices, and student service areas.
- **Multidisciplinary Engineering Building #2**: This $48.2 million project will demolish the antiquated 25,800 square-foot Ernst Hall and approximately 18,000 square feet of W.S. Speed Hall to make way for a new 88,000 square-foot building that provides classrooms, instructional and research laboratories, faculty offices, and student service areas.
- **Renovate and Expand J.B. Speed Hall**: This $18.7 million project will provide a comprehensive renovation and MEP infrastructure upgrade to this 40,775 square-foot building. It also provides a small addition on the rear of the building to address accessibility issues.
- **Renovate W.S. Speed Hall**: Following completion of the Multidisciplinary Engineering Building #2, the remaining 12,000 square feet of this building will be comprehensively renovated and renewed for $4.1 million.
- **Renovate and Expand Sacket Hall**: This $21.3 million project will demolish 16,700 square feet or approximately 60 percent of the existing building, comprehensively renovate the remaining 11,000 square feet, and construct 31,500 square feet of new space.

**SUMMARY**

The University of Louisville is in compliance with Core Requirement 2.11.2. The 2020 Plan provides a structure for continuing to move the university toward national distinction as a premier metropolitan research university as well as the university’s goal to serve the needs of the community and the region as a catalyst for economic advancement and improved quality of life for its citizens. Since 2009, UofL has constructed over $650,000,000 in completed or soon-to-be completed capital projects benefiting the faculty, staff, and students of the university as well as the local/metropolitan community.

The university’s planning processes are sufficient to address future space planning needs. During the six years since the 2012 CPE Space Study, the university has completed or is in the process of implementing capital construction projects that have reduced or will eliminate most space deficits as defined by the CPE Space Study. The 2018-2024 Six-year Capital Plan contains over $315 million in research-related projects that align with the goals in the UofL 2020 Plan and the 21st Century Initiative.
2_11_2_fn01.pdf

2_11_2_fn02.pdf

[3] Belknap Campus Master Plan
2_11_2_fn03.pdf
http://louisville.edu/updc/master-planning/board-of-trustees-presentation

[4] Shelby Campus Master Plan
2_11_2_fn04.pdf

[5] HSC Campus Master Plan
2_11_2_fn05.pdf
http://louisville.edu/updc/master-planning/health-sciences-campus-master-plan

2_11_2_fn06.pdf

[7] Belknap Campus Master Plan, pages 11-12, 16-17
2_11_2_fn07.pdf

[8] Health Sciences Campus Master Plan, pages 15-17
2_11_2_fn08.pdf

[9] 2014 CPE Space Study
2_11_2_fn09.pdf

2_11_2_fn10.pdf

2_11_2_fn11.pdf

2_11_2_fn12.pdf

2_11_2_fn13.pdf

2_11_2_fn14.pdf

[15] Speed School of Engineering Master Plan
2_11_2_fn15.pdf
2.12

Quality Enhancement Plan

The institution has developed an acceptable Quality Enhancement Plan (QEP) that includes an institutional process for identifying key issues emerging from institutional assessment and focuses on learning outcomes and/or the environment supporting student learning and accomplishing the mission.

(\textbf{Note}: This requirement is not addressed by the institution in its Compliance Certification.)

\textbf{Judgment}

\checkmark Compliance  \square Partial Compliance  \square Non-Compliance  \square Not Applicable

\textbf{Narrative}

The University of Louisville (UofL) is in compliance with Core Requirement 2.12 and has developed a quality enhancement plan (QEP) that is based on institutional assessment and that supports the student learning environment at the university.

The UofL QEP plan, \textit{Find Your Fit}, is provided [1].

The institutional process for developing \textit{Find Your Fit} (FYF) began in late 2014 with the establishment of the university’s QEP Development Committee [2], which would provide leadership for the process of identifying the university’s QEP project.

Early on, this committee analyzed a wide range of institutional data related to student learning, student academic progression, and student perception of their experiences at the University of Louisville. The committee examined reports from nationally administered assessments as well as from research completed at UofL (see Fig. 1). Institution-specific reports reviewed by the committee included: student learning data from the university-wide General Education assessment process; the institution’s graduating senior survey; institutional trend data on student retention, persistence, and graduation; and a number of internal ad hoc studies focused on the profile and institutional progression of various student populations.
The QEP Development Committee’s analysis of institutional assessment pointed to a distinctive hurdle faced by many undergraduate students: navigating the challenges of the second year and successfully transitioning into the third year. Further research led to the development of the proposed QEP, *Find Your Fit*. While improved retention is one of the expected outcomes of FYF, the initiative centers on enhancing student learning and the learning environment. The target audience is pre-unit and undecided students, who are collectively known as “exploratory students” at UofL and whose particular struggles are evident in second-year performance data. The purpose of FYF is to enhance the inquiry and decision-making skills of the students involved in the initiative in order to help them thrive academically and personally. The QEP intervention takes the form of a seminar with an innovative curriculum aimed at exploratory students in their second year.

**Alignment with University Mission**

The mission of the University of Louisville is to pursue excellence and inclusiveness in its work to educate and serve its community through:

1. teaching diverse undergraduate, graduate, and professional students in order to develop engaged citizens, leaders, and scholars,
2. practicing and applying research, scholarship and creative activity, and
3. providing engaged service and outreach that improve the quality of life for local and global communities.

The focus of *Find Your Fit* aids the university in accomplishing its mission of teaching diverse undergraduates. *Find Your Fit* fosters learning strategies that will help students cultivate the habit of lifelong learning. The strategic priorities and educational aims of FYF are centered around engaged learning, student success, and the vitality of the university’s academic programs and student services in order to create a foundation for students to
thrive on campus and beyond. FYF operates on the premise that if students are more engaged, focused, and successful during their years at UofL, they will be more likely to develop into the engaged citizens, leaders, and scholars the university aspires to produce.

*Find Your Fit* supports UofL’s 21st Century University Initiative [3] and its goals to enhance the university’s academic programs and student services, improve and highlight research, better serve the community, and provide professional development to faculty and staff. The QEP will be housed in the Student Success Center located in the Belknap Academic Classroom Building, which is scheduled to open fall 2018 [4]. FYF, with its focus on integrative advising and student engagement and success, aligns strongly with the holistic vision of this new center that was designed with the needs and challenges of first- and second-year students in mind.

**SUMMARY**

The University of Louisville has developed an acceptable Quality Enhancement Plan (QEP) that meets the requirements of Core Requirement 2.12. The plan was developed by a QEP committee that used national and institutional assessment data to identify a key issue that focuses on supporting student learning and that is tied to the university mission.

[1] UofL Quality Enhancement Plan
2_12_fn01.pdf
http://louisville.edu/findyourfit

[2] QEP Development Committee
2_12_fn02.pdf

2_12_fn03.pdf

2_12_fn04.pdf
http://uoflnews.com/post/uofltoday/belknap-academic-classroom-building-on-pace-for-fall-opening/
3.2.1

Governance and Administration: CEO evaluation/selection

The governing board of the institution is responsible for the selection and the periodic evaluation of the chief executive officer.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Not Applicable

The Off-Site Reaffirmation Committee did not review this standard, as the institution’s compliance with this standard will be reviewed by the SACSCOC Board of Trustees at its December 2016 meeting.

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.2.1. The UofL Board of Trustees has a state-mandated responsibility for appointment, suspension, or removal of the university president as stated in KRS 164.830 [1]. KRS 164.830 is clear in defining the powers of the Board of Trustees, which include the appointment, evaluation, suspension, or removal of the president.

KRS Revised Statute 164.830 states:

The board of trustees of the University of Louisville shall constitute a body corporate, with the usual corporate powers, and shall possess all the authorities, immunities, rights, privileges, and franchises usually attaching to the governing bodies of Kentucky public higher educational institutions. A majority of the voting members of the board shall constitute a quorum for the transaction of business. Powers of the board shall include the following:

(a) Appointment of a president, all faculty members, and other personnel and determination of the compensation, duties, and official relations of each. No relative of a board of trustee member shall be employed by the university.

(b) Suspension or removal of the president, officers, faculty, agents, or other personnel that it is authorized to appoint, except that no president, professor, or teacher shall be removed except for incompetence, neglect of or refusal to perform his duty, or for immoral conduct and that the removal shall be made in accordance with procedures established by law for state institutions.

The Board of Trustees Bylaws (Section 2.7) states that

The Board of Trustees is responsible for the selection and appointment of the President in accordance with the Board’s obligations under state law and The Redbook. The Board of Trustees is also solely responsible for conducting a formal evaluation of the performance of the President on at least an annual basis. The Board of Trustees is solely responsible for making decisions on the
President’s responsibilities and authority, total compensation and continuation in office. [2]

Per The Redbook 2.1.1 (the university’s governance document), the president of the university reports to the Board and serves at its pleasure [3], and, per Redbook 2.1.3, the Board annually evaluates the performance of the university president [4]. The Redbook 1.1.2 states: “The Board of Trustees shall have the powers set forth in KRS 164.830, including the authority (i) to select, hire, regularly evaluate, and, when appropriate, suspend or remove the President of the University” [5].

On November 14, 2002, upon the recommendation of the Presidential Search Committee, the Board of Trustees appointed Dr. James R. Ramsey as the 17th president of UofL [6]. On July 27, 2016, Dr. James Ramsey submitted his resignation to the UofL Board of Trustees. The Board accepted Dr. Ramsey’s resignation [7] and on July 27, 2016, per Redbook 2.2.3, appointed then-Acting Provost Dr. Neville Pinto as Acting President of the university [8]. Dr. Pinto resigned in December 2016 to accept a position as president of the University of Cincinnati [9]. Dr. Pinto served as UofL’s Acting President until February 1, 2017.

Effective January 30, 2017, the Board of Trustees appointed Gregory C. Postel, M.D., as Interim President of the university [10], following The Redbook, Section 2.2.3 [11]. Dr. Postel’s appointment letter states: “Your appointment as Interim President is at the pleasure of the Board of Trustees and may be terminated at the discretion of the Board of Trustees, with or without cause,” and “You may be removed from your University responsibilities only by action of the Board of Trustees” [12].

A search is underway for the next UofL president. On June 28, 2017, the Board of Trustees approved a resolution regarding the presidential search process [13]. Information on the progress of the presidential search is available to the public on the university’s webpage [14].

**Evaluation of the President**

Consistent with Section 2.1.3 of The Redbook (which states, “The performance of the President will be reviewed annually by the Board of Trustees”) [15] and Section 2.7 of the University of Louisville Board of Trustees Bylaws [16], the performance of the university president is reviewed annually by the Board of Trustees. The University of Louisville Board of Trustees Bylaws and The Redbook are consistent with KRS 164.830(1)(g) [17], which requires periodic evaluation of the institution’s progress in reaching its mission, goals, and objectives and for holding officers and officials accountable for the status of the institution’s progress.

Former President James Ramsey was evaluated on an annual basis by the Board from 2002 until 2015 [18]. Acting President Neville G. Pinto was not evaluated because he held the position of president for only six months.

Interim President Postel’s appointment letter states that the Board of Trustees will annually evaluate the Interim President within three months after the end of each academic year [19]. At its Annual Meeting on July 20, 2017, the Board Chair requested that the Board’s Governance Committee begin collecting materials toward the evaluation of Interim President Gregory C. Postel [20]. Dr. Postel’s evaluation was completed at the December 14, 2017, Board of Trustees meeting [21].

UofL Focused Report (2018), p. 27
SUMMARY

The University of Louisville is in compliance with Comprehensive Standard 3.2.1. Kentucky Revised Statute (KRS) 164.830 gives the University of Louisville Board of Trustees the authority to appoint the university president. Consistent with Section 2.1.3 of The Redbook, the basic governance document of the university, the performance of the university president is reviewed annually by the Board of Trustees.

This standard was reviewed by the SACSCOC Special Committee in September 2017. No recommendations related to Comprehensive Standard 3.2.1 were forwarded to the SACSCOC Compliance and Records (C&R) Committee. The University of Louisville was removed from probation in December of 2017.

[1] KRS 164.830, Powers of the Board
3_2_1_fn01.pdf

[2] Board of Trustees Bylaws, Section 2.7, Selection and Evaluation of the President
3_2_1_fn02.pdf

[3] The Redbook 2.1.1, Position Description for University of Louisville President (President Reports to the Board of Trustees)
3_2_1_fn03.pdf

3_2_1_fn04.pdf

[5] The Redbook, Section 1.1.2, Powers of the Board
3_2_1_fn05.pdf

[6] Board of Trustees Minutes, November 14, 2002, Hiring of President James Ramsey
3_2_1_fn06.pdf

3_2_1_fn07.pdf

[8] Board of Trustee’s Meeting Minutes, July 27, 2016, Appointment of Neville Pinto as President
3_2_1_fn08.pdf

[9] President Pinto Resignation
3_2_1_fn09.pdf

[10] Board of Trustee’s Meeting Minutes, January 21, 2017, Appointment of Gregory Postel as President
3_2_1_fn10.pdf

[11] The Redbook, Section 2.2.3, Duties of Executive Vice President and University Provost and Vice Presidents
3_2_1_fn11.pdf

[12] President Postel Appointment Letter, February 16, 2017
3_2_1_fn12.pdf

UofL Focused Report (2018), p. 28
3_2_1_fn13.pdf

[14] Presidential Search Webpage
3_2_1_fn14.pdf
http://louisville.edu/presidential-search/presidential-search#process

3_2_1_fn15.pdf

[16] Board of Trustees Bylaws, Section 2.7, Selection and Evaluation of the President
3_2_1_fn16.pdf

[17] KRS 164.830(1)(g), Powers of the Board
3_2_1_fn17.pdf

3_2_1_fn18.pdf

[19] President Postel Appointment Letter, February 16, 2017
3_2_1_fn19.pdf

[20] Board of Trustees Minutes, July 20, 2017, Beginning of Evaluation of President Postel
3_2_1_fn20.pdf

[21] Board of Trustees Minutes, December 14, 2017, Conclusion of Evaluation of President Postel
3_2_1_fn21.pdf
3.2.3
Governance and Administration: Board conflict of interest

The governing board has a policy addressing conflict of interest for its members.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The institution has a policy (Board of Trustees’ Bylaws Section 4.1) addressing conflict of interest for members of the university’s Board of Trustees. The Kentucky Revised Statute 45A.340 addresses the conflict of interest. A letter is provided to each member of the Board pertaining to conflict of interest and an orientation is provided. Each member of the Board is required to complete a Conflict of Interest Certification on an annual basis. The Off-Site Reaffirmation Committee was unable to review completed conflict of interest forms in order to determine whether the institution is implementing this policy.

Judgment
☐ Compliance  ☐ Partial Compliance  ☐ Non-Compliance  ☐ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.2.3. UofL has a policy addressing conflict of interest for members of the university’s Board of Trustees.

The completed and signed Conflict of Interest statements for the university’s current Board are provided [1a] [1b].

Since January 2017, the UofL Board of Trustees has updated the Board conflict of interest policies. On February 16, 2017, the Board appointed an Ad Hoc Committee on Governance [2] to review and strengthen the Board’s existing Bylaws, university policies, and Chapter 1 of The Redbook (the university’s governance document), which covers the Board of Trustees. The updated Board Bylaws (including those related to trustee conflict of interest) went into effect July 1, 2017 [3]. The revised Bylaws include the Board’s conflict of interest policy and a new Board Statement 1.3 affirming the Board’s intention to maintain a robust policy on conflict of interest [4].

UofL Policies and Procedures Related to Conflict of Interest

The university’s policies and procedures related to conflict of interest are provided below and reflect the revisions completed by the Governance Committee.

- Institutional Conflict of Interest Policy. The university’s Institutional Conflict of Interest Policy applies to institutional officials, including Trustees [5]. The Institutional Conflict of Interest Policy was first adopted in 1983 and last revised in 2013. Its corollary document, “Addressing Institutional Conflicts of Interest,” was adopted in January 2011 and last revised November 2015 [6]. These policy documents apply to conflict of interest situations involving the institution as a whole as well as Institutional Officials. It is the policy of the University of Louisville to ensure its transactions are conducted with integrity. This Conflict of Interest Policy and its associated procedures outline the guiding principles and procedures utilized by the University of Louisville to identify and manage conflicts of interest that

present a significant risk to the actual or perceived objectivity of transactions conducted in the name of the University of Louisville.

Board members receive the university’s Institutional Conflict of Interest Policy in their new Board member materials, and the policy is provided to members as part of the Board’s Annual Meeting, together with an acknowledgement document that each Trustee is asked to sign and date.

- **Conflict of Interest Statements.** When new members are appointed to the Board of Trustees, the university’s Board Liaison sends a new member welcome packet that includes a conflict of interest statement [7]. The liaison requests Board members complete, sign, and return the conflict of interest statement along with other requested materials.

- **Board of Trustees Bylaws, Section 5.1, Conflict of Interest.** Section 5.1 of the Board's Bylaws outlines the guidelines for Board members regarding known conflicts of interest.

  All Trustees shall disclose any known conflict of interest and shall avoid participating in any decision or advocating any subject matter before the Board in which the Trustee, a business in which the Trustee is an owner or an employee, or a member of the immediate family of a Trustee has a conflict of interest. When a Trustee learns that a business transaction presents a conflict of interest, that Trustee must make an immediate, full disclosure to the Board of his or her interest in the subject. The Trustee shall not participate in any discussion of or decision on the issue. Disclosures are necessary for business transactions which would result in conflict of interest. Failure of a Trustee to make a disclosure shall void any resulting agreement at the option of the University. University remuneration to a faculty or staff Trustee and financial aid to a student Trustee shall not be considered a financial or other conflict of interest. Conflicts of interest shall be dealt with in accordance with state statutes. [8]

- **The Redbook, Section 1.1.3.** On June 15, 2017, the Board of Trustees approved important new conflict of interest procedures. Specifically, the Trustees voted to start each meeting of the Board of Trustees, effective July 1, 2017, with the Board Chair issuing the following statement reminding all Trustees that it is their responsibility to avoid conflicts of interest and to make any conflicts of interest known before involvement in the voting of the Board on any items related to the conflict.

  As Chair, it is my responsibility to remind all members of the Board of their responsibility to avoid conflicts of interest and appearances of conflict of interest. Each member has received the agenda and related information for this Board of Trustees’ meeting. If any Board member knows of any conflict of interest or appearance of conflict of interest with respect to any matter coming before the Board of Trustees at this meeting, please identify the conflict or appearance of conflict at this time. [9]

- **Board Bylaws, Policy Statement 1.3, Freedom from Undue External Influence.** This policy statement was approved by the Board at its May 18, 2017, meeting and states in part that "the Board will maintain a robust policy on conflicts of interest in adherence with applicable state law, will educate Trustees through various means on their obligations in responding to an actual or perceived conflict of interest, and will
The Board undergoes an orientation to its roles and responsibilities as Trustees, including addressing conflict of interest. Conflict of interest policies are included in the new member packets, mentioned in meetings, and provided when members are asked to sign conflict of interest statements. State legislation requires that the Board attend orientation sessions [11]. At the May 18, 2017, Board meeting, Dr. Robert L. King, the President of the Kentucky Council on Postsecondary Education (CPE), conducted a Board orientation in which he shared that the Board’s fiduciary duty includes an obligation to put the university’s needs above their own, to avoid self-dealing, and to have no conflicts of interest that would interfere with their board role [12].

At two meetings in 2017 trustees abstained from votes because of the potential for a perceived conflict of interest [13] [14]. In the first case, the Board was voting to authorize the Interim President to negotiate the terms of a revised sports arena lease. Two trustees abstained because they had been involved a decade earlier in the original bond financing of that arena. In the second case, during the executive session of the Board meeting, a Trustee abstained from discussing litigation that involved matters handled not by him but by one or two other attorneys in the 190+ person law firm of which he is a partner.

**SUMMARY**

The University of Louisville is in compliance with Comprehensive Standard 3.2.3. The university has a Conflict of Interest Policy that applies to the university’s Board of Trustees and that outlines the guiding principles and procedures used by UofL to identify and manage conflicts of interest. Board members complete conflict of interest statements on an annual basis. Additionally, per *The Redbook* 1.1.3, the Board Chair reads a statement at each meeting reminding members of their responsibility to avoid conflict of interest and the appearance of conflict of interest.

[1] UofL Board of Trustees Signed Conflict of Interest Statements

[1a] UofL Board of Trustees Signed Conflict of Interest Statements (July 2017)
3_2_3_fn01a.pdf

[1b] UofL Board of Trustees Signed Conflict of Interest Statements (January 2018)
3_2_3_fn01b.pdf

[2] Board of Trustees’ Ad Hoc Committee on Governance Charge
3_2_3_fn02.pdf

[3] Board of Trustees Minutes, May 18, 2017, Adoption of Revised Bylaws
3_2_3_fn03.pdf

3_2_3_fn04.pdf

[5] Institutional Conflict of Interest Policy
3_2_3_fn05.pdf

https://sharepoint.louisville.edu/sites/policies/library/SitePages/Administration/Institutional%20Conflict%20of%20Interest%20Policy.aspx
[6] Addressing Institutional Conflict of Interest Policy
3_2_3_fn06.pdf
https://sharepoint.louisville.edu/sites/policies/library/SitePages/Administration/Addressing
%20Institutional%20Conflicts%20of%20Interest%20Policy.aspx

[7] Board of Trustees Conflict of Interest Certification Form in New Member Packet
3_2_3_fn07.pdf

[8] Board of Trustees Bylaws, Section 5.1, Conflict of Interest
3_2_3_fn08.pdf

[9] The Redbook 1.1.3, Voting by the Board/Conflict of Interest
3_2_3_fn09.pdf

[10] Board of Trustees Bylaws, Statement 1.3, Freedom from Undue External Influence
3_2_3_fn10.pdf

3_2_3_fn11.pdf

[12] Board of Trustees Minutes, May 18, 2017, CPE Orientation
3_2_3_fn12.pdf

3_2_3_fn13.pdf

[14] Board of Trustees Minutes, June 15, 2017, Abstaining
3_2_3_fn14.pdf
3.2.4

Governance and Administration: External influence

The governing board is free from undue influence from political, religious, or other external bodies, and protects the institution from such influence.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Not Applicable

The Off-Site Reaffirmation Committee did not review this standard, as the institution’s compliance with this standard will be reviewed by the SACSCOC Board of Trustees at its December 2016 meeting.

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.2.4. The UofL Board of Trustees operates as a free and independent entity and is not controlled by external agencies or entities.

Several Kentucky Revised Statutes provide protection against conflict of interest and external influence. The university also has internal controls related to conflict of interest and external influence.

Kentucky Revised Statutes that Limit External Influence

Kentucky Revised Statutes provide checks on external influence of the Board of Trustees for State institutions. On March 15, 2017, the Kentucky General Assembly passed Senate Bill 107 (signed into law by the Governor on March 21, 2017) [1], which amended several statutes related to institutions of higher education in Kentucky. The protections enacted under SB 107 are included in the information provided below.

- **Membership of the UofL Board of Trustees.** Kentucky Revised Statute 164.821 outlines the membership terms of the UofL Board of Trustees [2]. KRS 164.335 specifies that members of the General Assembly cannot serve on university governing Boards [3].

- **State Senate Confirmation of Governor-Appointed Board Members.** KRS 164.821 [4] states that “The members appointed by the Governor shall be subject to confirmation by the Senate.”

- **Staggered Terms.** KRS 164.821 states that “The gubernatorial appointments shall serve a term of six (6) years and until their successors are appointed and qualified, except the initial terms shall be as follows:

  (a) Two (2) members shall serve one (1) year terms;
  (b) Two (2) members shall serve two (2) year terms;
  (c) Two (2) members shall serve three (3) year terms;
  (d) Two (2) members shall serve four (4) year terms;
(e) One (1) member shall serve a five (5) year term;
(f) One (1) member shall serve a six (6) year term.” [5]

- **Term Limits:** KRS 164.821(1)(c) requires that “New appointees to the board shall not serve more than two (2) consecutive terms” [6].

- **Proportional Representation.** KRS 164.821 states that the Governor is to make his appointments to the Board reflect the proportional representation of the two leading political parties in the state based on voter registration and the minority racial composition of the Commonwealth of Kentucky.

  The Governor shall make his at-large appointments so as to divide the appointed representation upon the board to reflect: (a) The proportional representation of the two (2) leading political parties in the Commonwealth based on the state’s voter registration; and (b) No less than the proportional representation of the minority racial composition of the Commonwealth based on the total minority racial population using the most recent census or estimate data from the United States Census Bureau. If the determination of proportional minority representation does not result in a whole number of minority members, it shall be rounded up to the next whole number. [7]

- **Nominating Committee.** The Governor’s Postsecondary Education Nominating Committee (GPENC) prepares a slate of names for consideration by the Governor in making appointments to Boards. KRS 164.005 specifies the guidelines to be used by the GPENC when identifying individuals recommended to the Governor for service on the various Boards. Section 6 of the statute says: “In making its nominations, the committee shall consider the needs of the respective institutions, locate potential appointees, review candidates’ qualifications and references, conduct interviews, and carry out other search and screening activities as necessary” [8]. The GPENC collects conflict of interest information on nominees before forwarding nominees’ names to the Governor. The role of the GPENC is another protection against undue external influence.

- **Conflict of Interest.** KRS 164.830 (1)(a) states that “No relative of a board of trustee member shall be employed by the university” [9]. KRS 45A.340 states that a Trustee may not have an interest in any contract with the university unless the contract has been subject to competitive bidding and the Trustee is the lowest bidder and the Trustee in advance of submitting the bid has notified in writing the remaining members of the Board and the newspaper with the largest circulation in the county where the university is located of the intention to bid [10]. KRS 164.821(7) states, “Unless specifically approved by the board of trustees under the provisions of KRS 164.367, no member of the teaching or administrative staff of the university shall be directly or indirectly interested in any contract with the university for the sale of property, materials, supplies, equipment, or services, with the exception of compensation to the faculty, staff, and student members” [11].

- **Open Meetings and Open Records.** KRS 61.800 states the policy of KRS 61.805 to 61.850 regarding open meetings of public agencies [12]. Board of Trustees meetings are subject to the Kentucky Open Meetings Act, which includes a prohibition on taking a final action in a closed session [13]. This requirement holds the Board of Trustees accountable to the public and helps to minimize external influence. KRS 61.871 establishes the policy of KRS 61.870 to 61.884 regarding open records of public agencies [14]. KRS 164.830(1) states that “A majority of the voting members of the board shall constitute a quorum for the transaction of business” [15].
- **Board Orientation.** KRS 164.821(a) requires that Board members of state institutions undergo orientation to their duties: “All appointed and elected persons shall be required to attend and complete an orientation and education program prescribed by the council under KRS 164.020(25), as a condition of their service and eligibility for appointment or election to a second term” [16].

The Board orientation provided by the Kentucky Council on Postsecondary Education is comprehensive in that it provides training on important and specific operational aspects of the business functions of the university, as well as the responsibilities of the Board and conflict of interest.

KRS 164.020 (25)(a)(1) reads as follows:

*The Council on Postsecondary Education in Kentucky shall:*

1. Ensure that the orientation and education program comprises six (6) hours of instruction time and includes but is not limited to information concerning the roles of the council and governing board members, the strategic agenda and the strategic implementation plan, and the respective institution's mission, budget and finances, strategic plans and priorities, institutional policies and procedures, board fiduciary responsibilities, legal considerations including open records and open meetings requirements, ethical considerations arising from board membership, and the board member removal and replacement provisions of Section 1 of this Act.* [17]

**University of Louisville Policies that Limit External Influence**

In addition to state statutes, the university has existing institutional protections against conflict of interest and external influence that are applicable to the UofL Board.

- **New Trustee Welcome Packet.** When new Board members are appointed, the Board liaison sends them a New Trustee Welcome Packet that includes, among other items, the Board Bylaws, a conflict of interest letter from the university’s General Counsel, the university’s Institutional Conflict of Interest Policy, information on the Kentucky Open Records and Open Meetings Acts (*Your Duty Under the Law & Managing Government Records*), Oath of Office, Conflict of Interest Statement, Proof of Receipt, and UofL Board of Trustee Conflict of Interest Certification acknowledging that the Trustee has read the UofL Conflict of Interest Policy and certifying that the Trustee’s completed and signed Conflict of Interest Statement is complete and accurate. The Trustee is to sign and date the Oath of Office, Conflict of Interest Statement, Proof of Receipt, and the Conflict of Interest Certification [18].

- **University of Louisville Board of Trustees Bylaws, Policy Statement 1.3, Freedom from Undue External Influence (established in 2007).**

*The Board of Trustees is free of undue influence from political, religious, or other external bodies and is committed to protecting the institution from any such influence. In support of this commitment, the Board will maintain a robust policy on conflict of interest in adherence with applicable state law, will educate Trustees through various means on their obligations in responding to an actual or perceived conflict of interest, and will review Board conflict of interest policies periodically to ensure that they remain up-to-date. In addition, as noted in Operational Guideline 2.1 below, all Trustees will attend orientation*
organized through the Kentucky Council on Postsecondary Education that will highlight, among other matters, the University’s strategic agenda and the strategic implementation plan, its mission, its policies, procedures, and priorities, board fiduciary responsibilities, legal considerations including open records and open meetings requirements, and ethical considerations arising from Board membership. The Board will also maintain membership in the Association of Governing Boards so that it has ready access to information regarding best practices for board governance. As noted in Article 3 of the By-Laws, the Board has in place a detailed policy by which individual Trustees can be dismissed or, in compelling circumstances, the entire Board of Trustees removed for limited and appropriate reasons and by a fair process that provides for notice and the right to be heard. [19]

Board members receive the Board of Trustees Bylaws in their new Board member materials [20], which includes the Freedom from Undue External Influence policy statement.

- **Removal of Board Members.** UofL Bylaws Article 3, Section 1 covers the dismissal of Board members [21]. Section 3.2 covers dismissal in order to meet the requirements of proportional representation as required by Kentucky Revised Statutes. Section 3.3 covers dismissal of the entire Board. The Redbook, Sec. 1.1.7, Removal of Board of Trustees, has been revised to say, “Pursuant to state law and Article 3 of the Board’s By-Laws, individual trustees can be dismissed or, in compelling circumstances, the entire Board of Trustees removed for limited and appropriate reasons and by a fair process that provides for notice and the right to be heard” [22].

- **Board Orientation.** In adhering to state laws, the members of the Board of Trustees will attend orientation covering statutory authority, conflict of interest, fiduciary responsibilities, and other knowledge crucial to their governance roles. The Board Bylaws Operational Guideline 2.1 states: “All new Trustees will attend a formal orientation as soon as practicable after being appointed to the Board” [23].

The Bylaws also contain the following Policy Statement 1.3:

> all Trustees will attend orientation organized through the Kentucky Council on Postsecondary Education that will highlight, among other matters, the University’s Strategic Agenda and the strategic implementation plan, its mission, its policies, procedures, and priorities, board fiduciary responsibilities, legal considerations including open records and open meetings requirements, and ethical considerations arising from Board membership. [24]

An hour of orientation by CPE president Robert King for the current UofL Board of Trustees took place at the May 18, 2017, Board meeting [25]. CPE also hosts a biennial Governor’s Conference on Postsecondary Education Trusteeship [26] that provides Board members the opportunity to engage with state and national experts on the latest postsecondary issues and trends and to network with Board colleagues from other campuses. The mandatory state-level orientation program for Board members is offered at the conference. Online orientation modules are also available.

On June 15, 2017, CPE approved the university’s comprehensive Board of Trustees Orientation Agenda [27], which will be incorporated into UofL Board meetings throughout the year. Orientation on the Board’s fiduciary responsibilities was conducted by Board member Bonita Black at the Board’s Annual Meeting on July 20, 2017 [28].
• **Board of Trustees Member Voting.** *The Redbook*, Section 1.1.3, states: "Each member of the Board of Trustees shall have a full and independent right to vote upon matters coming before the Board, pursuant to the procedures set out in the Board’s By-Laws" [29]. The Board of Trustees Bylaws, Section 2.4, states: "A majority of all the Trustees constitute a quorum of the board, which will act by a majority of those present at a meeting at which a quorum is present" [30].

• **Conflict of Interest.** The university’s Institutional Conflict of Interest Policy applies to Board members and requires that they disclose any known conflict of interest [31]. Board members receive the university’s Institutional Conflict of Interest Policy and the Conflict of Interest Disclosure Statement in their New Trustee Welcome Packet, and Trustees are required to sign, date, and return the Conflict of Interest Disclosure Statement and a certification that the information submitted is accurate. The policy and the Conflict of Interest Disclosure Statement are also provided to members at the Board’s Annual Meeting. State-mandated Board orientation provided by the institution and the Kentucky Council on Postsecondary Education also covers conflict of interest.

The Board Bylaws and *The Redbook* also provide policies and procedures related to conflict of interest:

• **Board of Trustees Bylaws, Section 5.1, Conflict of Interest.** Section 5.1 of the Board’s Bylaws outlines the guidelines for Board members regarding known conflicts of interest.

  All Trustees shall disclose any known conflict of interest and shall avoid participating in any decision or advocating any subject matter before the Board in which the Trustee, a business in which the Trustee is an owner or an employee, or a member of the immediate family of a Trustee has a conflict of interest. When a Trustee learns that a business transaction presents a conflict of interest, that Trustee must make an immediate, full disclosure to the Board of his or her interest in the subject. The Trustee shall not participate in any discussion of or decision on the issue. Disclosures are necessary for business transactions which would result in conflict of interest. Failure of a Trustee to make a disclosure shall void any resulting agreement at the option of the University. University remuneration to a faculty or staff Trustee and financial aid to a student Trustee shall not be considered a financial or other conflict of interest. Conflicts of interest shall be dealt with in accordance with state statutes. [32]

• **The Redbook, Section 1.1.3** requires the Chair of the Board of Trustees to remind all Trustees that it is their responsibility to avoid conflicts of interest and to make any conflicts of interest known before involvement in the voting of the Board on any items related to the conflict.

  The Chair of the Board of Trustees shall begin each meeting of the Board with the following statement: "As Chair, it is my responsibility to remind all members of the Board of their responsibility to avoid conflicts of interest and appearances of conflict of interest. Each member has received the agenda and related information for this Board of Trustees’ meeting. If any Board member knows of any conflict of interest or appearance of conflict of interest with respect to any
matter coming before the Board of Trustees at this meeting, please identify the conflict or appearance of conflict at this time.”

All trustee conflict of interest statements or similar disclosure documents and any conflict of interest or appearance of a conflict of interest identified by a trustee, whether at a meeting or otherwise, shall be referred to the Board’s governance committee for review. If a determination is made that further action is needed, a recommendation for further action will be communicated to the involved trustee(s) and to the Board Chair. If a member of the governance committee has a substantial interest in the matter that has been disclosed, then the matter may instead be referred for review and recommendation to the Board’s Executive Committee or to an ad hoc committee of no less than three members of the Board of Trustees. [33]

- University of Louisville Board of Trustees Bylaws, Ethics Statement (Policy Statement 1.1) states:

  In all matters entrusted to the Board of Trustees of the University of Louisville, the Board, individually and collectively, is committed: to carry out its responsibilities in accordance with the laws of the Commonwealth; to act with care and make informed decisions; to comply with University policies applicable to the Board of Trustees; to refrain from actions which put a Trustee’s personal or professional interests in conflict with that of the University and to abstain from any action or vote where appropriate; and, to avoid the use of Trustee appointment to obtain any private benefit. Further, neither the Chair of the Board nor a majority of Trustees shall have a contractual, employment, or personal financial interest in the University. [34]

- UofL Code of Conduct. Effective November 2009, the Board approved and adopted the university’s Code of Conduct [35], which applies to the institution, its Board members, and all other university community members. The code addresses guiding principles and standards of conduct, including transparency, integrity, ethical considerations, objectivity, and impartiality in decision-making.

  The UofL Code of Conduct holds all members of the university, including the Board of Trustees, to the following standards of conduct:

  o Act ethically and with integrity
  o Be fair and respectful to others
  o Manage responsibly
  o Protect and preserve university resources
  o Promote a culture of compliance
  o Preserve academic freedom and meet academic responsibilities
  o Ethically conduct teaching and research
  o Avoid conflicts of interest and commitment
  o Carefully manage public, private, and confidential information
  o Promote health and safety in the workplace

**Independent Function of the UofL Board of Trustees**

The Board works independently to exercise its mandated authority over the institution. The Board approves personnel actions, promotion and tenure decisions, and the granting of degrees; receives reports from university constituencies; evaluates the president; approves
the university’s operating budget; and guides, supports, and evaluates the university’s efforts toward its strategic agenda; among many other tasks.

The Board of Trustees and its various committees meet regularly to carry out the Board’s governance function and to receive reports and information from the president and other administrators. The UofL Board has diligently performed its state-mandated responsibilities in exercising independent control of the institution.

UofL Board members are regularly informed of their conflict of interest responsibilities and, per The Redbook revisions approved on June 15, 2017, the chair of the Board at each meeting reminds the membership by stating, "As Chair, it is my responsibility to remind all members of the Board of their responsibility to avoid conflicts of interest and appearances of conflict of interest. Each member has received the agenda and related information for this Board of Trustees’ meeting. If any Board member knows of any conflict of interest or appearance of conflict of interest with respect to any matter coming before the Board of Trustees at this meeting, please identify the conflict or appearance of conflict at this time” [36]. This policy reminds all Trustees that it is their responsibility to guard against external influences or any situation that would result in a conflict of interest.

More information about the UofL Board of Trustees is available online at http://louisville.edu/president/board-of-trustees.

SUMMARY

The University of Louisville is in compliance with Comprehensive Standard 3.2.4, and the UofL Board policies are in alignment with state laws and regulations. The Board operates as a free and independent entity that is focused on the well-being of the university and is not controlled by external agencies or entities. As Board meeting minutes document, the Board has independently conducted its assigned administrative, academic, and fiduciary duties. UofL also has institutional policies and procedures that work to limit external influence.

This standard was reviewed by the SACSCOC Special Committee in September 2017. No recommendations related to Comprehensive Standard 3.2.4 were forwarded to the SACSCOC Compliance and Records (C&R) Committee. The University of Louisville was removed from probation in December of 2017.

[1] Senate Bill 107, An Act Relating to Gubernatorial Appointments
3_2_4_fn01.pdf

[2] Kentucky Revised Statute 164.821 Board of Trustees of University of Louisville -- Membership -- Terms
3_2_4_fn02.pdf

[3] KRS.164.335, General Assembly Member Cannot Serve
3_2_4_fn03.pdf

[4] KRS 164.821, Senate Confirmation of Governor Appointed Board members
3_2_4_fn04.pdf

[5] KRS 164.821, Staggered Terms for UofL Board of Trustees Appointments
3_2_4_fn05.pdf

[6] KRS 164.821(1)(c), Board Term Limits
3_2_4_fn06.pdf
[7] KRS 164.821, Proportional Representation of Board of Trustees
3_2_4_fn07.pdf

[8] KRS 164.005, Governor’s Postsecondary Education Nominating Committee
3_2_4_fn08.pdf

[9] KRS 164.830(1)(a), No Relative of Board of Trustees Members Employed by University
3_2_4_fn09.pdf

[10] KRS 45A.340, No Interest in Contracts with University
3_2_4_fn10.pdf

[11] KRS 164.821(7), Teaching and Administrative Staff
3_2_4_fn11.pdf

[12] KRS 61.800, Open Meetings
3_2_4_fn12.pdf

[13] Kentucky Open Meetings and Open Records Laws
3_2_4_fn13.pdf

3_2_4_fn14.pdf

[15] KRS 164.830(1), Quorum of the Board
3_2_4_fn15.pdf

[16] KRS 164.821(a), Board Orientation
3_2_4_fn16.pdf

[17] KRS 164.020(25)(a)(1), Kentucky Council on Postsecondary Education Orientation for Board of Trustees
3_2_4_fn17.pdf

[18] New Trustee Welcome Packet Example
3_2_4_fn18.pdf

[19] UofL Board of Trustees Bylaws, Policy Statement 1.3, Freedom from Undue External Influence
3_2_4_fn19.pdf

[20] Board of Trustees New Member Packet Checklist
3_2_4_fn20.pdf

[21] Board of Trustees Bylaws, Article 3, Removal of Trustees
3_2_4_fn21.pdf

[22] The Redbook, Section 1.1.7, Removal of Trustees
3_2_4_fn22.pdf

[23] Board of Trustees Bylaws, Operational Guideline 2.1, Board Orientation
3_2_4_fn23.pdf

[24] Board of Trustees Bylaws, Policy Statement 1.3, Board Orientation
3_2_4_fn24.pdf

[25] Board of Trustees Minutes, May 18, 2017, CPE Orientation
3_2_4_fn25.pdf

[26] Governor’s Conference on Postsecondary Education Trusteeship
3_2_4_fn26.pdf

[27] CPE-Approved UofL Board of Trustees Orientation Agenda
3_2_4_fn27.pdf

[28] BOT Fiduciary Responsibility Presentation, 7-20-2017
3_2_4_fn28.pdf

[29] The Redbook, Section 1.1.3, BOT Independent Right to Vote
3_2_4_fn29.pdf

[30] Board of Trustees Bylaws, Section 2.4, Quorum
3_2_4_fn30.pdf

[31] University of Louisville Institutional Conflict of Interest Policy
3_2_4_fn31.pdf

[32] Board of Trustees Bylaws, Section 5.1, Conflict of Interest
3_2_4_fn32.pdf

[33] The Redbook, Section 1.1.3, Conflict of Interest
3_2_4_fn33.pdf

[34] Board of Trustees Bylaws Policy Statement 1.1, Ethics Statement
3_2_4_fn34.pdf

[35] UofL Code of Conduct
3_2_4_fn35.pdf

[36] The Redbook, Section 1.1.3, Conflict of Interest
3_2_4_fn36.pdf
3.2.5

Governance and Administration: Board dismissal

The governing board has a policy whereby members can be dismissed only for appropriate reasons and by a fair process.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Not Applicable

The Off-Site Reaffirmation Committee did not review this standard, as the institution’s compliance with this standard will be reviewed by the SACSCOC Board of Trustees at its December 2016 meeting.

Judgment

☑ Compliance □ Partial Compliance □ Non-Compliance □ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.2.5. The UofL governing board has a policy whereby members can be dismissed only for appropriate reasons and by a fair process.

On March 15, 2017, the Kentucky General Assembly passed Senate Bill 107 (signed into law by the Governor on March 21, 2017) [1], which identified the basis upon which individual members or entire boards for all Kentucky public institutions of higher education could be dismissed and set in place procedures for the involvement of the Kentucky Council on Postsecondary Education (CPE) in board dismissal [2]. Board of Trustees members are to be given written notice by the governor and have the opportunity to provide evidence to CPE. CPE is to investigate and make a recommendation to the governor regarding the merits of the dismissal.

SB 107, Section 1 amended KRS 63.080 [3] to provide for removal of individual Board members or for removal of an entire Board. The language from KRS 63.080 related to each is provided below.

KRS 63.080 Officers appointed by Governor may be removed without cause -- Exceptions -- Removal of university or KCTCS board members for cause or to comply with proportional representation requirements.

[Removal of Individual Members]

(1) Except as provided in subsection (2) of this section and otherwise provided by law, any person appointed by the Governor, either with or without the advice and consent of the Senate, may be removed from office by the Governor for any cause the Governor deems sufficient, by an order of the Governor entered in the executive journal removing the officer.

(2) (a) Except as provided in subsections (3) and (4) of this section, members of the board of trustees of the University of Kentucky, the board of trustees of the University of Louisville, members of the board of regents respectively of Eastern Kentucky University, Western Kentucky University, Morehead State University, Kentucky State University, Northern Kentucky University, Murray State University, and the Kentucky Community and Technical College System shall not be removed except for cause.
(b) Members of the Kentucky Board of Education and the Council on Postsecondary Education shall not be removed except for cause.

(c) A member of a board of trustees or board of regents specified in paragraph (a) of this subsection may be removed for cause as follows:

1. The Governor or the board of trustees or board of regents, as applicable, shall notify, in writing, the member and the Council on Postsecondary Education that the member should be removed for cause and shall specify the conduct warranting removal;

2. The member shall have seven (7) days to voluntarily resign or to provide evidence to the Council on Postsecondary Education that the member’s conduct does not warrant removal;

3. Within thirty (30) days after receipt of notice from the Governor or the board, the Council on Postsecondary Education shall review the written notice, investigate the member and the conduct alleged to support removal, and make a nonbinding recommendation, in writing, to the Governor as to whether the member should be removed, a copy of which shall also be provided to the Legislative Research Commission;

4. The Governor shall then make a determination, in writing, whether the member should be removed and shall notify the member, the applicable board, the Council on Postsecondary Education, and the Legislative Research Commission of the determination; and

5. If the Governor's determination is to remove the member, the Governor shall remove the member by executive order, and shall replace the member with a new appointment according to the applicable statutes for the board of trustees or board of regents.

(d) For the purposes of this subsection, a member may be removed for cause for conduct including but not limited to malfeasance, misfeasance, incompetence, or gross neglect of duty.

(3) For a board specified in subsection (2)(a) of this section that is required by law to have proportional representation in its membership based on residence, political affiliation, gender, minority racial composition, or professional qualifications, the Governor or other appointing authority may remove any member of the board and replace him or her with another individual in order to bring the membership into compliance with the statutory proportional representation requirement for the board, provided that the Governor or other appointing authority shall:

(a) Only exercise the removal authority granted in this subsection if appointment at the end of the next expiring term of a member, or at the end of the next expiring term of members if two (2) or more members' terms expire at the same time, cannot cure the deficiency in the proportional representation requirement;

(b) Remove the fewest number of members necessary to bring the membership into compliance with the proportional representation requirement for the board;

(c) Identify the order in which the members were appointed to their current terms on the board and, beginning with the most recently appointed member who may be
removed and replaced to bring the membership into compliance with the proportional representation requirement, remove the member or members according to the length of their tenure on the board, without taking into account any prior term of service on the board by the member;

(d) Provide any member proposed to be removed with the following:

1. Written notice, at least seven (7) days prior to the member’s removal from the board, stating the statutory proportional representation requirement that the member does not satisfy; and

2. An opportunity during the seven (7) day notice period for the member to voluntarily resign or to provide evidence to the Governor or other appointing authority that the member does satisfy the proportional representation requirement or that another member on the board who also does not satisfy the requirement has a shorter tenure than the member proposed to be removed;

(e) Replace any removed member with only those individuals who will bring the board into compliance with the proportional representation requirement; and

(f) Appoint any new member in the same manner as provided by law for the member being removed and to fill the remainder of the removed member’s unexpired term.

[Removal of Entire Board]

(4) For a board of trustees or board of regents specified in subsection (2)(a) of this section, the Governor may remove for cause all appointed members of the board and replace the entire appointed membership as follows:

(a) The Governor shall notify, in writing, the board and the Council on Postsecondary Education that the entire appointed membership of the board should be removed for cause and shall specify the conduct warranting removal;

(b) The board or its members shall have seven (7) days to voluntarily resign or to provide evidence to the Council on Postsecondary Education that the conduct of the board or of individual members does not warrant removal;

(c) Within thirty (30) days after receipt of notice from the Governor, the Council on Postsecondary Education shall review the written notice, investigate the board and the conduct alleged to support removal, and make a nonbinding recommendation, in writing, to the Governor as to whether the appointed board membership should be removed, a copy of which shall also be provided to the Legislative Research Commission;

(d) The Governor shall then make a determination, in writing, whether the entire appointed board membership should be removed and shall notify the members, the Council on Postsecondary Education, and the Legislative Research Commission of the determination; and

(e) If the Governor’s determination is to remove the entire appointed membership of the board, the Governor shall remove the members by executive order, and shall replace the members with new appointments according to the applicable statutes for the board of trustees or board or regents.
For the purposes of this subsection, the entire appointed membership of a board of trustees or board of regents may be removed for cause if the board is no longer functioning according to its statutory mandate as specified in the enabling statutes applicable to the board, or if the board membership's conduct as a whole constitutes malfeasance, misfeasance, incompetence, or gross neglect of duty, such that the conduct cannot be attributed to any single member or members.

KRS 63.080 allows the Governor to remove an individual Board member “for cause for conduct including but not limited to malfeasance, misfeasance, incompetence, or gross neglect of duty” [Section 2(5)(d)]. The Governor may remove an entire appointed membership of a board “if the board is no longer functioning according to its statutory mandate as specified in the enabling statutes applicable to the board, or if the board membership's conduct as a whole constitutes malfeasance, misfeasance, incompetence, or gross neglect of duty, such that the conduct cannot be attributed to any single member or members” [Section 4].

KRS 164.020 states that Board orientation is to cover the board member removal and replacement provisions of KRS 63.080 [4].

University of Louisville Board of Trustees Dismissal Policy

The University of Louisville’s Board of Trustees’ dismissal policy is aligned with the legislation established by SB 107 and makes provision for removal of Board members for appropriate cause and by due process. The university’s dismissal policy is also in compliance with SACSCOC requirements related to Comprehensive Standard 3.2.5.

- Article 3 of the UofL Board of Trustees Bylaws [5] states the UofL Board of Trustee’s dismissal policy (provided below). Section 3.1 covers the dismissal of individual members. Section 3.2 covers dismissal in order to meet the requirements of proportional representation as required by Kentucky Revised Statutes. Section 3.3 covers dismissal of the entire Board.

**ARTICLE 3. REMOVAL OF BOARD OF TRUSTEES**

Sections 3.1, 3.2, and 3.3 below set out the University’s policy by which individual Trustees can be dismissed or, in compelling circumstances, the entire Board of Trustees removed for limited and appropriate reasons and by a fair process that provides for notice and the right to be heard. This process is consistent with the state statutes and University policy.

**Section 3.1. INDIVIDUAL MEMBERS**

(a) Except as provided in Sections 3.2 and 3.3, members of the Board of Trustees shall not be removed except for cause.

(b) A Trustee may be removed for cause as follows:

(1) The Governor or the Board of Trustees shall notify, in writing, the Trustee and the Kentucky Council on Postsecondary Education (the “CPE”) that the Trustee should be removed for cause and shall specify the conduct warranting removal;

(2) The Trustee shall have seven (7) days to voluntarily resign or to provide evidence to the CPE that the Trustee’s conduct does not warrant removal;
Within thirty (30) days after receipt of notice from the Governor or the Board of Trustees, the CPE shall review the written notice, investigate the Trustee and the conduct alleged to support removal and make a nonbinding recommendation, in writing, to the Governor as to whether the Trustee should be removed, a copy of which shall also be provided to the Kentucky Legislative Research Commission (the “LRC”);

The Governor shall then make a determination, in writing, whether the Trustee should be removed and shall notify the Trustee, the Board of Trustees, the CPE and the LRC of the determination; and

If the Governor’s determination is to remove the Trustee, the Governor shall remove the Trustee by executive order, and shall replace the Trustee with a new appointment according to the applicable statutes for the Board of Trustees.

For the purposes of this Section 3.1, a Trustee may be removed for cause for conduct including but not limited to malfeasance, misfeasance, incompetence or gross neglect of duty.

Section 3.2. PROPORTIONAL REPRESENTATION REQUIREMENT

If the Board of Trustees is required by law to have proportional representation in its membership based on residence, political affiliation, gender, minority racial composition or professional qualifications, the Governor may remove any Trustee and replace him or her with another individual in order to bring the membership into compliance with the proportional representation requirement for the Board of Trustees, provided that the Governor shall:

(a) Only exercise the removal authority granted in this Section 3.2 if appointment at the end of the next expiring term of a Trustee, or at the end of the next expiring term of Trustees if two (2) or more Trustees’ terms expire at the same time, cannot cure the deficiency in the proportional representation requirement;

(b) Remove the fewest number of Trustees necessary to bring the membership into compliance with the proportional representation requirement for the Board of Trustees;

(c) Identify the order in which the Trustees were appointed to their current terms on the Board of Trustees and, beginning with the most recently appointed Trustee who may be removed and replaced to bring the membership into compliance with the proportional representation requirement, remove the Trustee or Trustees according to the length of their tenure on the Board of Trustees, without taking into account any prior term of service on the Board of Trustees by the Trustee;

(d) Provide any Trustee proposed to be removed with the following:

(1) Written notice, at least seven (7) days prior to the Trustee’s removal from the Board of Trustees, stating the proportional representation requirement that the Trustee does not satisfy; and

(2) An opportunity during the seven (7) day notice period for the Trustee to voluntarily resign or to provide evidence to the Governor that the Trustee does satisfy the proportional representation requirement or that
another Trustee on the Board of Trustees who also does not satisfy the requirement has a shorter tenure than the Trustee proposed to be removed;

(e) Replace any removed Trustee with only those individuals who will bring the Board of Trustees into compliance with the proportional representation requirement; and

(f) Appoint any new Trustee in the same manner as provided by law for the Trustee being removed and to fill the remainder of the removed Trustee’s unexpired term.

Section 3.3. ENTIRE MEMBERSHIP
The Governor may remove for cause all appointed Trustees of the Board of Trustees and replace the entire appointed membership as follows:

(a) The Governor shall notify, in writing, the Board of Trustees and the CPE that the entire appointed membership of the Board of Trustees should be removed for cause and shall specify the conduct warranting removal;

(b) The Board or its Trustees shall have seven (7) days to voluntarily resign or to provide evidence to the CPE that the conduct of the Board of Trustees or of individual Trustees does not warrant removal;

(c) Within thirty (30) days after receipt of notice from the Governor, the CPE shall review the written notice, investigate the Board of Trustees and the conduct alleged to support removal and make a nonbinding recommendation, in writing, to the Governor as to whether the appointed membership of the Board of Trustees should be removed a copy of which shall also be provided to the LRC;

(d) The Governor shall then make a determination, in writing, whether the entire appointed membership of the Board of Trustees should be removed and shall notify the Trustees, the CPE and the LRC of the determination;

(e) If the Governor’s determination is to remove the entire appointed membership of the Board of Trustees, the Governor shall remove the Trustees by executive order, and shall replace the Trustees with new appointments according to the applicable statutes for the Board of Trustees; and

(f) For the purposes of this Section 3.3, the entire appointed membership of the Board of Trustees may be removed for cause if the Board of Trustees is no longer functioning according to its statutory mandate as specified in the enabling statutes applicable to the Board of Trustees, or if the Board’s conduct as a whole constitutes malfeasance, misfeasance, incompetence or gross neglect of duty, such that the conduct cannot be attributed to any single Trustee or Trustees. The inability of the Board of Trustees to hold regular meetings, to elect a chair annually, to establish a quorum, to adopt an annual budget, to set tuition rates, to conduct an annual evaluation of the President, to carry out its primary function to periodically evaluate the University’s progress in implementing its mission, goals, and objectives to conform to the strategic agenda or to otherwise perform its duties under Kentucky Revised Statutes Section 164.830 shall be cause for the Governor to remove all appointed Trustees and replace the entire appointed membership pursuant to this Section 3.3 and applicable law.
• Sec. 1.1.7 of *The Redbook* (the university’s governance document) states, “*Pursuant to state law and Article 3 of the Board’s By-Laws, individual trustees can be dismissed or, in compelling circumstances, the entire Board of Trustees removed for limited and appropriate reasons and by a fair process that provides for notice and the right to be heard*” [6].

When new Trustees are appointed, the Board’s liaison sends them a New Trustee Welcome Packet that includes, among other items, a copy of the Board of Trustees Bylaws, which contains the board dismissal policy [7]. Board members are also notified about the dismissal policy in the state-mandated board orientation provided by the institution and the Kentucky Council on Postsecondary Education (CPE).

To date, no Board dismissals have taken place following this policy.

**SUMMARY**

In compliance with SACSCOC Comprehensive Standard 3.2.5, the University of Louisville’s governing board has a policy whereby members can be dismissed only for appropriate reasons and by a fair process. The Board of Trustees’ Bylaws include the university’s Board dismissal policy, which is in alignment with Kentucky State Statutes as amended by SB 107.

Section 3.1 of the Bylaws covers the dismissal of individual members. Section 3.2 covers dismissal in order to meet the requirements of proportional representation as required by Kentucky Revised Statutes. Section 3.3 covers dismissal of the entire Board. UofL’s governance document, *The Redbook* (Section 1.1.7), makes note of the Board of Trustees’ dismissal policy as stated in Article 3 of the Board Bylaws.

Trustees are informed of the dismissal policy in their New Trustees Welcome Packet and on an ongoing basis through the state-mandated board orientation completed with the support and coordination of the Kentucky Council on Postsecondary Education.

This standard was reviewed by the SACSCOC Special Committee in September 2017. No recommendations related to Comprehensive Standard 3.2.5 were forwarded to the SACSCOC Compliance and Records (C&R) Committee. The University of Louisville was removed from probation in December of 2017.

[1] Senate Bill 107, An Act Relating to Gubernatorial Appointments 3_2_5_fn01.pdf

[2] SB 107, Section 1, Appointment and Dismissal of Board of Trustees 3_2_5_fn02.pdf

[3] KRS 63.080, Officers appointed by Governor may be removed without cause--Exceptions--Removal of university or KCTCS board members for cause or to comply with proportional representation requirements 3_2_5_fn03.pdf


[5] Article 3 of UofL Board of Trustees Bylaws 3_2_5_fn05.pdf
[6] The Redbook, Sec. 1.1.7, Removal of Board of Trustees
3_2_5_fn06.pdf

3_2_5_fn07.pdf
3.2.8

Governance and Administration: Qualified administrative/academic officers

The institution has qualified administrative and academic officers with the experience and competence to lead the institution.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The Off-Site Reaffirmation Committee’s review of the institution’s organizational chart, job descriptions, biographies, and curriculum vitae of the institution’s administrative and academic officers, including those of its Executive Vice Presidents and Provost, Vice Presidents, and Deans indicate that the institution has effective leadership to accomplish its mission, in the President’s Office and in the Academic Units. The institution has provided sufficient evidence and detail showing appropriate credentials and expertise for the majority of its key decision makers (Executive Vice Presidents, Vice Presidents, Provost, and Deans), including prior and increasingly responsible experience. In addition, policies on duties, appointment, and review of the institutions’ administrators and academic officers are provided in The Redbook, The institution’s basic governance document. Many of these academic and administrative officers have been granted recognition and awards in their respective fields, and have published in prominent refereed journals. However, the Off-Site Reaffirmation Committee was unable to find sufficient documented evidence and indicators of qualifications and experience, such as biographical information and CV’s, for most of the key administrative officers (Vice Provosts) in the Provost’s Office. Evidence for only one is provided (the Vice Provost for Student Affairs, who is also the Dean of Students).

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.2.8. UofL has qualified administrative and academic officers with the experience and competence to lead the institution.

The off-site committee notes that it was unable to find sufficient documented evidence and indicators of qualifications and experience for most of the key administrative officers (Vice Provosts) in the Provost’s Office. We have provided documentation of the qualifications of the Provost Office administrators.

Vice Provosts reporting to the Executive Vice President and University Provost

The provost has eight direct reports—seven vice provosts and an associate provost [1]. All eight positions are filled by permanent appointments.

- Beth A. Boehm

Vice Provost for Academic Affairs
[2a] [2b] [2c]

The Vice Provost for Academic Affairs is responsible for general education and undergraduate programs as well as interdisciplinary and graduate programs.
vice provost works closely with the Vice Provost for Strategic Enrollment Management and Student Success and the undergraduate deans in support of the university’s undergraduate programs, and with the graduate deans and unit faculties in support of the university’s graduate programs.

Dr. Beth Boehm received her Ph.D. in English from Ohio State University and joined the faculty of the University of Louisville as an assistant professor of English in 1987. She has been Dean of the School of Interdisciplinary and Graduate Studies since 2009 and has been a university vice provost since 2011.

While at UofL, Boehm has served in a variety of administrative and academic roles, including director of undergraduate studies and director of graduate studies in the Department of English, as vice chair of English, and as both vice chair and chair of the university’s Faculty Senate.

Boehm was twice awarded the College of Arts and Sciences Distinguished Teaching Award and was selected as a University Distinguished Teaching Professor in 2003. In 2009, she was awarded for her distinguished service by both the college and the university. In 2014-15, she was selected as one of 24 participants in the Academy for Innovative Higher Education Leadership sponsored by Arizona State University and Georgetown University.

- **Mordean Taylor-Archer**

  Vice Provost for Diversity and International Affairs

  The Vice Provost for Diversity and International Affairs oversees diversity initiatives at the university on all levels. She has oversight of several programs, institutes and centers, and student organizations, including the Cultural Center, the Office of Diversity Education and Inclusive Excellence, the International Center, the LGBT Center, the Muhammad Ali Institute for Peace and Justice, and the Women’s Center.

  Dr. Mordean Taylor-Archer has over 30 years of administrative leadership experience in higher education, having served as an assistant dean at Virginia Commonwealth University, an Associate Provost at Kansas State University, and as a vice provost at the University of Louisville beginning in 2001. Taylor-Archer received her Ph.D. from Brandeis University in 1979.

  Under Taylor-Archer’s leadership, UofL has received the Higher Education Excellence in Diversity (HEED) Award and the Minority Access Commitment to Diversity Award in 2014 and 2015. In addition, UofL has recently been recognized as one of the most LGBT friendly universities in the South by Campus Pride.

  Taylor-Archer serves as liaison and representative to the Kentucky Council on Postsecondary Education's (CPE) Committee on Equal Opportunity (CEO), APLU’s Commission on Access, Diversity and Excellence (CADE), and she is active in various community organizations.

- **Tracy Eells**

  Vice Provost for Faculty Affairs
The Vice Provost for Faculty Affairs works with the provost and academic deans to oversee all faculty personnel actions and to provide faculty and administrator professional development programs.

Tracy Eells has served as Vice Provost for Faculty Affairs since 2011. He has been a member of the faculty of the University of Louisville for 25 years. He received his Ph.D. from the University of North Carolina at Chapel Hill in 1989 and also holds an M.B.A. from the University of Louisville.

Eells's primary area of scholarship is psychotherapy research, particularly clinical expertise in case formulation and computer-assisted cognitive-behavior therapy for depression. He has also published on academic issues such as promotion and tenure and post-tenure review. He was a visiting professor at the Vietnam National University (Hanoi) in 2010 and was named a fellow of the American Psychological Association Society for the Advancement of Psychotherapy in 2011.

Eells is a licensed psychologist in the Commonwealth of Kentucky (KY-00839).

- **Jim Begany**

  Vice Provost for Strategic Enrollment Management and Student Success

  The Vice Provost for Strategic Enrollment Management and Student Success has the overall strategic and tactical responsibility for undergraduate recruitment, retention, advising practice, and collaboration with academic unit-based advisors and academic support programs.

  James Begany has over 25 years of experience working in fields related to enrollment management, with the last fourteen at the executive leadership level of comprehensive public universities. He holds a Master of Science degree in Computer Information Systems.

  Begany joined the University of Louisville in October 2016 following a national search, having served as Vice President for Enrollment Management and Communication for almost 10 years at Indiana University of Pennsylvania (IUP) prior to coming to UofL. At IUP, Begany was responsible for the creation of a division focused on student recruitment and communications and oversaw programs that resulted in significant enrollment growth. In addition to his enrollment management experience, Begany has executive experience in the areas of financial aid and institutional research.

- **Bob Goldstein**

  Vice Provost for Institutional Research, Effectiveness, and Analytics

  The Vice Provost for Institutional Research, Effectiveness and Analytics supports several key university-wide functions, including institutional research, data analytics and visualization, strategic planning, and institutional effectiveness. Together with the Assistant University Provost/SACSCOC liaison the Vice Provost is also responsible for all matters concerning institutional accreditation.
Robert S. Goldstein joined the University of Louisville in 2004 as the Director of Institutional Research and Planning. He was appointed associate provost in 2008 and vice provost in 2013. He received his Master of Public Health degree in Biostatistics and Epidemiology from the Boston University School of Medicine/Public Health in 1990. Prior to working at UofL, Goldstein served as the director of epidemiology and immunization at the Massachusetts Department of Public Health.

Goldstein has been an active presenter at numerous national conferences. He is a member of the Association for Institutional Research (AIR) and the Kentucky Association for Institutional Research (KAIR). He held several executive leaderships within KAIR from 2009-2012. He serves as the university liaison to the Kentucky Council on Postsecondary Education (CPE) on academic-specific data matters and issues related to academic program approval and review. Additionally, Goldstein serves as the institutional representative on the Kentucky Council on Postsecondary Education’s Performance Funding Model Workgroup and the 2016-2020 Statewide Strategic Metric Advisory Group.

- **Michael Mardis**

  Vice Provost for Student Affairs; Chief Student Affairs Officer

  The Vice Provost for Student Affairs/Dean of Students is the chief student affairs officer for the University of Louisville, overseeing campus housing, career services, counseling, disabilities, student support services, student involvement, recreational sports, the Student Activities Center, student government, fraternity and sorority life, student rights and responsibilities, the dean of students office, off-campus student programs, service learning, assessment and planning, student grievance, and student advocacy.

  Dr. James Michael Mardis has more than nineteen years of professional experience working in Student Affairs. He returned to the University of Louisville in July 2007 as the Associate Vice President for Student Affairs and Dean of Students, having spent five years at Radford University where he was both Dean of Students and an associate vice president. Mardis completed his Ph.D. in Higher Education Administration in 2007.

  A 1999 graduate of the Gehring Institute, Mardis previously served as the site coordinator and faculty member for the NASPA/SACSA New Professionals Institute, was the NASPA Kentucky Director for three years, and served on the NASPA Region III Board. He served two years as the ASCA National Coordinator for Communities of Practice on Threat Assessment and Behavioral Intervention Teams. Mardis also served as the NASPA Excellence Award Chair for Violence Education and prevention, Crisis Management, and Campus Security.

  An active presenter at national conferences, webinars and regional conferences, Mardis speaks on a wide range of topics related specifically to student affairs and higher education. He has served as an adjunct instructor for graduate programs at Radford University and the University of Louisville.

- **Susan Howarth**

  Vice Provost and Chief Budget Officer

  UofL Focused Report (2018), p. 54
The Vice Provost and Chief Budget Officer is responsible for all aspects of strategic and operational financial planning, budgeting, financial analysis, position management, regulatory reporting, and management reporting and analyses to assist the university to accomplish its strategic mission and goals.

Susan Howarth has almost 30 years of experience in enterprise-wide finance and administration. She has functioned as the university’s senior budget official since 2003. She currently is also appointed as the university’s interim CFO. Howarth served as an associate vice president from 2013-2016 and has been a vice provost since 2016 when the Office of Budget and Financial Planning was transferred to the Office of the Provost.

Howarth has served as a guest lecturer for the UofL College of Education and Human Development on topics related to budgeting in higher education.

- **Gale Rhodes**

Associate Provost for the Delphi Center
[9a] [9b] [9c]

The Associate University Provost and Executive Director of the Delphi Center is responsible for the management of all university programs supporting teaching and learning, leadership in the promotion of the effective use of technology in instruction, all distance education programs, and continuing and professional education and assumes responsibility for over 50 professional staff and an $8+ million annual budget. Responsibilities also include oversight of the Shelby Campus, the suburban campus of the University of Louisville used primarily for continuing education instruction. The associate provost also has oversight for the university’s Quality Enhancement Plan (QEP) program.

Dr. Gale Rhodes has over 40 years of higher education experience, including 25 years of experience in leadership roles. She came to the University of Louisville in 1987, having previously worked at both the University of Central Arkansas and Mississippi State University. She received her Doctor of Education (Ed.D.) degree from the University of Louisville in 1994.

She has been director of the University of Louisville’s Delphi Center for Teaching and Learning since 2002. She was named an associate provost in 2008. She has also served as an adjunct professor in both the College of Business and the College of Education and Human Development at UofL.

**SUMMARY**

The University of Louisville is in compliance with Comprehensive Standard 3.2.8. The senior academic leadership serving under the Executive Vice President and University Provost possesses the qualifications, credentials, and expertise to properly serve in the roles to which they are appointed. The curriculum vitae (CV) or résumé for all positions listed in this report are provided as documentation.

[1] Provost Office Organizational Chart 3_2_8_fn01.pdf

[2] Vice Provost-Academic Affairs—Boehm
[2a] Job Responsibilities
3_2_8_fn02a.pdf
http://louisville.edu/provost/who-we-are/academic-affairs

[2b] Bio
3_2_8_fn02b.pdf
http://louisville.edu/provost/who-we-are/academic-affairs/boehm

[2c] CV
3_2_8_fn02c.pdf
http://louisville.edu/provost/who-we-are/academic-affairs/CV-Boehm.pdf

[3] Vice Provost-Diversity International Affairs--Taylor-Archer

[3a] Job Responsibilities
3_2_8_fn03a.pdf
http://louisville.edu/provost/who-we-are/diversity

[3b] Bio
3_2_8_fn03b.pdf
http://louisville.edu/provost/who-we-are/diversity/taylor-archer

[3c] CV
3_2_8_fn03c.pdf
http://louisville.edu/provost/who-we-are/diversity/CV-Mordean.pdf

[4] Vice Provost-Faculty Affairs--Eells

[4a] Job Responsibilities
3_2_8_fn04a.pdf
http://louisville.edu/provost/who-we-are/fa

[4b] Bio
3_2_8_fn04b.pdf
http://louisville.edu/provost/who-we-are/fa/eells

[4c] CV
3_2_8_fn04c.pdf
http://louisville.edu/provost/who-we-are/fa/CV-Eells.pdf

[5] Vice Provost-Strategic Enrollment Management and Student Success--Begany

[5a] Job Responsibilities
3_2_8_fn05a.pdf
http://louisville.edu/provost/who-we-are/em

[5b] Bio
3_2_8_fn05b.pdf
http://louisville.edu/provost/who-we-are/em/begany

[5c] CV
3_2_8_fn05c.pdf
http://louisville.edu/provost/who-we-are/em/CV-Begany.pdf

[6a] Job Responsibilities
3_2_8_fn06a.pdf
http://louisville.edu/provost/who-we-are/academic-accountability

[6b] Bio
3_2_8_fn06b.pdf
http://louisville.edu/provost/who-we-are/academic-accountability/robert-goldstein

[6c] CV
3_2_8_fn06c.pdf
http://louisville.edu/provost/who-we-are/academic-accountability/CV-Goldstein.pdf

[7] Vice Provost-for Student Affairs (Chief Student Affairs Officer)--Mardis

[7a] Job Responsibilities
3_2_8_fn07a.pdf
http://louisville.edu/provost/who-we-are/student-affairs

[7b] Bio
3_2_8_fn07b.pdf
http://louisville.edu/provost/who-we-are/student-affairs/mardis

[7c] CV
3_2_8_fn07c.pdf

[8] Vice Provost-Chief Budget Officer--Howarth

[8a] Job Responsibilities
3_2_8_fn08a.pdf
http://louisville.edu/provost/who-we-are/bp

[8b] Bio
3_2_8_fn08b.pdf
http://louisville.edu/provost/who-we-are/bp/howarth

[8c] CV
3_2_8_fn08c.pdf
http://louisville.edu/provost/who-we-are/bp/CV-Howarth.pdf

[9] Associate Provost-Director Delphi Center--Rhodes

[9a] Job Responsibilities
3_2_8_fn09a.pdf

[9b] Bio
3_2_8_fn09b.pdf
http://louisville.edu/provost/who-we-are/evpup/rhodes

[9c] CV
3_2_8_fn09c.pdf
http://louisville.edu/provost/who-we-are/evpup/CV-Rhodes.pdf

3.2.9

Governance and Administration: Personnel Appointment

The institution publishes policies regarding appointment, employment, and evaluation of all personnel.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The institution provided evidence that it publishes policies that describe conditions of appointment, employment, and evaluation and that these policies are widely disseminated. The institution noted that it publishes these documents in The Redbook, the basic governance document for the university, and that it is available on the web. The institution noted that the Faculty Senate and the Staff Senate are charged with reviewing relevant university policies and in an advisory role making recommendations to the administration regarding those roles.

For faculty members the university provided copies of policies governing appointment, employment, and evaluation. The university provided relevant excerpts from The Redbook relating to faculty appointment, employment, tenure/promotion, and evaluation. The institution provided a sample employment offer letter. For staff members, the university provided copies of policies governing employment and evaluation. The institution provided both relevant excerpts from The Redbook, as well as copies of Human Resource Policies and the Human Resources New Employee Orientation web-page.

The Off-Site Reaffirmation Committee was unable to find evidence that shows that evaluation practices are consistent with the published policies.

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville is in compliance with Comprehensive Standard 3.2.9. The university evaluates its staff, faculty, and administrators on a regular basis following published policies. Evaluation policies are outlined in The Redbook, the university’s governance document, and in personnel policies maintained by the Office of Faculty Affairs and the unit (for faculty) and by Human Resources (for administrators and staff). Examples are provided in this report as evidence that the university evaluation practices are consistent with its published policies.

Evaluation of Staff

The Redbook 5.1 [1] provides the following definition for staff: “The staff of the University of Louisville shall consist of all employees of the University who do not hold faculty appointments, are not full-time students enrolled in the University, are not graduate assistants at the University, or are not administrators as defined in Section 2.3.1 [of The Redbook].”

The evaluation of staff is overseen by Human Resources and is conducted within each academic unit or administrative office by the staff member’s supervisor. Policies and procedures regarding evaluation of staff are available on the Human Resources website. The University Administrators and Staff Performance Appraisals policy [2] states that “Each employee shall receive a written performance appraisal of their work performance at least
annually.” When the employee is hired, the employee’s first line supervisor provides written job descriptions, performance factors, and performance standards, which become the focus of the performance appraisal. University-wide staff evaluations are conducted in the spring of each calendar year using the university’s staff performance evaluation form [3]. The university provides training in the use of the appraisal form [4].

Using the employee’s job factors, the employee completes the staff performance appraisal form, outlining the outcomes the employee has achieved for each assigned job factor or goal and providing a self-appraisal. The supervisor assigns a rating (Good, Very Good, Outstanding, or Needs Improvement) to each job factor and supports the rating with appropriate comments for outcomes achieved and provides an overall performance rating. The supervisor meets with the employee to discuss the performance evaluation and to set goals for the coming year. The employee has an opportunity to provide a response to the final version of the evaluation. After the employee and supervisor both sign off on the performance evaluation form, copies of the evaluation are submitted to the Human Resources Department. Examples of staff annual reviews are provided [5a] [5b] [5c].

Raises are based on the annual review process following the guidelines outlined in the Salary Guidelines and Instructions [6]. Staff are notified of the results of the review process in a letter [7].

**Evaluation of Faculty**

*The Redbook* 3.3.1 [8] provides the following definition for faculty: “All persons with full-time faculty appointments who are appointed for at least one year and a part of whose work for the current year is in a particular academic unit shall be members of its faculty except in the case of those units which define faculty membership differently in their bylaws.” *The Redbook* 4.1.2 describes part-time faculty appointments [9].

The University of Louisville (UofL) conducts annual evaluations of the effectiveness of each faculty member. *The Redbook*, Section 4.2.1 (B) [10], states that

> All part-time, term, probationary, and tenured faculty must be reviewed in writing annually. Unit personnel documents shall specify the process of annual review, which shall be consistent with *The Redbook* and the Minimum Guidelines. Copies of the evaluations are maintained in the Office of the Dean in each unit.

Evaluation of faculty is overseen by the academic unit as prescribed in *The Redbook*, Chapter 4 [11] and the individual unit’s Personnel Policy [12].

**Evaluation of Full-time Faculty**

Full-time faculty include tenured and tenure-track faculty as well as faculty with term appointments (*Redbook*, Section 4.1.1 [13]). Each academic unit's personnel document is to establish and maintain a system of career reviews for all full-time faculty in alignment with the minimum guidelines set forth in *The Redbook* [14]. The types of review are: annual (4.2.1) [15]; pre-tenure (4.2.2 [G]) [16]; tenure (4.2.2 [H]) [17]; promotion in rank (to associate professor or professor) (4.2.3) [18]; and periodic career review (4.2.4) [19].

Full-time faculty collaborate with department chairs or supervisors to develop an annual work plan, an agreement between the faculty member and the administration of his or her school regarding the faculty member's responsibilities for the year in the areas of teaching, research or creative activity, and service. Each faculty member is evaluated annually according to the criteria approved in his or her annual work plan (*Redbook* 4.3.1) [20]. Annual reviews are used to determine the faculty member's
effectiveness in addressing the goals of the department, school, or university and to make determination about salary adjustments. When deficiencies are identified in the evaluation process, department chairs develop strategies for the faculty member to work toward improvement. Examples of faculty annual evaluations are provided [21a] [21b].

Tenure-track faculty undergo the following additional levels of evaluation:

- **Tenure Review**: Each faculty member eligible for tenure must be evaluated within twelve months after five years of service applied to tenure [22]. The faculty member’s tenure materials are reviewed according to the procedures specified in *The Redbook*’s Minimum Guidelines and the unit personnel document. The tenure file is also reviewed by the Executive Vice President and University Provost, who makes recommendation regarding tenure to the President. The President makes the final recommendation concerning tenure for any faculty member whose status is to be acted upon by the Board of Trustees.

- **Promotion in Rank**: For promotion in rank, a faculty member is evaluated in the areas of teaching, research or creative activity, and service to the profession, unit, university, or community as specified in the unit personnel document [23].

- **Periodic Career Reviews**: Faculty with tenure undergo periodic career review following the process specified in the unit personnel document [24].

A list of the university’s 2016-17 promotion and tenure decisions is provided [25a], along with examples of tenure reviews [25b] [25c] and a tenure progress report [25d].

**Evaluation of Part-time Faculty**

Part-time faculty are appointed to teach specified courses or instruction, or to complete research or service less than full time for a designated period [26a]. University policy requires that all faculty, including part-time faculty, be reviewed in writing annually [26b] [26c]. Examples of part-time faculty evaluations are provided [26d].

**Evaluation of Graduate Teaching Assistants**

Graduate Teaching Assistants (GTAs) are graduate students who have teaching appointments as part of their graduate work. Graduate Teaching Assistants are closely supervised and evaluated on an annual basis to determine their suitability for continuing in the Teaching Assistant position [27a] [27b]. Only five of the academic units use GTAs on a regular basis, and all of these units have a process for evaluating the teaching of the GTA at least annually, with some doing evaluations every semester. In most of the units the evaluation process is part evaluation and part mentoring. An example of a GTA evaluation is provided [27c].

**Evaluation of Administrators**

*The Redbook* 2.3.1 [28] provides the following definitions for administrators:

- **Administrators**
  - **Administrators**
    The term administrator as used in this document shall refer to the Executive Vice President and University Provost, the Vice Presidents, the Deans, and those persons who are designated by the President as having unit- or university-wide administrative functions of substantial significance to the University. All such
Administrators shall be appointed by the Board of Trustees on the recommendation of the President and shall serve at the pleasure of the Board.

B. Faculty with Administrative Functions
Those persons with faculty rank, other than deans, who are responsible for the administration of academic units and subunits such as academic departments and divisions shall be classified in this document along with assistant and associate deans as faculty with administrative functions. They are appointed by the Board on the recommendation of the President and serve in their administrative roles at the pleasure of the Board.

C. Staff Officers with Administrative Functions
Those responsible for the administration of any University services who do not have faculty appointments and who do not report directly to the President or a vice president as described above shall be classified as staff officers with administrative functions. They shall be appointed by the President subject to the personnel policies set forth in the section on staff personnel.

Administrators are reviewed regularly according to the procedures documented in *The Redbook* to assess their effectiveness in their current roles and their capacity to continue to lead the institution toward accomplishing its mission. The evaluation of administrators is overseen by the president, university provost, or other senior leadership as prescribed in *The Redbook* and the University Administrators and Staff Performance Appraisals policy [29].

Deans of academic units are reviewed annually [30], and a comprehensive deaconal review is conducted every five years that evaluates the performance and overall effectiveness of the unit administration. Examples of deans’ annual reviews [31a] [31b] and Five-Year Dean Reviews are provided [31c].

The President’s leadership team (executive vice presidents and vice presidents) is evaluated in alignment with the goals linked to strategic priorities outlined in the university’s strategic plan. Each member of the president’s senior leadership establishes goals in consultation with the university president. In the evaluation process senior leadership members submit self-assessments of their goals and are asked to describe their accomplishments and identify weaknesses and opportunities for moving forward. The president summarizes his assessment in writing and establishes the parameters to set goals for the upcoming academic/fiscal year [32a] [32b]. A similar evaluation process is completed by the Provost and other members of senior leadership for administrators that report them [33].

**SUMMARY**

The University of Louisville (UofL) defines and publishes policies regarding appointment, employment, and evaluation of faculty and staff. The appropriate information is readily accessible to all on the university website. Policies and procedures pertaining to faculty personnel are available on the Faculty Affairs website. Policies and procedures that apply to staff and all employees are available on the Human Resources website. All staff, faculty, and administrators complete performance evaluations in alignment with established policies and procedures. Examples of evaluations for staff, faculty, and administrators are provided to demonstrate that the university’s evaluation practices are consistent with published policies.

[1] *The Redbook* 5.1, Staff of the University
3_2_9_fn01.pdf
http://louisville.edu/provost/redbook/contents.html/chap5.html#ART5.1
University Administrators and Staff Performance Appraisal Policy
3_2_9_fn02.pdf
https://sharepoint.louisville.edu/sites/policies/library/SitePages/Human%20Resources/Performance%20Appraisals.aspx

Staff Performance Evaluation Form
3_2_9_fn03.pdf
www.louisville.edu/hr/forms/performanceevaluation

University Training on Evaluation Form
3_2_9_fn04.pdf
http://louisville.edu/staffsenate/meeting-information/2015/presentations/hughes1115

Examples of Staff Annual Evaluations
[5a] Staff Performance Evaluation
3_2_9_fn05a.pdf

[5b] Staff Performance Evaluation
3_2_9_fn05b.pdf

[5c] Staff Performance Evaluation
3_2_9_fn05c.pdf

2016-17 Salary Guidelines and Instructions
3_2_9_fn06.pdf
http://louisville.edu/hr(itemsofinterest/salary-increase-guidelines-2016-2017

Example--Letter Notifying Staff of Review Results
3_2_9_fn07.pdf

The Redbook 3.3.1, Membership and Appointment
3_2_9_fn08.pdf

The Redbook 4.1.2, Part-Time Appointments
3_2_9_fn09.pdf

The Redbook 4.2.1 (B) Annual Reviews
3_2_9_fn10.pdf

The Redbook, Chapter 4, Faculty Personnel Policies
3_2_9_fn11.pdf
http://louisville.edu/provost/redbook/chap4.html

Example—A&S Unit Personnel Policy
3_2_9_fn12.pdf

Redbook 4.1.1 Full-time Faculty Appointments
3_2_9_fn13.pdf

The Redbook, Minimum Guidelines for Faculty Personnel Reviews
3_2_9_fn14.pdf
[15] The Redbook 4.2.1, Annual Reviews
3_2_9_fn15.pdf
http://louisville.edu/provost/redbook/contents.html/chap4.html#4a2s1

[16] The Redbook 4.2.2(G), Pre-Tenure Review
3_2_9_fn16.pdf
http://louisville.edu/provost/redbook/contents.html/chap4.html#4a2s2

[17] The Redbook 4.2.2(H), Tenure
3_2_9_fn17.pdf
http://louisville.edu/provost/redbook/contents.html/chap4.html#4a2s2

[18] The Redbook 4.2.3, Promotion in Rank
3_2_9_fn18.pdf
http://louisville.edu/provost/redbook/contents.html/chap4.html#4a2s3

[19] The Redbook 4.2.4, Periodic Career Review
3_2_9_fn19.pdf
http://louisville.edu/provost/redbook/contents.html/chap4.html#4a2s4

[20] The Redbook 4.3.1, Annual Work Plan
3_2_9_fn20.pdf
http://louisville.edu/provost/redbook/contents.html/chap4.html#4a3s1

[21] Examples of Faculty Annual Reviews

    [21a] Example of Faculty Annual Review—Arts and Sciences
    3_2_9_fn21a.pdf

    [21b] Example of Faculty Annual Review—Nursing
    3_2_9_fn21b.pdf

[22] The Redbook 4.2.2, Tenure Review
3_2_9_fn22.pdf

[23] The Redbook 4.2.3, Promotion in Rank
3_2_9_fn23.pdf

[24] The Redbook 4.2.4, Periodic Career Reviews
3_2_9_fn24.pdf

[25] Promotion and Tenure Examples

    [25a] Promotion and Tenure Decisions 2016-17
    3_2_9_fn25a.pdf

    [25b] Example of Promotion and Tenure Review—Arts and Sciences
    3_2_9_fn25b.pdf

    [25c] Example of Promotion and Tenure Review—Medicine
    3_2_9_fn25c.pdf

    [25d] Example of Tenure Progress Report
    3_2_9_fn25d.pdf
[26] Evaluation of Part-Time Faculty

[26a] *The Redbook* 4.1.2, Definition of Part-time Faculty
3_2_9_fn26a.pdf

[26b] *The Redbook* 4.2.1 (B), PTF Annual Evaluation Requirement
3_2_9_fn26b.pdf

[26c] Part-time Faculty Evaluation by Unit
3_2_9_fn26c.pdf

[26d] Sample Part-time Faculty Evaluation - English
3_2_9_fn26d.pdf

[27] Evaluation of Graduate Teaching Assistants

[27a] GTA Annual Evaluation Requirement
3_2_9_fn27a.pdf
http://louisville.edu/graduate/faculty-staff/directors-of-graduate-studies/evaluation-overview

[27b] GTA Evaluation by Unit
3_2_9_fn27b.pdf

[27c] GTA Evaluation Example
3_2_9_fn27c.pdf

[28] *The Redbook* 2.3.1, Definition and Classification of Administrators
3_2_9_fn28.pdf

[29] University Administrators and Staff Performance Appraisals Policy
3_2_9_fn29.pdf

[30] *The Redbook* 3.2.3 Review of Service
3_2_9_fn30.pdf

[31] Examples of Dean Evaluations

[31a] Examples of Dean Evaluation--Medicine
3_2_9_fn31a.pdf

[31b] Example of Dean Evaluation—Arts &Sciences
3_2_9_fn31b.pdf

[31c] Examples of Five-Year Dean Review
3_2_9_fn31c.pdf

[32] Examples—Evaluation of Administrators Reporting to President

[32a] Example of Evaluation of Administrators Reporting to the President
3_2_9_fn32a.pdf

[32b] Example of Evaluation of Administrator Reporting to the President
3_2_9_fn32b.pdf
[33] Example—Evaluation of Administrator Reporting to Provost
3_2_9_fn33.pdf
3.2.13

Governance and Administration: Institution-related entities

For any entity organized separately from the institution and formed primarily for the purpose of supporting the institution or its programs: (1) the legal authority and operating control of the institution is clearly defined with respect to that entity; (2) the relationship of that entity to the institution and the extent of any liability arising out of that relationship is clearly described in a formal, written manner; and (3) the institution demonstrates that (a) the chief executive officer controls any fund-raising activities of that entity or (b) the fund-raising activities of that entity are defined in a formal, written manner which assures that those activities further the mission of the institution.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The institution reports four related corporations:

University of Louisville Research Foundation (ULRF)
ULRF was established in 1983 primarily to promote and support research at the University. Per budget documents provided by The institution, the ULRF budget for FY 2016 was $462.2 million. No fund-raising is conducted by ULRF. The Agency Agreement dated 2003 between ULRF and The institution was reviewed. Proper legal authority and operating control was clearly defined, as well as appropriate liability protection.

University of Louisville Athletic Association (ULAA)
ULAA was established by the University’s Board of Trustees in 1984 to conduct a financially self-sufficient intercollegiate athletics program. The Agency Agreement dated 1984 between ULAA and The institution was reviewed. Proper legal authority, operating control, and liability protections between ULAA and The institution are incorporated into the Agency Agreement.

University of Louisville Foundation (ULF)
ULF was founded in 1970 exclusively for the charitable and educational purposes of the University, and serves as the principal fund-raising arm of the University. The Agency Agreement dated 1996 was reviewed. Proper legal authority appears to be set forth in the agreement, as well as appropriate liability protections. However, the provided Agency Agreement is not specific as to the purpose of the ULF, instead stating that “the Corporation is a non-profit organization existing and operating in accordance with the laws of the Commonwealth of Kentucky, performing educational, research, artistic and community service functions in the public interest...”. The Agency Agreement is focused primarily on defining administrative functions performed by The institution and ULF, along with flow of funds between the entities and related procedures. Further, The institution states in its narrative that the president of the University serves as the president of ULF. The Agency Agreement between ULF and The institution does not specify that the institution president is president of ULF; rather, the ULF by-laws provided by the institution, dated March 8, 2010, indicate in Section 4.4 that the ULF President does not have to be a director of the corporation. The ULF President is elected by its directors on an annual basis. Based on the above review, the Off-Site Reaffirmation Committee could not determine that the relationship between ULF and The institution was clearly described in a formal document signed by both entities. Further, a majority of ULF directors are not University trustees or officers or employees of the institution. Therefore, no conclusion could be drawn as to whether the institution president controls fund-raising activities of the entity.

The institution indicates that the Kentucky State Auditors of Public Accounts notified ULF on June 25, 2015, of a review of this foundation. No additional information was provided about the nature of the review and whether the scope of the review includes an examination of issues that could impact compliance with SACSCOC CS 3.2.13.
University of Louisville Medical School Fund, Inc. (ULMF)

An Agency Agreement was not provided to describe the relationship between ULMF and The institution, therefore the Off-Site Reaffirmation Committee could not determine compliance with this Standard for ULMF. ULMF had a budget of $3.5 million for FY 2016.

Judgment
☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.2.13. All of the university’s affiliated entities have the proper legal authority, operating control, and liability protections defined by Kentucky Revised Statute (KRS) 164A.550 [1]. Two of the four affiliated entities reported in the Compliance Certification Report submitted in September 2016 were cited by the SACSCOC Off-site Committee as needing additional clarification (the ULF and the ULMSF). The Off-site Committee report also noted that the Kentucky State Auditor’s Report was missing; however, that report was not released until December 2016 after the submission of the UofL Compliance Certification Report. The results of the state auditor’s review of the University of Louisville Foundation [2] and the current status of the University of Louisville Medical Fund are provided in this report.

In September 2017, a Special Committee reviewed the university’s compliance with Comprehensive Standard (CS) 3.2.13. The Special Committee made a recommendation on CS 3.2.13 requesting that the university demonstrate it had a signed, formal written agreement with the University of Louisville Real Estate Foundation (ULREF) that conforms to the requirements of this standard [3].

University of Louisville Real Estate Foundation (ULREF)

The ULREF is a non-profit established in 2014 to provide infrastructure for future acquisition, development, and management of real estate in support of the university [4a] [4b]. The University of Louisville (UofL) and the University of Louisville Real Estate Foundation (ULREF) have signed a Memorandum of Understanding (MOU) [5] that clearly defines the legal authority and operating control of the institution with respect to the ULREF; that describes the relationship of UofL to the ULREF and the extent of any liability arising out of that relationship; and that defines the fund-raising activities of the ULREF and ensures that those activities further the mission of UofL. The signed MOU was approved by the UofL Board of Trustees at its meeting on October 18, 2017 [6] and by the UofL Real Estate Foundation (ULREF) at its meeting on October 26, 2017 [7]. This documentation was submitted to the SACSCOC in response to the Special Committee Report of October 9, 2017 [8] and was reviewed by the SACSCOC Compliance and Reports (C&R) Committee and the Commission on Colleges at the Annual Conference in December 2017. There were no additional compliance recommendations.

University of Louisville Medical School Fund, Inc. (ULMSF)

The UofL Medical School Fund, Inc. (ULMSF) is a non-profit organization organized exclusively to benefit the academic endeavors of the School of Medicine. The fund provided financial support to the School of Medicine by collecting a percentage of professional practice income from full-time clinical and basic sciences faculty employed by the school.

In 2015, the Board of Directors of the ULMSF voted to revise the School of Medicine private practice plan [9]. One of the recommendations included simplifying the existing corporate structure by eliminating the need for independent departmental entities as well as a
separate university affiliated non-profit corporation, the University of Louisville Medical School Fund, Inc.

The revised private practice plan was necessary to reflect the University of Louisville Physicians, Inc. (ULP) consolidation of all of the School of Medicine clinical faculty members’ practices within ULP as of January 1, 2014. The recommendation to revise the private practice plan, which included the elimination of the ULMSF, was approved by the UofL Board of Trustees on February 5, 2015 [10]. The University of Louisville Medical School Fund, Inc. (ULMSF) ceased to collect professional practice income effective June 30, 2016 and was dissolved effective June 30, 2017.

**University of Louisville Foundation (ULF)**

The university and the University of Louisville Foundation have signed a new Memorandum of Understanding (MOU) that clearly defines operating and financial controls.

The university submits the following information related to the University of Louisville Foundation:

1. Background/Purpose of the UofL Foundation (ULF)
2. University of Louisville’s (UofL) Relationship to the University of Louisville Foundation (Including Explanation of State Auditor’s Review)
3. Financial Relationship between UofL and ULF
4. Liability Protections

**1. Background/Purpose of the UofL Foundation (ULF)**

The University of Louisville Foundation (ULF) is a related corporation of the University of Louisville (UofL). Founded in 1970, the ULF is organized as an independent 501(c)(3) not-for-profit corporation. It is directed and supervised by a 15-member Board of Directors [11]. The university’s relationship with the ULF is defined by three documents: the Articles of Incorporation [12], the memorandum of understanding (MOU) (revised spring 2017) [13], and the ULF Bylaws (also revised spring 2017) [14].

The ULF’s Articles of Incorporation mandate that the ULF “conduct and carry on its work, not for profit, but, exclusively, for the charitable and educational purposes” of the university. The ULF’s purpose is to support the university’s mission to be a premier metropolitan research institution [15].

The direction and oversight of fundraising activities for the University of Louisville is the responsibility of the UofL Office of University Advancement (“Advancement”) [16], headed by the vice president for university advancement, who reports directly to the president of the university [17]. The ULF invests funds raised by UofL’s Office of Advancement in support of the university’s education, research, and service goals, and the funds are also used for scholarships, endowments, research chairs, grants, and other academic initiatives.

**2. University of Louisville’s (UofL) Relationship to the University of Louisville Foundation (ULF)**

In 2015, concerns about a lack of transparency in the relationship between UofL and ULF were initially raised by members of the UofL Board of Trustees. In June 2015, then-Kentucky State Auditor Adam Edelen announced the initiation of an audit examination (after an official request by a member of the UofL Board of Trustees) focused on governance
issues tied to the dual leadership roles between UofL and ULF and compensation received from the ULF by former President James Ramsey and other university employees.

In 2016 the newly elected Kentucky State Auditor of Public Accounts (Mike Harmon) continued the examination of the governance of the ULF and its relationship to the university. The Auditor’s report was released December 14, 2016, and the university forwarded the report to SACSCOC on December 16, 2016. In addition, the university submitted a monitoring report for 3.2.13 to SACSCOC on August 15, 2017, that was reviewed by a Special Committee. The Special Committee made no recommendation related to the ULF.

One of the State Auditor’s recommendations was that “the UofL and ULF Boards consider developing a MOU [Memorandum of Understanding] to establish an effective set of operational and governing policies. The MOU should be the result of a collaborative process between the two boards and should include a review of recommended principles and practices.”

On February 16, 2017, the UofL Board of Trustees appointed an ad hoc Committee on Board Governance (the Governance Committee) [18] to review the Board’s current governance practices and documents and recommend updates and amendments reflecting best practices. The Governance Committee was also to undertake the development of a new Memorandum of Understanding (MOU) between the university and the ULF. The ULF also appointed a Committee on Governance to oversee the ULF’s governance and organizational structure and to suggest any needed modifications, including changes to its bylaws.

The UofL Governance Committee worked with the ULF Committee on Governance to develop a new MOU between the university and the ULF. The new agreement was modeled on the “Illustrative Memorandum of Understanding between a Public Institution or System and an Affiliated Foundation” by the Association of Governing Boards (AGB) [19]. The new MOU [20] was approved by the UofL Board of Trustees on June 28, 2017 [21] and has been officially signed by both parties.

With the new MOU in place, the relationship between UofL and ULF is now adequately described in a formal, written document that clearly describes the relationship between the university and ULF and that provides clear roles, responsibilities, and agreements outlining appropriate operational controls. The MOU establishes the ULF’s ability and responsibility to receive funds donated to the university, to manage those funds, and to distribute funds to the university in support of its academic mission.

The MOU covers the following information:

1. University Governance
2. The Foundation’s Relationship to the University
3. The University’s Relationship to the Foundation

Items of particular note:

- “The University President controls the University’s fund-raising activities” [IV.B].
- “The University President shall be an ex-officio, voting member of the Foundation’s Board of Directors” [IV.C].
- “Effective September 29, 2017, the Chair of the Foundation’s Board of Directors and the Chair of its Nominating Committee always shall be a member of the University’s Board of Trustees” [IV.E].
4. Foundation Responsibilities
5. University Responsibilities
6. Terms of the Memorandum of Understanding

The ULF Bylaws provide further clarification of the relationship between the university and the ULF. The ULF has revised its Bylaws [22] to better reflect the ULF’s overall function (approved by the ULF Board of Directors on March 28, 2017 [23]). Article 4.4 of the revised Bylaws states that the university President cannot be the President of the ULF, as was the previous practice: “The ULF President who need not be a director of the Corporation and who shall not be the President of the University of Louisville shall be elected to that office by the directors of the Foundation at each of its annual meetings for a term of one year until his or her successor is elected and qualifies for office” [24]. Article 3.9 outlines that the Ex Officio Director [the president of the university] serves on the ULF Executive Committee, the ULF Committee on Finance, and the ULF Nominating Committee. The university’s Chief Financial Officer also serves ex officio on the ULF Committee on Finance.

3. Financial Relationship between UofL and ULF

Operational controls between UofL and the ULF are defined in the recently approved MOU. In December 2016 the ULF hired Keith Sherman as interim executive director/chief operating officer to oversee the management of ULF. In this role, Sherman serves as liaison to the university and to the university’s Board of Trustees on the finances of ULF. The UofL President serves as an ex officio voting member of the Foundation. Four UofL Board of Trustee members, plus the UofL president, serve on the ULF Board of Directors.

The ULF Board’s Committee on Finance (the “Finance Committee”) is at all times comprised of the ex officio director (i.e., the president of the university), the chief financial officer of the university (ex officio), one trustee director, and seven at-large directors.

The university’s financial relationship with the ULF is documented via the Board-approved operating budgets at the beginning of each fiscal year and audited financial statements at the end of each fiscal year. UofL and ULF both adhere to the state-mandated external audit process [25], which results in a consolidated annual financial statement that covers all affiliated entities and related corporations [26].

The ULF’s “University of Louisville Endowment Fund Statement of Investment Objectives and Guidelines” (the “Investment Policy,” dated June 9, 2017) [27] identifies and presents a formal set of investment objectives and performance standards so that the ULF Board and the ULF Finance Committee can be assured that the assets of the ULF, including those of the endowment fund, are managed in accordance with generally accepted standards and in a manner consistent with the financial needs of the university. As described in the Investment Policy, the ULF Board has assigned responsibility for the oversight of the Fund to the ULF Board’s Finance Committee. To achieve the mandates set forth in the Investment Policy the Finance Committee uses additional resources, including investment managers, investment consultants, custodians, and Foundation staff.

The new MOU between UofL and the ULF [28] outlines the following information related to finances between the ULF and the university:
• The Foundation receives, invests, encourages, manages, and administers private gifts and bequests donated for the benefit of the University and directs them to specific areas or projects within the University when designated by the donor. The Foundation acts in a fiduciary capacity, distributing money as required by the terms of the gift and consistent with the donor’s intent. Unrestricted gifts are administered by the Foundation in consultation with the University President or his designee to provide the greatest flexibility in day-to-day operations, to fund the University’s strategic plan, to meet unanticipated University needs, and to fund University approved special projects. The Foundation acts as custodian for endowed funds and serves in other fiduciary capacities when gifts are made through bequests and other planned giving arrangements. The University designates the Foundation as the repository of private gifts made in support of the University unless otherwise specified by the donor. (page 1)

• The Foundation’s investment and spending policies shall be with the purpose of ensuring that the corpus of gifts made to the endowment for the benefit of the University are maintained in perpetuity and not invaded, except as permitted by law and which do not contradict donor intent. Current use gifts shall be made available to the University for its use when requested by the University President (or authorized designee), consistent with donor intent. (III.C)

• The funding transferred from the Foundation to the University may be used by the University to support its annual budget, as approved by the University’s Board of Trustees, including support for endowed professorships. Without the University’s Board of Trustees’ approval, no money transferred to the University shall be used for University employee compensation except in full compliance with the Financial Transactions Policy passed by the University’s Board of Trustees on March 26, 2017 (the “Spending Policy”), as amended from time to time. The Foundation will not pay any salary or non-salary compensation to a University employee or an employee of any other University affiliate for service as a University employee without the prior request of the University’s Board of Trustees and the approval of the Foundation’s Board of Directors. (III.G)

• The Foundation may serve as an instrument for entrepreneurial activities for the University and engage in such activities as purchasing, developing, or managing real estate for multiple purposes, including but not limited to University expansion, student housing, or office building and research facilities. It may also hold licensing agreements and other forms of donated intellectual property, borrow or guarantee debt or engage in other activities to further the purpose of the University. The Foundation may use donor gifts for the purposes described in this paragraph V.A.4 unless expressly prohibited. (V.A.4)

Asset Management (B)

• The Foundation’s investment strategy shall be to protect the corpus of endowment gifts, in perpetuity, and to achieve investment returns sufficient to sustain reasonable spending necessary to help support the University’s academic mission and pursuits. While it is recognized that investment return is market dependent, the Foundation’s goal is to prudently maximize returns, net of reasonable expenses and fees and inflation, to provide a reliable annual allocation to the University at the maximum level of sustainable support. The Foundation’s goal shall be to equal or exceed the average three, five, and ten-year returns (net of fees) for Public Colleges, Universities, or Systems, as reported by the National Association of College and
University Business Officers or a comparable benchmark with similar total assets. (B.1)

- The Foundation agrees to provide the University with timely information about investment performance and the current market value of endowments, as requested to allow the University to provide donors with this information. (B.2)

- The Foundation will establish prudent asset-allocation, disbursement, and spending policies that adhere to applicable federal and state laws, including the Kentucky Principal and Income Act (KRS 386.450 to 386.504) and the Kentucky Uniform Prudent Management of Institutional Funds Act (KRS 273.600 to 273.645). (B.3)

- The Foundation will receive, hold, manage, invest, and disperse contributions of cash, securities, patents, copyrights, and other forms of property, including immediately vesting gifts and deferred gifts that are contributed in the form of planned and deferred-gift instruments. The Foundation will maintain separate accounts for (a) endowment funds, (b) current use gifts, and (c) operating cash. (B.4)

- The Foundation will engage an independent accounting firm annually to conduct an audit of the Foundation’s financial and operational records and will provide the University with a copy of the annual audited financial statements, including management letters and responses to management letters within 30 days of receipt or provision. Within 90 days of the issuance of an audit report with audit findings, the Foundation shall demonstrate to the University that satisfactory progress has been made to implement a corrective action plan. If the University recommends that specific actions be included in the corrective action plan, the Foundation Chief Executive shall promptly communicate the University’s recommendations to the Foundation’s independent accounting firm and the Foundation’s Board of Directors for their consideration. (B.5)

- At the time it requests the transfer of funds, the University will provide the Foundation with appropriate documentation establishing that the University is adhering to terms, conditions or limitations imposed by the donor on the gift. The Foundation and the University will work together to develop a set of forms and procedures that implement this obligation in an efficient and effective manner. (B.6)

Transfer of Funds

- All transfers of funds from the Foundation to the University must be documented in writing or electronically in a form that has a retrievable transaction trail. (V.C.3)

- No later than March 1 of each year, the Foundation Chief Executive shall confer and discuss with the University’s President and Chief Financial Officer about the Foundation’s investment performance, its anticipated ability to meet its goal under Section V.B.1 for the next fiscal year, and the amount of current use funds anticipated to be available to the University during the next fiscal year over and above the endowment returns contemplated by Section V.B.1. Representatives of the Foundation shall be made available, as requested, and no less often than quarterly, to attend meetings of the University’s Board of Trustees for the purpose of making a presentation and answering questions about the Foundation’s performance. (V.C.4)
The Foundation will provide copies of its financial data and records to the University, upon request, within a reasonable period of time. The Foundation will also provide copies of its annual report and other information that may be publicly released. (V.D.6)

The additional ULF documents below also describe the financial relationship between the university and the ULF:

- **ULF Bylaws.** The revised ULF Bylaws [29] state:

  Prohibited Transactions: "The Corporation shall not engage in any act of self-dealing [as defined in Section 4941(d) of the Internal Revenue Code of 1954 as amended], retain any excess business holdings [as defined in Section 4943(c) of said Code], make any investments in such manner as to subject the Corporation to tax under Section 4944 of said Code, or make any taxable expenditures [as defined in Section 4945(d) of said Code]." [Section 2.5]

  Audit Committee: "The Audit Committee shall consist of the Chairman of the Committee on Finance, who shall serve ex officio, one (1) Trustee Director and three (3) At-Large Directors. The Audit Committee shall be responsible for, and shall present to the Board for approval the annual financial audit of the Corporation and the Corporation’s annual Form 990, Return of Organization Exempt from Income Tax and such other responsibilities as may be prescribed from time to time by the Board.” [Section 3.9(9)]

  Duties of the ULF Treasurer: "The Treasurer, who shall be annually elected by the Board of Directors from among its members for a term of one year, shall have general supervision over the financial matters of the Corporation and shall see that reports as to the financial condition of the Corporation are made at each Regular Meeting of the Board of Directors, or at such other times as may be required by the Board. He shall receive and have charge of all money, bills, notes, bonds, securities and similar property belonging to the Corporation, subject to the order of the Board of Directors. He shall be the principal disbursing agent of the Corporation, and shall keep accurate and complete financial accounts as required by law and by sound business practice. The Treasurer generally shall perform such other and further duties as may be required of him by the Board of Directors. In the absence of the Treasurer or in the event of his disability, his duties shall be performed by any assistant treasurer or by any director who may be appointed by the Board.” [Section 4.7]

- **UofL Endowment Fund Statement of Investment Objectives and Guidelines.** On June 9, 2017, the ULF revised its asset allocation targets and ranges [30]. This document addresses the following:
  1. The responsibilities of the various parties involved in the management of the Foundation.
  2. Overall investment objectives and performance standards.
  3. Overall fund guidelines and asset allocation.
  4. Fund component guidelines.
  5. Relationship with the investment managers.

- **ULF Spending Policy.** The ULF Board of Directors adopted a change to the ULF Spending Policy on March 28, 2017 [31]. The Spending Policy [32] provides
guidelines for management of endowment earnings made available by the ULF to the university's academic and support units.

- ULF Signature Authority. The Board of Directors of ULF Corporate Signature Authority (Spending Authority) [33] provides signature authority and limitations for executing contracts (approved by the ULF Board of Directors on February 28, 2017).

4. Liability Protections

The following guidelines in the MOU address Liability:

- Officers and employees of the Foundation who have check-signing authority or who handle cash or negotiable instruments must be bonded in an amount determined to be reasonable by the Foundation’s governing body, after consultation with the University. (V.D.9)

- The Foundation’s Board of Directors, after consulting with the University’s insurance and risk management personnel, shall evaluate the potential risks arising from the Foundation’s operation and obtain commercially reasonable amounts of general liability and directors'/officers’ insurance. (V.D.10)

The revised ULF Bylaws contain the following statement:

5.7 Insurance.
The Corporation may purchase and maintain insurance on behalf of any person who is or was a director or officer of the Corporation, or is or was serving at the request of the Corporation as a director, officer, member, partner, employee or agent of another domestic or foreign corporation, partnership, joint venture, trust or other enterprise, against any liability asserted against such person and incurred by such person in such capacity or arising out of such person’s status as such, whether or not the Corporation would have the power or be obligated to indemnify such person against such liability under the provisions of this By-Law or Kentucky Revised Statutes Chapter 273 (or corresponding provisions of any subsequent state laws). [34]

Policy on UofL President Serving as President of ULF. The UofL President can no longer serve as the president of the ULF. Section 4.4 of the ULF Bylaws states, “The President who need not be a director of the Corporation and who shall not be the President of the University of Louisville shall be elected to that office by the directors of the Foundation . . .” [35].

- Interim President Gregory Postel’s appointment letter [36] states: “You will have control of the University's fund-raising activities and will serve as an ex officio, voting member of the board of directors of the University of Louisville Foundation, Inc.”

SUMMARY

The University of Louisville is in compliance with Comprehensive Standard 3.2.13. The university has:

- A Memorandum of Understanding between the university and the University of Louisville Foundation (ULF).
- A Memorandum of Understanding with the University of Louisville Real Estate Foundation, Inc. (ULREF).
- Eliminated the need for the UofL Medical School Fund (ULMSF).
The MOU agreements between the university and the ULF and the university and the ULREF outline the legal authority of the institution, the relationship and operating control of the two entities, and liabilities resulting from the relationships. These MOU also make provision for regular reporting to the UofL Board of Trustees to ensure full accounting on a regular basis, which enables the UofL Board of Trustees to fulfill its fiduciary responsibilities.

The direction and oversight of fundraising activities for the university is the responsibility of the UofL Office of University Advancement, headed by the vice president for university advancement, who reports directly to the president of the university. The ULF invests funds raised by UofL’s Office of Advancement in support of the university’s education, research, and service goals, and the funds are also used for scholarships, endowments, research chairs, grants, and other academic initiatives. The new MOU between UofL and the ULF and the revised ULF Bylaws clearly articulate the financial oversight responsibilities of both entities.

[1] Kentucky Revised Statute (KRS) 164A.550
[3] Special Committee Recommendation--ULREF
[4] University of Louisville Real Estate Foundation (ULREF)
    [4a] Establishment of ULREF
        3_2_13_fn04a.pdf
    [4b] ULREF Board of Directors
        3_2_13_fn04b.pdf
[5] UofL and ULREF Memorandum of Understanding
    3_2_13_fn05.pdf
[6] UofL Board of Trustees’ Meeting 10/18/17, Resolution--Approval of Memorandum of Understanding with ULREF
    3_2_13_fn06.pdf
[7] ULREF Directors’ Meeting 10/26/17, Resolution--Approval of Memorandum of Understanding with UofL
    3_2_13_fn07.pdf
[8] UofL Response to SACSCOC 10/9/17 Special Committee Report
    3_2_13_fn08.pdf
[9] Revision of School of Medicine Private Practice Plan
    3_2_13_fn09.pdf
[10] UofL Board of Trustees Meeting Minutes, 2/5/15, Approval of the Elimination of the ULMSF
    3_2_13_fn10.pdf
[11] ULF Board of Directors
    3_2_13_fn11pdf

UofL Focused Report (2018), p. 75
[12] University of Louisville Foundation, Inc. Articles of Incorporation
3_2_13_fn12.pdf

3_2_13_fn13.pdf

[14] University of Louisville Foundation (ULF) Bylaws
3_2_13_fn14.pdf

[15] University of Louisville Foundation (ULF) Bylaws
3_2_13_fn15.pdf

[16] UofL Office of University Advancement
3_2_13_fn16.pdf

[17] UofL Organizational Chart, VP for University Advancement
3_2_13_fn17.pdf

[18] UofL Board of Trustees Resolution Establishing the Board’s Committee on Governance
3_2_13_fn18.pdf

[19] “Illustrative Memorandum of Understanding between a Public Institution or System and an Affiliated Foundation”
3_2_13_fn19.pdf

[20] Memorandum of Understanding between UofL and ULF
3_2_13_fn20.pdf

[21] UofL Board of Trustees Meeting Minutes, June 28, 2017, Approval of MOU
3_2_13_fn21.pdf

[22] Revised ULF Bylaws
3_2_13_fn22.pdf

[23] ULF Meeting Minutes, 3/28/2017, Approval of Revised ULF Bylaws
3_2_13_fn23.pdf

[24] ULF Bylaws, Article 4.4
3_2_13_fn24.pdf

[25] KRS 164A.570, State-Mandated External Audit Process
3_2_13_fn25.pdf

3_2_13_fn26.pdf

[27] ULF’s “UofL Endowment Fund Statement of Investment Objectives and Guidelines”
3_2_13_fn27.pdf

[28] Memorandum of Understanding between UofL and ULF
3_2_13_fn28.pdf

[29] ULF Revised Bylaws
3_2_13_fn29.pdf
3_2_13_fn30.pdf

[31] ULF Resolution, 3/28/2017, Approval of Spending Policy
3_2_13_fn31.pdf

[32] ULF Spending Policy
3_2_13_fn32.pdf

[33] ULF Signature Authority (Spending Authority)
3_2_13_fn33.pdf

[34] ULF Bylaws, Section 5.7, Insurance
3_2_13_fn34.pdf

[35] ULF Bylaws, Section 4.4
3_2_13_fn35.pdf

[36] Interim President Postel’s Appointment Letter
3_2_13_fn36.pdf
3.3.1.1

Institutional Effectiveness: Educational Programs

The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas:

3.3.1.1 Educational programs, to include student learning outcomes.

SACSCOC OFF-SITE COMMITTEE COMMENTS

*3.3.1.1 educational programs, to include student learning outcomes

Non-Compliance

Educational Excellence is one of the institution’s 2020 Strategic Plan goals and the university’s 21st Century Initiatives, which overlays the 2020 Plan, supports improvements in the academic programs, through a university-wide planning and assessment process. A formalized and standardized structure for assessment management and a centralized repository for its documentation was implemented following a review of the Student Learning Outcomes process.

The Office Institutional Effectiveness (IE) conducted detailed reviews of the AY 2007-2008 and AY 2008-2009 student learning outcomes (SLO) annual reports submitted by the academic programs. The institution acknowledged that it needed to transform its accountability and assessment activities from manual processes to a web-based system to support the management of institutional student learning outcome-based assessment, therefore, did not provide documented SLO annual reports with the revised process until 2014, following university-wide extensive training and implementation of assessment best practices. The 2014-15 SLO Annual Reports provided offer a comprehensive overview of a program’s mission, goals, and resources, including an assessment of student learning outcomes and evidence of continuous program improvement from the following degree-granting units at the university: College of Arts and Sciences (43%), the College of Education and Human Development (15%), the J. B. Speed School of Engineering (15%); School of Nursing (1 of 4), and Law (1 of 3). The examples provided showed measureable student learning outcomes, the extent to which the students met the outcomes, and use of the results of the assessments to make improvements to the programs.

After reviewing the examples, the Off-Site Reaffirmation Committee cannot fully determine if all programs have identified SLO or have assessed the identified outcomes, given the limited scope (e.g., one year of data AY 14-15) provided and a lack of clarity on sampling methodology. The Committee was unable to determine that all educational programs engage in sufficient assessment and that processes are in place to assess the effectiveness of their programs, not simply a “check-list” of program compliance with Annual SLO reporting.

Judgment
☐ Compliance □ Partial Compliance □ Non-Compliance □ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.3.1.1. UofL is committed to institutional effectiveness and continuous quality improvement of its academic programs. The university’s mission and strategic planning processes are supported by outcomes assessment reporting expectations for academic programs in the form of annual Student Learning Outcomes (SLO) reports.
Three years of Student Learning Outcomes reports (2012-13, 2013-14, and 2014-15) are provided in Table 1 at the end of this report.

The university’s SLO reporting process began in 1999. In the first year, only the undergraduate programs were asked to identify outcomes. The process was expanded to the graduate and professional programs in 2000. In the SLO process, each program identifies learning outcomes, uses data to assess the achievement of the outcomes, and plans for program improvement based upon the assessment. These ongoing annual SLO reports document that UofL is engaged in evaluative processes that (1) result in continuing improvement in institutional quality and (2) demonstrate that the institution is effectively accomplishing its mission.

UofL offers 208 degrees (as of 2017) through its twelve degree-granting academic units [1]. Currently the university offers 1 associate degree program, 26 certificate programs, 67 baccalaureate degree programs, 75 master’s degree programs, 36 doctoral degree programs and 3 first-professional degree programs.

Faculty members from each of these degree programs have identified student learning outcomes that focus on measuring student knowledge, skills, and/or attitudes. Each program’s faculty have also identified measures and targets for their outcomes. Each fall, programs review data surrounding their student learning outcomes to determine if their set targets were met and then use this assessment to plan for future improvement in student learning. The dean’s office of the respective unit and the Office of Institutional Effectiveness (IE) also conduct reviews of the annual SLO reports. The programs receive formal feedback from IE, indicating revisions as needed.

The SLO process begins each year in September when templates and instructions for completing SLO reports are sent to units (see Figure 1). The SLO process lags behind by one academic year to enable programs to utilize and report assessment results from the previous academic year. Academic programs submit their completed reports by early November.
Since the implementation of the SLO assessment process in 1999, the institutional focus has been on helping programs to ensure that each outcome is focused on student learning, to increase the use of well-developed direct assessment, and to use assessment results for program improvement.

**SLO Reporting Process**

The Offsite Compliance Committee noted that the university did not provide documented SLO annual reports with the revised process until 2014, following university-wide extensive training and implementation of assessment best practices.

The sampling methodology the university provided in the original Compliance Certification Report was limited to 31 examples of SLO Reports from 2014. This section of the Focused Report will provide documentation to demonstrate that the university’s SLO reporting process has been ongoing and evolving since its implementation in 1999 and will highlight the progress made since the 2007-08 cycle toward ensuring that programs participate in sufficient assessment to assess the effectiveness of their programs.

In a later section of this Focused Report response, SLO Reports and Feedback Reports for all academic programs from the 2012-13, 2013-14 and 2014-15 reporting cycles are provided to demonstrate that all degree-granting programs were participating in the SLO reporting process prior to 2014.

Since 2009, the university has significantly modified and strengthened its programs’ assessment of their learning outcomes and use of that assessment for program improvement.

The Office of Institutional Effectiveness (IE) in collaboration with representatives from academic units and key administrative offices conducted detailed reviews of the AY 2007-2008 and AY 2008-2009 student learning outcomes (SLO) annual reports.

The 2007-08 [2] and 2008-09 reports [3] addressed the following components:

- Previous year’s plan for improvement
- Major student learning outcomes
- Assessment strategies/measures/criteria
- Specific learning outcomes achieved
- Plans for improvement

**2010-2011 IE Review Process**

**Findings:** IE review of 2007-2008 and 2008-2009 SLOs revealed that the quality of the key components noted above in SLO annual reports varied, leading to the conclusion that programs needed additional training and help in the SLO assessment process. Programs were not required to submit SLO annual reports for AY 2009-2010 while the university worked to develop and strengthen the student learning assessment and reporting process.

**SLO Process Improvement Plan:** In 2010-11 programs completed SLO Reports using a revised reporting template [4] that included the following six components identified as best practices in student learning outcome reporting:

- **Program Mission** (a broad statement of the purpose of the academic unit/program and how it is linked to UofL’s institutional mission)
- **Program Goals** (addressing the distinct body of knowledge students will possess upon completing the program of study)
- **Student Learning Outcomes** (each outcome must clearly align to a program goal and describe specific measurable learning outcomes related to knowledge, skills, or perceptions to be gained or improved upon completing the program of study)
- **Measures and Targets** (must clearly align to an SLO and describe a direct assessment measuring how students’ work will be evaluated to determine their level of competency; targets are to align to the measure and indicate a specific and appropriate threshold for students’ collective performance.)
- **Findings** (show the results specified in the measure and indicate whether the intended target/threshold was met. For example, a finding might say that 75 percent of students earned a rating of “adequate” or higher on the designated rubric and that the target was met.)
- **Action Plan** (targeting areas for improvement identified in the SLO assessment process to enhance student learning and the students’ academic experience. Programs work throughout the academic year to implement strategies from their action plans for continuous program improvement to enhance student learning and the students’ academic experience)

In order to strengthen program assessment, the university provided detailed and intentional direction [5] to assist each academic program to develop measurable student learning outcomes, to identify direct assessment measures, and to use assessment results for program improvement. Department Chairs/heads received training [6] emphasizing the revision to the SLO process and the need to write student learning outcomes that reflect
student learning, assess the achievement of these outcomes, and utilize the results for improvement. In addition, extensive technical assistance and individualized consultation and training were made available to programs on the revised SLO development, assessment, and reporting process. IE provided individual feedback reports to each program [7], with the expectation that programs incorporate the feedback into the next year’s reports.

2011-2012 IE Review Process

Findings: The review of the 2010-11 SLO reports by IE indicated that while programs were making progress in articulating student learning outcomes and identifying direct measures, there continued to be areas in need of improvement. These included infusing general education competencies throughout the curriculum, aligning learning outcomes to program goals, providing direct measures and targets, using assessment results to demonstrate that the outcomes had been achieved, and providing evidence of closing the loop.

SLO Process Improvement Plan: The 2011-2012 SLO process [8] [9] was further refined based on the noted areas of improvement identified in the 2010-11 review process. Common areas for improvement identified in the 2011-12 SLO process were the need to identify key competencies upon graduation, to reinforce competencies related to General Education, to address critical thinking, to provide more detail about direct measures, to provide targets for expected performance levels, to provide the rubrics used for assessment, to reduce the use of course grades as primary measures, to express results in percentage of students meeting the performance level, and to develop action plans based on findings.

Also in 2011-12, the overall SLO process transitioned to Compliance Assist, a comprehensive web-based assessment and reporting system for collecting data to support student learning outcome based assessments. IE entered the 2011-12 Reports that they received from the academic departments into the Compliance Assist system. IE's instructions to programs highlighted modifications to the format for reporting program goals, SLOs, and measures to better align these components of the SLO reporting process and assisted in the transition to Compliance Assist. Detailed feedback reports were generated from Compliance Assist and distributed to the department chairs/head for each of their degree programs.

2012-2013 IE Review Process

Findings: Results from the 2011-12 reporting process revealed that units would benefit from added structural requirements for the competency areas under review (discussed below in the Improvement Plan section). Additionally, the process was refined to include a direct connection at the undergraduate level to the current Quality Enhancement Plan (QEP) related to critical thinking. At the graduate and professional level, it was determined that SLOs needed to be better aligned with the specific SACS requirements to show evidence of compliance (discussed below in the Improvement Plan section).

SLO Process Improvement Plan: Beginning in the 2012-13 reporting cycle, undergraduate programs [10] [11] were required to provide program goals that addressed competencies that 1) related to the content knowledge of the major; 2) built upon the General Education curriculum; 3) synthesized the knowledge of the major through a culminating undergraduate experience (CUE); and 4) demonstrated critical thinking as defined by the university’s 2007 Quality Enhancement Plan, Ideas to Action (i2a). (Examples of these competencies can be seen in any of the undergraduate program SLO reports provided in Table 1. For specific examples, see Anthropology, BA; Dental Hygiene, BS; and Social Work, BSW.)
Graduate and professional programs were to identify program goals that showed competencies relating to content knowledge of the discipline (including literature of the discipline), student engagement in research, and/or professional practice and training experiences. (Examples of these competencies can be seen in any of the graduate and professional program SLO reports provided in Table 1. For specific examples, see Audiology, AUD; Dentistry, DMD; Social Work MSW).

UofL offers online and off-site undergraduate and graduate programs. Goals and student learning outcomes for online, off-site, and on-site academic programs are expected to be the same regardless of the mode of delivery, and student performances are to be comparable regardless of mode of delivery. Therefore, another important modification to the 2012-2013 SLO process was for programs to verify that their program goals and SLOs for online academic programs were similar in scope and content to the traditionally (face-to-face) delivered counterparts. (Examples of SLO reporting for online and off-site programs are provided in Table 1. See Nursing BSN for a specific example.)

In addition, UofL offered 19 graduate certificate programs in 2012-13. Department chairs were asked to report their certificate programs either as embedded within an existing degree-granting academic program or as a stand-alone program. Certificate programs offered in conjunction with another program were allowed to be incorporated into the other program's SLO report. (Examples of SLO reporting for certificate programs are provided in Table 1. See Police Executive leadership Development Certificate for a specific example.)

2013-2014 IE Review Process

**Findings:** The IE review of the 2012-13 SLO Reports revealed that the quality of the SLO reports varied from program to program. IE feedback reports were long and in some cases, suggested revisions were not fully incorporated into the next cycle of SLO Reports.

**SLO Process Improvement Plan:** The SLO templates and instructions remained the same for the 2013-14 SLO reporting cycle. In an effort to provide feedback in a more user-friendly way, IE transitioned away from the Compliance Assist generated Feedback Reports to a more succinct rubric format to provide recommendations to improve the next SLO reporting cycle.

2014-2015 IE Review Process

**Findings:** Up to this point in time in the annual SLO reporting process, programs were only expected to provide an action plan for the coming year. It was acknowledged that this component was insufficient to track whether programs were actually implementing their action plans and making improvements based on the assessment results.

**SLO Process Improvement Plan:** To encourage “closing the loop,” starting with the 2014-15 reporting cycle, programs were asked to provide their previous action plan (from the 2013-14 report), to include an update on improvements made in 2014-15 in response to the plan, and to create for the coming year (2015-16) a new action plan based upon the current year’s assessment results. This three-year span of the action plans is now an ongoing component of the SLO process. (Examples of the three-year process of the action plans and closing the loop are demonstrated in the 2014-15 SLO reports provided in Table 1. As specific examples see Law JD, Physics BABS, and Sociology PhD.)

The information provided above demonstrates that UofL academic programs have completed ongoing annual SLO reports since implementation of SLO reporting in 1999 and
highlights the major changes to the SLO process since the 2007-08 cycle. The university has continued to work to strengthen the level of program engagement in assessment.

All Academic Programs Involved in the SLO Process

The Offsite Committee stated that, due to the limited sample size provided in our original Compliance Report, it was unable to determine whether all UofL programs have identified and assessed student learning outcomes and are engaged in sufficient assessment.

To demonstrate that programs have identified and assessed learning outcomes and have been engaged in sufficient assessment prior to 2014, we have provided three years of SLO reports (2012-13, 2013-14, and 2014-15) for UofL programs along with the feedback provided by IE, which demonstrates the university’s role in fostering and encouraging program engagement in effective and sufficient assessment toward program improvement (see Table 1).

The SLO reports made available in Table 1 are evidence that, regardless of type of degree offered or mode of delivery, UofL educational programs in each of the university’s twelve academic units engage in assessment of student learning, have processes in place to assess the effectiveness of their programs, and identify improvements made or planned based on assessment results. Table 1 also demonstrates that programs across the university were involved in assessment of student learning prior to 2014 and that programs annually assess and analyze student learning outcomes and use the results to improve their programs. Feedback reports are included to demonstrate that results from university-level training and individual support have led to improved assessment in the programs’ reports and that academic departments are making progress and improvement in the assessment process.

Specific Examples of Using Assessment Results for Program Improvement

This section provides examples from twelve SLO Reports (one from each academic unit, over a three-year period [2012-13, 2013-14, and 2014-15]) to further demonstrate that programs from across all degree levels and academic units are involved in sufficient assessment of student learning outcomes and that programs use the results of their assessment for program improvement. (SLO Reports for 2012-13, 2013-14, and 2014-15 can be found in Table 1 at the end of this report.)

College of Arts and Sciences

The College of Arts and Sciences (A&S) is the largest academic unit of the university and is home to 42% of all undergraduate and graduate academic programs. A&S offers 88 degree programs, representing 1 associate, 39 baccalaureate, 22 master’s, 13 PhD, and 13 certificate degrees. Arts and Sciences programs utilize on-campus, online, and offsite delivery modes.

Psychology BA/BS

Graduating seniors take a 75-item exit exam testing their competencies in four key areas: Core Concepts, Design and Statistics, Cultural Diversity, and Critical Thinking. The target for successful performance on the exit exam is 60% of students scoring 70% or better on each component of the exam. In 2012-13, the following percentage of graduating seniors meeting this criterion were: Core Concepts − 84%, Design and Statistics − 84%, Cultural Diversity − 68%, Critical Thinking − 92%. One of the key student learning outcomes of the program was “sensitivity to individual and group experiences of those we study as reflected in knowledge and application of principles of cultural diversity.” Although students met the
target for performance on the exit exam, it was the lowest score of the four component scores on the exam.

Another related student outcome to cultural diversity was “sensitivity to individual and group experiences of those we study as reflected in knowledge and application of ethical principles.” The CITI Course in the Protection of Human Subjects was used to measure this student learning outcome. The projected target was 5% of the students scoring 85% or higher; the actual findings indicated that 7% of the students scored 85% or higher. Although students met the criteria, the target was set very low.

To address the concerns of low performance with these two SLOs, the 2012-13 action plan indicated that the department planned to add formal CITI training as part of the Methods course (PSYC 302) for all graduating psychology majors and to continue to revise the Exit Exam, placing particular emphasis on adding items assessing ethics and cultural diversity.

These same two outcomes were included in the 2013-14 and 2014-15 SLO Reports, with the measures remaining the same. However, the targets were revised for the CITI training. The 2013-14 target was for 15% of the students to successfully complete the CITI training with a score of 85% or higher. The finding was that 89% of the students completed the course with a score of 85% or higher. Since so many students did well on the CITI training in 2013-14, the department decided in 2014-15 to increase the percentage of students successfully completing the course from 15% to 60%. However, the actual score for the course was lowered from 85 to 80. The target for 2014-15 was for 60% of the students to successfully complete the CITI training with a score of 80% or higher. The finding was that 89% of the students completed the course with a score of 80% or higher.

Per the program’s Action Plans for 2013-14 and 2014-15, significant revisions to the Exit Exam continued. Items chosen for the Exit Exam incorporated higher level (beyond introductory) psychology and, therefore, represented a more rigorous assessment, which resulted in some lower scores. The target for 2013-14 for successful performance on the exit exam remained 60% of students scoring 70% or better. The finding was that 64% of 126 students scored 70% or better. The target for 2014-15 for successful performance on the exit exam was 60% of students scoring 60% or better; however, for 2014-15, the target was not met. Only 39% of the students scored 60% or better.

This finding has led to valuable discussion among faculty regarding undergraduate curriculum and, specifically, improving student performance in the area of cultural diversity. The 2014-15 plan suggested the submission of a new course proposal (The Psychology of Diversity) to the A&S curriculum committee in fall 2015, with plans to offer the new course in fall 2016. In addition, the plan indicated increased discussions among faculty for more pervasive infusion of cultural diversity into all courses.

**College of Business**

The College of Business (COB) offers 12 degree programs, representing 7 baccalaureate, 2 master's, 1 PhD, and 2 certificate levels, and delivery modes of on campus and offsite.

**Master of Business Administration**

For the Master of Business Administration, one of the SLOs identified in all three reporting cycles (2012-13, 2013-14, and 2014-15) was “acquiring practical skills in oral communications.” Assessment of oral communication skills took place in two core Strategy modules where formal, end-of-course team presentations were required. The first Strategy course was the initial module in the MBA program and the second Strategy course was taught 9-12 months later (depending on the program). Presentations were videoed and individual evaluations were made. The target was that 80% of evaluations were in the
“good” or “excellent” categories. Although the target was met in 2012-13, it was not met in the 2013-14 cycle, where only 54% of the observations were in the “good” or “excellent” categories.

The 2013-14 Action Plan proposed that consultations needed to be undertaken to understand the nature of the problem and to identify potential remedial actions. The decision was made to reconfigure the Professional Development Modules to include oral communication training. Two full days of oral communication training were instituted. Communications experts served as instructors for MBA students to ensure the highest level of educational excellence. The first day of training involved individual oral communication training, while the second day involved group presentations. This was tracked three to four months later in other courses to determine the effectiveness of the oral communication training plan. The target was met in the 2014-15 reporting cycle.

**College of Education and Human Development**

The College of Education and Human Development (CEHD) offers 30 degree programs or 14% of the university’s undergraduate and graduate degree programs, representing 5 baccalaureate, 19 master’s, 3 PhD, 1 EdD, and 2 certificate levels, and delivery modes on campus, online, and offsite.

**Organizational Leadership and Learning, BS**

The Organizational Leadership and Learning (OLL) program is offered face-to-face on campus, online, and off-site at Fort Knox, KY. The same goals, student learning outcomes, and measures apply to all three modes of delivery. Over the three-year period a consistent SLO was to “develop students’ critical thinking and problem solving skills” as part of the Culminating Undergraduate Experience (CUE). Students wrote a practicum reflective essay for the culminating portfolio utilizing the elements of the Paul-Elder model of critical thinking. Over the three-year period (2012-13, 2013-14, 2014-15) students exceeded the target of 90% of students achieving acceptable or higher rating.

The Action Plan in 2013-14 indicated that students were meeting the target in this area. Therefore, the OLL faculty took the opportunity to conduct a thorough review of the competencies and content associated with the CUE course in this major to continue to build upon the strong core curriculum. The review resulted in the revision of the portfolio and the critical reflection assignments to better reflect the intended student learning outcomes for the program exit experience. The revision also included an increased emphasis on diversity awareness and appreciation. All OLL courses have been modified to include a statement about the value of diversity, equity and social justice. The CUE course has been revised to provide additional opportunities for students to participate in community involvement projects. The program’s QMS (Quality Measurement System student opinion survey) data (an indirect measure from a student survey) from 2014-15 show that 90% of students agreed or strongly agreed that the program promotes diversity, equity, and social justice. This is an increase from 2013-14 QMS data that indicated 81% of the students agreed or strongly agreed that the program promotes diversity, equity, and social justice.

**J.B. Speed School of Engineering**

The J.B. Speed School of Engineering (Speed School) offers 33 degree programs (16% of the university’s undergraduate and graduate degree programs), representing 7 baccalaureate, 14 master’s, 6 PhD, and 6 certificate levels, and delivery modes on campus, online, and offsite.
Bioengineering BS

One of the Bioengineering BS program’s consistent SLOs over the three-year period was “the ability to design a biomedical/biological mechanism, system or process satisfying a set of requirements.” This project was part of the Culminating Undergraduate Experience (CUE) course. In 2012-13 and 2013-14, the instructor evaluated the students’ design project using a 4-point rating: 1-unacceptable, 2-needs improvement, 3-meets expectation, and 4-exceeds expectations. The target for both years was 80% of students achieve instructor rating of 3 (meets expectations) or greater. The findings indicated 100% of the students achieved a rating of 3 or greater. In 2014-15, the program introduced a more robust evaluation process, an Instructor Evaluation of Final Design Report [28], which used the following weighted criteria: introduction-5%, product definition-20%, product design-25%, product use and validation-25%, cost and marketing-15%, and conclusion-10%. The target was for 75% of students to achieve instructor rating of 70% or greater on the Final Design Report. The 2014-15 SLO findings for the learning outcome showed that 90% of students scored 70% or greater on the report.

The 2014-15 Action Plan included plans for faculty to continue to strengthen the evaluation process and begin to provide feedback on student design reports toward the improvement of students’ written communication skills. If a student does not address all required criteria in the design report, the student will be required to revise and resubmit the report up to two revisions.

School of Dentistry

The School of Dentistry offers five degree programs, representing 1 baccalaureate, 2 master’s, 1 certificate, and 1 professional level (DMD).

Doctor of Medicine in Dentistry (DMD)

One of the DMD student learning outcomes indicated in the 2012-13 and 2013-14 SLO Reports was “D4 students will demonstrate competency in performing clinical procedures.” This is measured in a Mock Board (D4 Clinical Exam) given in February of D4 year. Students are graded per regional board criteria in the areas of operative dentistry, fixed prosthodontics, endodontics, and removable partial dentures. This exam is similar to the regional SRTA or WREB examinations. The target was a 75% pass rate on the first attempt. In 2012-13, the initial pass rate for the D4 Clinical Exam sections was: Operative: 91%; Endodontics: 42%; Fixed Prosthodontics: 60%; Removable Prosthodontics written: 96%. It was not graded as a compensatory exam; all sections had to be passed. Targets for first time pass rates were not met in endodontics and fixed prosthodontics. In 2013-14, the initial pass rate for the D4 Clinical Exam sections was: Operative: 84%; Endodontics: 68%; Fixed Prosthodontics: 75%; Removable Prosthodontics written: 75%. The target for the first-time pass rate was not met in endodontics, although the pass rate was improved over the previous year. To address these deficiencies, the program’s 2012-13 Action Plan introduced plans to provide assistance to students failing the exam (described below). These goals were continued into 2013-14 Action plan.

The Action Plan in the 2012-13 Report identified several steps to address the unmet targets for the D4 Clinical Examination (Mock Board): There will be a new format for the clinical exam and it will be offered in nine sessions. For the fixed prosthodontics section, the Discipline Coordinator noted discrepancies among different faculty grading the exam. Under the new format, there will only be two faculty grading, which should lead to more consistent and calibrated results. Two review sessions are planned in October with D4 students/group managers to bring everybody up to date on the new exam format and review the grading criteria. By doing the review sessions, and the email reminders, the faculty hopes to make the process more transparent and clear to all involved students and faculty. For the endodontic section, the Discipline Coordinator will review the Mock Board (D4 Clinical Exam)
procedure with the full-time endodontic faculty. The faculty felt that the process has worked in the recent past and should continue: 1) The endo section is graded very hard, which produces a low first time pass rate. The faculty would rather grade more strictly initially, then have students remediate if needed. Remediating students have attained almost 100% pass rate the second time around. The faculty believe this policy is at least partially responsible for the increasing success rate in the endodontic section of actual licensing exams; 2) When students are on rotation to the Endodontic Clinic, the faculty have given them practice sessions on extracted and plastic teeth to help prepare them for not only the D4 Clinical Exam but also actual licensing boards.

The Action Plan in 2013-14 acknowledged that the target for the first-time pass rate was not met in endodontics although the pass rate was improved over the previous year. This discipline will continue to conduct review sessions that were initiated in 2013-14. The Discipline Coordinator will once again review the Mock Board (D-4 Clinical Exam) procedure with the full-time endodontic faculty. The Discipline Coordinator again noted that the endo section is graded very hard. This does produce a low “first time pass rate.” The faculty do not wish to give the student a false sense of security by grading more easily. This could result in students falsely feeling secure in their competency to pass licensing exams resulting in higher failure rates. The faculty believe this policy is at least partially responsible for the increasing success rate in the endodontic section of actual licensing exams.

The Action Plan in 2014-15 indicated that faculty will continue to monitor and assess pass rates for Part I of the National Board Dental Examinations on a monthly basis, offering counseling to those who fail. Pass rate continues to be above 90%.

The pass rate slipped below the 90% target on the first attempt and 100% target for after one year in for Part II of the National Board Dental Examinations. Faculty will continue to closely monitor and assess pass rates for Part II of the National Board Dental Examinations on a monthly basis, offering counseling to those who fail. They will develop and implement quality assurance system strategies to specifically improve results.

School of Interdisciplinary and Graduate Studies

The School of Interdisciplinary and Graduate Studies (SIGS) offers three degree programs, representing 2 master’s and 1 PhD level.

Master of Arts in Interdisciplinary Studies

One of the learning outcomes for the MA in Interdisciplinary Studies is “students will be able to synthesize their knowledge to demonstrate an interdisciplinary perspective across two or more disciplines of study.” To measure this, students must submit and defend a thesis proposal and pass a thesis defense, or successfully complete a culminating research project that demonstrates an integrative approach to the fields of study. Rubrics are used to evaluate the thesis [29] and culminating research project [30]. The target is 100% of the students who graduate will pass the thesis proposal and defense meetings or culminating research project. Findings indicated 100% of the students passed. The program met its target over the three-year period. However, its Action Plans indicated that SIGS continued to meet with program directors each semester to assure students are provided with the resources needed to meet program goals and learning outcomes. These meetings provide SIGS the opportunity to hear program directors’ concerns related to training graduate students and to share with them new SIGS initiatives. SIGS also met with enrolled students each semester to provide professional development opportunities through the PLAN and through specialized group discussions that specifically include SIGS students.
School of Law

The Brandeis School of Law offers one professional level degree (JD).

**Juris Doctor (JD)**

A recurring SLO for the JD over the three-year period was “UofL JD students accurately analyze constitutional law, ethics, real property, evidence, criminal law, contracts, and torts by successfully completing the Bar Exam.” This outcome was measured by the pass rate of UofL graduates on the Kentucky Bar Exam (the exam taken by the majority of their graduates.) The target was 85% of UofL JDs taking the Kentucky Bar Exam for the first time should achieve a passing score (this is also an ABA Standard). The findings in 2012-13 were 82%. The findings in 2013-14 were 82.6%. The findings in 2014-15 were 84.7%. Although students were making progress over the three-year cycle toward the targeted 85%, the program was concerned over students’ first time pass rate. The program’s action plans over the three years addressed these concerns.

The 2012-13 Action Plan indicated the program was in a strategic planning period and was considering the expansion of skills training offered to and required of students. The program would also continue to assess student performance on the bar exam, with a particular eye to identifying predictors of poor bar exam performance and offering counsel and assistance to students identified as at-risk for bar performance.

The 2013-14 Action Plan acknowledged the concern that in several administrations of the Kentucky bar exam the program has not met its goal. To address the deficiency it instituted a mandatory advising program commencing fall 2014 for all JD students who have a cumulative GPA below 2.5 or who were in the bottom quartile of their class. The program chose 2.5 because the research on bar exam success of the program’s students showed a much greater likelihood of success for students with cumulative GPAs of 2.5 or higher. The advising program required all advisees to meet with their advisor three times each semester to ensure the students are meeting course expectations, scheduling appropriate courses, and adequately preparing for exams, in addition to discussing any matters that might prevent the advisee from achieving success. Previously, students with GPAs below 2.5 were required to meet with their adviser just one time prior to scheduling classes.

The 2014-15 Action Plan indicated that the program had implemented a mandatory introduction to the Bar Exam workshop for first-year students so they would understood earlier in their degree program what the bar exam is and how they must prepare for it. In addition, the program offered a one-credit non-mandatory course starting in spring 2016 to address bar exam preparation and to provide students with an opportunity to practice questions. The program also reworked its first-year curriculum to improve the learning taking place. For example, Constitutional Law was moved into the first year, and Torts and Contracts was changed from six to five hours, Civil Procedure was changed to four hours, and five hours were allotted to a new course, Lawyering Skills, which covers the materials formerly covered by Basic Legal Skills and Legal research.

School of Medicine

The School of Medicine offers 13 degree programs representing 6 master’s, 5 PhDs, 1 AuD, and 1 professional (MD) level.

**Audiology – AuD**

One of the outcomes of the Audiology AuD program was “students will demonstrate knowledge and skills in six areas related to the practice of audiology: foundations of practice, prevention/identification, assessment, (re)habilitation, advocacy/consultation, and education/research/administration.” The Praxis examination in audiology assesses...
beginning practitioners' understanding of essential content and current practices and is used to assess the SLO. The exam is used as a requirement for state licensing and certification by the American Speech-Language Hearing Association.

The target was that 80% of 4th year students will pass the Audiology Praxis exam by graduation, and 90% of total program graduates will pass the Audiology Praxis exam within one year of graduation. The pass rates were 58.2% in 2012-2013, 63.3% in 2013-2014, and 100% in 2014-15.

The Action Plan in 2012-13 and again the Action Plan in 2013-14 indicated that students who did not pass the Praxis exam on their first attempt will work with their faculty advisor to develop a study plan. The 2014-15 Action Plan provided more details to address this issue. A three-part plan to improve the first-administration Praxis pass rate and the overall pass rate was implemented in 2014-15: Students were strongly encouraged to take the Praxis exam in their 3rd year immediately after their comprehensive exams; students who did not pass the exam at the first administration would be offered assistance by the faculty; and all students were expected to pass the exam prior to graduation. The plan allowed faculty to work more closely with 3rd-year students who did not pass the exam on the first administration (as 4th year students are away on externships). The program indicated that this plan might have influenced their higher first-time pass rate in 2014-15. In the 2014-15 Action Plan, the program changed the future target to: 50% of 3rd year students will pass the Audiology Praxis exam at the first administration, 100% of 4th year students will pass the Praxis exam prior to graduation.

**School of Music**

The School of Music offers six degree programs representing 4 baccalaureate and 2 master's level.

**Bachelor of Arts and Bachelor of Music**

An SLO used by the BA and BM Music programs over the three-year period related to critical thinking: “upon completion of the degree, students will demonstrate critical thinking and have the ability to examine, question, and explain musical judgments.” There were several measures. One included a rubric [31] assessing an individual student’s level of competencies in precision, accuracy, intonation, and language/diction skills (voice). Students needed to synthesize and apply these skills in an overall artistic performance to be promoted to the next course level of study. The target was that 80% of the students were successfully promoted to the next course level of study. Findings indicated greater than 80%. The target was met.

Though the target was met, the 2014-15 Action Plan indicated that, in an effort to continue to strengthen student learning in this area, the School of Music Ideas to Action (i2a) Unit Leadership committee created a comprehensive toolkit for the music program containing authentic applications and assessment tools. Resources related to the teaching and assessment of critical thinking within the music discipline as well as in outside fields of study were included in the toolkit. The faculty were made aware of the toolkit and were encouraged to integrate the materials into their 2015-16 syllabi. In addition, a new i2a committee was created to work with staff at the Delphi Center to update/evaluate current i2a thinking (critical thinking) especially in the areas of performance.

**School of Nursing**

The School of Nursing (SON) offers five degree programs, representing 1 baccalaureate, 1 master's, 2 doctoral, and 1 certificate levels, and delivery modes on campus, online, and offsite.
**Bachelor of Sciences – Nursing**

The School of Nursing offers the traditional BSN face-to-face on campus, the traditional BSN offsite at Owensboro, KY, and the RN-BSN online. All students in the program, regardless of mode of delivery, participate in a culminating undergraduate experience (CUE). In the CUE course, the program assesses the following student learning outcome: “students will collaborate effectively with community members and/or other healthcare professionals in planning, implementing, and evaluating interventions to develop a population-focused project.” The CUE community project is measured by a rubric [32].

The target for both traditional and RN-BSN: 95% of students will score 90 or greater on CUE Community Project based on the rubric. The findings in 2014-15 are shown in below.

<table>
<thead>
<tr>
<th></th>
<th>Traditional BSN Face-to-Face UofL campus</th>
<th>Traditional BSN Offsite Owensboro</th>
<th>RN-BSN Online</th>
</tr>
</thead>
<tbody>
<tr>
<td>% receiving 90 or &gt; on CUE Project</td>
<td>n</td>
<td>% receiving 90 or &gt; on CUE Project</td>
<td>n</td>
</tr>
<tr>
<td>Summer 2014</td>
<td>100%</td>
<td>36</td>
<td>100%</td>
</tr>
<tr>
<td>Fall 2014</td>
<td>100%</td>
<td>54</td>
<td>100%</td>
</tr>
<tr>
<td>Spring 2015</td>
<td>100%</td>
<td>80</td>
<td>100%</td>
</tr>
</tbody>
</table>

Since the students met the program’s target, the program’s Action Plan did not reflect any further action taken.

Over the 3-year period, the department did identify an area of concern in their Action Plans due to a change in the national assessment tool. In the second quarter of 2013, the National Council of State Boards of Nursing (NCSBN) made changes to the calculation of the pass score for the NCLEX, which students in the program take. The percent of pass rate for first time NCLEX takers from the BSN program dropped from 91.75% for first quarter (Jan-Mar 2013) to 75.31% for fourth quarter (Sept-Dec 2013) with year-to-date (2013) of 85.18%. Additionally, the SON increased enrollment, and while the program continued to admit only those students who meet the admission criteria the overall student admission GPA and end of program GPA were lower than the smaller cohorts admitted in 2012 and before. In combination, these changes were reflected in the lower overall pass rate for first time NCLEX takers. The SON maintained the target measure of 95% for first time NCLEX takers. The SON has implemented a comprehensive program to support the overall success of all students and to strive for all students to pass NCLEX on first try. This included the continued support for Cardinal Confidence, an initiative initially developed to help last-semester seniors prepare for graduation. In 2014-15, the department extended the support to include students in second and third semester nursing courses.

**School of Public Health and Information Sciences**

The School of Public Health and Information Sciences (SPHIS) offers nine degree programs, representing 2 baccalaureate, 4 master’s, 2 PhD, and 1 certificate levels.

**Master of Public Health**

One of the core learning outcomes indicated in each of the Master of Public Health SLO Reports over the three-year reporting cycle was “apply public health knowledge.” This outcome was measured with a comprehensive exam and by a rubric [33] applied to each of three case team deliverables. Both of these measures were part of the required course PHPH-697 Integrating Learning and Experience in Public Health. The target for the comprehensive exam was 80% of students would receive a minimum score of 80. The
findings in 2012-13 and 2013-14 indicated that 88% passed the comprehensive exam with a score of 80% or higher, and in 2014-15 those passing increased to 100%. The findings for the case team deliverables for all three years were 100% of the students received a score of at least 80. A third assessment to measure this outcome was taking the Certified Public Health examination given by the National Board of Public Health Examiners (NBPHE). The target was that 80% of the students would pass. In 2012-13 and 2013-14, the exam was optional. The findings indicated that only 50% of the students passed the optional exam. In 2014-15, 75% of the students passed the NBPHE.

The Action Plans over the three-year period focused on improving students’ performance on the NBPHE exam through including a review program for the exam focused on the core and crosscutting competencies. The plan noted students matriculating in the fall of 2014 would be required to take the NBPHE. The target in the transition year 2015-16 would be a minimum pass rate of 80% on first take of the NBPHE and 100% on second take (if required).

**School of Social Work**

The School of Social Work offers three degree programs representing 1 baccalaureate, 1 master's, and 1 PhD and delivery modes on campus, online, and offsite.

**Social Work – PhD**

A common SLO indicated in the Social Work PhD 2012-13, 2013-14, and 2014-15 reports was for PhD students to be able to teach courses in the social work curriculum. In the 2012-13 and 2013-14 reporting cycles, this outcome was measured using the indirect measure of BSW and MSW students’ evaluation of the PhD student instructor. The target for 2012-13 and 2013-14 was 4 out of 5 overall mean score. Scores above 4/5 were the minimum requirement for success, with a target of 90% of students meeting the minimum. Scores above 4.5/5 were exemplary requirement for success, with a target of 30% of students meeting the exemplary rating. The findings in 2012-13 reporting cycle indicated that 90% of the PhD students met minimum requirement for success based on the score on the course evaluation and 47% of the PhD student met exemplary requirement for success. In 2013-14 the findings were that 80% of the PhD students met minimum requirement for success and 36% met exemplary requirement for success. Targets were met in 2012-13 but the minimum target was not in 2013-14.

In 2014-15, the program piloted a direct measure of student teaching performance in the Teaching in Social Work course (SW 764). The instructor of the class used a rubric to evaluate students’ performance. The target was 4 out of 5 overall mean score. Scores above 4/5 were the minimum requirement for success, with a target of 90% of students meeting the minimum. Scores above 4.5/5 were exemplary requirement for success, with a target of 30% of students meeting the exemplary rating. The finding was that 75% of students met minimum requirement for 4 and 25% met exemplary requirement for 4.5. The target was not met.

The Action Plan in the 2014-15 report addressed this issue. The PhD faculty met monthly and discussed a variety of ways to improve the performance of students to improve their teaching skills. For the next academic year (2015-16) more mentoring from faculty would be provided to guide students through teaching. Doctoral students were encouraged to participate in SIGS Graduate Teaching Academy (GTA) and use resources available through the Delphi Center. Starting in spring 2016, doctoral students would be teaching assistants under the mentorship of faculty to fulfill their teaching practicum requirements prior to teaching on their own.
SUMMARY

The University of Louisville is in compliance with 3.3.1.1. The university’s SLO reporting process has been ongoing and evolving since its implementation in 1999 and progress has been made since the 2007-08 cycle toward ensuring that programs participate in sufficient assessment to assess the effectiveness of their programs. SLO Reports for all academic programs from the 2012-13, 2013-14 and 2014-15 reporting cycles are provided to demonstrate that all degree-granting programs from all 12 academic units were participating in the SLO reporting process prior to 2014. As well, examples from twelve SLO Reports (one from each academic unit, showing progress over a three-year period [2012-13, 2013-14, and 2014-15]) are provided to demonstrate that programs from across all degree levels and academic units are involved in sufficient assessment of student learning outcomes and that programs use the results of their assessment for program improvement.

Student Learning Outcomes Reports for 2012-13, 2013-14, and 2014-15 are provided in Table 1 at the end this document.

[1] Inventory of Degree Programs
3_3_1_1_fn01.pdf

3_3_1_1_fn02.pdf

3_3_1_1_fn03.pdf

3_3_1_1_fn04.pdf

[5] 2010-11 SLO Annual Report Instructions - Writing SLOs
3_3_1_1_fn05.pdf

3_3_1_1_fn06.pdf

3_3_1_1_fn07.pdf

3_3_1_1_fn08.pdf

3_3_1_1_fn09.pdf

3_3_1_1_fn10.pdf

3_3_1_1_fn11.pdf

[12] 2012-13 SLO Report - Graduate/Professional-level Template
3_3_1_1_fn12.pdf

3_3_1_1_fn13.pdf

### Table 1. Student Learning Outcomes Reports

**Legend:**
- New = New Program
- N/E = No Enrollment
- N/G = No Graduates
- N/A = Not Available

<table>
<thead>
<tr>
<th></th>
<th>2012-13</th>
<th>2013-14</th>
<th>2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent in compliance</td>
<td>98%</td>
<td>97%</td>
<td>99%</td>
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**Arts & Sciences**

**Anthropology**

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<th>2013-14</th>
<th>2014-15</th>
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<tbody>
<tr>
<td>BA</td>
<td>Report</td>
<td>Feedback</td>
<td>Report</td>
</tr>
<tr>
<td>MA</td>
<td>Report</td>
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**Applied Geography**

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<th>2014-15</th>
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<tbody>
<tr>
<td>BS</td>
<td>Report</td>
<td>Feedback</td>
<td>Report</td>
</tr>
<tr>
<td>MS</td>
<td>Report</td>
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**Asian Studies**

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<th>2014-15</th>
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<tbody>
<tr>
<td>Cert</td>
<td>Report</td>
<td>Feedback</td>
<td>Report</td>
</tr>
<tr>
<td>BA</td>
<td>Report</td>
<td>Feedback</td>
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**Biology**

<table>
<thead>
<tr>
<th>Level</th>
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<th>2014-15</th>
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<td>Feedback</td>
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<td>MS</td>
<td>Report</td>
<td>Feedback</td>
<td>Report</td>
</tr>
<tr>
<td>PhD</td>
<td>Report</td>
<td>Feedback</td>
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**Chemistry**

<table>
<thead>
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<th>Level</th>
<th>2012-13</th>
<th>2013-14</th>
<th>2014-15</th>
</tr>
</thead>
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<tr>
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<td>Feedback</td>
<td>Report</td>
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<td>Report</td>
<td>Feedback</td>
<td>Report</td>
</tr>
<tr>
<td>PhD</td>
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<td>Feedback</td>
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**Classical/Modern Languages**

<table>
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<th>2014-15</th>
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<tr>
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</tr>
<tr>
<td>French Lang &amp; Lit</td>
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<td>Feedback</td>
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3.3.2

Quality Enhancement Plan

The institution has developed a Quality Enhancement Plan that (1) demonstrates institutional capability for the initiation, implementation, and completion of the QEP; (2) includes broad-based involvement of institutional constituencies in the development and proposed implementation of the QEP; and (3) identifies goals and a plan to assess their achievement. (Note: This requirement is not addressed by the institution in its Compliance Certification.)

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville is in compliance with Comprehensive Standard 3.3.2 and has developed a quality enhancement plan (QEP), *Find Your Fit (FYF)* [1], that demonstrates institutional capability for initiation, implementation, and completion.

*Find Your Fit (FYF)* focuses on student learning and success in the crucial second year of undergraduate studies. At the core of the QEP is a new, three-credit seminar aimed at enhancing the academic and personal success of exploratory second-year students.

UofL’s QEP proposal includes a thorough description of the university’s capacity to launch the initiative, to implement and expand the seminar offerings during the five-year span of the program, and to fully complete all project components. The proposal features a timeline and a narrative that describes the major components and activities of the initiative, including the administrative aspects that will ensure the maintenance of the project; the corresponding campus communication and engagement activities; the professional development elements for those teaching the seminar; and the various ongoing formative and summative assessment pieces.

The staffing and organizational structure of the program will include a new university-wide QEP Implementation Committee, as well as a dedicated QEP staff team made of up of four professionals whose job duties are primarily focused toward the project and who are housed in the university’s Delphi Center for Teaching and Learning [2]. This team has had experience in implementing and sustaining a QEP through its work on the university’s previous QEP, *Ideas to Action*. The QEP team will be supplemented by the work of academic advisors and instructional librarians, whose current roles will be adjusted to selectively support key aspects of the QEP. The QEP proposal includes a projected five-year budget created in partnership with key university administrators to ensure a shared commitment to adequately supporting the *Find Your Fit* goals. Remuneration for faculty members who are selected to teach the new QEP seminar is included in the project’s budget.

The QEP Development Committee [3] is the university body that was charged with researching, proposing, developing, and engaging others in the QEP creation process between 2015 and 2017. This committee is composed of faculty, staff, and student members from units across campus and is co-chaired by a faculty member and the university’s QEP executive director. The membership of the committee was modified each
semester as the topic took shape and as the co-chairs began to tap the expertise of individuals on campus whose work and interests dovetailed with the emerging QEP foci.

The development of *Find Your Fit* and its second-year seminar were informed by research drawn from experts and programs on campus and from higher education scholarship on best practices for student engagement and related topics. Throughout 2016, the QEP committee conducted information and feedback sessions with constituents across campus that yielded valuable insights and perspectives into the proposed QEP. Focus groups and surveys conducted with students, local employers, and recent alumni provided significant contributions during the development phase. Additionally, a faculty work group, a student advisory team, instructional librarians, and academic advisors and career development professionals met regularly to consult with QEP leaders on the project and to ensure an engagement of diverse voices in the construction of the QEP and the curriculum of the new seminar.

The primary goal of *Find Your Fit* is to enhance students’ inquiry and decision-making skills in order for them to thrive academically and personally. A series of assessments have been designed to measure these goals. Through its research, the QEP Development Committee determined that the QEP learning constructs should be independent inquiry, reflective learning, informed decision-making, and academic clarity. The developmental constructs informing the project are self-regulated learning behavior, academic/social self-efficacy, and sense of belonging. The outcomes at the QEP project level include students’ declaration of a major, increased persistence into the third year, and successful completion of an undergraduate degree program.

The QEP assessment plan has three tiers. The first tier occurs primarily within the course activities and assignments through the use of rubrics to assess learning gains of the students. Tier two assessment occurs at the program level and at the conclusion of each academic semester as the seminar itself and its impact on student learning and development are assessed. Tier three assessments will measure the overall impact of the project as well as provide information and direct data to consider how the learning and developmental constructs of *Find Your Fit* affect the overall success of students at the institution.

Every aspect of the project will be assessed each semester in order to continually adjust the methodologies to better meet the goals of the project. The QEP timeline and activities will evolve in order to respond to the realities and challenges encountered during the implementation of *Find Your Fit*.

**SUMMARY**

The University of Louisville has developed a Quality Enhancement Plan (QEP) that demonstrates its capability for the initiation, implementation, and completion of the proposed project, *Find Your Fit*. Many institutional constituencies were involved in the development of the plan and many more will be involved in its implementation. The QEP proposal identifies specific goals and provides a plan for assessing the achievement of the goals.


3.4.9

**Educational Programs: All: Academic support services**

The institution provides appropriate academic support services.

**SACSCOC OFF-SITE COMMITTEE COMMENTS**

**Non-Compliance**

The institution provides academic support services to students and faculty through centralized institutional programs and services and also at the individual college and school level.

Centralized academic support services for students include tutoring, retention programs, supplemental instruction and learning assistance for certain courses, computer resources, math resources, campus community events, and peer mentoring through REACH (Resources for Academic Achievement); transfer student services including credit evaluation; military and veteran student services; the Disability Resource Center; the University Writing Center and the Digital Media Suite in the Learning Commons of the Ekstrom Library, whose services are available to all students and faculty.

Academic support services for graduate students provided by the School of Interdisciplinary and Graduate Studies include orientations for new graduate students and new teaching assistants, professional development programs, such as the PLAN, which offers the Graduate Teaching Assistant Academy, the Grant Writing Academy, and the Entrepreneurship Academy, multiple workshops, peer mentoring, and self-assessment tools.

Academic advising is offered through the academic colleges and professional schools, and by graduate faculty mentors. In addition there is centralized support for undergraduate advisors for best practices and advising professional development provided by the Office of Undergraduate Advising Practice, including programs such as degree audit, Flight Plan (tracking and assisting students to achieve graduation in four to six years), and GradesFirst for scheduling and advising notation.

Academic support services for faculty are offered centrally through the Delphi Center for Teaching and Learning, and include faculty development programs such as the i2a Critical Thinking Institute, the Part-Time Faculty Institute, and an annual conference on teaching and learning. The Delphi Center supports the institution’s Blackboard course management system, and oversees the university’s online education programs. The Delphi Center also offers seminars on a variety of topics such as Blackboard, student engagement, online course creation and design, digital media, and new and emerging technologies.

The Off-Site Reaffirmation Committee could not find sufficient evidence that appropriate academic support services are available to students at the off-campus instructional sites.

**Judgment**

☑ Compliance  ☐ Partial Compliance  ☐ Non-Compliance  ☐ Not Applicable

**Narrative**

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.4.9. Students in the University of Louisville’s offsite and online programs have access to comparable academic student support services as do on-campus UofL students.

Off-Site Education

UofL has the off-site programs listed below. A summary of student support services is provided for each.

- Akademie Wurth Business School—College of Business [1a]
- European Business School—College of Business [1b]
- Fort Knox Extended Campus—College of Education and Human Development [1c]
- General Electric—Speed School of Engineering [1d]
- Louisville Seminary—Kent School of Social Work [1e]
- Louisville Seminary—School of Law [1f]
- Owensboro Medical Health System—School of Nursing [1g]
- Quality Leadership University, Panama—Speed School of Engineering [1h]
- Quality Leadership University, Panama—Arts and Sciences [1i]
- Simmons College--A&S [1j]
- Trover Campus—School of Medicine [1k]
- University of Kentucky—Kent School of Social Work [1l]
- University of Kentucky—College of Business [1m]
- Western Kentucky University—Speed School of Engineering [1n]

For each off-site location, the university’s practice is to provide as many academic support services as feasible (orientation, student IDs, online registration, Blackboard access, library, writing center, advising support, student services, disability resources, proctoring of exams, etc.). Each agreement for off-site programs provides minimum specifications for physical facilities and program assessment, as well as for faculty support.

The Delphi Center for Teaching and Learning [2] serves as a central point of contact for the university’s Course Management System, Blackboard. Distance Education students are able to log-in to courses and interact with other students, their instructor, and the course material. In addition, off-site students have access to online library materials, including electronic journals and real-time access to librarians using the “Ask a Librarian” live chat feature or by phone or email.

Remote access to course content is available with valid university ID authentication. The University Libraries system supports all students in distance education programs. Students studying remotely can request research appointments from a distance (conducted by phone or online). Students also may submit questions via phone, online chat, or e-mail. Librarians will also respond to questions received during off hours (through e-mail) [3]. Staff in Access and User Services [4] are available to assist distance students in obtaining books, journal articles, or book chapters in a timely fashion. If faculty have requested online reserves for a course, Access and User Services staff assist students in accessing those resources. Specific webpages provide detailed instructions for electronic access to resources. Students in distance courses may request that materials be scanned or physically mailed to them following instructions available online [5]. Students enrolled in international programs have full electronic access to online collections via the Internet, access to research support through email and chat, and may request that print materials be scanned and delivered via electronic document delivery.

Online Learning has a team of dedicated enrollment counselors to answer questions such as admission requirements, tuition, military-specific questions, program content, and technology requirements. These counselors may be reached via a centralized email address (online@louisville.edu) or through a toll-free number [6].
Distance education students have access to services such as the Virtual Writing Center [7] and online course tutoring through REACH [8]. Enrollment and course registration can be done online by all distance education students through the use of PeopleSoft (the university’s electronic student administration system) and the Blackboard course management system.

Students have quick, online access to the schedule of classes, unofficial transcripts, class schedules, catalogs, semester grades, and account information. For more extensive services, including registration, address/phone number maintenance, and checks for holds on their records, students can log on to ULink, the university’s online portal [9].

**Academic Unit Support for Distance Education**

In the academic unit, off-site students may contact their respective advising office via Blackboard, email, or phone. The Academic Affairs Coordinator in Kent School holds Skype advising appointments on an as-needed basis for distance education students and uses Blackboard Collaborate for orientation sessions.

Many off-site programs also provide student support in collaboration with the enrolling institutions or partner. The colleges of Arts and Sciences, Business, and the Speed School of Engineering offer international programs where UofL faculty provide primary oversight, teach courses at the off-site locations, and work with the local program directors to facilitate access to the appropriate student support services.

**SUMMARY**

The University of Louisville (UofL) provides numerous and appropriate academic support services aligned with its commitment to the pursuit of excellence in educational experience and research, creativity, and scholarly activity. The university’s academic support services provide classroom and pedagogical support for faculty and tutorial and curricular assistance for students’ academic success. This includes support for teaching improvement appropriate to the various levels and needs of the student body. Comparable academic support services are available to on-campus, off-campus and online students.

[1] Student Services for Off-site Programs

[1a] Akademie Wurth Business School—College of Business 3_4_9_fn01a.pdf

[1b] European Business School—College of Business 3_4_9_fn01b.pdf

[1c] Fort Knox Extended Campus—College of Education and Human Development 3_4_9_fn01c.pdf

[1d] General Electric—Speed School of Engineering 3_4_9_fn01d.pdf

[1e] Louisville Seminary—Kent School of Social Work 3_4_9_fn01e.pdf

[1f] Louisville Seminary—School of Law 3_4_9_fn01f.pdf
[1g] Owensboro Medical Health System—School of Nursing
3_4_9_fn01g.pdf

[1h] Quality Leadership University, Panama—Speed School of Engineering
3_4_9_fn01h.pdf

[1i] Quality Leadership University, Panama—Arts and Sciences
3_4_9_fn01i.pdf

[1j] Simmons College—A&S
3_4_9_fn01j.pdf

[1k] Trover Campus—School of Medicine
3_4_9_fn01k.pdf

[1l] University of Kentucky—Kent School of Social Work
3_4_9_fn01l.pdf

[1m] University of Kentucky—College of Business
3_4_9_fn01m.pdf

[1n] Western Kentucky University—Speed School of Engineering
3_4_9_fn01n.pdf

[2] Delphi Center for Teaching and Learning Services for Online Learners
3_4_9_fn02.pdf
http://louisville.edu/delphi

[3] Ask a Librarian
3_4_9_fn03.pdf
https://library.louisville.edu/ask

3_4_9_fn04.pdf
https://library.louisville.edu/student-services

[5] Library Services for Distance Education and Online Courses
3_4_9_fn05.pdf
https://library.louisville.edu/distance

[6] Office of Online Learning Contact Information
3_4_9_fn06.pdf
http://louisville.edu/online/About-Us/Contact-Us

[7] Virtual Writing Center and Online Learning Academic Support
3_4_9_fn07.pdf
http://louisville.edu/writingcenter/for-students-1/text-of-virtual-writing-center-introduction

[8] REACH Online Tutoring
3_4_9_fn08.pdf
http://reach.louisville.edu/tutoring/general/request_Online.html

[9] ULink Online Portal
3_4_9_fn09.pdf
https://ulink.louisville.edu/psp/psp91p/EMPLOYEE/EMPL/h/?tab=PAPP_GUEST
3.4.11

Educational Programs: All: Academic program coordination

For each major in a degree program, the institution assigns responsibility for program coordination, as well as for curriculum development and review, to persons academically qualified in the field. In those degree programs for which the institution does not identify a major, this requirement applies to a curricular area or concentration.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

All named Academic Program Coordinators for all academic programs in 12 degree-granting, academic units were reviewed and evaluated for their ability to assure that the academic program contains essential curricular components, has appropriate content and pedagogy, and maintains currency in the field. In cases where named Academic Program Coordinators did not appear to hold degree credentials for specific curriculum development and review, other qualifications were assessed. Moreover, in cases where the named Academic Program Coordinator had neither degree credentials nor sufficient other qualifications, evidence of how the named Coordinator worked with program faculty was sought.

The Off-Site Reaffirmation Committee was unable to determine that the Academic Program Coordinator for the Equine Industry Program held the appropriate academic qualifications.

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.4.11. UofL assigns responsibility for program coordination and curriculum development and review to persons academically qualified in the field. The academic units at the university define "field" as a specialized area of knowledge and related scholarship and instructional practices.

The program coordinating activities within each of the degree-granting schools can include:

- Administering academic processes including entrance criteria, progress, retention, discipline, dismissal, and graduation in conjunction with the appropriate departments, affiliated institution, and committees;
- Advising the department or overseeing the committee that regularly advises the department on curriculum review and revision;
- Identifying, developing, and proposing program curricular changes as needed and implementing changes once they have been approved through the university's curriculum process;
- Scheduling or participating in scheduling of program classes, with a focus on ensuring that the schedule provides ample opportunity for students to take required courses in a timely fashion;
- Advising students and/or overseeing advising of students in the program;
- Evaluating or overseeing the regular evaluation of courses, including course syllabi, course learning outcomes, and student success as evaluated in the program’s annual Student Learning Outcomes Report;

• Providing oversight in completing annual Student Learning Outcomes reports in which they assess student learning and the quality of their programs and make plans for improvement of student learning and the program;
• Conducting or overseeing degree checks;
• Assisting graduating students with placement in further educational programs or in employment;
• (In graduate programs) overseeing the administration and evaluation of preliminary and/or comprehensive examinations and theses, dissertations, and other culminating projects;
• Serving as liaisons to accreditors, licensing organizations, community boards or partners and grant or contracting agencies (local, state, federal);
• Completing Academic Program Reviews (following a Kentucky Council on Postsecondary Education [CPE]-developed template) every ten years and a Progress Report every five years.

All of these processes contribute to the continuing improvement of program quality.

The SACSCOC off-site committee was unable to determine that the qualifications of the program coordinator for the Equine Industry program (Timothy Capps) were appropriate. This question may have arisen due to the accidental truncation of the explanation of Timothy Capps’s qualifications in the PDF made from the original Excel file in which we collected the program coordinator details.

We regret to report that Mr. Capp passed away on April 22, 2017. As the following webpages demonstrate, Mr. Capp was a highly recognized and respected expert in the horse racing industry. While he did not hold a master’s in the field, the breadth of his past experience and knowledge of the industry, combined with his public standing in the field, qualified him to lead the Equine program at UofL, as the following webpages announcing his death demonstrate:


New Equine Program Coordinator

Following Mr. Capps’s death, the Business School appointed Dr. Brittany Adams-Pope as program coordinator for the Equine Industry program. Dr. Adams-Pope is an Assistant Professor in the College of Business and holds a Ph.D. in Agricultural Leadership Development from the University of Florida (2013) [4]. She has been at UofL for three years and has served seven years in Higher Education.

Dr. Adams-Pope also holds an M.S. in Agricultural Leadership Development (University of Georgia, 2010) and a B.S.A. in Animal Science-Equine Management (University of Georgia, 2007).

Dr. Adams-Pope has served on the Kentucky Horse Council Board of Directors and as a Faculty Advisor to the Polo Club. She has seven refereed journal publications in related areas and teaches three different equine business classes at UofL: EQIN 101 (Equine Management), EQIN 202 (Horse Industry Overview), and EQIN 206 (Industry Speaker Series). She also taught related courses at the University of Florida before coming to UofL.
UofL. Dr. Adams-Pope works with the unit and Equine program faculty to ensure the quality of the Equine Business (BSBA) program.

**SUMMARY**

At the University of Louisville, all faculty assigned as program coordinators hold credentials relevant to their program’s field and are qualified to coordinate, develop, and review their assigned program and curriculum for on-campus, off-campus, and online programs. The academic units at the university define "field" as a specialized area of knowledge and related scholarship and instructional practices. The Equine Industry program is led by a faculty member who holds a terminal degree (Ph.D.) and is well-grounded in the knowledge of the equine industry.

3_4_11_fn01.pdf
http://www.thoroughbreddailynews.com/tim-capps-passes-away/

[2] Remembering Tim Capps
3_4_11_fn02.pdf
http://business.louisville.edu/remembering-tim-capps/

3_4_11_fn03.pdf

[4] College of Business Program Coordinators Roster—Dr. Adams-Pope
3_4_11_fn04.pdf
3.5.2

Educational Programs: Undergraduate: Institutional credits for a degree

At least 25 percent of the credit hours required for the degree are earned through instruction offered by the institution awarding the degree. (See the Commission policy “Collaborative Academic Arrangements.”)

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The evidence provided was not sufficient to demonstrate compliance with the requirement that at least 25 percent of the credit hours required for the degree are earned through instruction offered by the institution awarding the degree. The university provided a policy in the Undergraduate Catalog that students earning baccalaureate degrees must complete 30 of their last 36 semester hours at the university. This policy would ensure that the institution meets the 25 percent requirement only if all baccalaureate degrees required 120 or fewer semester credit hours. There are multiple degrees listed in the Undergraduate Catalog that require more than 120 credit hours for the degree. Selected examples include the Bachelor of Science in Bioengineering, the Bachelor of Science in Civil Engineering, the Bachelor of Music with Emphasis in Music Education, the Bachelor of Music with Emphasis in Music Therapy, the Bachelor of Science in Organizational Leadership and Learning, the Bachelor of Arts in Political Science, the Bachelor of Science in Physics, and the Bachelor of Social Work. This policy, therefore, is not alone sufficient evidence that the university ensures that all undergraduate degrees awarded meet the 25 percent standard.

Transfer credits are shown on the transcript and state the institution at which the credits were earned.

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville is in compliance with Comprehensive Standard 3.5.2.

The off-site committee noted that the university’s original Residency Policy that requires 30 of the last 36 credit hours be completed at UofL does not ensure that 25 percent of the degree is completed at UofL for those programs requiring more than 120 hours.

The University of Louisville has revised its Residency Status Policy to include the SACSCOC requirement that 25 percent of a baccalaureate program be completed at the institution, which addresses the issue associated with degrees longer than 120 credit hours [1].

The university’s Academic Policy committee approved the policy revision on November 29, 2017. The new policy requires that students complete at least 25 percent of the total credit hours required for the degree at UofL.

The revised policy is provided below:

**UofL Residency Status Policy:** Students earning baccalaureate degrees are required to complete at least 25 percent of the total credit hours required for the degree (including general education credit hours) at the University of Louisville. Students earning baccalaureate degrees are also required to complete 30 of their last 36
semester hours at the University of Louisville. Students earning associate degrees are required to complete a minimum of 15 of their last 18 semester hours at the University of Louisville. Additionally, transfer students must take a minimum of 12 credit hours in their major at the University.

The policy revision will appear in the 2018 edition of the *UofL Undergraduate Catalog*. Unit deans and associate deans are charged with implementing the revised policy in their units’ degree check processes, with ensuring that faculty and advisors inform students of any new program requirements, and with monitoring the application of transfer credit toward degrees. The monitoring process used by units with undergraduate programs that require more than 120 hours is provided [2].

**SUMMARY**

The University of Louisville is in compliance with Comprehensive Standard 3.5.2. The UofL Residency Policy has been revised to require that at least 25 percent of the total credit hours required for the degree (including general education credit hours) be completed at UofL.

[1] Revision of UofL Residency Status Policy  
3_5_2_fn01.pdf

[2] Unit Processes for Monitoring Transfer Credit for Units with Undergraduate Programs that Require More Than 120 Credit Hours  
3_5_2_fn01.pdf
3.7.1

Faculty: Faculty competence

The institution employs competent faculty members qualified to accomplish the mission and goals of the institution. When determining acceptable qualifications of its faculty, an institution gives primary consideration to the highest earned degree in the discipline. The institution also considers competence, effectiveness, and capacity, including, as appropriate, undergraduate and graduate degrees, related work experiences in the field, professional licensure and certifications, honors and awards, continuous documented excellence in teaching, or other demonstrated competencies and achievements that contribute to effective teaching and student learning outcomes. For all cases, the institution is responsible for justifying and documenting the qualifications of its faculty. (See the Commission guidelines “Faculty Credentials.”)

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The institution did not adequately justify and document the qualifications of a large number of Faculty to teach the identified course(s). For example, in many cases, instructors of record for graduate classes (or at least classes at the 500 level) do not hold a terminal degree. A list of Faculty names with associated courses is provided in the Request for Justifying and Documenting Qualifications of Faculty.

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) has qualified faculty that effectively support the teaching, research, and service mission of the institution [1]. The appropriateness of an individual’s degree for his or her teaching, research, or service assignment is evaluated by the academic unit responsible for the appointment decision as defined by The Redbook, Chapter Four (the university’s governance document) [2].

Faculty who participate in teaching graduate-level courses must meet the requirements of the School of Interdisciplinary and Graduate Studies (SIGS) [3]. The criteria for graduate faculty status is 1) an earned doctorate/terminal degree in the teaching discipline or a related discipline and 2) evidence of experience in research, teaching, scholarship, or creative activity. However, units may consider other qualifications (e.g., work experience, research) when determining whether a person is qualified to teach graduate-level courses [4].

Faculty teaching online and in off-site locations employed by the university on a full-time or part-time basis must meet the minimum SACSCOC guidelines or have a justification listed that documents their qualifications. The faculty credentials guidelines also apply to dual credit instruction in the local high schools [5].

Any graduate teaching assistants designated as the lead instructor must meet the minimum qualifications of the SACSCOC faculty credentials guidelines [6]. The Off-site report noted 500-level courses as graduate. At UofL, 500-level courses may have undergraduate or graduate level enrollments and varies based on the academic unit.
However, the faculty credentials would be expected to be consistent with the university’s requirements for qualified faculty.

Each academic unit was asked to review the faculty listed in the Off-site Committee report; and to provide updated information for this report; and to record the updates in the university’s PeopleSoft Human Resources system to ensure future faculty roster reports have the corrected information. The Vice Provost of Faculty Affairs has been alerted to the need to provide additional training in the units and to ensure credentials are documented properly and the need to write instructor justifications for instructors without terminal degrees teaching 500-level or graduate-level courses.

As requested, the University of Louisville has provided additional justification and documentation on the qualifications of the 122 instructors identified by SACSCOC as needing additional explanation of their qualifications for specific assigned courses [7]. The necessary degree information along with revised justifications if needed has been provided.

**SUMMARY**

The University of Louisville assigns faculty who are qualified and hold the degrees or experience necessary to teach the courses assigned to them. In cases where the highest degree is not used, the hiring unit documents the rationale for other qualifications used to justify faculty competence.

[1] University Mission Statement
3_7_1_fn01.pdf
http://louisville.edu/about/

[2] The Redbook, Chapter 4
3_7_1_fn02.pdf

[3] SIGS Graduate Faculty
3_7_1_fn03.pdf
http://louisville.edu/graduate/faculty-staff

[4] Guidelines for Graduate Faculty
3_7_1_fn04.pdf
http://louisville.edu/artsandsciences/academics/graduate-education/files/ByLawsMinimumGuidelinesSIGS.pdf

[5] How to Become a Dual Credit Teacher
3_7_1_fn05.pdf
http://louisville.edu/admissions/apply/requirements/how-to-become-a-dual-credit-teacher

[6] Faculty Credentials Procedures
3_7_1_fn06.pdf
http://louisville.edu/provost/faculty-personnel/sacs-faculty-credentials-procedures-1

[7] University of Louisville Response to SACSCOC Request for Justifying and Documenting Qualifications of Faculty
3_7_1_fn07.pdf
3.10.3

Financial Resources: Control of finances

The institution exercises appropriate control over all its financial resources.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The institution has navigated difficult economic periods and reductions in State appropriations, particularly during the recession of 2008 and 2009, and has managed its resources adequately to maintain Aa3 bond ratings from Moody’s and AA- from S&P, with stable outlooks for both in February 2016.

Internal control systems described by the institution for many areas such as procurement, capital assets, Bursar, cash/investments, endowments and other areas are adequate based on the Committee’s review of documentation; however, adequate control could not be determined for certain sponsored research activities. The US OIG recently conducted an audit of all DHHS funds received for FY 2011 and FY 2012, a total of $114 million. A draft report was prepared by OIG and the University issued a response, neither of which was included as documentation. Without further documentation to indicate the nature of the audit, the potential draft findings, the potential existence and magnitude of questioned costs, if any, and the University’s response, the Off-Site Reaffirmation Committee is unable to determine whether the institution maintained financial control over DHHS programs during FY 2011 and FY 2012.

Results of independent audits of the financial statements and federal compliance audits generally indicate an adequate internal control environment. Management letters for audited financial statements for FY 2015, FY 2013, and FY 2012 contained no material weaknesses or significant deficiencies, indicating adequate internal control. One material weakness noted by the external auditors in the FY 2014 report was subsequently corrected. Similar positive results are reflected in A-133 federal compliance audits, with no material weaknesses or significant deficiencies noted other than one in FY 2014 that also was subsequently corrected. The A-133 audits provide further evidence of adequate internal control.

The institution describes Audit Services, an internal audit function that reports duality to the Audit Committee of the Board of Trustees and to the Senior Vice President for Finance and Administration and Chief Operating Officer. An audit plan for FY 2016 approved by the Audit Committee was presented as documentation; however, plans for previous years are not presented. No documentation was presented to demonstrate which audits had been completed, or the results of such audits, and no documentation was presented to demonstrate that completed audits had been submitted to the Audit Committee for approval and action. Therefore, the Off-Site Reaffirmation Committee was unable to determine whether Audit Services is an effective component of the institution’s internal control systems.

Judgment

☑ Compliance □ Partial Compliance □ Non-Compliance □ Not Applicable

Narrative

The University of Louisville (UofL) exercises appropriate control over all of its finances. The Board of Trustees oversees the university’s system of internal control of financial resources. In accordance with state statute KRS 164A.570 [1], the university contracts with a qualified firm of certified public accountants to conduct an annual financial examination of the university in accordance with generally accepted auditing standards. The financial records are audited annually in accordance with Generally Accepted Accounting Standards (GAAS) by Crowe Horwath, a public accounting firm selected through a competitive request.


Along with auditing the financial statements of the university and its affiliates, the external auditors evaluate the internal controls over financial activities. The results of the evaluation are communicated to the university and to the Audit and Finance Committees of the Board of Trustees in the form of a management letter. This committee approves the results of the audit and any recommendations or adjustments that require university action. When control issues are identified, the university administration reviews the issue and identifies the cause of the problem. Corrective action is identified and is included in the issued management letter and labeled as the “Management’s Response,” which is also communicated to the Board of Trustee committees.

The most recent A-133 Audit of Federal Awards for FY 2016-17 resulted in a report of a significant deficiency. This audit was presented to the UofL Board of Trustees on November 20, 2017 [4]. The auditor noted as a significant deficiency that exit counseling communications with students entering Perkins Loan repayment were not conducted in a timely manner (within the 30 day time frame required after the end of the enrollment period). University management indicated that staff turnover in the Bursar’s office contributed to the noncompliance. A corrective action plan was developed by UofL and was included with the auditor’s management letter [5].

**Internal Audit**

Audit Services is the university’s independent internal audit unit [6]. The office performs regular risk-based and special audits of policies, procedures, and internal controls over business processes. The activities of Audit Services are authorized in the Audit Charter [7] that has been approved by the Board of Trustee’s Audit Committee. The charter is reviewed annually and revised when necessary. All changes are approved by the Audit Committee. The Audit Charter gives the audit staff full access to departments, records, faculty, and staff necessary to perform internal audits. Audit Services conducts an annual audit risk assessment that is used to develop the internal audit plan for the next fiscal year.

The annual audit plan is developed through an annual risk assessment that focuses on five risk areas: financial impact, strategic impact, complexity, public exposure, and regulatory exposure. The risk assessment includes an analysis of department and programmatic factors related to financial composition; internal control environment as determined from prior audits; changes in staff, leadership, strategic initiatives, systems, and regulations; and other identified risk factors [8]. In addition, the university leadership is interviewed to determine their perspectives, which is taken into consideration. The resulting audit plan includes projects related to compliance, operations, information technology, and other areas deemed to be high risk or high importance to the university community. In addition, the audit plan includes projects to follow-up on the implementation of action plans related to significant, high risk audit findings from prior years. The 2017-2018 audit plan was approved by the Board of Trustees in July 2017 [9].

Periodically, the status of the audit plan and significant identified issues are reported to the Board of Trustees Audit and Compliance Committee. The SACSCOC off-site committee noted that documentation to demonstrate that completed audits had been submitted to the Audit Committee for approval and action. Examples of recent audit plan reviews and related reports to the board are provided:

External Audit of UofL DHHS Awards

In March 2013, the university president received a letter of engagement from the Office of the Inspector General (OIG) notifying UofL of an audit of all Department of Health and Human Services (DHHS) awards. The OIG is a unit of the DHHS. UofL received $114 million in awards from the Department of Health and Human Services over a 2-year period from October 1, 2010, ending September 30, 2012. OIG’s objective was to determine whether the university claimed selected costs charged directly to DHHS awards in accordance with federal regulations and applicable guidelines.

The OIG issued a final audit report on December 22, 2016, in which it recommended repayment of $1.31M, citing unallowable expenditures. On March 1, 2017, the University responded with additional information and asserted that the majority of the costs questioned in the final audit report were reasonable and allowable. Negotiations between DHHS and UofL occurred and a settlement was reached. DHHS issued on December 15, 2017, a letter confirming the final settlement of $580,000. The University issued a check to DHHS and sent a notice of payment (email) on December 21, 2017.

Lessons learned from the recent OIG audits are reflected in new measures implemented to better communicate the rules and monitor research administration activities. Since 2012, the EVPRI has implemented eleven new processes or actions designed to improve oversight of the university’s research functions.

SUMMARY

The University of Louisville is in compliance with Comprehensive Standard 3.10.3. Crowe Horwath, LLP audits University of Louisville and its affiliated corporation’s compliance with the types of requirements described in the OMB Compliance Supplement. The auditor’s reports for the years ended 2016 and 2017 stated that the University complied, in all material respects, with the types of compliance requirements that could have a direct and material effect on each of its major federal programs.

The Office of Internal Audit (OIA) provides an additional layer of assurance in monitoring university financial controls and systems. In addition, OIA reports directly to the Board of Trustees committee on Audits and Finance and the university’s Chief Financial Officer.

[1] KRS 164A.570, Annual Audit
3_10_3_fn01.pdf

3_10_3_fn02.pdf

3_10_3_fn03.pdf

3_10_3_fn04.pdf
http://louisville.edu/finance/controller/univacct/finst/ula1332017
3_10_3_fn05.pdf

[6] Audit Services
3_10_3_fn6.pdf
http://louisville.edu/audit

[7] UofL Audit Services Charter (As of July 1, 2013)
3_10_3_fn7.pdf
http://louisville.edu/audit/website-pdf-files/audit-services-charter

[8] Approved 2017-18 Audit Plan
3_10_3_fn8.pdf

[9] UofL Board of Trustees July 2017 – Audit Plan Approval
3_10_3_fn9.pdf

3_10_3_fn10.pdf

3_10_3_fn11.pdf

[12] UofL Internal Audit 2016-17 Compliance Report – Part A
3_10_3_fn12.pdf

3_10_3_fn13.pdf

3_10_3_fn14.pdf

3_10_3_fn15.pdf

[16] UofL Response to Audit - March 1, 2017
3_10_3_fn16.pdf

3_10_3_fn17.pdf

[18] UofL Check to DHHS - December 21, 2017
3_10_3_fn18.pdf

[19] UofL Notice of Payment (email) - December 21, 2017
3_10_3_fn19.pdf

3_10_3_fn20.pdf

3.10.4

Financial Resources: Control of sponsored research/external funds

The institution maintains financial control over externally funded or sponsored research and programs.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

Externally funded or sponsored research and programs are administered through the institution Research Foundation. The institution president is also president of this Foundation, and the Board of Directors includes all university trustees and appropriate officials of University administration. For FY 2016, the Foundation managed $462.2 million of externally funded or sponsored research and programs, of which $274.5 million were clinical services revenues generated from the Schools of Medicine, Dentistry, Nursing and EVP for Health Affairs.

The institution provided a copy of the required DHHS disclosure statement (DS-2) dated September 8, 2005. No documentation was provided to indicate that the disclosure statement has been subsequently reviewed by the institution and, if required, updated since its adoption.

Pre-award and post-award financial control is exercised through the Executive Vice President for Research and Innovation. Appropriate policies and procedures are in place to ensure that expenditures are in compliance with applicable federal and sponsoring agency regulations and guidelines as well as institution policy. General University financial policies and procedures are under the purview of the Senior Vice President for Finance and Administration. Financial control is demonstrated through the satisfactory results of independent audits of the financial statements and also through A-133 federal compliance audits.

While the above narrative indicates a strong internal control system for sponsored research/external funds, the institution noted that the US OIG recently conducted an audit of all DHHS funds received for FY 2011 and FY 2012, a total of $114 million. A draft report was prepared by OIG and the University issued a response, neither of which was included as documentation. Without further documentation to indicate the nature of the audit, the potential draft findings, the potential existence and magnitude of questioned costs, if any, and the institution’s response, the Off-Site Reaffirmation Committee is unable to determine whether the institution maintained financial control over DHHS programs during FY 2011 and FY 2012.

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) maintains financial control over its externally funded or sponsored research and programs. As a recipient of federal funding UofL adheres to the administrative requirements, cost principles, and audit requirements governing federal awards as issued by the Office of Management and Budget (OMB) in the Uniform Guidance, 2 CFR 200, as applicable [1]. UofL maintains detailed policies, procedures, and guidelines in the university’s financial policy library [2] and in the UofL Research Handbook [3] for the administrative and financial management of externally funded and sponsored research programs. These policies, procedures, and guidelines align with the regulations promulgated by the OMB. The university’s A-133 audit of federal awards for FY 2016-17 had no findings related to research awards [4].
The university develops the facilities and administrative (F&A) cost proposal as specified by the Department of Health and Human Services (DHHS) using the cost pooling and allocation method as prescribed by the Uniform Guidance [5]. The university submits F&A rate proposals every two years. In accordance with the Uniform Guidance, the OMB requires institutions of higher education that receive aggregate federal awards totaling $50 million or more to disclose cost accounting practices by filing a DS-2. An approved DS-2 signifies that the disclosed accounting practices are compliant with federal cost-accounting principles.

In the SACSCOC compliance report from September 2016, UofL used as documentation of the Uniform Guidance the DS-2 approved on September 8, 2005 [6]. Normally, the DS-2 is not revised unless changes in accounting policies and procedures occur. The UofL Controller’s Office recently reviewed the 2005 DS-2 document in light of changes to Uniform Guidance effective December 2014 and is in the process of revising it with assistance from external consultants (Maximus Higher Education). The revised DS-2 will be submitted to DHHS March 31, 2018 concurrent with the submission of the university’s F&A proposal. The university’s current F&A rate agreement expires June 30, 2018 [7].

In March 2013, the university president received a letter of engagement from the Office of the Inspector General (OIG) notifying UofL of an audit of all DHHS awards [8]. The OIG is a unit of the DHHS. UofL received $114 million in awards from the Department of Health and Human Services over a two-year period from October 1, 2010, ending September 30, 2012.

The objective of OIG was to determine whether the university claimed selected costs charged directly to DHHS awards in accordance with federal regulations and applicable guidelines. The audit selected two groups of transactions as representative of the full set of transactions from non-faculty salaries and non-salary transactions spread over the two-year period. The allowability of non-faculty salary transaction issues focused on (1) documentation of job duties and whether or not any should have been allocated as covered by indirect costs versus direct charges to the awards and (2) documentation of approvals and signatories of time and effort reporting. The non-salary transaction issues were more diverse but included providing documentation (1) to support service center rates charged, (2) to support allocation of charges and (3) to support that the charges were appropriate direct charges as contrasted with being considered as an indirect charge. The issues disputed by the DHHS auditors were typical of other audits at other universities.

The OIG issued a final audit report on December 22, 2016, in which it recommended repayment of $1.31M citing unallowable expenditures [9]. On March 1, 2017, the University responded with additional information and asserted that the majority of the costs questioned in the final audit report were reasonable and allowable [10]. Negotiations between DHHS and UofL occurred and a settlement was reached. DHHS issued on December 15, 2017, a letter confirming the final settlement of $580,000 [11]. The University issued a check to DHHS [12] and sent a notice of payment (email) on December 21, 2017 [13].

Lessons learned from the recent audits are reflected in new measures implemented to better communicate the rules and monitor research administration activities. Since 2012, the EVPRI has implemented eleven new processes or actions designed to improve oversight of the university’s research functions [14].

**SUMMARY**

The primary responsibility for research administration lies with the Executive Vice President for Research and Innovation (EVPRI). The EVPRI works with the university’s Chief Financial Officer to manage all financial transactions. These administrative units have the infrastructure necessary to support the university’s successful sponsored research efforts.
and the work of the UofL Research Foundation. UofL maintains detailed policies, procedures, and guidelines in the university’s financial policy library and in the UofL Research Handbook for the administrative and financial management of externally funded and sponsored research programs.

[1] Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance)
3_10_4_fn01.pdf
http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl

3_10_4_fn02.pdf
https://sharepoint.louisville.edu/sites/policies/library/SitePages/Forms/finance.aspx?RootFolder=%2fsites%2fpolicies%2flibrary%2fSitePages%2ffinance

3_10_4_fn03.pdf
https://louisville.edu/research/support/research-handbook/toc

3_10_4_fn04.pdf
http://louisville.edu/finance/controller/univacct/finst/ula1332017

[5] Uniform Guidance at the University of Louisville
3_10_4_fn05.pdf
http://louisville.edu/research/spa/guidance/uniform-guidance

3_10_4_fn06.pdf

[7] Facilities and Administrative (F&A) Rate Agreement
3_10_4_fn07.pdf
http://louisville.edu/research/common/fa-rate-agreement

3_10_4_fn08.pdf

3_10_4_fn09.pdf

[10] UofL Response to Audit - March 1, 2017
3_10_4_fn10.pdf

3_10_4_fn11.pdf

[12] UofL Check to DHHS - December 21, 2017
3_10_4_fn12.pdf

[13] UofL Notice of Payment (email) - December 21, 2017
3_10_4_fn13.pdf
3_10_4_fn14.pdf
3.11.3

Physical Resources: Physical facilities

The institution operates and maintains physical facilities, both on and off campus, that appropriately serve the needs of the institution’s educational programs, support services, and other mission-related activities.

SACSCOC OFF-SITE COMMITTEE COMMENTS

As detailed in the Off-Site Reaffirmation Committee’s narrative for CR 2.11.2, significant space deficits appear to exist at the institution, particularly for research laboratories, teaching laboratories, and support space. The institution describes and documents several planning processes, including campus master plans, third-party reviews, and planning required by the Kentucky Council on Postsecondary Education (CPE), the results of which are used to compile biennial capital requests to the State based on a six-year projection. However, documentation did not reflect that these planning processes were effective in addressing these the space deficits noted in the CPE assessment. Additionally, the University’s IT infrastructure appears to be reasonable; however, no documentation was provided to demonstrate that instructional and research laboratories appropriately serve the needs of the institution’s educational programs, support services, and other activities.

The institution has spent $121.6 million on capital renewal projects from 2010 through 2015 to address deferred maintenance needs; however, without further documentation the Off-Site Reaffirmation Committee could not determine whether the condition of facilities is adequate to appropriately serve the institution’s needs.

Judgment

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

Narrative

The University of Louisville (UofL) operates and maintains physical facilities, both on and off campus, that appropriately serve the needs of the institution’s educational programs, support services, and other mission-related activities. UofL has three campuses. The Belknap Campus is utilized for teaching, research, and support and is undergoing a major expansion focused on creating collaborative business developments that benefit the main campus students, faculty, and staff. UofL health sciences operations include the university hospital, a Level 1 trauma center, the James Graham Brown Cancer Center, and community-based clinics. The Shelby Campus is located in eastern Jefferson County and contains two instructional buildings and houses the National Crime Prevention Institute; the Delphi Center for Teaching and Learning Unit for Continuing and Professional Education; and the Center for Predictive Medicine, a $44 million facility that contains one of the National Institute of Health’s thirteen regional BL-3 biosafety labs.

The university provided one table from a Kentucky Council on Postsecondary Education (CPE) 2012 Space Study that resulted in several comments from the off-site committee related to Core Requirement 2.11.2 and this standard.

Off-Site Committee Comments

As detailed in the Off-Site Reaffirmation Committee’s narrative for CR 2.11.2, significant space deficits appear to exist at the institution, particularly for research laboratories, teaching laboratories, and support space. The institution describes and documents several planning processes, including campus master plans, third-party reviews, and planning required by the Kentucky Council on Postsecondary Education (CPE), the results of which are used to compile biennial capital requests to the State based on a six-year projection. However, documentation did not reflect that these planning processes were effective in addressing these the space deficits noted in the CPE assessment.

The University of Louisville has several processes for physical resource planning, including strategic planning, campus master plans, third-party reviews, and required Kentucky Council on Postsecondary Education (CPE) reporting.

The Kentucky Council on Postsecondary Education (CPE) has broad statutory authority to coordinate the state system of postsecondary education in Kentucky. CPE fulfills its coordinating role through a variety of planning activities, including overseeing the development and implementation of the statewide strategic agenda on a five-year cycle. The CPE strategic plan includes the state’s mission, vision, and strategic agenda values; policy objectives and strategies; and statewide, regional, and institutional performance metrics for state institutions.

Every two years (in the odd-numbered years) the university submits an agency capital plan to CPE that includes funding requests for new construction projects, renovations, and capital renewal (deferred maintenance) for existing facilities. Based on the agency capital plans from all state institutions, CPE makes recommendation to the governor for projects to include in his version of the proposed capital budget.

The agency capital plan, which is a requirement of all state agencies, including public universities, covers six fiscal years and coincides with the state’s operating and capital budget development processes. The agency capital plan is approved by the President and Board of Trustees and is submitted to the Kentucky Council on Postsecondary Education (CPE). It becomes the basis for CPE’s capital recommendation for the upcoming biennium. In turn, CPE submits its recommendation to the governor for inclusion in his version of the proposed capital budget. The university has just completed the development of its 2018 – 2024 Agency Capital Plan [1].

CPE Space Study Report

In 2014, the Kentucky Council for Postsecondary Education (CPE) published a space study conducted by Vanderweil Facilities Advisors (VFA) and Paulien & Associates that had two primary goals [2]. The first was to determine whether state public institutions of higher education had adequate quantities of space to effectively support current and forecasted student, faculty, and staff populations, as well as their volume of research expenditures. The second goal was to conduct a facility condition assessment to estimate the magnitude of each institution’s deferred maintenance backlog and 15-year capital renewal requirements. Study findings were based on 2012 data, and were used to inform state-wide capital planning and funding priorities.

The CPE Space Study was a tool to assist the state in determining priorities, but it did not represent a complete assessment of all the university’s physical facilities. The survey outcomes were intended for planning and budgeting purposes. As noted by the consultants in the report, “because such a limited portion of most institutions’ portfolio was studied, the 'blended' picture is far from complete” (p. 6) [3]. They also noted that “Since the buildings surveyed were not chosen to serve as a statistical sample of the overall university’s space
adequacy, extrapolation of space adequacy results to model all adequacy needs for each institution is not recommended” (p. 7) [4]. The three areas of the space study report included facilities condition, space adequacy, and space capacity.

For UofL, the CPE Study of Facilities Condition was based on review of 57% of the institution’s total assignable square footage and the Space Adequacy Model was based on a review of 26.4% or 36 of the university’s 136 buildings (see Table 1). The study’s space capacity projections included education and general (E&G) space only. Library space was specifically excluded from the study analysis. It also did not include space on UofL’s Shelby Campus or remote locations associated with off-site programs and instruction.

Table 1. Percentage of Institutional Portfolios Included in CPE Space Study

<table>
<thead>
<tr>
<th>Institution</th>
<th>Total # of Buildings</th>
<th>Gross SF</th>
<th>Condition Study by VFA</th>
<th>Space Adequacy Study by Paulien</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Kentucky University</td>
<td>190</td>
<td>4,626,458</td>
<td>55 (25%)</td>
<td>2,829,774 (61%)</td>
</tr>
<tr>
<td>KCTCS</td>
<td>204</td>
<td>6,138,142</td>
<td>198 (74%)</td>
<td>5,740,720 (94%)</td>
</tr>
<tr>
<td>Kentucky State University</td>
<td>154</td>
<td>1,333,473</td>
<td>37 (5%)</td>
<td>1,333,473 (95%)</td>
</tr>
<tr>
<td>Morehead State University</td>
<td>112</td>
<td>2,741,050</td>
<td>20 (9%)</td>
<td>1,356,052 (57%)</td>
</tr>
<tr>
<td>Murray State University</td>
<td>160</td>
<td>3,710,171</td>
<td>48 (30%)</td>
<td>2,453,372 (69%)</td>
</tr>
<tr>
<td>Northern Kentucky University</td>
<td>110</td>
<td>2,349,541</td>
<td>17 (16%)</td>
<td>1,373,858 (53%)</td>
</tr>
<tr>
<td>University of Kentucky</td>
<td>906</td>
<td>14,804,591</td>
<td>167 (18%)</td>
<td>8,791,078 (59%)</td>
</tr>
<tr>
<td>University of Louisville</td>
<td>906</td>
<td>14,804,591</td>
<td>107 (12%)</td>
<td>5,313,765 (37%)</td>
</tr>
<tr>
<td>Western Kentucky University</td>
<td>54</td>
<td>4,266,565</td>
<td>40 (7%)</td>
<td>1,800,621 (44%)</td>
</tr>
<tr>
<td>Total</td>
<td>2,016</td>
<td>47,957,250</td>
<td>708 (35%)</td>
<td>25,755,323 (62%)</td>
</tr>
</tbody>
</table>

*Source: Fall 2005 Building Data Base submission.
**Space assessed by VFA or Education and General Space.
***Revised to include WKU housing facilities.

The 2014 CPE Space Study was an update of a study originally undertaken in 2007. The 2014 report used the same buildings that were included in the 2007 report, but it did not take into consideration any new construction or repurposing of existing space that took place in the intervening time between the two reports. The Shelby Campus research space, all of which was constructed after the 2007 report, was not included in the CPE space study.

The 2014 report also did not reassess the condition of the institutions’ buildings. Rather, the report used the field visit assessments from the 2007 report and provided an updated cost analysis. In the 2014 CPE Space Study report, the lead consultant updated costs for major findings tables and figures to 2013 dollars. The update did not include checking or verifying facility conditions and space adequacy needs in the field at any of the institutions (see page 1).

The 2014 report did use updated numbers for assignable square footage for the buildings used in the study, for student and staff FTEs (using data taken from the fall 2012 CPE comprehensive database), and for NSF research expenditures (2011).

Facilities Condition

As stated earlier, the CPE Space Study included a physical review of 26.4% or 36 out of 136 university buildings (completed in 2006). Per the report, the condition ratings were based on International Facilities Manager Association standards. The five-year Facilities Condition Index (FCI) benchmark was set to 18% in the study.
The summary of the findings of the CPE study notes that Kentucky postsecondary education institutions compare unfavorably (42% 5-year Facility Condition Index) but that the “University of Louisville and Kentucky State University’s and KCTCS’s are relatively the best (but still not on par with the national benchmark).” UofL’s FCI was 39% and was considered the best amongst the two doctoral institutions in Kentucky [5a] [5b].

**Space Adequacy**

The 36 UofL buildings included in the study range in age from one year to 134 years old. The study listed 24 of the 36 buildings reviewed with a recommended action of “major renovation” [6]. One building was recommended for demolition -- Engineering Graphics (#00117). The Engineering Graphics Building was demolished by the university in 2012. Seven of the 24 major renovations identified in the study have been completed, as noted in Table 2.

**Table 2. Major Renovations in Buildings listed in the CPE Space Study**

<table>
<thead>
<tr>
<th>Projects</th>
<th>Fund Source</th>
<th>Cost</th>
<th>Date(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Business School Addition</td>
<td>Private</td>
<td>$3.4M</td>
<td>2011</td>
</tr>
<tr>
<td>2. Dental School Expansion/Renovation</td>
<td>University</td>
<td>$44.9M</td>
<td>2011</td>
</tr>
<tr>
<td>3. HSC Instructional Bldg. Renovation</td>
<td>University</td>
<td>$8.6M</td>
<td>2014</td>
</tr>
<tr>
<td>4. K-wing Classrooms Renovation</td>
<td>University</td>
<td>$1.1M</td>
<td>2015</td>
</tr>
<tr>
<td>5. Medical-Dental Research (MDR) 4th Floor Renovation – Phase 1</td>
<td>University/Private</td>
<td>$600K</td>
<td>2012</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) 4th Floor Renovation – Phase 2/3</td>
<td>Private/Clinical</td>
<td>$600K</td>
<td>2013</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) 4th Floor South Renovation</td>
<td>Clinical</td>
<td>$700K</td>
<td>2013</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) 4th Floor Renovation – Phase 5</td>
<td>Clinical</td>
<td>$705K</td>
<td>2016</td>
</tr>
<tr>
<td>Medical-Dental Research (MDR) Masonry Restoration</td>
<td>Clinical/University</td>
<td>$1.4M</td>
<td>2018</td>
</tr>
<tr>
<td>6. Medical Tower 7th Floor Renovation</td>
<td>Federal</td>
<td>$500K</td>
<td>2010</td>
</tr>
<tr>
<td>7. Kersey Library – now the Duthie Center</td>
<td>Private</td>
<td>5.8M</td>
<td>2009</td>
</tr>
</tbody>
</table>

In addition to the seven completed projects, four other projects listed in the CPE Space Study as in need of major renovations will be addressed as part of the Speed School Expansion Project. The university commissioned a 2016 consultant study for the Speed School of Engineering to quantify additional space and new construction/major renovation requirements to satisfy increased student enrollment and funded research activities [7]. The consultants recommended implementation of five significant projects, each of which is included in the university’s 2018 – 2024 Agency Capital Plan that is pending approval by the State. As this is accomplished there will be a doubling of Speed School classroom space square footage and a tripling of research space. The Speed School Master Plan proposes the following projects:

- **Ernst Hall** will be demolished to make way for a Multidisciplinary Engineering Building #2 that will provide 88,000 square feet in classrooms, instructional and research laboratories, faculty offices, and student service areas.
- **Renovate and Expand J.B. Speed Hall:** This $18.7 million project will provide a comprehensive renovation and MEP infrastructure upgrade to this 40,775 square foot...
building. It also provides a small addition on the rear of the building to address accessibility issues.

- Renovate W.S. Speed Hall: Following completion of the Multidisciplinary Engineering Building #2, the remaining 12,000 square feet of this building will be comprehensively renovated and renewed for $4.1 million.
- Renovate and Expand Sacket Hall: This $21.3 million project will demolish 16,700 square feet or approximately 60 percent of the existing building, comprehensively renovate the remaining 11,000 square feet, and construct 31,500 square feet of new space.

The Baxter Research Building (HSC Campus) was listed in the CPE study as not needing any renovations. However, it was renovated based on the emerging research goals of the university. In 2014, the Baxter laboratories and clean rooms were upgraded at a cost of $600,000, and in 2017-18 a cardiology facility was incorporated into the building at a cost of $2.1 million.

With philanthropic gifts the university plans to develop a new $120 million, 200,000 square foot Business School. Once constructed, the existing Business School building--the 128,000 square foot Frazier Hall--will be re-purposed as a general-purpose classroom, research, and faculty office building that benefits the university’s seven other colleges on the Belknap campus.

**Space Capacity**

The CPE study for Space Capacity used 2012 student and staff Full-time Equivalent (FTE) enrollments and National Science Foundation (NSF) research and development expenditures (2011) to suggest benchmarks for space capacity based on assignable square footage requirements for each space type.

For 2012 these values were:

- Student FTE’s = 18,296
- Staff FTE’s = 5,511
- National Science Foundation (NSF) Research Expenditures = $132,091,000

The student and staff full-time equivalents used in the study’s calculations included all students and staff for the institution, including those who would be attending off campus or by distance learning. The CPE Space Study used the space allocation calculations outlined in Table 3 to determine the guideline ASF. Comparing the CPE guideline ASF to the actual UofL ASF available for each space type produced the 2012 space surplus / (deficit) identified in the CPE report.
Table 3. Kentucky Postsecondary Education System Facility Condition and Space Study: UofL Assignable Square Footage (ASF is for E&G Space Only [2012])

<table>
<thead>
<tr>
<th>Space Type</th>
<th>Formula</th>
<th>Calculation</th>
<th>Guideline ASF (Benchmark)</th>
<th>UofL Actual ASF*</th>
<th>Difference</th>
<th>Percentage Surplus / Deficit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classrooms</td>
<td>10 ASF/Student FTE</td>
<td>10 ASF x 18,296</td>
<td>182,960</td>
<td>160,523</td>
<td>(22,437)</td>
<td>(14%)</td>
</tr>
<tr>
<td>Teaching Lab</td>
<td>8 ASF/Student FTE</td>
<td>8 x 18,296</td>
<td>146,368</td>
<td>92,761</td>
<td>(53,607)</td>
<td>(58%)</td>
</tr>
<tr>
<td>Open Labs</td>
<td>8 ASF/Student FTE</td>
<td>8 x 18,296</td>
<td>146,368</td>
<td>120,570</td>
<td>(25,798)</td>
<td>(21%)</td>
</tr>
<tr>
<td>Research Labs</td>
<td>900 ASF/$100,000 for first $50M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$50M / $100K x 900</td>
<td>450,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>600 ASF/$100,000 for second $50M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$50M / $100K x 600</td>
<td>300,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>350 ASF/$100,000 over $100M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$32,091M / $100K x 350</td>
<td>112,319</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Library</td>
<td>No Standard</td>
<td></td>
<td>316,663</td>
<td>316,663</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Physical Ed and Recreation</td>
<td>195 ASF/Staff FTE</td>
<td>195 x 5,511</td>
<td>1,074,645</td>
<td>967,796</td>
<td>(106,849)</td>
<td>(11%)</td>
</tr>
<tr>
<td>Special Use</td>
<td>21 ASF/Student FTE</td>
<td>21 x 18,296</td>
<td>384,216</td>
<td>357,067</td>
<td>(27,149)</td>
<td>(8%)</td>
</tr>
<tr>
<td>Support Space</td>
<td>8 ASF/Student FTE</td>
<td>8 x 18,296</td>
<td>146,368</td>
<td>82,414</td>
<td>(63,954)</td>
<td>(78%)</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td></td>
<td><strong>3,442,993</strong></td>
<td><strong>2,845,703</strong></td>
<td><strong>(597,290)</strong></td>
<td><strong>(21%)</strong></td>
</tr>
</tbody>
</table>

CPE Space Study Assumptions

The CPE Space Study methodology for identifying projected research space needs was based on the university’s 2011 NSF Research and Development (R&D) expenditures. UofL research and development expenditures, as reported to NSF, have declined 7.6 percent from FY 2011 to FY 2016. Table 4 provides the trend data based on UofL reports to NSF from 2011 to 2016. Using the CPE Space Study methodology of deducting institutional funds from the total amount, the expenditures have declined 11.1 percent. The reduction in NSF R&D expenditures is reflective of a national trend in lower federal awards that started in FY 2012. UofL, like many higher education institutions, has felt the impact of this reduction, although funding has improved in the most recent reportable year.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal government</td>
<td>96,010,000</td>
<td>89,976,000</td>
<td>78,144,000</td>
<td>65,849,000</td>
<td>68,069,000</td>
<td>71,760,000</td>
<td>(25.3%)</td>
</tr>
<tr>
<td>State and local government</td>
<td>10,736,000</td>
<td>12,788,000</td>
<td>12,647,000</td>
<td>14,433,000</td>
<td>11,038,000</td>
<td>11,402,000</td>
<td>6.2%</td>
</tr>
<tr>
<td>Industry/ Business</td>
<td>6,405,000</td>
<td>8,049,000</td>
<td>8,238,000</td>
<td>8,175,000</td>
<td>4,999,000</td>
<td>7,688,000</td>
<td>20.0%</td>
</tr>
<tr>
<td>Nonprofit organizations</td>
<td>7,073,000</td>
<td>8,860,000</td>
<td>6,093,000</td>
<td>6,919,000</td>
<td>8,844,000</td>
<td>8,330,000</td>
<td>17.8%</td>
</tr>
<tr>
<td>Institution funds</td>
<td>65,347,000</td>
<td>65,384,000</td>
<td>65,266,000</td>
<td>69,111,000</td>
<td>70,150,000</td>
<td>65,078,000</td>
<td>(0.4%)</td>
</tr>
<tr>
<td>All other sources</td>
<td>11,867,000</td>
<td>11,785,000</td>
<td>16,384,000</td>
<td>18,889,000</td>
<td>16,399,000</td>
<td>18,196,000</td>
<td>53.3%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>197,438,000</td>
<td>196,842,000</td>
<td>186,772,000</td>
<td>183,376,000</td>
<td>179,499,000</td>
<td>182,454,000</td>
<td>(7.6%)</td>
</tr>
</tbody>
</table>

CPE SPACE STUDY EQUIVALENT: 132,091,000

A recalculation of research needs using the CPE formula and the actual 2016 NSF R&D expenditure (minus institutional funds) would reduce the research lab CPE Guideline ASF to 810,816 (see Table 5).

Table 5. 2012 CPE Space Study - Revised Research ASF Calculation

<table>
<thead>
<tr>
<th>Based on 2011 NSF R&amp;D Expenditures</th>
<th>Calculation</th>
<th>ASF</th>
<th>CPE Guideline ASF</th>
<th>UofL Actual ASF*</th>
<th>Difference</th>
<th>Percentage (Deficit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Formula 900 ASF/$100,000 for first</td>
<td>500</td>
<td>900</td>
<td>450,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$50M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Formula 600 ASF/$100,000 for second</td>
<td>500</td>
<td>600</td>
<td>300,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$50M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Formula 350 ASF/$100,000 over $100M</td>
<td>320.91</td>
<td>350</td>
<td>112,319</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2011 Total</td>
<td>132,091,000</td>
<td>862,319</td>
<td>494,813</td>
<td>367,506</td>
<td>(74.0%)</td>
<td></td>
</tr>
<tr>
<td>(See Table 3.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Based on 2016 NSF R&amp;D Expenditures</th>
<th>Calculation</th>
<th>ASF</th>
<th>CPE Guideline ASF</th>
<th>UofL Actual ASF*</th>
<th>Difference</th>
<th>Percentage (Deficit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Formula 900 ASF/$100,000 for first</td>
<td>500</td>
<td>900</td>
<td>450,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$50M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Formula 600 ASF/$100,000 for second</td>
<td>500</td>
<td>600</td>
<td>300,000</td>
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<td></td>
</tr>
<tr>
<td>$50M</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Formula 350 ASF/$100,000 over $100M</td>
<td>173.76</td>
<td>350</td>
<td>60,816</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016 Total</td>
<td>117,376,000</td>
<td>810,816*</td>
<td>494,813</td>
<td>316,003</td>
<td>(63.0%)</td>
<td></td>
</tr>
</tbody>
</table>

* Recognized decline in NSF research volume between 2011 and 2016

Impact of New UofL Projects on CPE Space Study Assumptions

Table 6 summarizes the impact of the university’s new construction and the support space and research space adjustments on the CPE-estimated assignable square foot (ASF) inventory by room type. In particular, these adjustments have eliminated the space deficits identified in the CPE study for classrooms, special use, and support space. In addition, the
space deficits have been lowered for teaching labs (from -58% to -20.4%), research labs (from -74% to -36.3%), and office suites (from -11% to -9.6%). The overall space deficit as defined by CPE has decreased from -21% (597,291 ASF) to -9.8% (339,026 ASF).

### Table 6. Assignable Square Foot Adjustments Based on Completed Capital Construction Since 2012

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Classroom (100s)</td>
<td>(22,437)</td>
<td>(11%)</td>
<td>32,075</td>
<td>(2,434)</td>
<td>2,548</td>
<td>2,750</td>
<td>7,512</td>
<td>20,014</td>
<td>(10.9%)</td>
<td>(24,992)</td>
<td>(20.4%)</td>
<td>(29,899)</td>
<td>(25.2%)</td>
<td>(36,901)</td>
</tr>
<tr>
<td>Teaching Labs (210s)</td>
<td>(53,607)</td>
<td>(58%)</td>
<td>28,133</td>
<td>(2,391)</td>
<td>214</td>
<td>(2,423)</td>
<td>175</td>
<td>(29,899)</td>
<td>(20.4%)</td>
<td>(36,901)</td>
<td>(25.2%)</td>
<td>(36,901)</td>
<td>(25.2%)</td>
<td>(36,901)</td>
</tr>
<tr>
<td>Open Labs (220s)</td>
<td>(25,798)</td>
<td>(21%)</td>
<td>8,893</td>
<td>207</td>
<td>(15,203)</td>
<td>(331)</td>
<td>5,985</td>
<td>(2,367)</td>
<td>51,503</td>
<td>(313,263)</td>
<td>(36.3%)</td>
<td>(313,263)</td>
<td>(36.3%)</td>
<td>(313,263)</td>
</tr>
<tr>
<td>Research Labs (250s)</td>
<td>(367,506)</td>
<td>(74%)</td>
<td>(547)</td>
<td>(331)</td>
<td>5,985</td>
<td>2,367</td>
<td>51,503</td>
<td>(313,263)</td>
<td>51,503</td>
<td>(313,263)</td>
<td>(36.3%)</td>
<td>(313,263)</td>
<td>(36.3%)</td>
<td>(313,263)</td>
</tr>
<tr>
<td>Offices (300s)</td>
<td>(106,849)</td>
<td>(11%)</td>
<td>11,992</td>
<td>(4,168)</td>
<td>3,221</td>
<td>532</td>
<td>110</td>
<td>(5,388)</td>
<td>(3,141)</td>
<td>(103,691)</td>
<td>(9.6%)</td>
<td>(103,691)</td>
<td>(9.6%)</td>
<td>(103,691)</td>
</tr>
<tr>
<td>Library (400s)</td>
<td>0</td>
<td>0</td>
<td>11,951</td>
<td></td>
<td>11,951</td>
<td></td>
<td></td>
<td></td>
<td>0%</td>
<td>43,829</td>
<td>23.9%</td>
<td>43,829</td>
<td>23.9%</td>
<td>43,829</td>
</tr>
<tr>
<td>PE &amp; Rec (520s)</td>
<td>70,000</td>
<td>28%</td>
<td>(21,446)</td>
<td>(4,734)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13,581</td>
<td>37.8%</td>
<td>3.5%</td>
<td>37.8%</td>
<td>3.5%</td>
<td>37.8%</td>
</tr>
<tr>
<td>Special &amp; General (600s)</td>
<td>(27,149)</td>
<td>(18%)</td>
<td>17,016</td>
<td>(2,006)</td>
<td>13,200</td>
<td>29,289</td>
<td>(369)</td>
<td>119,307</td>
<td>55,353</td>
<td>37.8%</td>
<td>3.5%</td>
<td>37.8%</td>
<td>3.5%</td>
<td>37.8%</td>
</tr>
<tr>
<td>Support Space</td>
<td>(63,954)</td>
<td>(78%)</td>
<td></td>
<td>(1,209)</td>
<td></td>
<td>(280)</td>
<td>119,307</td>
<td>55,353</td>
<td>37.8%</td>
<td>37.8%</td>
<td>3.5%</td>
<td>37.8%</td>
<td>3.5%</td>
<td>37.8%</td>
</tr>
</tbody>
</table>

Note * Research Space Adjustment is based on the recalculation of the research deficit based on the decline in NSF funding (862,319 - 810,816 = 51,503). The Support Space Adjustment is based on the difference between the CPE Support Space ASF and the actual UofL Support Space ASF in 2012 (201,721 - 82,414 = 119,307).

### Off-Site Committee Comments

The institution has spent $121.6 million on capital renewal projects from 2010 through 2015 to address deferred maintenance needs; however, without further documentation the Off-Site Reaffirmation Committee could not determine whether the condition of facilities is adequate to appropriately serve the institution’s needs.

### University Planning Processes

The university ensures that physical resources are adequate for its needs through the following processes:

1. Strategic Planning

The mission of the University of Louisville is to pursue excellence and inclusiveness in its work to educate and serve its community through teaching diverse undergraduate, graduate, and professional students in order to develop engaged citizens, leaders, and scholars; practicing and applying research, scholarship and creative activity; and providing engaged service and outreach that improve the quality of life for local and global...
communities. The university’s strategic plan, the 2020 Plan: Making it Happen [8], provides guidance in setting the academic, research, student life, and infrastructure needs of the institution. The 2020 Plan used benchmarking of other institutions to set priority goals for the university.

The 21st Century Initiative, started in 2012 [9], expands on the 2020 Plan, and includes proposals for a new classroom building on the Belknap Campus (to be completed in 2018), renovation of the Ekstrom Library (completed), increased housing options (completed), the renovation of the Student Activity Center (in progress), and a proposed new classroom building for the Health Sciences Campus. UofL has constructed over $650,000,000 in completed or soon to be completed capital projects [10] benefiting the faculty, staff, and students of the university as well as the local/metropolitan community.

The university’s master plans [11][12][13] have helped to anticipate the physical growth of the institution’s three campuses and have been used in determining priorities for the university’s strategic plan. Required CPE reporting helps to determine priorities for the State’s Capital Planning.

Goals related to physical space outlined in the university’s 21st Century Initiative [B.1] are:

- Establish a Teaching and Learning Innovation Lab (opened Fall 2016)
- Open a new Belknap Campus Academic Classroom Building (to open Fall 2018)
- Renovate Ekstrom Library (Completed - Phase 1-Fall 2015; Phase 2-Fall 2016)
- Renovate and Expand the Student Activities Center (Summer 2018)
- Improve Learning and Research Spaces on the Health Sciences Center (Buildings #15, 55A, 55B, and Baxter Research).

2. Agency Capital Plan

In the university’s 2018 – 2024 Capital Plan [14] that is pending State authorization, three specific deferred maintenance projects were included that will create surpluses in several space categories through renovating and renewing existing instructional space and other student support and research space.

- The $50 million Renovation and Adaptation Project for Various Buildings will provide improvements to general-purpose classrooms, teaching and research laboratories, and office and student support space, as well as auxiliary space if deemed a priority.
- The $50 million Upgrade of STEM Instructional Buildings will renovate and upgrade general-purpose classrooms, instructional Laboratories and student support space in Life Science, Natural Science, Chemistry, and Speed School of Engineering, delivering instructional space and infrastructure improvements.
- The $100 million Capital Renewal, Replacement and Upgrade Pool will allow the implementation of traditional deferred maintenance / capital renewal projects for building system assets that have reached or exceeded their life expectancy. When advanced, the $100 million Capital Renewal, Replacement and Upgrade Pool would be prioritized to especially address instructional and research space and infrastructure capital renewal needs.
- Rounding out UofL’s top five capital project priorities are the Renovation of the School of Medicine’s Research Building 55A for $42M, the Renovation of Health Sciences Center Instructional and Student Service Spaces for $20M, and the Regional Biocontainment Lab Pressurization Upgrade for $5M.
- Other renovation, upgrade, and improvement projects included in the UofL 2018-2024 Capital Plan are:
The university has requested state general fund support for UofL’s top five capital priorities, but if state funding cannot be provided for whatever reason, UofL has requested that they authorize the use of some combination of agency bonds and philanthropic gifts to advance these critical initiatives.

Following its review of each member institution’s 2018 – 2024 Capital Plan, the Kentucky Council for Postsecondary Education (CPE) delivered a presentation to the State’s Capital Projects and Bond Oversight Committee wherein they proposed that the State allocate $600 - $700 million in higher education funding support, to be matched by institutions, to invest in asset preservation capital renewal projects. CPE proposed that the State provide a matching funding source to institutions so many of these facilities improvement needs could be addressed during the next biennium. The university’s Board of Trustees has approved this approach for FY2018 – FY2020.

3. Space Management

In April 2016, the university hired a new Associate Vice President for Facilities Management and consolidated University Planning, Design and Construction; Physical Plant; and Environmental Health and Safety under his responsibility. Leading the development of a new university-wide campus master plan and future Six-Year (Agency) Capital Plans now falls under Facilities Management. The university has just completed the development of its 2018 – 2024 Capital Plan which was accomplished through a new Capital Plan Development Committee that included the participation of leadership from Facilities Management, the Provost’s office, Executive Vice President for Health Affairs staff, Deans for three colleges, the Chief Technology Officer, Faculty and Staff Senates, and the Student Government Association. During the development of the 2018 – 2024 Capital Plan many factors were taken into consideration including, but not limited to, additional space requirements, student enrollment trends, the physical condition of the facilities portfolio, funding, and fund-raising possibilities. The plan includes over 80 projects totaling $1.4 billion.

The Office of University Planning, Design, and Construction (UPDC) [15] provides guidance in matters of physical facilities planning, master planning acquisitions, and building design and campus exterior features. This department also manages university capital construction and renovation projects, including architectural and engineering selection, facilities programming, design, bidding, construction, equipment, furnishings, and operational start-up. The department is responsible for preparing cost estimates and ancillary information for all capital improvements for the agency’s Six-Year Capital Plan and biennial budget requests. Additionally, the unit provides in-house design services for minor building
renovations and furnishing projects, along with maintaining the university’s buildings and land inventory database.

The Physical Plant office [16] has oversight of the operating budgets for the university’s maintenance and operations. Renovations are performed when units have a need and available funding or when university administration has prioritized and funded the improvements. The capital renewal list compiled by the Physical Plant is reviewed by the senior leadership team, and priorities are set based on the annual university operating budget of $1 million specifically set aside for deferred maintenance projects [17]. Other capital renewal and renovation projects are also funded by a distribution of year-end surplus funds, federal funds, or other external funds.

**Physical Facilities Data Management**

The university administration monitors space utilization on the three campuses to ensure effective use of space and to comply with CPE’s guidelines on space utilization. Building, room, and land files are submitted once a year to CPE and to state government and include additions, deletions, or other changes since the previous submission.

The University Planning, Design and Construction office is responsible for tracking space utilization, scheduling general education classrooms, and reserving these facilities for other academic and non-academic use on the Belknap Campus. Health Sciences Center staff have this responsibility at HSC.

The university tracks the utilization of general instructional classrooms using Resource 25 software and Archibus in order to analyze usage and manage the effective use of space. Current operating strategies and tools include conducting classroom condition surveys, scheduling general use classrooms, and applying scheduling policies. These strategies and tools allow the university to conduct analysis of current space usage in order to identify inefficiencies and to determine any necessary course of action in response. The assignment and reallocation of space are administrated and approved by the Provost for the Belknap and Shelby campuses and by the Executive Vice President for Health Affairs for the Health Sciences Campus, with the input of administrative and academic representatives to ensure compliance with the university’s strategic plan priorities.

Since the CPE study was completed, the university has implemented a new space management software system—Archibus—and finished a number of capital projects, both of which have impacted the assignable square footage (ASF) among room categories on campus. Using Archibus, a campus space verification survey was implemented by the University Planning Design and Construction Office from 2011 to 2015. This comprehensive review of space assignments resulted in the reassignment of many open laboratories to either classroom or teaching laboratories to better reflect their actual use. Some large building renovations also resulted in space being repurposed. For example, the Ekstrom Library renovation in 2016 and 2017 resulted in some previously assigned library space being changed to office space. Table 7 reflects the current UofL assignable square footage by space category. UofL has increased overall space by 3.8 percent from 2012 to 2016.
Table 7. UofL Net Assignable Square Footage by Space Category

<table>
<thead>
<tr>
<th>Space Type</th>
<th>2012 UofL Net ASF</th>
<th>2016 UofL Net ASF</th>
<th>Difference</th>
<th>Percentage Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classrooms (100's)</td>
<td>161,575</td>
<td>211,783</td>
<td>50,208</td>
<td>31.1%</td>
</tr>
<tr>
<td>Teaching Labs (210's)</td>
<td>92,761</td>
<td>109,908</td>
<td>17,147</td>
<td>18.5%</td>
</tr>
<tr>
<td>Open Labs (220's)</td>
<td>129,544</td>
<td>79,717</td>
<td>(49,827)</td>
<td>-38.5%</td>
</tr>
<tr>
<td>Research Labs (250's)</td>
<td>511,512</td>
<td>531,533</td>
<td>20,021</td>
<td>3.9%</td>
</tr>
<tr>
<td>Office Suites (300's)</td>
<td>1,069,875</td>
<td>1,198,338</td>
<td>128,463</td>
<td>12.0%</td>
</tr>
<tr>
<td>Library (400's)</td>
<td>319,153</td>
<td>278,490</td>
<td>(40,663)</td>
<td>-12.7%</td>
</tr>
<tr>
<td>Physical Ed and Recreation (520's)</td>
<td>108,918</td>
<td>142,656</td>
<td>33,738</td>
<td>31.0%</td>
</tr>
<tr>
<td>Special and General Use (600's)</td>
<td>441,360</td>
<td>378,598</td>
<td>(62,762)</td>
<td>-14.2%</td>
</tr>
<tr>
<td>Support Space</td>
<td>184,745</td>
<td>201,721</td>
<td>16,976</td>
<td>9.2%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>3,019,443</strong></td>
<td><strong>3,132,744</strong></td>
<td><strong>113,301</strong></td>
<td><strong>3.8%</strong></td>
</tr>
</tbody>
</table>

While the CPE study lists the UofL support space ASF as 82,414 for 2012 (see Table 3), the university’s records for 2012 (see Table 7) indicate the ASF was 184,745 for 2012. The CPE study only used educational and general (E&G) space. Using only E&G space results in minor differences for most of the room use categories, but for the support space category that approach eliminates many university buildings considered support space, particularly for a research institution. These eliminated spaces include central computer / telecommunications, shop space, central storage, vehicle storage, central service (mail, printing, for more than one building), and hazardous materials. When these additional spaces are included, UofL’s 2016 support space total of 201,721 exceeds the CPE guideline estimate of 146,368 ASF (see Table 3).

Physical Condition/Adequacy of Facilities

Since 2009, the University of Louisville has invested millions in the implementation of capital renewal projects. Perhaps the most impacting of those projects was the $51.9 million, three phase guaranteed savings performance contract project the university implemented in partnership with Siemens Industries between 2009 and 2016. That initiative resulted in significant upgrades in our central steam and chilled water plant, which permitted the decommissioning and replacement of very aged equipment. Significant cost saving LED lighting upgrades and a plumbing water conservation project were also included in the performance contracting project. The university’s separately funded capital renewal investments have also upgraded electrical, steam, and chilled water distribution systems, as well as many elevator and roof replacements. Important upgrades to instructional and research spaces are included in this total.

An informal facility condition assessment of all buildings and exterior campus areas is conducted by UPDC approximately every two years. A key component of this review is the assessment of classrooms and laboratories, teaching and research, and facility conditions. The assessment is used to select projects for inclusion in the overall State capital plan and to prioritize projects in order to provide the highest potential for increased utilization, to foster gains in academic performance, and to increase research productivity, all of which contribute to overall student and faculty satisfaction with institutional facilities and infrastructure.

The university’s physical plant budget has consistently provided annual operations and maintenance funding that has kept our facility assets in good operation and repair. The university’s budget for physical plant operations exceeds $25 million annually to provide care and protection to the university’s physical assets [18]. The university has been able to accommodate a significant amount of capital renewal needs through the budgeted use of energy savings performance contracts (ESPC), insurance proceeds for natural disasters, and renovation projects funded by university departments.

The university’s 2018 – 2024 Capital Plan includes major renovations to the Belknap campus Law School, the Ekstrom Library, and the College of Education and Human Development. To address space and building upgrade needs in the Speed School of Engineering we also plan to renovate and expand that portion of campus.

On the Health Sciences Center campus within the Louisville Medical Center complex, the university operates four schools: Medicine, Nursing, Dental, and Public Health and Information Science. Research from these schools is conducted primarily from nine buildings that range in age from 8 to 55 years. Their average age is 30 years. Of this group of research intensive buildings, the 55-year-old Med-Dental Research Building and the 47-year-old Building 55A are prioritized for renovation and renewal.

The Medical-Dental Research Building has undergone a series of modest laboratory renovations during the past five years. The Capital Renewal, Replacement and Upgrade Pool project noted above is expecting to play a part in continuing to address its physical condition improvement needs. While use of Building 55A has declined since the 2009 construction of the 287,000 square foot Clinical Translational Research Building, we are now in the programming and schematic design phase for its comprehensive renovation to provide contemporary laboratory capacity that enables continued growth in our sponsored research activities. The other seven primary research buildings on the HSC campus range from good to excellent condition, and each makes a major contribution to our health care research excellence.

The Center for Predictive Medicine on the Shelby campus is one of thirteen Regional Biocontainment Laboratories supporting university research and, if needed, the nation’s Center for Disease Control. This eight-year-old facility also continues to be in excellent condition.

The university conducts several electronic surveys on a regular basis that provide an avenue for faculty, staff, and students to share their opinions on the adequacy of university facilities to meet their needs. A summary of these surveys demonstrates that university facilities are adequate to support the work of the university [19]. Also, the survey results reflect that the majority of faculty, staff, and students rate the university’s facilities (general use—classrooms, offices, and laboratories), computer labs, recreational/fitness, student activity/lounge areas, and libraries as adequate (agreed or strongly agreed).

**SUMMARY**

The University of Louisville (UofL) operates and maintains on- and off-campus physical facilities that appropriately serve the needs of its educational programs, support services, and other activities. The university’s strategic plan, master plans, and space management processes provide guidance in setting goals to address the academic, research, student life, and infrastructure needs of the institution. The university utilizes input from a variety of constituencies to help guide decision-making about the use of space and the setting of priorities for future planning. The university’s systematic approach to renovations and upgrading space ensures university buildings are adequate to serve the current and future needs of the institution and to support its mission.
3_11_3_fn01.pdf

[2] 2014 CPE Space Study
3_11_3_fn02.pdf

3_11_4_fn03.pdf

3_11_3_fn04.pdf

[5] CPE Space Study

  3_11_3_fn5a.pdf

  3_11_3_fn5b.pdf

3_11_3_fn06.pdf

[7] Speed School of Engineering Master Plan
3_11_3_fn07.pdf

3_11_3_fn08.pdf

[9] UofL 21st Century Initiative
3_11_3_fn09.pdf

[10] University of Louisville Capital Construction Projects Since 2009
3_11_3_fn10.pdf

3_11_1_fn11.pdf
http://louisville.edu/updc/master-planning/health-sciences-campus-master-plan

[12] Belknap Master Plan
3_11_1_fn12.pdf
http://louisville.edu/updc/master-planning/board-of-trustees-presentation

[13] Shelby Master Plan
3_11_1_fn13.pdf

3_11_3_fn14.pdf

[15] University Planning Design and Construction
3_11_3_fn15.pdf

[16] Physical Plant Office
3_11_3_fn16.pdf
[17] Deferred Maintenance List
3_11_3_fn17.pdf

[18] FY 2017 – Physical Plant Operating Budget
3_11_3_fn18.pdf

[19] Summary of Surveys – Physical Facilities
3_11_3_fn19.pdf
3.13.1
Policy Compliance: Accrediting Decisions of Other Agencies

Applicable Policy Statement. Any institution seeking or holding accreditation from more than one U.S. Department of Education recognized accrediting body must describe itself in identical terms to each recognized accrediting body with regard to purpose, governance, programs, degrees, diplomas, certificates, personnel, finances, and constituencies, and must keep each institutional accrediting body apprised of any change in its status with one or another accrediting body.

Documentation: The institution should (1) list federally recognized agencies that currently accredit the institution or any of its programs, (2) provide the date of the most recent review by each agency and indicate if negative action was taken by the agency and the reason for such action, (3) provide copies of statements used to describe itself for each of the accrediting bodies, (4) indicate any agency that has terminated accreditation, the date, and the reason for termination, and (5) indicate the date and reason for the institution voluntarily withdrawing accreditation with any of the agencies.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The institution offers 42 programs that are accredited by 26 accrediting agencies (in addition to Commission accreditation). Of the 26 agencies, 10 are recognized by the U.S. Department of Education. Currently, one of the institution’s programs accredited by a recognized accrediting agency is on probation (the AuD program, accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association). The institution notified the Commission of this action in a timely manner.

The institution documentation of how it described itself to each of the 10 recognized accrediting agencies. The Off-Site Reaffirmation Committee cannot conclude, based upon the evidence provided, that the institution has described itself “in identical terms to each recognized accrediting body.” As only one example, the evidence provided shows that the institution in its report to the Section of Paralegal Education of the American Bar Association described the institution’s equal opportunity and discrimination policies. While these policies are important, the evidence provided does not indicate exactly how the institution described itself to this accrediting agency with respect to “purpose, governance, programs, degrees, diplomas, certificates, personnel, finances and constituencies.”

Judgment

☑ Compliance ☐ Partial Compliance ☐ Non-Compliance ☐ Not Applicable

Narrative

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.13.1. Of the university’s numerous accrediting bodies [1], nine are recognized by the U.S. Department of Education (DOE) [2]. The university’s Compliance Certification report submitted in 2016 cited ten DOE-recognized accrediting bodies. At that time the university’s educator preparation programs were accredited by the National Council for Accreditation of Teacher Education (NCATE). The university’s educator preparation programs are now accredited by the Council for the Accreditation of Educator Preparation (CAEP), which is not DOE-recognized.

The university has the following DOE-recognized accrediting bodies:

1. American Bar Association, Council of the Section of Legal Education and Admissions to the Bar
2. American Dental Association, Commission on Dental Accreditation
3. American Psychological Association, Commission on Accreditation
5. Commission on Collegiate Nursing Education
6. Council on Education for Public Health
7. Liaison Committee on Medical Education
8. National Association of Schools of Music, Commission on Accreditation
9. National Association of Schools of Theatre, Commission on Accreditation

The types of information provided by programs in their accreditation self studies is governed by the specific information requested by the various accrediting bodies. Accrediting body reporting templates and standards differ and rarely require that the program include all of the items listed in SACSCOC Comprehensive Standard 3.13.1. In the university’s Compliance Certification report submitted in 2016, the university provided a table with language from accreditation self studies to show how programs represented the university to their accreditors. The offsite committee indicated that the table provided did not indicate exactly how the institution described itself to the accrediting agency with respect to the categories listed in 3.13.1.

Information about the university's SACSCOC accreditation and accredited programs is available on the UofL webpage [3]. The Provost's Office for Academic Planning and Accountability (OAPA) is responsible for all updates of the accreditation schedule and regular dissemination of information to the university community. OAPA has three units—Accreditation and Academic Planning, Institutional Research and Planning, and Institutional Effectiveness. The Accreditation and Academic Planning unit is headed by the university’s SACSCOC liaison. The accreditation schedule is maintained by the university’s SACSCOC liaison, who updates the list any time there is new information to report.

To ensure reporting consistency and accuracy of university information, the university’s SACSCOC accreditation liaison serves as a resource to the programs preparing self studies for accrediting bodies. The liaison reviews program accreditation applications and reports before they are submitted to the accrediting body and asks for revisions as needed. As well, program faculty are invested in ensuring that the information provided to their accreditors is accurate and current.

In order to report current data on enrollments, credit hours, degrees awarded, and other statistics as required by the accrediting body, programs request the data from the Institutional Research office. Institutional Research and Planning works to ensure that reporting of university statistics is consistent across all internal and external reporting, whether it be reporting to the state, the federal government, or to accrediting bodies.

Programs needing to conduct surveys for use in accreditation reporting or other reporting must coordinate the survey administration with the Institutional Effectiveness office, who helps programs develop survey instruments that effectively address the needs of the accrediting body.

Programs working on accreditation reports use the UofL website as a resource to address each accrediting body’s unique reporting requirements. The webpage contains the university's mission statement and information on campuses, colleges and schools, history, organization, profile, and accreditations, among other items, as well as information on program offerings and requirements. Below are examples of information available publicly
on the university’s webpage related to the components mentioned in Core Requirement 3.13.1.

Purpose (Mission):

- About UofL [4a]
- A Brief History [4b]
- Mission Statement [4c]
- Accreditations [4d]
- School Profile (Enrollment numbers, average ACT, number of faculty and staff, operating budget, endowment, federal funding, student classifications, academic schools and colleges, degrees conferred, budget, revenue, expenditures, grants and contracts, personnel, Board of Trustees) [4e]
- Public Accountability [4f]
- Consumer Information (accreditation, accreditation complaints, academic program improvement plans, affiliation agreements, ADA, Campus map tour, complaints/grievance processes, etc.) [4g]

Governance:

- Organizational Charts [5a]
- Board of Trustees [5b]
- School Profile (academic schools and colleges, Board of Trustees) [5c]
- Administrative Leadership [5d]

Programs and Degrees (including Minors and Certificates):

Programs and degrees are described on each department’s webpage, and program curriculum and requirements are available in the student catalogs, which are also available online. The number of degrees conferred for the most recent reporting year can be found on the School Profile link from the university’s opening webpage.

- Undergraduate Catalog [6a]
- Graduate Catalog [6b]
- Professional School Catalogs or Handbooks [6c] [6d] [6e]

Personnel:

- School Profile (Enrollment numbers, average ACT, number of faculty and staff, operating budget, endowment, federal funding, student classifications, academic schools and colleges, degrees conferred, budget, revenue, expenditures, grants and contracts, personnel, Board of Trustees) [7a]
- Faculty Affairs [7b]
- Human Resources [7c]

Finances:

- School Profile (Enrollment numbers, average ACT, number of faculty and staff, operating budget, endowment, federal funding, student classifications, academic schools and colleges, degrees conferred, budget, revenue, expenditures, grants and contracts, personnel, Board of Trustees) [8a]
- Annual Operating Budgets [8b]
- Tuition and Fees [8c]
The university’s SACSCOC Liaison notifies SACSCOC of any changes in a program’s accreditation status. All of the programs accredited by DOE-recognized agencies are in good standing with their respective discipline-specific accrediting bodies. The UofL Clinical doctoral program in Audiology (AuD) was on probation when the university’s Compliance Certification report was submitted in fall of 2016. On April 28, 2016, the university’s SACSCOC Liaison notified SACSCOC that the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association (CAA) had placed the program on probation [10a]. Following review of the agency’s “Accreditation Action Report Annual Report Review,” SACSCOC determined that the probation did not indicate noncompliance with SACSCOC Principles of Accreditation and that no follow-up was required [10b].

The university keeps each institutional body apprised of any change in its status with one or another accrediting body. In December 2016, SACSCOC placed the university on probation due to governance issues that emerged when the Governor of Kentucky dissolved and replaced its governing board. In December 2016 and January 2017, units with accredited programs notified their accrediting bodies of the SACSCOC probation decision, as demonstrated by these examples [11a] [11b] [11c] [11d]. In a few cases, the accrediting body requested additional follow up (Example: [12]). Programs submitted the requested follow-up following the individual body’s stated requirements and set timelines (Examples: [13a] [13b]).

SUMMARY

The University of Louisville (UofL) is in compliance with Comprehensive Standard 3.13.1. Nine of the university’s accrediting bodies are recognized by the Department of Education. Consistent information about the university is available on the university website, which is used as a resource for programs preparing accreditation reports in addition to the support provided centrally through the Office of Academic Planning and Accountability. Information reported in accreditation reports is determined by the accrediting bodies’ individual requirements. Accreditation reports are reviewed by the SACSCOC liaison for accuracy before being sent to accrediting bodies.

[1] External Accreditation by Program
3_13_1_fn01.pdf
http://louisville.edu/accreditation

[2] UofL Programs Accredited by DOE-Recognized Agencies
3_13_1_fn02.pdf
[4] Purpose (Mission)

[4a] About UofL
3_13_1_fn04a.pdf
http://louisville.edu/about/

[4b] A Brief History
3_13_1_fn04b.pdf
http://louisville.edu/about/history

[4c] Mission Statement
3_13_1_fn04c.pdf
http://louisville.edu/about/

[4d] Accreditations
3_13_1_fn04d.pdf
http://louisville.edu/accreditation

[4e] School Profile
3_13_1_fn04e.pdf
http://louisville.edu/about/profile

[4f] Public Accountability
3_13_1_fn04f.pdf
http://louisville.edu/financials/

[4g] Consumer Information
3_13_1_fn04g.pdf
http://louisville.edu/oapa/consumer-information


[5a] Organizational Charts
3_13_1_fn05a.pdf
http://louisville.edu/about/doc/orgchart

[5b] Board of Trustees
3_13_1_fn05b.pdf
http://louisville.edu/president/board-of-trustees

[5c] School Profile
3_13_1_fn05c.pdf
http://louisville.edu/about/profile

[5d] Administrative Leadership
3_13_1_fn05d.pdf
http://louisville.edu/about/doc/orgchart

[6] Programs and Degrees
[8e] Bursar
3_13_1_fn8e.pdf
http://louisville.edu/bursar

[8f] Financial Aid
3_13_1_fn8f.pdf
http://louisville.edu/financialaid/

[9] Constituencies

[9a] School Profile
3_13_1_fn09a.pdf
http://louisville.edu/about/profile

[9b] Faculty Senate
3_13_1_fn09b.pdf
http://louisville.edu/facultysenate

[9c] Staff Senate
3_13_1_fn09c.pdf
http://louisville.edu/staffsenate

[9d] Student Governance Association
3_13_1_fn09d.pdf
http://www.uoflsga.org/

[9e] Board of Trustees
3_13_1_fn09e.pdf
http://louisville.edu/president/board-of-trustees

[9f] Administrative Leadership
3_13_1_fn09f.pdf
http://louisville.edu/about/doc/orgchart

[10] SACSCOC Notification of Accreditation Change

[10a] UofL Notification to SACSCOC Regarding Audiology (AuD) Probation
3_13_1_fn10a.pdf

[10b] SACSCOC Letter in Response to Notification of Audiology Probation
3_13_1_fn10b.pdf


[11a] Dentistry Notification to CODA
3_13_1_fn11a.pdf

[11b] Nursing Notification to CCNE
3_13_1_fn11b.pdf

[11c] COPRA Response
3_13_1_fn11c.pdf

[11d] CEPH Response
3_13_1_fn11d.pdf

[12] Example--CODA Request for Follow-Up on UofL Probation
3_13_1_fn12e.pdf

[13] Dentistry Follow up to CODA on Status of UofL SACSCOC Accreditation/Probation

[13a] Dentistry Follow-up Report Submitted 5-11-17
3_13_1_fn13a.pdf

[13b] Dentistry Follow-up Report Submitted 11-13-17
3_13_1_fn13b.pdf
3.13.2

Policy Compliance: Collaborative Academic Arrangements: Policy and Procedures

Applicable Policy Statement. Member institutions are responsible for notifying and providing SACSCOC with signed final copies of agreements governing their collaborative academic arrangements (as defined in this policy). These arrangements must address the requirements set forth in the collaborative academic arrangements policy and procedures. For all such arrangements, SACSCOC-accredited institutions assume responsibility for (1) the integrity of the collaborative academic arrangements, (2) the quality of credits recorded on their transcripts, and (3) compliance with accreditation requirements.

Documentation: The institution should provide evidence that it has reported to the Commission all collaborative academic arrangements (as defined in this policy) that included signed final copies of the agreements. In addition, the institution should integrate into the Compliance Certification a discussion and determination of compliance with all standards applicable to the provisions of the agreements.

SACSCOC OFF-SITE COMMITTEE COMMENTS

Non-Compliance

The institution has six collaborative academic arrangements, as follows: 1) Bachelor of Science in Business - European Business School (Germany), 2) Executive Master of Business Administration (E-MBA)-University of Kentucky, 3) Ph.D. in Social Work-University of Kentucky, 4) Juris Doctor / Master of Divinity-Louisville Seminary, 5) M.S.S.W. in Social Work / Master of Divinity-Louisville Seminary, and 6) B.S. in Electrical Engineering-Western Kentucky University.

All six programs were reviewed for compliance with the SACSCOC Policy Statement titled “Agreements Involving Joint and Dual Academic Awards: Policy and Procedures.”

It appears that the institution first and only had a Consortia Agreements Policy as of August 24, 2016, which raises concerns as to whether collaborative agreements before this date were fully reviewed by the institution to ensure that they were compliant with SACSCOC policy.

The Off-Site Reaffirmation Committee had concerns with the following collaborative arrangement:

B.S. in Electrical Engineering-Western Kentucky University. Evidence of compliance for this collaborative arrangement is lacking. The provided MOA dated March 24, 2003, is between the Council on Postsecondary Education and the University of Louisville. It largely details the University of Louisville’s obligations with respect to Murray State University, and not to Western Kentucky University. It is not signed by Western Kentucky University. However, there is a MOA signed in 2004 between the University of Louisville and Western Kentucky University; however, it only addresses three brief points in three sentences. There is no formal signed MOA between the University of Louisville and Western Kentucky University to demonstrate compliance with this standard.

Judgment

☑ Compliance ☐ Partial Compliance ☐ Non-Compliance ☐ Not Applicable
Narrative

The University of Louisville is in compliance with Comprehensive Standard 3.13.2 (Agreements Involving Joint and Dual Academic Awards: Policy and Procedures).

Consortia Agreements

The university has an extensive review and approval process for all agreements that requires academic unit, university legal counsel, and university provost approval prior to implementation [1]. As relevant, an agreement will be considered “pending approval” if permission from SACSCOC or other external agencies is required. After approval and implementation, regular program evaluations are completed by the faculty or program directors with oversight for each agreement.

As indicated in Table A of the SACSCOC Resource Manual, an institutional policy for Collaborative Academic Arrangements is required by the commission in response to Comprehensive Standard 3.13.1. The UofL Consortial Agreements Policy [2] established in August 2016 was developed in response to that requirement and reflects the university’s process that was already in existence. UofL has collaborative agreements that date back to 1969, as was noted in the 2016 Compliance Report [3].

B.S. in Electrical Engineering-Western Kentucky University

In 2001, the Kentucky Council on Postsecondary Education (CPE) developed a statewide agreement with several institutions for several joint baccalaureate engineering programs: Western Kentucky University (WKU) and the University of Louisville (UofL) in electrical engineering (see Table 1), WKU and the University of Kentucky (UK) in mechanical engineering, WKU and UK in civil engineering. The CPE statewide agreement was signed by all parties on January 12, 2001 [4]. SACSCOC acknowledged the WKU report on the agreement in August 2001 [5]. SACSCOC acknowledged the UofL report on the agreement in February 2001 [6].

<table>
<thead>
<tr>
<th>Consortium Degree(s)</th>
<th>Degree Type</th>
<th>Partner Institution</th>
<th>Program Accreditor</th>
<th>Academic Unit</th>
<th>Year of Approval by SACSCOC</th>
</tr>
</thead>
<tbody>
<tr>
<td>B.S. in Electrical Engineering</td>
<td>Joint</td>
<td>Western Kentucky University (WKU)</td>
<td>ABET, Inc.</td>
<td>Speed School of Engineering</td>
<td>2001</td>
</tr>
</tbody>
</table>

Another memorandum of agreement initiated by CPE in March 2003 was modeled after the WKU-UK-UofL agreement. It expanded the 2001 CPE agreement to include a partnership between UofL and Murray State University to offer a joint bachelor of science degree in electrical and telecommunications engineering [7]. The addendum to this agreement included two additional pages on the CPE agreement for WKU and UofL. One page contained the three points noted in the SACSCOC off-site committee report related to the formatting of the diploma for the joint degree, and the other page was an acknowledgment by the provosts of the two institutions (UofL and WKU) that the operational and administrative details of the joint program in electrical engineering were agreed upon [8]. As noted in the university’s 2016 Compliance Certification response, the WKU program is evaluated annually by both faculty [9].
SUMMARY

The University of Louisville has demonstrated compliance with Comprehensive Standard 3.13.2 and has an established institutional policy for the development of consortial or collaborative agreements. The full, signed agreement for the University of Louisville and Western Kentucky University joint degree in Electrical Engineering is provided with this report.

[1] Consortial Agreements Process
3_13_2_fn01.pdf

[2] UofL Consortial Agreements Policy
3_13_2_fn02.pdf

[3] UofL Collaborative Degrees List
3_13_2_fn03.pdf

3_13_2_fn04.pdf

3_13_2_fn05.pdf

3_13_2_fn06.pdf

3_13_2_fn07.pdf

3_13_2_fn08.pdf

[9] UofL/WKU Joint Degree in Electrical Engineering Program Evaluation Process
3_13_2_fn09.pdf
4.9

**Definition of Credit Hours**

The institution has policies and procedures for determining the credit hours awarded for courses and programs that conform to commonly accepted practices in higher education and to Commission policy. (See Commission policy "Credit Hours.")

**SACSCOC OFF-SITE COMMITTEE COMMENTS**

**Non-Compliance**

Descriptions of credit hour awarding information is provided in detail with supporting documentation and university website links. The institution procedures and policies are aligned with SACSCOC policy and those used in higher education meeting or exceeding federal and regional accreditation requirements. Credit hour determination is consistent whether in face to face or on-line courses. Latitude is given to individual units to have make changes in relation to discipline best practices though these must be approved by the provost. As mentioned in the CS 3.4.6 response, 50 contact minutes per term week constitutes one-credit hour and this applies to both in-class and out-of-class pedagogical activities. For terms with less weeks than the standard fall/spring semesters, the total hours per week increases in proportion. Each unit recommends the number of credit hours awarded based on course design. The university requires information to be provided to substantiate this and an appropriate approval process is established and described in detail. Academic calendars for undergraduate and graduate programs are provided detailing fall, spring and summer sessions. Finally, when courses are offered via distance education or other methods, students must have the opportunity to have approximately the same amount of contact time with the instructor. The Off-Site Reaffirmation was unable to determine how the institution’s credit-hour policies and procedures apply to the School of Medicine.

**Judgment**

☑ Compliance  □ Partial Compliance  □ Non-Compliance  □ Not Applicable

**Narrative**

The University of Louisville’s (UofL) policies and procedures for determining the credit hours awarded for courses and programs [1] conform to SACSCOC policy and to commonly accepted practices in higher education. The university’s policy for establishing the institutional academic calendar and determining the amount of credit awarded for all courses (face-to-face and on-line) is designed to meet federal regulations and regional accreditation requirements.

The credit hour policy allows for program adjustments as needed in order to accommodate program accrediting body requirements and discipline-specific best practices. Academic units with external accreditation requirements [2] have the flexibility to make policy adjustments based on best practices in that discipline with the approval of the University Provost. The university policy allows for standard instruction, innovation, and the use of instructional technology, while adhering to the requirements established by the federal government and the applicable accrediting bodies.

All courses at the University of Louisville follow uniform standards for determining the amount of credit awarded. The university’s credit hour policy [3] was approved by the University Provost in December 2011 and provides the standards for in-class and for out-of-class instructional activities. To address the needs of its diverse student body, UofL has an academic calendar policy based on a standard of 14 weeks (fall/spring terms). One-credit
hour of lecture, discussion, or seminar requires at least 50 contact minutes per week during a regular semester (as allowed by SACSCOC and consistent with the federal recognition of the Carnegie Unit definition [4]). The initial credit hour recommendation is made by the faculty in the discipline, which ensures consistency with the norms of the discipline (this includes all coursework, internships, independent studies, and practicums).

When a new course is being created or adjustments made to existing courses the program faculty in the academic unit submit a Course Inventory File (CIF) form, which is reviewed by the unit curriculum committee and processed through the university’s course approval process [5]. The instructions that accompany the CIF provide the details of the university’s credit hour policy and definitions of type of activity/contact hour expectations [6]. The CIF contains fields for minimum and maximum credit hours and type of activity/number of contact hours per semester. All aspects of the course, including the assigned credit hours, are reviewed at all levels in the curriculum process.

The SACSCOC off-site committee stated that it was unable to determine how the institution’s credit hour policies apply to the School of Medicine.

All of the basic sciences programs in the School of Medicine follow the university-wide credit hour policy. The professional MD program follows the School of Medicine’s Credit Hour Policy [7], which was developed by the school’s Educational Program Committee in conjunction with the provost’s office and is based on best practices and guidelines of the Liaison Committee on Medical Education (LCME), the school’s accrediting body. The policy aligns with LCME accreditation requirements that focus more on active forms of learning over passive forms like lecture.

The School of Medicine Credit Hour Policy was processed through the university’s curriculum approval process and received approval from the Vice Provost within the Office of Academic Planning and Accountability [8] to ensure alignment with institutional credit hour policies. The School of Medicine policy became effective in AY 2012-2013. The program’s updates to the credit hour assignments were recorded in the university’s PeopleSoft management system to ensure appropriate assignment of credit hours in the program.

The School of Medicine Credit Hour Policy supports the requirements of LCME standards 6.3 (Self-Directed and Life-Long Learning) and 8.8 (Monitoring Student Time):

**LCME Element 6.3 Self-Directed and Life-Long Learning:** The faculty of a medical school ensure that the medical curriculum includes self-directed learning experiences and time for independent study to allow medical students to develop the skills of lifelong learning. Self-directed learning involves medical students’ self-assessment of learning needs; independent identification, analysis, and synthesis of relevant information; and appraisal of the credibility of information sources.

**LCME Element 8.8 Monitoring Student Time:** The medical school faculty committee responsible for the medical curriculum and the program’s administration and leadership ensure the development and implementation of effective policies and procedures regarding the amount of time medical students spend in required activities, including the total number of hours medical students are required to spend in clinical and educational activities during clerkships.

The School of Medicine is in good standing with LCME and is scheduled for reaffirmation of accreditation in 2020-21.

The School of Medicine uses the following formula for determining credit hours for classroom courses: 15 contact hours (any type of teaching) = 1 credit hour. Credit hours for
clinical courses are determined by the following formula: 1 credit hour = 1.25 weeks. The School of Medicine’s formula for calculating credit hours follows SACSCOC policy on “Credit Hours,” which also states that 1 credit hour approximates 15 contact hours [9].

SUMMARY

The University of Louisville is in compliance with Federal Requirement 4.9. UofL offers courses with credit hour assigned in alignment with federal requirements and applicable accrediting bodies. The School of Medicine’s Credit Hour Policy was developed by the school’s Educational Program Committee in conjunction with the provost’s office to align with LCME standards. The policy was processed through the university’s curriculum approval process and received approval from the Vice Provost within the Office of Academic Planning and Accountability to ensure alignment with institutional credit hour policies.

[1] UofL Credit Hour Policy
4_9_fn01.pdf
http://louisville.edu/oapa/credit-hour-definition-and-policy

[2] External Accreditation by Program
4_9_fn02.pdf
http://louisville.edu/accreditation/accreditation-by-school

[3] UofL Credit Hour Policy
4_9_fn03.pdf
http://louisville.edu/oapa/credit-hour-definition-and-policy

[4] Carnegie Unit Definition
4_9_fn04.pdf

[5] Curriculum Approval Flowchart
4_9_fn05.pdf

[6] Course Inventory File (CIF) – Curriculum Request
4_9_fn06.pdf
http://louisville.edu/oapa/institutional-research-and-planning/docs/cif-2017-version

[7] School of Medicine Credit Hour Policy
4_9_fn07.pdf

[8] Vice Provost, Academic Planning and Accountability
4_9_fn08.pdf
http://louisville.edu/provost/who-we-are/academic-accountability

[9] SACSCOC Policy on “Credit Hours”
4_9_fn09.pdf
ADDENDUM TO THE COMPLIANCE CERTIFICATION
Reaffirmation Class of 2018, Track B

Name of Institution: University of Louisville

Date of Submission: March 12, 2018

Accreditation Liaison

Name of Accreditation Liaison: Connie Shumake

Signature:

Date: March 9, 2018

Chief Executive Officer

Name of Chief Executive Officer: Gregory C. Postel

Signature:

Date: March 9, 2018
4.2.g

**Board Self-Evaluation**

The governing board:

> g. defines and regularly evaluates its responsibilities and expectations.

**Judgment**

☑ Compliance □ Partial Compliance □ Non-Compliance □ Not Applicable

**Narrative**

The University of Louisville (UofL) has a legal governing body in its Board of Trustees. Per Kentucky Revised Statute (KRS) 164.830, the Board of Trustees has specific authority over the institution [1]. The current Board was appointed by Governor Matt Bevin on January 17, 2017 [2]. The presiding officer of the Board is the Chair, who is annually elected by the Board from among its members. The Chair, Vice Chair, and other current Board officers were elected according to UofL Board Bylaws [3].

The Board of Trustees and its various standing committees [4] meet regularly [5] to carry out the Board’s governance function and to receive reports and information from the president and other administrators. While the Board’s By-Laws require the Board to meet at least quarterly, the Board’s practice has been to meet at least monthly. The work of the Board demonstrates the Board’s authority over the institution. The Board approves personnel actions, including promotion and tenure decisions, and the granting of degrees; receives reports from university constituencies; selects/evaluates the president; approves the university’s operating budget; and guides, supports, and evaluates the university’s efforts toward its strategic agenda.

The current Board of Trustees standing committees are:

- Executive and Compensation Committee
- Finance Committee
- Audit, Compliance, and Risk Committee
- Academic and Student Affairs Committee
- Human Resources Committee
- Governance, Trusteeship, and Nominating Committee.

As the activities outlined in Table 1 demonstrate, the Board has diligently performed its state-mandated responsibilities in exercising independent control over the institution.

**Table 1. Activities of the UofL Board of Trustees since Its Appointment in January 2017**

The following activities are documented in the Board minutes, available online at [http://louisville.edu/president/board-of-trustees/minutes/2017](http://louisville.edu/president/board-of-trustees/minutes/2017).
<table>
<thead>
<tr>
<th>Date</th>
<th>Board Activity</th>
<th>Board Function as defined by SACSCOC</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>January 2017</strong></td>
<td>Board of Trustees New Trustees Welcome Packet sent to all new Board appointees containing Board of Trustees Bylaws, UofL Articles of Incorporation, Institutional Conflict of Interest Policy, Oath of Office, Conflict of Interest Statement, Conflict of Interest Disclosure Statement and Certification, and proof of receipt, among other information.</td>
<td>Demonstrates that the Board of Trustees members are informed of conflict of interest and the requirement to be free of any contractual, employment, or personal or familial financial interests in the institution.</td>
</tr>
<tr>
<td><strong>January 21, 2017 (Board Meeting)</strong></td>
<td>Newly appointed Board held its first meeting (Oath of Office administered by Judge Gina Calvert).</td>
<td>Demonstrates that the Board is a legal body with authority over the institution.</td>
</tr>
<tr>
<td></td>
<td>Elected a Chair and Vice Chair according to the University of Louisville Board Bylaws.</td>
<td>Demonstrates Board organizational structure.</td>
</tr>
<tr>
<td></td>
<td>Approved personnel recommendations.</td>
<td>Demonstrates that the Board has academic and administrative oversight of the institution.</td>
</tr>
<tr>
<td></td>
<td>Appointed an Interim President.</td>
<td>Demonstrates that the Board has administrative oversight of the institution.</td>
</tr>
<tr>
<td><strong>February 16, 2017 (Board Meeting)</strong></td>
<td>Approved regular meeting dates for 2017.</td>
<td>Demonstrates that the new Board meets on a regular and consistent basis.</td>
</tr>
<tr>
<td></td>
<td>Adopted University Signature Authority.</td>
<td>Demonstrates that the Board has oversight of the financial resources of the institution.</td>
</tr>
<tr>
<td></td>
<td>Adopted Banking Signature Authority.</td>
<td>Demonstrates that the Board has oversight of the financial resources of the institution.</td>
</tr>
<tr>
<td></td>
<td>Established an <em>ad hoc</em> Committee on Governance.</td>
<td>Demonstrates that the Board is an active policy-making body of the institution and has an organizational structure.</td>
</tr>
<tr>
<td></td>
<td>Approved contract for Interim President.</td>
<td>Demonstrates that the Board has administrative oversight of the institution.</td>
</tr>
<tr>
<td>Date</td>
<td>Meeting/Action</td>
<td>Demonstration</td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>March 9, 2017</td>
<td>First Meeting of the Board of Trustees <em>ad hoc</em> Committee on Governance.</td>
<td>Demonstrates that the Board is an active policy-making body of the institution and has an organizational structure.</td>
</tr>
<tr>
<td></td>
<td>(Began work on new Memorandum of Understanding between UofL and ULF, revision of the Board of Trustees Bylaws to align with SB 12 and SB 107, and the Financial Transaction Policy).</td>
<td></td>
</tr>
<tr>
<td>March 16, 2017</td>
<td>Approved Financial Transactions (Spending) Policy.</td>
<td>Demonstrates that the Board ensures adequate financial resources of the institution.</td>
</tr>
<tr>
<td>April 12, 2017</td>
<td>Approved candidates for degrees and certificates.</td>
<td>Demonstrates that the Board has academic oversight of the institution.</td>
</tr>
<tr>
<td></td>
<td>Approved personnel actions.</td>
<td>Demonstrates that the Board has academic and administrative oversight of the institution.</td>
</tr>
<tr>
<td>May 18, 2017</td>
<td>Board of Trustees Orientation by Robert King, president of the Kentucky Council on Postsecondary Education (CPE), per KRS 164.011.</td>
<td>Demonstrates that the Board is informed of its responsibilities and that its members are trained to execute the office of Trustee.</td>
</tr>
<tr>
<td></td>
<td>Approved the revised Board of Trustees Bylaws to reflect SB 12 and SB 107 changes to KRS.</td>
<td>Demonstrates that the Board is an active policy-making body of the institution.</td>
</tr>
<tr>
<td>June 15, 2017</td>
<td>Approved 2017-18 operating budget.</td>
<td>Demonstrates that the Board ensures adequate financial resources of the institution.</td>
</tr>
<tr>
<td></td>
<td>(The approval of the annual operating budget includes the setting of tuition and fees, campus housing rates, and food/meal plans.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Approved revisions to <em>The Redbook</em> to reflect changes to the Board’s Bylaws and KRS</td>
<td>Demonstrates that the Board is an active policy-making body of the institution.</td>
</tr>
<tr>
<td>Date/Meeting</td>
<td>Action</td>
<td>Demonstration</td>
</tr>
<tr>
<td>--------------</td>
<td>--------</td>
<td>---------------</td>
</tr>
<tr>
<td>June 28, 2017 (Board Meeting)</td>
<td>Approved appointments of interim deans for Law School and Speed School of Engineering.</td>
<td>Demonstrates that the Board has administrative oversight of the institution.</td>
</tr>
<tr>
<td></td>
<td>Passed resolution regarding the presidential search process.</td>
<td>Demonstrates that the Board has administrative oversight of the institution.</td>
</tr>
<tr>
<td></td>
<td>Approved new MOU between UofL and UofL Foundation.</td>
<td>Demonstrates that the Board ensures adequate financial resources of the institution.</td>
</tr>
<tr>
<td>July 20, 2017 (Annual Board Meeting)</td>
<td>BOT Members reaffirmed their Conflict of Interest Statements.</td>
<td>Demonstrates that the Board of Trustees members are informed of conflict of interest and the requirement to be free of any contractual, employment, or personal or familial financial interests in the institution.</td>
</tr>
<tr>
<td></td>
<td>BOT elects Chair, Vice Chair, Secretary and Treasurer.</td>
<td>Demonstrates Board organizational structure.</td>
</tr>
<tr>
<td></td>
<td>Board of Trustees Orientation on Fiduciary Responsibilities by Board of Trustees member Bonita Black.</td>
<td>Demonstrates that the Board is informed of its responsibilities and that its members are trained to execute the office of Trustee.</td>
</tr>
<tr>
<td></td>
<td>Approved 2017-18 Audit Plan.</td>
<td>Demonstrates that the Board has oversight of operational processes of the institution.</td>
</tr>
<tr>
<td></td>
<td>Approved revised institutional leadership structure.</td>
<td>Demonstrates that the Board has administrative oversight of the institution.</td>
</tr>
<tr>
<td></td>
<td>Governance Committee charged with collecting materials for evaluation of interim president in fall.</td>
<td>Demonstrates that the Board has administrative oversight of the institution and that the Board regularly evaluates the president.</td>
</tr>
<tr>
<td>August 10, 2017 (Board Meeting)</td>
<td>Approved the creation of the Ad Hoc Special Litigation Committee to take actions in response to the 2016 Examination by the KY State Auditor, and 2017 Forensic Investigation by Alvarez &amp; Marsal.</td>
<td>Demonstrates that the Board ensures adequate financial resources of the institution.</td>
</tr>
<tr>
<td>September 15, 2017 (Board Meeting)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Received update from Presidential Search Firm representative and created two subcommittees of the Search Committee: Listening Tour Subcommittee and Leadership Statement Subcommittee.

Approved new Nepotism Policy.

Approved Six-Year Capital Plan.

Approved new Personnel Policy Documents for the Schools of Law and Medicine.

Authorized the ULRF to Refinance the Pediatric Medical Office Building.

Approved 2017-2021 University of Louisville Diversity Plan.

Approved the 2017-18 Governing Board Certification Form required by the ACC.

<table>
<thead>
<tr>
<th>October 18, 2017 (Board Meeting)</th>
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<tbody>
<tr>
<td>Appointed Acting Athletic Director.</td>
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<tr>
<th>November 20, 2017 (Board Meeting)</th>
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<tr>
<td>Ratified the finalized audited financial statements for the university.</td>
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<tr>
<th>December 14, 2017 (Board Meeting)</th>
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<tr>
<td>Approved December Degree Candidates.</td>
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<td>Hired new external auditor.</td>
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<tr>
<td>Reviewed the President’s performance.</td>
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<tr>
<td>Approved a management representation and indemnity agreement with the UofL Foundation.</td>
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</table>
Board Orientation

Board members of Kentucky state institutions are required to undergo orientation to their duties. Kentucky Revised Statute (KRS) 164.821 states, "All appointed and elected persons shall be required to attend and complete an orientation and education program prescribed by the council under KRS 164.020(25), as a condition of their service and eligibility for appointment or election to a second term" [6].

Board orientation is provided by the Kentucky Council on Postsecondary Education (CPE) and is comprehensive in that it provides training on important and specific operational aspects of the business functions of the university, as well as the responsibilities of the Board and conflict of interest.

KRS 164.020 (25)(a)(1) reads as follows:

_The Council shall:_

1. Ensure that the orientation and education program comprises six (6) hours of instruction time and includes but is not limited to information concerning the roles of the council and governing board members, the strategic agenda and the strategic implementation plan, and the respective institution's mission, budget and finances, strategic plans and priorities, institutional policies and procedures, board fiduciary responsibilities, legal considerations including open records and open meetings requirements, ethical considerations arising from board membership, and the board member removal and replacement provisions of KRS 63.080. [7]

CPE also hosts a biennial Governor’s Conference on Postsecondary Education Trusteeship that provides Board members the opportunity to engage with state and national experts on the latest postsecondary issues and trends and to network with Board colleagues from other campuses. The mandatory state-level orientation program for Board members is offered at the conference. The CPE conference was held on September 11-12, 2017 [8]. The CPE board orientation [9], in addition to the training provided by the board leadership and university administration, helps guide the work of the trustees.

Board Self-Evaluation

The Board of Trustees' Committee on Governance, Trusteeship, and Nominating Committee has been charged by the full board with the task of developing a regular board evaluation process. The functions assigned to the board by the state statute and reaffirmed in the UofL governance document _The Redbook_ are: approving personnel actions, including promotion and tenure decisions, the granting of degrees; receiving reports from university constituencies; selection/evaluation of the president; approval of the university's operating budget; and leading and evaluating the university's efforts toward its strategic agenda.

The UofL Board completed its first full-year of operation in January of 2018. The Board understands the importance of the new 4.2g principle approved by SACSCOC in December of 2017. In January of 2018, the Board’s Governance Committee developed a survey as the first step toward addressing the new principle. The Governance Committee administered the survey in February of 2018. The survey asked Board members to evaluate their knowledge of and performance of their duties as individual trustees, as a board, and the effectiveness of their Board meetings. The response rate was 100 percent. A summary of the survey results is provided with this report [10]. The governance committee will be analyzing the results of the survey in upcoming meetings and discussing how the survey results can be used to develop an overall Board assessment strategy for the future. UofL is

a member of the Association of Governing Boards, and the Governance Committee plans to utilize the resources of this organization in evaluating Board process based on best practices.

SUMMARY

The UofL Board of Trustees completed its first full-year of operation in January 2018. As documented in Table 1, the board has been responsible for the implementation and completion of academic, administrative and operational policy work in support of the effective operation of the university. The Board’s work has been completed in compliance with the board’s charge based on state statute and in alignment with The Redbook and the Board of Trustees Bylaws. The Board has developed and implemented a survey to evaluate individual member’s knowledge of and performance of their duties as trustees. The Board will use the current survey results to inform strategies for evaluation and plans for improvement moving forward.

[1] KRS 164.830, Powers of the Board
4_2g_fn01.pdf

[2] Roster of UofL Board of Trustees
4_2g_fn02.pdf

[3] UofL Board of Trustees Bylaws, Section 4, Elected Officers
4_2g_fn03.pdf

[4] Board of Trustees Bylaws 2.9, Standing Committees
4_2g_fn04.pdf

[5] Board of Trustees 2017-18 Meeting Schedule
4_2g_fn05.pdf

[6] KRS 164.821, Board of Trustees of UofL—Orientation
4_2g_fn06.pdf

[7] KRS 164.020(25)(a) (1), Board Orientation
4_2g_fn07.pdf

[8] Governor’s CPE Trusteeship Conference--New Board Member Training 2017
4_2g_fn08.pdf

4_2g_fn09.pdf

[10] Board of Trustees Evaluation Survey Results
4_2g_fn10.pdf
12.6

Student Debt

The institution provides information and guidance to help student borrowers understand how to manage their debt and repay their loans.

Judgment
☑ Compliance □ Partial Compliance □ Non-Compliance □ Not Applicable

Narrative

The University of Louisville (UofL) has a comprehensive Student Financial Aid Office that is responsible for processing and disbursing federal, state, and institutional aid for undergraduate, graduate, and professional students. All eligible on-campus, off-campus, and online students are served by this office. The UofL student financial aid office disburses over $180,000,000 dollars in federal and state aid annually, of which student loans represent 73 percent.

UofL participates in the William D. Ford Direct Loan Program. In the Direct Loan Program, eligible students and parents borrow directly from the U.S. Department of Education. Direct Loans include Direct Subsidized Loans, Direct Unsubsidized Loans, Direct PLUS Loans, and Direct Consolidation Loans. The Federal Perkins Loan is a low-interest (5 percent) federal student loan. It is a campus-based loan, and the University of Louisville is the lender. Awards from this loan are made to students based on financial need. The average student loan debt of UofL graduates in 2015-16 was $23,553 [1] as compared to a national average of $27,291 for students graduating from four-year public institutions [2].

The Department of Education requires a school to notify a student of the exit counseling responsibility any time a student’s enrollment has dropped below a half time status or is in a status of graduation. Students are notified of this requirement via mail and email. The purpose of the exit counseling session is to help students be prepared to begin repayment of their student loans. The Exit Counseling procedures are available on the Student Financial Aid Office (SFAO) website [3]. All students who borrow a Federal Direct and/or Graduate/Professional PLUS loan are required to complete exit counseling before graduation or any time enrollment falls below half time status (for fall and spring terms) [4].

Students receiving campus-based loans also complete exit loan counseling through the university Bursar’s Office [5].

- UofL has contracted with an external vendor, Heartland ECSI [6], for Perkins Loan debt collection and for exit loan counseling.
- The Bursar’s Office forwards the national student loan clearinghouse data to Heartland ECSI.
- Heartland ECSI cross references the clearinghouse report with the records of UofL borrowers.
- A report is generated and forwarded back to the university for review.
- Once information is validated, Heartland ECSI updates borrower records to flag the exit process.
The University places an Exit Interview hold on the borrower’s student account, which restricts registration and withholds the release of an official transcript until the exit counseling process is complete.

Exit hold reports are run daily to remove the hold from a student’s account once the exit counseling is completed.

The University of Louisville Bursar’s Office also has the ability to manually update separation dates in the ECSI system, as well as generate web exits. All borrower separation dates are reviewed quarterly. This allows the office to catch potential errors and ensure that borrowers are being notified within 30 days of exit.

Students with questions about their Perkins loan can also call (502) 852-6507 to speak to a UofL loan repayment specialist or get assistance with the exit counseling process.

**Online Counseling**

The university’s online counseling process provides students with their rights and responsibilities and useful information regarding repayment options, debt management strategies, forbearance, deferment, cancellation options, consolidation, and tax benefits. Those students who do not complete the on-line counseling process are sent, via a mailing to their home address, all the pertinent information regarding repayment, including their individual student loan debt amount and estimated payment amount.

The online exit counseling process includes a review of:

- Student loan amounts
- Repayment options [7]
- Debt management strategies
- Student rights and responsibilities
- Forbearance, deferment, and cancellation options
- Personal and contact information
- Available tax benefits
- Effects of loan consolidation

The exit counseling process for the university’s Brandeis School of Law is the same as the process for undergraduate and graduate populations at the University of Louisville. However, Brandeis School of Law does offer debt management and other financial literacy information to their students on a regular basis [8].

The university’s Medical School [9a] [9b] [9c] and Dental School [10] have financial aid persons to handle processing specifically for their students so that the exit counseling process is completed by personnel at those schools. One hundred percent of medical and dental students go through the exit counseling.

**Debt Management and Default Prevention**

The Financial Aid Office uses a multi-pronged approach in default prevention. Beginning with the early stages of enrollment through graduation and beyond, the Financial Aid Office is in contact with students to assist with default prevention and rehabilitation. The following categories highlight those outreach efforts.
Early Stages of Enrollment at the University

- Financial Literacy: The university partners with SALT [12a] [12b] to provide free financial literacy information to students. Once a student is enrolled at the university, the student is sent a link to activate a SALT account. SALT is a comprehensive web-based financial literacy program that provides the resources students need to have a more financially sound future. Students are encouraged to utilize these services through email blast and campaigns throughout the school year. Units are encouraged to utilize the SALT program in the classroom, and workshops are held at least once a semester to encourage participation in the financial literacy program [12c].

Throughout Enrollment at the University

- Personalized Summary Letter: Annually, prior to the beginning of the academic year, a letter is sent to students with their estimated current student loan indebtedness, current interest rates, and estimated monthly payment. The letter also includes financial planning resources, a link to the SALT Program, and other financial literacy information.
- Debt Management Counseling: During counseling appointments where students are asking for a loan increase or additional funds, they are introduced to NSLDS.ed.gov to encourage responsible borrowing and increase knowledge of loan debt.

At Stop-Out or Following Graduation

- Exit Counseling Letters: Graduates are sent an email reminding them of their loan obligations and the requirement to complete exit counseling via studentloans.gov. After the series of emails, if the student does not complete the exit counseling a National Students Loan Data System (NSLDS) [13] file is requested of their total indebtedness and a paper letter is sent to them reminding them of the loan repayment obligation and their total indebtedness. If an NSLDS file does not come back for a student, they are provided the average indebtedness for their class.

Stop-out and withdrawals are sent paper letters reminding them of their loan repayment obligations. The letter includes the average indebtedness for their grade level.

- Delinquent Borrowers: Former students with Perkins Loans issued by the university who fail to meet their financial obligations when a promissory note becomes due and payable will be subject to follow-up as a delinquent borrower. The follow-up process includes the following actions:

Three letter program:
- 1st letter is a gentle reminder of repayment obligation
- 2nd letter medium reminder of repayment obligation
- 3rd letter a firm reminder of repayment obligation

Phone campaign to students:
- High Priority 75–115 days delinquent
- Mid-level 135-239 days delinquent
- Late stage 240–and higher days delinquent
- Contact students that have already defaulted to give them a way to get back on track and out of Default

Follow up phone calls with email if not successful on the phone

**Default Rate History**

In 2011, the Department of Education implemented the 3-year cohort default rate measuring how students performed in loan repayment three years after graduation. The 2014 cohort default rate was reported in October 2017. Since 2011, the University of Louisville cohort default rate has been declining, with significant drops from 2011 (9.6) to 2014 (6.0).

**Graph 1. University of Louisville Cohort Default Rate**

![Graph 1. University of Louisville Cohort Default Rate](image)

**SUMMARY**

The University of Louisville has a comprehensive and successful exit counseling and debt management system as evidenced by the university’s declining loan default rate. With student loan debt rates below the national average and low default rates, the university’s efforts to provide debt management for currently enrolled students and to comply with federal guidelines for exit counseling appear to be successful.

[1] Average Student Loan Debt of UofL Graduates, 2015-16
12_6_fn01.pdf

[2] National Average Student Loan Debt
12_6_fn02.pdf
http://college-insight.org/

12_6_fn03.pdf
http://louisville.edu/financialaid/loans/exit-counseling

12_6_fn04.pdf
[5] UofL Bursar’s Office—Exit Loan Counseling
12_6_fn05.pdf
http://louisville.edu/bursar/campusloans/exit

[6] Heartland ESCI
12_6_fn06.pdf

[7] PLAN Workshop—Understanding Student Loan Repayment
12_6_fn07.pdf

[8] Law School Webinar on Student Loan Debt Relief
12_6_fn08.pdf

[9] School of Medicine Financial Literacy
   [9a] School of Medicine Financial Aid Exit Interview Policy and Procedures
        12_6_fn09a.pdf
   [9b] School of Medicine Financial Literacy
        12_6_fn09b.pdf
   [9c] Excerpt from 2017 School of Medicine - Exit Presentation (9 pages out of 70 total)
        12_6_fn09c.pdf

[10] School of Dentistry Financial Aid Exit Interview Policy and Procedures
    12_6_fn10.pdf

    12_6_fn10.pdf
    https://studentloans.gov/myDirectLoan/index.action

[12] SALT
    [12a] SALT Information on SIGS Financial Literacy Webpage
         12_6_fn12a.pdf
         http://louisville.edu/graduate/plan/financial-literacy/#SALT
    [12b] SALT Webpage
         12_6_fn12b.pdf
         https://www.saltmoney.org/index.html
    [12c] Financial Literacy--SIGS
         12_6_fn12c.pdf

[13] National Student Loan Data System
    12_6_fn13.pdf