University of Louisville
School of Public Health and Information Sciences

Accreditation Self-Study

Prepared for the
Council on Education for Public Health

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Glossary

The following acronyms and abbreviations are used throughout the document.

AAHRPP	Association for the Accreditation of Human Research Protection Programs
AAMC	Association of American Medical Colleges
ACCME	Accreditation Council for Continuing Medical Education
ACRT	Association for Clinical Research Training
ACS	American Cancer Society
AHRQ	Agency for Healthcare Research and Quality
APHA	American Public Health Association
APTR	Association for Prevention Teaching and Research
ARS	Audience Response System
ASC	Accreditation Steering Committee
ASPH	Association of Schools of Public Health
ATSDR	Agency for Toxic Substances and Disease Registry
BB	Department of Bioinformatics and Biostatistics
BDS	Biostatistics – Decision Sciences Program
BTCDP	Bioterrorism Training and Curriculum Development Program
CAR	Continual Annual Requirement
CDC	Centers for Disease Control and Prevention
CEGIB	Center for Environmental Genomics and Integrative Biology
CEHD	UofL College of Education and Human Development
CEPH	Council on Education for Public Health
CHES	Certified Health Education Specialist
CHFS	Kentucky Cabinet for Health and Family Services
CHHP	Center for Health Hazards Preparedness
CHSE	Continuing Health Sciences Education
CMS	Center for Medicare and Medicaid Services
CPE	Council on Postsecondary Education, Commonwealth of Kentucky
CTTL	Computer Training and Testing Lab
DAT	Dental Admissions Test
DoD	Department of Defense
DRIF	Departmental Research Infrastructure Fund
ECIS	Epidemiology: Clinical Investigation Sciences Program
EIS	Epidemiology Intelligence Service
EKU	Eastern Kentucky University
EOHS	Department of Environmental and Occupational Health Sciences
EPA	Environmental Protection Agency
EPH	Department of Epidemiology and Population Health
EPSCoR	Kentucky Experimental Program to Stimulate Competitive Research
EVPHA	Executive Vice President for Health Affairs
EVPR	Executive Vice President for Research
FIPSE	Fund for the Improvement of Postsecondary Education
GMAT	Graduate Management Admissions Test
GRAs	Graduate Research Assistants
GRC	Grants Resource Center
GRE	Graduate Record Examination
HBCUs	Historically Black Colleges and Universities
HCFA	Health Care Financing Administration
HIPAA	Health Insurance Portability and Accountability Act

HMSS	Department of Health Management and Systems Sciences
House Bill 1	Kentucky Postsecondary Education Improvement Act of 1997
HPBS	Department of Health Promotion and Behavioral Sciences
HPV	Human Papilloma Virus
HRSA	Health Resources and Services Administration
HSC	Health Sciences Center
HSPPO	Human Subjects Protection Program Office
ICOH	International Commission for Occupational Health
ILO	International Labor Organization
Integration	Integrating Learning and Experience in Public Health Course
IOM	Institute of Medicine
IPHR	Institute for Public Health Research
IRB	Institutional Review Board
Issues	Issues in Public Health Course
IT	UofL Information Technology
JCPS	Jefferson County Public Schools
KDPH	Kentucky Department for Public Health
KHA	Kentucky Hospital Association
KHREF	Kentucky Hospital Research & Education Foundation
KIESD	Kentucky Institute for the Environment and Sustainable Development
KLCRB	Kentucky Lung Cancer Research Board
KPHA	Kentucky Public Health Association
KPHLI	Kentucky Public Health Leadership Institute
KSEF	Kentucky Science and Engineering Foundation
KTHN	Kentucky Telehealth Network
KYVU	Kentucky Virtual University
LMPHW	Louisville Metro Public Health and Wellness (formerly Louisville Metro Health Department)
LSAT	Law School Admissions Test
MAPP	Mobilizing for Action through Planning and Partnerships
MCAT	Medical College Admission Test
MDR	Medical Dental Research Building
MEPS	Medical Expenditure Panel Survey
MRG	Multidisciplinary Research Grants program (intramural)
MS/BDS	MS in Biostatistics – Decision Sciences
MS/Epi	MS in Epidemiology
MSc/CIS	MSc in Clinical Investigational Sciences
NAL	Novell Application Launcher
NCI	National Cancer Institute
NCURA	National Council of University Research Administrators
NHLBI	National Heart, Lung and Blood Institute
NIDCD	National Institute on Deafness and Other Communication Disorders
NIDDK	National Institute of Diabetes and Digestive and Kidney Diseases
NIEHS	National Institute of Environmental Health Sciences
NIH	National Institutes of Health
NIMH	National Institute of Mental Health
NINDS	National Institute of Neurological Disorders and Stroke
NINR	National Institute of Nursing Research
NPHW	National Public Health Week
NSA	National Security Administration
NSF	National Science Foundation
PAMS	Personal Asthma Management System
PAR	Position Authorization Request
PAT	Promotion, Appointment and Tenure Committee
PBSI	Performance Based Salary Increase
PCG	Project Completion Grants program (intramural)

PhD/BDS	PhD in Biostatistics – Decision Sciences
PhD/PHS	PhD in Public Health Sciences
PHGR	Public Health Grand Rounds
RIF	Research Infrastructure Fund
RIG	Research Initiation Grants program (intramural)
ROW	Research on Women grants program (intramural)
RWJF	Robert Wood Johnson Foundation
SACS	Southern Association of Colleges and Schools
SEER	Surveillance Epidemiology and End Results Program (NCI)
SPHIS	School of Public Health and Information Sciences
STAR	Strategic Toxic Air Reduction
StCC	Statistical Consulting Center
TOEFL	Test of English as a Foreign Language
TRAIN	Kentucky TrainingFinder Real-time Affiliate Integrated Network
UDHR	Universal Declaration of Human Rights, United Nations
UKRF	University of Kentucky Research Foundation
ULH	University of Louisville Hospital
UNM	University of New Mexico
UofL	University of Louisville
URG	Undergraduate Research Grants program (intramural)
URS	Undergraduate Research Scholar Grants program (intramural)
USPHS	United States Public Health Service
WKU	Western Kentucky University

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

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MISSION, GOALS AND OBJECTIVES

Criterion I.: The school shall have a clearly formulated and publicly stated mission with supporting goals and objectives.

The University of Louisville (UofL) is a state-supported research university located in Kentucky's largest metropolitan area. The School of Public Health and Information Sciences (SPHIS) is one of the most recent additions to the university's academic programs. The school was founded in 2002, but public health education is not new to the university. A previous UofL School of Public Health, formed in 1919, was one of the first schools of public health in the United States.

University Vision Statement

The Commonwealth of Kentucky has a vision for the state and its colleges and universities. This vision, expressed through the Kentucky Postsecondary Education Improvement Act of 1997, or House Bill 1,[1] and energized through the state's Research Challenge Trust Fund, has set UofL on course to become a nationally recognized metropolitan research university by the year 2020.

University Mission Statement

The Board of Trustees has established, and the Commonwealth of Kentucky's Council on Postsecondary Education has approved, the following mission statement for the university:

"The University of Louisville shall be a premier, nationally recognized metropolitan research university with a commitment to the liberal arts and sciences and to the intellectual, cultural, and economic development of our diverse communities and citizens through the pursuit of excellence in five interrelated strategic areas: (1) Educational Experience, (2) Research, Creative, and Scholarly Activity, (3) Accessibility, Diversity, Equity, and Communication, (4) Partnerships and Collaborations, and (5) Institutional Effectiveness of Programs and Services."

The mission statement is also available at http://www.louisville.edu/about/mission.html.

Challenge for Excellence

The university is committed to making the state's vision a reality through the Challenge for Excellence, a ten-year blueprint for the future initiated in 1998. The Challenge is the heart of a strategic plan that already has led to record public and private support, significant growth in nationally recognized research, increased interest in the university from highly qualified students and new economic and community service initiatives benefiting citizens throughout the commonwealth. Additional information on the Challenge is available at http://www.louisville.edu/challenge/.

In order to meet the state-mandated House Bill 1 requirements, the university established an annual scorecard methodology. The university-wide Implementation Scorecard, which is available at http://www.louisville.edu/president/challenge2/excellence-scorecard-20050202.pdf, documents the strategic goals and areas of emphasis for the institution and for each school or college within the institution. In addition, the Office of the University Provost annually establishes scorecard measures for individual academic units in collaboration with the respective dean or unit head. These are fluid documents that may be revised several times during the year. The current School of Public Health and Information Sciences Scorecard is included as Appendix I-1.

In response to the Challenge, an Institute for Public Health Research (IPHR) was created in 1998 to focus efforts on training the next generation of clinical researchers. The mission was strongly supported by a five-year Clinical Research Curriculum (K30) Award from NIH and the inauguration of MSPH and PhD degrees in Epidemiology: Clinical Investigation Sciences and Biostatistics – Decision Sciences.[2] In 2002, SPHIS was officially established and charged with developing professional degree programs to complement its research-oriented master's and doctoral degrees. The school also was given the goal of achieving full accreditation by the Council on Education for Public Health (CEPH).

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[1] The full text of House Bill 1 is available at http://www.lrc.state.ky.us/recarch/97ss/HB1.htm.

[2] These programs have evolved and expanded into the MS/BDS, MS/Epi, MSc/CIS, PhD/BDS and PhD/PHS degree programs. For a complete description of these programs, please see Section V.

Documentation Expected

1. A clear and concise mission statement for the school as a whole.

The SPHIS vision, mission and values statements are consistent with the university's statements, yet also reflect its unique role within the institution, as shown below. The school's vision, mission and value statements were developed with faculty, staff and student input during the 2004-2005 academic year. In part, these statements were formulated in response to the then-recently published Institute of Medicine (IOM) reports on public health. The vision, mission and values statements are made publicly available on the SPHIS website at http://louisville.edu/sphis/, in the administrative offices and in common student areas.

SPHIS Vision Statement

We will be an internationally recognized center of excellence for the creation, sharing and application of knowledge for the public's health.

In achieving our vision:
- We will extend the domain of public health to include all factors in the public's health.
- We will pursue health information sciences as an inseparable aspect of public health.
- We will work for close integration of individual health, health care and public health.

SPHIS Mission Statement

Table I-1: Comparison of University and School Mission Statements

UofL Mission	SPHIS Mission
The University of Louisville shall be a premier, nationally recognized metropolitan research university with a commitment to the liberal arts and sciences and to the intellectual, cultural, and economic development of our diverse communities and citizens through the pursuit of excellence in five interrelated strategic areas: (1) Educational Experience, (2) Research, Creative, and Scholarly Activity, (3) Accessibility, Diversity, Equity, and Communication, (4) Partnerships and Collaborations, and (5) Institutional Effectiveness of Programs and Services.	We advance knowledge for the public's health in the increasingly complex and interconnected world of the 21st century. We accomplish this through activities in the three cornerstone areas for advancing health knowledge: • **Research**. We *create* knowledge by seeking new discoveries and understanding through scientific exploration. We communicate our findings. • **Teaching**. We *share* knowledge with students committed to and prepared for learning in a facilitated environment. Our learners are our students, our faculty and our staff. We commit to preparing our learners for success. • **Service**. We *apply* knowledge through quality services to the communities of which we are a part – the university, Louisville Metro, Kentucky, the United States and their respective environs.

SPHIS Values Statement

In fulfilling our mission:
- We nurture an academic setting that fosters ethics, respect, diversity, cooperation, learning and fun.
- We strive to improve our approach and performance through a program of active feedback and deliberate change.
- We embrace innovative ideas for advancing knowledge.
- We investigate new techniques and technologies for doing research, teaching and service.
- We think globally and act locally.
- We collaborate with any who will join us in working for the public's health.
- We recognize that public health starts with the individual.
- We advocate for the public's health.

2. One or more goal statements for each major function by which the school intends to attain its mission, including instruction, research and service.

To address the mission of advancing knowledge for the public's health in the three cornerstone areas of teaching, research and service, the school will focus on the following goals, which are listed next to corresponding university goals for comparison.

Table I-2 Comparison of University and School Goals

UofL Strategic Goals and Areas of Emphasis	SPHIS Goals
Goal 1: Educational Experience and Student Success – Create a responsive, challenging and supportive environment characterized by high standards, commitment to quality and student success	**Goal 1: Provide educational and academic excellence** through a responsive, challenging and supportive educational environment characterized by high standards, commitment to quality and student success.
Goal 2: Research, Creative and Scholarly Activities – Focus energy and resources to enhance the scholarly agenda and advance to national prominence areas of programmatic strength.	**Goal 2: Build a public health and information science research enterprise** by focusing energy and resources to enhance the scholarly agenda, thereby striving toward national prominence.
Goal 3: Accessibility, Diversity, Equity and Communication – Develop a seamless system of access and intercultural understanding that promotes and supports race and gender diversity and inclusivity.	**Goal 3: Foster a diverse, open and accessible school of public health and information sciences** with an integrated system of access and intercultural understanding that promotes and supports race and gender diversity, inclusivity, equity and open communication.
Goal 4: Partnerships and Collaboration – Develop and integrate interdisciplinary activities associated with teaching, research and service. Support existing partnerships and engage new partners to contribute to the educational, social and economic progress of the region and state.	**Goal 4: Promote collaboration and community/state partnerships** by developing and integrating interdisciplinary activities associated with teaching, research and service. Support existing partnerships and engage new partners to contribute to the educational, social and economic progress of the region and state.
Goal 5: Institutional Effectiveness of Programs and Services – Improve the effectiveness and accountability of programs and services in fulfilling the mission and vision of the university.	**Goal 5: Focus on school effectiveness and service** through systematic quality improvement, assessment, CEPH self-study and accreditation, and a dedication to fulfill the mission and vision of SPHIS.

3. A set of measurable objectives relating to each major function through which the school intends to achieve its goals of instruction, research and service.

As described in greater detail in Section I.4, the SPHIS Scorecard is revised annually by the Office of the University Provost in collaboration with the dean to establish measures for the school. While the scorecard covers a variety of objectives in areas of measurement critical for the success of the school, it is not comprehensive. Therefore, additional objectives have been created to cover those areas that the scorecard does not address. The list of objectives below contains selected Scorecard objectives, which are indicated by "(SC)," and the additional school-derived objectives, which are marked "(SPHIS)." Objectives, outcome measurements, timelines, sources of data and frequency of data collection related to the five goals are delineated in Section X.A.2.

Goal 1: Provide educational and academic excellence

Objective 1.1 Expand faculty and staff support for program growth as measured by:

1.1.a Increasing the number of full-time faculty to a goal of 45 by 2009. (SPHIS)

1.1.b Maintaining the number of school and department support staff at a ratio of no less than one

staff per four FTE faculty members (1:4 ratio does not include professional, research, or technical staff). (SPHIS)

Objective 1.2 Develop quality curricula/programs as measured by:

1.2.a Reviewing educational competencies for MPH, MS, MSc and PhD for appropriateness and measurability annually. (SPHIS)
1.2.b Developing and implementing a collaborative academic program in bioinformatics with the Schools of Medicine and Engineering by Fall 2007. (SPHIS)

Objective 1.3 Improve student success and satisfaction as measured by:

1.3.a Refining the quality improvement process through school-wide forums, held at least annually, and yearly exit interviews and/or surveys of our graduates. (SPHIS)
1.3.b Increasing the number of doctoral degrees awarded per year to 7 in 2008. (SC)
1.3.c Improving the mean response regarding overall impression of the school on a survey of continuing and graduating students. (SC)
1.3.d Improving the mean response regarding overall satisfaction with the university on the survey of all students. (SC)
1.3.e Achieving an employment rate within the field of study of at least 80% among MPH students, within one year of graduation, as tracked by the survey. (SPHIS)

Goal 2: Build a public health and information science research enterprise

Objective 2.1 Create a research infrastructure utilizing extramural funding as measured by:

2.1.a Increasing the number of grants and contracts awarded to 20 in 2008. (SC)
2.1.b Increasing the total dollar amounts of grants and contracts to $5,000,000 in 2008. (SC)
2.1.c Increasing the number of faculty on sponsored research to 22 in 2008. (SC)
2.1.d Increasing the number of students on funded research to 3 in 2008. (SC)

Objective 2.2 Develop internal support for SPHIS research activities as measured by:

2.2.a Adding one new faculty research position per year (2004-2008) from university administration. (SPHIS)
2.2.b Providing departmental funding for travel to national meetings to present papers and further research. (SPHIS)
2.2.c Increasing the total number of publications in refereed journals to 20 in 2008. (SC)
2.2.d Increasing the number of refereed presentations and/or papers sponsored by national or international organizations to 20 in 2008. (SC)
2.2.e Holding monthly research incubation meetings to encourage faculty, staff and student involvement in collaborative research activities. (SPHIS)

Goal 3: Be a diverse, open and accessible school of public health and information sciences

Objective 3.1 Recruit and retain African American and female faculty and students as measured by:

3.1.a Targeting Historically Black Colleges and Universities for minority student recruitment by establishing a list of contacts, building relationships, two mailings a year for brochures, and one campus visit per year. (SPHIS)
3.1.b Increasing the number of full-time women faculty to 12 by 2008. (SC)
3.1.c Increasing the number of full-time African American faculty to 3 by 2008. (SC)
3.1.d Achieving the number of African American executive, administrative, or managerial employees of 1 by 2008. (SC)
3.1.e Achieving the number of African American endowed chairs and professors of 1 by 2008. (SC)
3.1.f Achieving the number of women endowed chairs and professors of 1 by 2008. (SC)
3.1.g Achieving the number of African American students receiving doctoral degrees of 2 by 2008. (SC)
3.1.h Achieving the number of women receiving doctoral degrees of 3 by 2008. (SC)
3.1.i Increasing the number of African American students receiving master's degrees to 15 by 2008. (SC)

Objective 3.2 Support diversity and inclusivity initiatives as measured by:

3.2.a Completing and initiating implementation of a diversity plan in concert with university

guidelines by October 2005. (SPHIS)

3.2.b Holding quarterly, school-wide luncheons of faculty and staff to promote open communication. (SPHIS)

3.2.c Inviting all students to a plenary school meeting session at least once per year. (SPHIS)

Goal 4: Promote collaboration and community/state partnerships

Objective 4.1 Generate input from community partners as measured by:

4.1 Establishing and maintaining a Community Advisory Board for SPHIS by December 2006. (SPHIS)

Objective 4.2 Establish outreach activities to involve SPHIS with a variety of stakeholders as measured by:

4.2.a Continuing leadership through monthly meetings of the Environmental Health Committee of the Partnership for a Green City, involving UofL, Louisville Metro Government and Jefferson County Public Schools. (SPHIS)

4.2.b Developing an electronic clearinghouse for service opportunities with community and government agencies by June 2007. (SPHIS)

4.2.c Increasing the number of community partnerships that support local metropolitan area government agencies, metropolitan area businesses, community-based organizations and health care organizations to 25 in 2008. (SPHIS)

4.2.d Increasing the number of partnerships with state, regional and federal agencies to 10 in 2008. (SPHIS)

4.2.e Increasing the number of collaborative programs with K-12 educational institutions to 2 in 2008. (SC)

Goal 5: Focus on programmatic effectiveness and service

Objective 5 Monitor quality improvement processes and assessment as measured by:

5.a Receiving CEPH accreditation by Fall 2007. (SPHIS)

5.b Improving the mean response regarding overall impression of the school on the comprehensive survey of first-year graduates and alumni, faculty and staff and employers. (SC)

5.c Refining the quality improvement process through school-wide forums and an annual strategic planning retreat. (SPHIS)

4. A description of the manner in which mission, goals and objectives are developed, monitored and periodically revised and the manner in which they are made available to the public.

The development of our mission, goals and objectives was initiated through a consensus process involving the full range of SPHIS faculty and staff. A committee was formed in 2004 to begin these discussions and present them to the Dean's Executive Committee, the Accreditation Steering Committee (ASC) and to the entire faculty and staff during monthly plenary meetings. Ideas from the entire group were carefully considered and refined during consecutive meetings of the groups. The concepts were further reviewed in detail during a day-long off-campus retreat in March 2005. Finally, they were enhanced and modified for clarity by the dean and associate deans before being released in final form.

In the formulation of final objectives, it was decided that data from the SPHIS Scorecard would determine objectives in relevant areas of this document instead of creating potentially duplicative or conflicting measures. These measures represent agreements between the Office of the University Provost and the Office of the Dean regarding strategic objectives of the school.

The school has elected to review and monitor its goals and objectives in multiple ways. The chairs of each department, along with the entire faculty, staff and student complement, will examine the goals and objectives annually during the strategic planning process to assure adequate input from all constituencies. The first comprehensive strategic planning retreat occurred on January 5, 2007.[3] Program

[3] Materials from this retreat, including the agenda, meeting minutes and resulting action plan will be available in the on-site resource file.

revisions were made based on the recommendations of constituent groups, ensuring adherence with the school's mission and goals.

The review and recommendations were also discussed with the Community Advisory Board. Resulting changes will be disseminated through the board's established links with business, government and community groups, as well as through postings on SPHIS bulletin boards and its website, available at http://louisville.edu/sphis/.

5. Assessment of the extent to which this criterion is met.

This criterion is met. The school has a well defined vision and mission, with goals and objectives that are specific, measurable and trackable using data from the SPHIS Scorecard, supplemented by other sources. The full range of programs in education, service, research and practice are linked directly to the vision and mission through these goals and objectives. Evaluation of the success in realizing these objectives and their modification to assure alignment with the university's mission will continue to be an integral part of the school's periodic review process.

ORGANIZATIONAL SETTING – EXTERNAL

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

Documentation Expected

1. A brief description of the institution in which the school is located, along with the names of accrediting bodies (other than CEPH) to which the institution responds.

The University of Louisville is a state-supported urban university in Kentucky's largest metropolitan area. The 274-acre Belknap Campus, three miles south of downtown Louisville in Jefferson County, is the university's main campus, and houses seven of the university's twelve colleges and schools. The Health Sciences Center (HSC) is situated in downtown Louisville's medical complex and houses the university's health-related programs and the University of Louisville Hospital (ULH). The 243-acre Shelby Campus, located in eastern Jefferson County, includes the National Crime Prevention Institute. In recent years, the university has offered expanded campus courses at both off-site and international locations.

The university is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS) to award associate, bachelor, master, specialist, doctoral, and first-professional degrees (DMD, JD, MD). The university's colleges and schools and professional degree programs are accredited (or in the process thereof) by their appropriate academic governing bodies. A comprehensive listing of all the university's accreditations is contained in Appendix II-1.

History[1]

The University of Louisville traces its roots to April 3, 1798, when eight men declared their intention to establish the Jefferson Seminary in Louisville and called upon their fellow citizens to join them in pledging funds for land, buildings and teachers. It had been chartered with other academies in the new state a few weeks earlier by the Kentucky Legislature and became the origins of the first municipally operated American college or university west of the Allegheny Mountains.

Jefferson Seminary opened in the fall of 1813, but was closed in 1829. In 1844, Louisville College, chartered as the Louisville Collegiate Institute in 1833 and re-named in 1840, inherited the portion of the estate of Jefferson Seminary designated for the use of higher education in Louisville.

The Louisville Medical Institute, predecessor to the School of Medicine, admitted its first class in 1837 and is the longest continuously operating academic unit within the institution.

In 1846, the Kentucky Legislature created the University of Louisville proper, combining the Medical Institute and the Louisville College. The charter also provided for the creation of a new Law Department, which grew into today's Brandeis School of Law. Louisville College became the Academic Department of the new University of Louisville. Although governed by a common board of trustees, each division retained financial autonomy. The Academic Department is the direct predecessor of the modern university's largest unit, the College of Arts and Sciences.

During the 19th century, most of the professors in the medical and law schools were local physicians and attorneys who considered teaching a part-time vocation. By the end of the century, however, the university began to respond to educational reformers advocating full-time faculty and well enforced national education standards. This trend contributed to the 1907 revival of the liberal arts college that had been all but forgotten during the second half of the century. The medical school merged with four other medical schools in 1908 and adopted its present name as University of Louisville School of Medicine.

Expanded academic programs and the adherence to higher educational standards led to the appointment of full time administrators early in the 20th century and, in 1910, the City of Louisville and later Jefferson

[1] For additional historical information, please see "A Brief History of the University of Louisville," available from the University Archives and Records Center at http://library.louisville.edu/uarc/briefhis.htm. For additional information on the history of the School of Medicine and the HSC, please see "Our History: A Tradition of Excellence," available at http://www.louisville.edu/medschool/history.htm.

County began making regular appropriations to the university. For the next sixty years, the university operated as a private, municipally supported institution.

The Graduate School was added in 1907, the School of Dentistry in 1918 and the School of Public Health in 1919. The School of Public Health discontinued operations from 1923 until it was reconstituted in 2002 as the current School of Public Health and Information Sciences. The Speed Scientific School was added in 1925, Louisville Municipal College for Negroes in 1931, the School of Music in 1932 and the Kent School of Social Work in 1936. In 1950, the university began desegregating the university at all levels, and, in 1951, the Louisville Municipal College was closed and its plant and some faculty were absorbed into other units. In 1953, the School of Business was created.

Municipal funding became inadequate for the continuing growth of the university, and, in 1965, a Governor's Task Force reviewed the available options. In July 1970, the University of Louisville officially entered the state university system of the Commonwealth of Kentucky, thus beginning a new era of service to the community, the state and the nation.

Throughout the late 1960s and the 1970s, the university continued to add new academic schools, including the School of Education in 1968, the School of Justice Administration in 1969, the School of Nursing in 1979 and the College of Urban and Public Affairs in 1983. Each of the university's schools is defined as an academic unit for administrative purposes.

Also during this period, the university began an ambitious development of the Health Sciences Center, beginning with the 1970 completion of the Quadrangle, consisting of the Medical School Tower, the School of Dentistry building, the Instructional Building and the Library and Commons Building. In 1981, the James Graham Brown Cancer Center was built with private money and donated to the University.

The 1980s saw the construction by the state of a new tertiary care medical center composed of the Ambulatory Care Building for faculty and clinics of the School of Medicine and the University of Louisville Hospital. These medical facilities and the Brown Cancer Center are managed and operated by University Medical Center, a consortium of the university and two regional, private, nonprofit hospital systems, Jewish and Norton Health Care Systems.

Subsequent development of the Health Sciences Center has included the construction of the Kosair Pediatric Center for the pediatric faculty and clinics, two new Biomedical Research Buildings and the renovation of existing buildings to house the Health Sciences Center and School of Medicine Administration, the School of Nursing and the new School of Public Health and Information Sciences.

In order to achieve its mandate of becoming a preeminent metropolitan research university, an Institute for Public Health Research (IPHR) was established in 1998. This research mission was expanded to include development of the professional public health degree when the Board of Trustees established the School of Public Health and Information Sciences (SPHIS) as the successor to the IPHR in 2002. In constituting SPHIS, the university accorded it equal status and autonomy relative to the other professional schools on the Health Sciences Campus, namely, the Schools of Medicine, Dentistry and Nursing.

Facts and Figures

The following information was taken from "Just the Facts 2006-2007," available at http://institutionalresearch.louisville.edu/files/ir/jtf/jtf200607.pdf, which is the most current data published by the university's Office of Institutional Research and Planning.

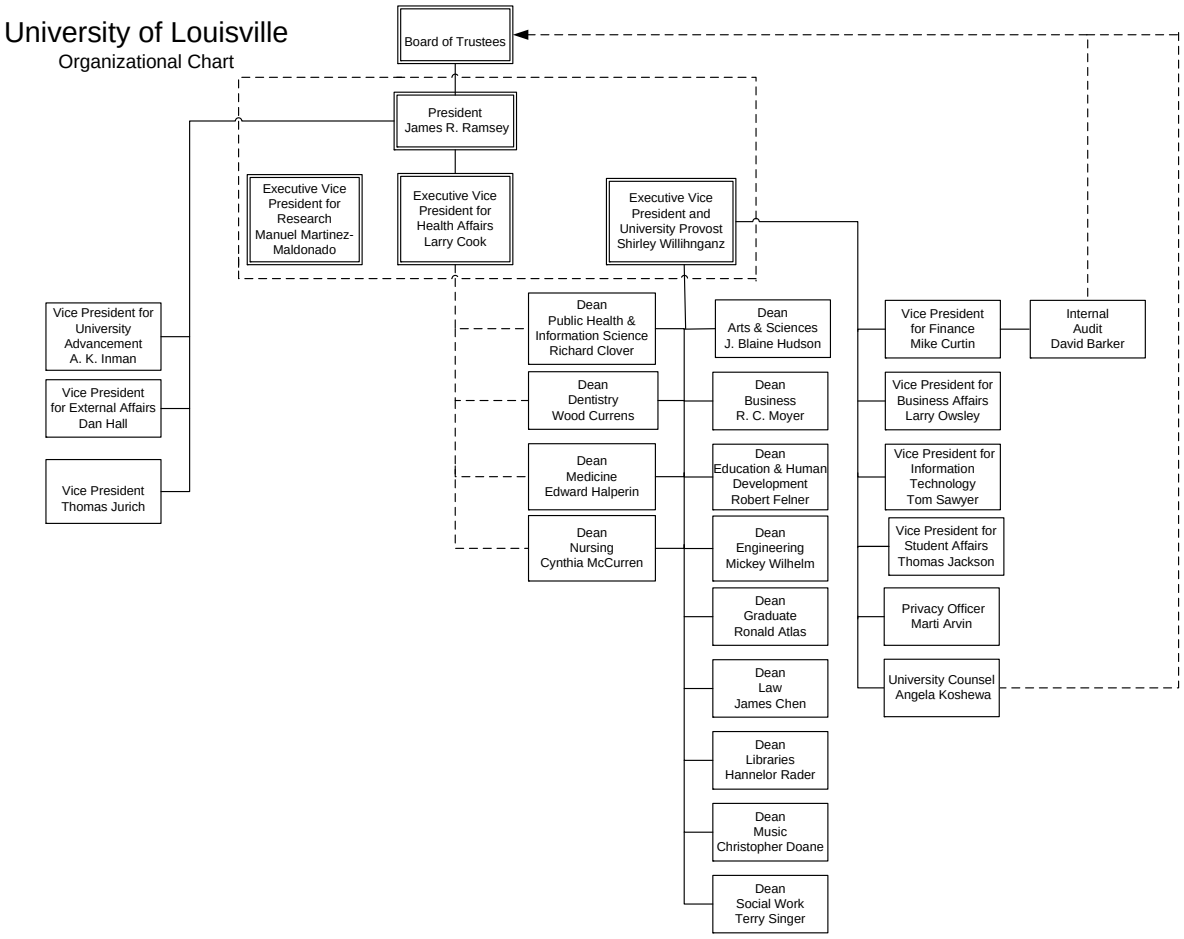
- Enrollment in Fall 2006 was 21,841.
- Approximately 72% of the student population was enrolled full time.
- Jefferson County residents represented approximately 49% of all students, and Kentucky residents represented approximately 80%.
- Approximately 20% of students were from out of state, while approximately five percent were nonresident aliens.
- Approximately 53% of students were women.
- 4,289 degrees were conferred in 2005-06.
- UofL had 2,074 faculty. Approximately 72% were full-time.
- UofL employed 3,875 staff members. Approximately 86% of the staff were full-time.
- The university's total Fiscal Year 2007 budget was $769.3 million.

- UofL received 1,024 grant and contract awards, totaling approximately $178 million in Fiscal Year 2006.
- The university library system contained approximately 2.09 million volumes and 26,800 serials.

2. An organizational chart of the university indicating the school's relationship to the other components of the institution.

As shown on the following organization diagrams, SPHIS has a level of independence and status equal to the other schools of the HSC: Medicine, Dentistry and Nursing.

Figure II-1: UofL Organizational Chart



3. A description of the school's relationship to the university's system of governance, to amplify the diagrammatic representation, including budgeting and resource allocation; personnel recruitment, selection and advancement; and establishment of academic standards and policies.

The *Redbook*, available at http://www.louisville.edu/provost/redbook/, is maintained by the Office of the University Provost as the basic governance document of the university. The *Redbook* governs:

- organization and operation of the Board of Trustees and the Board of Overseers
- organization and operation of the university's administration
- organization and governance of the university's academic programs
- the university's faculty personnel policies
- the university's staff organization and personnel policies
- administration of student governance and student affairs
- revision of the *Redbook*.

Chapter Three of the *Redbook* articulates the organization and governance of the academic programs of the university. Article 3.1 describes the organization of the university's academic units and requirements for establishing a new academic unit, from initial recommendation to a final approval by the Board of Trustees. SPHIS has met these requirements and has been designated an academic unit of the university. The *Redbook* has recently been revised to reflect this and other changes at the university.

Article 3.2 of the *Redbook* establishes that academic units will be headed by a dean, and describes the policies and procedures for their appointment and establishes their duties. The dean of the school has been appointed and is exercising responsibilities in accordance with Article 3.2.

In its relationship to the university's system of governance, the school's policies are equivalent in independence and status to those of its other health professional schools, including: budgeting and resource allocation; personnel recruitment, selection, and advancement; and rights to establish academic standards and policies.

Budgeting and resource allocation

The UofL Board of Trustees approves a proposed operating budget each fiscal year for SPHIS, as it does for each of the established academic units of the university. The budget includes a portion of the state's General Fund appropriated to the university. This baseline allocation of state funds may be augmented by Continual Annual Requirement (CAR) funds identified by the university's Central Administration. CAR funds are general funds, available annually and reflective of incremental increase or decrease as determined by the state, which may be used to support salary, fringe benefits, travel, supplies, student expenses, etc.

The school has a budgeting process designed to assure that chairs have adequate program budgets to meet their needs with the flexibility to retain salary savings to offset growth within the department. The Dean of SPHIS retains sole authority to oversee distribution of funds to the school's departments. The department chairs are responsible for the financial management of the resources allocated to departments by the Office of the Dean. Expenditures of operating funds are subject to all university policies and regulations. Chairs follow internal procedures for merit increase determination and make recommendations to the dean.

Personnel recruitment, selection, and advancement

Article 3.3 of the *Redbook* establishes the policies and procedures that govern the faculty of the academic units, including their appointment and their duties and responsibilities. In accordance with Article 3.3, all SPHIS faculty have been appointed and are carrying out their responsibilities.

The SPHIS adheres to the "Policy for Promotion, Appointment, and Tenure and for Periodic Review," which was approved by the University Board of Trustees on September 13, 2002. The Policy, which will be included in the on-site resource file, provides for initiating the process of the creation of faculty positions by department chairs with the approval of the dean; the constitution, responsibilities, and procedures of the search committees; the composition of the Promotion, Appointment and Tenure (PAT) Committee and its responsibilities and procedures for faculty appointments, promotions, and retention; and the required approval processes. See Section III.1.e for details.

Establishment of academic standards and policies

The Graduate School (http://graduate.louisville.edu/) was formally established in 1907 and is a member of the Council of Graduate Schools. Since its inception, the Graduate School has been responsible for the academic policies and procedures of graduate education at UofL.

The Graduate Council of the Graduate School is responsible for establishing policies relating to graduate education and for maintaining a standard of excellence for graduate work among all schools within the university. All legislative functions of the Graduate School are vested in the Graduate Council, which consists of elected representatives of the graduate faculty. The Dean of the Graduate School serves as the chair of this body. The dean and dean's staff are responsible for administering the rules and regulations of the Graduate School and for safeguarding the standards and policies of the school as outlined by the graduate faculty and the Graduate Council. In addition, all graduate level courses must be

submitted to the Graduate School Curriculum Committee for review and approval. Once approved by the committee, they then go to the Graduate Council for approval.

There are two levels of graduate faculty membership:

- A member of the graduate faculty is authorized to teach graduate courses, serve on graduate student advisory committees, serve on thesis and dissertation committees and co-chair master's theses.
- A senior member of the graduate faculty is authorized to teach graduate courses, serve on graduate advisory committees, serve on thesis and dissertation committees and serve as thesis and dissertation advisors and chairs (mentors).

Students who wish to enroll in a graduate program at UofL must apply to the Graduate School for admission. If students have a grievance (pertaining to grades, registration, etc.) during the course of their career, they are encouraged to meet with the Graduate School Student Grievance Officer. The officer will assist the student with achieving an informal resolution to the complaint. Upon completion of a program, degrees are awarded through the Graduate School.

The Graduate Catalog is available at http://graduate.louisville.edu/pubs/graduate-catalog/catalog_2005_complete.pdf.

SPHIS Participation in University Governance

The school participates in the governance of the university on an equal basis with other academic units of the university. SPHIS employees participate in the development of academic standards and policies through service on the Faculty and Staff Senates, Graduate Council and the Council of Academic Officers, and are eligible for election to the full range of university-wide standing and ad hoc committees.

4. Assessment of the extent to which this criterion is met.

This criterion is met. The school has an equal status among the professional schools in the health sciences at the university, including the Schools of Medicine, Dentistry and Nursing, and an equivalent degree of autonomy in the budgeting and resource allocation process. Its personnel recruitment and advancement as well as its standards and policies are fully in line with university requirements and guidelines.

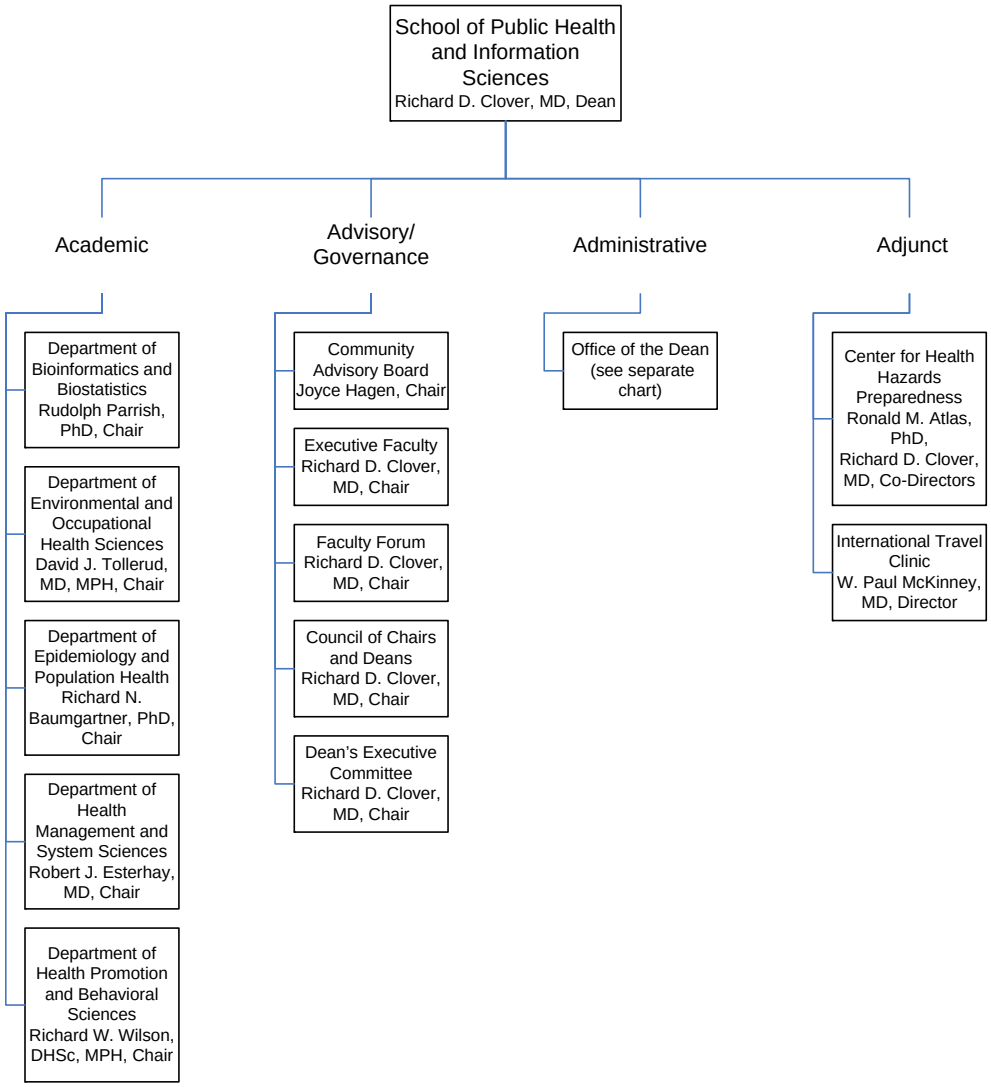
ORGANIZATIONAL SETTING – INTERNAL

Criterion II.B.: The school shall provide an organizational setting conducive to teaching and learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration and shall foster the development of professional public health values, concepts and ethics, as defined by the school.

Documentation Expected

1. **An organizational chart of the school, indicating relationships of its component departments, divisions, or other units, with the administration of the school and its components.**
2. **Description of the relationships indicated in the diagrammatic representation.**

Figure II-2: Organizational Chart of SPHIS



The school is organized in four major areas of function: academic, advisory/governance, administrative, and adjunct.

The academic component comprises the five departments, which are responsible for teaching, research, and service and for the appointment and management of faculty.

The advisory/governance component includes groups that either are advisory or have jurisdiction in specific areas.

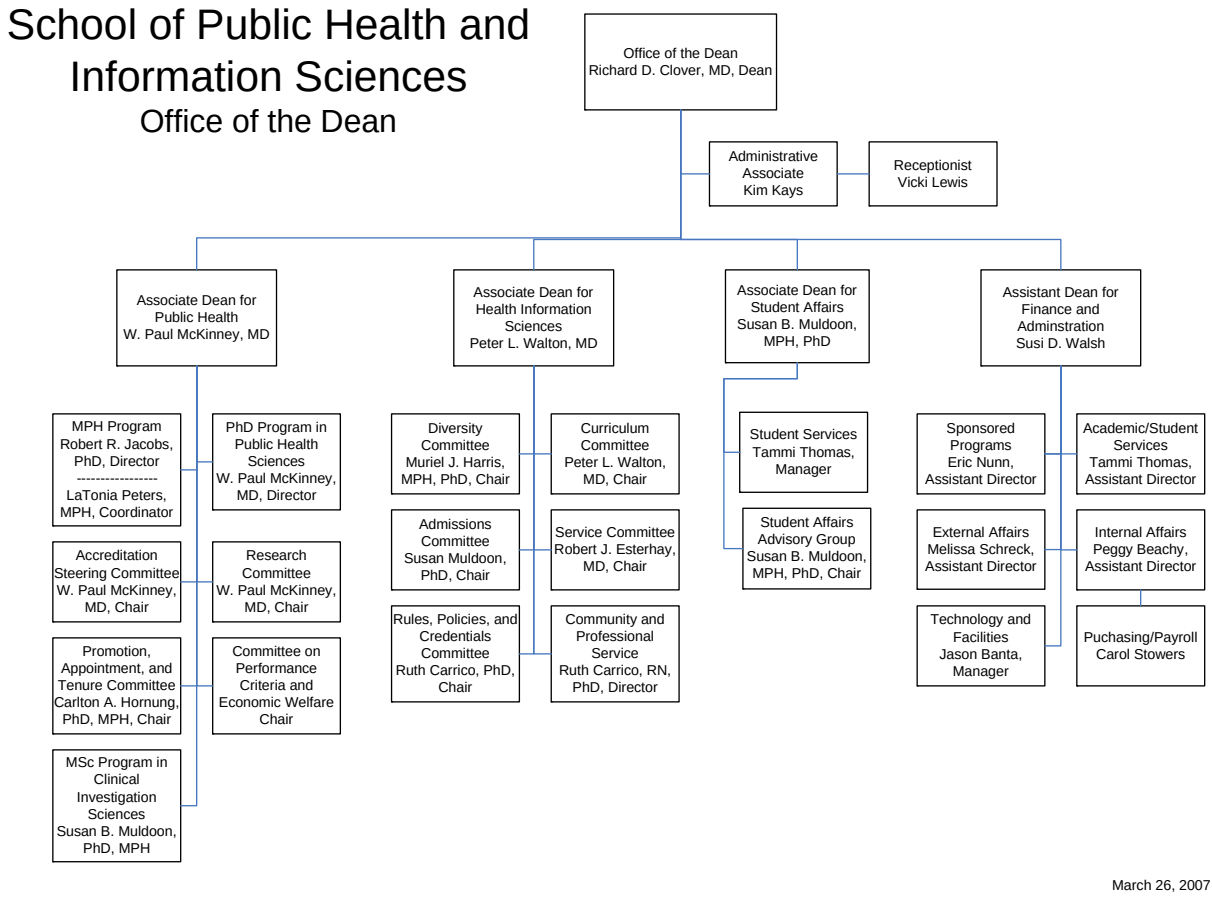
- The Community Advisory Board is advisory to the dean and the school on matters related to the cooperation, collaboration and opportunities between the greater Louisville community and the school. The board consists of members drawn from professional, business, local and state government, and community agencies that have an impact on the delivery and receipt of public health services in the greater Louisville area. The board was constituted in September 2006 and held its first meeting on November 28, 2006.
- The Executive Faculty has general legislative powers over all matters pertaining to its own personnel policies, criteria and procedures; to amendment of the school's Bylaws and Rules; and to the admission requirements, curricula, instruction, examinations and recommendations to the Board of Trustees through the dean for granting of degrees within the school.
- The Faculty Forum does the work of the Executive Faculty when the latter is not meeting and meets monthly with the dean as chair.
- The Council of Chairs and Deans is advisory to the dean in all matters relating to the administration of the school. The Council provides for the development, evaluation, review and communication of matters of broad concern to the school and may provide advice on any topic so requested by the dean.
- The Dean's Executive Committee is advisory to the dean for day-to-day operational matters in the school.

Listings of the membership and terms of the Community Advisory Board, Executive Faculty, Faculty Forum, Council of Chairs and Deans and Dean's Executive Committee are available as Appendix II-2. For more information regarding the Executive Faculty, Faculty Forum, Council of Chairs and Deans and Dean's Executive Committee, please see the introduction of Section III.

The administrative component is the Office of the Dean and is discussed in detail below.

The adjunct component is composed of the organizations within the school that are directed primarily outside the school and university and include the Center for Health Hazards Preparedness (described in more detail in Section VII.1) and the International Travel Clinic. The latter provides immunization services for adults, especially those traveling to foreign countries.

Figure II-3: Organizational Chart of SPHIS Dean's Office



The school's three associate deans and one assistant dean perform duties often done by a larger number of administrators. Dr. McKinney, Associate Dean for Public Health, is responsible for the MPH program, research, faculty development, faculty affairs and accreditation. Dr. Walton, Associate Dean for Health Information Sciences, is responsible for curriculum, admissions, service, and policies and procedures. Dr. Muldoon, Associate Dean for Student Affairs, is responsible for supervision of Student Services, student advocacy, coordination of student recruitment activities, professional and career counseling, oversight of the school's Student Association, and organization and execution of the school's commencement exercises. Ms. Walsh, Assistant Dean for Finance and Administration, acts as an advisor to the dean, chairs and senior departmental staff regarding fiscal and personnel issues, works with the four assistant directors and serves on appropriate SPHIS and university committees.

Other administrative support personnel include:

- Assistant Director of Academic and Student Affairs, whose areas of responsibility include: student services, recruitment and placement issues, and admissions;
- Assistant Director of External Affairs, whose areas of responsibility include: policy and standards pertaining to communication and marketing, development and alumni services, and community-based partnerships; public health services; continuing education programs; and the Center for Health Hazards Preparedness;
- Assistant Director of Internal Affairs, whose areas of responsibility include: fiscal and human resource issues, student financial aid oversight, and facilities and information technology matters;
- Assistant Director of Sponsored Programs, whose areas of responsibility include: pre- and post-award for grants and contracts, compliance issues, accreditation, and institutional requirement requests;
- Administrative Associate to the Dean, whose duties include processing faculty recruitment, promotion, and tenure actions;

- Program Assistant, whose duties include processing all purchasing and payroll for the school;
- Receptionist, whose duties also include staff support to the associate deans;
- Technology and Facilities Manager, who oversees information and other technologies in SPHIS and handles day-to-day issues with SPHIS facilities.

3. Description of the manner in which interdisciplinary coordination, cooperation and collaboration are supported.

Interdisciplinary coordination, cooperation, and collaboration are accomplished through both formal and informal processes.

Four representative bodies in the school include all department chairs as members and serve as forums for interdisciplinary coordination.

- The Dean's Executive Committee, which also includes the associate deans and senior administrative staff, meets monthly to discuss issues of importance to the school. These meetings frequently include discussions about optimal coordination and alignment of faculty and departmental activities in the areas of research, teaching, and service.
- The Curriculum Committee, which includes staff involved in curriculum development and student affairs, meets at least monthly and assures coordination of departmental course development and curriculum offerings. The committee facilitates cooperation and collaboration between departments on interdisciplinary elements of the curriculum, such as the *Issues in Public Health* course and the MPH practicum experience.
- The Research Committee meets monthly to discuss collaborative efforts as well as faculty and program development. Each of the departments also has more than one area of expertise represented, and regular departmental faculty and staff meetings include discussions of coordination and collaboration. Faculty meetings also include discussions about potential collaborations across departments and with groups outside of the school.
- The SPHIS Council of Deans and Chairs consists of the five department chairs, the associate deans, the dean, and two student representatives. Additionally, optional members may include two general faculty and two executive faculty as appointed by the dean. Currently, the Director of Louisville Metro Public Health and Wellness serves in one of these appointed positions. The Council meets monthly to discuss issues pertinent to the research, educational and service goals of SPHIS and seeks the collegial resolution of potential problems as they emerge.

Coordination, cooperation and collaboration also are supported through activities of both of the following:

- Research Incubation Meetings, which are monthly gatherings of faculty, staff and students from SPHIS and throughout the university designed to encourage collaboration on new research projects as they emerge. Meeting times are scheduled to encourage participation of students and faculty from both the Belknap Campus and the Health Sciences Center.
- Quarterly meetings of all faculty and staff of the school, which are working luncheons that seek to provide current information to both groups on activities involving SPHIS. The meetings are one of many approaches to fostering cooperation within the school.

Informally, fluid working groups are continually formed around topics of mutual interest, particularly research areas that may lead to grant submissions. Some of these groups will meet over a period of months in preparation for a grant submission, while others may be long-lived discussion groups not necessarily focused on specific proposal development (e.g. health informatics).

Finally, each department facilitates interdisciplinary collaboration in its own way. All department chairs encourage research collaboration by their faculty with investigators outside the department, both within and outside SPHIS. Some departments encourage interdisciplinary collaboration through financial support and by including it in the faculty evaluation process. The Department of Bioinformatics and Biostatistics (BB) sponsors a Statistical Consulting Center (StCC) that not only provides statistical consulting but encourages interdisciplinary collaboration between departmental faculty and other investigators. The StCC continues to expand in response to the development of research grant proposals and analysis of data in ongoing research projects. A full range of options for consultation, including support from masters or doctoral level statisticians, is available for research team leaders. Additional information regarding the StCC is available in Section VII.1.

4. Definition of the professional public health values, concepts and ethics to which the school is committed and a description of how these are operationalized.

The school is committed to continually enhancing the health of the population it serves. The fundamental principles to which it is dedicated are:

- Social justice and human rights - The school endorses the World Medical Association's Declaration of Helsinki and the Belmont Report as the primary documents governing its activities involving the participation of human subjects in research. We recognize the salient importance of autonomy, beneficence, justice and non-maleficence in this domain of inquiry. We promote and require education regarding all federal guidelines governing human subjects and protected health information. We also recognize the importance of promoting racial and ethnic diversity among our faculty, staff and students. We are committed to graduating students who are culturally competent to deal with the increasingly diverse population we serve.
- Holistic approach to public health - The school recognizes health not just as the absence of disease but as the condition in which all persons can achieve their highest human potential.
- Discovery and transmission of public health knowledge - The school envisions its activities involving research and education as its fiduciary responsibility and, in the noblest sense, a solemn commitment to serving the larger community with the highest degree of excellence. We seek to create an environment conducive to life-long learning on the part of all faculty, staff and students.
- Collegiality among all personnel - We seek to foster camaraderie and collaborative relationships among all faculty and staff and to engender mutual respect among all persons affiliated with the school. In this context, honesty, integrity and fairness toward all are continually promoted.
- Promotion of information sciences as a tool of public health - We will pursue the use of innovations in information technology and knowledge exchange to enhance the health of populations.

These values are not simply our beliefs but are operationalized in every aspect of how we act. Our values are posted in key locations as a constant reminder of their importance. They permeate the statements of our mission, goals and objectives. As key elements therein, they establish a benchmark by which we will review and assess all of our operations as outlined in Sections I and X.

5. Identification of written policies that are illustrative of the school's commitment to fair and ethical dealings.

The university is committed to respecting all individuals and, therefore, has taken a strong stance with regard to ethics, fairness and diversity. This commitment includes specific policies prohibiting the discrimination or harassment of any individual due to race, color, national or ethnic origin, religion, gender (whether or not sexual in nature), age, disability, veteran status or sexual orientation. This commitment likewise requires that ethical conduct be demanded of all employees and students of the university. SPHIS subscribes fully to these policies on fair and ethical dealings.

The following administrative policies and procedures exist within the Human Resources department of the university to address issues related to ethics, fairness and diversity: EEO/Affirmative Action; Sexual Harassment; Conflict of Interest; Intellectual Property; Discriminatory Harassment; Ethical Considerations; Recruitment and Selection; Promotions; and Unlawful Discrimination. Even the university's purchasing department has expectations of ethics and diversity, with policies related to Ethics in Purchasing and Small, Minority and Women-Owned Business.

The school catalog documents policies regarding expectations and protections for students, including: Academic Grievance Procedure; ADA Policy; Affirmative Action/Employee Relations; Code of Student Rights and Responsibilities; Disability Resource Center; Guidelines for Respect for Intellectual Property Rights; Guidelines for Students with Disabilities; Hazing and Initiation Activities Policy; Use of Intellectual Property; Sexual Harassment Policy; and Veterans Benefits. The university also offers its students and employees a variety of resources in support of its commitment to fairness and diversity, including: Multicultural Academic Enrichment Programs; a Disability Resource Center; a Vice Provost for Diversity and Equal Opportunity; a Bias, Hate and Intolerance Hotline; the Interfaith Center; the International Center; Multi-Ethnic and Cross Cultural Programs; Affirmative Action Campus Life Office; the Black Faculty & Staff Association; Center for Lesbian, Gay, Bisexual and Transgender Services; and the Women's Center.

Of critical importance to demonstrating ethics, fairness and diversity is the mechanism by which the university appoints and promotes faculty, hires and evaluates staff, accepts students and handles grievances. In each of these situations, the processes used for advertising, recruitment, selection, denial, and review are guided by strict university policies and by the university's overall commitment to equal opportunity and fairness in hiring, promotion and education. The processes are fully documented and reviewable to insure that diversity and integrity prevail.

Additionally, the university's two Institutional Review Boards (IRBs) play an important role in ensuring that research ethics are adhered to and that the rights of subjects, particularly those who are vulnerable or represent a minority population, are protected. The IRBs ensure that subjects are appropriately represented in the university's research and that their rights are ensured through approved protocols and standards for research behavior. The Human Subjects Protection Program Office (HSPPO), which serves as the administrative office for both IRBs, was recently accredited by the Association for the Accreditation of Human Research Protection Programs (AAHRPP). By meeting the 111 accreditation criteria of the AAHRPP, HSPPO has demonstrated the university's commitment to operate its human research program under the highest ethical standards. In addition, the university has developed a mandatory training program in human subjects protection, as well as an additional training program related to helping researchers understand the Health Insurance Portability and Accountability Act (HIPAA), the ethical conduct of research, and the importance of protecting patient data. The university also requires annual completion of conflict of interest statements, financial disclosures and other compliance forms from anyone engaged in funded research projects.

Finally, the school has adopted the United Nations Universal Declaration of Human Rights, available at http://www.un.org/Overview/rights.html, as a guiding principle of faculty, staff, and student behavior. This document has stood as an international standard for human conduct for more than 50 years. It is posted prominently within the school as a reminder of its importance in all activities of SPHIS.

The policies, procedures, and resources mentioned above can all be located on the web, with the relevant URLs provided in Appendix II-3.

6. Assessment of the extent to which this criterion is met.

This criterion is met. The school facilitates interdisciplinary coordination, cooperation and collaboration to the greatest possible extent. The school is fully committed to the highest standards of professional behavior and ethics and has developed policies to demonstrate its commitment to these values.

GOVERNANCE

Criterion III: The school administration and faculty shall have clearly defined rights and responsibilities concerning school governance and academic policies. Where appropriate, students shall have participatory roles in school governance.

Expected Documentation

1. Description of the school's administrative, governance and committee structure and processes:

The ultimate authority and final responsibility for governance of SPHIS reside with the dean. The dean receives input from the Executive Committee, the Council of Chairs and Deans and the Executive Faculty. The Executive Committee is composed of the dean, the associate deans, and the department chairs; the Council comprises this group plus student representatives and ad hoc faculty members selected on a rotating basis. Both of these bodies act on agendas developed to address new and ongoing business matters brought forward from their membership, their departments and upon items submitted from the school's various committees or the dean.

The Executive Faculty includes the full-time faculty with primary appointments in the school together with proportional representation of the non-executive general faculty elected by departmental faculty. The non-executive general faculty includes those individuals who maintain part-time, emeritus, gratis, associate, adjunct or joint appointments and who have not been elected by departmental faculty to the Executive Faculty. The jurisdiction of the Executive Faculty is specified in Article III of the SPHIS Bylaws and Rules, which are included in the on-site resource file. The Executive Faculty meets once per semester.

The Faculty Forum, chaired by the dean, consists of one Executive Faculty member from each department who is not a voting member of the Council of Chairs and Deans, a representative from the Council, and two student representatives. The Faculty Forum, which is charged with doing the ongoing business of the Executive Faculty (Article IV, Bylaws and Rules), meets once per month and is chaired by the dean.

a. general school policy development;

The Redbook (http://www.louisville.edu/provost/redbook/) and the SPHIS Bylaws and Rules, originally approved by the Board of Trustees on September 13, 2002, are the primary references concerning governance. The Bylaws and Rules are currently undergoing revision to assure internal consistency – a process that will not be completed until Spring 2007 due to a freeze in revision of all university policies during the SACS accreditation reaffirmation process. Those documents establish and define a system of standing and ad hoc committees that are responsible for general school policy development.

The dean has authority over budget, space and personnel of the school. The associate deans are delegated responsibilities in the areas of student affairs, faculty affairs, research, public health and health information sciences. With advice from the Executive Committee, the Council of Chairs and Deans, the Executive Faculty, and with input from other committees as required, the dean approves all policies. For most matters, the Faculty Forum acts on behalf of the Executive Faculty.

A student government association has been formed. One of the roles of this association is to revise school policies affecting students through representation on the Faculty Forum and the Council.

b. planning;

The Council of Chairs and Deans is the entity with the primary responsibility for planning within the school. Results of annual evaluation processes conducted by the school are reviewed by the Council, the advisory board, faculty, and staff. In response to these evaluations, the Council, during the annual retreat, will develop strategic planning recommendations to address these issues. Final authority for approval and implementation of such recommendations rests with the office of the dean.

c. budget and resource allocation;

The Board of Trustees approves a proposed operating budget for each fiscal year for SPHIS. The approved budget includes general (i.e. state) funds allocated to the school. University allocations to

SPHIS reflect priorities established through the scorecard process, which identifies fiscal goals through 2008. For additional information regarding the scorecard, please see Section I. They also reflect Research Infrastructure Fund (RIF) distributions to departments based upon participation in funded research activities. Please see Section VI.1 for a more detailed description of the RIF policies. This baseline allocation of state funds may be augmented by Continual Annual Requirement (CAR) funds identified by UofL central administration. CAR funds are general funds, available annually and reflective of incremental increases or decreases as determined by the state, which may be used to support salary, fringe benefits, travel, supplies, student expenses, etc.

The school has a budgeting process designed to assure that chairs have adequate program budgets to meet their needs with the flexibility to retain salary savings to offset growth within the department. The Dean of SPHIS retains sole authority to oversee distribution of funds to the departments in this unit. The department chairs are responsible for the financial management of the resources allocated to departments by the dean. Chairs follow internal procedures for merit increases, as stipulated by the Policy for Promotion, Appointment, and Tenure and for Periodic Career Review (resource file). Furthermore, merit increases are awarded in accordance with the SPHIS Professional Practice Plan (Appendix III-1), approved by the Board of Trustees on April 10, 2003, and the university's Office of Planning and Budget Operating Budget Salary Increase Guidelines (2005-06), available at http://www.louisville.edu/vpf/budget/opbudgets/0506/0506phase2.pdf.

d. student recruitment, admission and award of degrees;

The Graduate School is the unit responsible for coordinating the application process and granting all graduate degrees, excluding MD, JD and DMD.

Student Recruitment

Student recruitment for school-based degree programs (currently, MPH and MSc/CIS) is managed by the program with support from SPHIS Student Services. Oversight and policy are provided by the Associate Dean for Student Affairs, the Dean and the Dean's Executive Committee.

Student recruitment for each departmental degree program is managed by the corresponding department with overall coordination by Student Services.

Student Admissions

Admissions for the professional degree program (i.e. MPH) are a coordinated effort through Student Services, the Admissions Committee and the dean. Minimum admission criteria are established by the Admissions Committee and approved by the Dean's Executive Committee and the Faculty Forum. Student Services, working with the Graduate School, is responsible for delivering complete applications that meet the minimum criteria to the Admissions Committee. The Admissions Committee recommends candidates for acceptance to the dean, who has ultimate responsibility for admissions to professional degree programs.

Acceptance into a concentration for the MPH program is managed by the concentration coordinators in the corresponding department with oversight by the MPH program director. Admissions into each departmental academic degree program are managed by the corresponding department.

The SPHIS Admissions Committee consists of one faculty representative from each department, the director and coordinator for each school-based program (i.e. MPH and MSc/CIS), the manager of Student Services and a recording secretary. Terms of the faculty members are two years in length and are staggered. Selection of the chair and co-chair, and other rules and procedures of the committee are determined by the committee, subject to review by the Dean's Executive Committee.

Awarding of Degrees

Each degree program within the school determines whether a student has completed the requirements for the degree and, if so, recommends to the dean that the student be awarded the degree. The dean presents the recommendation to the Faculty Forum and, upon its approval, recommends the student for the degree to the Dean of the Graduate School, who approves the actual granting of the degree, subject to formal action by the university Board of Trustees.

e. faculty recruitment, retention, promotion and tenure;

Recruitment

Department chairs request faculty positions from the dean to meet the teaching, research and service needs of the department and school. A Position Authorization Request (PAR) describing the title of the position (e.g., lecturer, assistant, associate or full professor), the specific duties and the education and/or experience desired is written to create the position. Once the position is approved, a search committee consisting of at least three members (with minority representation) is constituted and the position is advertised in appropriate publications and/or at professional meetings. The search committee reviews all applications and recommends to the department chair which applicants should be considered for an interview. Candidates interviewing for the position make a formal presentation to the faculty of the school regarding their current research and/or teaching and service activities and interests. Faculty in the department(s) recruiting the candidate submit written ballots to the search committee. The results of the faculty vote and the recommendation of the search committee are advisory to the department chair and dean, who make the final determination regarding the hiring of the candidate.

Appointment

The Promotion, Appointment and Tenure (PAT) Committee reviews and makes recommendations to the dean on faculty appointments. The procedures to be followed are described in detail in Article I of the school's "Policy for Promotion, Appointment and Tenure and for Periodic Review" document (resource file). In addition, the SPHIS follows the guidelines and principles described in the university's minimum guidelines document and the *Redbook*. See Section VIII for types of faculty appointments.

Retention

The SPHIS has established, in accordance with the *Redbook* Minimum Guidelines (Section 4.6.3), a system of career reviews of all faculty, including annual, pre-tenure, tenure, promotion and periodic career review. All term, probationary and tenured faculty are reviewed in writing annually by their department chair in conjunction with the annual Performance Based Salary Increase (PBSI) evaluation. Letters of annual work assignment and annual performance reviews, as required by the university for all faculty members, are part of all faculty members' permanent files.

Promotion and Tenure

All tenure track faculty are considered for promotion and tenure during their probationary period. Each tenure track faculty member is reviewed by the department chair at mid-point of her/his probationary period for promotion and/or tenure. Results of this review are forwarded to the faculty member, the PAT Committee and the dean. Each faculty member eligible for tenure must be evaluated within 12 months of completing five years of service applicable to tenure. Evaluation for tenure originates in the department in which the faculty member has her/his primary appointment. Faculty members being considered for promotion and/or tenure are reviewed on the basis of performance in research, teaching and service. Promotion to the rank of associate professor is made based on a rating of excellent performance in at least one of these areas and satisfactory performance in the others. Promotion to the rank of professor is awarded on the basis of continuing proficiency in research, teaching, and service. Documentation of proficiency includes evaluation letters provided by internal and extramural experts who may be suggested by the candidate and must be acceptable to the PAT Committee. The chair of the candidate's department makes a recommendation to the PAT Committee. The PAT Committee reviews the candidate's dossier and makes a recommendation to the dean. Promotion to the rank of associate professor or professor and granting of tenure must be approved by the Provost and the Board of Trustees.

f. academic standards and policies;

Academic standards and policies applicable to SPHIS are established by the Graduate Council. The Graduate Council is composed of representative faculty from all graduate programs as described in Section II.A. SPHIS faculty have direct input into development of such standards and policies through their designated representative to the Council. Furthermore, the Curriculum Committee, Executive

Committee and departmental program committees are given the latitude to develop additional policies regarding academic standards that are not in conflict with those of the university.

g. research and service expectations and policies.

Teaching, research and service activities are expected of all Executive Faculty members. Research and service policies are developed by the SPHIS Research and Service Committees, respectively, forwarded to the Council for review, and submitted for final approval to the dean. The membership and charge to each of these committees is described in detail below.

Expectations regarding research and service on the part of the school as a whole are developed by the Council, explicitly stated in the scorecard document, and reviewed annually during the school's strategic planning retreat. Research and expectations for individual faculty members are established by their chairs and explicitly stated in their annual letters of work assignment.

2. A list of standing and important ad hoc committees, with a statement of charge and composition.

Standing Committees

Per the Bylaws, the standing committees of SPHIS are:

- Committee on Performance Criteria and Economic Welfare
- Promotion, Appointment and Tenure Committee
- Rules, Policies and Credentials Committee

Committee on Performance Criteria and Economic Welfare

Charge: Work with the dean and other administrative officers to protect faculty from gross inequities in salaries and other benefits, in accordance with Sec. 4.2.1.A of the *Redbook.*

Composition: This Committee consists of two tenured elected and one tenured appointed Executive Faculty.

Promotion, Appointment and Tenure Committee

Charge: Develop comprehensive academic personnel documents. The documents must be prepared with the full participation and approval of the Executive Faculty. The documents must be in compliance with the SPHIS Bylaws and Rules. The documents shall contain details for criteria discussed in the *Redbook* and any additional criteria to be considered in faculty appointments, promotions, tenure, annual performance or periodic career reviews. Upon final approval, this document, together with the *Redbook*, shall establish procedures and be the only criteria for appointment, promotion, tenure and annual and periodic career reviews. Any changes to these personnel documents require approval of the Executive Faculty.

Composition: This Committee consists of four elected and two appointed Executive Faculty holding the rank of professor.

Rules, Policies and Credentials Committee

Charge: Review, revise and interpret the Bylaws and Rules. The committee also develops and reviews procedures whereby departments nominate candidates to university-wide and SPHIS committees as well as procedures for conducting all unit-wide elections. Members verify the eligibility of each candidate and rule on the eligibility of any challenged office holder or candidate and ensure that the elected faculty are aware of the duties involved in the particular committee to which they have been elected.

Composition: This committee consists of two elected and one appointed Executive Faculty.

The Bylaws are undergoing revision to, among other actions, remove the Faculty and Student Grievance Committees as standing committees of the school. Grievance issues are now managed at the university level. The final changes to the Bylaws must await completion of the university’s SACS accreditation reaffirmation process.

Selected Ad Hoc Committees

The ad hoc committees of SPHIS include:

- Accreditation Steering Committee
- Admissions Committee
- Curriculum Committee
- Diversity Committee
- Research Committee
- Service Committee
- Student Affairs Advisory Group

Accreditation Steering Committee

Charge: Create, review and finalize the comprehensive self-study document as required by CEPH. The committee is also charged with planning for the site reviews to be conducted by CEPH in conjunction with the initial and periodic review processes.

Composition: The committee shall consist of members representing all SPHIS departments.

Admissions Committee

Charge: Oversee all admissions policies and procedures in the school as well as evaluate candidates for admission to the MPH and MSc/CIS programs.

Composition: The committee shall consist of one faculty member from each department and the director of each school-based program (i.e. MPH and MSc/CIS).

Curriculum Committee

Charge: Oversee all curricula in the school and recommend additions and changes to the Faculty Forum.

Composition: Associate dean responsible for academic affairs (chair), chair of each department or chair of the department's curriculum committee, the MPH Program Director, the MSc/CIS Director, and two faculty members appointed by the dean. Non-voting: recording secretary, department curriculum coordinators, manager of student services.

Diversity Committee

Charge: Assure the broadest possible representation of racial and ethnic minorities among faculty, staff and students. Results of the school's recruitment and hiring of faculty and staff as well as recruitment and admission of students will be reviewed on a periodic basis to assure that diversity goals are being achieved. Relevant policies and procedures of the school will be reviewed periodically and recommendations given by the committee for their revision as necessary to support this goal.

Composition: This committee is composed of faculty members from all SPHIS departments.

Research Committee

Charge: Develop the full range of policies governing research activities involving the faculty, staff and students of the school that may not be specifically addressed by the university.

Composition: This committee consists of the chairs of the five departments or their designated representatives, the Director of Administration, the Associate Dean for Public Health and the research coordinator.

Service Committee

Charge: Advise and assist Community and Professional Service in promoting and advancing service by the school to the community and the public health professions, including selection of annual service awards to faculty, staff and students. For purposes of the committee, service is defined as "contributions of professional expertise to the public, including professional practice" (from CEPH Criterion VII). An activity may or may not generate revenue and still be considered as service.

Composition: This committee consists of one person (faculty or staff) selected (elected or appointed) by each department and the center, up to four persons (faculty or staff) appointed by the Dean's Office, two

MPH students, one first year and one second year, selected (elected or appointed) by the School's KPHA Student Chapter and the Director of Community and Professional Service (ex officio).

Student Affairs Advisory Group

Charge: Advise and assist the Associate Dean for Student Affairs in all matters for which the Associate Dean is responsible, including but not limited to student advocacy, student services, student career counseling, student recruitment, and student and alumni evaluations and evaluation analysis and recommendations.

Composition: This committee consists of the Associate Dean for Student Affairs; the manager of Student Services; one person (faculty or staff) selected (elected or appointed) by each department and school-based Master's program; up to two persons (faculty or staff) appointed by the Dean's Office; two MPH students, one first year and one second year, selected (elected or appointed) by the school's Student Association; and two students in programs other than MPH selected (elected or appointed) by the school's Student Association.

3. A list, including membership, of the school and university committees through which faculty contribute to the activities of the school and university.

For membership and terms for all standing and ad hoc committees listed in Section III.2, please see Appendix III-2.

University Committees

SPHIS faculty also participate in a number of key university committees through which policy is formulated that has a direct effect on school operations and activities, as noted below.

The following abbreviations for departments are used throughout this document.

- BB, Department of Bioinformatics and Biostatistics
- EPH, Department of Epidemiology and Population Health
- EOHS, Department of Environmental and Occupational Health Sciences
- HPBS, Department of Health Promotion and Behavioral Sciences
- HMSS, Department of Health Management and Systems Sciences

Academic Associate Deans Group

SPHIS Member: Peter L. Walton, MD (HPBS)

Athletics Board

Susan B. Muldoon, MPH, PhD

Biosafety Task Force

SPHIS Member: David J. Tollerud, MD, MPH (EOHS)

Compliance Oversight Committee

SPHIS Member: Steven McCabe, MD, MSc (BB)

Continuing Health Sciences Education (CHSE) Committee

SPHIS Member: W. Paul McKinney, MD (HPBS)

Council of Academic Officers

SPHIS Member: Richard D. Clover, MD (HPBS)

Distinguished Faculty Award - Outstanding Scholarship, Research, Creative Activity

SPHIS Members: Carlton A. Hornung, PhD, MPH (EPH), 2004; David J. Tollerud, MD, MPH (EOHS), 2005; Rudolph S. Parrish, PhD (BB), 2006; Kathy B. Baumgartner, PhD (EPH), 2007

Distinguished Faculty Award - Distinguished Service

SPHIS Member: Robert J. Esterhay, MD (HMSS), 2004 and 2005; Muriel J. Harris, MPH, PhD (HPBS), 2006, Ruth Carrico, PhD, RN (HPBS), 2007

Distinguished Faculty Award - Distinguished Teaching

SPHIS Members: David J. Tollerud, MD, MPH (EOHS), 2004; William Rising, PhD (BB), 2005; L. Jane Goldsmith, PhD (BB), 2006 and 2007; Robert Jacobs, PhD (EOHS), 2006

Diversity Committee

SPHIS Member: Muriel J. Harris, MPH, PhD (HPBS)

Faculty Grievance Committee

SPHIS Members: David J. Tollerud, MD, MPH (EOHS), 2005

Faculty Senate

SPHIS Member: Carlton A. Hornung, PhD, MPH (EPH); Robert Jacobs, PhD (EOHS); L. Jane Goldsmith, PhD (BB); Caryn Thompson, PhD (BB); Raymond Austin, PhD (HMSS)

Graduate School Council

SPHIS Member: Carlton A. Hornung, PhD, MPH (EPH)

HSC Research Deans

SPHIS Member: W. Paul McKinney, MD (HPBS)

Honorary Degree Committee

SPHIS Member: Carlton A. Hornung, PhD, MPH (EPH), 2004

Individual Conflict of Interest Committee

SPHIS Member: David J. Tollerud, MD, MPH (EOHS)

Kentucky Cancer Program

SPHIS Member: Richard D. Clover, MD (HPBS)

President's Executive Cabinet

SPHIS Member: Richard D. Clover, MD (HPBS)

Research Deans

SPHIS Member: W. Paul McKinney, MD (HPBS)

Signature Partnerships

SPHIS Member: Muriel J. Harris, MPH, PhD (HPBS); W. Paul McKinney, MD (HPBS)

Southern Association of Colleges and Schools (SACS) Accreditation Committees

SPHIS Member: W. Paul McKinney, MD (HPBS); Rudolph S. Parrish, PhD (BB)

Strategic Technology Executive Committee

SPHIS Members: Peter L. Walton, MD (HPBS)

Student Grievance Committee

Susan B. Muldoon, MPH, PhD (EPH)

University Scholar Award 2005

SPHIS Members: Robert J. Esterhay, MD (HMSS); Rudolph S. Parrish, PhD (BB); David J. Tollerud, MD, MPH (EOHS)

UofL Cardiovascular Institute Board of Directors

SPHIS Member: Carlton A. Hornung, PhD, MPH (EPH)

4. Assessment of the extent to which this criterion is met.

This criterion is met. The school's administrative governance and committee structure have been fully described. University and school committee function and membership and the roles of students in school governance have been enumerated in their entirety. All standing committees have been formed, with members appointed or elected.

RESOURCES

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

Documentation Expected

1. A clearly formulated school budget statement, showing sources of all available funds and expenditures by major categories, since the last accreditation visit or for the last five years, whichever is longer.

The academic and service units of the university have shared the effects of the difficult budget period through which the Commonwealth of Kentucky has navigated these past few years. Despite budget reductions to higher education since 2002, SPHIS has been spared the significant cuts that have impacted some other units. The Provost and the Executive Vice President for Health Affairs (EVPHA) have been supportive and willing to work with our school to minimize the potentially devastating effects that budget reductions would have had on a newly developing program such as SPHIS. The Office of the Executive Vice President for Research (EVPR) has also been generous in its award of recurring seed money to our unit, allocating partial funding for four outstanding research faculty recruits who joined our faculty in July 2005. These funds allowed us to attract and recruit two junior and two senior research faculty members who joined our faculty in July 2005. Additional funds promised in the next few fiscal years will allow us to build up the other academic programs and departments in the school.

Sufficient fiscal resources to achieve the goals and objectives of the school come from a variety of sources, including state-appropriated funding (general funds); extramural research and service grants and contracts; and clinical revenue from the International Travel Medicine office. The SPHIS has sole authority for and maintains control of a separate operating budget of $9,712,686 for Fiscal Year 2006-07. The following table illustrates the income and expenses for the school from 2002-03 through 2006-07.

Table IV-1: Sources of Funds and Expenditures by Major Category

	2002-03	2003-04	2004-05	2005-06	2006-07[1]
Source of Funds					
Tuition & Fees	0	0	8,500	82,283	129,022
State Appropriation	2,385,871	2,597,273	3,191,102	4,444,099	4,600,285
University Funds	0	0	78,091	177,636	175,116
Grants/Contracts	1,610,713	2,789,342	2,991,922	2,937,157	2,781,099
Indirect Cost Recovery	440,763	606,270	486,168	447,994	308,287
Endowment	0	0	0	517	517
Gifts	0	150	683	2,468	6,040
Other (Travel Clinic)	371,813	538,194	496,976	435,568	429,574
Other (see note)	163,540	266,802	307,804	210,565	265,883
Other (Central Admin)	1,957,814	0	0	0	121,225
Other (Previous Balance)	0	1,980,101	1,978,699	1,566,324	895,638
Subtotals	6,930,514	8,778,132	9,539,945	10,304,611	9,712,686

[1] SPHIS income and expenses for FY 2006-07 are estimated.

Table IV-1 (cont'd): Sources of Funds and Expenditures by Major Category

	2002-03	2003-04	2004-05	2005-06	2006-07
Expenditures					
Faculty Salaries & Benefits	1,740,375	2,630,241	3,420,139	4,974,907	5,303,907
Staff Salaries & Benefits	789,037	1,090,004	1,473,080	1,541,810	1,501,683
Operations	1,492,001	1,980,078	2,075,464	1,735,838	1,996,505
Travel	116,866	187,802	241,330	228,214	150,928
Student Support	371,371	305,038	277,440	480,210	451,376
University Tax	0	0	0	0	0
Other (F&A)	440,763	606,270	486,168	447,994	308,287
Subtotals	4,950,413	6,799,433	7,973,621	9,408,973	9,712,686
Balance					
Totals[2]	1,980,101	1,978,699	1,566,324	895,638	0

Notes on Table IV-1 include the following.

- Tuition and fees represents Distance Education Classes and Technology Fee only. Regular tuition revenue is retained centrally by the university's central administration.
- State Appropriations includes state General Funds, and UofL EVPHA Funds.
- University Funds include Scholar Funds (covers faculty salary and fringe benefits)
- Indirect Cost Recovery is retained by central administration, with approximately 10% going to the department and princiapl investigator.
- Endowment Funds represent amount available to the school (i.e. interest on the total donation)
- Other represents funds received from the practice plan, royalties, Statistical Consulting Center, etc., excludes intra-university transfers.
- Other (Central Admin) transition funding from UofL.
- Operations include non-salary expenses, equipment and grant subcontracts (i.e. University of Kentucky Research Foundation, University of Cincinnati).
- Travel includes registration, in-state and out-of-state travel for employees, recruitment expenses and non-employee travel, including hotel and out of pocket expenses.
- Student Support includes stipends, fringe benefits and tuition payments.

The state general funds are subject to a state-mandated, state-funded increase each year, which is reflected in this increased funding source from 2002 through 2006. The grants and contracts funding reflects a mixture of federal and non-federal grants and contracts. Included in this mixture were grants from the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA) to support activities in the Center for Health Hazards Preparedness (CHHP).

One of our mandates is to establish a solid base of alumni and friends of the school, from which we will solicit gifts and donations. Capital fundraising discussions will be under way in Fiscal Year 2006-07 under the approval and guidance of the university's Planning and Development Office. It is our intention to use these funds to provide additional student scholarships and establish endowed lectureships, workshops, etc. to promote our schools mission and goals.

2. A concise statement or chart concerning faculty resources, showing number and percent time of faculty by program area and computing a student faculty ratio for each and for the school as a whole. (FTE faculty and FTE student numbers should be used and these should be consistent with FTE faculty and student numbers presented in sections VIII and IX.)

Quantitative data on faculty, students and student/faculty ratios by department or specialty are included as Table IV-2. Faculty and student FTE were calculated as 1.0 * full-time headcount + 0.3 * part-time headcount. Faculty were grouped according to program of primary appointment.

[2] Please note that balances carry forward to the next fiscal year.

Table IV-2: Faculty, Students and Student/Faculty Ratios by Degree Program, Fall 2002 to Fall 2005

Program	HC Core Fac.	FTEF Core	HC Other Fac.	FTEF Other	Total Fac. HC	Total FTEF	HC Stud.[3]	FTE Stud.	SFR by Core FTEF	SFR by Total FTEF
Fall 2002										
MPH										
MS/BDS	6	6	1	0.3	7	6.3	6	6.0	1.00	0.95
MS/Epi										
MSc/CIS[4]	6	6	1	0.3	7	6.3	32	16.6	2.77	2.63
PhD/BDS	5	5	0	0.0	5	5.0	6	5.3	1.06	1.06
PhD/PHS	2	2	1	0.3	3	2.3	11	5.4	2.70	2.35
Total	19	19	3	0.9	22	19.9	55	33.3	1.75	1.67
Fall 2003										
MPH										
MS/BDS	7	7	0	0	7	7	10	7.2	1.03	1.03
MS/Epi										
MSc/CIS	6	6	0	0	6	6	34	14.8	2.47	2.47
PhD/BDS	4	4	0	0	4	4	8	6.6	1.65	1.65
PhD/PHS	4	4	0	0	4	4	16	8.3	2.08	2.08
Total	21	21	0	0	21	21	68	36.9	1.76	1.76
Fall 2004										
MPH										
MS/BDS	6	6	1	0.3	7	6.3	11	8.2	1.37	1.30
MS/Epi										
MSc/CIS	5	5	1	0.3	6	5.3	30	14.6	2.92	2.75
PhD/BDS	4	4	1	0.3	5	4.3	6	6.0	1.50	1.40
PhD/PHS	5	5	0	0	5	5.0	19	11.3	2.26	2.26
Total	20	20	3	0.9	23	20.9	66	40.1	2.01	1.92
Fall 2005										
MPH	10	10	0	0.0	10	10.0	25	22.9	2.29	2.29
MS/Epi										
MS/BDS	10	10	2	0.6	12	10.6	11	8.9	0.89	0.84
MSc/CIS	5	5	1	0.3	6	5.3	36	15.0	3.00	2.83
PhD/BDS	7	7	2	0.6	9	7.6	9	8.3	1.19	1.09
PhD/PHS	6	6	0	0.0	6	6.0	19	11.3	1.88	1.88
Total	38	38	5	1.5	43	39.5	100	66.4	1.96	1.68

Per the suggestion of the preliminary reviewers of this self-study document, quantitative data on faculty, students and student/faculty ratios will be tracked by department beginning with Fall 2006. Again, faculty and student FTE were calculated as 1.0 * full-time headcount + 0.3 * part-time headcount.

[3] Does not include students enrolled in certificate programs and/or enrolled as visiting or non-degree.
[4] Includes MS/MSc.

Table IV-3: Faculty, Students and Student/Faculty Ratios by Department, Fall 2006

Dept.	HC Core Fac.	FTEF Core	HC Other Fac.	FTEF Other	Total Fac. HC	Total FTEF	HC Stud.[5]	FTE Stud.	SFR by Core FTEF	SFR by Total FTEF
SPHIS	34	31.94	0	0.00	34	31.94	89	58.9	1.84	1.84
BB	10	9.50	0	0.00	10	9.50	15	12.9	1.36	1.36
EOHS	4	4.00	0	0.00	4	4.00	0	0.0	0.00	0.00
EPH	6	5.82	0	0.00	6	5.82	6	4.6	0.79	0.79
HMSS	6	5.32	0	0.00	6	5.32	3	0.9	0.17	0.17
HPBS	8	7.30	0	0.00	8	7.30	0	0.0	0.00	0.00
Total	34	31.94	0	0.00	34	31.94	113	77.3	2.42	2.42

3. A concise statement or chart concerning the availability of other personnel (administration and staff).

The school operates under a centralized business management style in which personnel administration, purchasing activity and fiscal processing are performed by personnel in the dean's office for all five departments and the center. Information Technology oversight for the school is performed centrally at the unit level, in cooperation with university-wide information technology resources. Three professional research staffers are employed centrally as support for the CHHP and its grant activities.

Table IV-4 shows the distribution of FTE staff by gender and race, as of the fall semester 2006. All numbers are based upon internal data.

Table IV-4: Summary Demographic Data – FTE Staff, August 2006[6]

		Full-time Staff		Total	
		Number	Percentage	Number	Percentage
Male		8.0	24%	8.0	24%
	African American	0.0	0%	0.0	0%
	Caucasian	8.0	24%	8.0	24%
	Hispanic/Latino	0.0	0%	0.0	0%
	Asian/Pacific Islander	0.0	0%	0.0	0%
	Native American/Alaska Native	0.0	0%	0.0	0%
	Unknown/Other	0.0	0%	0.0	0%
	International	0.0	0%	0.0	0%
Female		25.6	76%	25.6	76%
	African American	3.0	9%	3.0	9%
	Caucasian	21.6	64%	21.6	64%
	Hispanic/Latino	0.0	0%	0.0	0%
	Asian/Pacific Islander	1.0	3%	1.0	3%
	Native American/Alaska Native	0.0	0%	0.0	0%
	Unknown/Other	0.0	0%	0.0	0%
	International	0.0	0%	0.0	0%
Total		33.6	100%	33.6	100%

4. A concise statement or chart concerning amount of space available to the school by purpose (offices, classrooms, common space for student use, etc.) by program and location.

The school currently occupies approximately 23,377 gross square feet on the fourth floor of the K Wing on the Health Sciences Center (HSC). Included in this space are a computer lab (1,052 square feet) and a large conference room (817 square feet), both of which may be used as classrooms. A floor plan outlining the space allocation is included in the resource file.

[5] Includes students enrolled in certificate programs and/or enrolled as visiting or non-degree.
[6] UofL recognizes employees with .80 or greater FTE as full-time employees.

SPHIS maintains an International Travel Clinic, located two blocks north of our current HSC location. This office provides a service to international travelers by providing a one-stop location for them to obtain immunizations, counseling, US State Department advisories and CDC-based health alerts about the countries they will be visiting. This three-exam-room office has 1,198 square feet and is operated five days per week.

In spring 2005, the Kentucky state legislature approved funding for the purchase of a 36,500 gross square foot building on the HSC to be used both to house the school and to provide office space for the public health preparedness activities of Louisville Metro Public Health and Wellness (LMPHW) There is much excitement about expanding collaborative efforts between SPHIS and LMPHW in the areas of education, service and research. The close proximity of LMPHW, which will be located across the street from the new office, is conducive to expanded opportunities for our students, faculty and staff members. The renovation of this building is expected to be complete by January 2008. The selection of architects for the renovation has now been completed.

The new building will contain space for 46 faculty offices, a dean's suite, six conference rooms, a 30-station computer lab, and 20 student carrels. The three floors of the building are being entirely renovated in order to assure compliance with current structural codes and to provide adequate computer network access. A copy of the floor plan is included in the resource file.

A variety of teaching facilities are also available at the HSC. These facilities are shared by the UofL Schools of Dentistry, Nursing, Medicine and Public Health and Information Sciences. These rooms are scheduled by request. Types of rooms are as follows: standard classrooms (22), lecture halls (3), auditoriums (2), problem based learning rooms (36), unit labs (12) and seminar/conference rooms (6). Room capacities range in size from 8 in a seminar or problem-based learning room to 450 students in the large auditorium. Instructional support in the form of technology is installed in most rooms or is readily available by request. All classrooms have network connectivity installed.

5. A concise statement or floor plan concerning laboratory space, including kind, quantity and special features or special equipment.

Currently, two EPH faculty members maintain laboratory space, including a 690-square-foot lab and 95-square-foot office, in the Medical Dental Research (MDR) Building. In addition, a faculty member from the Department of Environmental and Occupational Health Sciences (EOHS) collaborates closely with a research team from the School of Medicine and shares lab space in the Jewish Hospital Cardiovascular Research Center.

As SPHIS grows to include additional researchers who require dedicated laboratory facilities, requests will be submitted to the Office of Planning and Budget for the allocation of space. All requests for HSC lab space must be approved by the Assistant Vice President for Health Affairs.

6. A concise statement concerning the amount, location and types of computer facilities and resources for students, faculty, administration and staff.

In order to remain on the cutting edge of technology, SPHIS employs a full-time technology and facilities manager who, working closely with UofL Information Technology (IT), supports the academic technology mission of the school. The school has a Service Level Agreement in place for all computers to be supported by the IT Desktop Support group. Faculty, students and staff may call the IT helpdesk with any computer problem and a technician will be assigned to investigate and resolve the issue.

Every faculty and staff member in the school has immediate access to at least one personal computer. The school has also established a three-year PC replacement program for all faculty, staff and lab computers to keep up with continual advances in desktop computing. In addition, the school offers five laptops, three video projectors, two digital cameras and one video camera for short-term loan to faculty,

students and staff. There is also a portable Polycom (video conferencing) system[7] and an Audience Response System (ARS)[8] available for use.

The school provides, through the Microsoft Campus Agreement, Windows XP, Office Suite, Visio, Project, Publisher and FrontPage for all faculty, staff and lab computers. The university supplies the GroupWise email application and Symantec's Norton antivirus software. Faculty and staff can download PKzip, FTP software, Shockwave player and check their available disk space through Novell Application Launcher (NAL). Licenses for specialized software such as SPSS and SAS may be purchased through UofL IT Software Resales at academic pricing.

The school supports the Computer Training and Testing Lab (CTTL) in the K Wing, containing 30 desktop workstation PCs and one instructor PC, located in a controlled access room. All PCs are equipped with software available through the Microsoft Campus Agreement, GroupWise, Norton Anti-Virus, SPSS, R program, Stat Exact, Treeage, Data, NCSS, S-Plus, Vector NTI and EpiInfo. In addition, the university has implemented wireless network access to augment the 100 MB access throughout the K Wing and in major areas throughout the HSC.

Students may also utilize the IT Computing Center, located on the third floor of the K Wing. The Computing Center is equipped with 28 workstations containing much of the same software that the CTTL has. The Kornhauser Health Sciences Library also has a computing center and study areas that are accessible to faculty, students and staff.

7. A concise statement of library/information resources available for school use.

The UofL Libraries system (http://library.louisville.edu/) consists of the Margaret M. Bridwell Art Library; William F. Ekstrom Main Library; Kornhauser Health Sciences Library; Law School Library; Dwight Anderson Memorial Music Library and the University Archives and Records Center. The five academic libraries contain more than two million volumes and more than 24,000 serials.

The Kornhauser Health Sciences Library (http://library.louisville.edu/kornhauser/), located on the HSC, has a wide selection of resources to support graduate programs in public health. Kornhauser resources alone include more than 3,800 current journal subscriptions. Of these, more than 1,800 are available electronically from office or home to anyone with a UofL affiliation. We also have more than 80,000 books to support the instructional, clinical and research initiatives of the HSC. Kornhauser currently holds 167 print subscriptions and more than 190 electronically accessible titles of journals specifically on public health topics. The Kornhauser holdings include 80 percent of the public health titles analyzed for Science Citation Index. Kornhauser subscribes to a wide range of bibliographic databases ranging from broad coverage like Medline (via Ovid) and Web of Knowledge to more focused resources like Communication Abstracts and Current Index to Statistics. In addition, UofL Libraries has launched a new service that makes research using databases and online indexes easier -- Findit@UofL. Clicking on the button from online databases accessed through the library portal displays a list of all possible full-text options.

The book collection contains nearly 1,200 titles classified specifically as public health, in addition to many in other classifications related to this highly interdisciplinary field. Kornhauser regularly receives, through an approval plan with its book vendor, most of the newer materials in the subject areas involved. Library staff will consider acquiring any specific books or journal subscriptions that are needed. The interlibrary loan services can rapidly locate and deliver materials from the other UofL Libraries and from libraries all over the United States and beyond.

Kornhauser also offers extensive reference assistance for formulating online search strategies, validating citations, locating materials not owned by this library, or any other research assistance that might be needed. Library staff members offer instruction in information management and in using library resources to individuals or in a group setting.

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[7] The Polycom video conferencing unit, attached to a 50" plasma screen, is used to set up a point to point or bridged video conference over the web.

[8] The ARS is an audience response system used in conjunction with PowerPoint. The system consists of a laptop, 150 handheld input devices and the base unit. The system allows the user to input questions into a PowerPoint presentation and have the audience choose answers

8. A concise statement identifying field experience sites used during the last three years.

MPH

The following sites have been chosen as practicum sites by our first class of MPH students:

- Air Pollution Control District
- American Diabetes Association, Louisville-Lexington Chapter
- American Red Cross, Louisville, KY Chapter
- Cabinet for Environmental and Public Protection,
- Community Farm Alliance
- Department for Environmental Protection, Division of Water and Air Quality
- Dixie Health Center and Dental Center
- Environmental Safety Technologies, Inc.
- Family Health Center, Inc.
- Gilda's Club Louisville
- James Graham Brown Cancer Center, School of Medicine
- Kentucky Institute for the Environment and Sustainable Development
- Lincoln Trail District Health Department, Elizabethtown, KY
- Louisville Metro Public Health and Wellness
- UofL School of Medicine
- UofL School of Dentistry
- U.S. Army TRADOC System, Abrams Tank Systems

Other Programs

Students in the Department of Bioinformatics and Biostatistics have completed field placements with LMPHW, the UofL Brown Cancer Center and UofL Department of Surgery.

9. A concise statement describing other community resources available for instruction, research and service, indicating those where formal agreements exist.

The school recognizes the importance of strategic community partnerships in support of its mission of research, teaching and service.

The school has developed a strong relationship with the merged Louisville Metro government, in particular, LMPHW. As mentioned previously, the Director of LMPHW maintains a full-time appointment with the school, specifically as an associate professor in the Department of Health Management and Systems Sciences, and maintains an office both at LMPHW and SPHIS. When the school moves to its new location (across the street from LMPHW), certain health department offices will join SPHIS there. An informal working group was formed to foster joint research activities through SPHIS and LMPHW and to build sustainable partnerships with existing groups in our community. SPHIS has also begun identifying service learning activities it can offer to its graduate students in LMPHW (e.g. a project to determine the feasibility of a smoking ban in Louisville Metro area).

For information regarding current community-based research and service activities, please see Sections VI.2 and VII.2, respectively.

Field Placement

A formal contract exists with Metro government at the level of the Mayor's Office for student field placement sites. Professional relationships and agreements with other placement sites are being developed locally, as well as statewide, to enrich the students' experiences in urban and rural sites. Additionally, the SPHIS has interfaced with other merged government agencies in its work with a West End neighborhood air quality workgroup.

Students in the MPH degree program may complete field placements at a variety of organizations and entities throughout the region. Those placements range from project assistance at the local health department to several community organizations, both non-profit and for-profit.

The school maintains affiliation agreements with the following practicum sites:

- American Diabetes Association (Louisville Office)
- American Red Cross-Louisville (Kentucky) Area Chapter
- Cancer Prevention and Control Program, James Graham Brown Cancer Center (UofL)
- Community Farm Alliance
- Environmental Safety Technologies, Inc.
- Family Health Centers, Inc.
- Gilda's Club Louisville
- Jefferson County (Kentucky) Public Schools
- Kentucky Institute for the Environment and Sustainable Development (UofL)
- Kentucky Department for Environmental Protection
- Louisville Metro Government (covers all departments and agencies, including health department)
- Lincoln Trail District Health Department
- Swami Vivekananda Youth Movement (limited to single student)
- UofL School of Dentistry

In addition, potential practicum sites include the following.

- University of Louisville School of Dentistry
- Louisville Metro Sewer District
- Louisville Water Company
- Air Quality Control Board
- Partnership for a Green City
- Local Health Departments (outside Louisville Metro and Southern Indiana)
- Kentucky Department for Public Health
- University of Louisville Hospital
- Jewish Hospital
- Norton Hospital
- Baptist Hospital East
- Planned Parenthood, Louisville Clinic
- Family Health Centers
- Visiting Nurses Association
- Anthem/Blue Cross Blue Shield, Inc.
- Humana, Inc.
- Kentucky Department of Environmental Management
- Catholic Charities
- Jewish Charities
- Americana

Please see Section V.B.3 for additional information regarding field placement sites.

10. Identification of outcome measures by which the school may judge the adequacy of its resources, along with data regarding the school's performance against those measures over the last three years. As a minimum, the school must provide data on student-to-faculty ratio by program, institutional expenditures per full-time-equivalent student, and research dollars per full-time equivalent faculty.

Please see Section IV.2 for requested data on student-to-faculty ratios.

The school uses the SPHIS Unit Scorecard (Appendix I-1) and the following outcome measures to judge the adequacy of its resources.

Table IV-5: Mandatory Outcome Measures, 2002-03 to present

Mandatory Outcome Measures	2002-03	2003-04	2004-05	2005-06	2006-07[9]	Goal 2008
Institutional expenditures per FTE student	$148,661	$184,266	$198,843	$141,701	$125,649	$16,000
Research dollars per FTE faculty	$151,954	$230,524	$175,274	$94,931[10]	$87,073	$100,000

Institutional expenditures per FTE student was calculated by dividing total expenses for each year (Table IV-1) by FTE students (Tables IV-2 and IV-3). Research dollars per full-time equivalent faculty was calculated by dividing the grants and contracts income (Table IV-1) by FTE faculty. Goals for 2008 were established based on data from schools of public health at the following university benchmark institutions: University of Illinois at Chicago, University of South Carolina, University of South Florida, University of Alabama at Birmingham and University of Pittsburgh. Expenditures per FTE students during the first four years of operation appear higher than goal because of high initial startup costs and relatively small initial class size.

In addition, as SPHIS is a school of public health *and* information sciences, it is important to provide employees with an adequate level of technological resources. Table IV-5 shows the amount of technology expenditures per fiscal year (2002-03 through present), along with FTE employees and technology expenditures per FTE employee. As benchmark data for this measure were unavailable, the goal for 2008 is based on past performance and the need to allocate funds appropriately.

Table IV-6: Technology Expenditures per FTE Employee, 2002-03 through present

	2002-03	2003-04	2004-05	2005-06	2006-07	Goal 2008
FTE Employees[11]	31.60	35.10	43.07	61.94	65.54	
Technology Expenditures	$201,267	$280,163	$416,652	$267,641	$276,343	
Technology Expenditures per FTE Employee	$6,369	$7,982	$9,674	$4,321	$4,216	$5,000

11. Assessment of the extent to which this criterion is met.

This criterion is met. The school has an established and clearly defined budget, specified faculty resources, adequate administrative personnel, and sufficient space for current operations and plans for expansion. Computer, laboratory and library resources for faculty, students and staff are adequate. Field experiences have been developed for MPH students. Community resources are deemed sufficient and outcome measures for adequacy of resources are in place.

[9] 2006-07 figures are estimated.
[10] The significant decrease in research dollars per faculty during the last three fiscal years was expected during the startup phase of the school, resulting from the dean's charge to the faculty to focus on curricular enhancement, establishment of the MPH program and new PhD concentrations, student recruitment and other educational issues..
[11] Employee FTE data are as of August 1 of each year.

INSTRUCTIONAL PROGRAMS

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

The areas of knowledge basic to public health include:

1. **Biostatistics – collection, storage, retrieval, analysis and interpretation of health data; design and analysis of health-related surveys and experiments; and concepts and practice of statistical data analysis.**
2. **Epidemiology – distributions and determinants of disease, disabilities and death in human populations; the characteristics and dynamics of human populations; and the natural history of disease and the biologic basis of health.**
3. **Environmental health sciences – environmental factors including biological, physical and chemical factors which affect the health of a community;**
4. **Health services administration – planning, organization, administration, management, evaluation and policy analysis of health programs; and**
5. **Social and behavioral sciences – concepts and methods of social and behavioral sciences relevant to the identification and the solution of public health problems.**

The vision and mission of SPHIS expand the traditional concept of public health and point to similarly expanded concepts of the traditional academic departments in a school of public health and how they represent the five areas of public health knowledge. Table V-1 illustrates the mapping between the traditional areas, the areas of concentration in the MPH degree program and the school's departments.

Table V-1: Mapping Between Areas of Knowledge, Areas of Concentration and Departments

Area of Knowledge	Area of MPH Concentration	SPHIS Department
biostatistics	biostatistics	Bioinformatics and Biostatistics
epidemiology	epidemiology	Epidemiology and Population Health
environmental health sciences	environmental and occupational health	Environmental and Occupational Health Sciences
health services administration	health management	Health Management and Systems Sciences
social and behavioral sciences	health promotion, behavior and cognition	Health Promotion and Behavioral Sciences

The expansions of the department names reflect the recognition of the expanded idea of public health under which the school was founded, especially the recognition of the important role that health information sciences have in the public's health.

- Bioinformatics includes activities in genomics, proteomics, metabolomics, computational biology and health research informatics, all of which are taking more prominent roles in public health.
- Epidemiology addresses the population studies needed to provide a scientific basis for both clinical and public health interventions and a framework for efforts such as community-based participatory research.
- Health management in today's social, political and economic environment requires even more powerful tools and approaches for dealing with planning, policy and administration. Systems sciences provide these needs with network science (especially social network theory) and complexity science (in particular, systems thinking and dynamic modeling), where the interdependent structure of an ecosystem drives its behavior over time.
- Health promotion and education are essential interventions in public health. The traditional emphasis is on influencing health-related behavior as well as the economic, environmental, organizational and policy supports necessary for long-term health improvement. In addition, there is increasing interest in new concepts of cognitive science, informatics and decision analysis.

The school offers eight degree programs, two of which also offer joint degrees. The degree programs are:

- MPH, with concentrations in each of the five core disciplines
- MS in Biostatistics-Decision Science (and a joint MS and PhD in Applied Mathematics), with concentrations in Biostatistics and Decision Science
- MS in Epidemiology
- MSc in Clinical Investigation Sciences (and a joint MD/MSc)
- PhD in Biostatistics-Decision Science, with concentrations in Biostatistics and Decision Science
- PhD in Public Health Sciences, Concentration in Environmental Health
- PhD in Public Health Sciences, Concentration in Epidemiology
- PhD in Public Health Sciences, Concentration in Health Management

At the present time there are no joint degrees with the MPH degree.

The following abbreviations are used in this entire section.

- BB, Department of Bioinformatics and Biostatistics
- EPH, Department of Epidemiology and Population Health
- EOHS, Department of Environmental and Occupational Health Sciences
- HMSS, Department of Health Management and Systems Sciences
- HPBS, Department of Health Promotion and Behavioral Sciences

Documentation Expected

1. **Identification in matrix form of all of the school's degree programs, including undergraduate degrees if any, showing the areas of specialization possible and distinguishing between those considered by the school to be professional degrees and those considered to be academic degrees. If the school offers degrees in a nontraditional format, these must be included in the matrix and identified as nontraditional.**

SPHIS has eight degree programs, all of which are approved by the Graduate School, presented in Tables V-2 and V-3. Two of the programs include joint degrees. All programs are in a traditional format. In Table V-2, “Hours” is the number of credit-hours required for the degree, “Unit” lists the academic unit in which the program resides, “Type” lists whether the program is professional (“Prof.”) or academic (“Acad.”) and “Ref.” gives the abbreviation used for the program in this section.

Table V-2: Degree Matrix by Program

Degree Program	Hours	Unit	Type	Ref.
MPH	45	SPHIS	Prof.	MPH
Concentrations in:				
Biostatistics		BB		
Epidemiology		EPH		
Environmental and Occupational Health		EOHS		
Health Behavior and Cognition		HPBS		
Health Management		HMSS		
MS in Biostatistics-Decision Science	36	BB	Acad.	MS/BDS
Concentrations in:				
Biostatistics				
Decision Science				
Joint MS in Biostatistics-Decision Science and PhD in Applied Mathematics	36	BB and Math		
MS in Epidemiology[1]	36	EPH	Acad.	MS/Epi
MSc in Clinical Investigation Sciences	30	SPHIS	Acad.	MSc/CIS
Joint MSc in Clinical Investigation Sciences and MD		SPHIS and Medicine		
PhD in Biostatistics-Decision Science	48 beyond masters or equivalent	BB	Acad.	PhD/BDS
Concentrations in:				
Biostatistics				
Decision Science				
PhD in Public Health Sciences	48 beyond masters or equivalent	SPHIS	Acad.	PhD/PHS
Concentrations in:				
Environmental Health		EOHS		
Epidemiology		EPH		
Health Management		HMSS		

In response to the comment by the preliminary reviewers, Table V-3 shows the contributions, by department, to each of the degree programs listed in Table V-2.

[1] Both the MS/Epi program and the PhD/PHS concentration in Environmental Health were approved in Fall 2006. Both of these are currently in the process of student recruitment.

Table V-3: Contributions to Degree Programs, by Department

Unit	*Degree Program*	Hours	Type	Ref.
SPHIS	*Courses are offered at the departmental level.*			
BB	MPH Concentration in Biostatistics	15	Prof.	MPH
	MPH Core Courses in Biostatistics	6	Prof.	MPH
	MPH Integration Course	1	Prof.	MPH
	MPH Practicum	6	Prof.	MPH
	MS in Biostatistics-Decision Science	36	Acad.	MS/BDS
	MSc/CIS Clinical Trials I	2	Acad.	MSc/CIS
	MSc/CIS Introduction to Biostatistics	3	Acad.	MSc/CIS
	MSc/CIS Medical Decision Analysis	2	Acad.	MSc/CIS
	PhD in Biostatistics-Decision Science	48 beyond masters or equivalent	Acad.	PhD/BDS
EOHS	MPH Concentration in Environmental and Occupational Health	15	Prof.	MPH
	MPH Core Course in Environmental and Occupational Health	3	Prof.	MPH
	MPH Integration Course	1	Prof.	MPH
	MPH Practicum	6	Prof.	MPH
	PhD in Public Health Sciences, Concentration in Environmental Health	48 beyond masters or equivalent	Acad.	PhD/PHS
EPH	MPH Concentration in Epidemiology	15	Prof.	MPH
	MPH Core Course in Epidemiology	3	Prof.	MPH
	MPH Integration Course	1	Prof.	MPH
	MPH Practicum	6	Prof.	MPH
	MS in Epidemiology	36	Acad.	MS/Epi
	MSc/CIS Clinical Trials II	2	Acad.	MSc/CIS
	MSc/CIS Design and Analysis of Epidemiologic Studies I and II	4	Acad.	MSc/CIS
	MSc/CIS Introduction to Clinical Epidemiology	2	Acad.	MSc/CIS
	PhD in Public Health Sciences, Concentration in Epidemiology	48 beyond masters or equivalent	Acad.	PhD/PHS
HMSS	MPH Concentration in Health Management	15	Prof.	MPH
	MPH Core Course in Health Management	3	Prof.	MPH
	MPH Integration Course	1	Prof.	MPH
	MPH Practicum	6	Prof.	MPH
	MSc/CIS Health Services and Outcomes Research	2	Acad.	MSc/CIS
	PhD in Public Health Sciences, Concentration in Health Management	48 beyond masters or equivalent	Acad.	PhD/PHS
HPBS	MPH Concentration in Health Behavior and Cognition	15	Prof.	MPH
	MPH Core Course in Health Behavior and Cognition	3	Prof.	MPH
	MPH Critical Thinking and Program Evaluation Course	3	Prof.	MPH
	MPH Integration Course	1	Prof.	MPH
	MPH Issues in Public Health Course	2	Prof.	MPH
	MPH Practicum	6	Prof.	MPH
	MSc/CIS Social and Behavioral Science in Health Care	2	Acad.	MSc/CIS

2. The school bulletin or other official publication, which describes all curricula offered by the school for all degree programs.

The official school catalog for 2006-07 can be found in Appendix V-1. The publication contains descriptions about each degree program outlined in V.A.1, as well as additional information for students, such as important contact information, university schedules and general graduate student information. The current catalog does not reflect new programs that were approved in late 2006; these modifications will be reflected in the 2007-08 catalog.

3. Assessment of the extent to which this criterion is met.

This criterion is met. The degrees offered by the school are presented in matrix form and the school catalog is provided as an appendix.

Criterion V.B.: Each professional degree program identified in V.A., as a minimum, shall assure that each student a) develops an understanding of the areas of knowledge which are basic to public health, b) acquires skills and experience in the application of basic public health concepts and of specialty knowledge to the solution of community health problems, and c) demonstrates integration of knowledge through a culminating experience.

At the present time, the school offers one professional degree program, the MPH. The MPH curriculum includes courses for mastery of the traditional areas of public health knowledge, courses for mastery of specialized knowledge in an area of concentration, a practicum to apply knowledge in real-world situations and a summary course during the student's final semester aimed at integrating all aspects of the student's academic and practicum experiences.

Expected Documentation

1. **Identification of the means by which the school assures that all professional degree students have a broad understanding of the areas of knowledge basic to public health. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.**

Through the MPH curriculum, students gain an understanding of the theories and techniques that underlie the five core areas of public health knowledge. In addition to the traditionally defined five core courses, all MPH students are required to take three additional courses: Biostatistics II (Statistical Computing and Data Management for Public Health, PHST 610), a course that expands on the information presented in the core biostatistics course and introduces students to database management and statistical packages; 'Issues in Public Health,' a course designed to provide students with an historical overview of public health and to address cultural and ethical issues in public health; and 'Critical Thinking and Program Evaluation' a course designed to involve students in public health program design, implementation and evaluations. After completion of the above MPH-required courses, students select an area of concentration and are required to take five advanced courses that build on the core public health courses. Additionally, all students must complete a community-based practicum and a culminating course designed to integrate both their academic training and community based experience. Beyond the classroom and field experiences, students are encouraged to attend public health grand rounds, offered once each month by faculty members and focusing on core areas of the discipline, in order to participate in an active process of information interchange vital to development of essential skills of the profession.

All students in the MPH program are required to complete 45 credit hours of instruction over two years of full time study or four to five years of part-time study. One credit hours equals 14 classroom contact hours. The program curricula for full- and part-time options are outlined below. A complete listing of MPH courses can be found in Appendix V-2.

Table V-4: Full-Time MPH Curriculum

Year One	
Semester One (hrs)	**Semester Two (hrs)**
Epidemiology (3)	Environmental Health (3)
Biostatistics I (3)	Biostatistics II (3)
Health Management (3)	Health Behavior (3)
Issues in Public Health (2)	Critical Thinking and Program Evaluation (3)
Year Two	
Semester One (hrs)	**Semester Two (hrs)**
Concentration course (3)	Concentration course (3)
Concentration course (3)	Concentration course (3)
Concentration Course (3)	Practicum (3)
Practicum (3)	Integration (1)

Table V-5: Part-Time MPH Curriculum

Year One	
Semester One (hrs)	**Semester Two (hrs)**
Biostatistics I (3)	Biostatistics II (3)
Issues in Public Health (2)	Critical Thinking and Program Evaluation (3)
Year Two	
Semester One (hrs)	**Semester Two (hrs)**
Epidemiology (3)	Environmental Health (3)
Health Management (3)	Health Behavior (3)
Year Three	
Semester One (hrs)	**Semester Two (hrs)**
Concentration course (3)	Concentration course (3)
Concentration course (3)	Concentration course (3)
Year Four	
Semester One (hrs)	**Semester Two (hrs)**
Concentration course (3)	Integration (1)
Either: Concentration course (3)	Either: Concentration course (3)
OR	Practicum (3)
Practicum (3)	OR
	Practicum (6)

Core Curriculum

All students must complete a traditional core curriculum that includes courses within the five areas of basic public health knowledge: biostatistics, epidemiology, environmental and occupational health, health management and health behavior. A complete listing of MPH courses is given in Appendix V-2, and course descriptions are available in the school catalog, Appendix V-1.

In addition to the above, all students must also complete *Issues in Public Health*, *Biostatistics II* and *Critical Thinking and Program Evaluations*.

Issues in Public Health

Issues in Public Health ("Issues") is a seminar-styled, team learning course that addresses relevant public health issues and associated concepts. It is designed to allow students to critically consider issues in public health that are not fully covered in other core courses. The Issues course also introduces students to cultural competency and public health ethics. These topics are covered through theoretical presentation and practical application. This course's syllabus, as well as all others, can be found in the resource file.

Statistical Computing and Data Management for Public Health (PHST 610, Biostatistics II)

In keeping with the School's focus 'information sciences' this course is designed to introduce MPH students to data processing, data management and the statistical computing tools utilized most often in the field of public health. Students gain skill in preparing and analyzing public health research data through the use of software packages such as Excel, EPI DATA, and SPSS.

Critical Thinking and Program Evaluation

This course is designed to give students basic skills in the evaluation of health and human service programs in community settings. Students will learn critical thinking regarding the purpose, procedures and findings of evaluations, evaluation terminology, ways to conceptualize evaluation tasks, specific evaluation techniques, and guidelines regarding the application and dissemination of evaluation results. Students will also participate with selected team projects at the Louisville Metro Public Health and Wellness and community-based organizations.

Prior to beginning the concentration portion of the curriculum, students must successfully pass all traditional core courses, the *Issues in Public Health*, *Statistical Computing and Data Management for Public Health*, and the *Critical Thinking and Evaluation* courses. After successful completion of the

required curriculum, students select a concentration in one of the five departments. For students considering a concentration in epidemiology or biostatistics, each department will review the student's performance in their respective core course, and for the Department of Bioinformatics and Biostatistics, the student's quantitative GRE scores prior to admitting a student to those concentrations. Additionally, all students are required to successfully complete both the HIPAA compliance and human subjects protection training modules before beginning their practica experiences.

Concentration Curriculum

The concentration portion of the curriculum begins the practical application of the theory presented in the core curriculum and includes courses chiefly determined by the student's concentration offered by one of the five departments. Students also complete the field work portion of the degree program in this part of the curriculum.

Experiential Learning

The Practicum

The practicum is designed to bridge the gap between academia and public health practice by providing the students a field experience during their formal education. To achieve this goal, MPH students are required to synthesize conceptual information presented in their core courses and concentration track, and utilize this information in writing the Learning Contract and Practicum Proposal, in conducting the work specified in the proposal, and in evaluating the completed work. The practicum is designed to be completed over the span of two semesters (six credit hours).

Integrating Learning and Experience in Public Health

The *Integrating Learning and Experience in Public Health* ("Integration") course is a requirement all students must complete. The Integration course serves as the culminating link between the student's academic training and community-based experience through the presentation of their practicum experience and opportunities to interact with public health practitioners. During the first half of the course students are presented with local and regional interdisciplinary scenarios that focus on current public health issues developed and presented by local public health practitioners. Each scenario includes a series of questions about the issue and selected background readings. After the students review the scenario and readings, they are engaged through role playing and general discussion with the practitioner that developed the scenario. During the second half of the course, students will prepare oral, written, and poster presentations covering all or significant parts of the student's practicum experience. The oral presentation will be evaluated by their peers, the faculty and the practicum site mentor. The Integration course is taken during the last semester of the curriculum, typically concurrently with the last semester of the practicum. Additionally, each student is required to complete an oral exit interview with three faculty members covering core competencies during the last semester of the program.

2. Description of the school's policies and procedures regarding practice placements, including criteria for selection of sites, methods for approving preceptors, approaches for faculty supervision and methods of assessment of students.

Process Overview

The policies and procedures for practice placement sites (also called student practicum sites) are determined by several people: the program director, the program coordinator, department concentration coordinators and department academic mentors. The program coordinator works closely with students and departments in setting forth the procedures for conducting practice work. The program coordinator also serves as the administrative repository for all documentation pertaining to practice placements. A practicum handbook is available in the resource file and contains the information needed by students, faculty and practice sites for all aspects of identifying, approving and signing up a practice site; doing and supervising the work; and evaluating the work, the student, the site and the experience.

Identification of the Student's Practicum Advisory Committee: After selection of their area of concentration, MPH students are assigned an academic mentor from that department. The academic mentor also serves as the student's practicum coordinator. The academic mentor has the responsibility to meet with the student at least once each semester to: (1) assess the progress of the student toward

achieving the learning objectives of the MPH program; (2) assess the individual academic and professional goals of the student; (3) discuss options for field placements and special projects as needed: and, (4) address any apparent or emerging problems identified by the student or other faculty members.

Once students have identified their practicum sites, they form practicum advisory committees. The committee is composed of: (1) the student; (2) the community preceptor; (3) the academic mentor; and, (4) other stakeholders deemed appropriate for the successful completion of the practicum. Students are requested to meet with the members of their advisory committee on a quarterly basis.

Selection of a practicum site and community preceptor: Selection of a practicum site involves not just finding a site but identifying a community preceptor, obtaining the organization's agreement to both serve as the site and to sponsor the project, working with the MPH Coordinator to ensure the affiliation agreement is in place, and identifying the deliverables specified by the Learning Contract. The practicum site and community preceptor must be approved by the student's Academic Mentor and department chair prior to developing the Practicum Proposal and Learning Contract. Approval of the community preceptor is based in part on: previous, similar experience with students; years of experience and responsibility within the organization; and ability to assist the student to complete deliverables. The practicum site must also have a signed and fully executed Affiliation Agreement with the SPHIS.

Once the community site and advisory committee are identified, students must complete a Community Site Profile (see Practicum Manual) and submit it to their Academic Mentors. This profile is designed to provide an overview of the site's mission, activities, governance and operations.

Learning Contract and Practicum Proposal Approval: The student's Academic Mentor works with the student to identify a project and develop a Practicum Proposal and Learning Contract. An approved Learning Contract must be signed by the members of the student's Advisory Committee prior to initiating the proposed work at the practicum site.

Journal Assignment: While at the practicum site students are required to keep a written journal. Entries may include: (1) a brief synopsis of activities performed at that site; (2) specific accomplishments or activities completed; (3) problems that occurred, and how they were resolved; and, (4) a description of experiences that provided for learning and professional growth. The journal is submitted to the student's academic mentor as a complete package at the end of the site work of the practicum.

Mid-Point Review: Students are required to meet with their Community Preceptor and complete a Mid-point Review halfway through the practicum. The goal of the Midpoint Review is to help ensure that the practicum is on track and that students are meeting their obligations to the practicum sites.

Completion of the Project: On completion of the practicum students must prepare an oral presentation, a poster, and a written report describing their practicum experience. The oral report and poster will be presented during the *Integrated Learning and Experience in Public Health* course. The student's Academic Mentor and Community preceptor will provide guidance in the preparation and review of the written report and oral and poster presentations.

3. Identification of agencies and preceptors used for formal practice placement experiences for students, by program area, over the last three years.

Table V-6: Practica Sites Selected by Entering MPH Class of 2005

Preceptor	Community Site	Project Description
Dr. Sarojini Kantora	Louisville Metro Public Health and Wellness	Vital statistics records development; Maternal/Child Health issues and concerns
Dr. Guy Furnish,	U of L School of Dentistry	Development of information database for Smile Kentucky
Dr. Toni P. Miles	U of L School of Medicine	Understanding the connection between studying pharmacogenetics and clinical practice; research participation surveys
Dr. Matt Zahn	Louisville Metro Public Health and Wellness	Influenza clinic operations; Pandemic flu preparedness; Flu survey analysis
Sara Jo Best	Lincoln Trail District Health Department, Elizabethtown, KY	Regional preparedness of HRSA Region 5
Wendy Ward,	Gilda's Club Louisville	Non-profit start-up phase and fund raising for Gilda's Club Louisville
Beth Clingaman,	American Diabetes Association, Louisville-Lexington Chapter	School Walk for Diabetes program; non-profit organizational mgmt
Read Harris,	American Red Cross, Louisville, KY Chapter	Develop project mgmt and planning skills; develop quality control and QA plans
Dr. Stephanie Poynter	Family Health Center, Inc.	Client Characteristics of a Community Dental Program
Kay Heady, RN Ryan Irvine	Louisville Metro Public Health and Wellness	Implementation of a Mobile Health Unit: Dental Services for Jefferson County Schools
Gregory M. Skaff	U.S. Army TRADOC System, Abrams Tank Systems	Abrams Tank Injury Database Characterization
Dr. Lisa Markowitz	Community Farm Alliance	Youth Food Diary Project
Tom VanArsdall Andrea Keatley	Cabinet for Environmental and Public Protection, Department for Environmental Protection, Division of Water and Air Quality	Characterization of environmental databases for mercury in the state
Russell Barnett Cynthia Lee	KY Institute for the Environment and Sustainable Development & Air Pollution Control District	Develop a dataset that combines PM2.5 (particulate) and butadiene air monitoring data for linkage with health outcomes data.
Dr. LaCries R. Kidd	James Graham Brown Cancer Center, School of Medicine	Gene-gene interaction and prostate cancer in African American men
Shauna Weis	Environmental Safety Technologies, Inc.	MRSA amongst college athletes
Dr. Lee S. Mayer Ryan Irvine	Dixie Health Center and Dental Center	Patient Absenteeism Characteristics in a Dental Health Clinic

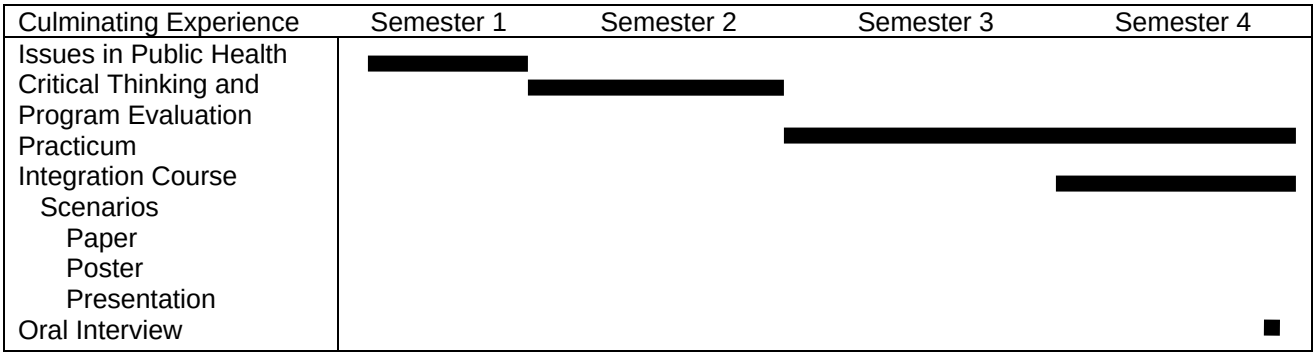
For additional information regarding the MPH student practica, please see the resource file.

4. Identification of the culminating experience required for each degree program. If this is common across the school's professional degree programs, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.

The culminating experience for the MPH program is the successful completion of the following components (discussed in V.B.1). Each component builds on the preceding phase of the culminating experience.

- pass Issues in Public Health (V.B.1);
- pass Critical Thinking and Program Evaluation;
- successfully complete the practicum (V.B.2);
- pass Integrating Learning and Experience in Public Health course;
  - participate in the evaluation and discussion of practitioner developed public health scenarios
  - write and submit a paper discussing the practicum;
  - construct and submit a poster in the American Public Health Association format showcasing the work done for the organization in the practicum; and
  - make an oral presentation of the practicum, its results and other pertinent information.
- successfully complete the oral interview

The following graphic illustrates the sequence and timing of the components of the culminating experience.



5. Assessment of the extent to which this criterion is met.

This criterion is met. Through a comprehensive core curriculum and public health practice experience in the form of a community-based practicum, the MPH students acquire skills and experience in the application of basic public health concepts and of specialty knowledge in the five core areas in the solution of public health problems.

- The program has developed a practicum manual that details:
  - Policies and procedures regarding the practicum;
  - Methods for assessment of preceptor sites and mentors by students;
  - Methods for assessing student performance by site mentors and faculty advisors.
- Formal agreements are in place for practicum sites and data summarizing the locations and preceptors involved are provided;
- The integration course provides a culminating experience focused on demonstrating the integration of knowledge through interactive presentations by public health practitioners and oral and written presentations of the students' practicum experiences.
- Oral exit interviews assist with the determination of competencies in the core areas of public health practice.

Criterion V.C.: For each program and area of specialization within each program identified in Criterion V.A., there shall be clear learning objectives.

Expected Documentation

1. **Identification of a set of learning objectives for each program of study identified in the matrix for V.A. If individualized learning objectives are used, identification of a sample set that is typical of each program of study and that can be verified through on-site inspection.**

Each degree program at SPHIS has learning objectives in place for all courses offered. The MPH program has mapped all core courses to the core and cross-cutting competencies identified by the Association of Schools of Public Health (ASPH). The on-site resource file contains a list of all course-specific learning objectives, a list of competencies, a mapping of these objectives to core competencies, and a matrix identifying where each competency is demonstrated. Learning objectives for concentration courses are currently being mapped to the core and cross-cutting competencies; this process should be completed by Fall 2007. Each academic program is also mapping learning objectives to discipline-specific competencies and should complete this process by the same deadline.

MPH

The MPH Program is designed to prepare students for the practice of public health for today and the future. The program emphasizes knowledge and skill acquisition, community experience and collaborative activities. With supervision by the faculty, students are responsible for arranging many of their own learning experiences, including their practica and community projects. The program aims to have graduates ready to assume existing public health roles and to grow into new roles as needs emerge.

The competencies are organized into two sections: core and concentration-specific.

Core Competencies

The MPH program is transitioning to the application of the ASPH terminology specified by the five discipline-specific competencies and the seven interdisciplinary/cross-cutting competencies for the MPH degree.

Objectives:

1. Use Bloom's Taxonomy (1956) to target levels of educational competency for the core and advanced MPH courses within each Department of the SPHIS.
2. Map the learning objectives for each MPH core and advanced course to specific competencies within each ASPH core and cross-cutting category.
    a. This has been achieved for the MPH core courses and is included in the resource file.
    b. The target date for completing the MPH advanced courses is September 1, 2007.
3. Map the competencies in each ASPH core and cross-cutting category to specific MPH core and advanced courses and assign a target level of educational competency (1-6) for each ASPH competency.
    a. Scoring levels
        1. Knowledge: recall or recognize information
        2. Comprehension: understand meaning, re-state data in one's own words, interpret, extrapolate, translate
        3. Application: use or apply knowledge, put theory into practice, use knowledge in response to real circumstances
        4. Analysis: interpret elements, organizational principles, structure, construction, internal relationships; quality, reliability of individual components
        5. Synthesis: develop new unique structures, systems, models, approaches, ideas; creative thinking, operations
        6. Evaluation: assess effectiveness of whole concepts, in relation to values, outputs, efficacy, viability; critical thinking, strategic comparison and review; judgment relating to external criteria
    b. This has been achieved for the MPH core courses and is included in the resource file.
    c. The target date for completing the MPH advanced courses is September 1, 2007.

Concentration-Specific Competencies

The following list reflects the set of SPHIS-developed competencies as originally outlined and mapped (see resource file). We are working toward replacement of these with ASPH-defined competencies by Fall 2007.

Biostatistics Concentration

- Demonstrate use of standard statistical software to analyze health data.
- Analyze moderately complex health data using methods involving common linear statistical models.
- Participate in the design, analysis and reporting of health data.
- Accurately interpret and analyze statistical content in the health literature.

Environmental and Occupational Health Concentration

- Demonstrate knowledge and critical analysis of theories, techniques and applications in the following areas:
  - Major sources of environmental and occupational health hazards
  - Mechanisms of illness and injury for environmental and occupational factors
  - Major health problems with an environmental component
  - Regulation and legislation of environmental health hazards
  - Environmental and occupational health policies
  - Environmental and occupational health risk assessment
- Demonstrate application of knowledge in one or more of the above areas in a real-world, public health setting.

Epidemiology Concentration

- Demonstrate understanding and application of:
  - Natural histories and impacts of major chronic, infectious and degenerative diseases.
  - Data needs and analytic methods for determining standard epidemiological measures.
  - Sources of bias in epidemiological investigations.
  - Major determinants of incidence, transmission, prevalence, progression and distribution of common diseases.

Health Behavior and Cognition Concentration

- Demonstrate knowledge and critical analysis of theories, techniques and applications in the following areas:
  - Health behavior and health-related risk analysis
  - Health knowledge seeking and utilization
  - Health cognition
  - Health decision making
  - Health communication and education
  - Community health promotion (including program planning, evaluation and policy advocacy)
- Demonstrate application of knowledge in one or more of the above areas in a real-world, public health setting.

Health Management Concentration

- Demonstrate knowledge and critical analysis of theories, techniques and applications in the following areas:
  - Health organization and financial management
  - Health access, quality and cost
  - Health law and ethics
  - Health transaction cost economics
  - Complex adaptive systems and health management
  - Health legislation and policy
- Demonstrate application of knowledge in one or more of the above areas in a real-world, public health setting.

MS in Biostatistics – Decision Sciences (MS/BDS)

MS/BDS — concentration-specific competencies: Biostatistics

At the end of this program, students will have demonstrated the ability to:

- Read, interpret and evaluate for appropriateness the biostatistics content of scientific and biomedical journal articles.
- Analyze moderately complex research data using statistical methods involving common linear statistical models
- Assist researchers in planning research studies, proposing and evaluating statistical methods and computing power analyses.
- Write statistical methods section for grant proposals, clinical trial protocols and journal articles.
- Manage data using spreadsheet and database software.
- Use standard statistical and graphics computer packages including SAS and Microsoft Excel
- Keep abreast of statistical methods literature to evaluate and utilize new statistical methods.

MS/BDS — concentration-specific competencies: Decision Science

At the end of this program, students will have demonstrated the ability to:

- Read and critically evaluate decisions analyses published in the literature.
- Provide consultation with researchers and decision makers about decision analysis methods, problems and results.
- Perform decision analysis using the most appropriate of several techniques to solve problems, including the understanding and application of decision analysis software packages.
- Understand current theories of decision making and their application.
- Understand and apply the concepts of public health and information sciences to clinical decision making and decision analysis.
- Communicate the results of decision analysis and other clinical research to decision makers, peers and to the community through written and oral presentations and publications.

MS in Epidemiology (MS/Epi)

At the end of this program, students will have demonstrated the ability to:

- Read, appropriately interpret and evaluate epidemiologic research literature with regard to issues of error, bias and criteria for causality
- Demonstrate understanding of:
  - Natural histories and impacts of major chronic, infectious and degenerative diseases
  - Data needs and analytic methods for determining standard and advanced epidemiologic measures
  - Sources of bias in epidemiologic investigations
  - Major determinants of incidence, transmission, prevalence, progression and distribution of common diseases
  - Knowledge of the socioeconomic and geographic distribution, risk factors, and etiology of major acute, infectious and chronic morbidity and mortality
- Design a sound epidemiologic research study with respect to:
  - The merits and limitations of cross-sectional, retrospective and prospective designs
  - Methods of disease surveillance and case ascertainment
  - Methods of population-based sampling
  - Sample size and statistical power calculation
  - Issues in the measurement of exposure and disease transmission
  - Identification and correct interpretation of potential biases in study design

MSc in Clinical Investigational Sciences (MSc/CIS)

At the end of this program, students will have demonstrated the ability to:

- Identify an important clinical research question and state it as a testable hypothesis.
- Design a research protocol in collaboration with other clinical research professionals to test the research hypothesis;

- Operationalize key constructs and create a sound data collection and management protocol.
- Manage the preparation of all materials, including Informed Consent Forms, for submission to an IRB.
- Assemble and manage a multidisciplinary team of clinical research professionals who collect, monitor, manage and analyze the data.
- Communicate study results to professional and lay audiences through effective oral and written communication.

PhD in Biostatistics – Decision Sciences (PhD/BDS)

PhD/BDS — concentration-specific competencies: Biostatistics

As for students receiving MS with a concentration in Biostatistics, plus:

- Thoroughly understand the broad discipline of biostatistics, including its theoretical underpinnings, its history of development, current applications and areas of active inquiry.
- Demonstrate understanding of advanced biostatistical operations.
- Demonstrate ability to conduct independent research.
- Advance the field of biostatistics through original research.

PhD/BDS — concentration-specific competencies: Decision Science

As for students receiving MS with a concentration in Decision Science, plus:

- Thoroughly understand the broad discipline of decision science including its theoretical underpinnings, its history of development, current applications and areas of active inquiry.
- Advance the field of decision science through original research.
- Teach, advise and mentor the next generation of decision science professionals.

PhD in Public Health Sciences (PhD/PHS)

PhD/PHS – concentration-specific competencies: Environmental Health

To graduate, a student in the PhD in Public Health Sciences with a concentration in Environmental Health must demonstrate the following competencies:

1. Demonstrate an in depth knowledge of the history of environmental health.
2. Mastery of experimental study designs, ability to construct optimal designs for specific hypotheses, and ability to perform designed studies and analyze the data.
3. Ability to critically evaluate published environmental health research.
4. Demonstrate expertise in one or more environmental health specialty such as risk assessment, environmental management, environmental and occupational toxicology.
5. Practical knowledge of issues in research management including:
    a. Formation and leadership of multidisciplinary teams.
    b. Staffing, budgeting, tracking.
    c. Subject recruitment and retention.
    d. Data quality control and data safety management.
    e. Funding mechanisms and grantsmanship.
    f. Research ethics and regulations.
6. Professional quality peer-review, oral and poster presentation, report, grant, and manuscript writing.
7. Mentoring of junior peers.

PhD/PHS – concentration-specific competencies: Epidemiology

As for students receiving the MS in Epidemiology, plus:

1. Demonstrate understanding the history, philosophy, and theory of epidemiology
2. Demonstrate mastery of experimental and observational study designs and the ability to identify optimal designs for specific hypotheses
3. Design and operationalize a sound epidemiologic research study including:
    a. Formation and leadership of multidisciplinary teams
    b. Staffing, budgeting, funding mechanisms and grantsmanship
    c. Subject recruitment, retention and tracking
    d. Data quality control and data safety management
    e. Questionnaires and biomarkers for health status, exposure and susceptibility

   f. Appropriate statistical methods for evaluating risk and prognosis
   g. Research ethics and regulations
4. Expertise in one or more epidemiologic specialty such as nutritional, molecular, genetic, cancer, or chronic disease epidemiology
5. Professional quality peer-review, oral and poster presentation, report and manuscript writing
6. Mentoring of junior-peers

PhD/PHS — concentration-specific competencies: Health Management

To graduate, a student in the PhD concentration in Health Management must demonstrate the following competencies:

1. In depth knowledge of the history of Public Health Management
2. Mastery of experimental research study designs, including qualitative as well as quantitative, and the ability to identify optimal designs for specific hypotheses.
3. Ability to critically evaluate published research related to health management.
4. Expertise in one or more health management specialties such as information systems, planning & evaluation, human resource management, health policy analysis, development & implementation, budgeting & financial management, health economics, system dynamics, network science and social network analysis.
5. Practical knowledge of issues in research management including:
   a. Formation and leadership of multidisciplinary teams.
   b. Staffing, budgeting, tracking.
   c. Data quality control and data safety management.
   d. Funding mechanisms and grantsmanship.
   e. Research ethics and regulations.
6. Professional quality peer-review, oral and poster presentation, report, grant, and manuscript writing.
7. Mentoring of junior peers.

2. A description of the manner in which learning objectives are developed, used and made available to students.

Distinct processes are in place for generation of professional and academic degree program competencies. The school has recently adopted the ASPH core and cross-cutting competencies for the MPH program. For the academic programs, department chairs work through an iterative process with their faculty to generate competencies. Current trends in field work, future directions of the public health field, recommendations from the Community Advisory Board and academic requirements influence the development of the competencies. Once those competencies are developed, they are submitted to the school's Curriculum Committee. The committee reviews those competencies and provides advice and suggestions as needed. Upon completion of any suggested changes or additions, the competencies are approved by the Committee and submitted to the Office of the Dean. After review by the Dean's Executive Committee, the competencies are sent to the Faculty Forum for approval. Program competencies are distributed to students during orientation and are achieved through coursework, student field work and experiences.

Learning objectives for coursework in each program are developed by instructors and program coordinators. These are then reviewed by the SPHIS Curriculum Committee and forwarded to the Graduate School Curriculum Committee for final approval. Learning objectives will be mapped to program competencies and matrices will be created to display the courses in which each competency is embedded. Learning objectives for each course are distributed with their respective syllabi.

3. A description of the manner in which the school periodically assesses the changing needs of public health practice and uses this information to establish the learning objectives for its educational programs.

The school's Curriculum Committee is responsible for keeping abreast of developments in public health practice, as well as assessments of how competencies coincide with those developments. For the MPH program, the program director, along with the program coordinator, seeks to ensure that students receive up-to-date information in their coursework.

Every two years, the Curriculum Committee, with input from all faculty through department chairs, reviews in detail each degree program in the school, with special attention to its competencies and how they are mapped to the courses. The next review will begin at the end of the 2007-08 academic year. Departmental reviews of discipline-specific materials will provide additional input to this process by sending recommendations for revisions to the Curriculum Committee. Faculty in each program contribute to keeping their program's competencies current through experience gained from service and consulting projects, research projects, professional meetings and organizations, keeping up with the literature, informal discussions with networks of colleagues and other means. Beginning in 2007, an annual survey of practicum preceptors of our graduates, as well as Community Advisory Board members, will be formulated, submitted and analyzed in order to provide additional input for this process.

Changing needs of public health practice are also obtained from close working relationships with the local and state health departments and recommendations from the school's Community Advisory Board and the following less formal sources:

- students engaged at the field practicum sites;
- community site preceptors;
- community, non-profit and for-profit organizations; and
- the greater university, as applicable.

Specific assessments of current practices and policies are performed in conjunction with the strategic evaluation planning process (see Section X). The school's Community Advisory Board and Council of Chairs and Deans will be involved in this annual process. Both groups are covered in Section II.B and aid in informing program directors and others of the current trends and topics in the field of public health and related areas of interest.

4. Assessment of the extent to which this criterion is met.

This criterion is met. We have competencies established for each degree program and learning objectives for each course. The process of evaluation described has been fully formulated and will begin at the end of the 2007-08 academic year.

Criterion V.D.: There shall be procedures for assessing and documenting the extent to which each student has attained these specified learning objectives and determining readiness for a public health practice or research career, as appropriate to the particular degree.

Expected Documentation

1. Description of the procedures used for monitoring and evaluating student progress in meeting stated learning objectives.

Students in the various degree programs are monitored and evaluated on a continuing basis. For the professional degree, students are expected to demonstrate achievement of competencies through the successful completion of course work, the practicum and a process of academic mentoring designed to assess progress towards achieving the goals of the MPH program and the academic and professional goals of the student. For the academic degrees, successful completion of courses serves as a first-line method for assessment. This is augmented by completion of a major project, documentation and presentations that vary slightly from academic program to academic program.

MPH

Competency Assessment

The monitoring and evaluation of student progress in meeting stated learning objectives is a responsibility shared by the individual course instructors, the student's academic mentor, and the MPH Program Director and Program Coordinator. All learning objectives are mapped to specific courses in the MPH curriculum as shown in the resource file. Both SPHIS-developed and ASPH learning objectives are currently utilized for all core courses.

All classes in the MPH program, whether didactic courses, independent studies or the practicum, are evaluated and students are assigned a letter grade. Course grades are based on the performance of the student as required by the particular course and include such items as the quality of written assignments; the proportion and quality of participation in class; the proportion of correct answers on written or oral tests; and oral in-class presentations. The syllabus for each MPH course is built around the program's learning objectives; therefore performance in each course is an indication that students are meeting the stated learning objectives. For the practicum, student performance is graded by their site mentors, and their written, oral and poster reports are graded by their academic mentors. Additionally, student practicum site mentors provide an assessment of their performance and skills as a public health professional.

During the first year of the MPH program, the director serves as the academic mentor for all MPH students. In the second year of the program, students are assigned a faculty academic mentor from their concentration department. The academic mentor will also serve as the student's practicum coordinator. It is the responsibility of the academic mentor to meet with the student to: (1) assess the progress of the student toward achieving the learning objectives of the MPH program; (2) assess the individual academic and professional goals of the student; (3) discuss options for field placements and special projects as needed; and (4) address any apparent or emerging problems identified by the student or other faculty members.

During each semester in which a student registers, the MPH program office maintains steady contact with program faculty in reviewing the student's performance and progress.

- At the beginning of each semester, the MPH program will distribute to each academic mentor transcripts for each of their advisees.
- At the mid-point of each semester, the MPH program director will request that each course director identify any students that are at risk of failing their course.
- At the end of each semester, the MPH program director will review each student's grades to determine if any student is to be placed on academic probation.
- For those students identified at academic risk, the program director, in consultation with the student's academic mentor and specific course director will discuss their academic performance and, if necessary, develop a remediation plan (see below).

It is the responsibility of the student, together with their academic advisor, to monitor progress toward the requirements of the program, the learning objectives of the program and the individual educational goals of the student.

Remediation Plan

The remediation plan may require any of the following: (1) additional course work; (2) special studies or projects focused on addressing the areas of academic or non-academic skills; or (3) other activities or actions deemed necessary to enable the student to perform at an acceptable level. Remediation for specific courses must be approved by the instructor for each course. The program director will place a copy of the remediation plan in the students file.

Remediation must be accompanied by the student's active participation in the educational program as demonstrated by regular attendance, individual initiative, and utilization of resources available. Decisions regarding remediation will be made on an individual basis after considering all pertinent circumstances, review of the academic record, and consultation with the student's academic mentor, course director and the MPH program director.

Comprehensive Competency Assessment Interview

As a culminating evaluation of a student's ability to integrate across the core disciplines the MPH program is experimenting with a 'Competency Assessment Interview' during the final semester before completing the MPH program. The purpose of the interview is to provide an opportunity for an interactive discussion between the student and faculty members and to assess the student's competency related to his/her understanding of the key issues, concepts and functions of Public Health. This process would serve to provide feedback to the student regarding their readiness to enter the Public Health workforce and to the MPH faculty regarding how the program curriculum might be strengthened and learning improved.

As initially implemented, students were provided 25 discussion questions, five from each core area, the semester prior to their scheduled graduation. During the semester, students were scheduled to meet with a panel of three faculty from different core areas in an interview format. Each faculty member posed a question from their area of concentration and, after the student's response, the faculty engaged the student in an interdisciplinary discussion of the topic. This process, initiated in 2007, is currently being re-evaluated. The list of questions, summary comments of the faculty, and summary follow-up discussions of the process and future plans are included in the resource file. Plans are in place for expanding the oral interview and implementing a comprehensive written competency exam by Spring 2008.

MS/BDS

The competencies for the MS in Biostatistics-Decision Science are embedded in the learning objectives for coursework, thesis and oral presentation, each of which is structured to address several learning objectives. Achievement of the competencies is demonstrated by successfully meeting the requirements for the degree. Formal mapping between detailed learning objectives for the courses and more global competencies for the program is under development. Students in the MS/BDS program are required to write a thesis and make an oral presentation of the thesis. Working with his or her faculty course advisor, the student selects a thesis topic that will meet the student's interests and demonstrate achievement of learning objectives.

MS/Epi

The competencies for the MS in Epidemiology are embedded in the objectives for coursework, thesis and oral presentation. Achievement of these competencies is demonstrated by successfully meeting the requirements for the degree which culminate in a written thesis that may take the form of an original, professional quality, publishable paper in the field of epidemiology The monitoring and evaluation of student progress in meeting the stated competencies is a responsibility shared by the student, the individual course instructors, the student's academic advisor, and the chair of the Department of Epidemiology and Population Health.

MSc/CIS

The competencies for the MSc in Clinical Investigation Sciences are also contained in the competencies for coursework, writing project and oral presentation. The student must prepare and present a grant

application suitable for submission to a funding agency, a paper suitable for submission to a peer-reviewed journal, or a formal thesis. Achievement of the program's competencies is demonstrated by successfully completing the degree requirements.

PhD/BDS and PhD/PHS

The competencies for both the PhD in Biostatistics-Decision Science and the PhD in Public Health Sciences are represented by the requirements for the degree. In addition to coursework, these requirements include a qualifying examination, preparation of a dissertation and oral defense of the dissertation. The PhD/BDS program also requires the student to provide services in the department's Statistical Consulting Center and to lead and present two research seminars. Achievement of each program's competencies is demonstrated by successfully meeting the requirements for the respective degree. The PhD/PHS Concentrations in Environmental Health and Health Management also require successful completion of assignments to work with master's students on their research, theses, presentations and posters.

2. Identification of outcomes which serve as measures by which the school will evaluate student achievement in each program, and presentation of data assessing the school's performance against those measures over the last three years.

MPH

The graduate program in public health uses a variety of measures to assess the performance of students. To receive the MPH degree, students must satisfactorily complete all required academic courses with a minimum overall grade point average of 3.0. Satisfactory progression through the program is indicated by student achievement of the course requirements. Each academic term, student performance is assessed through a review of individual grade point averages by the student's academic advisor and program director.

Outcome measures used to evaluate student achievement and program performance to date include:

- Percent of matriculated students receiving less than a B grade in each core course: class of 2007, 15%: 3 out of 20 (17 FT and 3 PT); class of 2008, 19%: 4 out of 21 (20 FT and 1 PT)
- Number of matriculated students having an overall GPA below 3.0 each semester: please see Table V-7.
- Number of students receiving unsatisfactory evaluations in Internship or Practicum: currently in progress, none to date.
- Percentage of students completing all degree requirements within four years: not applicable.
- Number of students that are terminated annually from the program for academic reasons: none to date.
- Number of students that withdraw annually from the program: class of 2007, five: educational (2), sought employment (1), medical (1) and personal (1); class of 2008, six: unknown reasons for withdrawal (3), educational (2) and personal (1).

Table V-7: Number of matriculated students having an overall GPA below 3.0

Semester	Class of 2007	Class of 2008
Fall 2005	1	
Spring 2006	0	
Fall 2006	1	6
Spring 2007	In progress.	

Additional criteria will include the following.

- Degree completion (graduation) rate – Upon enrollment, students fall into cohorts depending on their expected graduation date. In addition students are required by the Graduate School to complete their degrees within six years after enrollment. Our goal is at least 80% for each cohort over a six-year periods.
- Employment rate – Graduates of the school should be able to find discipline-related employment within twelve months after graduation. Our goal is at least 80% employment.

- Graduate satisfaction – Graduates will be surveyed to assess whether they felt adequately prepared for their first job after graduation. Our goal is at least 80% satisfaction with preparedness.
- Employer satisfaction – Initial employers of our graduates will be surveyed to assess whether they felt the graduates were adequately prepared for the jobs they were hired for. Our goal is at least 70% satisfaction.
- Scholarly papers, presentations, posters and grants submitted or awarded – Students will be monitored and graduates will be surveyed for these events. Our goals are for at least 10% of students to achieve this goal while earning their degrees and at least 20% of graduates during a three-year period after graduation.
- Certified Health Education Specialists (CHES) exam success rate – MPH students and graduates with a concentration in health behavior and cognition may choose to take the CHES examination. Our goal is for at least 90% of those who take the CHES exam to pass it on the first attempt.
- Public Health Practitioner Certification exam success rate – Our goal is for at least 90% of those who take this exam to pass it on the first attempt after it is first offered in 2008.

MS/BDS

Last Year's Plans for Improvement

- Students will acquire training necessary for their career choice
- Students will acquire mastery of subject matter in the program
- Students will acquire the skills necessary to collaborate on a research project with a clinical investigator.

Major Student Learning Outcomes

1. Read, interpret, and evaluate for optimality the biostatistics content of scientific and biomedical journal articles.
2. Analyze moderately complex research data using statistical methods involving common linear statistical models (Biostatistics only)
3. Assist researchers in planning research studies, proposing and evaluating statistical methods and computing power analyses.
4. Write statistical methods section for grant proposals, clinical trial protocols, and journal articles.
5. Manage data using spreadsheet and database software.
6. Use standard statistical and graphics computer packages including SAS and Microsoft Excel, and
7. Keep abreast of statistical methods literature to evaluate and utilize new statistical methods.
8. Read and critically evaluate decisions analyses published in the literature.
9. Provide consultation with researchers and decision makers about decision analysis methods, problems, and results.
10. Perform decision analysis using the most appropriate of several techniques to solve problems, including the understanding and application of decision analysis software packages.
11. Understand current theories of decision making and their application.
12. Understand and apply the concepts of public health and information sciences to clinical decision making and decision analysis.
13. Communicate the results of decision analysis and other clinical research to decision makers, peers, and to the community through written and oral presentations and publications.

Assessment Strategies/Measures/Criteria

Learning of outcomes is assessed in Practicum course (PHST 603) which is required for all MSPH students in either the Decision Science or Biostatistics concentration. Projects required to complete practicum course require use of all aforementioned learning outcomes.

Specific Learning Outcomes Achieved

All students enrolled in PHST 603 have successfully completed research utilizing aforementioned skills

Plans for Improvement

This goal was met.

MS/Epi

To receive the MS degree in Epidemiology, students must satisfactorily complete all required academic courses with a minimum overall grade point average of 3.0 and a written thesis with an oral presentation/defense. Satisfactory progression through the program is assessed through review of each student's grade point average and narrative evaluations by the student's instructors and academic advisor to be submitted to the department Chairman at the end of each semester.

Outcome criteria for student and program performance will include:

- Number of matriculated students receiving less than a 3.0 in any required course
- Number of matriculated students with a grade point average less than 3.0 in any semester
- Number of students who are terminated annually from the program for any reason
- Number of students who withdraw from the program
- Percent of students completing all graduation requirements within three years
- Number of students who advance from the MS to the PhD concentration in Epidemiology
- Publication of thesis or other scholarly work
- Post-graduate membership in epidemiologic professional societies

MSc/CIS

Last Year's Plans for Improvement

None.

Major Student Learning Outcomes

1. Students will possess the skills to evaluate the scientific literature.
2. Students will develop relevant communication skills including oral and written presentation of research findings, report writing, and grant preparation.
3. Students will gain significant experience and expertise in undertaking an appropriate research problem/topic, its planned investigation and execution, and biostatistical analyses.

Assessment Strategies/Measures/Criteria

1. Assessment takes place via examination of students' literature reviews/critical evaluations of the literature.
2. Each student will publish one article, manuscript or book chapter (or equivalent) and make one presentation at a local, state or national conference each year. Finally, spoken and written communication skills will be assessed through evaluation of many learning activities such as oral and written presentations, class logs and journals, formal written papers, written tests and presentation of individual and group projects.
3. See #2 above.

Specific Learning Outcomes Achieved

1. 100% of students have a GPA of 3.5 or higher in the course, "Evaluating the Health Care Literature."
2. This information will be available in the on-site resource file.
3. This information will be available in the on-site resource file.

Plans for Improvement

1. 100% of students will demonstrate competency as determined by a grade no lower than "B.". We will also examine students' self-assessed strengths and weaknesses on their evaluation of the literature.
2. Offer discipline-specific writing workshops to students. Sponsor students in submitting their work to "Research!Louisville." Students will be encouraged to present aspects of their thesis at national and international scientific meetings. Funds will be identified to provide additional opportunities and attempts will be made to provide students with awareness of funding opportunities (e.g., the University of Louisville student travel fund). A weekly session ("Publication Support Group") will be initiated, where MSc/CIS students meet along with a faculty advisor to the group, and discuss each other's papers. The intent of the group is to improve their work to make it suitable for publication. Guidebooks and information on publishing will be made available to all students.

3. The MSC/CIS curriculum has recently been revised, transitioning from a MSPH degree to a MSc degree. Thus, courses that may only be tangential to the skills needed for patient-oriented research are no longer required. Courses much more relevant to the competencies required for clinical research were added.
4. Other plans include the encouragement and support of mentors in their establishment and maintenance of contact with students. We will establish or enhance systems for generating feedback from students, faculty, and staff about the status of the climate of the training program and utilize survey information in formulating future strategies. Practices or policies that may have negative impacts or create barriers to graduation for particular populations will be identified; coordinated strategies for addressing any issues will be identified. We will identify and/or develop faculty workshops on assisting students to complete their studies in a timely way.

PhD/BDS

Last Year's Plans for Improvement

- Students will acquire training necessary for their career choice
- Students will acquire mastery of subject matter in the program
- Students will acquire the skills necessary to collaborate on a research project with a clinical investigator.

Major Student Learning Outcomes

1. Read, interpret, and evaluate for optimality the biostatistics content of scientific and biomedical journal articles.
2. Analyze moderately complex research data using statistical methods involving common linear statistical models (Biostatistics only)
3. Assist researchers in planning research studies, proposing and evaluating statistical methods and computing power analyses.
4. Write statistical methods section for grant proposals, clinical trial protocols, and journal articles.
5. Manage data using spreadsheet and database software.
6. Use standard statistical and graphics computer packages including SAS and Microsoft Excel, and SPSS.
7. Keep abreast of statistical methods literature to evaluate and utilize new statistical methods.
8. Thoroughly understand the broad discipline of biostatistics, including its theoretic underpinnings, its history of development, current applications, and areas of active inquiry.
9. Demonstrate understanding of advanced biostatistical operations.
10. Demonstrate ability to conduct independent research.
11. Advance the field of biostatistics through original research.
12. Read and critically evaluate decisions analyses published in the literature.
13. Provide consultation with researchers and decision makers about decision analysis methods, problems, and results.
14. Perform decision analysis using the most appropriate of several techniques to solve problems, including the understanding and application of decision analysis software packages.
15. Understand current theories of decision making and their application.
16. Understand and apply the concepts of public health and information sciences to clinical decision making and decision analysis.
17. Communicate the results of decision analysis and other clinical research to decision makers, peers, and to the community through written and oral presentations and publications.
18. Thoroughly understand the broad discipline of decision science including its theoretic underpinnings, its history of development, current applications, and areas of active inquiry.
19. Advance the field of decision science through original research.

Assessment Strategies/Measures/Criteria

Learning of outcomes is assessed through completion of dissertation, required for the PhD in either concentration.

Specific Learning Outcomes Achieved

All students who have completed PhD degree have successfully completed and defended dissertation.

Plans for Improvement

This goal was met.

PhD/PHS – concentrations in Environmental Health, Epidemiology and Health Management

The school is currently in the process of mapping learning objectives for all coursework to competencies in the PhD/PHS concentrations. Utilizing a process similar to that employed for the MPH, learning objectives for all coursework will be mapped to competencies. A matrix will be developed to display the coursework in which the competencies are embedded.

Successful completion of the following:

- all required coursework with a "B" grade or better;
- PhD qualifying exam;
- demonstration of capabilities to conduct a successful literature search;
- preparation and defense of a dissertation proposal;
- dissertation research;
- final dissertation document; and
- final oral defense of dissertation.

The development of program-level evaluation criteria are under development and will be completed by Fall 2007.

3. If the outcome measures selected by the school do not include degree completion rates and job placement rates, then data for these two additional indicators must be provided, including experiential data over the last three years. If degree completion rates, in the normal time period for degree completion, are less than 80 percent, an explanation must be provided. If job placement rates, within 12 months following award of the degree, are less than 80 percent, an explanation must be provided.

Table V-8: Number of Graduates by Program, Fall 2002 through Spring 2006

Degree Program	2002-03	2003-04	2004-05	2005-06	2006-07[2]
MPH					16
MS/BDS	6	3	1	5	3
MS/Epi					
MSc/CIS	10	11	4	12	9
PhD/BDS	0	0	1	1	0
PhD/PHS	0	0	0	3	3
Total	16	14	6	21	31

Institutional Research and Planning will not calculate graduation rate. The university allows six years for completion of graduate degrees. Only three degree programs, the MS/BDS, MSc/CIS and PhD/BDS, have been in existence for the required period for calculation of these rates. The graduation rate of the cohort of students entering the MSc/CIS program in Fall 1999 was 100% (3/3), and the rate of the cohort entering in Fall 2000 was 64% (9/14). The graduation rate of the cohort of students entering the MS/BDS program in Fall 2000 was 100% (3/3), and the rate of the cohort entering the PhD/BDS program at the same time was 50% (1/2). However, one student is still enrolled in the PhD/BDS program after being approved for a one-year leave of absence the Dean of the Graduate School.

The cumulative MS/BDS and PhD/BDS job placement rates are 100% for the class entering in Fall 2000. Job placement data for the MSc/CIS program are not applicable, as virtually all are full-time clinicians.

4. Assessment of the extent to which this criterion is met.

[2] Number of graduates for 2006-07 are estimated.

This criterion is partially met. A comprehensive process for monitoring and evaluating student progress in meeting learning objectives has been established. Official six-year graduation rates are available only for MS/BDS, MSc/CIS and PhD/BDS programs. Given that our MPH students have not completed the full two-year cycle of the curriculum, we do not have degree completion or job placement rates for these students at this time; 2007 graduation rates and preliminary placement data will be available in the resource file.

Criterion V.E.: If the school also offers curricula for academic degrees, then students pursuing them shall have the opportunity and be encouraged to acquire an understanding of public health problems and a generic public health education. These curricula shall cover as much basic public health knowledge as is essential for meeting their stated learning objectives.

Expected Documentation

1. **Identification of all academic degree programs, by degree and area of specialization. The matrix in V.A. may be referenced for this purpose.**

The matrix in Section V.A.1 lists all academic degree programs, which are the following:

- MS in Biostatistics-Decision Science
- MS in Epidemiology
- MSc in Clinical Investigation Sciences
- PhD in Biostatistics-Decision Science
- PhD in Public Health Sciences, Concentration in Environmental Health
- PhD in Public Health Sciences, Concentration in Epidemiology
- PhD in Public Health Sciences, Concentration in Health Management

2. **Identification of the means by which the school assures that students in research curricula have the opportunities and are encouraged to acquire a public health orientation. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.**

In defining public health broadly as population health, all students have equal opportunity and access to acquire public health experience. In particular, students within academic degree programs have public health-oriented concepts presented throughout their respective curricula. All MSc program students are now required to take the MPH core course entitled Introduction to Biostatistics. MS/BDS program students are required to take the MPH core courses entitled Introduction to Epidemiology and Introduction to Environmental Health. All PhD degree students, except those in the PhD/PHS concentration in epidemiology, are required to take Introduction to Epidemiology or equivalent coursework. All of these core MPH courses naturally emphasize public health issues, concepts, and examples. All students are also encouraged to take additional public health courses as electives.

Moreover, all of our students have equal access to and are encouraged to participate in school-wide activities. Participation in public health grand grounds, student organizations like the Kentucky Public Health Association/UofL Student Chapter and other student activities like National Public Health Week are open to all students. These activities provide an opportunity to orient students in research programs to the practice of public health.

3. **Identification of the culminating experience required for each degree program. If this is common across the school's academic degree programs, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.**

With several academic degree programs offered at SPHIS, each degree program within its respective department has a specific experience that serves as the culmination of a student's matriculation. The culminating experience for each program is identified below.

MS/BDS

Students will make presentations during the department's seminar/journal club course and are required to complete a thesis and an oral presentation at the end of coursework.

MS/Epi

Students will be required to make oral presentations in department seminars and journal clubs, poster presentations at professional meetings, and to complete a thesis that may take the form of a publishable paper.

MSc/CIS

Students are required to complete one of the following and an oral presentation at the end of coursework: a formal thesis, a professional paper suitable for submission to a peer-reviewed journal, or a grant application suitable for submission to a funding agency.

PhD/BDS and PhD/PHS Concentrations in Environmental Health, Epidemiology and Health Management

Students are required to complete and orally defend a dissertation at the completion of their coursework.

4. Assessment of the extent to which this criterion is met.

This criterion is met. As we grow in both faculty and course offerings, we will increase opportunities for students in academic degree programs to pursue and acquire understanding of the broadest possible range of public health issues.

Criterion V.F.: The school shall offer at least one doctoral degree, which is relevant to one of the five specified areas of basic public health knowledge.

Expected Documentation

1. **Identification of all doctoral programs offered by the school, by degree and area of specialization. The matrix in V.A. may be referenced for this purpose. If the school is a new applicant and has no active doctoral program, a description of plans and a timetable for offering a doctoral program must be presented, with university documentation supporting the school's estimate.**

The matrix in V.A.1 lists all doctoral degree programs. The school offers a PhD program in Public Health Sciences with concentrations in Environmental Health, Epidemiology and Health Management. The Department of Bioinformatics and Biostatistics offers a PhD program with concentrations in decision science and in biostatistics.

2. **Assessment of the extent to which this criterion is met.**

This criterion is met. Four doctoral degree programs are in place and an additional PhD concentration is being planned for implementation within the next year.

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

Expected Documentation

1. Identification of joint degree programs offered by the school and a description of the requirements for each.

The matrix in V.A.1 lists all joint degree programs. There is no joint degree program with the professional public health degree (MPH) at this time.

2. Assessment of the extent to which this criterion is met.

This criterion is not applicable at the current time.

Criterion V.H.: If the school offers degree programs using nontraditional formats or methods, these programs must a) be consistent with the mission of the school and within the school's established area of expertise; b) be guided by clearly articulated student learning outcomes that are rigorously evaluated; c) be subject to the same quality control processes that other degree programs in the school and university are, and d) provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of adult learners. If the school offers nontraditional programs, it must provide needed support for these programs, including administrative, travel, communication and student services. The school must have an ongoing program to evaluate the academic effectiveness of the format, to assess teaching and learning methodologies and to systematically use this information to stimulate program improvements.

Expected Documentation

1. **Identification of all degree programs that are offered in a nontraditional format, including those offered in full or in part through distance education in which the instructor and student are separated in time or place or both. The matrix in V.A. may be referenced for this purpose.**

Not applicable. While a few individual courses are offered online in response to a mandate from the Kentucky Council on Postsecondary Education (CPE), SPHIS offer no degree program in a non-traditional format at this time.

2. **Description of the nontraditional degree programs, including an explanation of the model or methods used, the school's rationale for offering these programs, the manner in which it provides necessary administrative and student support services, the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to traditional degree programs and the manner in which it evaluates the educational outcomes, as well as the format and methodologies.**

Not applicable.

3. **Assessment of the extent to which this criterion is met.**

This criterion is not applicable at the current time.

RESEARCH

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

The faculty, staff and students of SPHIS recognize the importance of research as one of the three traditional missions of higher education and as a means of protecting and improving the public's health. As our mission statement articulates: "We create knowledge by seeking new discoveries and understanding through scientific exploration. We communicate our findings."

Documentation Expected

1. A description of the school's research activities, including policies, procedures and practices that support research and scholarly activities.

All UofL research activities are governed by the policies and procedures established by the university's Office of the Executive Vice President for Research (EVPR). In addition, SPHIS establishes school-wide policies and procedures as necessary to regulate, improve and encourage the research efforts of faculty, staff and students.

UofL

The mission of the Office of the EVPR (http://research.louisville.edu) is "to promote and support research, scholarship, and creative activities; to assist faculty and staff in obtaining intramural and extramural support; to serve as an advocate for the value of research in an educational setting; to enhance the vitality of campus-based research; and to encourage its use to enrich education, enhance technology transfer and serve the community."

The Office of the EVPR oversees the offices of Sponsored Programs Development, Grants Management, Industry Contracts, Technology Development, the Research Integrity Program and the Human Subjects Protection Program. The Offices of Grants Management and Industry Contracts are primarily responsible for proposal review and approval and post-award management of sponsored programs. Full descriptions of the services offered through these offices are available at http://research.louisville.edu/res-handbook/chapter01.htm.

Selected policies established by the Office of the EVPR include those affecting the following:

- Conflicts of Financial Interest in Research: The university has established policies and procedures regarding oversight of both individual and institutional financial interests in research. In accordance with the highest standards of integrity and in compliance with legal, professional, ethical and other requirements that promote objectivity and protect against financial conflicts of interest in research, the university will identify possible financial conflicts of interest in research, whether apparent or real, and provide mechanisms for their management, reduction, or elimination. The "Policy and Procedures for Oversight of Individual Financial Interests in Research" and "Policy and Procedures for Oversight of Institutional Financial Interests in Research" documents are available at http://www.ori.louisville.edu/Policies/.
- Intellectual Property is available at http://louisville.edu/thinker/for-faculty-and-staff/ip-policy.html.
- Ownership of Data is available at http://research.louisville.edu/res-handbook/ownership-data-guide.htm.
- Proposal Clearance Requirement: All grants and contracts requesting extramural funding by full or part-time faculty, staff and students of UofL that represent academic responsibilities of any of the individuals listed as Applicants, and regardless of performance site, must be cleared by Research Administration. The policy statement on sponsored research is available at http://research.louisville.edu/policies/proposalclearance.html.
- Support for ongoing research activities through the Office of the EVPR is provided by the Research Infrastructure Fund (RIF) programs. Under the RIF program, 10% of recovered indirect costs of grants are returned to principal investigators, 10% are returned to department chairs of PIs and 10% are returned to recognized centers within the university. By so doing, productivity in research is recognized and critical ongoing research activity is sustained. The policy regarding the Individual Research Infrastructure Funds Program is available at

http://www.louisville.edu/vpresearch/research/UofL/p-and-p/rif-indiv-funds.htm; Departmental Research Infrastructure Funds (DRIF) Program is described at http://www.louisville.edu/vpresearch/research/UofL/p-and-p/rif-dept-funds.htm.

- Research Misconduct: The "University of Louisville Policy and Procedures for Responding to Allegations of Research Misconduct," available at http://www.ori.louisville.edu/Policies/Misconduct_PnP.pdf, establishes a framework of methods and principles for assessing and conducting inquiries and investigations regarding allegations or incidents of research misconduct, defined as fabrication, falsification, plagiarism or other practices that seriously deviate from those that are commonly accepted within the scientific community in proposing, performing and reviewing research, or in reporting research results.
- Roles and Responsibilities for Research: The Office of the EVPR maintains a matrix of the roles and responsibilities expected of researchers, departments, units and university administration (including the Office of the EVPR). This matrix is available at http://research.louisville.edu/res-handbook/distributed-research-matrix.xls.
- Scientific or Scholarly Merit: In order to protect the rights and welfare of human subjects involved in research, all proposed research activities involving human subjects must be reviewed for scientific merit prior to initiation. The "Policy for Review of Research for Scientific or Scholarly Merit" is available at http://www.ori.louisville.edu/Policies/.

If violations of the above referenced policies occur, the university is prepared to respond with appropriate sanctions, as outlined in "Sanctions for Violations of University of Louisville Research Policies," available at http://www.ori.louisville.edu/Policies/.

Faculty and staff are encouraged to take advantage of resources provided by the Office of the EVPR, including access to the Sponsored Programs Information Network, Grant Advisor Plus, the Grants Resource Center (GRC) and ResearchResearch. The Sponsored Programs Information Network is a database of over 6,000 programs from both the public and private sectors that provide funding for research and special projects across a wide variety of subject areas. The Grant Advisor Plus is an on-line information service for research administrators and faculty in higher education. It provides monthly newsletters, searchable listings of grant and fellowship opportunities and a list of program deadlines by subject area for institutions and faculty. The Grants Resource Center (GRC) offers a full range of services, including the tracking of both public and private resources and the latest sponsored programs news and information. ResearchResearch is one of the world's leading publishers of news and information for the international research community, providing three interlinked, searchable databases. Other sponsored programs development services provided by Offices of the EVPR include grants writing workshops, legislative updates; one-on-one assistance; proposal editing and proofreading; coordination of multi-investigator proposals; and copying service for grant and contract proposals.

In addition to the services described above, the Office of the President offers intramural grants for researchers. Types of awards include Multidisciplinary Research Grants (MRG), Vice President for Research Undergraduate Research Scholar Grants (URS), Project Completion Grants (PCG), Research Initiation Grants (RIG), Research on Women Grants (ROW) and Undergraduate Research Grants (URG). For additional information on intramural grant opportunities, please see the resource file.

Research!Louisville is an annual celebration of health-related research sponsored by the Jewish Hospital & St. Mary's Foundation, Norton Healthcare, UofL Health Care and the University of Louisville. The goals of Research!Louisville are to: (1) promote excellence in health sciences research; (2) promote public awareness of health sciences research; (3) promote the Louisville Medical Center; and, (4) generate additional funding for health sciences research. SPHIS faculty and students participate actively in this event by submitting papers and posters and by judging scientific merit of the submissions.

SPHIS

The SPHIS Research Committee, chaired by the Associate Dean for Public Health, consists of the five department chairs, the assistant and associate deans, and the Assistant Director for Sponsored Programs. The committee has created school-specific policies and procedures to address our evolving needs. Processes developed so far involve investigator compliance with research training, faculty consultation on sponsored programs and the establishment of monthly research incubation seminars to foster collaboration within the school and the larger university.

An office to support the preparation, review and submission of research proposals and the conduct of research activities has been established. The assistant director is available to assist investigators with proposal development and processing. This individual also reviews all outgoing research proposals with SPHIS collaboration and is the primary point of contact with the Offices of Grants Management and Industry Contracts (described below). This individual is a member of the National Council of University Research Administrators (NCURA) and has attended national conferences such as the NCURA national meeting and the National Institutes of Health (NIH) Regional Seminar on Program Funding and Grants Management.

To support university and community researchers, the Department of Bioinformatics and Biostatistics has established the Statistical Consulting Center (StCC), which provides fee-for-service consulting. StCC services include: extensive research into applications of statistical methodology; data management, including design of data collection instruments, data storage device set-up and testing and data manipulation prior to analysis; data analysis, including power and sample size calculation, statistical modeling, hypothesis testing, estimation and plot generation; and technical writing for grants and protocols, journal articles and summary reports.

SPHIS encourages collaboration with the research activities of state and local agencies in a variety of settings. These relationships encourage the development of innovative research projects in public health and health information sciences. A greater description of these partnerships is provided in VI.B.2.

A spectrum of strategies and objectives support the research activities of the school. These will be discussed in relationship to the research-related objectives outlined in the response to Criterion I. The SPHIS seeks to:

- Acquire one new research position per year from university administration. As a rapidly expanding academic unit at the UofL, SPHIS looks to the university to provide endowments, new salary lines and other startup funds required to achieve the target level of full-time faculty within the specified timeline.
- Provide funding to support travel to national meetings to present papers and further research networking. The provision of such support to new faculty who are productively engaged in research but who may not have sufficient independent support to travel to important regional and national meetings is critical to their development and to the recognition of the institution. Funding for such activities will be provided through the dean's office to the department chairs and through the Research Infrastructure Fund (RIF) process described above.
- Increase the number of published articles, books, book chapters and presentations by 10% per year. Evidence of scholarly activity is critical to the success of all faculty members as well as to the appropriate recognition of SPHIS and the university. Academic publications are expected to keep pace with the expansion of the faculty at an anticipated rate of 10% per year.
- Increase total extramural funding by 10% per year. In addition to the essential support provided by the university, extramural funding from federal, state and non-governmental organization-based grants and contracts is critical to funding faculty salaries and supporting the research mission. Expansion of such extramural support is expected to be commensurate with the rate of faculty growth of approximately 10% annually. This will assure that average grant funding per faculty member will achieve a target level of approximately $100,000.
- Hold monthly research incubation meetings to encourage faculty, staff and student involvement in collaborative research activities. These seminars were initiated in July 2005 to foster informal interaction with the entire UofL research community by the faculty, staff and students of the school. Such a forum promotes collegiality and awareness of research activities and interests and invites

participation by all interested parties who may contribute meaningfully to planned or ongoing research.

2. A description of current community-based research activities and/or those undertaken in collaboration with health agencies and community-based organizations. Formal research agreements with such agencies should be identified.

The SPHIS has developed a strong relationship with the Louisville Metro government, especially Louisville Metro Public Health and Wellness (LMPHW). A joint working group has formed to foster community-based research through SPHIS and LMPHW and to build lasting partnerships with existing groups in our community. Additionally, the SPHIS has interfaced with other metro government agencies in its work with the West Jefferson County Community Task Force, an area air quality workgroup.

More than half of our faculty members are collaborators on grants awarded to other units within the university. Almost all grants awarded to the SPHIS feature collaboration among SPHIS departments, as well as with other units or departments within the university.

Many SPHIS grant proposals featuring community group involvement have been submitted to federal agencies. Examples include the following.

- a pending NIEHS P30 grant to develop a Center for Environmental Genomics and Integrative Biology (CEGIB) for the support of basic and translational investigations into the etiologies of environmental diseases and new approaches to their management. SPHIS faculty will contribute through a Community Outreach and Education Core to translate scientific information into knowledge and reduce health disparities of the local Hispanic population. A total of ten SPHIS faculty will be supported by this grant;
- a NIOSH-funded mortality study entitled “Health Effects of Occupational Exposures in Paducah Gaseous Diffusion Plant Workers” has been ongoing since 2002 in collaboration with local labor unions and community organizations.
- a P20 proposal was submitted to the Center for Minority Health and Health Disparities with input from SPHIS faculty to provide community-based research and education in support of health equity.
- an NIEHS/EPA Environmental Justice grant that has been submitted with collaborators at the College of Education and Human Development (CEHD), the Kentucky Institute for the Environment and Sustainable Development, the School of Medicine, LMPHW and the West Jefferson County Community Task Force in the Rubbertown area
- a proposed NHLBI grant on workplace interventions to address obesity and sedentary lifestyle, submitted by SPHIS with collaborators from CEHD, the School of Medicine, the Department of Family and Geriatric Medicine and the UofL Institute for Bioethics, Health Policy and Law
- a Fund for the Improvement of Postsecondary Education (FIPSE) proposal to establish an eight-week Summer Science Academy for underprivileged high school students to enhance their science and math skills and expose them to University researchers. Rising Juniors would attend Academy I, comprised of coursework, laboratory exercises and field trips. After working with University researchers to develop a Science Fair Project during their junior year, students would attend Academy II, joining a University research team as a junior researcher. During their senior year, they would be provided with support for college admissions and financial aid applications and would be tracked through their college years.
- an EPA Superfund proposal to create a multidimensional, multidisciplinary research program to understand mechanisms underlying the fetal basis for adult disease and translate that knowledge into information useful to other researchers, the public and policy makers. Dr. David Tollerud was proposed as director of the Research Translation Core, which focused on translating research knowledge into policy-relevant information and transmit that information to appropriate offices and organizations at the local, state and federal level.
- an Agency for Healthcare Research and Quality proposal to establish a Personal Asthma Management System (PAMS) team to design and prototype an electronic health record linked to both a personal and clinical health record capability for public-school students in Louisville. The team’s vision is to contribute a prototype that can measurably improve quality of care and reduce costs of care for asthma patients.

- a funded Kentucky Cabinet for Health and Family Services contract will study the factors that influence the prevalence of tuberculosis in the minority population. This program evaluation will provide recommendations for reducing tuberculosis-related health disparities in Kentucky.

The university additionally is involved with the Partnerships for a Green City, a collaborative long-term project between Metro Louisville, the university and Jefferson County Public Schools (JCPS) to address environmental issues facing the region. The project has been formally approved by the Mayor, the JCPS Superintendent and the university's president and will address three broad areas of environmental concerns: environmental education, environmental management and environmental health. The SPHIS and the LMPHW are taking the lead in addressing environmental health initiatives, beginning with the creation of an environmental health registry for the region and increasing public education and access to health care for the escalating problem of asthma. JCPS already has initiated school-based education and audit programs to identify potential triggers of asthma. The asthma initiative, one goal of which is to reduce absenteeism, will include:

- improved patient and community asthma awareness and education;
- increased monitoring of lung function to diagnose asthma prevalence;
- improved access to and improved access of clinical care;
- reduced exposure to environmental triggers; and
- improved coordination among schools, health care providers, insurers, community-based agencies, local health departments, parents and caregivers.

Another unique aspect of this partnership involves the efforts between the SPHIS, JCPS and LMPHW in improving immunization rates among children enrolled in the public school system. The complexities of this issue underscore the need to think broadly and seek resources that have not yet been included, for example, local insurance companies and Medicaid partners. This relationship enables the JCPS to have access to the specialized expertise and connections available through the SPHIS as well as the traditional health services provided through the LMPHW. This blend of traditional with progressive systems has resulted in new opportunities for community-based research partnerships.

3. A list of current research activity, including amount and source of funds, over the last three years.

Tables VI-1 through VI-4 show those grants and contracts awarded to the university between July 1, 2003 and present for which an SPHIS faculty or staff member served as principal investigator or project director. Table VI-5 shows those grants and contracts with SPHIS collaboration between July 1, 2003 and June 30, 2006. These tables are based upon internal data. No dollar amount is listed for the grants and contracts of Table VI-5, as other units served as the primary recipient of the awards.

Table VI-1: Research Activity of Core Faculty, 2003-04

Project Name	Principal Investigator	Funding Source	Funding Period	Amount Total Award	Amount Current Year
Clinical and Economic Effectiveness of a Technology Driven Heart Failure Monitoring System	Hornung CA	Health Care Financing Administration (HCFA)	09/20/00-09/19/05	$448,282	$67,549
Clinical Research, Epidemiology and Statistics Training	Hornung CA	National Heart, Lung and Blood Institute (NHLBI)	09/30/00-08/31/05	$999,167	$200,000
Health Effects of Occupational Exposures in PGDP Workers	Tollerud DJ	National Institute of Occupational Safety and Health (NIOSH)	07/15/02-07/14/05	$1,382,957	$755,191
From Bench to Bedside: Introduction to Clinical Research	Hornung CA	National Heart, Lung and Blood Institute (NHLBI)	06/30/03-05/30/08	$221,100	$44,220
Use and Support of a Smallpox Vaccination Registry	Esterhay RJ	Kentucky Cabinet for Health and Family Services (CHFS)	07/01/03-06/30/04	$203,000	$203,000
Lung Cancer in Kentucky - Environmental/Occupational Factor	Aldrich TE	Kentucky Lung Cancer Research Board (KLCRB)	07/01/03-06/30/05	$198,907	$98,986
Center for Deterrence of Biowarfare and Bioterrorism	Atlas RM	Centers for Disease Control and Prevention (CDC)	08/01/03-07/31/04	$1,144,655	$1,144,655
Preparing Health Professions to Respond to Bioterrorism	McKinney WP	Health Resources and Services Administration (HRSA)	09/30/03-08/30/05	$2,237,161	$1,365,523
Prescription Drug Monitoring Pilot	Morse JH	Kentucky Governor's Office for Technology	10/01/03-06/30/04	$46,454	$46,454
Evaluation of Public Health System Bioterrorism Preparedness	McKinney WP	University of Kentucky research Foundation (UKRF)/Kentucky Department for Public Health (KDPH)	10/01/03-08/30/04	$3,000	$3,000
Health Care Access for the Low-Income Uninsured (Health Providers)	Esterhay RJ	CHFS	01/01/04-06/30/04	$68,182	$68,182
Using Tetradic Network Theory to Understand and Design a Governance Technology for State/Regional Electronic Health Information Networks	Esterhay RJ	Kentucky Science and Engineering Foundation (KSEF)	06/01/04-05/31/06	$98,945	$48,945

Table VI-2: Research Activity of Core Faculty, 2004-05

Project Name	Principal Investigator	Funding Source	Funding Period	Amount Total Award	Amount Current Year
Clinical Research, Epidemiology and Statistics Training	Hornung CA	NHLBI	09/30/00-08/31/05	$999,167	$199.889
From Bench to Bedside: Introduction to Clinical Research	Hornung CA	NHLBI	06/30/03-05/30/08	$221,100	$45,671
Lung Cancer in Kentucky - Environmental/Occupational Factor	Aldrich TE	KLCRB	07/01/03-06/30/05	$198,907	$99,921
Preparing Health Professions to Respond to Bioterrorism	McKinney WP	HRSA	09/30/03-08/30/05	$2,237,161	$1,109,114
Using Tetradic Network Theory to Understand and Design a Governance Technology for State/Regional Electronic Health Information Networks	Esterhay RJ	KSEF	06/01/04-05/31/06	$98,945	$50,000
Data Linkage Study for Kentucky MCH Program	Esterhay RJ	CHFS	07/01/04-06/30/05	$87,000	$87,000
Health Care Access for the Low-Income Uninsured	Esterhay RJ	CHFS	07/01/04-06/30/05	$95,000	$95,000
Center for Deterrence of Biowarfare and Bioterrorism	Atlas RM	CDC	08/01/04-07/31/05	$1,399,447	$1,399,447
UHC Medicare Advantage Operational Feasibility Assessment	Morse JH	University Health Care	09/01/04-06/30/05	$90,615	$90,615
Home HF Care Comparing Patient Driven Technology Models	Hornung CA	Agency for Healthcare Research and Quality (AHRQ)	10/01/04-09/30/07	$276,299	$93,487
M-05077712: DPH/UofL/Consultations	Esterhay RJ	CHFS	03/01/05-06/30/05	$31,070	$31,070
Louisville Metro Electronic Health Surveillance Project	Walton PL	Kentucky Hospital Research & Education Foundation (KHREF)	03/01/05-02/28/08	$66,579	$66,579
Kentucky Bioterrorism Assessment Project	Esterhay RJ	KHREF	04/01/05-10/31/05	$135,425	$135,425
M-05094171: Public Health - Univ. of Louisville	Clover RD	Kentucky Council on Postsecondary Education	04/01/05-06/30/06	$25,000	$25,000

Table VI-3: Research Activity of Core Faculty, 2005-06

Project Name	Principal Investigator	Funding Source	Funding Period	Amount Total Award	Amount Current Year
From Bench to Bedside: Introduction to Clinical Research	Hornung CA	NHLBI	06/30/03-05/30/08	$221,100	$45,671
Home HF Care Comparing Patient Driven Technology Models	Hornung CA	AHRQ	10/01/04-09/30/07	$276,299	$81,189
Data Linkage Study for Kentucky MCH Program	Esterhay RJ	CHFS	07/01/05-06/30/06	$60,808	$60,808
Endothelial generation of reactive oxygen species in lung exposure to ultra fine particles	Zhang Q	American Lung Association	07/01/05-06/30/06	$35,000	$35,000
Health Care Access for the Low-Income Uninsured	Esterhay RJ	CHFS	07/01/05-06/30/06	$95,000	$95,000
Health Effects of Occupational Exposures in PGDP Workers	Tollerud DJ	NIOSH	07/01/05-06/30/08	$1,809,561	$608,798
M-0521034: CHFS/DPH 06 UL Consult	Esterhay RJ	CHFS	07/01/05-06/30/06	$100,671	$100,671
4-Corners Women's Health Study	Baumgartner KB	NCI	07/01/05-07/31/06	$308,700	$308,700
Nonparametric Inference in Censored Data Problems	Datta So	National Security Administration (NSA)	07/01/05-12/31/06	$32,463	$32,463
Ethnicity, Breast Cancer Recurrence and Long-Term QOL	Baumgartner KB	NCI	07/01/05-06/30/10	$1,660,346	$283,408
Confronting the Spectrum of Public Health Hazards	McKinney WP	HRSA	09/01/05-08/31/06	$3,224,205	$1,078,164
SDK5 (Jul 05- Aug 05) Bio Preparedness [Online Communication Tool]	Esterhay RJ	CHFS	09/01/05-12/31/06	$69,400	$69,400
Health, Eating, Activity and Lifestyle (HEAL) SEER Special Study 2005	Baumgartner RN	UNM/NCI	09/30/05-09/29/06	$76,685	$76,685
Assessment of Pathway Design through Multi-level Modeling and Experimentation	Datta Su	Georgia Institute of Technology/NSF	05/01/06-04/30/08	$37,286	$18,246
Adaptive Nuclear, Biological and Chemical Multimedia Collaboratory	Esterhay RJ	Accella Learning, LLC/Department of Defense	04/01/06-09/30/06	$102,344	$102,344
Prescription Drug Monitoring Pilot	Esterhay RJ	Commonwealth Office of Technology	06/01/06-12/31/06	$42,893	$42,893

Table VI-4: Research Activity of Core Faculty, 2006-07

Project Name	Principal Investigator	Funding Source	Funding Period	Amount Total Award	Amount Current Year
From Bench to Bedside: Introduction to Clinical Research	Hornung CA	NHLBI	06/30/03-05/30/08	$221,100	$45,671
Home HF Care Comparing Patient Driven Technology Models	Hornung CA	AHRQ	10/01/04-09/30/07	$276,299	$69,082
Health Effects of Occupational Exposures in PGDP Workers	Tollerud DJ	NIOSH	07/01/05-06/30/08	$1,809,561	$598,022
Ethnicity, Breast Cancer Recurrence and Long-Term QOL	Baumgartner KB	NCI	07/01/05-06/30/10	$1,660,346	$336,219
Confronting the Spectrum of Public Health Hazards	McKinney WP	HRSA	09/01/05-08/31/06	$3,224,205	$900,000
Assessment of Pathway Design through Multi-level Modeling and Experimentation	Datta Su	Georgia Institute of Technology/NSF	05/01/06-04/30/08	$37,286	$19,040
Data Linkage Study for Kentucky MCH Program	Esterhay RJ	CHFS	07/01/06-06/30/07	$87,560	$87,560
Health Care Access for the Low-Income Uninsured	Esterhay RJ	CHFS	07/01/06-06/30/07	$137,500	$137,500
Health Information Security and Privacy Collaboration (HISPC)	Esterhay RJ	CHFS	07/01/06-06/30/07	$61,723	$61,723
Health, Eating, Activity and Lifestyle (HEAL) SEER Special Study	Baumgartner RN	UNM/NCI	08/31/06-08/30/08	$143,144	$69,083
Reducing Health Disparities in Tuberculosis in Kentucky	Harris MJ	CHFS	01/01/07-09/30/07	$27,000	$27,000
Activation of Endothelial Cells and Gene Expression in Lungs Following Exposure to Ultrafine Particles	Zhang Q	Health Effects Institute	03/01/07-02/28/09	$200,000	$100,000

Table VI-5: Grants and Contracts with SPHIS Collaboration, Active Between July 1, 2003 and June 30, 2006 (Chronological by Start Date)

Project Name	PI	Granting Agency	Begin	End
Mixed Chimerism to Treat Sickle Cell Disease	Ildstad S	NHLBI	08/16/99	06/30/05
Informed Decision Making for Prostate Cancer Screening in Low Income and Underserved Men	Weinrich S	American Cancer Society (ACS)	01/01/01	12/31/03
University of Louisville Primary Care Research Infrastructure	O'Brien J	HRSA	09/01/01	08/31/05
Behavioral intervention for depression in nursing homes	Meeks S	National Institute of Mental Health (NIMH)	04/01/02	03/31/05
Faculty Development Training in Primary Care	O'Brien J	HRSA	07/01/02	06/30/04
Safety and Efficacy of Exercise for Individuals with CHF	Swank A	NHLBI	08/01/02	07/31/05
Clinical Utility of Measuring Dead Regions	Preminger J	UofL School of Medicine Grant-In-Aid	09/01/02	08/31/03
Maternal Influenza Vaccine Outcomes Study	Gall S	American Association of Medical Colleges (AAMC)/CDC	09/01/02	08/31/03
Molecular Determinants of Developmental Defects	Greene R	NCI	09/01/02	08/31/07
Increasing Physical Activity Levels in Low Income Women	Speck B	National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)	10/01/02	09/30/04
Efficacy of Group Aural Rehabilitation Programs	Preminger J	National Institute on Deafness and Other Communication Disorders (NIDCD)	05/01/03	04/30/06
Behavioral, Cognitive and Affective Responses to Lung Cancer Screening	Studts J	KLCRB	07/01/03	06/30/05
Perinatal Loss and the Birth of a Subsequent Child	Armstrong D	National Institute of Nursing Research (NINR)	07/01/03	06/30/06
Effect of Prehabilitation on Rehabilitation of TKA	Topp R	NINR	08/01/03	04/30/07
Exercise Mode and Health Status Indices in the Elderly	Topp R	NINR	09/30/03	08/31/04
Arsenic Induced Mitotic Arrest Associated Apoptosis	States JC	National Institute of Environmental Health Sciences (NIEHS)	03/01/04	04/30/08
HPV DNA Self-Test	Edwards RP	James Graham Brown Cancer Center	04/01/04	12/31/04
Novel Imaging and Physiological Evaluation of Human SCI	Vitaz T	National Institute of Neurological Disorders and Stroke (NINDS)	07/01/04	06/30/09
Podocytes and Oxidative Stress in Diabetic Kidney	Epstein PN	NIDDK	03/01/05	07/31/10
Neuroendicrine and Testicular Mechanisms in Male Infertility	Winters S	Kentucky Experimental Program to Stimulate Competitive Research (EPSCoR)	04/01/05	03/31/06
Cancer as a Chronic Disease Program	Pfeifer MP	CDC	06/01/05	05/31/06
Outcomes of Teacher Training on Autism	Ruble L	NIH	08/01/05	07/30/08
Foundation for a Healthy Kentucky: Access to Health Care Initiative, Phase II	Palmer LI	LMPHW/Foundation for a Healthy Kentucky	09/09/05	12/31/06
Telehealth Symptom Management in Head and Neck Cancer	Pfeifer MP	NIH	09/23/05	08/31/07
Medicaid Palliative Care Management Project	Pfeifer MP	Foundation for a Healthy Kentucky	09/30/05	09/30/06
Pediatric Clinical Proteomics Center	Klein JB	Department of Energy	12/01/05	06/29/08

4. Identification of measures by which the school may evaluate the success of its research activities, along with data regarding the school's performance against those measures over the last three years.

Tables VI-6 and VI-7 show annual objectives corresponding to SPHIS Goal 2, "build a public health and information science research enterprise." These objectives will be the measures by which the school will evaluate the success of its research program.

Table VI-6: Research Measures by Fiscal Year

Outcome Measure	Actual 2003-04	Actual 2004-05	Actual 2005-06	Projected 2006-07	Goal 2008
Increasing the number of grants and contracts awarded to 20 in 2008.	11	11	15	12	20
Increasing the total dollar amounts of grants to $5,000,000 in 2008.	$2,787,467	$2,241,104	$3,414,530	$3,385,151	$5,000,000
Increasing the number of faculty on sponsored research to 22 in 2008.	12	13	22	29	22
Increasing the number of students on funded research to 3 in 2008.	0	1	2	3	3

A full list of publications by SPHIS faculty and staff is available as Appendix VI-1.

Table VI-7: Research Measures by Calendar Year

Outcome Measure	Actual 2003	Actual 2004	Actual 2005	Actual 2006	Goal 2008
Increasing the total number of publications in refereed journals to 20 in 2008.		18	40	37[1]	20
Increasing the number of refereed presentations and/or papers sponsored by national or international organizations to 20 in 2008.		17	20		20

Additional measures include the following.

- Adding one new faculty research position per year (2004-2008) from university administration. The Office of the EVPR provides partial funding for newly recruited researchers with established track records of securing extramural funding. This support was used to hire four new faculty in July 2005.
- Providing departmental funding for travel to national meetings to present papers and further research. The dean's office has designated funding to support these needs. Additional funding may be provided at the discretion of the department.
- Holding monthly research incubation meetings to encourage faculty, staff and student involvement in collaborative research activities. Monthly research incubation meetings were begun in July 2005.

Since July 1, 2002, UofL has recovered $2,289,482 in facilities and administrative (indirect) costs from extramural grants and contracts awarded to SPHIS researchers. Of this amount, $340,320 was returned to the researchers and departments of the school in the form of Research Infrastructure Funds (RIF). The RIF program is described in detail in Section VI.1. We will follow indirect cost recovery and RIF allocation in the future as indicators of research-related resource development rather than as formal outcome measures.

[1] Approximate – data collection and verification is ongoing.

5. A description of student involvement in research.

Since the initiation of the MSc/CIS degree program in 1999, trainees have been very active in research. Since that time, trainees have been a part of 80 publications, 70 published abstracts, 11 books/book chapters and over 100 professional presentations. They have served as principal investigators of approximately 30 grants totaling over $2.5 million in funding. Inclusive of funding as co-principal investigators, trainees have received a total of approximately $3 million in funding. (Please note that this funding is not included in that of the school, as reported in Section VI.4.)

Graduate Research Assistants (GRAs) are students who devote 20 hours per week to assigned research projects within the school. SPHIS provides stipends, fringe benefits and tuition remission to these students, who are selected for academic excellence and agree to become GRAs. Since 2002, a total of 28 students have served as GRAs. Data regarding the number of students and amounts of support by program are included in Table VI-8.

Table VI-8: Number of Graduate Research Assistants (GRAs) and Amounts of Support[2] by Program

	MSc/CIS		MS and PhD/BDS		MPH		Other[3]		Total	
	Students	Funding	Students	Funding	Students	Funding	Students	Funding	Students	Funding
2002-03	1.0	32,759	10.7	321,334			0.0	17,278	11.7	371,371
2003-04	2.0	51,228	7.0	233,480			0.0	20,330	9.0	305,038
2004-05	1.0	30,419	6.2	234,749			0.0	12,272	7.2	277,440
2005-06	2.0	58,005	8.5	354,356	0.0	0	0.0	67,849	10.5	480,210
2006-07[4]	1.9	70,485	7.9	360,599	1.0	29,924	0.0	0	10.8	461,009

The MPH program will also bring many additional students into SPHIS. Each will be required to participate in a practicum project which will require them to demonstrate knowledge of scientific research techniques.

In addition, a variety of practices within SPHIS foster the development of research projects on the part of students, including:

- The Department of Epidemiology and Population Health (EPH) supervises the instruction of PHCI 501, “From Bench to Bedside: Introduction to Clinical Research,” each summer. This course is designed to introduce pre-med, nursing and other undergraduate students interested in a career in health care as well as undergraduate and graduate students in the health professions to the intellectual challenges and rewards of clinical research.
- As part of the graduation requirements for the MSc/CIS Program, SPHIS allows and encourages students to prepare a grant proposal in NIH format or a manuscript suitable for submission to a major biomedical journal in lieu of a thesis.
- The Department of Bioinformatics and Biostatistics offers PHST 602, ““Biostatistics - Decision Science Seminar,” a weekly seminar series concentrating in Biostatistics and Decision Science. The seminar enriches students’ education by opening windows to a wide variety of research topics and by giving students the chance to improve their critical analysis skills and public speaking abilities. Doctoral students are required to present at least two seminars in PHST 602 in order to complete their degree. Master’s level students are encouraged by advisors to present their thesis work as part of the seminar series as well.

[2] Funding includes stipend, fringe benefits and tuition.
[3] "Other" represents tuition expenses for students who did not receive stipends.
[4] estimated

6. Assessment of the extent to which this criterion is met.

This criterion is met. The school has evolved from an institute that focused on research and continues to emphasize this area of academic endeavor. Expansion of activities in the school has been supported by the university's partial return of recovered indirect costs through its Research Infrastructure Fund programs. SPHIS recognizes the benefits of enhancing student involvement in research through development of additional GRA positions and the support of travel to professional meetings.

SERVICE

Criterion VII.: The school shall pursue an active service program, consistent with its mission, through which faculty and students contribute to the advancement of public health practice, including continuing education.

Service is one of the three cornerstones of the mission of the school to advance knowledge for the public's health in the 21st century, and the school has implemented a range of service activities for faculty, staff and students. The school is dedicated to transdisciplinary, collaborative partnerships with Louisville Metro, the Commonwealth of Kentucky and their environs, and the national network of public health professionals, in full accordance with its previously stated mission, goals and objectives. Faculty, students and staff are committed to working on recognized problems that result in tangible benefits to the population. The school sees itself as truly bridging academia, community, government and the profession through service-related work.

Expected Documentation

1. **A description of the school's service program, including policies, procedures and practices that support service. If the school has formal contracts or agreements with external agencies, these should be noted.**

The school's service program is an integral part of the university's mission to serve as Kentucky's urban/metropolitan university. Located in the Commonwealth's largest metropolitan area, the university addresses the specific educational, intellectual, cultural, service and research needs of the greater Louisville region. It has a special obligation to serve the needs of a diverse population, including many ethnic minorities and place-bound, part-time, non-traditional students.

Service-related activities occurring within SPHIS are designated in and governed by the document establishing the role of community and professional service and the charge to the Community and Professional Service Committee (Service Committee), both of which are available in Appendix VII-1. The first document outlines the mission, goals, activities and organization of the school's community and professional service, including the responsibilities of the director, Dr. Ruth Carrico, support staff and the Service Committee. The charge to the Service Committee includes its purpose, organization and composition, support, term and rules.

Service represents a tangible demonstration of the faculty's commitment to create and sustain community and national partnerships characterized by open communication, collaboration and outreach. Faculty service activities are important evaluation factors in hiring and promotion decisions. In addition, service is part of faculty members' required annual work assignments. The annual work assignment is determined and agreed upon by the department chairs and each faculty member. Faculty track these activities on their curricula vitae and meet with their department chair on an annual basis to discuss the percentage of work assignment for teaching, research and service. Faculty service occurs as part of formal agreements and consulting services as well as informal ongoing partnerships.

The faculty and staff of the school provide evaluation, research, technical assistance and program development service support to a diverse range of community and public health groups and agencies. The school provides service to the Kentucky Department for Public Health (KDPH) through formal agreements for support of adult and child health programs, including Health Kentucky, a program providing discounted prescriptions for the under- and un-insured; and a Maternal and Child Health data linkage project. The Department of Health Management and Systems Sciences (HMSS) also provided support during 2003 in leading the adoption of an online database system under the national campaign for smallpox vaccination of first responders across the state. The school is also involved with Louisville Metro Department of Public Health and Wellness (LMPHW) and Jefferson County Public Schools (JCPS) in the Partnership for a Green City as outlined in VI.2.

Three employees have formal, signed agreements for unique collaborative arrangements for service. Adewale Troutman, MD, MPH, whose service work assignment is 90%, is the Commissioner of Health for LMPHW. Louisville Metro government pays the school for this service. Dr. Troutman's remaining 10% level of effort is devoted to teaching in HMSS. The MPH Coordinator, Ms. LaTonia Peters, MPH, splits her full-time appointment between SPHIS and LMPHW in support of identification and maintenance of field

placement sites for students within the program. Ruth Carrico, PhD, RN, CIC, functions as a health coordinator for JCPS, which pays the school 50% of her university salary for this service. Dr. Carrico's remaining effort is divided between teaching, research and service in the Department of Health Promotion and Behavioral Sciences (HPBS). A description of formal agreements with external agencies may be found in Section VI. Copies of these agreements are in the Resource File.

The school's Statistical Consulting Center (StCC) and Center for Health Hazards Preparedness (CHHP) are two internal entities that provide unique services to the community. The Department of Bioinformatics and Biostatistics provides consulting services through its Statistical Consulting Center (StCC) designed to provide expertise in statistical methodology in support of research. The center's services are available to health researchers at the university, but are also used by members of the community, including local health care and research centers, local businesses and nonprofit organizations. Clients of the StCC collaborate with members of the StCC staff and faculty. The StCC participates in both long- and short-term cooperative research projects and provides technical personnel and specialized computational services as needed. Initial project feasibility consultations are provided at no charge, and data analysis and statistical programming jobs on a fee-for-service basis. The StCC provides assistance in many of the phases of research, such as assistance in framing of research questions, design of research studies, design of data collection instruments, statistical analysis and preparation of professional publications. Given the extensive number and range of the services they provide, a listing of StCC activities are included in the on-site resource file.

The CHHP, formerly the Center for Deterrence of Biowarfare and Bioterrorism, coordinates research, education and service focusing on the early recognition and response to potential acts of terrorism and natural disasters. The CHHP was established as part of the network of Centers for Public Health Preparedness (CPHP) in 2002 through a cooperative agreement with the Centers for Disease Control and Prevention (CDC). The center's activities aim to bring together information resources, human expertise and research infrastructure to improve the local, regional and national response to outbreaks of infectious diseases and the defense against potential biological, chemical and radiation threats and natural disasters. The CHHP also receives funding from the Health Resources and Services Administration (HRSA), through the Bioterrorism Training and Curriculum Development Program (BTCDP). A major function of the Center under this cooperative agreement, *Confronting the Spectrum of Public Health Hazards*, is to provide, in partnership with the University of Kentucky, continuing education for first responders and professionals in the fields of medicine, nursing, allied health, public health, health care administration, dentistry, pharmacy, mental health, agriculture and veterinary medicine.

One hallmark of our school's service activities is the range of community experiences in the practice of public health available to our students. These opportunities highlight the integral part service plays in achieving our desired mission, goals and objectives. They introduce our students to the broader context and concept of community and what it means to provide service to the community. One such opportunity is through the MPH practicum, designed to advance knowledge for the public's health (see section VII.7). Relationships created through the identification of field placement sites for students also advance our service activities by growing our network of collaborative partnerships for teaching and research.

Future arrangements for service are also being explored. The Department of Environmental and Occupational Health Sciences (EOHS) is developing service support relationships with Louisville Metro government agencies, as well as the Division for Air Quality and the Division of Water within the Kentucky Environmental and Public Protection Cabinet. The Department of Epidemiology and Population Health (EPH) is exploring the development of a center for health services research with potential collaboration involving Humana's Center for Innovation, headquartered in Louisville.

2. A list of the school's current service activities, including identification of the community groups and nature of the activity, over the last three years.

As part of the accreditation process, the school surveyed all faculty and staff to compile relevant service activities and information on continuing education programs and partnerships. This process evidenced the need for developing a centralized, web-based portal, an efficient and effective method of data collection, monitoring and reporting. Table VII-1 summarizes selected service activities by category as reported by the school faculty over the past three years. Please see the resource file for a complete listing of the school's service activities.

Table VII-1: Selected Service Activities (July 1, 2003 through June 30, 2006)

List of Service Activities by Type of Service	Number of Activities
Boards or Committee Members for Professional and Non-Profit Organizations	104
Journals - Editorial Board Members	26
Journals - Manuscript Reviewers	85
Grants - Review Grant Proposals	17
National, State and Local Advisory Boards and Committees	85
Volunteers at Local Service or Educational Organizations	18
Consulting	55

3. A description of the school's continuing education program, including policies, procedures and practices that support continuing education.

Service represents a tangible demonstration of the school's commitment to create and sustain community and national partnerships characterized by open communication, collaboration and outreach. Through this commitment, the school and its partners derive mutual benefit through exchanged knowledge, resources and expertise. Faculty and staff view inclusion of our partners as a strength and centerpiece of all our activities. The school relies on the expertise of the Continuing Health Sciences Education (CHSE), located on the Health Sciences Center to develop and implement continuing education offerings. This office is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education and works with the Kentucky Board of Nursing as a provider for continuing nursing education. As a centralized resource, the CHSE's policies and procedures, available in the Resource File, guide the school's continuing education program. Dr. Paul McKinney, Associate Dean in the school, is on the CHSE Advisory Committee, which provides a broad representation for health CE programs. See the Resource File for composition of the CHSE Advisory Committee.

The CHSE requires that the school submit an application form for each new continuing education course, which undergoes a rigorous review process prior to approval. CHSE seeks to provide quality, life-long learning to health professionals in the disciplines of dentistry, medicine, nursing and public health. Session topics are based upon expressed needs and interests of health professionals, are multidisciplinary in nature and are delivered in a manner consistent with the topic. In addition, the CHSE strives to meet the needs of health professionals by providing educational activities that allow interaction between diverse health professionals. Once a program has been approved, the CHSE provides templates to obtain faculty information such as biographical information, potential conflict of interest and sources of funding. Program evaluation is another best practice of the school's continuing education program. Exit surveys and pre-post tests are used to measure the course's impact on participants' knowledge, skills and application as well as overall satisfaction.

The SPHIS has partnerships with other organizations to provide discipline-specific CE credits for certain groups of practitioners not covered by the CHSE office. For example, allied health-specific CE may be provided by local hospitals, including Baptist East, University of Louisville Hospital or Norton Hospital. In addition, because the University of Louisville has no colleges of pharmacy and agriculture, CE credits for pharmacists and veterinarians may be provided through a partnership with the University of Kentucky.

A priority for the next phase of the school's continuing education program is to extend the reach of these activities through the use of distance learning technologies such as podcasting, DVD production, web-based modules and videoconference networks including the videoconference network managed by the

Kentucky Department for Public Health and the Kentucky Telehealth Network (KTHN), a statewide telehealth initiative co-managed by UK and UofL. These efforts are described in more detail in the next section.

4. A list of the continuing education programs offered by the school, including number of students served, over the last three years.

The school has been active in terms of the number of continuing educational programs, contact hours and number of attendees over the past three years as summarized in Table VII-2. A comprehensive listing of continuing education activities by department is available in the on-site resource file.

Table VII-2: CE Programs Offered by SPHIS, July 1, 2003 through June 30, 2006

Department	Number of Programs	Number of Contact Hours	Number of Attendees
HPBS	17	67	1,498
EOHS	40	48	2,770
EPH	7	8	530
BB	29	106	3,378
HMSS	22	34	2,065
Associate, Adjunct and Gratis Faculty	15	143	1,474
CHHP	118	364	10,213
Totals	248	770	21,928

School-Sponsored Public Health Grand Rounds

Beginning in 2001, the Institute for Public Health Research, later SPHIS, collaborated with the University of Kentucky, Eastern Kentucky University and Western Kentucky University to provide Public Health Grand Rounds (PHGR) via the statewide KTLN. This series of presentations was developed to provide current and relevant information to a broad range of professionals including public health personnel, physicians, nurses, dentists, agriculture, education and social work. All lectures were broadcast to remote audiences via videoconference technology to locations across the state.

Starting in August 2005, the school began a new contribution to the field of public health by coordinating its own monthly presentation called University of Louisville – Public Health Grand Rounds (UofL – PHGR). This series of grand rounds is under the leadership of Dr. Susan Muldoon, a faculty member from EPH, who has been directed by the dean to develop this initiative. School faculty, staff and students, as well as employees from the Louisville Metro Department of Public Health and Wellness, are invited to attend. The school has arranged for CHSE to provide continuing education credits for nurses and physicians. A complete listing of PHGR topics and presenters is summarized in Table VII-3.

Table VII-3: University of Louisville – Public Health Grand Rounds Presentations, 2005 to present

Date	Presenter	Topic
08/26/05	Richard Clover, MD Dean and Professor, SPHIS	New Vaccines: On the Edge of Effective Prevention
09/23/05	Adewale Troutman, MD, MPH Director, Louisville Metro Department of Public Health and Wellness	Health Equity and Social Justice
10/28/05	David Hein, PhD Chair and Professor, Pharmacology Director, Cancer Prevention and Control, James Graham Brown Cancer Center	Pharmacogenetics of N-acetyltransferases and Their Role in Genetic Predisposition to Cancer
12/16/05	Steve McCabe, MD, MSc Assistant Professor, BB, SPHIS	Utility, the Other Quality of Life
01/27/06	Mark Pfeifer, MD Associate Vice President, School of Medicine	After Hope for Cure But Before Hospice: Research in the Realm of Advanced Chronic Illness
02/24/06	Aruni Bhatnagar, PhD Professor of Medicine, University Scholar, Division of Cardiology	Environment and Cancer
03/24/06	Larry Palmer, LLB Endowed Chair in Urban Health Policy and Professor, Family and Geriatric Medicine	Systems Sciences, Health Policy Development and Data
05/26/06	Janice Sullivan, MD and Mary Jayne Kennedy, PharmD Associate Professors, Pediatric Clinical Pharmacology	UofL/Kosair Children's Hospital Pediatric Pharmacology Research Network
10/27/06	W. Paul McKinney, MD and Richard D. Clover, MD Associate Dean for Public Health and Dean, SPHIS	All-Hazards Preparedness
11/30/06	Bradley King, MD SPHIS student, Medical Director for Immediate Care Centers in Owensboro, KY, and Preventive Medicine Officer and Battalion Surgeon, 404th Civil Affairs Battalion, U.S. Army	The War in Iraq & Public Health
01/26/07	Steven McCabe, MD, MSc Assistant Professor, BB, SPHIS	The Association of Carpal Tunnel Syndrome & Sleep Disturbances! Is there a Case for Causation?
02/23/07	Kristine Gebbie, DrPH, RN Elizabeth Standish Gill Associate Professor of Nursing and Director, Center for Health Policy, Columbia University	Competencies: A Key Link Between Education & Practice
03/23/07	Irene Litvan, MD Raymond Lee Lebby Professor of Parkinson Disease Research and Director, Movement Disorder Program	Epidemiologic Aspects of Parkinsonian Disorders

Professional Conferences

From the list of the school's current service activities and the listing of continuing education activities by department, both available in included in the on-site resource file, it is evident that the school's faculty actively participate in professional associations and societies at local, state and national levels. Information and research findings have been shared at meetings sponsored by a number of high impact and high profile organizations such as:

- American College of Preventive Medicine

- American Public Health Association
- American Statistical Association
- American Thoracic Society
- American Medical Informatics Association
- Association for Professionals in Infection Control and Epidemiology
- Healthcare Information and Management Systems Society
- International Biometric Society
- NASSO, The Obesity Society
- National Institute for Environmental Health Sciences
- Society for Medical Decision Making

This commitment to knowledge sharing continues at the state level through work with the Kentucky Public Health Association (KPHA), the professional organization serving public health professionals in the Commonwealth. During the 2007 annual meeting, faculty are presenting on a wide variety of topics including drug resistant infections, the mental health impact on Hurricane Katrina evacuees, health care worker immunization and disease transmission. One of he school's significant community collaborations will be highlighted in a session that discusses work completed with the Jefferson County School System (JCPS) heath services initiatives. Students will also be actively involved in the KPHA conference (see section VII.7).

SPHIS Web-based Courses

A major initiative began in 2005 to develop novel training processes that serve to increase the capacity of existing school health services within the JCPS system. The project team, directed by Dr. Ruth Carrico, Assistant Professor in HPBS, included university content experts, information systems support and representatives from the JCPS Health Services Department. The result has been development of nine web-based courses that provide professional development for school-based personnel to address the everyday as well as emergent health needs of the student population. These courses, accessed via the JCPS online training system, include:

- Administering Medication During Field Trips
- Basic Medication Administration
- EpiPen and Twinject Administration
- Management of Head Lice
- Managing Asthma in the School Setting
- Managing Diabetes in the School Setting
- Seizure Disorders, Vagus Nerve Stimulator and Diastat Use
- The Student with a Gastrostomy Tube
- The Student with a Tracheostomy Tube

Beginning in 2006, SPHIS also began providing the HIV/AIDS education required by the Kentucky Cabinet for Health and Family Services for all licensed healthcare personnel. This web-based training enables healthcare personnel new to Kentucky as well as existing Kentucky providers with the opportunity to quickly and conveniently access this required training. Since that time, nearly 100 healthcare personnel have taken advantage of this opportunity.

Disaster Preparedness Programs (CHHP)

In September 2003, the CHHP created a consortium of public health hazards and education experts to initiate a broad-based continuing education program for health professionals in Kentucky and the surrounding region. Through the HRSA-supported *Confronting the Spectrum of Public Health Hazards,* training has been provided to more than 23,800 health care workers. Program attendance by category of health professional is found in Table VII-4. Educational curricula emphasize the recognition, reporting and response to potential acts of terrorism and are directed toward the specific needs of a range of health professions. Complementary expertise from the University of Kentucky extends outreach to include agricultural and veterinary hazards as well as contact with pharmacists and behavioral health professionals. Mental health programs dealing with the full age spectrum, with a particular expertise in the management of post-traumatic stress disorders in children and the elderly, are also offered. Access to these unique programs is being extended across the Commonwealth through the use of the KTHN. This

project addresses the reality that it would take a vast network of responders to stabilize a community in case of a major public health disaster.

Table VII-4: HRSA Program Attendance, September 2003 to present

Providers	Project Year One	PY Two	PY Three	PY Four	Total
Agricultural	312	436	833	80	1,661
Allied Health	28	294	204	215	741
Dentist	770	271	409	198	1,648
Dental Hygienist/ Dental Assistant	369	348	381	134	1,232
EMS	204	20	7	10	241
Healthcare Administration	292	347	272	8	919
Mental Health	512	445	1,029	338	2,324
Nurse	1,692	865	2,824	406	5,787
Nurse Practitioner	10	26	36	6	78
Pharmacist	406	201	92	213	912
Physician	676	108	480	144	1,408
Public Health	2,069	375	1,028	74	3,546
Veterinarian	42	25	33	39	139
Other	817	471	1,494	425	3,207
Totals	8,199	4,232	9,122	2290	23,843

Online modules are designed to be user-friendly and require only minimal computing resources, thus increasing access to a wider audience in the more remote areas of the state. *Preventing Transmission of Infections* is a unique self-paced distance learning module that uses videos and case scenarios to explore the modes of disease transmission. Disaster transmission knowledge empowers the healthcare worker to implement safer healthcare practices and is fundamental to any effective disaster response. Participants receive free continuing education upon completion of the course which takes approximately 1.5 hours. This free module is available on the learning management system managed by the Kentucky Department for Public Health known as Kentucky TRAIN (TrainingFinder Real-time Affiliate Integrated Network).

In an effort to expand the impact of presenters and their expertise, the CHHP videotapes live programs and make them available via the CHSE website. Participants can access these video-archived programs, each taking approximately 1.5 hours to complete, then receive free continuing education credit. A series of these courses have been made available at http://www.chse.louisville.edu/disasterprepcourses.html.

A summary of current online offerings include:

- Population Health Protection and Information Infrastructure
- Avian Influenza & The Coming Pandemic
- Emergency Medical Management of Radiological/Nuclear Incidents
- Neuroterrorism: Chemical Threats to Human Health
- Pandemic Flu: Will It Occur & Are We Prepared?
- Kentucky's Preparedness Plans
- Overview of the Bioterrorism Threat
- Clinical Lab Support for a Bioterrorism Event
- Communication and Surveillance Among Healthcare Networks
- Human Patient Simulation - Bioterrorism Attack
- Bioterrorism: Legal and Ethical Implications
- Mental Health Issues in Coping with Bioterrorism
- Recognizing Clinical Symptoms of Biothreat Agents

The CHHP has also sponsored symposia in order to address current public health challenges, energize relationships and create new opportunities for dialogue. A two-day conference, “Roles of Health Professionals in the Early Detection and Response to Terrorism: Biological, Chemical and Radiation Hazards,” was hosted on September 9 and 10, 2005 and focused on all-hazards preparedness, This

symposium featured national and local experts in the field and was attended by a diverse group of health professionals. All lectures were videotaped and are available as online course offerings. On May 30, 2006, the school partnered with the Kentucky Department for Public Health to broadcast the "Healthcare Worker Immunization" symposium via videoconference to 21 sites throughout Kentucky allowing for 127 participants. The aim of this timely half-day program was to provide guidance on current immunization recommendations and to begin a dialogue regarding current practices for healthcare worker immunization programs in Kentucky. Using videoconferencing technology, this program provides professionals in remote parts of the state the opportunity to receive fully updated information.

The American Public Health Association (APHA) organizes National Public Health Week (NPHW) each year and develops a national campaign to educate the public, policy makers and practitioners about issues related to the theme. The 2007 theme is *Preparedness and Public Health Threats: Addressing the Unique Needs of the Nation's Vulnerable Populations*. To kick-off NPHW, the school is hosting a community preparedness forum for Metro Louisville on the evening of Monday, April 2, 2007. The purpose of the event is to create an opportunity for dialogue, teach family preparedness strategies and present what local agencies are doing to protect citizens in the event of a disaster. Attendees will also have the chance to visit exhibit booths to collect preparedness handouts and resources while enjoying light refreshments. Event partners and panelists include the following agencies: Archdiocese of Louisville, American Red Cross Louisville Area Chapter, JCPS, Kentucky Department for Public Health (KDPH), Kentucky Office of Homeland Security, Louisville/Jefferson County Metro Emergency Management Agency, LMPHW and SPHIS.

In partnership with the University's standardized patient program, the CHHP has developed novel ways of bringing reality to training programs for disaster preparedness and response. In particular we have developed realistic scenarios involving the clinical presentation of infection with biothreat agents such as smallpox and anthrax. Key to these presentations is the use of moulage, which are advanced theatrical make-up techniques, to create the lifelike appearance of the skin manifestations of these diseases. These innovative training strategies are highlighted in the DVD, *Bringing Reality to Preparedness Education: Bioterror and the Use of Moulage.* To further enhance continuing education courses, the CHHP has developed scenario-driven DVDs to enable participants the opportunity to demonstrate understanding of the complexities involved in appropriate disaster response. Each video shows a "staged" patient encounter in a variety of settings (e.g. hospitals, clinics, laboratories, etc) to prompt consideration of issues such as use of protective equipment, safe patient interaction, isolation and treatment protocols. The first scenario, *Respiratory Illness: A Case Review,* begins with a video segment using a role player presenting with a simulated infectious disease. A second DVD, *Medical Management of Chemical Incidents for Health Professionals*, demonstrates the necessary actions to treat an individual exposed to an organophosphate and protect response personnel.

5. A list of other educational institutions, if any, with which the school collaborates to offer continuing education.

The list of educational partners includes:

- Eastern Kentucky University (EKU), Richmond, KY
- University of Kentucky (UK), Lexington, KY:
  - College of Agriculture
  - College of Medicine
  - College of Social Work
  - College of Pharmacy
  - College of Public Health
- University of Louisville, Louisville, KY:
  - School of Dentistry
  - School of Medicine
  - School of Nursing
- Western Kentucky University (WKU), Bowling Green, KY
- Kentucky TeleHealth Network (KTHN), Lexington, KY
- UofL Healthcare, Louisville, KY

6. Identification of the measures by which the school may evaluate the success of its service program, along with data regarding the school's performance against those measures over the last three years.

Table VII-5 shows the objectives corresponding to SPHIS Goal 4, "promote collaboration and community/state partnerships." These objectives are the measures by which the school will evaluate the success of its service program.

Table VII-5: Service Measures,

Outcome Measures	Actual 2003-04	Actual 2004-05	Actual 2005-06	Goal 2008
Increasing the number of community partnerships that support local metropolitan area government agencies, metropolitan area businesses, community-based organizations and health care organizations to 25 in 2008.	24	24	25	25
Increasing the number of partnerships with state, regional and federal agencies to 10 in 2008.	8	9	10	10
Increasing the number of collaborative programs with K-12 educational institutions to 2 in 2008.	1	0	2	2

Additional measures include the following.

- Continuing leadership through monthly meetings of the Environmental Health Committee of the Partnership for a Green City, involving UofL, Louisville Metro Government and the Jefferson County Public Schools. This measure is fully satisfied at present.
- Developing an electronic clearinghouse for service opportunities with community and government agencies by June 2007.

7. A description of student involvement in service.

The MPH program plans for student involvement in service starting with the LMPHW and Louisville Metro government. There are many other service opportunities with organizations that support health services for the under- and uninsured patients in the Louisville community. See the response to Criteria V.B.2 for additional information regarding the MPH practica.

The concepts of service learning are incorporated into the MPH program beginning in the first semester. Students work with specific programmatic aspects of LMPHW in collaboration with LMPHW staff and SPHIS faculty. Student involvement in projects is described below.

- Healthy Start seeks to reduce child mortality in targeted areas of West Louisville, an area that suffers infant mortality rates up to two times higher than the national average. The program has a variety of components that are operated through three Neighborhood Place locations. The program is also administered in partnership with the Community Councils of these Neighborhood Places and is a part of LMPHW and Neighborhood Place integrated services system. Students worked with local hospitals, healthcare organizations, and Healthy Start in organizing an educational conference focusing on grief and its impact on parents, healthcare workers, and the community.
- The Mayor's Healthy Hometown Movement is a multifaceted program designed to improve the overall health of the Louisville community by changing the culture of the city in a way that supports healthy living. The program aims to support citizens in developing healthier eating habits and in increasing their physical activity levels in order to reduce the number of obese and overweight individuals in Louisville by 10% throughout the course of the three-phased Movement. Students have worked to develop an educational display that can be used at community and faith-based health fairs in an effort to promote the program and its objectives.
- Mobilizing for Action through Planning and Partnerships (MAPP) is a process for community health and strategic planning used in Louisville for about a year. Students performed interview and assessments throughout the community in an effort to assess what the community feels are the most important health issues they face. This survey served as a basis for LMPHW strategic planning for 2007.

- The LMPHW and the city are taking a coordinated, multi-agency approach to planning and development in regards to emergency preparedness, because they realize that no individual agency has the expertise or resources to single-handedly respond to an emergency or a disaster. Students have worked with the LMPHW's Public Health and Emergency Preparedness department to develop, coordinate, and implement the pandemic influenza summits held in Kentucky.
- Students in the Critical Thinking and Program Evaluation class offer program evaluation services to the LMPHW, the Family Health Centers and the Seven Counties Services Inc. Student teams develop evaluation plans for each of the entities they work with and undertake an evaluation project.

MPH students are also encouraged to get involved with professional organizations at the local and national level. With assistance from faculty sponsors, the MPH students successfully petitioned to create a University of Louisville chapter of the Kentucky Public Health Association, Student involvement in the 2007 KPHA conference includes poster and speaker sessions on community associated MRSA among athletes and addressing asthma in the school-aged child. In preparation for National Public Health Week, the Student Association and MPH students are working with the school and LMPHW to put on a public health preparedness program mentioned previously and staffing booths to distribute materials and products associated with preparedness (e.g. wellness handouts, hand hygiene and cough etiquette posters, and bottles of hand sanitizer).

Many MS/BDS students are members of professional associations. Through their field work and courses of study, these students have assisted department faculty in providing statistical support and service to clinicians and investigators doing research at the university and in the community. Past projects have included data management for maternal and child health initiatives at LMPHW, statistical support for the university's educational initiative in Belize and presentation of work at national professional meetings such as the Society for Medical Decision Making annual meeting.

MSc/CIS students are involved in service activities that include serving on local, state and national agency boards and providing informational presentations to organizations on a particular disease or public health issue. Students are also involved in national issues such as literacy and nutrition. Students have provided books and nutritional information to families in conjunction with pediatric physician visits.

8. Assessment of the extent to which this criterion is met.

This criterion is met. In order to enhance the visibility and operational efficiency of activities under the service rubric, three new activities have also been initiated. First, activities are underway in conjunction with the university's IT services to create a web-based application to enable faculty, staff and students to self-report services to a tracking database. Second, there will be feedback and assessment by all faculty, staff, students and alumni, including input from the Community Advisory Board, to maintain alignment of the service program with the school's mission, goals and objectives through the annual review process (described in Section X.A.2). Third, the criteria for annual distinguished service award will be developed in Spring 2007 and presented during academic year 2007-08 to recognize individual excellence in service by a faculty member, a staff member and a student for service provided to the communities that we serve.

FACULTY

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

The school is in a period of expansion of its faculty to meet the needs of a growing number of academic programs, particularly the new MPH degree. It is not at its target number of faculty in each department to support the teaching, research and service goals and objectives of the school. However, the faculty is adequate in number to serve the student body at its current size and is well equipped in terms of multidisciplinary background, level of educational preparation, excellence in teaching, high level of research productivity and strong background of professional practice experiences. Particularly rapid growth is expected in areas with development of new degree programs, especially the health information sciences arena. The current target is to achieve a total of at least 45 full-time faculty members by 2009.

Expected Documentation

1. **Identification in a table or chart of faculty who support the degree programs offered by the school, indicating at least professorial rank, tenure status, percent time, earned degrees, universities at which degrees were earned, disciplinary area of degree, area of teaching responsibility, area of research interest, and selected demographic data (gender, ethnicity).**

As of August 1, 2006, the school has 31 full-time faculty[1] (30.64 FTE) and three part-time faculty (1.30 FTE) in its five academic departments. This number is projected to grow by eight full-time faculty members over the next year, to a minimum of 39 full-time faculty by the beginning of academic year 2007. (The school has 14 open faculty recruitments as of September 2006.) Since August 1, 2004, the school has hired 16 full-time faculty. At present, there are three part-time faculty.

Currently, 11 faculty are tenured and three are in tenure track positions. There are specific SPHIS-documented guidelines for faculty promotion and tenure as noted in Section III.

SPHIS also counts 27 individuals as associate, adjunct or gratis faculty. The roles of these volunteer faculty usually include the teaching and mentoring of students.

Tables VIII-1 through VIII-5 provide faculty details regarding: name; title or rank; tenure status; FTE; gender race or ethnicity; graduate degrees earned, institution and discipline; teaching area; and research interests, by department, of our core faculty, which we define as all faculty who maintain an FTE appointment with the school. Table VIII-6 provides faculty details regarding name; title or rank; department; title and current employer; FTE; gender; race or ethnicity; highest degree earned; discipline; and teaching areas.

Faculty appointments and ranks are defined and outlined by the University of Louisville *Redbook* (http://www.louisville.edu/provost/redbook/) as well as the SPHIS Promotion, Appointment and Tenure document (resource file) and are summarized below:

Faculty Rank

Faculty ranks are professor, associate professor, assistant professor and visiting scholar.

Type of Appointments

Full-time Appointments

Requirements for appointment to a full-time faculty position in the school include, as a minimum, an advanced, usually doctoral, degree (MD, PhD, DrPH, DSc, EdD or equivalent) unless it can be well-documented that masters level training is a standard in a given discipline for faculty appointment at other research-intensive institutions. The appointee shall sign a contract, approved by the Board of Trustees, stipulating that the appointment is made subject to the regulations, policies and provisions of employment at the University including participation in the SPHIS Professional Practice Plan.

[1] UofL recognizes employees with .80 or greater FTE as full-time employees.

Temporary Appointments

Temporary appointments to the various academic ranks, which include lecturers and visiting faculty, are those made for specifically limited time periods less than one year for special purposes. In no case shall temporary appointments or renewals result in the acquisition of tenure.

Term Faculty Appointments

All non-tenurable, full-time faculty that are not temporary are term. Term Faculty is a full-time faculty appointment without tenure for a stipulated contract period not to exceed three years. Such appointments are not probationary appointments and no such appointments, continuation or renewal thereof results in acquisition of tenure or implied renewal for subsequent terms.

Probationary Appointments (Tenure Track)

Probationary appointments are appointments of full-time faculty members without tenure provided; however, no probationary appointment to the University shall extend beyond the period when tenure would normally be granted.

Tenured Appointments

Tenure is the right of certain full-time faculty personnel who hold academic rank to continuous full-time employment without reduction in academic rank until retirement or dismissal.

Part-time Appointments

Part-time faculty are appointed by contract to teach specified courses or to engage in specified instruction, research or service less than full time for a designated period. No such appointment, continuation, or renewal thereof shall result in acquisition of tenure or implied renewal for subsequent periods. Part-time faculty shall hold rank according to education and experience.

Emeritus Appointment

This appointment may be conferred upon retired faculty if requested by the department faculty and dean and approved by the President and Board of Trustees

Gratis Appointment

This appointment is given to individuals who do not have a primary appointment at another teaching institution and meet the educational requirements and whose contribution supports the mission of the school. Requirements for this appointment include, as a minimum, an advanced, usually doctoral, degree (MD, PhD, DrPH, DSc, EdD or equivalent) unless it can be well-documented that master's level training is a standard in a given discipline for faculty appointment at other research-intensive institutions.

Associate Appointment

This appointment is given to faculty whose primary appointment is with another school or department and whose contributions to the school are sustained and important to the mission of the school.

Adjunct Appointment

This appointment is given to individuals whose primary appointment is with another teaching institution, who meets the educational requirements for an appointment and whose contribution supports the mission of the school.

Joint Appointment

This appointment is given to faculty whose appointment is split between two departments or units within the university and whose salary support may be shared by these entities.

Table VIII-1: Faculty who Support Degree Offerings of the School or Program: Department of Bioinformatics and Biostatistics

Name	Title or Rank	Tenure Status	FTE	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution	Discipline	Teaching Area(s), Fall 2006	Research Interest
Brock, Guy	Assistant Professor	Term	1.00	M	W	MS, PhD	Univ New Mexico	Statistics	Statistics	Statistical genetics, micro array analysis, fuzzy logic, linkage analysis, missing values, regular networks
Datta, Somnath	Professor	Tenured	1.00	M	A	Mstat, PhD	Michigan State Univ	Mathematical Statistics, Statistics/ Probability	Statistics	Biostatistics, Bioinformatics, Bootstrap Methods, Compound Decision Theory, Empirical Bayes, Genetics, Nonparametric Function Estimation, Survival Analysis, Time Series
Datta, Susmita	Associate Professor	Tenured	1.00	F	A	MS, PhD	Univ Georgia	Statistics	Statistics, Bioinformatics	Bioinformatics (Microarray and proteomic data analysis), Biostatistics (Survival analysis), Statistical Genetics
Goldsmith, Jane	Associate Professor	Term	1.00	F	W	MS, PhD	Case Western Reserve	Mathematical Statistics	Linear models; Design Clinical Trials; Biostatistics Methods	Clinical trials methodology; information theory; data validation
Kong, Maiying	Assistant Professor	Tenure Track	1.00	F	A	MS, PhD	Jiatong Univ, Indiana Univ	Computational Math, Statistics	Biostatistical Methodology	Parametric and semiparametric response surface modeling in drug interaction; Bioassay; High dimensional splines; Mixed effect models; Generalized linear models; Longitudinal data study; Pre-clinical studies; Early phase clinical studies; PD/PK modeling; Statistical computing.
McCabe, Steven	Assistant Professor		0.50	M	W	MD, MSc	Univ Toronto, McMaster Univ	Surgery, Clin. Epidemiology	Medical Decision Analysis; Utility Theory and Assessment; Care Control Cohort Studies	Decision Analysis; Clinical Research Methods; Diagnostic Test Measurement; Decision Analysis; Hand Surgery; Carpel Tunnel Syndrome; Outcome Measures
Myers, John	Visiting Scholar		1.0	M	W	MSPH, PhD	UofL	Biostatistics, Decision Science	Biostats Seminar Series; Economic Evaluation of Health Care	Health care economics and the impact on public policy; theoretical foundations of cost-effectiveness analysis;
Parrish, Rudolph	Chair and Professor	Tenured	1.0	M	W	MA, PhD	Appalachian State, Univ Georgia	Mathematics, Statistics	Statistical Computing	Statistical computing; clinical research; bioinformatics
Thompson, Caryn[2]	Associate Professor	Tenure Track	1.0	F	W	MSc, PhD	Univ Guelph, Oregon State Univ	Statistics	Statistics	Spatial statistics; computer intensive statistics; biological & health sciences applications of statistics; statistical issues in the design & analysis of microarray experiments
Yoo, Jae	Assistant Professor	Term	1.0	M	A	MS, PhD	Univ. Minnesota	Statistics	Biostatistical Methods	Sufficient dimension reduction; Generalized linear model; non-linear regression; survival analysis, bioinformatics, multivariate analysis

[2] Caryn Thompson, PhD, left the faculty of SPHIS, effective January 15, 2007.

Table VIII-2: Faculty who Support Degree Offerings of the School or Program: Department of Environmental and Occupational Health Sciences

Name	Title or Rank	Tenure Status	FTE	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution	Discipline	Teaching Area(s), Fall 2006	Research Interest
Jacobs, Robert	Professor	Term	1.00	M	W	MSc, PhD	Baylor Univ, Univ N. Carolina	Biology, Environ Sc/Engineer	Environmental and Occupational Health	Occupational lung disease; indoor air quality; health effects of exposure to organic dust
Ramos, Irma	Assistant Professor	Term	1.00	F	H	MS, MD	Biology, Medicine	Univ Puerto Rico, Nordestana Univ	Environmental and Occupational Health	Health transaction cost economics
Tollerud, David	Chair and Professor	Tenured	1.00	M	W	MD, MPH	Medicine, Epidemiology	Mayo Medical, Harvard	Environmental and Occupational Health	Environmental Health
Zhang, Qunwei	Assistant Professor	Tenure Track	1.00	M	A	MD, MPH, PhD	Medicine, Public Health, Environ. Health	Fujian Medical Univ, Zhejiang Med Univ, Fukui Medical Univ	No teaching responsibilities currently	Pulmonary toxicology; Metals toxicology, genotoxicology and carcinogenesis; Lung ischemia and ion channel; Free radicals and pulmonary diseases; Gene expression and function; Shear stress and NADPH oxidase; Signal transduction involved in tumor promotion, prevention and cellular function.

Table VIII-3: Faculty who Support Degree Offerings of the School or Program: Department of Epidemiology and Population Health

Name	Title or Rank	Tenure Status	FTE	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution	Discipline	Teaching Area(s), Fall 2006	Research Interest
Baumgartner, Kathy	Associate Professor	Tenured	1.00	F	W	MA, MS, PhD	S. Illinois Univ, Univ Texas	Archaeology/ Anthropology, Epidemiology	No teaching responsibilities currently	Breast cancer; women's health
Baumgartner, Richard	Chair and Professor	Tenured	1.00	M	W	MA, PhD	Univ New Mexico	Biological Anthropology, Community Health Sc.	Epidemiological Methods	Body composition, obesity, muscle loss, chronic diseases, aging, nutritional epidemiology
Groves, Frank	Assistant Professor	Term	1.00	M	W	MD, MPH	Louisiana State Univ	Medicine, Epidemiology	Intro to Epi, Disease Surveillance, Clinical Epidemiology	Epidemiology of cancer
Hornung, Carlton	Professor	Tenured	1.00	M	W	MA, PhD, MPH	Syracuse Univ, Johns Hopklins	Sociology, Epidemiology	Clinical Trials II	Clinical research training; cardiovascular disease epidemiology; evidence based medicine
Muldoon, Susan	Assistant Professor	Term	0.82	F	W	MPH, PhD	Univ Illinois Chicago, Univ Pittsburgh	Health Resources Management, Epidemiology	Clinical Epidemiology;	Complex adaptive networks in health
Wang, Chenxi	Assistant Professor	Term	1.00	M	A	MD, MS, PHD	Tianjin Univ, Beijing Medical Univ, Univ Alabama Birmingham	Clinical Medicine, Medical Sciences, Nutrition Sciences	Nutrition Epidemiology	Nutrition; Obesity; Genetic epidemiology

Table VIII-4: Faculty who Support Degree Offerings of the School or Program: Department of Health Management and Systems Sciences

Name	Title or Rank	Tenure Status	FTE	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution	Discipline	Teaching Area(s), Fall 2006	Research Interest
Austin, Raymond	Assistant Professor	Term	1.00	M	W	MA, PhD	West Virginia Univ, Virginia Tech	Sociology, Public Administration	PHA Health Policy	Health Information; Health policy; Health Administration; Electronic data exchange
Esterhay, Robert	Chair and Associate Professor	Term Rolling	1.00	M	W	MD	Case Western Reserve	Medicine	Health Systems	Health information infrastructure for personal health; health care services; public health
Gall, Stanley	Professor	Tenured	0.50	M	W	MD	Univ Minnesota	OB/GYN	No teaching responsibilities currently	Immunology Infectious Disease; Vaccines; Antibiotics; Clinical Trials
Steiner, Prasaad	Professor	Term	0.82	M	W	MD, MPH, PhD	UofL, Univ North Carolina	Family Medicine, Epidemiology	Health Systems: Community Health Management	Quality of Life Assessment; Community Health Status Assessment; Strategies for Quality Improvement; Screening for Depression
Troutman, Adewale	Associate Professor	Term	1.00	M	AA	MA, MD, MPH	SUNY. Univ Med & Dent NJ, Columbia Univ	Black Studies, Medicine, Public Health Admin	Community Health Education	Social Determinates of Outcomes; Stress & Disease; Sexual Addiction; Global Health; Creating Health Equities through Social Justice
Wainscott, Barry	Assistant Professor	Term	1.00	M	W	MD, MPH	UofL, Univ California Berkeley	Medicine, Epidemiology	PHA Health Policy	Communicable disease control, health policy, disease prevention

Table VIII-5: Faculty who Support Degree Offerings of the School or Program: Department of Health Promotion and Behavioral Sciences

Name	Title or Rank	Tenure Status	FTE	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution	Discipline	Teaching Area(s), Fall 2006	Research Interest
Andress, Lauri[3]	Assistant Professor	Term	1.00	F	AA	MPH, JD, PhD	Univ Texas, S. Texas College of Law, Univ. Texas	Health Services Organization, Law, Management and Policy Sciences	No teaching responsibilities currently	State-level policies on the organization of health services; the effects of power on marginalized communities; a comparison and analysis of social capital and community building as levers for improved population health; the social determinants of health in the United States and Britain, the public policy process, community organizing, social movements, message framing and agenda setting
Atlas, Ronald	Professor	Tenured	0.30	M	W	MS, PhD	Rutgers Univ	Microbiology	Microbiology	Molecular Detection of Pathogens; Evolution of Antibiotic Resistance; Steps for Preventing Misuse of Science
Carrico, Ruth	Assistant Professor	Term	1.00	F	W	MA, PhD	Webster Univ, California Coast Univ	Health Services Management, Management	Social and Behavioral Science in Healthcare	Immunizations, health care associated with infectious diseases, novel approach to training and education
Clover, Richard	Dean and Professor	Tenured	1.00	M	W	MD	Univ Oklahoma	Family Medicine	Immunization Update	Infectious Disease Epidemiology
Harris, Muriel	Assistant Professor	Term	1.00	F	AA	MPH, PhD	Univ South Carolina	Public Health	No teaching responsibilities currently	Socio-cultural factors influencing health; health disparities; program evaluation
LaJoie, A. Scott	Assistant Professor	Term	1.00	M	W	MA, MSPH, PhD	Western Kentucky Univ, UofL	Experimental Psychology, Decision Science, Experimental Psychology	Health Decision and Risk Analysis	Network science applications in health
McKinney, Paul	Associate Dean and Professor	Tenured	1.00	M	W	MD	Univ Texas	Internal Medicine	Evaluation of Health Care Literature	Bioterrorism; epidemiology of infectious diseases
Walton, Peter	Associate Dean and Assistant Professor	Term	1.00	M	W	MD	Univ Pennsylvania	Medicine	No teaching responsibilities currently	Health decision making; health informatics; public health surveillance
Wilson, Richard	Acting Chair and Professor	Term Rolling	1.00	M	W	MPH, DHSc	Loma Linda Univ	Public Health Education, Health Science	Issues in Public Health	Prevention of alcohol, tobacco and other drug abuse

[3] Lauri Andress, MPH, JD, PhD, will join the faculty of SPHIS, effective April 1, 2007.

Table VIII-6: Other Faculty Used to Support Teaching Programs (associate, adjunct or gratis), August 1, 2006

Name	Appt.	Dept.	Rank	FTE	Gender	Race or Ethnicity	Highest Degree Earned	Discipline	Teaching Area(s), Fall 2006
Aldrich, Timothy	Adjunct		Associate Professor	0.00	M	W	PhD	Epidemiology	No teaching responsibilities currently
Altpeter, Terry	Gratis		Assistant Professor	0.00	F	W	PhD	Health Administration	No teaching responsibilities currently
Andersen, Shelia	Gratis		Assistant Professor	0.00	F	W	JD	Law	No teaching responsibilities currently
Furr, LeRoy	Associate	EPH	Associate Professor	0.00	M	W	PhD	Sociology	No teaching responsibilities currently
Gregg, Jennifer	Associate	EPH	Assistant Professor	0.00	F	W	PhD	Mass media/telecom.	No teaching responsibilities currently
Hanchette, Carol	Associate	EPH	Assistant Professor	0.00	F	W	PhD	Geography	Medical Geography; GIS & Public Health; Disease, Ecology, Environmental Management in Africa; The Global Environment
Hart, Joy	Associate	EPH	Professor	0.00	F	W	PhD	Communication	No teaching responsibilities currently
Heinbokel, John	Gratis		Assistant Professor	0.00	M	W	PhD	Oceanography	No teaching responsibilities currently
Humbaugh, Kraig	Gratis		Assistant Professor	0.00	M	W	MD	Medicine	No teaching responsibilities currently
Kelly, Susan	Associate	EPH	Associate Professor	0.00	F	W	PhD	Medical sociology	No teaching responsibilities currently
Laber, Damian	Associate	EPH	Assistant Professor	0.00	M	W	MD	Medicine	No teaching responsibilities currently
Lewis, Larry	Adjunct		Associate Professor	0.00	M	W	PhD	Mathematics	Probability
Palmer, Larry	Associate	HMSS	Professor	0.00	M	AA	LLB	Law	Legal and Bioethical Aspects of Public Health
Potash, David	Gratis		Assistant Professor	0.00	M	W	MD	Medicine	No teaching responsibilities currently
Potash, P Jeffrey	Gratis		Assistant Professor	0.00	M	W	PhD	History Social Science	No teaching responsibilities currently
Rising, William	Adjunct		Assistant Professor	0.00	M	W	PhD	Mathematics	No teaching responsibilities currently
Rothstein, Mark	Associate	EPH	Professor	0.00	M	W	JD	Law	No teaching responsibilities currently
Slaton, Robert	Gratis		Associate Professor	0.00	M	W	EdD	Educational Social Work	No teaching responsibilities currently
Stone, Howard	Associate	EPH	Associate Professor	0.00	M	W	PhD	Clinical Psychology	No teaching responsibilities currently
Studts, Jamie	Associate	EPH	Assistant Professor	0.00	M	W	LLM	Health Law	Health Services and Outcomes Research
Swank, Ann	Associate	EPH	Professor	0.00	F	W	PhD	Exercise Physiology	Exercise Training
Taylor, James	Gratis		Assistant Professor	0.00	M	W	Dman	Organizational Change	No teaching responsibilities currently
Whalen, Cathy	Gratis		Assistant Professor	0.00	F	W	PharmD	Pharmacy	Drug and Device Development and FDA Regulations
Wiggins, Osborne	Associate	EPH	Professor	0.00	M	W	PhD	The New School for Social Research	No teaching responsibilities currently
Wulff, Judith	Associate	HPBS	Professor	0.00	F	W	MS	Library Service	No teaching responsibilities currently
Yasnoff, William	Gratis		Professor	0.00	M	W	PhD	Computer Science	No teaching responsibilities currently
Zahn, Matthew	Associate	HMSS	Assistant Professor	0.00	M	W	MD	Medicine	No teaching responsibilities currently

2. Description of the manner in which the faculty complement integrates perspectives from the field of practice.

The SPHIS faculty interact with a wide variety of organizations, from local governments to international not-for-profit groups. These relationships facilitate the incorporation of public health viewpoints into educational curricula, the practicum activities of students, clinical and community-related research projects and the service mission of the school. All of these integrative activities are key components of the appointment, promotion, tenure and annual faculty review processes of SPHIS.

The current core faculty bring a wealth of experience from public health activities. In addition to the core faculty, associate, adjunct and gratis faculty members who serve on the front lines of public health departments at the state and local level bring the immediacy of practice concerns to full-time faculty and students alike.

Examples of such activities on the part of faculty are listed below.

- Kathy Baumgartner, PhD, has interacted for over 15 years with the cancer registry system funded through the National Cancer Institute's Surveillance Epidemiology and End Results Program (SEER). She continues to direct population-based epidemiologic studies, both case-control and cohort, based on collaboration with the tumor registry in New Mexico. Collaboration with the cancer registry in Kentucky is being developed.
- Richard N. Baumgartner, PhD, served as the Associate Director for Science in the Institute of Public Health at the University of New Mexico and interacted with members of the New Mexico State Department of Health in the development of public health research. He also interacts regularly with the NCI SEER cancer surveillance program.
- Ruth Carrico, PhD, RN, CIC, works collaboratively with the Jefferson County Public School system, the 28th largest school district in the US, regarding a variety of health initiatives including immunization, health services education for school faculty and staff, and emergency preparedness. This school system consists of 150 schools and learning sites and serves over 97,000 students. Dr. Carrico is also nationally recognized for her work with hospitals and healthcare organizations in the realm of healthcare-associated infection and healthcare worker immunization. Dr. Carrico served as editor for the *APIC Text* of infection control and epidemiology, the primary textbook used worldwide by infection control professionals, published by Association for Professionals in Infection Control and Epidemiology, Inc. Dr. Carrico continues to work with healthcare organizations across the state and region as they work to address infection related performance improvement challenges. Past efforts have included collaboration with the Joint Commission on Accreditation of Healthcare Organizations in research projects that have impacted performance measurement and practice outcomes.
- Richard Clover, MD, has served as a voting and liaison member of the CDC's Advisory Committee on Immunization Practices.
- Somnath Datta, PhD, has had several IPA contracts with CDC over the years. He has worked with CDC statisticians and scientists to estimate HIV incidence among repeat blood donors. He has also collaborated with CDC scientists in developing classification rules of bacterial specimens based on mass spectrometry. This research had direct implications in determining a potential bioterrorism threat.
- Susmita Datta, PhD is a bioinformatician and a biostatistician who is actively involved in the area of public health research. She has developed efficient designs for estimating HIV vaccine efficacy. She has been involved with determining genetic biomarkers for colon and ovarian cancer with high throughput microarray data. Dr. Datta has helped to predict survival times of lung cancer patients with microarray data. She has been a member of the Ovarian Cancer Center, Atlanta, GA. Her most recent endeavor is the identification of biomarkers for fetal alcohol syndrome and the use of shotgun proteomics in order to find differential proteomic signatures to classify normal and alcohol exposed fetuses. Her recent work in this area has been accepted for presentation by the Teratology Society for its 47th annual meeting. Continuation of this research may bring a new test similar to amniocentesis for pregnant woman.
- Robert Esterhay, MD, has had a number of ties to state agencies in Kentucky dealing with public health. He is a member of the Kentucky Bioterrorism Advisory Committee and the Kentucky TeleHealth Board as well as Chair of the eHealth Workgroup. He helped write the Kentucky eHealth Bill for the Kentucky Legislative Research Commission that was signed into law on March 8, 2005. He

served as Co-Chair of the Kentucky eHealth Board and is Co-chair of the Kentucky Healthcare Infrastructure Authority. He is currently a member of the Advisory Group for the Kentucky eHealth Board. He served as project coordinator for the Kentucky Pre-event Vaccination System for delivery of smallpox vaccine for first responders across the state at 10 regional vaccination centers. He helped create the Louisville Health Information Exchange, a Regional Health Information Organization. He served as Vice Chair of the Information Management Committee of getCare, a program funded by the Robert Wood Johnson Foundation (RWJF)to provide health care for uninsured persons in Louisville Metro. Dr. Esterhay previously served as a commissioned officer in the US Public Health Service (USPHS). Immunization Practices.

- Stan Gall, MD, formally served as the Chair of the Department of Obstetrics and Gynecology at the University of Louisville. He is a Liaison Member of the Advisory Committee on Immunization Practices, representing the American College of Obstetrics and Gynecology. He has an active interest in the public health application of innovative vaccine products, especially Human Papilomavirus Vaccine (HPV). He brings this background to his many presentations to public health professionals on behalf of CHHP.
- Muriel Harris, MPH, PhD, has worked nationally and in three countries internationally, with nearly 20 years of experience in program development, health education, health promotion and health program evaluation. Her work has included working in community based organizations and providing consultation in program planning and program evaluation. Dr Harris collaborates with the Center for Health Equity, Louisville Metro Public Health and Wellness (LMPHW), and the Kentucky TB Program. In her research she continues to understand the impact of sociocultural factors on health and well-being and their impact of health disparities.
- Robert Jacobs, PhD, formerly directed the Graduate Program in Public Health at the Eastern Virginia Medical School and Old Dominion University. Dr. Jacobs has worked for a private not-for-profit organization where he directed a research program in occupational health and safety. He is past Chair of the Committee on Organic Dust of the International Commission for Occupational Health (ICOH) of the International Labor Organization (ILO) and collaborated on international health projects in Sweden and Moldova. He has also served as a public health advisor to Physicians for Peace, an NGO focused on improving the delivery of international health. In additional to his interest in environmental and occupational health, Dr. Jacobs has been involved in a diverse array of public health programs ranging from the development of vector control programs in developing countries (Surinam and Guyana), to programs to enhance the training of the public health workforce (Virginia Department of Public Health).
- W. Paul McKinney, MD, served as an Epidemiology Intelligence Service (EIS) Officer with the CDC from 1981-83. During this assignment, he also worked closely with the office of the North Carolina state epidemiologist in evaluating a spectrum of outbreaks of infectious disease. He also served as a USPHS Primary Care Policy Fellow in 1999. Since 1998, he has served as Liaison Member from the Association of Prevention Teaching and Research (APTR) to the CDC's Advisory Committee on Immunization Practices. Additionally, he has served on search committees for LMPHW and as a mentor for the Kentucky Public Health Leadership Institute (KPHLI).
- Irma Ramos, MD, has been involved in a variety of community outreach, research and education programs that complement her teaching and research activities. Specifically, she worked collaboratively with Region 11 of the Texas Department of Health to deliver safe drinking water training to health care professionals along the Texas-Mexican border. Dr. Ramos also has led environmental health training of community lay health educators and residents of colonias (neighborhoods) along the Texas-Mexican border. More recently, she has participated in the training of community health workers in the area of breast cancer screening and prevention. Her grant support has included funding from NIH, the Environmental Protection Agency (EPA) and the Health Resources and Services Administration (HRSA).
- David Tollerud, MD, MPH, directed an occupational medicine residency program that had trainees interacting regularly with public health, corporate and medical practitioners. He worked with the Institute of Medicine and National Research Council in formulating public health policy regarding the appropriate use of potassium iodide in the event of nuclear emergency and developed Environmental Protection Agency policies and procedures for addressing large, complex hazardous waste "megasites." He has been active in community-based organizations involving industry, labor and county governments in Pittsburgh/Allegheny County, Philadelphia and Chester, PA and Louisville,

KY. He is active in developing grant proposals involving the Louisville Metro Housing Department and the West Jefferson County Community Taskforce.
- Adewale Troutman, MD, is the current Director of LMPHW and a full-time faculty member. He was formerly the Director of the Atlanta/Fulton County (GA) Health Department.
- Barry Wainscott, MD, MPH, served as manager and chief physician with the Communicable Disease Branch of the Kentucky Department for Public Health from 2000 through 2005. His prior public health experiences include deputy director, medical director, and primary care director for the Jefferson County Health Department in Louisville; director of preventive medical services for the Santa Barbara County health agency in California; and physician health officer developing a district health department with regional programs serving a number of counties in north central Kentucky. His community health experience also includes the role of physician in preventive medicine with University of Louisville Student Health Services. His interests include communicable disease control, disease prevention and management, and health system efficiency and effectiveness.
- Richard Wilson, DHSc, has many years of experience with community efforts in the prevention and control of alcohol, tobacco and other drug abuse. This has included leadership on state and local coalitions, serving as an officer in Kentucky ACTION, a statewide tobacco policy advocacy group, serving as a consultant to the National Campaign for Tobacco-free Kids, and serving on Kentucky's Expert Panel for Substance Abuse Policy.
- Faculty members of HMSS and HPBS have received funding from both CDC and the Kentucky Hospital Association (KHA) to develop integrated advanced information management systems through the capture and analysis of electronic health data for disease surveillance and epidemiology. This large collaborative effort involves the Commonwealth of Kentucky's Department for Public Health, LMPHW, Emergint, Inc., Strategic Health Systems, Inc. and the five major hospitals in Louisville Metro. This community surveillance project created awareness among the Louisville Metro hospitals and the health department regarding the importance of integrating information for early event detection and the critical role that information technology can play in this regard. It also continues to build understanding that the problems involved in such integration do not necessarily center on technology, but rather on people, organizational agendas and concerns and the vocabularies in existing systems.

The school's faculty have served as members on a variety of state and local boards and advisory committees, including the following:
- Kentucky TeleHealth Board;
- Information Management Committee, getCare, an RWJF-funded healthcare delivery project for the uninsured;
- Kentucky Pre-Event Vaccination Task Force;
- Kentucky Bioterrorism Advisory Board;
- Kentucky Public Health Leadership Institute (KPHLI);
- Kentucky TB Advisory Committee;
- Wet Weather Team (Louisville and Jefferson County Metro Sewer District); AND,
- Strategic Toxic Air Reduction (STAR) Regulation 5.30 Stakeholder Group (Metro Louisville Air Pollution Control District).

3. Identification of outcome measures by which the school may judge the qualifications of its faculty complement, along with data regarding the performance of the school against those measures over the last three years.

The need to add additional outcome measures beyond those included in the SPHIS Scorecard is recognized in this section. However, since many of these activities span multiple years, the data are reported in aggregate over the last three-year period. Beginning no later than 2007, these data will be collected prospectively using the aforementioned Web-based system for data entry.

a. Leadership on national boards, study sections, editorial boards and advisory committees. Over the past three years, faculty have had representation on a number of important groups, including the following:
    - Expert Panels of the Institute of Medicine and National Research Council of the National Academy of Sciences;

- National Institutes of Health (NIH) Study Sections: K12 Awards, National Institute of Environmental Health Sciences (NIEHS);
- HRSA Study Sections: Title VII Funding;
- Association for Clinical Research Training (ACRT, formerly Association of Clinical Research Training Program (K30) Directors): Executive Board;
- USPHS Advisory Committee on Immunization Practices: Liaison Membership;
- Association of American Medical Colleges (AAMC) Group on Information Resources, Executive Committee;
- Science Advisory Panel to the Canadian Government;
- Editorial Board of *Annals of Agricultural and Environmental Medicine*; and,
- Agency for Toxic Substances and Disease Registry (ATSDR) advisory panels.

b. Success in achieving competitive research and educational grant awards. Full enumeration of grant awards received by faculty members can be found in Section VI.3.

c. Provision of expert peer reviews for manuscripts submitted to professional journals. Over the past three years, faculty have served as reviewers for such journals as *American Journal of Infection Control*, *Journal of Occupational Hearing Loss*, *Journal of Hand Surgery*, *Journal of Health Behavior*, *Journal of Public Health Management and Practice*, *Applied Occupational and Environmental Hygiene*, and *Journal of Occupational and Environmental Hygiene*

d. Publications in peer-reviewed journals. A comprehensive listing of publications may be found in Appendix VI-1.

e. Refereed presentations and/or papers sponsored by national or international organizations. For data regarding performance against this measure, please refer to Section VI.4.

f. Course Evaluations by Students. Students complete evaluations of all courses and instructors at the conclusion of each semester.[4] The evaluations of faculty members will be used to improve the quality of instruction. All evaluations, unless otherwise noted, are based on a five-point Likert scale with five being the highest score. Updated course/instructor evaluation data for 2006-07 will be available in the resource file.
   - MPH - Evaluations are available for all courses presented in Academic Year 2005-06. The mean instructor rating was 4.55, and the range was 3.46 to 5.00.
   - MS/BDS and PhD/BDS - Evaluations are available for all courses presented during the last three years, as follows: 2003-04, 4.84; 2004-05, 4.76; and, 2005-06, 4.75.
   - MS/Epi – No data are available, as there are no students enrolled in this program at this time.
   - MSc/CIS and PhD/PHS - Evaluations are available for Spring semesters of 2004, 2005 and 2006. The mean responses to overall satisfaction with instructors were as follows: Spring 2004, 6.5 (on a nine-point scale with nine being the highest); Spring 2005, 4.3 (on a five-point Likert scale with five being the highest); and, Spring 2006, 4.6.

g. University and national awards for excellence. While there is no expectation for individual faculty to achieve these awards, each department seeks periodic recognition of its faculty through special awards for performance excellence. Awards to faculty members during the current three year cycle include:
   - Provost's Exemplary Advising Award;
   - Distinguished University Scholar Award;
   - Distinguished Teaching Professor Award; and
   - Kentucky Virtual University (KYVU) Online Excellence Award.

h. Number of service or consulting engagements. See the response to Section VII.2 for a full listing of these service activities.

i. Number of faculty holding a terminal degree. All SPHIS faculty currently meet this qualification.

4. Assessment of the extent to which this criterion is met.

This criterion is met. The SPHIS has a well qualified faculty with a critical mass in each department to support the mission of the school. Faculty have a wide variety of experiences in the public health arena, with contributions at the national, state and local levels. Criteria to measure the qualifications of faculty have been established and agreed upon by them.

[4] Copies of completed evaluations will be available in the Resource File.

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

Expected Documentation

1. Inclusion of a faculty handbook or other written document that outlines faculty rules and regulations.

The *Redbook* (http://www.louisville.edu/provost/redbook/) is provided and maintained by the Office of the University Provost as a service to the University community. The *Redbook*, which is the basic governance document of the University, covers the organization and operation of the Board of Trustees and Board of Overseers; the organization and operation of the University Administration; the organization and governance of the academic programs; faculty personnel policies; staff organization and personnel policies; the student governance and student affairs administration.

Although schools may have their internal policies, the policies must be consistent with the *Redbook*, as it is the controlling document. The school has four unique documents that are consistent with and expand upon the *Redbook* with the purpose of further defining school policies.

- The school's Promotion, Appointment and Tenure document (resource file) presents the criteria and procedures employed within the school for the evaluation of promotion, appointment and tenure requests and for periodic career reviews. The document specifies minimum acceptable levels of teaching, research and service. Departmental criteria are not required, but where they exist procedures for evaluation of same must be in accord with the policy cited herein and must be explicit in regard to requirements upon which a recommendation for appointment, promotion and/or tenure is made for each faculty rank, or a positive periodic career review. It is understood that departments may stipulate criteria more rigorous than those addressed in this document, provided they are consistent with the University's Minimum Guidelines document and the *Redbook*. The contents of the Unit document apply to all faculty members.
- The school's Bylaws and Rules (resource file) are the official statement of the organizational structure and the rules of governance and procedures of the Faculty.
- The school's Professional Practice Plan (Appendix III-1) is essential to maintaining a faculty of excellence in teaching, research and service and to providing appropriate control of faculty professional time in order to ensure fulfillment of academic responsibilities. The objectives of the Professional Practice Plan are to: define the role and scope of professional practice activities of the faculty; strengthen relationships between the faculty and the public health community; provide the faculty remuneration commensurate with their academic and professional qualifications and activities; encourage an appropriate degree of faculty involvement in public health service; and provide additional financial support for the school.
- The school's Policies for Annual Reviews and Performance Based Salary Increase, which are available in the resource file, define: the development of the written faculty work plan in the form of an annual work assignment letter, the need for recording yearly progress toward promotion or satisfactory periodic peer review and the process for awarding salary increases.

These four documents and a hyperlink to the *Redbook* are also available at http://docushare.louisville.edu/dscgi/ds.py/View/Collection-2707.

2. Description of provisions for faculty development, including identification of support for faculty categories other than regular full-time appointments.

The SPHIS recognizes the vital importance of ongoing development of skills both among full-time and part-time faculty members. All faculty development opportunities available to full-time personnel are also available to paid part-time faculty. To this end, the school provides funding support for critical faculty activities, including, but not limited to membership in professional organizations, travel for presentations at major meetings, continuing education coursework and skill development workshops through its departments to all faculty members. Funding for these activities is provided in part through Research Incentive Funds established for departments and individual faculty members through the university's Office of the Executive Vice President for Research.

The School of Medicine's Assistant Dean for Medical Education sponsors an annual series of seminars entitled "Grand Rounds for HSC Educators." These programs are presented by nationally recognized experts in the field of health science education and are designed to advance the teaching skills of all educators at the HSC. SPHIS faculty are encouraged to attend these seminars.

Periodically, skill development workshops are provided in the use of: Microsoft Office products, including Word, Excel, PowerPoint and Access; Adobe Acrobat; Reference Manager and EndNote; Ovid and PubMed for searching the Medline database; Lectora software for the enhancement of PowerPoint presentations; and Blackboard for creation of web-enhanced or web-based coursework. These workshops are also open to university staff.

NIH grant-writing workshops are presented at least once per year under the auspices of the Research!Louisville week of scientific activities. Additional workshops are offered each year targeting other specific programs, including NASA and the Small Business Innovation Research/Small Business Technology Transfer programs.

Faculty have attended development workshops offered by other educational institutions and the federal government. These include the Center for Medicare and Medicaid Services (CMS) and the Agency for Healthcare Research and Quality (AHRQ) database workshops, covering Medicare claims data and the Medical Expenditure Panel Survey (MEPS), respectively.

The University Provost sponsors an annual development series for part-time faculty, including a stipend of $300 for those who attend at least five out of six core presentations.

The university sponsors an annual Celebration of Teaching and Learning, dedicating one full day to the enhancement and recognition of teaching excellence among its faculty.

Finally, opportunities for junior faculty to demonstrate and further their research presentation skills are provided through UofL Public Health Grand Rounds, faculty journal clubs and research seminars presented regularly throughout the year. The public health grand rounds series are broadcast through videoconferencing technology and are available to public health departments throughout the state.

3. Description of formal procedures for evaluating faculty competence and performance.

The formal process to evaluate faculty competence and performance begins with the department chairs. Annually, each chair will review the full range of information regarding faculty performance in research, teaching and service, using criteria as described above, with the assignment of duties document as the standard of measurement. Ratings and recommendations for salary adjustment under the school's performance-based salary increase policy are reviewed with each faculty member and forwarded through the associate dean responsible for faculty affairs to the dean. Evaluation forms become a permanent part of each faculty member's file.

The Promotion, Appointment and Tenure (PAT) Committee will review the performance of tenured faculty no less than every five years as part of the Periodic Career Review process. Additionally, formal review of tenure track faculty at the assistant professor level will occur during or after year 3 in their appointment cycle, in order to appraise members of their progress toward achievement of promotion and tenure. As part of this activity, all activities in research, teaching and service will be closely assessed under the guidelines stipulated by the *Redbook*. Faculty members will be provided feedback through their chairs at the conclusion of the formal review process.

4. A description of student course evaluation process and/or evaluation of teaching effectiveness.

Teaching evaluation forms are reviewed by the Student Affairs Advisory Group before implementation. At the conclusion of each course, enrolled students are asked to complete evaluation forms regarding their instructors and specific aspects of each course. A set of core questions is used throughout SPHIS, and specific additional questions may be included at the discretion of the instructors or their chairs. The evaluations are scored by the program coordinator and a summary document created for sharing with the instructor, department chair and the program director. It is the intent of SPHIS to move toward a fully online system of entry and scoring by end of the spring 2007 term.

Additionally, certain courses, particularly those with a larger number of lecturers, may choose to evaluate faculty speakers and materials on a more frequent basis. In some cases, individual lectures and course materials will be evaluated at the end of every presentation.

In addition to individual scoring and commentary by students, feedback sessions are held with all students in each program on at least an annual basis. Sessions occurring at or near the completion of each degree program will be established to provide an opportunity for students to give a comprehensive review of the program, department and school. In this way, additional commentary will be solicited about ways in which to improve coursework and enhance the learning environment.

Please see the response to Criterion VIII.A.3 for data regarding course evaluations. Completed evaluation forms will be available in the on-site resources file.

5. Description of the emphasis given to community service activities in the promotion and tenure process.

Community service activities of faculty members are highly valued and assessed at all steps along the appointment, promotion, tenure and periodic review continuum. The department chairs, PAT Committee, associate deans and dean of SPHIS all participate in elements of this assessment process. The range of activities considered includes, but is not limited to: membership on community boards, assistance with grant development in partnership with community organizations, participation in candidate selection committees, publicizing joint activities between the school and the community and joint educational projects. Particular emphasis and recognition is given to the development or substantial enhancement of new programs of service linking SPHIS and the community. A coordinator of community service activities has been named in 2006 to support this process. For additional information, please see Section VII.

A complete listing of recent service activities by faculty members may be found in Section VII.

6. Assessment of the extent to which this criterion is met.

This criterion is met. Faculty development is supported strongly and complemented with evaluation of their performance, competence and teaching abilities. Community service activities are given appropriate emphasis in the promotion and tenure process.

Criterion VIII.C.: The school shall recruit, retain and promote a diverse faculty, and shall offer equitable opportunities to qualified individuals regardless of age, sex, race, disability, religion or national origin.

Expected Documentation

1. Demographic data on the school's faculty.

The school offers equitable opportunities for hiring faculty at all levels. SPHIS strives to achieve a faculty that is as diverse as its student body and the population it represents. It also recognizes that diversity is much more than race: the school expands this definition to include other human diversity as well as academic, research and service diversity. A demographic profile of faculty is found in Table VIII-7 below.

Table VIII-7: Summary Demographic Data – Faculty, August 2006

		Core Faculty		Other Faculty		Total	
		#	%	#	%	#	%
Male		25	74%	18	67%	43	70%
	African American/Black	1	3%	1	4%	2	3%
	Caucasian	20	59%	17	63%	37	61%
	Hispanic/Latino	0	0%	0	0%	0	0%
	Asian/Pacific Islander	4	12%	0	0%	4	7%
	Native American/Alaska Native	0	0%	0	0%	0	0%
	Unknown/Other	0	0%	0	0%	0	0%
	International	0	0%	0	0%	0	0%
Female		9	26%	9	33%	18	30%
	African American/Black	1	3%	0	0%	1	2%
	Caucasian	5	15%	9	33%	14	23%
	Hispanic/Latino	1	3%	0	0%	1	2%
	Asian/Pacific Islander	2	6%	0	0%	2	3%
	Native American/Alaska Native	0	0%	0	0%	0	0%
	Unknown/Other	0	0%	0	0%	0	0%
	International	0	0%	0	0%	0	0%
Total		34	100%	27	100%	61	100%

2. Description of policies and procedures regarding the school's commitment to providing equitable opportunities without regard to age, sex, race, disability, religion or national origin.

The university is an Affirmative Action/Equal Employment Opportunity employer. The university's Affirmative Action goal is the full integration of minority group members, women, persons with disabilities and Vietnam era veterans, qualified special disabled veterans, recently separated veterans and other protected veterans into the workforce.

The university is committed to the principles of Equal Employment Opportunity. The university has directed employees to not discriminate against any employee, or applicant based on race, color, religion, age, sex, sexual orientation, national origin or disability status. Specifically, hiring units have been instructed to:

a. Recruit, hire, train and promote persons in all job titles, without regard to race, color, religion, age sex, sexual orientation, national origin or disability status;
b. Base decisions on employment so as to further the principle of equal employment opportunity;
c. Assure that promotion decisions are in accord with principles of equal employment opportunity by imposing only valid requirements for promotional opportunities; and,
d. Assure that all personnel actions such as compensation, benefits, transfers, layoffs, return from layoff, university-sponsored training, education, tuition assistance, social and recreation programs are administered without regard to race, color, religion, age, sex, sexual orientation, national origin or disability status.

Overall responsibility for the affirmative action/equal opportunity program rests with the university's Affirmative Action Director. The University of Louisville's Affirmative Action policy will be reaffirmed and reissued annually.

In full compliance with university policy, the school strives to provide equal employment opportunity on the basis of merit and without discrimination in terms of age, race/ethnicity, disability status, national origin, race, religion, sex or sexual orientation. The school shall make every reasonable effort to select all faculty from applicant pools which are representative of the labor market in terms of sex, disability, minority and veteran status as well as academic and research preparation. Furthermore, neither the university nor the school shall subject employees to discrimination in terms of compensation, benefits and/or working conditions. The school respects and values the contributions of each individual and is resolved to providing opportunities that foster success in teaching, research and in collaborative relationships with the university community, community based programs and organizations.

As evidence of its commitment to achieving a faculty demographically representative of those we serve, SPHIS has created a Diversity Committee. This committee has developed a formal school diversity plan, available in the resource file, which was submitted to and was accepted by the Office of the Vice Provost for Diversity and Equal Opportunity in 2005. It has also created a set of policies and procedures, in accordance with University of Louisville directives, for establishing and revising current guidelines and monitoring whether the goals established have been fully achieved; this document, "Ensuring Diversity in Faculty, Staff and Students," is also available in the resource file. The committee has and will continue to work closely with the University Office of the Vice Provost for Diversity as a resource in this effort.

3. Identification of outcome measures by which the school may evaluate its success in achieving a demographically diverse faculty complement, along with data regarding the performance of the school against those measures over the last three years.

As part of the University's scorecard development process, SPHIS in 2004 established outcome measures for the representation of African American and tenured women faculty (Table VIII-8).

Table VIII-8: Outcome Measures

Outcome Measure	2002	2003	2004	2005	2006	Goal 2008
Full-time African-American faculty	1	1	2	2	2	4
African American endowed chairs and professors	0	0	0	0	0	1
Full time women faculty	3	3	5	8	9	12
Women endowed chairs and professors	0	0	0	0	0	1

In addition the school will compare its faculty with the demographic distribution of its student body and the populations of the Commonwealth of Kentucky and the region surrounding Louisville (Table VIII-9). Data for Kentucky and Jefferson County in Table VIII-9 are based on the 2000 Census.

Table VIII-9: Outcome Measures by Race/Ethnicity and Gender

Outcome Measures	Kentucky	United States	SPHIS 2005-2006		SPHIS 2006-2007	
			Core Faculty	Students	Core Faculty	Students
African-American	7.3%	12.3%	6%	9%	6%	12%
Asian	0.7%	3.7%	12%	6%	18%	6%
Hispanic	1.5%	12.5%	3%	3%	3%	2%
American Indian	0.2%	0.9%	0%	0%	0%	0%
Females	51.1%	50.9%	24%	55%	26%	62%

Outcome measures will be assessed annually and adjustments made to recruiting strategies as required for achieving the required objectives. The Diversity Committee will work closely with the Office of the Dean to monitor the unit's progress toward the achievement of these established goals.

A goal set by SPHIS is to have a faculty reflective of the overall diversity of its student body, the state and the United States. The school currently has a complement of students that is 62% female and a faculty that is 26% female. There is generally a greater degree of diversity among the students than the faculty. The faculty represent a greater percentage Asians, and a lower percentage of females and African Americans than the Commonwealth of Kentucky or nationally. The percentage of Hispanics among the faculty is higher than that in the Commonwealth of Kentucky but lower than the national figure.

4. Assessment of the extent to which this criterion is met.

This criterion is met. The goal of achieving diversity in all of its forms continues to be addressed, and women, African Americans, Hispanics, and American Indians are under-represented among full-time and part-time/adjunct/associate faculty in all ranks. However, the school has well defined policies, procedures and outcome measures as well as a Diversity Committee to help achieve these goals. A formal school diversity plan was submitted to and was accepted by the Office of the Vice Provost for Diversity and Equal Opportunity in 2006. Once additional faculty are recruited through continued efforts to improve race and gender diversity, SPHIS will support their retention and development.

STUDENTS

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

Expected Documentation

1. Description of the school's recruitment policies and procedures.

The school has no formal policies for student recruitment. Recruiting of students is managed by the individual programs with administrative support provided by Student Services under the direction of the Associate Dean for Student Affairs. The policies/procedures followed by each program are discussed below.

All programs jointly sponsor a recruiting booth at student fairs within the university and at meetings and conferences of local, state and national public health organizations. Expenses for the booth are provided by the dean's office through student services.

MPH

The school, working in conjunction with the HSC Office of Communications and Marketing, developed a strategic recruitment plan for the MPH program, which is available as Appendix IX-1. The plan resulted in development of a list of targeted institutions of higher education in the state and region that offer degrees in disciplines that are relevant to pursuing graduate level education in public health (e.g. biology, psychology, mathematics, public health pre-medicine, nursing, chemistry, business, education, counseling, sociology, communication and anthropology). Recruitment materials are mailed to appropriate departments within the various institutions to inform faculty and students about the MPH offered by SPHIS. Particular attention is given to students who have expressed an interest in careers in the health care field by making inquiries to the UofL Schools of Medicine, Dentistry and Nursing. Students from Historically Black Colleges and Universities (HBCUs) are especially targeted for recruiting. Prospective students are routinely contacted by program staff to follow up on their interests.

Within the university, seniors in targeted disciplines receive letters describing the opportunity for an MPH from SPHIS. Additionally, well-qualified students not admitted to the university's Schools of Medicine and Dentistry are provided information regarding the school's MPH program. Recognized student organizations such as the Minority Association of Pre-Med Students and the Society of Undergraduate Chemistry Students also are contacted in order to schedule recruitment presentations.

MS/BDS and PhD/BDS

The Department of Bioinformatics and Biostatistics recruits students for its programs through informational posters and brochures distributed around the university and mailed to targeted schools around the state and mathematics and statistics undergraduate programs across the country.

MS/Epi

Brochures and announcements have been created and will be circulated in printed and electronic form throughout UofL and to other universities in the region. Areas of focus being promoted include cancer, aging, body composition, cardiovascular disease, nutritional and molecular epidemiology, and chronic disease. A departmental recruitment committee is being formed to develop program-specific policies and procedures for recruitment.

MSc/CIS

Candidates for this program are largely recruited from the junior faculty of the Schools of Medicine and Dentistry and from the residents and fellows of local teaching hospitals

PhD/PHS

Brochures and announcements have been created and will be circulated in printed and electronic form throughout UofL and to other universities in the region. Additionally, notices about this program will be posted at national meetings and placed in major national publications.

2. Statement of admissions policies and procedures.

All applications to the school's degree programs are submitted to the university's Graduate School, which acquires application fees and documents required for student applications to SPHIS, including standardized exam scores such as the GRE and TOEFL (if applicable), official transcripts, and two letters of recommendation. The Graduate School has defined a minimum TOEFL score of 210. Minimum scores on other standardized exams and GPA for acceptance are defined by SPHIS and are listed, by program, below.

The program, working with the school's student services, is responsible for maintaining contact with the applicant to answer questions and help him or her complete the application process. Each academic program has its own application requirements (available in the catalog, Appendix V-1).

Admissions policies and procedures originate within the degree programs and are reviewed and approved by the parent department (except for school-based programs), school admissions committee, Dean's Executive Committee and Faculty Forum. The school-wide Admissions Committee reviews applications for the MPH and MSc programs. Other program applications are reviewed departmentally. In addition, the school's Admissions Committee is responsible for reviewing and approving admission policies for all school-wide degree programs. Once approved, policy changes are reviewed and approved by the Faculty Forum.

The Admissions Committee, which is composed of one representative from each of the five departments, the directors and coordinators of the MPH and MSc/CIS programs, and the manager of Student Services, is tasked with recommending student applicants for admission into or denial from school-wide programs. Each application is reviewed, summarized and graded by a pair of reviewers; the results are recorded on the Application Summary Sheet and Applicant Score Sheet. (Copies of these documents are available as Appendix IX-2.) The review process involves abstracting the application into a standardized format and computing a score for it. The score is compared against a decision-making algorithm to determine whether to accept fully without full committee review, accept provisionally (pending full committee review), or reject the candidate (without full committee review). The reviewer also indicates his/her recommendation for admission. If both reviewers are in agreement and the algorithm offers specific guidance, the recommendations of the reviewers are forwarded to the director of the relevant program (MPH and MSc/CIS). If there is disagreement, all committee members review and discuss the application and then vote on a final recommendation. Program directors recuse themselves from votes on applications to their respective programs. Brief explanations are recorded in the minutes as justification for the committee's decision. The director of the program to which the candidate has applied reviews the recommendations of the committee and can either accept the recommendation or request additional information and consideration. The program director then forwards a final recommendation to the dean, who approves the recommendation and forwards it to the Graduate School, which informs the applicant of his or her acceptance or rejection. Individuals admitted to the program also receive an enrollment packet and a congratulatory letter from the dean of SPHIS.

MPH

A completed application to the MPH program consists of:

- Graduate School application;
- non-refundable $50 application fee;
- three current letters of recommendation (within the past 12 months). Letters are to be addressed to the MPH Admissions Committee;
- official, original academic records (transcripts or mark sheets) from each institution attended beyond secondary level;
- resume or curriculum vitae;
- personal statement that is a clear, substantive one-page description of the applicant's professional and research experience as it relates to his or her goals in public health and the MPH program;
- officially reported test scores from any of the following examinations taken within the previous five years: Graduate Record Examination (GRE), Graduate Management Admissions Test (GMAT), Medical College Admission Test (MCAT), Law School Admissions Test (LSAT) or the Dental Admissions Test (DAT); and

- if applicable, TOEFL (Test of English as a Foreign Language) scores.

In an effort to identify those who could significantly contribute to the field of public health, past experience in public health-related endeavors, as well as the applicant's stated plans in public health, are used to evaluate applications. In addition, student measures such as standardized exam scores, grade point averages and recommendations are used to assess each applicant.

The minimum admissions requirements are:
- bachelor's degree or its equivalent from an accredited institution;
- recommended minimum GPA of 3.0 or higher on a 4.0 scale; and
- if applicable, TOEFL score of at least 250 on the computer-based version or 600 on the paper-based version.

We currently evaluate applications as they are completed. Successful applications are offered a position and are required to submit a letter of acceptance with a deposit that is applied to their first semester's tuition to hold their place. If students do not return their acceptances and deposits within one month, they are contacted to determine if they are still interested in attending. If they no longer plan to attend their positions are made available to the next available successful applicant. If they still plan to attend, they are again requested to submit their acceptances and deposits within a month, after which they are no longer eligible for admission.

Application guidelines for international students may be found in the resource file.

MS/BDS and PhD/BDS

Each applicant to an academic program in BB is required to submit the following:
- Graduate School application;
- non-refundable $50 application fee;
- statement of goals: 750 words or less describing student's interest in Biostatistics or Decision Science and why the applicant would be an asset to the BB department and University of Louisville;
- at least two letters of recommendation. Recommendations can come in the form of letters or on the university's standard recommendation form, available at http://graduate.louisville.edu/students/grad-rec.pdf;
- official, original academic records (transcripts or mark sheets) from each institution attended beyond secondary level;
- GRE test scores; and
- if applicable, TOEFL scores.

MS/Epi

A prior BA/BS or an advanced degree, in an appropriate field of study, from a regionally accredited university or college is required for entry in the MS Program in Epidemiology. Previous coursework in statistics and biological or health sciences (for example, biology, biochemistry, anatomy, physiology, microbiology) is strongly preferred.

Basic Admission Requirements

Applicants must complete all forms for admission to the University of Louisville Graduate School and must meet the Graduate School's requirements for admission. The minimum required documentation for full admission must include:
- For applicant with degree from accredited US institution:
  - Official transcripts
  - Official GRE score[1]
  - Two letters of recommendation
- For applicant with degree not from accredited US institution:
  - Official TOEFL score
  - Two (2) letters of recommendation
  - Official transcripts

[1] Program may substitute other recognized test(s) in place of the GRE (e.g., MCAT, LSAT, etc.)

- Official GRE score
- Foreign credentials evaluation

Additional Admission Requirements

In addition to the above graduate school requirements, all applicants to the MS degree program in Epidemiology are required to submit the following items with their application:

- resume/CV;
- a personal statement describing the applicant's qualifications, including prior experience, proposed (general) area of research, and career plans;
- two letters of reference from individuals knowledgeable about the applicant's qualifications, abilities, and potential for a successful career in Epidemiology & academic medicine;
- GPA > 3.0 on a 4.0 scale;
- GRE scores taken within the past five years (official from ETS); scores > 50th percentiles on both the Quantitative and Verbal sections are recommended; and
- TOEFL > 60th percentile.

MSc/CIS

Applicants to the MSc program must have an advanced degree, preferably an MD, DO, DMD, PhD or other earned doctorate. This requirement is consistent with the objective of this program to train the next generation of clinician scientists.

Applicants to the MSc program must submit an application along with:

- transcripts from all post-graduate education;
- official report of GRE scores and date taken, unless a health professions doctorate has been obtained;
- personal statement indicating area of research interest;
- two letters of recommendation; and,
- curriculum vitae or resume.

PhD/PHS

Applicants for the PhD degree must submit an application along with:

- transcripts from all post-secondary educational institutions;
- official report of GRE scores;
- personal statement indicating area of research interest;
- two letters of recommendation; and
- curriculum vitae or resume.

3. Examples of recruitment materials and other publications and advertising that describe, as a minimum, academic calendars, grading and the academic offerings of the school. The most recent catalog must be included. References to website addresses may be included.

The SPHIS Catalog is included as Appendix V-1.

For examples of recruitment materials and other publications and advertising, please see Appendix IX-3, the resource file and our website at http://louisville.edu/sphis/prospective-students/.

4. Quantitative information on the number of applicants, acceptances and admissions, by program area over the last three years.

Quantitative information on applicants, acceptances and enrollments, by specialty area, Fall 2002 to present, are displayed in Table IX-1.

Table IX-1: Quantitative Information on Applicants, Acceptances, and Enrollments, by Specialty Area, Fall 2002 to Present[2]

		Fall 2002	Spr 2003	Sum 2003	Fall 2003	Spr 2004	Sum 2004	Fall 2004	Spr 2005	Sum 2005	Fall 2005	Spr 2006	Sum 2006	Fall 2006	Spr 2007[3]
MPH	Applied										67	2	1	69	4
	Accepted										41	1	1	47	0
	Enrolled										25	1	0	28	0
MS/BDS	Applied	1	0	2	7	3	4	4	0	3	7	3	1	5	2
	Accepted	1	0	2	3	1	4	2	0	2	4	1	1	2	1
	Enrolled	0	0	2	3	1	2	2	0	1	2	1	1	1	1
MS/Epi	Applied													0	0
	Accepted													0	0
	Enrolled													0	0
MSc	Applied	9	0	13	22	0	7	25	6	4	18	4	0	11	3
	Accepted	9	0	9	14	0	4	17	3	3	12	1	0	11	3
	Enrolled	7	0	4	10	0	3	15	3	2	12	1	0	9	2
MD/MSc	Applied	0	0	0	0	0	0	0	0	0	0	0	0	5	0
	Accepted	0	0	0	0	0	0	0	0	0	0	0	0	2	0
	Enrolled	0	0	0	0	0	0	0	0	0	0	0	0	3	0
PhD/BDS	Applied	1	2	5	1	0	2	3	1	1	9	0	3	9	1
	Accepted	1	2	1	0	0	1	0	0	1	5	0	3	2	0
	Enrolled	0	2	2	0	0	1	3	0	1	3	0	1	1	0
PhD/PHS	Applied	1	2	4	4	2	2	7	2	1	11	0	2	9	2
	Accepted	1	2	3	2	1	2	3	2	0	9	0	0	1	2
	Enrolled	1	2	2	1	1	2	2	2	0	4	0	0	1	2
NonDegree/ Certificates	Applied	4	1	11	9	6	4	14	4	5	9	0	1	6	3
	Accepted	4	1	10	7	6	4	11	2	4	7	0	1	6	3
	Enrolled	4	1	6	6	6	4	10	2	3	7	0	1	6	3
Total	Applied	16	5	35	43	11	19	53	13	14	121	9	8	114	15
	Accepted	16	5	25	26	8	15	33	7	10	78	3	6	71	9
	Enrolled	12	5	16	20	8	12	32	7	7	53	3	3	49	8

5. Quantitative information on the number of students enrolled in each degree program identified in Criterion V.A., including a headcount of full-time and part-time students and a full-time equivalent conversion, over the last three years.

Quantitative data on full-time and part-time students enrolled in each degree program (area of specialization) identified in the instructional matrix, by semester, Fall 2002 to present, are displayed in Table IX-2.

[2] This table assumes that all those who applied are considered new applicants. Transfers were required to fill out a new program application.
[3] Spring 2007 data are unofficial, as of 03/16/07.

Table IX-2: Students Enrolled in Each Degree Program (Area of Specialization) Identified in Instructional Matrix, Fall 2002 to Present[4]

		Fall 02	Spr 03	Sum 03	Fall 03	Spr 04	Sum 04	Fall 04	Spr 05	Sum 05	Fall 05	Spr 06	Sum 06	Fall 06	Spr 07[5]	Total
MPH	FT										22	19	0	41	36	118
	PT										3	4	2	8	5	22
	FTE										22.9	20.2	0.6	43.4	37.5	124.6
MS/BDS	FT	6	6	0	6	7	1	7	6	0	8	8	0	5	5	65
	PT	0	0	6	3	2	7	4	3	8	3	1	3	2	1	43
	FTE	6.0	6.0	1.8	6.9	7.6	3.1	8.2	6.9	2.4	8.9	8.3	0.9	5.6	5.3	77.9
MS/Epi	FT													0	0	0
	PT													0	0	0
	FTE													0.0	0.0	0.0
MSc/CIS	FT	10	4	0	7	7	0	8	3	0	6	7	0	5	1	58
	PT	22	21	18	24	20	10	22	30	21	30	27	20	26	25	316
	FTE	16.6	10.3	5.4	14.2	13.0	3.0	14.6	12.0	6.3	15.0	15.1	6.0	12.8	8.5	152.8
PhD/BDS	FT	5	6	0	6	6	1	6	6	3	8	8	1	7	7	70
	PT	1	0	7	2	2	6	0	0	2	1	0	5	1	1	28
	FTE	5.3	6.0	2.1	6.6	6.6	2.8	6.0	6.0	3.6	8.3	8.0	2.5	7.3	7.3	78.4
PhD/PHS	FT	3	1	0	5	7	2	8	8	6	8	7	4	4	7	70
	PT	8	9	8	11	9	14	11	10	5	11	9	2	5	3	115
	FTE	5.4	3.7	2.4	8.3	9.7	6.2	11.3	11.0	7.5	11.3	9.7	4.6	5.5	7.9	104.5
NonDegree[6]	FT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	PT	0	1	4	1	6	4	9	3	2	8	5	2	6	4	55
	FTE	0.0	0.3	1.2	0.3	1.8	1.2	2.7	0.9	0.6	2.4	1.5	0.6	1.8	1.2	16.5
Certificate	FT	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
	PT	8	7	6	10	8	5	6	4	3	4	3	2	3	2	71
	FTE	2.4	2.1	1.8	3	2.4	1.5	2.8	1.2	0.9	1.2	0.9	0.6	0.9	0.6	22.3

[4] Headcounts include second majors.
[5] Spring 2007 data are unofficial, as of 03/06/07.
[6] Includes non-degree and visiting students.

6. Identification of outcome measures by which the school may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the school against those measures over the last three years.

Assessment of the programs in the school will utilize the following measures and targets pertaining to its success in enrolling a qualified student body. The measures and targets apply to each class of students enrolled in each program and for the school overall.

- Enrolled students characteristics
  - Pre-admission GPA – average of 3.0 or higher: At this time, the university does not collect this information in a format that is easily accessible. We are in the process of developing a system with the Office of Institutional Research and Planning to collect the data.
  - Pre-admission standardized test scores – average of 70th percentile or higher: Please see Table IX-3 below.
- Admission rate – 70% or less (number of admissions / number of applications): Please see Table IX-4 below.
- Enrollment rate – 70% or more (number of enrollees / number of acceptances) Please see Table IX-5 below.
- Student assessment – 80% or more agree they are able to do the work (questionnaire at end of each year): In a baseline survey done in the spring of 2006, 87% of currently enrolled SPHIS students feel they have the skills to serve as an effective professional. This survey will be conducted annually of continuing and graduating SPHIS students.
- Student GPA – average of 3.3 or higher (at end of each year): Please see Table IX-6 below.
- Graduation rate – 80% or more (see Criterion V.D.3)
- Student scholarly papers, presentations, posters or grants will be submitted by or awarded to 10% or more of enrolled, full-time students each year: Please see Table IX-7 below.

Table IX-3: Pre-admission Standardized Test (GRE) Scores for Each of the Last Four Years

Component	Fall 2003	Fall 2004	Fall 2005	Fall 2006
Verbal	456	453	432	453
Quantitative	619	626	616	575
Analytical Writing	4.75	4.40	3.98	3.95

Table IX-4: Admission Rate by Program, 2002-03 to Present

Degree Program	2002-03	2003-04	2004-05	2005-06	2006-07
MPH				72%	64%
MS/BDS	100%	86%	100%	71%	50%
MS/Epi					
MSc/CIS	100%	64%	75%	68%	76%
PhD/BDS	100%	100%	80%	100%	38%
PhD/EPI/PHS	100%	92%	90%	100%	100%
Average	100%	86%	86%	82%	66%

Table IX-5: Enrollment Rate by Program, 2002-03 to Present[7]

Degree Program	2002-03	2003-04	2004-05	2005-06	2006-07
MPH				76%	58%
MS/BDS	100%	58%	38%	100%	67%
MS/Epi					
MSc/CIS	100%	93%	93%	100%	84%
PhD/BDS	100%	18%	100%	100%	40%
PhD/EPI/PHS	80%	73%	67%	100%	100%
Average	95%	61%	75%	95%	70%

[7] Student enrollment is based on fall numbers.

Table IX-6: Student GPA by Program, Spring 2003 to Spring 2006

Degree Program	Spring 2003	Spring 2004	Spring 2005	Spring 2006
MPH				3.39
BDS/PhD/MS	3.71	3.67	3.61	3.66
MS/Epi				
CIS/PhD/MSc	3.67	3.58	3.63	3.66
Undecided	4.00	3.96	3.91	3.27
Average	3.79	3.73	3.72	3.50

Table IX-7: Number of Full-Time Students/Percentage Involved in Scholarly Work by Program, Fall 2002 to Fall 2006 (estimated)

Degree Program	Fall 2002	Fall 2003	Fall 2004	Fall 2005	Fall 2006
MPH				22/5%	41/20%
MS/BDS	11/25%	6/25%	7/20%	8/30%	5/40%
MS/Epi					0/0%
MSc/CIS	10/25%	7/20%	8/20%	6/15%	5/20%
PhD/BDS	0/0%	6/10%	6/10%	8/15%	7/40%
PhD /PHS	3/20%	5/20%	8/10%	8/15%	4/20%
TOTAL	24	24	29	52	62

7. Assessment of the extent to which this criterion is met.

This criterion is met. Admissions policies and procedures have been formulated. Measures of success in enrolling a qualified student body have been adopted and are being tracked actively.

Criterion IX.B: Stated application, admission, and degree-granting requirements and regulations shall be applied equitably to individual applicants and students regardless of age, sex, race, disability, religion or national origin.

Expected Documentation

1. Description of policies, procedures and affirmative action plans to achieve a diverse student population.

The school seeks to create a culture that promotes and fosters an appreciation of diversity. We strive to attract diverse faculty and staff that reflect the diversity of the surrounding population to provide the foundation for achieving and retaining a diverse student population. We also recognize that diversity is much more than race and the school expands this definition to include other human diversity, such as cultural, academic, research and service diversity.

The university supports diversity as is reflected in the following vision statement:

"The University of Louisville strives to foster and sustain an environment of inclusiveness that empowers us all to achieve our highest potential without fear of prejudice or bias. We commit ourselves to building an exemplary educational community that offers a nurturing and challenging intellectual climate, a respect for the spectrum of human diversity and a genuine understanding of the many differences-including race, ethnicity, gender, age, socio-economic status, national origin, sexual orientation, disability and religion-that enrich a vibrant metropolitan research university. We expect every member of our academic family to embrace the underlying values of this vision and to demonstrate a strong commitment to attracting, retaining and supporting students, faculty and staff who reflect the diversity of our larger society." In addition, the University of Louisville has an affirmative action policy in the hiring of faculty and staff ensuring representation of the diversity that is envisaged in the student body. (For additional information, please see section VIII.C.2.)

As further evidence of its commitment to achieving a student body demographically representative of the surrounding population, SPHIS has created a Diversity Committee. This committee has developed a formal school diversity plan, available in the on-site resource file, which was submitted to and was accepted by the Office of the Vice Provost for Diversity and Equal Opportunity in 2005. It has also created a set of policies and procedures, in accordance with UofL directives, for establishing and revising current guidelines and monitoring whether the goals established have been fully achieved; this document, "Ensuring Diversity in Faculty, Staff and Students," is also available in the resource file. The committee has and will continue to work closely with the University Office of the Vice Provost for Diversity as a resource in this effort.

Student Recruitment

The school casts a broad net in order to attract a diverse student body and has attracted students from Kentucky as well as other states and countries. Recruitment strategies through each degree program and the office of student affairs have included the use of brochures, posters and postings on the school website,http://louisville.edu/sphis. The school also participates in active student recruiting in collaboration with the Graduate School and undergraduate departments that produce students who could potentially have an interest in public health. Another venue for active recruitment is local and national public health conferences. The MPH program coordinator also makes presentations at workplaces offering public health services, such as the health department, and provides information about SPHIS through specially arranged information sessions. (See also Section IX.A.1.)

UofL is dedicated to expanding opportunities for minorities and offers special awards to qualified minority candidates. The Graduate School is committed to providing financial support through scholarships and assistantships for the matriculation and graduation of qualified, underrepresented ethnic minority students in master's and doctoral programs. All minority students are encouraged to take advantage of these funding opportunities. These activities have resulted in a student body with a diversity of academic backgrounds.

Recruitment materials and the catalog are available as Appendices IX-3 and II-3, respectively.

2. Quantitative information on the demographic characteristics of the student body, including data on applicants and admissions, over the last three years.

Quantitative data on applicants, acceptances and enrollments, by specialty area, for the last four years are displayed in Table IX-8.

Table IX-8: Quantitative Demographic Information on Applicants, Acceptances, and Enrollments for the Last Four Years[8]

		Fall 02		Spr 03		Sum 03		Fall 03		Spr 04		Sum 04		Fall 04		Spr 05		Sum 05		Fall 05		Spr 06		Sum 06		Fall 06		Spr 07[9]	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Nonresident Alien	App.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1	1	3	1	4	0	0
	Acc.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	3	0	4	0	0
	Enr.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	2	0	4	0	0
Black, Non-Hispanic	App.	0	2	0	0	4	2	3	3	0	2	1	2	2	6	0	0	0	0	6	5	0	0	0	1	6	14	1	0
	Acc.	0	2	0	0	4	2	3	1	0	2	1	2	2	1	0	0	0	0	5	3	0	0	0	0	3	10	0	0
	Enr.	0	2	0	0	3	2	2	1	0	2	0	2	0	1	0	0	0	0	4	3	0	0	0	0	0	9	0	0
Asian or Pacific Islander	App.	4	2	0	0	8	6	8	4	1	2	3	2	7	4	3	3	1	3	15	10	1	1	0	0	14	13	7	2
	Acc.	4	2	0	0	6	6	6	2	1	2	3	1	6	4	1	2	1	3	8	7	0	0	0	0	5	3	4	1
	Enr.	3	2	0	0	3	3	3	1	1	2	1	1	3	4	1	1	1	3	8	7	0	0	0	0	1	3	3	1
Hispanic	App.	0	0	2	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	2	0	0	0	0	0	1	0	0
	Acc.	0	0	2	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	2	0	0	0	0	0	1	0	0
	Enr.	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	3	0	0	0	0	0	1	0	0
White, Non-Hispanic	App.	4	4	2	1	22	22	10	13	3	3	6	2	8	20	4	3	2	5	19	25	2	1	2	1	18	36	2	3
	Acc.	4	4	2	1	19	20	9	6	3	2	6	1	6	22	4	3	1	4	17	21	1	1	1	0	14	27	1	3
	Enr.	3	3	2	1	10	8	5	5	3	2	4	1	5	16	4	3	1	3	14	16	1	1	0	0	9	20	1	3
Unknown	App.	0	0	0	0	2	0	1	0	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	2	3	0	0
	Acc.	0	0	0	0	2	0	1	0	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	2	1	0	0
	Enr.	0	0	0	0	1	0	1	0	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	2	0	0	0
American Indian/Alaskan Native	App.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Acc.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Enr.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	App.	8	8	4	1	36	30	22	20	4	7	10	7	17	32	7	6	3	8	42	42	6	3	3	5	41	71	0	0
	Acc.	8	8	4	1	31	28	19	9	4	6	10	5	14	29	5	5	2	7	32	33	2	1	2	3	24	46	0	0
	Enr.	6	7	3	1	17	13	11	7	4	6	5	5	8	23	5	4	2	6	28	29	2	1	1	2	12	37	0	0

[8] Assumes that all those who applied are considered new applicants. Transfers were required to fill out a new program application.
[9] Spring 2007 enrollment data are unofficial as of 03/23/07.

3. Identification of measures by which the school may evaluate its success in achieving a demographically diverse student body, along with data regarding the school's performance against these measures over the last five years.

The University collects data on the number of Kentucky resident African American graduate students and the number of African American professional students and assesses diversity in recruitment, enrollment and graduation.

Success in enrolling and graduating a demographically diverse student body will be assessed against the following measures:

- Established targets in the SPHIS Scorecard for the level of African American student enrollment in the school, together with SPHIS student data, are found in Table IX-9.
- Demographic data for the Commonwealth of Kentucky and for the United States (based on the 2000 Census), together with SPHIS student data, are found in Table IX-10.

Table IX-9: SPHIS Scorecard Goal and Data for 2002-2006

Outcome Measure	Fall 2002	Fall 2003	Fall 2004	Fall 2005	Fall 2006	2008 Goal
African-American enrollment	5	9	6	10	13	15

Table IX-10: Outcome measures by race/ethnicity and gender with data over the last five years[10]

Outcome Measures	KY	U.S.	SPHIS				
			Fall 2002	Fall 2003	Fall 2004	Fall 2005	Fall 2006
African-American	7.3%	12.3%	8% n = 5	12% n = 9	7% n = 6	9% n = 10	12% n = 13
Asian	0.7%	3.7%	6% n = 4	8% n = 6	5% n = 4	6% n = 7	6% n = 7
Hispanic	1.5%	12.5%	2% n = 1	1% n = 1	1% n = 1	3% n = 3	2% n = 2
American Indian	0.2%	0.9%	0% n = 0	0% n = 0	0% n = 0	0% n = 0	0% n = 0
Females	51.1%	52.2%	53% n = 33	51% n = 39	57% n = 47	55% n = 61	62% n = 70

The Diversity Committee is working closely with the dean's office to monitor the school's progress toward the achievement of these established goals.

4. Assessment of the extent to which this criterion is met.

This criterion is met. The school has achieved its initial goal of having a diverse student population based upon race and gender. The gender and racial distributions among students were fairly comparable with state level data through 2004. Recruitment efforts will continue to strive to ensure that the enrollment of women and minorities into the school's programs remains on target. Particular attention will be paid to improving recruitment of Hispanics and other underrepresented groups based on national data.

[10] Student enrollment headcount and percentages include students enrolled in certificate programs and/or enrolled as visiting or non-degree.

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

Expected Documentation

1. Description of the advising and counseling services, including sample orientation materials such as student handbooks.

A good advising experience is the result of a student and advisor working together on a regular basis in order to graft the student's needs to the academic structures laid out by SPHIS and UofL. Advisors within the school counsel students about the requirements of the Graduate School, SPHIS and their department and about career development, always keeping in mind the interests and goals of the student.

Placement counseling is not currently offered by SPHIS but is offered via the UofL Career Development Center (http://campuslife.louisville.edu/career/). Services offered by the center have recently been expanded to include:

- e-recruiting – comprehensive on-line job listings, recruitment and candidates' self-referred resume service;
- job and career fairs – events that put students and employers together in the job seeking/career process; the next university-wide career fair is scheduled for April 12, 2007;
- limited career counseling and testing – assisting students with career exploration, developmental issues, assessment and advising;
- resume formatting and critique – assisting the preparation and critique of the resumes and other employment documents; and
- outreach career seminars and workshops – information and marketing services that assist students with key aspects of the employment process.

In addition, psychological counseling is available at no charge from Student Counseling Services (http://campuslife.louisville.edu/counseling). Learning how to better communicate and strengthening an existing relationship are targeted outcomes of the Counseling Center.

All new students are required to attend a full-day orientation session. The first part of orientation is university-specific while the second part is school and program-specific. The orientation includes a social gathering to welcome students to the school. During this time, new students have the opportunity to meet current SPHIS students, faculty and staff.

The SPHIS Catalog is available as Appendix V-1.

MPH

Student advising in the MPH Program is divided into three distinct functions – administrative advising, academic advising and career counseling. Administrative advising is provided by Student Services, academic advising by MPH program and concentration department personnel, and career counseling by the staff of the UofL Career Development Center. The three advising functions are described below.

Administrative Advising (performed by Student Services)

Administrative advising pertains to matters related to compliance with routine processes and procedures relevant to the MPH program or University requirements. Administrative advising includes:

- serving as a knowledgeable resource for MPH program and University administrative requirements, procedures and deadlines
- processing course add/drop forms
- establishing/removing advising holds on student program activities
- preparing reviews of students' academic progress/status
- certification of a student's completion of degree requirements

Academic Advising (Performed by MPH program and concentration department personnel)

During the first year of the MPH Program, the director serves as the academic mentor (advisor) for all MPH students. In the second year of the program, students are assigned a faculty academic mentor (advisor) from their concentration department. It is the responsibility of the academic mentor to meet with the student to: (1) assess the progress of the student toward achieving the learning objectives of the MPH program; (2) assess the individual academic and professional goals of the student; (3) discuss options for field placements and special projects as needed; and (4) address any apparent or emerging problems identified by the student or other faculty members.

During each semester a student registers in the MPH program, the program office maintains steady contact with faculty in reviewing the student's performance and progress.

- At the beginning of each semester, the MPH Program will distribute to each academic mentor transcripts for each of their advisees.
- At the mid-point of each semester, the MPH Program Director will request that all course directors identify any students who are at risk of failing a course.
- At the end of each semester, the MPH Program Director will review each student's grades to determine if any student is to be placed on academic probation.
- For those students identified at academic risk, the Program Director, in consultation with the students' academic mentors and specific Course Directors, will discuss their academic performance and, if necessary, develop a remediation plan.

It is the responsibility of all students, together with their academic advisors, to monitor progress toward the requirements of the program, the learning objectives of the program and their individual educational goals.

Career Counseling

To facilitate the delivery of services offered by the university, the MPH program will schedule seminars for future student town hall meetings that focus on resume development, job application and search strategies, interview preparation and other career development activities. These meetings will be led by Leslye Erickson, the new Director of the UofL Career Development Center and will be scheduled beginning in Spring 2007.

MS/BDS and PhD/BDS

Each student is assigned an academic advisor upon admission to any of the programs in the Department of Bioinformatics and Biostatistics. The advisee is assigned by the department chair to individual faculty members within the department, with separate provisions for master's and doctoral students.

The majority of the course work at the master's level is pre-determined by the curriculum. Faculty advisors for master's level students are provided with a listing of each semester's available courses, along with the annual revision of the SPHIS Catalog and BB Catalog, which outlines requirements for each concentration. A departmental staff member as also available to arrange appointments during the advising period for students and their respective advisors.

Students at the doctoral level are assigned an advisor via the aforementioned process, or they may work with a faculty advisor who chooses to work with them upon their entry to the doctoral program and choice of a dissertation director. A student's choice of dissertation director (and therefore primary course advisor) becomes official when the "Thesis/Dissertation Advisory Committee" form is completed with names and signatures of committee members and is approved by the department chair and Graduate School Dean. Students at the doctoral level work with their advisor to develop a program of study which must be approved by the department's graduate program coordinator and chair. Although both biostatistics and decision science primary requirements are pre-determined by the curriculum, doctoral advisors are able to design programs of study for each student utilizing electives to help students pursue their individual interests. Available university electives are considered each semester in order to utilize course offerings in other SPHIS departments and across the University. Once the program of study has been developed by the student and advisor, any deviation from it must be approved by the student's advisor, graduate program coordinator and chair.

Additional, less formal academic and career advising is available to students in the department's programs through practicum advisors, assistantship supervisors, and thesis and dissertation advisors.

MS/Epi

Each student is assigned an academic advisor by the department chair upon admission to any of the programs in the Department of Epidemiology and Public Health. Additionally, the program coordinator will provide advice to all enrollees regarding administrative matters.

MSc/CIS

Students in the MSc/CIS program are advised by the Program Coordinator. Additional, less formal academic and career advising is available to students in this program through professional paper advisors. However, since many of the MSc/CIS students are junior faculty or house staff, the requests for career or placement advising are handled through their clinical departments.

PhD/PHS

Students in the PhD/PHS program are assigned an academic advisor from among the graduate faculty in SPHIS. Students at the doctoral level work with their mentor and advisor to develop a program of study that must be approved by the department chair. Although the PhD/PHS requirements are pre-determined by the approved curriculum, doctoral advisors and mentors will be able to design programs of study for each student in which electives are tailored to the research interests of the student.

2. Information about student satisfaction with advising and counseling services.

The school assesses student satisfaction with advising through the ongoing and graduating student surveys administered annually. Please see the on-site resource file for examples of these surveys. Based on a Spring 2006 survey, 69% of current students are satisfied with the helpfulness of their advisors. Modifications of the advising process are being explored in order to improve student satisfaction with this activity.

The most important change is access to the reorganized of the UofL Career Center, which has increased staff, expanded services and changed its name to reflect its enhanced mission. The Career Development Center, under new director Leslye Erickson, has hired 12 new staff members and organized itself around two areas: services to students and outreach to employers. One of these new career coaches will be assigned to SPHIS and be given an office in the school. This individual will receive specific training regarding the needs of public health professionals in order to provide optimal preparation for future careers, including preparation of resumes, enhancement of interview skills, full-time job placement and co-op/internship placement. Plans are in place for the use of a new electronic job-finding service on which students may post their resumes and employers may list new job openings. As part of employer development, the center will both help graduates find jobs and focus on economic development initiatives at large. Ms. Erickson will be meeting with program directors and student representatives within the school in March and April 2007 to discuss these new services.

3. Assessment of the extent to which this criterion is met.

This criterion is partially met. While we do have student advising services in place, our experience is limited with providing career counseling and placement services and with assessing the degree to which the services meet the needs of students and faculty. In addition, our past needs for more targeted placement counseling have been very modest, since our past graduates have been from academic programs either with small numbers in a relatively small, high-demand field (BDS) or with most graduates in professional careers prior to beginning the program (MSc/CIS and PhD/PHS). The majority of our MPH students will not be in similar situations, and we anticipate a significant need for career and placement advising specifically for public health. We have begun planning for this function and project its availability by Fall 2007.

Criterion IX.D: Students shall, where appropriate, have participatory roles in conduct of school and program evaluation procedures, policy-setting and decisionmaking.

Expected Documentation

1. Description of student roles in evaluation of school and program functioning.

Students participate in the evaluation of school and program functioning by providing feedback via several avenues:

- Course evaluations. Each course director is required to give each student in the course the chance to fill out and submit an anonymous course evaluation form at the end of the course. These evaluations are used by the department chairs in faculty review and evaluation and in providing summary information to program directors and the school's curriculum committee about the courses being offered in the programs and the school. Through these two avenues, student course evaluations have a role in assessing and improving the school's courses and programs. The current course evaluation forms are available in the resource file.
- Dean's Town Hall Meetings. The dean meets twice a year with the assembled students of SPHIS to hear directly any issues with how the school and its programs are being conducted. The first meeting was held in the spring of 2006.
- In addition, Student Town Hall Meetings are offered to MPH students two to four times each semester. These meetings provide students a forum for discussing issues pertaining to the MPH program. Over the past year, these meetings have successfully enhanced communication between the students and program faculty and contributed to specific modifications of the MPH curriculum, including an increase in the number of credit hours within a concentration and the requirement that all MPH students take a course in Critical Thinking and Program Evaluation. The first meeting was held during the fall 2005 semester.
- Class discussions. Several of the core MPH courses include class discussions conducted toward the end of selected sessions for the purpose of hearing from the students about how the course is going and what might be done to improve the students' experience. Examples are the courses in Issues in Public Health, Introduction to Health Management and Introduction to Health Behavior, an online course that uses chat sessions for this purpose.
- Individual discussions with course and program directors. Students are encouraged to bring issues with a course or program to either the course or program director.
- Exit surveys. At the completion of degree programs offered by the Department of Bioinformatics and Biostatistics, graduating students are asked to complete an exit survey to be submitted to the department chair. Please see the resource file for the current survey.
- Students are voting members of the Faculty Forum and the Council of Chairs and Deans. The Faculty Forum reviews and approves all changes to admission policies, bylaws, and curriculum, including course and curriculum revisions and new courses and curricula
- Students are voting members of the Service and Diversity Committees.
- The Curriculum Committee has resolved that its chair communicate to the President of the Student Association actions of the Committee in a timely manner.
- The faculty advisor of the Student Association is the Associate Dean for Health Information Sciences.

2. Description of student roles in governance, as well as in formal student organizations.

Students are involved in several levels of the school's governance process. Two students each serve on the Faculty Forum and the Council of Deans and Chairs. Student representatives must be in good academic standing (not on probation) and enrolled full-time. They are selected by the student body under the auspices of the student association. A student may not serve simultaneously on more than one committee.

The SPHIS Student Association was formed in the fall of 2005, following ratification of its bylaws, which are available in the on-site resource file. Elections were held soon thereafter, electing officers and other positions specified in the bylaws. Since then, the student government has been self-directed and has accomplished the following, among others:

- recognition as a registered student organization;
- membership in the Graduate Student Council, which is the recognized student council for all graduate

programs;
- formation of the local student chapter of the Kentucky Public Health Association; and
- elections in the spring and fall of 2006.

The student association is very active in promoting social functions of the student body and in working for and achieving student benefits, including printing and copying privileges and the provision of handheld PDA devices upon enrollment.

3. Assessment of the extent to which this criterion is met.

This criterion is met. Students are actively involved in the processes of evaluation, policy-setting and decision-making.

EVALUATION AND PLANNING

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

As part of the self-study inspired by the CEPH accreditation process, a team consisting of SPHIS faculty and staff and a College of Education and Human Development (CEHD) faculty member met to develop the SPHIS evaluation plan. The SPHIS mission, focusing on research (interdisciplinary and collaborative), service (universities and communities) and teaching (traditional and team learning), served as the framework. The self-study team developed goals aligned with the university scorecard of strategic goals and areas of emphasis and the SPHIS vision and mission. Once the goals were established, the self-study team added specific objectives, core learning objectives (Criterion V.C), measurable outcomes, a timeline and targets for success (Tables X-1 through X-5). Sources of data and frequency of collection were determined. The group reviewed and revised the document, and all faculty and other interested parties were given the opportunity to react and respond to this plan. An internal review and external review panel provided input.

The SPHIS faculty, staff and students are committed to continued evaluation and modification of this plan on a systematic basis to ensure that it remains comprehensive, workable, informative and effective. The exact structure of evaluation process will continue to evolve as we work toward the goal of a comprehensive plan for all SPHIS programs.

Expected Documentation

1. Description of evaluation procedures and planning process being used.

Evaluation System

SPHIS administration, faculty, staff and students recognize the value and importance of a systematic, broad-based and integrated evaluation. The Quality Assurance Framework (See Appendix X-1) depicts the evaluation process of SPHIS in conjunction with the university. With the involvement of the professional community, SPHIS is implementing an assessment system that is reflective of its stated mission, goals and objectives.

To create a comprehensive system of evaluation, the SPHIS self-study team consulted with faculty from CEHD. A team of SPHIS faculty, staff and administrators had several meetings with the education faculty to review current evaluation and plans for future programs. The self-study evaluation team created a comprehensive and integrated set of evaluation measures that are used to monitor the following SPHIS goals:

- **Goal 1: Provide educational and academic excellence** through a responsive, challenging and supportive educational environment characterized by high standards, commitment to quality and student success.
- **Goal 2: Build a public health and information science research enterprise** by focusing energy and resources to enhance the scholarly agenda, thereby striving toward national prominence.
- **Goal 3: Foster a diverse, open and accessible school of public health and information sciences** with an integrated system of access and intercultural understanding that promotes and supports race and gender diversity, inclusivity, equity and open communication.
- **Goal 4: Promote collaboration and community/state partnerships** by developing and integrating interdisciplinary activities associated with teaching, research and service. Support existing partnerships and engage new partners to contribute to the educational, social and economic progress of the region and state.
- **Goal 5: Focus on school effectiveness and service** through systematic quality improvement, assessment, CEPH self-study and accreditation, and a dedication to fulfill the mission and vision of SPHIS.

The school is developing a system of online entry forms, to be linked to a master evaluation program database, in order to facilitate the collection of all information relevant to the goals stated above. We hope to have this system in place by mid-2007.

Planning

The Community Advisory Board, composed of community members, provide expert external advice to aid the dean in accomplishing the mission of teaching, research and service. The board meets in advance of the annual SPHIS strategic planning retreat to review the initiatives of the school over the prior year and to make recommendations for changes to meet the needs of the community. The Council of Chairs and Deans, including the dean, associate deans, chairs and student representatives will consider the full range of evaluation documents received over the prior year and develop a plan to address noted deficiencies, assure full concordance of the programs with the stated mission goals and objectives of SPHIS, and re-align its activities to more fully serve the needs of its constituents.

The first annual Evaluation and Strategic Planning Retreat was held on January 5, 2007. Based upon a complete review progress towards the school's goals and objectives, 23-item action plan and timeline for completion was created. One of the most important decisions reached in the retreat was the need for an Associate Dean for Student Affairs; this position was advertised in February and filled in late March. The minutes of the meeting, together with the action plan, are available in the on-site resource file.

2. Identification of measures by which the school may evaluate the effectiveness of its evaluation and planning activities, along with data regarding the school's performance against these measures over the last three years.

The effectiveness of the evaluation and planning system will be gauged by outcome measures listed in Tables X-1 through X-5, which also contain data regarding the school's performance with respect to these measures. Performance data are not available for very recently established measures at this time, but will be reported as soon as they become available.

Table X-1: Goal 1, provide educational and academic excellence

Objective	Outcome Measurement	Timeline for Completion	Source of Data	Frequency of Collection	Target for Success	2003[1]	2004	2005	2006
Objective 1.1 Expand faculty and staff support for program growth as measured by:	1.1.a Increasing the number of full-time faculty to a goal of 45 by 2009.[2]	2009	Personnel records	Annually	45	11	16	30	33
	1.1.b Maintaining the number of school and department support staff at a ratio of no less than one staff per four FTE faculty members (1:4 ratio does not include professional, research, or technical staff).	2008	Personnel records	Annually	1:4			1:2	1:4
Objective 1.2 Develop quality curricula/programs as measured by:	1.2.a Reviewing educational competencies for MPH, MS, MSc and PhD for appropriateness and measurability annually.	Annually	Curriculum Committee documents	Annually	Competen-cies approved			Y	January 2007
	1.2.b Developing and implementing a collaborative academic program in bioinformatics with the Schools of Medicine and Engineering by Fall 2007.	Fall 2007	Curriculum Committee documents	Ongoing	Programs approved and students enrolled			ongoing	ongoing
Objective 1.3 Improve student success and satisfaction as measured by:	1.3.a Refining the quality improvement process through school-wide forums, held at least annually, and yearly exit interviews and/or surveys of our graduates.	Annually	Survey data and forum minutes	Annually	Increase in mean scores				ongoing
	1.3.b Increasing the number of doctoral degrees awarded per year to 7 in 2008.	2008	Scorecard (1.4)	Annually	7	1	0	5	4
	1.3.c Improving the mean response regarding overall impression of the school on a survey of continuing and graduating students	Annually	Survey data	Annually	Increase in mean scores				ongoing
	1.3.d Improving the mean response regarding overall satisfaction with the university on the survey of all students.	Annually	Survey data	Annually	Increase in mean scores				ongoing
	1.3.e Achieving an employment rate within the field of study of at least 80% among MPH students, within one year of graduation, as tracked by the survey.	Annually	Survey data	Annually	80%				ongoing

[1] The "2003" column represents calendar year 2003/fiscal year 2003-04, and so on.
[2] Full-time faculty headcount is calculated as of August 1 of each year.

Table X-2: Goal 2, build a public health and information science research enterprise

Objective	Outcome Measurement	Timeline for Completion	Source of Data	Frequency of Collection	Target for Success	2003	2004	2005	2006
Objective 2.1 Create a research infrastructure utilizing extramural funding as measured by:	2.1.a Increasing the number of grants and contracts awarded to 20 in 2008.	2008	Scorecard (2.4)	Annually	20	11	11	15	12
	2.1.b Increasing the total dollar amounts of grants and contracts to $5,000,000 in 2008.	2008	Scorecard (2.5)	Annually	$5,000,000	$2.8 million	$2.2 million	$3.4 million	$3.1 million
	2.1.c Increasing the number of faculty on funded research to 22 in 2008.	2008	Scorecard (2.16)	Annually	22	12	13	22	22
	2.1.d Increasing the number of students on sponsored research to 3 in 2008.	2008	Scorecard (2.17)	Annually	3	0	1	2	3
Objective 2.2 Develop internal support for SPHIS research activities as measured by:	2.2.a Adding one new faculty research position per year (2004-2008) from university administration.	Annually	Personnel records	Annually	One new faculty per year			4	Y
	2.2.b Providing departmental funding for travel to national meetings to present papers and further research.	Annually	Financial records	Annually	Continued departmental funding			Y	Y
	2.2.c Increasing the total number of publications in refereed journals to 20 in 2008.	2008	Scorecard (2.18)	Annually	20		18	40	32
	2.2.d Increasing the number of refereed presentations and/or papers sponsored by national or international organizations to 20 in 2008.	2008	Scorecard (2.20)	Annually	20		17	20	10
	2.2.e Holding monthly research incubation meetings to encourage faculty, staff and student involvement in collaborative research activities.	Monthly	Research office documents	Monthly	Continued monthly meetings			Y	Y

Table X-3: Goal 3, be a diverse, open and accessible school of public health and information sciences

Objective	Outcome Measurement	Timeline for Completion	Source of Data	Frequency of Collection	Target for Success	2003	2004	2005	2006
Objective 3.1 Recruit and retain African American and female faculty and students as measured by:	3.1.a Targeting Historically Black Colleges and Universities for minority student recruitment by establishing a list of contacts, building relationships, two mailings a year for brochures, and one campus visit per year.	Annually	Admissions Committee documents	Annually	Contacts, mailings and visits as listed			Y	Y
	3.1.b Increasing the number of full-time women faculty to 12 by 2008.	2008	Scorecard (3.6)	Annually	12	3	5	8	9
	3.1.c Increasing the number of full-time African American faculty to 3 by 2008.	2008	Scorecard (3.7)	Annually	3	1	2	2	2
	3.1.d Achieving the number of African American executive, administrative, or managerial employees of 1 by 2008.	2008	Scorecard (3.10)	Annually	1	0	0	0	1
	3.1.e Achieving the number of African American endowed chairs and professors of 1 by 2008.	2008	Scorecard (3.12)	Annually	1	0	0	0	0
	3.1.f Achieving the number of women endowed chairs and professors of 1 by 2008.	2008	Scorecard (3.13)	Annually	1	0	0	0	0
	3.1.g Achieving the number of African American students receiving doctoral degrees of 2 by 2008.	2008	Scorecard (3.18)	Annually	2	0	0	0	1
	3.1.h Achieving the number of women receiving doctoral degrees of 3 by 2008.	2008	Scorecard (3.19)	Annually	3	0	0	0	3
	3.1.i Increasing the number of African American students receiving master's degrees to 15 by 2008.	2008	Scorecard (3.20)	Annually	15	0	3	0	0
Objective 3.2 Support diversity and inclusivity initiatives as measured by:	3.2.a Completing and initiating implementation of a diversity plan in concert with university guidelines by October 2005.	October 2005	Diversity Committee minutes	Ongoing	Completed diversity plan			Y	Y
	3.2.b Holding quarterly, school-wide luncheons of faculty and staff to promote open communication.	Quarterly	SPHIS Calendar records	Quarterly	At least four meetings per year			Y	Y
	3.2.c Inviting all students to a plenary school meeting session at least once per year.	Annually	SPHIS Calendar records	Annually	Annual plenary session			Y	Y

Table X-4: Goal 4, promote collaboration and community/state partnerships

Objective	Outcome Measurement	Timeline for Completion	Source of Data	Frequency of Collection	Target for Success	2003	2004	2005	2006
Objective 4.1 Generate input from community partners as measured by:	4.1 Establishing and maintaining a Community Advisory Board for SPHIS by December 2006.	December 2006	Executive Committee documents	Ongoing	Foundation of Community Advisory Board			Y	Y
Objective 4.2 Establish outreach activities to involve SPHIS with a variety of stakeholders as measured by:	4.2.a Continuing leadership through monthly meetings of the Environmental Health Committee of the Partnership for a Green City, involving UofL, Louisville Metro Government and the Jefferson County Public Schools.	Monthly	Committee minutes	Monthly	Continued monthly meetings			Y	Y
	4.2.b Developing an electronic clearinghouse for service opportunities with community and government agencies by June 2007.	June 2007	Service Committee minutes and program office documents	Ongoing	Establishment of a service opportunity clearinghouse			ongoing	ongoing
	4.2.c Increasing the number of community partnerships that support local metropolitan area government agencies, metropolitan area businesses, community-based organizations and health care organizations to 25 in 2008.	2008	Scorecard Process	Annually	25	24	24	25	
	4.2.d Increasing the number of partnerships with state, regional and federal agencies to 10 in 2008.	2008	Scorecard Process	Annually	10	8	9	10	
	4.2.e Increasing the number of collaborative programs with K-12 educational institutions to 2 in 2008.	2008	Scorecard (4.13)	Annually	2	1	0	2	

Table X-5: Goal 5, focus on programmatic effectiveness and service

Objective	Outcome Measurement	Timeline for Completion	Source of Data	Frequency of Collection	Target for Success	2003	2004	2005	2006
Objective 5 Monitor quality improvement processes and assessment as measured by:	5.a Receiving CEPH accreditation by Fall 2007.	2007	CEPH documents	Ongoing	Accreditation			ongoing	ongoing
	5.b Improving the mean response regarding overall impression of the school on the comprehensive survey of first-year graduates and alumni, faculty and staff and employers.	Annually	Survey Data and Forum Minutes	Annually	Increase in mean scores				ongoing
	5.d Refining the quality improvement process through school-wide forums and an annual strategic planning retreat.	Annually	Survey Data and Forum Minutes	Annually	Increase in mean scores			Y	Y

The following sections summarize the evaluation plans for assessing the school's effectiveness in serving its various constituencies. Detailed descriptions can be found in the corresponding evaluation sections of the self-study document.

Program

Every five years (beginning after the accreditation visit), an appointed team will conduct a self-study and review of mission, goals and objectives to ensure that the SPHIS meets the university guidelines for program reviews. A second tier of the self-study and review will include a panel of external reviewers from the Community Advisory Board, community agencies and other schools of public health. A midpoint assessment will be conducted every 2½ years to review progress and make changes as needed. The reviews will assess the degree to which programs reflect programmatic accommodation to changes in health needs of populations and responses to these changes.

Annually, an internal review will be summarized and presented to the Executive Committee, faculty and staff for quality assurance purposes and use in strategic planning. This summary report will include data from the SPHIS Scorecard, student progress reports, committee reports and evaluations of programs.

Administration

SPHIS plans systematic use of data to evaluate the efficacy of its courses, programs and practicum experiences. Program evaluation and performance assessment data are used to initiate changes where indicated. Student and faculty assessment data are regularly shared with students and faculty as an opportunity to reflect on their performance and improve it. Adjustments and changes occur at a variety of levels (administration, departmental, faculty, or student) depending on evaluation results and recommendations. The assessments of Sections II and III describe evaluation of the administrative processes in greater detail.

Students

Students receive regular feedback regarding their individual performance and performance as a group within the programs. Formal evaluation procedures occur at the end of each grading period when grades are assigned and recorded. The program directors will oversee the establishment of databases to enable recording and reporting data about individual students' competence and aggregation of data across students for program review. Data regarding student admissions, gender, ethnicity, grade point averages, entrance exam scores and other pertinent information will be entered into a database and reviewed periodically.

The SPHIS On-Going Student Opinion Survey is conducted to obtain student perceptions of program components. Information gained from graduating students and alumni will be generated from the SPHIS Graduating Student Opinion Survey Faculty, administrators, community partners and employers provide valuable data for program planning and improvement. SPHIS administrators and program directors plan to utilize the results of the analyzed data to inform decision-making about programs. Aggregated data and systematic reporting contribute to an explicit process that helps make SPHIS a more efficient and effective learning organization. See the assessments of Sections V and IX for a more detailed description.

Faculty

Students complete course evaluations each semester to provide feedback to individual faculty members. An annual review of faculty accomplishments in teaching, research and service is conducted. The results are used to provide information for tenure and promotion, to make programmatic adjustments, to assess the school's contribution to the university mission and scorecard, and to provide professional development. Future plans include the development of a teaching feedback and observation tool to provide individualized feedback in a systematic and objective way. SPHIS faculty and administrators will work with CEHD to create and validate the tool.

Alumni

Information generated from alumni and partners in public health agencies aid in the assessment of graduates' educational experiences and current and future needs for professional education. Alumni will be surveyed upon graduation, two years after graduation and five years after graduation. Data regarding employment and additional education will be collected. Employers of the alumni will be surveyed

regarding their assessment of graduates' preparation for their positions in the workforce. A database of information regarding alumni will be maintained, including the permanent university e-mail address. In the future, alumni will be asked to serve on the Community Advisory Board. Alumni will be invited to participate in SPHIS events, especially the culminating experiences for MPH students.

Community

Our community partners are valuable additions to the SPHIS. Students and faculty depend on community partners to provide service experiences, practicum sites and feedback regarding program effectiveness. Partners on the Community Advisory Board will assess student development and promote the school in the community. Community partners often participate in grants and contracts, needs assessments, continuing education and other service outreach projects. The Community Advisory Board will also review programs and provide input regarding preparation for service to the community.

3. Assessment of the extent to which this criterion is met.

This criterion is met. The SPHIS has assessment systems in place that are aligned with institutional, state and national standards. The school uses multiple forms of assessment to monitor students' knowledge, skills and attitudes at appropriate transition points. The program directors and department chairs submit annual summaries, interpretations and applications of their assessments to the dean of the SPHIS and to the university. Program directors, department chairs and faculty use these reports and data to evaluate their programs. In addition there are periodic external reviews (e.g. SACS, Academic Program Review and Board of Overseers). We will utilize an annual review process of programs, committees and faculty. We will solicit input from all stakeholders in this process. Every two and one half years, we will undertake an intensive self-study process with emphasis on continued accreditation and SPHIS quality improvement. The evolving Assessment Plan will be the foundation for a successful public health program.

Criterion X.B: For purposes of seeking accreditation by CEPH, the school shall conduct an analytical self-evaluation and prepare a self-study document that responds to all criteria in this manual.

Expected Documentation

1. Provision of all documentation specified as being expected.

All expected documentation is provided within this document and appendices.

2. Description of the process used for the self-study.

The Accreditation Steering Committee (ASC), composed of faculty and staff from all five departments as well as central administration, was constituted by the dean in June 2004, meeting weekly at first and as needed thereafter. The first task accomplished by the ASC was the creation of master timeline for all activities through October 5, 2005, the submission date for the self-study report. On June 16 and 28, 2004, the ASC held general meetings of the faculty and staff to discuss the accreditation process. On September 17, 2004, the first faculty and staff luncheon was held on the topic of accreditation. These luncheons have continued on a monthly basis with few exceptions, though the agenda has expanded beyond just the accreditation process.

Eleven teams, corresponding to self-study criteria (I-X, including IIA and IIB), were formed and faculty and staff volunteers were assigned to develop the required materials. These teams met independently first to outline (August through October 2004) and then draft narrative responses to the CEPH criteria (November 2004 through January 2005). The ASC reviewed and compiled the teams' responses into the first complete draft of the self-study document, which was finalized on February 19, 2005.

The ASC, along with additional faculty and staff, held an off-campus retreat on March 9, 2005, to review the first draft. The accreditation teams were once again engaged by the ASC to provide additional information. In addition, the ASC began to work with a representative from CEHD to develop school-wide outcomes measures. A second draft of the document was distributed to the ASC on May 19, 2005 and underwent further review and revision.

Beginning on July 1, 2005, the third draft of the document was distributed to external reviewers, namely:

- Sylvia Furner, PhD, MPH, Associate Dean, School of Public Health, University of Illinois at Chicago
- Linda Lloyd, PhD, Associate Dean for Academic Affairs, School of Public Health, Drexel University
- Robert Jacobs, PhD, Director of the MPH Program and Epidemiology-Biostatistics Core, Eastern Virginia Medical School[3]

In addition, the third draft was made available for review and comments by the SPHIS faculty and staff, beginning July 29, 2005, when its availability was announced at the July monthly luncheon.

Jennifer Gregg, PhD, Assistant Professor in the Department of Communication, reviewed the document for general readability and consistency in August and September 2005. Stephen Wyatt, DMD, MPH, Dean of the University of Kentucky College of Public Health reviewed the document for content in August and September 2005.

On September 16, 2005, the document was submitted to the Offices of the President, Provost and Executive Vice President for Health Affairs for review and comment. Comments were returned by Daniel Mahony, PhD, Assistant University Provost for Institutional Effectiveness, on September 26, 2005.

The ASC completed its final, detailed review on October 3, 2005, and a preliminary draft of the SPHIS self-study document was submitted to CEPH reviewers on October 4, 2005. It was the determination of the reviewers and the CEPH Board that a site visit not occur until one class had graduated from the MPH Program. Consequently, a one-year extension of applicant status was requested and subsequently granted by the CEPH Board. In the interim, a consultative visit was held on April 13 and 14, 2006 with Ms. Laura Rasar King in order to outline the parameters for resubmission of the document. During this visit, Ms. King confirmed that review of the self-study document would occur under the January 2002 Accreditation Criteria.

[3] Dr. Jacobs joined the faculty of SPHIS on August 1, 2005.

The ASC continued to meet on a periodic basis to revise and update the self-study document. The document was submitted to Central Administration on September 20, 2006. Additional input by the ASC occurred at its meeting of September 27, 2006, and the preliminary draft was submitted to CEPH reviewers on October 4.

Following receipt of comments from preliminary reviewers on December 7, 2006, the committee met to begin the process of creating the final version. The committee met approximately every two weeks between January 17 and March 21. Additionally, the committee reviewed the 23-item action plan developed at the annual Evaluation and Strategic Planning Retreat, January 5, 2007, to ensure updated information regarding each of these could be added to the self-study. On March 26, a complete draft was released for final comment by the committee and the dean. The final draft will be mailed to the site visitors on April 6 to ensure delivery by the due date.

3. An analysis of the school's responses to recommendations in the last accreditation report, if any.

Not applicable.

4. Summary statement of the school's strengths and weaknesses in regard to each accreditation criterion and to the school's performance overall. (This statement may be organized as an executive summary, if the school so chooses.)

The school has made considerable progress from the time of its formal establishment as an academic entity in 2002. While an academic training program supported by an Institute for Public Health Research was in place since 1999, there was only a small faculty complement prior to 2002. With the establishment of SPHIS, the faculty, resources, academic space, technology resources and teaching productivity have all increased dramatically. Cooperative activities with faculty in other public health training programs in the state have expanded. Health information sciences have played a major role in enhancing all aspects of the school's performance. Research productivity with faculty members as principal and collaborating investigators has continued. Collaboration with the state and local health departments, Louisville Metro government, local businesses, and community agencies has increased significantly. The first and second classes in the MPH degree program were enrolled in the fall of 2005 and 2006, respectively, and the first MPH degrees will be awarded in May 2007..

The expansion of the educational, research, and service enterprise has led to the need for identification of a new office building to serve as operational headquarters for the school. Such a building has been chosen and will be available following extensive renovations in Spring 2008. As the growth of the school continues, we anticipate new joint MPH and other masters degrees, new doctoral programs, and the establishment of focused degree programs in health information sciences.

Strengths, weaknesses, and recommendations to address potential shortcomings with respect to each of the self-study criteria are listed below. The Accreditation Steering Committee believes that, while two of the criteria are considered only partially met, appropriate recommendations have been established to address and correct potential weaknesses.

Criterion I: Mission Goals and Objectives

Strengths:

- The SPHIS has a well-defined mission with supporting goals and objectives that are specific and measurable. These were developed during a series of meetings with the direct input of its faculty, staff and students with refinement during an off-campus retreat.
- The range of programs in education, research and service are linked to the vision and mission through these goals and objectives.
- Objectives will be tracked using the scorecard process, as defined by data measures selected by the school with the concurrence of the university.
- The goals and objectives will be re-assessed and revised periodically with the input of a community advisory board.

Weaknesses:

- None

This criterion is met.

Criterion II.A: Organizational Setting (External)

Strengths:
- The SPHIS is designated by UofL as an independent academic unit, administered by a dean, with policies, rights, and responsibilities equivalent to those of the other academic units in the Health Sciences Center.
- The SPHIS has broad-based support from and cooperation with academic units at both the Health Sciences Center and the main campus.
- The SPHIS has an established budgetary process that conforms with processes that are in place for other academic units at UofL.
- The SPHIS has established specific guidelines for faculty appointment, promotion, tenure and review that are consistent with the academic standards and policies outlined in the *Redbook*, as maintained by the University Provost.
- The SPHIS adheres to the academic standards and policies established by the UofL Graduate School.
- The SPHIS faculty and staff are active participants in the governance of the university through representative participation on university-wide standing and ad hoc committees.

Weaknesses:
- None

This criterion is met.

Criterion II.B: Organizational Setting (Internal)

Strengths:
- The SPHIS is an independent academic unit of the University of Louisville that is administered by a dean who oversees an established internal organizational structure consisting of academic, advisory/governance, administrative, and adjunct areas of function.
- The following units serve in an advisory capacity to the dean of the SPHIS:
  - The Executive Committee meets monthly and is advisory to the dean in day–to-day operational matters;
  - The Council of Chairs and Deans meets monthly and is advisory to the dean in matters relating to the school;
  - The Community Advisory Board, which was constituted in September 2006, is advisory to the dean and the SPHIS faculty regarding public health practice and opportunities for research and collaboration.
- A new Associate Dean for Student Affairs position has been created to respond to the increased needs of a growing student body.
- The SPHIS has achieved interdisciplinary cooperation and coordination through:
  - The use of community public health practitioners for curriculum development and instruction;
  - A governance structure that includes faculty, students, and community practitioners; and,
  - Scheduled activities such as the monthly research incubation meetings that foster interdisciplinary collaboration between the academic departments in the SPHIS and across the university.
- The SPHIS adheres to the university's established policies for the fair and ethical treatment of all persons and has officially adopted the *United Nations Universal Declaration of Human Rights* as a guiding principle of faculty, staff and student behavior.
- The SPHIS has developed a written values statement expressing the school's commitment to foster an environment of fair and ethical treatment that is necessary to support the development and sustainability of collaborative efforts in teaching, research and service in public health. The SPHIS values statement is provided to the students and posted throughout the school.
- MPH Students are specifically introduced to public health values and ethics as a part of their required coursework.

Weaknesses:
- None

This criterion is met.

Criterion III: Governance

Strengths:
- The SPHIS has an established infrastructure for internal governance that is administered by the dean who receives advisory input from the Executive Committee (dean, associate deans and department chairs) and the Council of Deans and Chairs (the Executive Committee plus student and faculty representatives). The Community Advisory Board was constituted in 2006 and regularly provides input to the dean.
- The SPHIS has established *Bylaws and Rules* that define the guidelines for internal governance for the school.
- The SPHIS has identified processes and designated responsibilities for policy development; planning; budget and resource allocation; student recruitment, admission and awarding of degrees; faculty recruitment, retention, promotion and tenure; academic standards and policies; and research and service expectations.
- The SPHIS has an established committee structure and written statements of charge and composition for each committee;
- Faculty, students, and community representatives contribute to the activities and governance of the SPHIS through service on standing and ad hoc committees.
- The membership of all committees has been finalized and all committees have met as required.

Weaknesses:
- None

Recommendation:
- Develop an annual calendar defining the meeting times and locations for each SPHIS committee, and block the times electronically on each committee member's web-based calendar. Additionally, departmental alternates for each committee should be identified if a committee member is unable to attend a scheduled meeting.

This criterion is met.

Criterion IV: Resources

Strengths:
- The SPHIS has received fiscal resources needed to achieve its goals and objectives.
- The student to core faculty ratio and institutional expenditures per FTE student were 2.42:1 and $125,649, respectively, in 2006-07.
- The SPHIS operates with a centralized business plan through the dean's office and has adequate staff to manage all personnel administration, purchasing, and fiscal processing. Additionally, each department has a minimum of one classified staff member that serves as an administrative/clerical resource for the department. The staff complement for the school is adequate for its current size.
- The SPHIS has adequate office, classroom and laboratory space at its current complement of faculty and students. New space has been identified that will be adequate to meet the needs of the projected growth of the school.
- All SPHIS faculty and staff have immediate access to personal computers, and students have access to the SPHIS lab, which contains 30 desktop computers, and the IT computer center with 28 workstations. The SPHIS also employs a full time technology and facilities manager to support the IT mission of the school.
- The SPHIS faculty and students have physical and electronic access to six academic libraries containing over two million volumes (1,200 in public health) and 24,000 journals and publications.
- Eight complete workstations have been created in a separate office space to support the needs of Graduate Research Assistants.

- Placement sites have been identified and formal agreements with targeted organizations are in place. A formal contract with the Louisville Metro government for student practica has been signed and additional sites for student field placement have been identified.

Weaknesses:
- None

Recommendations:
- Continue to identify opportunities to diversify the school's funding base, including research income, sources of funding for stipends, assistantships and scholarships, and establishing a school endowment program.
- Continue to expand practicum site opportunities and community interaction.

This criterion is met.

Criterion V.A: Degree Programs

Strengths:
- The SPHIS has developed degree programs that reflect the school's vision and mission and currently offers one professional degree (MPH) and seven academic degrees that include four PhD degrees and three master's degrees.
- The MPH degree is an interdisciplinary graduate professional degree that includes an expanded core curriculum (18 credit hours), advanced courses in each of the five areas of knowledge basic to public health (15 credit hours), and experiential learning (12 credits hours) designed to provide students with applied field experiences and opportunities to address emerging needs of public health.
- Each degree program offered by the SPHIS is described in the official school catalog, on the school's website and in informational brochures.

Weaknesses:
- None

This criterion is met.

Criterion V.B: Public Health Knowledge Area Instruction

Strengths:
- Through a comprehensive core curriculum, the *Issues in Public Health* course, and the Practicum, MPH students acquire skills and experience in the areas of knowledge basic to public health. Progress towards attaining this knowledge is assessed each semester by faculty committees.
- MPH students, in consultation with the SPHIS faculty and staff, identify practicum sites and, in consultation with their practicum advisors and site preceptors, develop learning contracts. The learning contract defines the scope of work and deliverables that are the chief method for assessing the students' field work.
- The Louisville Metro government is actively involved in practicum placements. Additional practicum sites have been identified; formal affiliation agreements have been signed with fourteen of these organizations.
- The program's culminating experience consists of successful completion of *Issues in Public Health*, *Critical Thinking and Program Evaluation*, the practicum and *Integrating Learning and Experience in Public Health*.
- Two MPH classes have been admitted since August 2005. The third class is currently being recruited. Graduation of the first MPH class will occur in May 2007.
- Procedures and mechanisms to evaluate the different components of the MPH curriculum have been developed.
- A student handbook that describes MPH program policies and follows Graduate School policies has been created.
- A practicum manual that describes the practicum policies and procedures, including the range of deliverables, methods for assessment of preceptor sites and methods for assessing student performance by site mentors and faculty advisors, has been created.

Weaknesses:
- None

This criterion is met.

Criterion V.C: Learning Objectives

Strengths:
- Learning objectives are available for all coursework in SPHIS, and processes for the development, approval and review of learning objectives for all courses within degree programs are in place. Matrices of course learning objectives and program competencies have been developed for the core courses of the MPH program. A similar process has begun for the concentration courses of the MPH program and for the MSc, MS and PhD degree programs and is targeted for completion by Fall 2007. All documents related to learning objectives and competencies will be available in the resource file.
- MPH core competencies are given to students upon matriculation and are available to students through the student catalog and on the website.
- Course learning objectives are listed in the syllabus that is given to students at the beginning of each course.
- A formal process is in place for periodically assessing the relevance of the learning objectives and competencies for public health practice.

Weaknesses:
- None

Recommendation:
- Create an electronic calendar that establishes timelines for reviewing and updating learning objectives and competencies for each academic and professional degree program.

This criterion is met.

Criterion V.D: Assessment of Student Progress and Career Readiness

Strengths:
- For the MPH, the successful completion of coursework, experiential learning components and oral examination provides a comprehensive and continuing process for evaluating progress towards achieving the program's competencies.
- For the academic degrees, student progress towards achieving competencies is embedded in the successful completion of the coursework, qualifying exam, thesis or dissertation and oral defense.
- Procedures and mechanisms to evaluate outcome measures for all professional and academic programs have been established.

Weakness:
- While outcome measures to identify student achievement have been developed, no data on degree completion or job placement rates are yet available for the MPH program, which will graduate its first class in May 2007.

Recommendation:
- Compile data on degree completion and job placement rates for the MPH program after graduation of the first class.

This criterion is partially met.

Criterion V.E: Public Health Content in Academic Degrees

Strengths:
- Departments offering academic degrees in SPHIS represent four of the five traditional areas of public health and provide formal coursework in biostatistics, environmental health, epidemiology and health management for students in both the academic and professional degree programs.
- Students in the academic degree programs have the opportunity and are encouraged to take public health courses as electives and to participate in public health practice programs offered by the school. In addition:

  - All MSc program students are now required to take the MPH core course entitled Introduction to Biostatistics.
  - MS/BDS program students are required to take the MPH core courses entitled Introduction to Epidemiology and Introduction to Environmental Health.
  - All PhD degree students, except those in the PhD/PHS concentration in epidemiology, are required to take Introduction to Epidemiology or equivalent coursework.
- The culminating experience for all academic degree programs is centered on the completion of a thesis/dissertation (or equivalent for the MSc) as approved by the Graduate School.

Weaknesses:
- None

Recommendation:
- Establish a procedure and mechanism that documents, on an annual basis, the number and types of opportunities for exposure to public health content available to students in academic programs.

This criterion is met.

Criterion V.F: Doctoral Degree Programs

Strengths:
- The school offers a PhD program in Public Health Sciences with concentrations in environmental health, epidemiology and health management.
- The Department of Bioinformatics and Biostatistics offers a PhD program with concentrations in decision science and in biostatistics.

Weaknesses:
- None

This criterion is met. An additional PhD/PHS concentration in behavioral sciences/health promotion is being planned for implementation within the next year.

Criterion V.G: Joint Degree Programs

Not applicable. The SPHIS does not currently offer joint degree programs with the MPH.

Recommendation:
- Explore opportunities for joint degree programs with Medicine, Dentistry, Nursing, Psychology and Social Work.

Criterion V.H: Non-Traditional Programs

Not applicable. The SPHIS does not currently have any non-traditional degree programs.

Criterion VI: Research

Strengths:
- Well-established policies and procedures exist regarding research.
- An SPHIS Research Committee with representation from all departments has been established.
- An Assistant Director for Sponsored Programs who assists faculty with developing and processing of all grants has been designated.
- Establishment of the Statistical Consulting Center by the Department of Bioinformatics and Biostatistics and the appointment of a liaison from the Department of Epidemiology and Population Health to the University of Louisville Hospital's General Clinical Research Center have created an effective support system for collaborative research at the Health Sciences Center.
- Well-established relationships exist with the community aimed at furthering the development of collaborative research projects.
- SPHIS has been awarded over $2 million in research grants and contracts annually, including federal support from NIH, CDC, HRSA, and CMS, with 22 faculty on sponsored research projects in fiscal year 2005-06.
- Indirect cost recovery of $2.3 million to the university since July 1, 2002, with a return of $340,320 of this amount to SPHIS, supports the school's research infrastructure.

- Students have been extensively involved in research projects, participating in research forums on the local, regional and national level.

Weaknesses:
- None

Recommendation:
- Continue to expand opportunities for student involvement in research.

This criterion is met.

Criterion VII: Service

Strengths:
- A formal program has been constituted to coordinate service activities of the school, and a Director of Community and Professional Service has been appointed. A service committee has been created and an administrative assistant named to support the activities of the director.
- SPHIS administration supports and faculty, staff and students engage in a variety of important service activities.
- Three SPHIS employees have signed agreements to support unique collaborative service arrangements.
- The Center for Health Hazards Preparedness, through funding from CDC and HRSA, has provided continuing education for a large number of health professionals throughout the region in the recognition and response to potential acts of terrorism and natural disasters.
- The school offers a public health grand rounds series that is open to faculty from the health science center campus; students, residents and trainees; and public health professionals from state and local health departments.
- Students have been involved in a variety of service activities with Louisville Metro Public Health and Wellness and other local organizations as well as international projects.

Weaknesses:
- None

Recommendations:
- Develop a new electronic system for entry and tracking of service activities by mid-2007.
- Create new awards for excellence in service by Fall 2007.
- Continue to expand opportunities for student service with the growth of SPHIS.

This criterion is met.

Criterion VIII.A: Clearly Defined Faculty

Strengths:
- The SPHIS has assembled a well-trained and highly qualified faculty needed to accomplish the mission of the school with the current enrollment.
- Positions have been approved for recruitment of new faculty to meet future needs.
- Faculty members bring a vast array of experience at the state, local, and national levels of public health to bear on their activities.
- Faculty members are involved in a number of leadership roles in national organizations.

Weaknesses:
- None

This criterion is met.

Criterion VIII.B: Faculty Policies and Procedures

Strengths:
- The school recognizes faculty development as an item of high priority. Funding for such activities is derived in part by the return of indirect costs from grants to the school.
- The university also provides substantial support for development of full- and part-time faculty.

Weaknesses:
- None

This criterion is met.

Criterion VIII.C: Diversity of Faculty

Strengths:
- SPHIS has constituted a diversity committee and created a diversity plan, as well as policies and procedures, to help the school's faculty reflect the demographic characteristics of its student body, The Commonwealth of Kentucky and the nation. The diversity plan was submitted to and was accepted by the Office of the Vice Provost for Diversity and Equal Opportunity in 2005.
- SPHIS has a diverse faculty relative to academic training and public health experience.

Weaknesses:
- The school has not yet achieved its goals for diversity in all areas.
- Women are under-represented among the faculty relative to the student body and the state.

Recommendations:
- Establish more formal contacts with faculty of Historically Black Colleges and Universities during recruitment for new faculty positions.
- Collaborate with national associations that promote public health and minority and women professionals.
- Utilize the National Minority Faculty Identification Program (http://www.southwestern.edu/natfacid/) to locate professionals around the nation whose expertise is in areas targeted for expansion by the school.

This criterion is met.

Criterion IX.A: Recruitment and Admissions Policies

Strengths:
- The first two classes of professional public health degree students matriculated in August 2005 and 2006, respectively.
- Policies/procedures for recruitment and admissions have been established for all programs.
- Formal metrics for assuring quality of the student body have been adopted, and requested data analyses on the first MPH class have been completed.

Weaknesses:
- None

Recommendations:
- Consider early recruitment activities, to include a discussion of public health careers at area high schools.
- Investigate development of undergraduate majors or minors in public health and joint degrees (e.g. MD-MPH) at UofL.

This criterion is met.

Criterion IX.B: Diversity of Students

Strength:
- The school has reached its initial target for achieving overall diversity of its student body based upon comparison with state characteristics.

Weakness:
- Men are under-represented in the student body.

Recommendation:
- Work with Historically Black Colleges and Universities, local and national associations promoting public health, and institutions in Jefferson County and western Kentucky that offer public health-

related services to assure successful recruitment of African American and other minority students and to achieve greater gender balance.

This criterion is met.

Criterion IX.C: Academic Advising, Career Placement and Advice

Strengths:
- An extensive advising process has been established for all students.
- University-based career development services have been recently expanded to include career counseling, full-time job placement and co-op/internship placement.
- Initial feedback has been received regarding student academic advising and counseling.

Weakness:
- School-based career and placement counseling services need to be expanded.

Recommendations:
- Review the academic advising services each semester and enhance as necessary in response to feedback from students and faculty.
- Work with university career development office to expand career counseling and placement services by Fall 2007.

This criterion is partially met.

Criterion IX.D: Participatory Roles of Students

Strengths:
- Students' roles in evaluation and governance of the school and in student organizations have been defined.
- Students have been integrated into evaluation, governance and student organizational roles.

Weaknesses:
- None

This criterion is met.

Criterion X.A: Process for Evaluating and Monitoring

Strengths:
- A robust evaluation and planning process has been established.
- The Community Advisory Board has been constituted and is advisory to the dean in matters of evaluation and planning.
- The first annual Evaluation and Strategic Planning Retreat was held on January 5, 2007, resulting in a 23-item action plan.

Weaknesses:
- None

Recommendations:
- Complete development of a database and online entry forms for collection of data for evaluation by mid-2007.
- Continue to revise the evaluation and planning process based upon commentary from participants involved in annual retreats.

This criterion is met.

Criterion X.B: Analytical Self-Study for CEPH Accreditation

Strength:
- The self-evaluation process has been completed and all documentation supplied as requested.

Weaknesses:
- None

This criterion is met.

Table X-6: Summary of Assessments

Criterion	Extent to Which Criterion Is Met
I. Mission Goals and Objectives	Met
II. Organizational Setting	
A. External	Met
B. Internal	Met
III. Governance	Met
IV. Resources	Met
V. Instructional Programs	
A. Degree Programs	Met
B. Public Health Knowledge Area Instruction	Met
C. Learning Objectives	Met
D. Assessment of Student Progress and Career Readiness	Partially met
E. Public Health Content in Academic Degrees	Met
F. Doctoral Degree Programs	Met
G. Joint Degree Programs	Not applicable
H. Non-Traditional Programs	Not applicable
VI. Research	Met
VII. Service	Met
VIII. Faculty	
A. Clearly Defined Faculty	Met
B. Faculty Policies and Procedures	Met
C. Diversity of Faculty	Met
IX. Students	
A. Recruitment and Admissions Policies	Met
B. Diversity of Students	Met
C. Academic Advising, Career Placement and Advice	Partially met
D. Participatory Roles of Students	Met
X. Evaluation and Planning	
A. Process for Evaluating and Monitoring	Met
B. Analytical Self-Study for CEPH Accreditation	Met

5. Assessment of the extent to which this criterion is met.

This criterion is met.

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendices

I-1 Current SPHIS Scorecard

II-1 Listing of All UofL Accreditations

II-2 Membership and Terms of the Community Advisory Board, Executive Faculty, Faculty Forum, Council of Chairs and Deans, and Dean's Executive Committee

II-3 URLs for Written University Policies for Fair and Ethical Dealings

III-1 Professional Practice Plan, SPHIS

III-2 Membership and Terms of Standing and Ad Hoc Committees Listed in Section III.2

V-1 SPHIS Catalog

V-2 Complete Listing of MPH Courses

VI-1 Publications by SPHIS Faculty and Staff, Calendar Years 2003 through 2006

VII-1 Community and Professional Service and Service Committee Documents

IX-1 MPH Strategic Recruitment Plan

IX-2 Application Summary Sheet and Applicant Score Sheet

IX-3 Recruitment Materials

X-1 Quality Assurance Framework

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendix I-1
Current SPHIS Scorecard

University of Louisville
Challenge for Excellence: Full Speed Ahead
1999-2008 Strategic Goals and Areas of Emphasis

DRAFT

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Pending
Not Applicable

School of Public Health and Information Sciences

Goal 1 - Educational Experience: Student Success

Create a responsive, challenging, and supportive educational environment characterized by high standards, commitment to quality, and student success.

		Baseline	Actual	Goal	Difference to Goal	Actual	Goal	Actual	Difference to Goal	Actual	Goal
Student Attainment		1999	2002	2002	2002	2003	2004	2004	2004	2005	2008
1.1	Average ACT scores for all entering freshmen										
1.2	Number and percent of entering freshman with ACT scores greater than or equal to 27										
1.3	Year-to-year first-time freshman retention rate										
1.3a	Second-to-third year retention rate										
1.3b	Third-to-fourth year retention rate										
1.4	Number of doctoral degrees awarded					0	0	0	0	1	7
1.5	Six year graduation rate - all entering first-time, full-time bachelor's degree seeking freshmen										
1.6	Number of undergraduate students involved in research or creative activity in collaboration with faculty										
1.7	Number of students enrolled in Honors courses										
1.8	Total student scholarship awards										
Academic Recognition											
1.9	Order of the Coif (Brandeis School of Law)										
1.10	Phi Beta Kappa Chapter (Arts and Sciences)										
1.11	Number of disciplines graduating doctoral students					0	0	0	0	2	2
1.12	Number of students receiving national awards and/or national recognition					0	0	0	0	1	2
Institutional Profile											
1.13	Number of undergraduate students										
1.14	Number of graduate students *(excludes postdoctoral students)*		63			76	76	82	6	112	200
1.15	Number of professional students										
1.16	Number of residential students										
1.17	Number of students per full-time faculty		6.3			7.6	7.6	5.5	2.1	4.3	7.0
1.18	Percent of student credit hours produced by part-time faculty					25.0%	28.0%	4.0%	24.0%	21.0%	20.0%
1.19	Number of community and technical college transfer students										
1.20	Number of faculty traveling abroad for teaching or research					0	0	0	0	1	0

(1.12) Drop in 2003 actuals reflects change in definition.

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School of Public Health and Information Sciences

Goal 2 - Research, Creative and Scholarly Activities
Focus energy and resources to enhance the scholarly agenda and advance to national prominence areas of programmatic strength.

		Baseline 1999	Actual 2002	Goal 2002	Difference to Goal 2002	Actual 2003	Goal 2004	Actual 2004	Difference to Goal 2004	Actual 2005	Goal 2008
National Reputation											
2.1	National Institutes of Health (NIH) Cancer Center Recognition										
2.2	Membership in the Association of Research Libraries										
2.3	Nationally recognized programs					0	1	0	(1)	0	2
Funding Awards (including but not limited to research)											
2.4	Total number of grants and contracts awarded					11	13	11	(2)	15	20
2.5	Total grants and contracts--dollar amount received by PI's unit (excluding financial aid)					$2,787,467	$3,906,565	$2,241,104	($1,665,461)	$3,414,530	$5,000,000
2.6	Total grants and contracts--dollar amount by collaborating investigators (excluding financial aid)					$2,787,467	$3,906,565	$1,933,297	($1,973,268)	$3,382,058	$5,000,000
Research and Development											
2.7	Total number of research grants and contracs proposals submitted					1	12	12	0	16	18
2.8	Total number of research grants and contracts awarded					8	7	8	1	3	9
2.9	Total research grants and contracts--dollar amount received							$1,921,884		$1,558,403	Pending
2.10	Total federal research grants and contracts -- dollar amount received					$2,677,649	$1,317,500	$1,565,302	$247,802	$1,366,447	Pending
2.11	Extramural research and development expenditures (NSF)					$749,142		$3,248,346		$2,261,544	Pending
2.12	Federal research and development expenditures (NSF)					$620,960		$830,059		$684,360	Pending
2.13	License Income received		$0			$0	$10,000	$54,062	$44,062	$21,650	$20,000
2.14	Invention disclosures received					1	1	5	4	1	2

(2.9-2.11) 2008 Goals currently being revised.

Creative and Scholarly Activities											
2.15	Number of Endowed Chairs and Professorships		0			0	0	0	0	0	3
2.16	Number of faculty on sponsored research					12	12	13	1	22	22
2.17	Number of students on funded research					0	2	1	(1)	2	3
2.18	Total publications in refereed journals					0	10	18	8	40	20
2.19	Total scholarly refereed books									0	
2.20	Number of refereed presentations and/or papers sponsored by national or international organizations					0	10	17	7	20	20
2.21	Number of refereed exhibits, artistic performances, presentations, etc.										

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School of Public Health and Information Sciences

Goal 3 - Accessibility, Diversity, Equity, and Communication
Develop a seamless system of access and intercultural understanding that promotes and supports race and gender diversity, inclusivity.

		Baseline 1999	Actual 2002	Goal 2002	Difference to Goal 2002	Actual 2003	Goal 2004	Actual 2004	Difference to Goal 2004	Actual 2005	Goal 2008
Campus Diversity											
3.1	Achievement of annual goals specified in the University's Diversity Plan										
3.2	Kentucky Resident African American Undergraduate Enrollments (KY EEO Plan)										
3.3	Kentucky Resident African American Graduate Enrollments (KY EEO Plan)		4			6	5	6	1	available Jan-07	15
3.4	Number of African American professional students										
3.5	Employment of African Americans as faculty (number and percent to total faculty) (KY EEO Plan)		1/11.1%			1/10%	3/20%	2/15.4%	(1)/-4.6%	2/10%	4/14%
3.6	Number and percent to total full-time faculty of full-time women faculty		2/22.2%			3/30%	5/33%	5/50%	0/17%	8/3.1%	12/40%
3.7	Number and percent to total full-time faculty of full-time African American faculty		1/11.1%			1/10.0%	2/13%	2/13.3%	0/0.3%	2/7.7%	3/13%
3.8	Number and percent to total full-time tenured and tenure track faculty of full-time tenured and tenure track African American faculty		0			0	0	0/0%	0	0/0.0%	1/25%
3.9	Number and percent to total full-time tenured and tenure track faculty of full-time tenured and tenure track women faculty		0			0	0	0/0%	0	3/3.33%	2/40%
3.10	Employment of African Americans in Executive, Administrative, and Managerial Positions (number and percent to total executive, administrative, and managerial positions) (KY EEO Plan)		0			0/0%	0	0/0%	0	0/0.0%	1/33%
3.11	Employment of African Americans as Other Professionals (number and percent to total other professionals) (KY EEO Plan)		0/0%			0/0%	1/20%	1/6.6%	0/-13.4%	1/9.1%	2/25%
3.12	Number of African Americans holding endowed chairs and professorships	0	0			0	0	0	0	0	1
3.13	Number of women holding endowed chairs and professorships	0	0			0	0	0	0	0	1

(3.5) *CPE definition of total faculty equal African American + White*
(3.8) *Percentages for 2008 have been estimated.*
(3.10) *CPE definition of total EAM equal African American + White*
(3.11) *CPE definition of total other professionals equal African American + White*

Student Success

3.14	Average ACT scores for entering African American freshmen										
3.15	Retention of First-Year African American Kentucky Resident Students (KY EEO Plan)										
3.16	Retention of all African American Kentucky Resident Undergraduate Students (KY EEO Plan)										
3.17	Six year graduation rate for Degree-Seeking African American Kentucky Resident Students (KY EEO Plan)										
3.18	Number of African American students receiving doctoral degrees					0	0	0	0	0	2
3.19	Number of women receiving doctoral degrees					0	0	0	0	0	3
3.20	Number of African American students receiving master's degrees					0	5	3	(2)	0	15

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School of Public Health and Information Sciences

Goal 4 - Partnerships and Collaboration
Develop and integrate interdisciplinary activities associated with teaching, research, and service. Support existing partnerships and engage new partners to contribute to the educational, social, and economic progress of the region and state.

		Baseline	Actual	Goal	Difference to Goal	Actual	Goal	Actual	Difference to Goal	Actual	Goal
		1999	2002	2002	2002	2003	2004	2004	2004	2005	2008
Interdisciplinary Activities											
4.1	Number of faculty teaching across disciplines					8	8	15	7	17	14
4.2	Number of interdisciplinary grant applications					30	30	33	3	42	40
4.3	Number of interdisciplinary research projects					10	12	14	2	2	20
4.4	Total publications in refereed journals across disciplines					0	18	17	(1)	21	30
Economic Development											
4.5	Licenses/options executed					0	0	1	1	1	2
4.6	Business start-ups					0	0	1	1	0	2
4.7	Businesses incubated					0	0	0	0	0	2
4.8	Number of joint grants with industries(e.g. SBIR)					0	0	0	0	1	2
Signature Partnerships											
4.9	Number of existing and emerging partnerships that support education									Pending	
4.10	Number of partnerships that address health disparities/inequities									Pending	
4.11	Number of partnerships that support social/human services									Pending	
4.12	Number of partnerships that support projects associated with economic development									Pending	
Collaborative Programs											
4.13	Number of collaborative programs with K-12 educational institutions					1	1	0	(1)	2	2

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School of Public Health and Information Sciences

Goal 5 - Institutional Effectiveness of Programs and Services
Improve the effectiveness and accountability of programs and services in fulfilling the mission and vision of the university.

		Baseline	Actual	Goal	Difference to Goal	Actual	Goal	Actual	Difference to Goal	Actual	Goal
		1999	2002	2002	2002	2003	2004	2004	2004	2005	2008
Institutional Investment											
5.1	Total endowment										
5.2	Total Philanthropic Support (outright gifts and pledges)										
5.3	Salary catch up: Benchmark institution median difference in faculty salaries										
5.4	Salary catch up: Benchmark/Market median difference in staff salaries										
Institutional Outcomes											
5.5	Pass rates on licensure exams						NA	NA			NA
5.6	Percent of programs accredited (accredited / eligible)					NA	0.0%	NA			1/100%
5.7	QMS survey - overall impression of unit by continuing students - mean response			Ongoing Improvement			Ongoing Improvement				Ongoing Improvement
5.8	QMS survey - overall impression of unit by graduating students - mean response			Ongoing Improvement			Ongoing Improvement				Ongoing Improvement
5.9	QMS survey - overall impression of unit by graduates - one year out - mean response			Ongoing Improvement			Ongoing Improvement				Ongoing Improvement
5.10	QMS survey - overall impression of unit by alumni - mean response			Ongoing Improvement			Ongoing Improvement				Ongoing Improvement
5.11	QMS survey - overall impression of unit by faculty - mean response			Ongoing Improvement			Ongoing Improvement				Ongoing Improvement
5.12	QMS survey - overall impression of unit by staff - mean response			Ongoing Improvement		2.90	Ongoing Improvement				Ongoing Improvement
5.13	QMS survey - overall impression of unit by employers - mean response			Ongoing Improvement			Ongoing Improvement				Ongoing Improvement
5.14	QMS survey - overall satisfaction of university by African American students - mean response			Ongoing Improvement			Ongoing Improvement				Ongoing Improvement
5.15	QMS survey - overall satisfaction of university by all students - mean response			Ongoing Improvement			Ongoing Improvement				Ongoing Improvement
5.16	NSSE Survey						Ongoing Improvement				Ongoing Improvement

(5.7)-(5.15) *Mean based on a scale from 1 to 5*

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendix II-1
Listing of All UofL Accreditations

Institutional Accreditation

The University of Louisville is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (1866 Southern Lane, Decatur, Georgia 30033-4907: Telephone number 404-679-4501) to award associate, bachelor, master, specialist, doctoral, and first-professional degrees (D.M.D., J.D., M.D.).

Professional Accreditation

Accountancy - AACSB - The International Association for Management Education.
Art Therapy - (Expressive Therapies) American Art Therapy Association.
Audiology and Speech Pathology - American Speech-Language-Hearing Association.
Business - (Graduate and Undergraduate) AACSB - The International Association for Management Education.
Chemistry - American Chemical Society.
Clinical Psychology - American Psychological Association.
Computer Science - Computer Science Accreditation Commission of the Computing Sciences Accreditation Board (CSAC/CSAB).
Counseling Psychology - American Psychological Association.
Dental Hygiene - Commission on Dental Accreditation of the American Dental Association.
Dentistry - Commission on Dental Accreditation of the American Dental Association.
Education - Department of Education, Commonwealth of Kentucky and National Council for Accreditation of Teacher Education (NCATE).
Engineering - (Chemical, Civil, Electrical, Industrial, Mechanical Engineering, Engineering Mathematics and Computer Science programs) Engineering Accreditation Commission of the Accreditation Board for Engineering and Technology (EAC/ABET).
Family Therapy - Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE).
Graduate Medicine - (House Staff) Accreditation Council for Graduate Medical Education (ACGME).
Interior Design - Foundation for Interior Design Education Research.
Law - Section of Legal Education and Admissions to the Bar of the American Bar Association; Association of American Law Schools.
Medicine - Liaison Committee on Medical Education, a Joint Committee of the American Medical Association and the Association of American Medical Colleges.
Music and Music Therapy - National Association of Schools of Music.
Nursing - Council on Collegiate Nursing Education.
Paralegal Studies Program - Section on Paralegal Education of the American Bar Association.
Public Administration - National Association of Schools of Public Affairs and Administration.
Social Work - Commission on Accreditation of the Council on Social Work Education.
Sport Management - Sport Management Program Review Council of the National Association for Sport and Physical Education.

Other Accreditation

Research Resource Center — Association for Assessment and Accreditation of Laboratory Animal Care, International.

Source: Office of the Provost

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendix II-2
Membership and Terms of the Community Advisory Board, Executive Faculty, Faculty Forum, Council of Chairs and Deans, and Dean's Executive Committee

COMMUNITY ADVISORY BOARD

Community Advisory Board							Last updated:	03/22/07	
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
CABD-1	Elected by Board	√	Allgood-Murphy, Cathy	n/a		11/01/06	12/31/09	1	Advocacy Representative, AARP Ky State Office
CABD-2	Elected by Board	√	Peralta-Mudd, Claudia	n/a		11/01/06	12/31/08	1	International Program Specialist, Louisville Metro Mayor's Office of International Affairs
CABD-3	Elected by Board	√	Bell, Jill	n/a	Co-Chair	11/01/06	12/31/09	1	VP for Public Affairs, Passport Health Plans
CABD-4	Elected by Board	√	DeWeese, Bob	n/a		11/01/06	12/31/10	1	State Representative
CABD-5	Elected by Board	√	Gatz, Carolyn	n/a		11/01/06	12/31/10	1	University Medical Center
CABD-6	Elected by Board	√	Hagen, Joyce	n/a	Chair	11/01/06	12/31/10	1	President, Passport Health Plans
CABD-7	Elected by Board	√	Hinko, Cathy	n/a		11/01/06	12/31/08	1	Exec Director, Metropolitan Housing Coalition
CABD-8	Elected by Board	√	Mehrotra, Lopa	n/a		11/01/06	12/31/08	1	
CABD-9	Elected by Board	√	Simmons, Jackie	n/a		11/01/06	12/31/09	1	Chief Medical Officer, Passport Health Plans
CABD-10	Elected by Board	√	Tuckson, Wayne	n/a		11/01/06	12/31/10	1	Kentuckiana Colon & Rectal Surgery
CABD-11	Elected by Board	√	Turner, Shannon	n/a		11/01/06	12/31/08	1	Executive VP, University Health Care
CABD-12	Director, Louisville Metro Dept. of Public Health and Wellness	√	Troutman, Ade	n/a		n/a	n/a	n/a	
CABD-13	Commissioner, KY Dept. for Public Health	√	Hacker, Bill	n/a		n/a	n/a	n/a	
CABD-14	Dean		Clover, Rick	DO		n/a	n/a	n/a	
CABD-15	Recording secretary		Kays, Kim	DO	Recording secretary	n/a	n/a	n/a	
	Total voting	13							
	Membership: 1. 11 Community members nominated by the Dean or the Board and elected by the Board 2. Commissioner of the Kentucky Department for Public Health 3. Director of the Louisville Metro Department for Public Health and Wellness 4. Dean (non-voting) 5. Recording secretary appointed by the Dean's Office				Terms: 1. Elected members: three years, staggered; maximum of 2 consecutive terms 2. Others: membership criterion				
Past Members									
	none								

COUNCIL OF CHAIRS AND DEANS

Council of Chairs and Deans							Last updated:		03/23/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
COUN-1	Dean	√	Clover, Rick	DO	Chair				
COUN-2	Chair, Bioinformatics and Biostatistics	√	Parrish, Rudy	BB		n/a	n/a	n/a	
COUN-3	Chair, Environmental and Occupational Health Sciences	√	Tollerud, David	EOHS		n/a	n/a	n/a	
COUN-4	Chair, Epidemiology and Population Health	√	Baumgartner, Rick	EPH		n/a	n/a	n/a	
COUN-5	Chair, Health Management and Systems Sciences	√	Esterhay, Bob	HMSS		n/a	n/a	n/a	
COUN-6	Chair, Health Promotion and Behavioral Sciences	√	Wilson, Richard	HPBS		n/a	n/a	n/a	
COUN-7	Assistant Dean for Finance and Administration	√	Walsh, Susi	DO		n/a	n/a	n/a	
COUN-8	Associate Dean for Public Health	√	McKinney, Paul	DO	Vice Chair	n/a	n/a	n/a	
COUN-9	Associate Dean for Health Information Sciences	√	Walton, Pete	DO		n/a	n/a	n/a	
COUN-17	Associate Dean for Student Affairs	√	Muldoon, Susan	EPH		n/a	n/a	n/a	
COUN-10	Dean's appointment, Executive Faculty	√	Ramos, Irma	EOHS		n/a	n/a	n/a	
COUN-11	Dean's appointment, Executive Faculty	√	Troutman, Adewale	HMSS		n/a	n/a	n/a	
COUN-12	Dean's appointment, non-Executive Faculty	√	[vacant]	n/a		n/a	n/a	n/a	
COUN-13	Dean's appointment, non-Executive Faculty	√	[vacant]	n/a		n/a	n/a	n/a	
COUN-14	Student representative elected by Student Association	√	Howard, Jennifer	n/a		07/01/06	06/30/07	n/a	
COUN-15	Student representative elected by Student Association	√	Hughes, Kimberly	n/a		07/01/06	06/30/07	n/a	
COUN-16	Recording secretary		Kays, Kim	DO	Recording secretary	n/a	n/a	n/a	
	Total voting	10							

COUNCIL OF CHAIRS AND DEANS

Council of Chairs and Deans							Last updated:		03/23/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
	Membership: 1. Dean (Chair) 2. All Department Chairs 3. All Vice, Associate, and Assistant Deans 4. Director of Adminstration 5. Two Executive Faculty appointed by Dean 6. Two non-Executive Facutly appointed by Dean 7. Two student representatives elected by Student Association 8. Recording Secretary appointed by the Dean's Office				Terms: 1. Dean's apointments: pleasure of the Dean 2. Student representatives: one year (July-June); no term limit 3. Others: membership criterion				
Past Members									
COUN-15	Student representative elected by Student Association	√	Fisher, Katie	n/a		11/01/05	06/30/06	n/a	
COUN-16	Student representative elected by Student Association	√	Xu, Ping	n/a		11/01/05	06/30/07	n/a	

DEAN'S EXECUTIVE COMMITTEE

Dean's Executive Committee							Last updated:		03/23/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
EXEC-1	Dean	√	Clover, Rick	DO	Chair	n/a	n/a	n/a	
EXEC-2	Chair, Bioinformatics and Biostatistics	√	Parrish, Rudy	BB		n/a	n/a	n/a	
EXEC-3	Chair, Environmental and Occupational Health Sciences	√	Tollerud, David	EOHS		n/a	n/a	n/a	
EXEC-4	Chair, Epidemiology and Population Health	√	Baumgartner, Rick	EPH		n/a	n/a	n/a	
EXEC-5	Chair, Health Management and Systems Sciences	√	Esterhay, Bob	HMSS		n/a	n/a	n/a	
EXEC-6	Chair, Health Promotion and Behavioral Sciences	√	Wilson, Richard	HPBS		n/a	n/a	n/a	
EXEC-7	Associate Dean for Public Health	√	McKinney, Paul	DO		n/a	n/a	n/a	
EXEC-8	Associate Dean for Health Information Sciences	√	Walton, Pete	DO		n/a	n/a	n/a	
EXEC-9	Associate Dean for Student Affairs	√	Muldoon, Susan	EPH		n/a	n/a	n/a	
EXEC-10	Assistant Dean for Finance and Administration	√	Walsh, Susi	DO		n/a	n/a	n/a	
EXEC-11	Recording secretary		Kays, Kim	DO	Recording secretary	n/a	n/a	n/a	
	Total voting	10							
	Membership: 1. Dean (Chair) 2. All Vice, Associate, and Assistant Deans 3. All Department Chairs 4. Recording secretary appointed by the Dean's Office				Terms: 1. Membership criterion				
Past Members									
EXEC-8	Chair, Epidemiology and Population Health	√	Hornung, Carl	EPH		n/a	n/a	n/a	

EXECUTIVE FACULTY

Elected Executive Faculty							Last updated:	03/22/07	
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
XFAC-1	Elected by Executive Faculty of Bioinformatics and Biostatistics	√	McCabe, Steve	BB	n/a	11/02/05	06/30/07	n/a	
XFAC-2	Elected by Executive Faculty of Environmental and Occupational Health Sciences	√	[vacant]	EOHS	n/a	n/a	n/a	n/a	
XFAC-3	Elected by Executive Faculty of Executive Faculty of Epidemiology and Population Health	√	Studts, Jamie	EPH	n/a	11/01/05	06/30/07	n/a	
XFAC-4	Elected by Executive Faculty of Health Management and Systems Sciences	√	[vacant]	HMSS	n/a	n/a	n/a	n/a	
XFAC-5	Elected by Executive Faculty of Health Promotion and Behavioral Sciences	√	[vacant]	HPBS	n/a	n/a	n/a	n/a	
	Total voting	1							
	Membership: 1. Each Department may elect one General Faculty to Executive Faculty plus one for every ten Executive Faculty in the Department				Terms: 1. Up to duration of current appointment; no term limits				
Past Elected Executive Faculty									
	none								

FACULTY FORUM

Faculty Forum							Last updated:		03/22/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
FACF-1	Dean	√	Clover, Rick	DO	Chair	n/a	n/a	n/a	
FACF-2	Elected by Bioinformatics and Biostatistics	√	Goldsmith, Jane	BB		11/01/05	06/30/07	1	Short initial term.
FACF-3	Elected by Council of Chairs and	√	Walton, Pete	DO	Secretary	n/a	n/a	n/a	
FACF-4	Elected by Environmental and Occupational Health Sciences	√	Jacobs, Bob	EOHS		11/01/05	06/30/09	1	Short initial term. Re-elected 07/01/06
FACF-5	Elected by Epidemiology and Population Health	√	Baumgartner, Kathy	EPH		11/01/05	06/30/09	1	Short initial term. Re-elected 07/01/06
FACF-6	Elected by Health Management and Systems Sciences	√	Steiner, Rob	HMSS		11/01/05	06/30/07	1	Short initial term.
FACF-7	Elected by Health Promotion and Behavioral Sciences	√	Harris, Muriel	HPBS	Vice Chair	11/01/05	06/30/09	1	Short initial term. Re-elected 07/01/06
FACF-8	Faculty Senate Liaison elected by Faculty Senators		Austin, Ray	HMSS		09/15/06	09/15/07	n/a	
FACF-9	Student representative elected by Student Association	√	Barnes, Christopher	n/a		07/01/05	06/30/07	n/a	
FACF-10	Student representative elected by Student Association		Koller, James	n/a		07/01/05	06/30/07	n/a	
FACF-11	Recording secretary		Kays, Kim	DO	Recording secretary	n/a	n/a	n/a	
	Total voting	7							
	Note: One consensus vote between two student representatives; if no consensus, senior student's vote prevails.								
	Membership: 1. Dean (Chair) 2. Representative(s) elected by and from each Department, with number determined by formula; must be Executive Faculty and not voting member of Council 3. Two student representatives elected by Student Association 4. Representative elected by and from Council of Chairs and Deans 5. Faculty Senate representative (non-voting) elected by the Faculty Senators 6. Recording Secretary appointed by the Dean's Office				Terms: 1. Department representatives: three years, staggered; maximum of two consecutive terms 2. Student representatives: one year (July-June); no term limit 3. Faculty Senate Liaison: one year; no term limit 3. Others: membership criterion				
Past Members									
FACF-6	Faculty Senate Liaison		Thompson, Caryn	BB		09/15/06	09/15/07	n/a	Left University 12/31/06.
FACF-6	Faculty Senate Liaison		Hornung, Carl	EPH		09/15/03	09/15/06	n/a	Reappointed

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Appendix II-3
URLs for Written University Policies for Fair and Ethical Dealings

Appendix II-3: URLs for Written University Policies for Fair and Ethical Dealings

Human Resources Policies and Procedures
http://www.louisville.edu/admin/humanr/policies/index.htm

Including policies and procedures related to:
PER 1.01 EEO/Affirmative Action, http://louisville.edu/admin/humanr/policies/aapolicies.htm
PER 1.02 Sexual Harassment, http://louisville.edu/admin/humanr/policies/sexual.htm
PER 1.03 Conflict of Interest, http://louisville.edu/admin/humanr/policies/conflict.htm
PER 1.04 Intellectual Property Policy, http://louisville.edu/admin/humanr/policies/property.htm
PER 1.10 Discriminatory Harassment, http://louisville.edu/admin/humanr/policies/disharass.htm
PER 1.15 Drug-Free Workplace, http://louisville.edu/admin/humanr/policies/drugfree.htm
PER 1.16 Ethical Considerations, http://louisville.edu/admin/humanr/policies/ethical.htm
PER 2.01 Recruitment and Selection - Professional/Administrative and Classified Staff, http://louisville.edu/admin/humanr/policies/recruitment.htm
PER 2.04 Employment Applications, http://louisville.edu/admin/humanr/policies/applications.htm
PER 2.05 Promotions, http://louisville.edu/admin/humanr/policies/promotions.htm
PER 2.06 Transfers, http://louisville.edu/admin/humanr/policies/transfers.htm
PER 2.07 Demotions, http://louisville.edu/admin/humanr/policies/demotions.htm
PER 2.13 Performance Appraisals, http://louisville.edu/admin/humanr/policies/performance.htm
PER 5.02 Unlawful Discrimination, http://louisville.edu/admin/humanr/policies/unlawful.htm
PER 5.03 Grievances, http://louisville.edu/admin/humanr/policies/grievences.htm
PER 5.04 Appeals, http://louisville.edu/admin/humanr/policies/appeals.htm

Purchasing Policies and Procedures
http://louisville.edu/purchasing/policies

Including policies and procedures related to:
Violation of Purchasing Policy and Unauthorized Acts, http://louisville.edu/purchasing/policies/purchasing-3.00.html
Ethics in Purchasing, http://louisville.edu/purchasing/policies/purchasing-4.00.html
Small, Minority and Women-Owned Business, http://louisville.edu/purchasing/policies/purchasing-5.00.html
Purchase by Competitive Sealed Bidding, http://louisville.edu/purchasing/policies/purchasing-6.00.html
Purchase by Competitive Negotiation, http://louisville.edu/purchasing/policies/purchasing-7.00.html

Student Handbook
http://campuslife.louisville.edu/policies/studenthandbook

Including links for:
Academic Grievance Procedure, http://campuslife.louisville.edu/policies/studenthandbook/pages/academicgrievance.html
ADA Policy, http://campuslife.louisville.edu/policies/studenthandbook/pages/ada.html
Affirmative Action/Employee Relations, http://campuslife.louisville.edu/policies/studenthandbook/pages/aaer.html
Code of Student Rights and Responsibilities, http://campuslife.louisville.edu/policies/studenthandbook/pages/studentrights.html
Disability Resource Center, http://campuslife.louisville.edu/policies/studenthandbook/pages/disability.html
Guidelines for Respect for Intellectual Property Rights, http://campuslife.louisville.edu/policies/studenthandbook/pages/intellectualproperty.html
Hazing and Initiation Activities Policy, http://campuslife.louisville.edu/policies/studenthandbook/pages/hazing.htm
Multicultural Center, http://campuslife.louisville.edu/policies/studenthandbook/pages/multicultural.html
Office of Minority Affairs, http://campuslife.louisville.edu/policies/studenthandbook/pages/oma.html
Sexual Harassment Policy,
Veterans' Benefits, http://campuslife.louisville.edu/policies/studenthandbook/pages/registrar.html#veteran

Code of Student Conduct

http://campuslife.louisville.edu/policies/studentconduct.html

Campus Resources
http://www.louisville.edu/student/vpsa/campusresources.htm

Including links for:
Multicultural Academic Enrichment Programs (formerly the Office of Minority Affairs),
http://www.louisville.edu/provost/diversity/multicultural/
Disability Resource Center, http://www.louisville.edu/student/dev/drc/
Vice Provost for Diversity and Equal Opportunity, http://louisville.edu/provost/diversity/viceprovost.html
Bias, Hate and Intolerance Hotline, http://louisville.edu/admin/dps/hate_line.htm
Multi-Ethnic and Cross Cultural Programs, http://www.louisville.edu/provost/diversity/mc2/
Affirmative Action,
http://louisville.edu/admin/humanr/current_employee/affirmative_action/affirmative_home.htm
Campus Life Office, http://campuslife.louisville.edu/
Women's Center, http://www.louisville.edu/provost/womenctr/

Diversity Resources
http://www.louisville.edu/provost/diversity/

Including links for:
Arts & Sciences Diversity, http://www.louisville.edu/provost/diversity/A&S_diversity/
Black Faculty & Staff Association, http://louisville.edu/org/bfsa/
Office of Lesbian Gay Bisexual and Transgender Services,
http://louisville.edu/provost/diversity/LGBT_services.html
Commission on Diversity and Racial Equality, http://www.louisville.edu/diversity/
Commission on the Status of Women http://www.louisville.edu/president/cosw/
commonGround http://www.louisville.edu/rso/commonground/
Interfaith Center http://www.louisville.edu/interfaith/
International Center http://louisville.edu/provost/intcent/
Pan African Studies Department http://www.louisville.edu/a-s/pas/index.html
Upward Bound Program http://www.louisville.edu/provost/upwardbound/

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Appendix III-1
Professional Practice Plan, SPHIS

RECOMMENDATION TO THE BOARD OF TRUSTEES CONCERNING THE PROFESSIONAL PRACTICE PLAN FOR THE SCHOOL OF PUBLIC HEALTH AND INFORMATION SCIENCES

Board of Trustees—April 10, 2003

RECOMMENDATION:

The President recommends:

That the Board of Trustees approve the Professional Practice Plan of the School of Public Health and Information Sciences (Exhibit A), and

That the Board of Trustees require the School to submit this Plan (or its revision) for the approval of its faculty when twenty-five full-time faculty members, in addition to the dean, hold appointments in the School.

BACKGROUND:

The School of Public Health and Information Sciences anticipates frequent occasions for its faculty to consult with external agencies and to partner with other public or private institutions in research and service activities related to their professional expertise and practice. The Dean and faculty of the School have therefore proposed this Professional Practice Plan to regulate those engagements in order to maintain the overall excellence of the School's endeavors in the fulfillment of academic responsibilities.

The School has not yet reached the number of full-time faculty required for national accreditation. When that number has been reached, a review of the Professional Practice Plan will ratify its terms. Should any material change in the Plan be required, the revised and faculty-approved Plan will be submitted to the Board of Trustees again.

The Provost joins the President in making this recommendation.

Committee Action:
Passed:_____
Did Not Pass: ____
Other: _____
Date: _____

_____
Assistant Secretary

Board Action:
Passed: _____
Did Not Pass:_____
Other: _____
Date: _____

_____
Assistant Secretary

Exhibit A

University of Louisville
School of Public Health and Information Sciences
Professional Practice Plan

Preamble

A Professional Practice Plan is essential to the School of Public Health and Information Sciences in order to maintain a faculty of excellence in teaching, research, and service, and to provide appropriate control of faculty professional time in order to ensure fulfillment of academic responsibilities.

The objectives of the Professional Practice Plan are to:

a. Define the role and scope of professional practice activities of the faculty.
b. Strengthen relationships between the faculty and the public health community.
c. Provide the faculty remuneration commensurate with their academic and professional qualifications and activities.
d. Encourage an appropriate degree of faculty involvement in public health service.
e. Provide additional financial support for the School of Public Health and Information Sciences.

For those faculty contributing financial support to the School of Public Health and Information Sciences under this Plan, the obligations under this Plan supersede and are in lieu of the obligations of faculty under Section 4.3.3. of the Red book (limiting outside employment to an average of one [1] day per week).

Section I
Scope of Professional Practice Activities

Although this Professional Practice Plan relates to the professional earnings of faculty members, it is recognized by the faculty members of the School of Public Health and Information Sciences that their first and foremost duty is teaching, research, and service on a full-time basis. All services rendered under this Plan are considered to be a part of and necessarily limited by said primary goal.

Section II
Faculty Participation

All faculty members of the School of Public Health and Information Sciences, as defined in Section III of this Plan, are required to participate in the Professional Practice Plan as a condition of the their appointment and employment with the University of Louisville. It is essential for the implementation of this Plan that there be no exceptions. Adoption of the Plan by the Board of Trustees shall be determinative of the rights of the parties relative to the Plan.

It is recognized that faculty members of the School of Public Health and Information Sciences shall not be discriminated against in the allocation of overall University salary increases on account of their having Professional Practice Income.

Section III
Definition of Terms

(A) For the purposes of this Plan, a Faculty Member is an individual who has a primary or joint faculty appointment in the School of Public Health and Information Sciences and who, by contract, custom, or understanding, as indicated by usual University employment records, is employed at 0.80 FTE or greater effort by the University of Louisville. Not included are voluntary faculty or paid part-time faculty of the School of Public Health and Information Sciences whose paid work effort is less than 0.80 FTE.

(B) A Faculty Member's University Salary is defined as the base plus the supplemental salary paid annually to the Faculty Member by the University, regardless of the source of funds utilized to pay such salary. University Salary excludes any X-pay component.

(C) Professional Practice Income is defined as income from inside or outside the University that is generated by a Faculty Member from professional activities, including, but not limited to, public health service, legal or expert-witness services, honoraria, and consultation services.

Excluded from Professional Practice Income are: prizes, royalties, and patent rights; funds generated from research and training grants; funds from service contracts that are used for the base pay of a faculty; and professional revenue that is included under the School of Medicine's, School of Dentistry's or other University-approved practice plans.

Section IV
Professional Practice Plan Policies

(A) Each Faculty Member shall be required to participate in this Plan.

(B) Each Faculty Member shall be employed by the University and shall receive a University Salary.

(C) All Professional Practice Income in this Plan shall be generated under the University's Research Foundation tax identification and is to be deposited in the School of Public Health and Information Sciences' account.

(D) Distribution of Professional Practice Income generated by a Faculty Member shall be as follows:

(1) Distribution for Dean's Office: 5%.

(2) Distribution for Faculty Member's Department: 25%.

(3) Distribution for Faculty Member: An amount equal to the lesser of the remaining amount or 20% of the Faculty Member's University Salary shall be distributed in one of the three following manners, the choice of which manner being at the discretion of the Dean and the Chair: (a) as X-pay to the Faculty Member, (b) to a University account for the Faculty Member and to which the Faculty Member can apply expenses that are allowed under University rules, or (c) a combination of (a) and (b). Distribution shall be made quarterly (January, April,

July, and October), calculated on a fiscal year-to-date basis and prorated for the number of months of employment by the University and participation within this Plan during the previous fiscal year-to-date period. The distribution for a quarter shall be done the month following the quarter and shall be determined from the Professional Practice Income that has been generated by the Faculty Member and deposited to the University during the fiscal year-to-date period ending with the quarter, capped by a fiscal year-to-date proration of the 20% maximum, less distributions made in prior quarters of the fiscal year-to-date. Determinations of quarterly distributions are illustrated by the following example, which assumes employment and Plan participation during the full fiscal year (July 1 through June 30):

October distribution: July-September deposits to a maximum of 5% of University Salary.

January distribution: July-December deposits to a maximum of 10% of University Salary less October distribution.

April Distribution: July-March deposits to a maximum of 15% of University Salary less October and January distributions.

July Distribution: July-June deposits (total fiscal year deposits) to a maximum of 20% of University Salary less October, January, and April distributions.

If the Faculty Member's employment and Plan participation start during the fiscal year, the quarterly distributions will be calculated in a similar manner, but the maximum will be prorated based on the period of employment.

(4) Distribution of any remaining income shall be to the Faculty Member's Department and shall be used at the discretion of the Chair of the Department. Not withstanding any other provision of this Plan, the Chair and the Faculty Member shall negotiate distribution of any income that is in excess of 50% of the Faculty Member's University Salary on a case-by-case basis. Such additional distribution shall require approval of the Dean. Any additional amount to be distributed for the Faculty Member shall be done in a manner described in (3), above, the choice of which manner shall be at the discretion of the Dean and the Chair.

(E) Upon request of the Dean and to assure compliance with this Plan, a Faculty Member shall provide copies of his or her Federal Income Tax return and supporting documents for any of the preceding five years, provided the Faculty Member participated in this Plan during the requested year or years.

Section V
Modification of the Plan

As a consequence of its statutory authority, the Board of Trustees of the University of Louisville on their own initiative may modify or rescind this Plan. Before any modification is made in the Plan, the administration shall consult with the Faculty of the School of Public Health and Information Sciences. No modification or rescission shall take place for at least twelve months after its adoption, unless a shorter time is acceptable to 75% of the Faculty Members.

Approved by the Faculty: 01-09-03 (Version 9)
Approved by the Board of Trustees: 04-10-03

University of Louisville School of Public Health and Information Sciences
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Appendix III-2
Membership and Terms of Standing and Ad Hoc Committees Listed in Section III.2

ACCREDITATION STEERING COMMITTEE

Accreditation Steering Committee							Last updated:		03/26/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
ASCO-1	Associate Dean for Public Health	√	McKinney, Paul	DO	Chair	n/a	n/a	n/a	
ASCO-2	Chair, Bioinformatics and Biostatistics	√	Parrish, Rudy	BB		n/a	n/a	n/a	
ASCO-3	Chair, Environmental and Occupational Health Sciences	√	Tollerud, David	EOHS		n/a	n/a	n/a	
ASCO-4	Chair, Epidemiology and Population Health	√	Baumgartner, Rick	EPH		n/a	n/a	n/a	
ASCO-5	Chair, Health Management and Systems Sciences	√	Esterhay, Bob	HMSS		n/a	n/a	n/a	
ASCO-6	Chair, Health Promotion and Behavioral Sciences	√	Wilson, Richard	HPBS		n/a	n/a	n/a	
ASCO-7	Director, MPH Program	√	Jacobs, Bob	EOHS		n/a	n/a	n/a	
ASCO-8	Program Coordinator, MPH Program	√	Peters, LaTonia	DO		n/a	n/a	n/a	
ASCO-9	Chair, Diversity Committee	√	Harris, Muriel	HPBS		n/a	n/a	n/a	
ASCO-10	Chair, Curriculum Committee	√	Walton, Pete	DO		n/a	n/a	n/a	
ASCO-11	Chair, Service Committee	√	Esterhay, Bob	HMSS		n/a	n/a	n/a	
ASCO-12	Associate Dean for Student Affairs	√	Muldoon, Susan	EPH		n/a	n/a	n/a	
ASCO-13	Assistant Dean for Finance and Administration	√	Walsh, Susi	DO		n/a	n/a	n/a	
ASCO-14	Manager, Student Services	√	Thomas, Tammi	DO		n/a	n/a	n/a	
ASCO-16	Organizatio0n Team Leader	√	Morse, John	HMSS		n/a	n/a	n/a	
ASCO-15	Recording Secretary		Nunn, Eric	DO		n/a	n/a	n/a	
	Total voting	15							
	Membership: 1. Associate Dean for Public Health (Chair) 2. Chair of each Department 3. MPH Program: a. Director b. Program Coordinator 4. Chair of Diversity Committee 5. Chair of Curriculum Committee 6. Chair of Service Committee 7. Associate Dean for Student Affairs 8. Assistant Dean for Finance and Administration 9. Manager of Student Services 10. Recording secretary appointed by the Dean's Office				Terms: 1. Membership criterion				
Past Members									
	none								

ADMISSIONS COMMITTEE

Admissions Committee							Last updated:		03/23/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
ADMS-1	Selected by Bioinformatics and Biostatistics	√	Brock, Guy	BB		09/01/05	08/31/07	1	
ADMS-2	Selected by Environmental and Occupational Health Sciences	√	Ramos, Irma	EOHS		09/01/04	08/31/08	2	
ADMS-3	Selected by Epidemiology and Population Health	√	Groves, Frank	EPH		09/01/06	08/31/08	1	
ADMS-4	Selected by Health Management and Systems Sciences	√	Austin, Ray	HMSS	Co-Chair	09/01/04	08/31/08	2	
ADMS-5	Selected by Health Promotion and Behavioral Sciences	√	LaJoie, Scott	HPBS	Chair	09/01/04	08/31/07	1	Short first term.
ADMS-6	Director, MPH Program	√	Jacobs, Bob	EOHS		n/a	n/a	n/a	
ADMS-7	Director, CREST Program	√	Muldoon, Susan	EPH		n/a	n/a	n/a	
ADMS-8	Appointed by Dean	√	[vacant]	n/a		n/a	n/a	n/a	
ADMS-9	Appointed by Dean	√	[vacant]	n/a		n/a	n/a	n/a	
ADMS-10	Program Coordinator, MPH Program	√	Peters, LaTonia	DO		n/a	n/a	n/a	
ADMS-11	Program Coordinator, CREST Program	√	Thomas, Tammi	DO		n/a	n/a	n/a	
ADMS-12	Manager, Student Services	√	Thomas, Tammi	DO		n/a	n/a	n/a	
ADMS-13	Recording Secretary		Eberle, Becky	DO		n/a	n/a	n/a	
	Total voting	12							
	Membership: 1. One faculty representative elected or appointed from and by each Department 2. Director of MPH Program 3. Director of CREST Program 4. Up to two faculty representatives appointed by the Dean 5. Program coordinator for each School-based program 6. Manager of Student Services 7. Recording secretary appointed by the Dean's Office				Terms: 1. Department representatives: two years, staggered; maximum of two consecutive terms 2. Others: membership criterion				
Past Members									
ADMS-1	Selected by Bioinformatics and Biostatistics	√	Rising, Bill	BB	Chair	09/01/04	08/31/05	1	
ADMS-3	Selected by Epidemiology and Population Health	√	Muldoon, Susan	EPH	Chair	09/01/04	08/31/06	1	

COMMITTEE ON PERFORMANCE AND ECONOMIC WELFARE

Committee on Performance Criteria and Economic Welfare							Last updated:	03/23/07	
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
PCEW-1	Elected by Executive Faculty	√	Baumgartner, Kathy	EPH		07/01/06	06/30/09	1	
PCEW-2	Elected by Executive Faculty	√	Datta, Susmita	BB		07/01/05	06/2008	1	
PCEW-3	Appointed by Dean	√	McKinney, Paul	DO		07/01/05	06/30/07	1	Short initial term.
PCEW-4	Recording secretary		Kays, Kim	DO	Recording secretary	n/a	n/a	n/a	
	Total voting	3							
	Membership: 1. Two representatives elected by and from the Executive Faculty a. At most one representative from any one Department b. No representative also be on PATC or RPCC or voting member of Council c. Tenured (any rank) 2. One representative from the Executive Faculty appointed by the Dean a. Tenured (any rank) 3. Recording secretary appointed by the Dean's Office				Terms: 1. Elected and appointed representatives: three years, staggered; maximum of two consecutive terms 2. Others: membership criterion				
Past Members									
PCEW-1	Elected by Executive Faculty	√	Hornung, Carl	EPH		07/01/03	06/30/06	1	

CURRICULUM COMMITTEE

Curriculum Committee							Last updated:		03/22/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
CURR-1	Associate Dean for academic affairs	√	Walton, Pete	DO	Chair	n/a	n/a	n/a	
CURR-2	Chair or Curriculum Committee Chair, Bioinformatics and Biostatistics	√	Parrish, Rudy	BB		n/a	n/a	n/a	
CURR-3	Program Coordiinator or Administrative Assistant, Bioinformatics and Biostatistics		Cummins, Rachel	BB		n/a	n/a	n/a	
CURR-4	Chair or Curriculum Committee Chair, Environmental and Occupational Health Sciences	√	Tollerud, David	EOHS	Vice Chair	n/a	n/a	n/a	
CURR-5	Program Coordiinator or Administrative Assistant, Environmental and Occupational Health Sciences		Parker, Barbara	EOHS		n/a	n/a	n/a	
CURR-6	Epidemiology and Population Health, Chair or Curriculum Committee Chair	√	Baumgartner, Rick	EPH		n/a	n/a	n/a	
CURR-7	Program Coordiinator or Administrative Assistant, Epidemiology and Population Health		Bossmeyer, Paula	EPH		n/a	n/a	n/a	
CURR-8	Chair or Curriculum Committee Chair, Health Management and Systems Sciences	√	Esterhay, Bob	HMSS		n/a	n/a	n/a	
CURR-9	Program Coordiinator or Administrative Assistant, Health Management and Systems Sciences		Gabbard, Laura	HMSS		n/a	n/a	n/a	
CURR-10	Chair or Curriculum Committee Chair, Health Promotion and Behavioral Sciences	√	Wilson, Richard	HPBS		n/a	n/a	n/a	
CURR-11	Program Coordiinator or Administrative Assistant, Health Promotion and Behavioral Sciences		Sacksteder, Kathie	HPBS		n/a	n/a	n/a	
CURR-12	Director, MPH Program	√	Jacobs, Bob	EOHS		n/a	n/a	n/a	
CURR-13	Program Coordiinator or Administrative Assistant, MPH Program		Peters, LaTonia	DO		n/a	n/a	n/a	
CURR-14	Director, CREST Program	√	Muldoon, Susan	EPH		n/a	n/a	n/a	
CURR-15	Program Coordiinator or Administrative Assistant, CREST Program		Thomas, Tammi	DO		n/a	n/a	n/a	
CURR-16	Appointed by Dean	√	Troutman, Adewale	HMSS		n/a	n/a	n/a	
CURR-17	Appointed by Dean	√	[vacant]	n/a		n/a	n/a	n/a	
CURR-18	Manager, Student Services		Thomas, Tammi	DO		n/a	n/a	n/a	

CURRICULUM COMMITTEE

Curriculum Committee							Last updated:		03/22/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
CURR-19	Recording Secretary		Parker, Barbara	EOHS	Recording Secretary	n/a	n/a	n/a	
	Total voting	10							
	Membership: 1. Associate Dean responsible for curriculum (Chair) 2. Each Department a. Chair of Department or Chair of Department's curriculum committee b. Program coordinator, administrative assistant, or other staff person (non-voting) 3. Each School-based program: a. Program director b. Program coordinator, administrative assistant, or other staff person (non-voting) 4. Two representatives from Executive Faculty appointed by the Dean 5. Manager of Student Services 6. Recording Secretary appointed by the Dean's Office				Terms: 1. Dean's appointments: pleasure of the Dean; no term limit 2. Others: membership criterion				
Past Members									
CURR-10	Epidemiology and Population Health, Chair or Curriculum Committee Chair	√	Hornung, Carl	EPH		n/a	n/a	n/a	
CURR-4	CREST Program, Director	√	Hornung, Carl	EPH		n/a	n/a	n/a	

DIVERSITY COMMITTEE

Diversity Committee							Last updated:		03/22/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
DVRS-1	Diversity Officer	√	Harris, Muriel	HPBS	Chair	n/a	n/a	n/a	
DVRS-2	Selected by Bioinformatics and Biostatistics	√	Yoo, Peter	BB		n/a	n/a	n/a	
DVRS-3	Selected by Environmental and Occupational Health Sciences		Ramos, Irma	EOHS		n/a	n/a	n/a	
DVRS-4	Selected by Epidemiology and Population Health	√	Harris-Hicks, Paula	EPH		n/a	n/a	n/a	
DVRS-5	Selected by Health Management and Systems Sciences		Wainscott, Barry	HMSS		n/a	n/a	n/a	
DVRS-6	Selected by Health Promotion and Behavioral Sciences	√	Harris, Muriel	HPBS		n/a	n/a	n/a	
DVRS-7	Selected by MPH Program	√	Peters, LaTonia	DO		n/a	n/a	n/a	
DVRS-8	Selected by CREST Program	√	[vacant]	n/a		n/a	n/a	n/a	
DVRS-9	Selected by Center for Health Hazards Preparedness	√	[vacant]	n/a		n/a	n/a	n/a	
DVRS-10	Appointed by Dean	√	McKinney, Paul	DO		n/a	n/a	n/a	
DVRS-11	Appointed by Dean	√	Troutman, Adewale	HMSS		n/a	n/a	n/a	
DVRS-12	Appointed by Dean	√	[vacant]	n/a		n/a	n/a	n/a	
DVRS-13	Appointed by Dean	√	[vacant]	n/a		n/a	n/a	n/a	
DVRS-14	Student representative selected by Student Association	√	Perez, Angelique	n/a		07/01/06	06/30/07	n/a	
DVRS-15	Student representative selected by Student Association	√	[vacant]	n/a		09/01/06	06/30/07	n/a	
DVRS-16	Recording Secretary		Lewis, Vicki	DO		n/a	n/a	n/a	
	Total voting	13							
	Membership: 1. Diversity Officer (Chair) 2. One representative (faculty or staff) elected or appointed from and by each Department, each School-based program, and the Center 3. Up to four representatives (faculty or staff) appointed by the Dean 4. Up to two student representatives elected or appointed by the School's Student Association 5. Recording Secretary appointed by the Dean's Office (non-voting)				Terms: 1. Student representatives: one year; no term limit 2. Others: indefinite terms				
Past Members									
	none								

FACULTY SENATORS

Faculty Senators							Last updated:		03/22/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
FSEN-1	Elected by Executive Faculty	n/a	Goldsmith, Jane	BB	n/a	09/01/06	09/01/09	n/a	
FSEN-2	Elected by Executive Faculty	n/a	Austin, Ray	HMSS	n/a	09/01/06	09/01/09	n/a	Assumed position 03/20/07.
	Total voting	n/a							
	Membership: 1. Two representatives elected by and from the Executive Faculty				Terms: 1. Three years; no term limits				
Past Faculty Senators									
FSEN-1	Elected by Executive Faculty	n/a	Hornung, Carl	EPH	n/a	07/01/03	06/30/06	n/a	
FSEN-2	Elected by Executive Faculty	n/a	Jacobs, Bob	EOHS	n/a	11/01/05	07/01/06	n/a	
FSEN-2	Elected by Executive Faculty	n/a	Thompson, Caryn	BB	n/a	09/01/06	09/01/09	n/a	Left University 12/31/06.

PROMOTION, APPOINTMENT, AND TENURE COMMITTEE

Promotion, Appointment, and Tenure Committee							Last updated:	03/23/07	
Control #	Membership Criterion	Voting	Person	Dept	Position	Term Start	Term End	Term #	Notes
PATC-1	Elected by Executive Faculty	√	Datta, Somnath	BB		11/01/05	06/30/08	1	
PATC-2	Elected by Executive Faculty	√	Hornung, Carl	EPH		07/01/06	06/30/09	1	
PATC-3	Elected by Executive Faculty	√	Jacobs, Bob	EOHS		11/01/05	06/30/07	1	Short initial term.
PATC-4	Elected by Executive Faculty	√	Steiner, Rob	HMSS		11/01/05	06/30/08	1	
PATC-5	Appointed by Dean	√	Parrish, Rudy	BB		07/01/04	06/30/09	1	Short initial term. Reappointed 07/01/06.
PATC-6	Appointed by Dean	√	Tollerud, David	EOHS		07/02/04	06/30/07	1	
PATC-7	Recording secretary		Kays, Kim	DO	Recording secretary	n/a	n/a	n/a	
	Total voting	6							
	Membership: 1. Four representatives elected by and from the Executive Faculty a. At most one representative from any one Department b. No representative also be on RPCC or CPCEW or voting member of Council c. Rank of Professor (tenured or term) 2. Two representatives from the Executive Faculty appointed by the Dean a. Rank of Professor (tenured or term) 3. Recording Secretary appointed by the Dean's Office				Terms: 1. Elected and appointed representatives: three years, staggered; maximum of two consecutive terms 2. Others: membership criterion				
Past Members									
PATC-2	Elected by Executive Faculty	√	Baumgartner, Rick	EPH		11/01/05	06/30/06	1	Resigned when appointed Chair.

RESEARCH COMMITTEE

Research Committee							Last updated:		03/26/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
RSCH-1	Associate Dean for Public Health	√	McKinney, Paul	DO	Chair	n/a	n/a	n/a	
RSCH-2	Chair, Bioinformatics and Biostatistics	√	Parrish, Rudy	BB		n/a	n/a	n/a	
RSCH-3	Chair, Environmental and Occupational Health Sciences	√	Tollerud, David	EOHS		n/a	n/a	n/a	
RSCH-4	Chair, Epidemiology and Population Health	√	Baumgartner, Rick	EPH		n/a	n/a	n/a	
RSCH-5	Chair, Health Management and Systems Sciences	√	Esterhay, Bob	HMSS		n/a	n/a	n/a	
RSCH-6	Chair, Health Promotion and Behavioral Sciences	√	Wilson, Richard	HPBS		n/a	n/a	n/a	
RSCH-7	Associate Dean for Health Information Sciences	√	Walton, Pete	DO		n/a	n/a	n/a	
RSCH-9	Assistant Dean for Finance and Administration	√	Walsh, Susi	DO		n/a	n/a	n/a	
RSCH-8	Recording Secretary		Nunn, Eric	DO		n/a	n/a	n/a	
	Total voting	8							
	Membership: 1. Associate Dean for Public Health (Chair) 2. Chair of each Department 3. Associate Dean for Health Information Sciences 4. Recording secretary appointed by the Dean's Office				Terms: 1. Membership criterion				
Past Members									
RSCH-4	Epidemiology and Population Health, Chair	√	Hornung, Carl	EPH		n/a	n/a	n/a	

RULES, POLICIES, AND CREDENTIALS COMMITTEE

Rules, Policies, and Credentials Committee							Last updated:		03/23/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
RPCC-1	Elected by Executive Faculty	√	Carrico, Ruth	HPBS	Chair	11/01/05	06/30/07	1	Short initial term.
RPCC-2	Elected by Executive Faculty	√	Wainscott, Barry	HMSS		07/01/06	06/30/09	1	
RPCC-3	Appointed by Dean	√	Esterhay, Bob	HMSS		11/01/05	06/30/07	1	Short initial term.
RPCC-4	Secretary of Faculty Forum		Walton, Pete	DO		n/a	n/a	n/a	
RPCC-5	Recording secretary		Kays, Kim	DO	Recording secretary	n/a	n/a	n/a	
	Total voting	3							
	Membership: 1. Two representatives elected by and from the Executive Faculty a. At most one representative from any one Department b. No representative also be on PATC or CPCEW or voting member of Council 2. One representative from the Executive Faculty appointed by the Dean 3. Secretary of Faculty Forum (non-voting) 4. Recording Secretary appointed by the Dean's Office				Terms: 1. Elected and appointed representatives: three years, staggered; maximum of two consecutive terms 2. Others: membership criterion				
Past Members									
RPCC-2	Elected by Executive Faculty	√	Muldoon, Susan	EPH		07/01/03	06/30/06	1	

SERVICE COMMITTEE

Service Committee							Last updated:		03/22/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
SERV-1	Selected by Bioinformatics and Biostatistics	√	Kong, Maiying	BB		12/11/06	06/30/09	1	
SERV-2	Selected by Environmental and Occupational Health Sciences	√	Ramos, Irma	EOHS		12/11/06	06/30/07	1	Short first term.
SERV-3	Selected by Epidemiology and Population Health	√	Groves, Frank	EPH		12/11/06	06/30/09	1	
SERV-4	Selected by Health Management and Systems Sciences	√	Wainscott, Barry	HMSS		12/11/06	06/30/08	1	
SERV-5	Selected by Health Promotion and Behavioral Sciences	√	LaJoie, Scott	HPBS		12/11/06	06/30/07	1	Short first term.
SERV-6	Selected by Center for Health Hazards Preparedness	√	Schreck, Melissa	CHHP		12/11/06	06/30/08	1	
SERV-7	Appointed by Dean	√	Lewis, Vicki	DO		12/11/06	06/30/09	1	
SERV-8	Appointed by Dean	√	Muldoon, Susan	EPH		12/11/06	06/30/08	1	
SERV-9	Appointed by Dean	√	Gabbard, Laura	HMSS		12/11/06	06/30/07	1	Short first term.
SERV-10	Appointed by Dean	√	Esterhay, Bob	HMSS	Chair	12/11/06	06/30/07	1	Short first term.
SERV-11	Student representative selected from first-year MPH class by KPHA Student Chapter	√	[vacant]	n/a		12/11/06	06/30/07	n/a	
SERV-12	Student representative selected from second-year MPH class by KPHA Student Chapter	√	Fisher, Katie	n/a		12/11/06	06/30/07	n/a	
SERV-13	Student representative selected from non-MPH students by Student Association	√	[vacant]	n/a		12/11/06	06/30/07	n/a	
SERV-14	Director, Community and Professional Service		Carrico, Ruth	HPBS		n/a	n/a	n/a	
SERV-15	Recording Secretary		Schreck, Melissa	CHHP		n/a	n/a	n/a	
	Total voting	13							
	Membership: 1. One representative (faculty or staff) elected or appointed from and by each Department and the Center 2. Four representatives (faculty or staff) appointed by the Dean 3. Two MPH student representatives, one first year and one second year, elected or appointed by the School's student chapter of the KPHA 4. One non-MPH stduent representative elected or appointed by the School's Student Association 5. Director of Community and Professional Service (non-voting) 6. Recording Secretary appointed by the Dean's Office (non-voting)				Terms: 1. Elected and appointed representatives: three years, staggered; maximum of two consecutive terms 2. Student representatives: one year; no term limit 2. Others: membership criterion				

SERVICE COMMITTEE

Service Committee							Last updated:		03/22/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
Past Members									
	none								

STUDENT AFFAIRS ADVISORY GROUP

Student Affairs Advisory Group							Last updated:		03/23/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
SAAG-1	Associate Dean for student affairs	√	Muldoon, Susan	EPH	Chair	n/a	n/a	n/a	
SAAG-2	Selected by Bioinformatics and Biostatistics	√	Cummins, Rachel	BB		03/07/07	06/30/09	1	
SAAG-3	Selected by Environmental and Occupational Health Sciences	√	Ramos, Irma	EOHS		03/07/07	06/30/08	1	Short first term. To be replaced with Hammond, Davyda when latter arrives.
SAAG-4	Selected by Epidemiology and Population Health	√	Wang, Chenxi	EPH		03/07/07	06/30/09	1	
SAAG-5	Selected by Health Management and Systems Sciences	√	Austin, Ray	HMSS		03/07/07	06/30/09	1	
SAAG-6	Selected by Health Promotion and Behavioral Sciences	√	Sacksteder, Kathie	HPBS		03/07/07	06/30/10	1	
SAAG-7	Selected by MPH Program	√	Peters, LaTonia	DO		03/07/07	06/30/10	1	
SAAG-8	Selected by CREST Program	√	Goldsmith, Jane	BB		03/07/07	06/30/08	1	Short first term.
SAAG-9	Appointed by Dean	√	[vacant]	n/a		03/07/07	06/30/08	1	Short first term.
SAAG-10	Appointed by Dean	√	[vacant]	n/a		03/07/07	06/30/10	1	
SAAG-11	Student representative selected from MPH students by Student Association	√	[vacant]	n/a		03/07/07	06/30/07	n/a	
SAAG-12	Student representative selected from MPH students by Student Association	√	[vacant]	n/a		03/07/07	06/30/07	n/a	
SAAG-13	Student representative selected from non-MPH students by Student Association	√	[vacant]	n/a		03/07/07	06/30/07	n/a	
SAAG-14	Student representative selected from non-MPH students by Student Association	√	[vacant]	n/a		03/07/07	06/30/07	n/a	
SAAG-15	Manager, Student Services	√	Thomas, Tammi	DO		n/a	n/a	n/a	
SAAG-16	Recording Secretary		[vacant]	n/a		n/a	n/a	n/a	
	Total voting	14							
	Membership: 1. One representative (faculty or staff) elected or appointed from and by each Department and School-based program 2. Up to two representatives (faculty or staff) appointed by the Dean 3. Two MPH student representatives elected or appointed by the School's Student Association 4. Two non-MPH student representative elected or appointed by the School's Student Association 5. Manager, Student Services 6. Recording Secretary appointed by the Dean's Office (non-voting)				Terms: 1. Elected and appointed representatives: three years, staggered; maximum of two consecutive terms 2. Student representatives: one year; no term limit 2. Others: membership criterion				

STUDENT AFFAIRS ADVISORY GROUP

Student Affairs Advisory Group							Last updated:		03/23/07
Control #	Membership Criterion	Voting	Person	Dept.	Position	Term Start	Term End	Term #	Notes
Past Members									
	none								

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendix V-1
SPHIS Catalog

The University of Louisville

School of Public Health and Information Sciences

2006-2007 Catalog

The University of Louisville
School of Public Health and Information Sciences
2006-2007 Catalog

This catalog is the official bulletin and catalog for the students in the School of Public Health and Information Sciences (SPHIS) at the University of Louisville (U of L). It has been prepared to acquaint students with the departments, faculty, and curriculum of the SPHIS. This publication is a supplement to the *University of Louisville Graduate School Catalog*. There may be policy or curriculum information in this SPHIS Catalog that differs from those in the *Graduate Catalog.* In these cases, the SPHIS Catalog supersedes the *Graduate Catalog*. In all cases, all graduate students in the SPHIS must adhere to all policies and procedures of the Graduate School and SPHIS. Additional information and University student policies are printed in the *University of Louisville Student Handbook*, the University of Louisville Schedule of Courses, and the University of Louisville website, www.louisville.edu.

The student is responsible for being familiar with the contents of the catalogs, student handbooks, and official notices to be informed about grades, credits, requirements, and the regulations of the University of Louisville and the School of Public Health and Information Sciences. U of L and SPHIS reserves the right to change programs of study, academic policies, academic requirements, fees, schedules of courses, procedures for the confirmation of degrees, or the announced academic calendar without prior notice. The University and SPHIS reserve the right to change course descriptions without prior notice. The provisions of this Handbook do not constitute an express or implied contract between the University and any member of the student body, faculty, or general public.

The University of Louisville is an equal-opportunity institution and does not discriminate against persons because of race, religion, sex, age, handicap, color, citizenship or national origin. Inquiries or complaints about illegal discrimination including sexual harassment or handicap access can be made to the Affirmative Action director (852–6538) if response from SPHIS personnel is unsatisfactory.

The Redbook is the official statement of the organizational structure, the rules of governance, and procedures and policies of the University of Louisville. If there is any conflict between the policies, procedures, or other statements contained in this Catalog, the Redbook shall govern. A copy of *The Redbook* is available on the University's web page at www.louisville.edu. Official copies are maintained at all University libraries, the Student Government Association Office, the Student Grievance Officer, and the Vice President for Student Affairs. Other policies and information regarding students can be found in the University of Louisville *Student Handbook*, available at http://campuslife.louisville.edu/cloffice/handbook/.

A Message from the Dean

The School of Public Health and Information Sciences is the most recent addition to the Health Sciences Center by the University of Louisville in response to its focus on excellence in research and education. The School is actively expanding in several programs, including the Clinical Research, Epidemiology, and Statistics Training Program (CREST) and Bioinformatics and Biostatistics (Biostatistics-Decision Science), in addition to a Master of Public Health (M.P.H.) program which was offered for the first time in Fall 2005. The School was designed with an emphasis on collaboration and integration.

Public health is a practice in which various health care professions focus on protecting the public's health, including preventing disease or health problems and intervening at the earliest point to reduce their consequences on the community as a whole. Public health researchers are playing an important role in creating a safer and healthier community.

Academically, the School is organized into five departments: Bioinformatics and Biostatistics, Environmental and Occupational Health Sciences, Epidemiology and Population Health, Health Knowledge and Cognitive Sciences, and Health Management and Systems Sciences.

We are committed to providing the highest quality education to our students and research in public health.

Richard D. Clover, M.D.
Dean

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The University of Louisville

The University of Louisville (U of L) is a state supported urban university located in Kentucky's largest metropolitan area. It was a municipally supported public institution for many decades prior to joining the state university system in 1970. The University's mission is to serve the specific educational, intellectual, cultural, service, and research needs of the greater Louisville region (more than one million people) and to help serve those needs statewide, particularly in the areas of public health, medicine, dentistry, law, and urban affairs. Eight of U of L's 12 colleges, schools and divisions are housed on the 169-acre Belknap Campus, the primary location for U of L's centralized services and academic programs. The Schools of Medicine, Nursing, Dentistry, and Public Health and Information Sciences, all part of the Health Sciences Center (HSC), are located three miles north, close to downtown Louisville on the Health Sciences Campus.

U of L enrolls nearly 4500 graduate students and offers master's degrees in more than 50 areas and doctoral degrees in more than 20 disciplines. It also grants professional degrees in public health, medicine, dentistry, nursing, and law.

The Health Sciences Center of the University of Louisville

The University of Louisville Health Sciences Center (HSC) is located just east of downtown Louisville on the Health Sciences Campus and is contiguous to the main properties of three separate hospital systems-the University of Louisville Hospital, Jewish Hospital HealthCare Services (JHHS), and Norton Healthcare. Collectively this area, which totals 24 city blocks, is known as the Louisville Medical Center. It is easily accessible from all residential areas of the city.

The quadrangle of the HSC includes the Schools of Medicine and Dentistry, the Instructional Building, and the Commons Building, which houses an auditorium, library and cafe. A building adjacent to the quadrangle houses the School of Nursing, the Children and Youth Health Clinic, the campus Bookstore, and the School of Public Health and Information Sciences. The administrative offices of the School of Medicine and conference facilities are housed in the beautifully renovated Abell Administration Building.

Other facilities within the Health Sciences complex include the Ambulatory Care Building, an outpatient care facility housing many of the University's clinical departments and teaching practices as well as the Primary Care Center, and the James Graham Brown Cancer Center, a cancer care and research facility. The Donald E. Baxter Biomedical Research Building, a multi-million dollar facility, opened in October 1999. The 115,000 square foot building was funded by $14 million in state funds, $5.5 million from JHHS, $3.5 million from Norton Healthcare and $5 million raised by the University of Louisville. In August 2000, ground was broken for the Delia B. Baxter Building, which is 17,000 square feet larger than the Donald E. Baxter Building. It consists of four floors and a basement with 48 labs, 12 on each floor, and opened in spring 2003. It also contains a 40-seat conference room located in an underground connector between the two buildings.

The Vision and Mission of the School of Public Health and Information Sciences

Vision

We will be an internationally recognized center of excellence for the creation, sharing, and application of ***knowledge for the public's health***.

In achieving our vision:

- We will extend the domain of public health to include all factors in the public's health.
- We will pursue health information sciences as an inseparable aspect of public health.
- We will work for close integration of individual health, health care, and public health.

Mission

We advance ***knowledge for the public's health*** in the increasingly complex and interconnected world of the 21st century. We accomplish this through activities in the three cornerstone areas for advancing knowledge:

- Research. We create knowledge by seeking new discoveries and understanding through scientific exploration. We communicate our findings.
- Teaching. We share knowledge with students committed to and prepared for learning in a facilitated environment. Our learners are our students, our faculty, and our staff. We commit to preparing our learners for success.
- Service. We apply knowledge through quality services to the communities of which we are a part – the University, Louisville Metro, Kentucky, the United States, and their respective environs.

In fulfilling our mission:

- We nurture an academic setting that fosters ethics, respect, diversity, cooperation, learning, and fun.
- We strive to improve our approach and performance through a program of active feedback and deliberate change.
- We embrace innovative ideas for advancing knowledge.
- We investigate new techniques and technologies for doing research, teaching, and service.
- We think globally and act locally.
- We collaborate with any who will join us in working for the public's health.
- We recognize that public health starts with the individual.
- We advocate for the public's health.

The 2006-2007 Academic Calendar

http://www.louisville.edu/ur/onpi/infoctr/undergrad.htm

Fall 2006

Classes start	Aug. 21
Last day of registration	Aug. 21
Labor Day holiday	Sept. 4
Last day to apply for degree	Sept. 8
Last day to withdraw	Oct. 12
Thanksgiving break	Nov. 22-26
End of classes	Dec. 4
Reading day	Dec. 5
Final examinations	Dec. 6-12
Degree date	Dec. 12
December commencement	Dec. 14

Spring 2007

Classes start	Jan. 8
Last day of registration	Jan. 8
Martin Luther King Jr. holiday	Jan. 15
Last day to apply for degree	Jan. 26
Last day to withdraw	Feb. 26
Spring break	March 12-18
End of classes	April 23
Reading day	April 24
Final examinations	April 25 – May 1
Commencement	May 12

Student Government Association

The purpose of the School of Public Health and Information Sciences Student Association" or "SPHIS Student Association" is to empower the students of SPHIS to make group decisions, take group actions, and participate in governance of SPHIS through an organization that is operated entirely by and for the students of SPHIS. The intent of the Association is to become a Registered Student Organization in the University of Louisville.

A member of the Association is any student currently enrolled in a degree program in SPHIS, whether full-time or part-time. For a student to be considered currently enrolled, the student must be enrolled in at least one course. A newly enrolled student in a degree program in SPHIS is not a member until the first day of classes for the semester in which the student is first enrolled. If a member leaves the degree program in which he or she is enrolled, he or she is no longer a member.

A member of the Association is any student currently enrolled in a degree program in SPHIS, whether full-time or part-time. For a student to be considered currently enrolled, the student must be enrolled in at least one course. A newly enrolled student in a degree program in SPHIS is not a member until the first day of classes for the semester in which the student is first enrolled. If a member leaves the degree program in which he or she is enrolled, he or she is no longer a member.

Members may:

Vote in elections or referenda of the Association
Run for elected positions in the Association
Serve on SPHIS Council of Chairs and Deans and SPHIS Faculty Forum
Serve as representative of SPHIS on Graduate Student Council
Petition for a meeting or vote by entire membership on one or more issue

SPHIS Policy on Academic Dishonesty

Determination of a Violation of Academic Honesty

A violation of academic honesty will be determined solely by the director of the course involved or, in the event that a violation of academic honesty is not related to a specific course, the director of the student's academic program. The information on academic dishonesty presented in the University policy, reproduced below, represents guidelines to help the student understand several major aspects of academic dishonesty. These guidelines cannot exhaustively define academic honesty or dishonesty.

If the student is uncertain whether a planned activity or behavior could be construed as a violation of academic honesty, the student is strongly advised to discuss the matter with the course director or, if applicable, the program director prior to engaging in the activity or behavior.

Absence of Consideration for Ignorance of Policies on Academic Honesty

Students are expected to be familiar with applicable policies on academic honesty. Ignorance of one or more of these policies will neither excuse a violation nor be considered in determining disciplinary actions.

Plagiarism and Electronic Sources of Information

The following is intended to amplify and emphasize the inclusion of electronic sources of information as sources that must be cited as references when material is used from them. Information that is available through the Internet or from other electronic sources is not considered to be common knowledge solely because it is available widely and electronically. Designation of common knowledge is limited to knowledge that is widely known either generally or within a specific field or discipline. If the student is unclear whether an item of information is common knowledge or not, he or she is strongly advised to cite the source.

Disciplinary Procedures for a Violation of Academic Honesty

The course director may take whatever disciplinary action or actions he or she determines to be appropriate in response to a violation of academic honesty. These actions may include, for example, failing the course and denial of retaking the course.

The course director may also recommend to the academic program director that the student be dismissed or expelled from the program, which may be done at the sole discretion of the program director.

If the violation of academic honesty is not related to a specific course, the program director may take whatever disciplinary action he or she determines to be appropriate, including, for example, suspension or dismissal from the program.

The course director or, if the incident is not related to a specific course, the program director may also recommend that the student be dismissed or expelled from the School and the Graduate School. The recommendation is made to the Chair of the program's Department. The Chair, at his or her sole discretion, may recommend to the Dean of the School that the student be dismissed or expelled. If the program is School-based and not in a department, the recommendation is made directly by the program director to the Dean of the School. The Dean of the School, at his or her sole discretion, may recommend to the Dean of the Graduate School that the student be dismissed or expelled. Dismissal or expulsion from the Graduate School results in dismissal or expulsion from the School of Public Health and Information Sciences.

Absence of Right of Appeal

The determinations or actions of the course director, the program director, department chair, Dean of the School, and the Graduate Dean are final and may not be appealed by the student or a third party or reversed or modified by a third party, including but not limited to the University.

Student's Right to File a Grievance

The student may file a grievance with the Graduate School if he or she feels that he or she has been treated unfairly or inconsistently or has been discriminated against in the determination of a violation of academic honesty or of disciplinary actions. However, neither determination may be reversed or modified by the outcome of the grievance process.

The Center for Health Hazards Preparedness

The Center for Health Hazards Preparedness (CHHP), formerly the Center for Deterrence of Biowarfare and Bioterrorism, coordinates research, education and service focusing on the early recognition and response to potential acts of terrorism and natural disasters. Housed within the offices of the University of Louisville School of Public Health and Information Sciences, CHHP is part of the network of Centers for Public Health Preparedness (CPHP), established in 2002 through a cooperative agreement with the Centers for Disease Control and Prevention (CDC).

The Center's activities aim to bring together the information resources, human expertise and research infrastructure to improve the local, regional and national response to outbreaks of infectious diseases and the defense against potential biological, chemical and radiation threats and natural disasters. With funding from the Health Resources and Services Administration (HRSA), the CHHP has expanded its continuing education program. Under this initiative, we are collaborating with the University of Kentucky to develop innovative training for professionals in the fields of medicine, nursing, allied health, public health, healthcare administration, dentistry, pharmacy, mental health, agriculture and veterinary medicine. Particular effort is being made to offer presentations to Appalachian and other underserved communities using videoconference technology and web-based modules.

The Master of Public Health (MPH) Program

Program Name: PUBLIC HEALTH

Program Website: http://sphis.louisville.edu/MPH/index.htm

Program Director: Robert R. Jacobs, PhD

Program Coordinator: LaTonia S. Peters, MPH

Departments, Chairs and Concentration Coordinators:
Department of Bioinformatics and Biostatistics
Rudolph S. Parrish, PhD
Guy Brock, PhD

Department of Environmental and Occupational Health Sciences
David J. Tollerud, MD, MPH
Irma Ramos, MD

Department of Epidemiology and Population Health
Richard Baumgartner, PhD

Department of Health Knowledge and Cognitive Sciences
Richard Wilson, DHSc, MPH

Department of Health Management and Systems Sciences
Robert J. Esterhay, MD
Raymond Austin, PhD

General Program Admission Requirements

- A bachelor's degree from an accredited institution or its equivalent.
- A recommended minimum GPA of 3.0 on a 4.0 scale.
- If applicable, Test of English as a Foreign Language (TOEFL) exam with a minimum score of 250 on the computer-based version **or** a minimum score of 600 on the paper-based version.

For additional information regarding admissions and application, including submission information, see https://sphis.louisville.edu/M.P.H..

FOR INTERNATIONAL APPLICANTS ONLY: All international students applying to the MPH Program must have a foreign credential evaluation completed. Please see https://sphis.louisville.edu/MPH for additional information.

General Information

The Master of Public Health (MPH) degree program is offered as a School-based program with concentrations in biostatistics, environmental and occupational health, epidemiology, health behavior and cognition, and health management.

Requirements for the MPH degree include:

1.) Successful completion of 45 credit hours of study, distributed as follows:
    - Core public health courses (21 credits)
    - Public health concentration courses (15 credits)
    - Public health practicum (6 credits)
    - Issues in public health (2 credits)
    - Integrating learning and experience in public health (1 credit)
2.) Demonstration of achievement of all programmatic learning objectives; and
3.) Completion of all deliverables of the Practicum Experience.

The five areas in which a student may concentrate and the departments that offer each concentration are:

- Biostatistics—Department of Bioinformatics and Biostatistics
- Environmental and Occupational Health—Department of Environmental and Occupational Health Sciences
- Epidemiology—Department of Epidemiology and Clinical Investigational Sciences
- Health Behavior and Cognition—Department of Health Knowledge and Cognitive Sciences
- Health Management—Department of Health Management and Systems Sciences

All core courses are normally completed in the first year of the MPH Program. During the spring semester of the first year, students will identify their area of concentration with the aid of departmental concentration coordinators and seek admission to the department offering that concentration. The admission criteria to each concentration are determined by the individual departments and are outlined below. Students must be accepted into a concentration before taking concentration courses, the field practicum, and the integrating learning and experience course,

Admission Requirements for Concentrations

These criteria, where listed, are additional to those required for general program admission. Completion of these requirements typically can be done prior to or concurrently with the degree program curriculum. Once a student has been admitted to into a department, the concentration courses and practicum can be taken when specified.

<u>Biostatistics (Department of Bioinformatics and Biostatistics)</u>
A student packet containing:

- Grade from Biostatistics I (PHST 600);
- Current grade from Biostatistics II (PHST 610);

- Other evidence of analytic ability, for example:
    - Quantitative score from at least one of these exams: GRE, GMAT or DAT;
    - Transcripts showing other college-level mathematics or statistics course;
    - Instructor recommendation;
    - Participation in or successful completion of a research project with analytical component.
- Exceptions may be granted.

Environmental and Occupational Health (Department of Environmental and Occupational Health Sciences)
No additional requirements.

Epidemiology (Department of Epidemiology and Clinical Investigational Sciences)
Concentration admission requirements consisting of:

- Minimum undergraduate GPA of 3.0 or completion of a graduate degree program;
- Minimum 8 credit hours of training in biomedical sciences (for example, biology, organic chemistry, biochemistry, anatomy, physiology, microbiology. Remediation of biomedical science courses may be done concurrently with Year 1 curriculum for no credit toward degree requirements.)
- Exceptions may be granted.

Health behavior and cognition (Department of Health Knowledge and Cognitive Sciences)
No additional requirements.

Health management (Department of Health Management and Systems Science)
No additional requirements.

Curriculum of the MPH Program

Core and Concentration Coursework

There are 6 core courses from the five core areas of public health:

- Biostatistics (two 3-credit courses)
- Environmental and occupational health (one 3-credit course)
- Epidemiology (one 3-credit course)
- Health behavior and cognition (one 3-credit course)
- Health management (one 3-credit course)

Additionally, there is a 3-credit course in critical thinking and program evaluation that all students must complete. Typically, these core courses are to be completed within the first year of the program. Concentration courses are to be completed within the second year of the program.

Issues in Public Health Course

The Issues in Public Health course is a trans-disciplinary course designed to integrate what students learned in other coursework and experiences and the application of these lessons to the broader scope of public health. Working in teams and on selected public health projects or initiatives are the focus of the course. The Issues in Public Health course is taken during the first semester.

Critical Thinking and Program Evaluation Course

The Critical Thinking and Program Evaluation course is taken by all MPH students during the spring semester of the first year. The course focuses on the identification of public health problems and planning appropriate responses and evaluations. Planning and evaluation skills are considered pivotal learning concepts for the MPH degree and for successful public health practice.

The Practicum Experience

The Practicum Experience (P.E.) is taken in both semesters of the second year. The P.E. places the student in a non-academic organization providing services in or closely related to the public health concentration selected by the student. The P.E. and its required deliverables must be completed to fulfill degree program course requirements.

Integrating Learning and Experience in Public Health Course

The Integrating Learning and Experience in Public Health course is taken during the last semester of the second year, concurrently with the P.E. It is a course that allows students to complete the deliverables (e.g., paper, poster and oral presentation) required of the practicum. This course is required to fulfill degree program course requirements.

Information Relative to Degree Program

This program is designed as a full-time, day curriculum. Other kinds of program study (e.g., part-time) are available and are at the prerogative of the MPH Program Director.

Information about student loans and grant programs is available from the U of L Office of Financial Aid and from www.louisville.edu/student/services/fin-aid.

For more information regarding the Master of Public Health degree program and the School, see https://sphis.louisville.edu

Curriculum listing

The full time curriculum for the MPH program is described below and is designed to be completed in two academic years. A part time program of study is also available for students unable to attend class full time and can be arranged upon entry into the MPH Program.

In the first year all students take the core MPH courses. These courses are designed to provide an overview of the core areas of public health. Students will also take a course

that is focused on *Issues In Public Health* and a course in *Critical Thinking and Program Evaluation.*

Towards the end of the first year students will select there area of concentration from one of the five core areas of public health (Biostatistics, Environmental Health, Epidemiology, Health Behavior, and Health Management). This will lead students into the second year of the curriculum where they will take 15 credit hours in their area of concentration and perform a community based practicum.

The chart below provides a general overview of the first and second years of the MPH curriculum. A more detailed curriculum for each areas of concentration is provided on the following pages.

Core course overview: (common in all concentrations)

Year 1 Fall Semester

PHEP 601	Introduction to Epidemiology	(3 credits)
PHST 600	Introduction to Biostatistics I	(3 credits)
PHMS 601	Intro to Public Health Practice and Admin	(3 credits)
PHKC 696	Issues in Public Health	(2 credits)

Year1 Spring Semester

PHEH 600	Introduction to Environmental Health Sciences	(3 credits)
PHKC 601	Introduction to Health Behavior	(3 credits)
PHST 610	Statistical Computing & Data Management for Public Health	(3 credits)
PHKC XXX	Critical Thinking and Program Evaluation	(3 credits)

Concentration course overview:

Year 2 Fall Semester

Concentration major courses	(9 credits)
Concentration-specific Public Health Practicum	(3 credits)

Year 2 Spring Semester

Concentration major courses	(6 credits)
Concentration-specific Public Health Practicum	(3 credits)
PHXX 697 Integrating Learning and Experience in Public Health	(1 credit)

Total hours **45 credits**

MPH Concentration in Biostatistics:

Year 2 Fall Semester

PHCI 624	Clinical Trials I	(2 credits)
PHST 726	Clinical Trials Stats Lab	(1 credit)
PHST 620	Introduction to Statistical Computing	(3 credits)
PHXX ___	3rd concentration course	(3 credits)
PHST 679	Public Health Practicum	(3 credits)

Year 2 Spring Semester

PHST 640	Stat Methods for Rsch Design in Health Studies	(3 credits)
PHST 679	Public Health Practicum	(3 credits)
PHST 681	Biostatistical Methods II	(3 credits)
PHST 697	Integrating Learning and Experience in Public Health	(1 credit)

MPH Concentration in Environmental Health

Year 2 Fall Semester

PHEH 610	Occupational Health and Safety	(3 credits)
PHEH 650	Advanced Topics in Environmental Health	(3 credits)
PHXX ___	3rd concentration course	(3 credits)
PHEH 679	Public Health Practicum	(3 credits)

Year 2 Spring Semester

PHEH 620	Global Issues on Environmental and Occ. Health	(3 credits)
PHEH 679	Public Health Practicum	(3 credits)
PHEH 697	Integrating Learning and Experience in Public Health	(1 credit)
Elective course		(3 credits)

Student can select from any area they are interested in. Courses may vary and require prior approval from the students major Department Chair.

MPH Concentration in Epidemiology

Year 2 Fall Semester

PHEP 602	Epidemiologic Methods	(3 credits)
PHEP 616	Disease Surveillance	(3 credits)
PHXX___	3rd concentration course	(3 credits)
PHEP 679	Public Health Practicum	(3 credits)

Year 2 Spring Semester

PHEP 617	Field Epidemiology	(3 credits)
PHEP 679	Public Health Practicum	(3 credits)
PHEP 650	Advanced Topics in Epidemiology	(3 credits)
PHEP 697	Integrating Learning and Experience in Public Health	(1 credit)

MPH Concentration in Health Behavior

Year 2 Fall Semester

PHKC 604	Health Decision and Risk Analysis	(3 credits)
PHKC 608	Public Health Program Evaluation	(3 credits)
PHXX ___	3rd concentration course	(3 credits)
PHKC 679	Public Health Practicum	(3 credits)

Year 2 Spring Semester

PHKC 607	Population Health Management* *cross-listed with PHMS 607	(3 credits)
PHKC 612	Health Communication Campaigns	(3 credits)
PHKC 679	Public Health Practicum	(3 credits)
PHKC 697	Integrating Learning and Experience in Public Health	(1 credit)

MPH Concentration in Health Management

Year 2 Fall Semester

PHMS 603	Legal & Bioethical Aspects of Public Health	(3 credits)
PHMS 615	Introduction to Health Systems	(3 credits)
PHMS 679	Public Health Practicum	(3 credits)
PHXX ___	3rd concentration course	(3 credits)

Year 2 Spring Semester

PHMS 605	Governance and Management of Healthcare Org.	(3 credits)
PHMS 607	Population Health Management* *cross listed with PHKC	(3 credits)
PHMS 679	Public Health Practicum	(3 credits)
PHMS 697	Integrating Learning and Experience in Public Health	(1 credit)

Clinical Research, Epidemiology, and Statistics Training

Program Website: http://sphis.louisville.edu/crest_program/crest_home.cfm

Program Director: Susan Muldoon, Ph.D.

Program Coordinator: Tammi A. Thomas (Acting)

The Clinical Research, Epidemiology and Statistics Training (CREST) Program

The School of Public Health and Information Sciences at the University of Louisville offers a Clinical Research, Epidemiology and Statistics Training (CREST) Program. This program consists of a Graduate Certificate in Clinical Investigation Sciences and an MSc in Epidemiology-Clinical Investigation Sciences. The MSC can be done jointly with the MD degree.

The Graduate Certificate in Clinical Investigation Sciences provides individuals with skills requried for a career in a clinical research setting. The MSc degree program provides physicians, dentists, nurses and other health professionals an opportunity to acquire the clinical research skills necessary for a career in an academic health center.

The CREST curriculum integrates biostatistical and epidemiologic methods in a problem-based learning format with additional instruction in bioethics, health economics, health services and outcomes research and social and behavioral science. Students pursuing the master degree take didactic courses while they engage in mentored and independent research that culminates in the preparation of a professional paper or research thesis (MSc).

Admission to the CREST Program

Interested students may apply either to the certificate program, Master of Science in public health, or the doctoral degree program in Epidemiology: Clinical Investigation Sciences. Students seeking the M.Sc. degree must have a professional degree (e.g., D.M.D., D.O., M.D. or Ph.D.), a terminal degree in a health field, or a graduate degree with appropriate experience in health care or clinical research. Students seeking to enter directly into the doctoral program in either translational research or health services and outcomes research must have an M.SC. in Clinical Investigation Sciences or comparable training at the Master's level.

Applicants must complete all forms for admission to the University of Louisville Graduate School and must meet the Graduate School's requirements for admission which are:

- Formal application

- Application fee
- At least 2 letters of recommendation
- Official transcripts of all college work

The GRE is not required if a terminal degree has already been completed.

These items are required no later than thirty days before the first day of classes of the semester in which the applicant plans to enroll.

CREST Admission Requirements

To meet CREST Program admission requirements, all applicants are required to submit the following items with their application:

- Resume/CV
- Evidence of graduation from an accredited medical or dental school, or a Ph.D. program in Public Health or other health related discipline e.g., social or behavioral science, or a terminal degree in a health field with relevant experience;
- A statement describing the applicant's qualifications, including prior experience in clinical research or health care, proposed (general) area of research, career plans, and two letters of reference from individuals knowledgeable about the applicant's qualifications, abilities, and potential for a successful career in clinical research and academic medicine.

Graduate Certificate in Clinical Investigation Sciences

Major: CCI
Degree: Graduate Certificate
Unit: Graduate Health (GH)

The Graduate Certificate in Clinical Investigation Sciences includes 15 credit hours of didactic instruction with required courses in epidemiology, biostatistics, the responsible conduct of research, evaluating the health care literature and an elective in behavioral and social science, health economics or health services and outcomes research plus a 1 credit hour research paper. The Certificate Program can be completed in 1 year and is designed for those who want a career in a clinical research setting as well as those who want to upgrade their research skills. Courses taken in the certificate program can be applied toward the M.Sc. degree.

Schedule of Courses for the Graduate Certificate in Clinical Investigation Sciences

Fall I Semester

PHCI 611	Introduction to Clinical Epidemiology	2
PHCI 621	Fundamentals of Biostatistics	2

Elective Courses (Select One)

PHCI 631	Behavioral and Social Science in Health Care	2

PHCI 650	Medical Decision Analysis	2
PHCI 602	Health Services and Outcomes Research	2

Spring I Semester

PHCI 622	Design and Analysis of Case Control Studies	2
PHCI 623	Design and Analysis of Cohort Studies	2
PHCI 624	Clinical Trials I	2
PHCI 632	Ethical Conduct of Health Research	2

Summer I Semester

PHCI 601	Evaluating Health Care Literature	1
PHCI 699	Mentored Research Paper	1

Masters of Science: Epidemiology, Clinical Investigation Sciences

Major: PHCI
Degree: Master of Science (M.Sc.)
Unit: Graduate Health (GH)

The 24 hours of required course work provide students with a broad base of knowledge in epidemiologic research methods, biostatistics, bioethics, and the methodologies of health services and outcomes research. Early in their first semester M.Sc. students are required to identify a faculty member who will serve as a mentor. The M.Sc. in Epidemiology-Clinical Science can be completed in two years. However, a three-year option is also available.

Two Year Master of Science Option

Summer I Semester

PHCI 501	From Bench to Bedside: Introduction to Clinical Research	1

Fall I Semester

PHCI 611	Introduction to Clinical Epidemiology	2
PHCI 621	Fundamentals of Biostatistics	2
PHCI 631	Social and Behavioral Science in Health Care	2
PHCI 610	New Drug and Device Development	2
PHCI 699	Mentored Research	2

Spring I Semester

PHCI 622	Design and Analysis of Case-Control Studies	2
PHCI 623	Design and Analysis of Cohort Studies	2
PHCI 624	Clinical Trials I	2
PHCI 632	Ethical Conduct of Health Care Research	2
PHCI 699	Mentored Research	

Summer II Semester

PHCI 601	Evaluating the Health Care Literature	1

PHCI 699	Mentored Research	

Fall II Semester

PHCI 625	Clinical Trials II	2
PHCI 650	Medical Decision Analysis	2
PHCI 602	Health Services and Outcomes Research	2
PHCI 699	Mentored Research	

Spring II Semester

PHCI 699	Mentored Research	

Three Year Master of Science Option

Fall I Semester

PHCI 611	Introduction to Clinical Epidemiology	2
PHCI 621	Fundamentals of Biostatistics	2
PHCI 699	Mentored Research	

Spring I Semester

PHCI 623	Design & Analysis of Cohort Studies	2
PHCI 622	Design & Analysis of Case Control Studies	2
OR		
PHCI 624	Clinical Trials I	2
PHCI 699	Mentored Research	

Summer I Semester

PHCI 501	From Bench to Bedside: Introduction to Clinical Research	1
PHCI 699	Mentored Research	

Fall II Semester

PHCI 610	New Drug and Device Development	2
PHCI 631	Social and Behavioral Science in Health Care	2
PHCI 699	Mentored Research	

Spring II Semester

PHCI 632	Ethical Conduct of Health Care Research	2
PHCI 624	Clinical Trials I	2
OR		
PHCI 622	Design & Analysis of Case Control Studies	2
PHCI 699	Mentored Research	

Summer II Semester

PHCI 601	Evaluating Health Care Literature	1
PHCI 699	Mentored Research	

Fall III Semester

PHCI 625	Clinical Trials II	2
PHCI 650	Medical Decision Analysis	2

PHCI 602	Health Services and Outcomes Research	2
PHCI 699	Mentored Research	

Spring III Semester
PHCI 699 – Mentored Research

Joint Doctor of Medicine – Master of Science Degree Program

Students admitted to the University of Louisville School of Medicine can pursue a joint M.D.- M.Sc. degree program with only one additional year of study beyond the traditional four-year medical school curriculum. Medical students pursuing the joint M.D.-M.Sc. degree begin the M.Sc. course work after completing one year of clinical training (i.e., the third year of medical school). Joint degree students spend the fall and spring semesters of their fourth year and the summer and fall semesters of their fifth year completing the M.Sc. course work. They complete their professional paper/thesis for the M.Sc. degree and their clinical rotations for the M.D. degree in the spring semester of their fifth year. Graduates of the program can expect to be highly competitive for residency and fellowship positions at prestigious institutions.

M.D.-M.Sc. Option:
M4 Year, Fall/Summer Semester Graduate School
Choice of 3, all 4 weeks, 5 credits each

- In-Patient Medicine (IPM)
- AHEC
- Neurology
- In-Patient Surgery (IPS)
- Ambulatory Care (AR)
- Ambulatory Primary Care (APC)

AND REQUIRED

- Anesthesiology, 2 weeks, 2 credits

M4 Year Fall/Fall Semester Graduate School

PHCI 611	Introduction to Clinical Epidemiology	2
PHCI 621	Fundamentals of Biostatistics	2
PHCI 631	Social and Behavioral Science in Health Care	2
PHCI 610	New Drug and Device Development	2

M4 Year, Spring/Spring Semester Graduate School
Clinical Electives (2-10 credits). Need to take a minimum of 2 credits.

PHCI 622	Design and Analysis of Case Control Studies	2
PHCI 623	Design and Analysis of Cohort Studies	2
PHCI 624	Clinical Trials I	2
PHCI 632	Ethical Conduct of Health Care Research	2

M5 Year, Fall/Summer Semester Graduate School

PHCI 601	Evaluating Health Care Literature	1
PHCI 501	From Bench to Bedside: Introduction to Clinical Research	1

M5 Year, Fall/Fall Semester Graduate School

PHCI 625	Clinical Trials II	2
PHCI 650	Medical Decision Analysis	2
PHCI 602	Health Services and Outcomes Research	2
PHCI 699	Mentored Research (6 credits)*	

*The student has the choice of when to take these hours based on what financial assistance they want to receive. Options 1) take all in the fall 2) take all in the spring or 3) split the hours up between semesters. If all hours are taken in the fall the student must register for 1 hour of master's candidacy in the spring.

M5 Year, Spring/Spring Semester Graduate School

Choice of 3 and remaining electives, all 4 weeks, 5 credits each

- In-Patient Medicine (IPM)
- AHEC
- Neurology
- In-Patient Surgery (IPS)
- Ambulatory Care (AR)
- Ambulatory Primary Care (APC)

M.SC. Courses - See above**

USMLE Step 2 exam must be scheduled no later than block 8 of the M5 year.

The Department of Bioinformatics and Biostatistics

https://www.sphis.louisville.edu/bb_home.cfm
(502) 852-2797

Department Faculty

Chair
Rudolph S. Parrish, Ph.D.

Professors
Somnath Datta, Ph.D.

Associate Professors
Susmita Datta, Ph.D.
L. Jane Goldsmith, Ph.D.
Caryn M. Thompson, Ph.D.

Assistant Professors
Guy Brock, Ph.D.
Maiying Kong, Ph.D.
Steven J. McCabe, M.D., M.Sc.
John A. Myers, Ph.D.
Jae Keun Yoo, Ph.D.

Adjunct Faculty
Larry W. Lewis, Ph.D.

Programs
The Department has programs for the Master of Science in Public Health (MSPH) and doctoral degrees (Ph.D.) in decision science and biostatistics. The Department offers an M.P.H. concentration in biostatistics. The Department prepares graduates for positions in academic settings, pharmaceutical companies, government agencies, and healthcare organizations.

Admission to the Degree Programs of the Department of Bioinformatics and Biostatistics

Students will be required to submit the following to be considered for admissions to the academic degree programs of the Department of Bioinformatics and Biostatistics:

- Graduate application (see www.graduate.louisville.edu)
- $50 non-refundable application fee
- At least two letters of recommendation written within past twelve months (which can be submitted with form at http://graduate.louisville.edu/app/grad-rec.pdf)

- Submission of GRE Quantitative section score to the Graduate School (no minimum score required)
- Submission of all postsecondary transcripts to the Graduate School
- Statement of goals submitted to the Department office (Must include desired academic and degree program)

Master of Science in Public Health (MSPH)

Major: PHST
Degree: MSPH
Unit: Graduate Health (GH)

MSPH Degree Concentration in Biostatistics *or* Decision Science

Minimum Requirements

36 Total Credit Hours:

- 28 credit hours of coursework
- 2 credit hours of practicum experience
- 6 hours of thesis research (6 hours of coursework may be substituted if student enters the Ph.D. program)

Required Coursework

Course	Course Title	Credit Hours
Fall I Semester		
PHEP 511	Introduction to Epidemiology	3
PHST 661	Probability	3
PHST 680	Biostatistical Methods I	3
Spring II Semester		
PHEH 600	Introduction to Environmental Health	3
PHST 662	Mathematical Statistics	3
PHST 681	Biostatistical Methods II	3
Fall II Semester		
PHST 602	Biostatistics – Decision Science Seminar	1
PHST 603	Public Health Practicum I	2
Biostatistics concentration:		
PHST 683	Survival Analysis	3
PHST 666	Master's Thesis Research* or Elective	3
Decision Science concentration:		
PHDA 601	Introduction to Medical Decision Analysis	3
PHDA 663**	Analysis for Decision Making	3
Spring II Semester		

PHST 602	Biostatistics – Decision Science Seminar	1
PHST 624	Clinical Trials I ***	2
Biostatistics concentration:		
PHST 684	Categorical Data Analysis	3
PHST 666	Master's Thesis Research* or Elective	3
Decision Science concentration:		
PHST 666	Master's Thesis Research* or Electives	6

*Students may opt to not do a thesis if they are admitted to the Ph.D. program, in which case six credit hours of electives must be taken in its place.
**Cross listed as IE 643
***Students planning to take PHST 724 "Advanced Clinical Trials" also should take PHST 726 "Clinical Trials Statistics Laboratory".

Doctor of Philosophy (Ph.D.) in Biostatistics – Decision Science

Major: PHDA
Degree: Ph.D.
Unit: Graduate Health (GH)

Minimum Requirements

84 Total Credit Hours:

- 36 credit hours required for MSPH
- 24 credit hours of required coursework
- 24 credit hours of dissertation research

Required Coursework for Concentration in Biostatistics

Course	**Course Title**	**Credit Hours**
Fall III Semester		
PHST 710	Advanced Statistical Computing I	3
PHST 762	Advanced Statistical Inference	3
PHST 781	Advanced Linear Models	3
Spring III		
PHST 724	Advanced Clinical Trials	3
PHST 782	Generalized Linear Models	3
PHST 783	Advanced Survival Analysis	3

Elective Courses

In addition to the above required courses, at least 6 credit hours of electives must be taken from the following list and/or from the list of required courses offered in the Decision Science concentration. The student's Program of Study will specify the courses to be taken.

PHBI 750	Statistical Methods for Bioinformatics	3
PHBI 751	High-throughput Data Analysis	3
PHST 682	Multivariate Analysis	3
PHST 691	Bayesian Statistics	3
PHST 711	Advanced Statistical Computing II	3
PHST 725	Design of Experiments	3
PHST 785	Nonlinear Regression	3

Required Coursework for Concentration in Decision Science

Course	**Course Title**	**Credit Hours**
Fall III Semester		
PHDA 673	Biostatistics-Decision Science Research	3
PHDA 690	Utility Theory and Assessment	3
Spring III		
PHDA 691	Bayesian Statistics	3
PHDA 701	Advanced Medical Decision Making	3

Elective Courses

In addition to the above required courses, at least 12 credit hours of electives must be taken. The student's Program of Study will specify the courses to be taken. (Electives remain the same as previously approved except that all required and elective courses listed above for the Ph.D. concentration in Biostatistics also are included.)

Research Seminar

All doctoral students will be required to present in the Biostatistics–Decision Science Seminar (PHST 602) or other approved seminar at least once during at least two semesters. Evaluation will be conducted by an assigned faculty member who will assess whether satisfactory performance was achieved.

Consulting Rotation

Students completing the Ph.D. concentration in Biostatistics also will be required to complete a service rotation through the Statistical Consulting Center of the Department of Bioinformatics and Biostatistics. Evaluation will be conducted by an assigned faculty member who will assess whether satisfactory performance was achieved.

Dissertation

Dissertation work may be started upon successful completion of Doctoral Qualifying Examinations. Dissertation research may be credited at no more than 9 hours per semester (6 hours during summer semester) as PHDA 777.

Dual Degree Program in Applied and Industrial Mathematics and Biostatistics - Decision Science

Dual degrees in Biostatistics-Decision Science and Applied and Industrial Mathematics are offered by the College of Arts and Sciences and the School of Public Health and Information Sciences. Upon completion of the program, students will receive a Ph.D. in Applied and Industrial Mathematics and an M.S.P.H. in Biostatistics-Decision Science.

Application Procedure

To be admitted to the program, the student is required to apply to and be accepted by both the Department of Mathematics and the Biostatistics-Decision Science Program. A student seeking admission into this program must submit letters to both the Department of Mathematics and the Department of Bioinformatics and Biostatistics stating the intent to take advantage of the dual degree program, and stating whether the student is interested in the Biostatistics or the Decision Science concentration. Students must submit 2 recent letters of recommendation with their letter of intent. Applicants will receive written notification stating whether their admission request has been approved or disapproved.

Degree Requirements

Required Courses

The required courses for the dual degree program consist of all non-overlapping core courses for both the Ph.D. in Applied and Industrial Mathematics and the M.S.P.H. in Biostatistics-Decision Science, as well as the requirements for either the Decision Science or Biostatistics concentration within the Biostatistics-Decision Science program.

Core course requirements for the Ph.D. in Applied and Industrial Mathematics (24 semester hours)

Two sequences, each of six (6) semester hours, chosen from

- Algebra - Mathematics 621 and 622
- Combinatorics - Mathematics 681 and 682
- Real Analysis - Mathematics 601 and 602

Two sequences, each of six (6) semester hours, chosen from

- Mathematical Modeling - Mathematics 635 and 636
- Applied Statistics - Mathematics 665 and 667
- Probability and Mathematical Statistics - Mathematics 660 and 662

Courses taken in requirement of the mathematics component of the dual degree program can be used to satisfy the 6 to 9 semester hours of electives required for the M.S.P.H. in Biostatistics-Decision Science.

Core course requirements derived from the M.S.P.H. in Biostatistics-Decision Science (12 to 18 semester hours)

The following courses are required for both tracks.

- Introduction to Public Health and Epidemiology - PHEP 511 (3 semester hours)
- Social and Behavioral Sciences in Health Care - PHCI 631 (2 semester hours)
- Introduction to Environmental Health
- Health Economics
- Biostatistics-Decision Science Seminar - PHDA 602 (4 semester hours)
- Probability and Mathematical Statistics - PHST 661 and 662 (6 semester hours)*

* This requirement is waived if the student takes the Mathematics 660, 662 sequence listed above.

Requirements from one of the two possible concentrations for the M.S.P.H. in Biostatistics-Decision Science. (5 to 6 semester hours)

Biostatistics Concentration Requirements:

- Biostatistical Methods I and II - PHDA 680 and 681 (6 semester hours)

Decision Science Concentration Requirements:

- Ethical Issues in Decision Making - PHDA 605 (2 semester hours)
- Decision Analysis - PHDA 663 (3 semester hours)

Courses taken to satisfy the Biostatistics-Decision Science component of the dual degree program can be applied to the 18 semester hours of electives which are required for the Ph.D. in Applied and Industrial Mathematics.

Combined Industrial Internship, Practicum and Masters Thesis (6-8 semester hours)

The Industrial Internship required by the Department of Mathematics, and the Public Health Practicum and Masters thesis required for the M.S.P.H. can be satisfied by a single internship and technical report which simultaneously satisfies the requirements for both degrees. Specifically, the internship must both focus on public health so that it satisfies the Public Health Practicum (PHDA 603), and contain advanced mathematical content, so that it satisfies the Ph.D.-level Industrial Internship (Math 694). Likewise, the technical report must meet two requirements: it must satisfy the requirements for a Master's thesis for the M.S.P.H. degree (PHDA 666) and it must be written at an advanced mathematical level expected for the Ph.D.-level Industrial Internship. The six (6) to eight (8) semester hours of the internship will be divided evenly between the Department of Mathematics and the Biostatistics-Decision Science Program.

Dissertation and Qualifying Examinations

In order for the student to fulfill the Ph.D. requirements, the student must satisfy both the qualifying examination and dissertation requirements for the Ph.D. in Applied and Industrial Mathematics. Failure to complete these requirements will not jeopardize the M.S.P.H. degree, if all its requirements have been satisfactorily completed.

Special Considerations

- Students who have already completed a Master's degree in the Department of Mathematics
- Credit requirements

To preserve the spirit of a dual degree, such students need to complete 36 semester hours of courses as required for the MSPH in Biostatistics-Decision Science. Six (6) semester hours from the previous Master's degree coursework can be applied to this requirement. The remaining semester hours must be chosen from the list of not covered by core courses approved electives for the Department of Bioinformatics and Biostatistics, with preference given to courses in the Departments of Mathematics and Bioinformatics and Biostatistics. Combined Industrial Internship, Practicum and Masters Thesis This cannot be replaced by a previous Master's thesis. This requirement must be satisfied as previously described, meeting the specifications of both departments.

The Department of Environmental and Occupational Health Sciences

https://www.sphis.louisville.edu/eohs_home.cfm
(502) 852-3290

Department Faculty

Chair
David J. Tollerud, M.D., M.P.H.

Professors
David J. Tollerud, M.D., M.P.H.
Robert R. Jacobs, Ph.D.

Assistant Professors
Irma N. Ramos, M.D.
Qunwei Zhang, M.D., M.P.H., Ph.D.

Programs

The Department of Environmental and Occupational Health Sciences focuses on research, education, and service in the prevention of adverse health effects related to environmental and occupational exposures. Activities center around three major areas: health effects of air pollution; environmental health for susceptible populations, especially children, the elderly, and asthmatics; and prevention of workplace injuries and illness. The Department partners with local, state, national, and international agencies and universities in addressing these areas and in developing the resources to carry out this work. Community outreach and environmental education, particularly to African American and Hispanic communities, is an important and growing focus of departmental activities which includes collaboration with other community and state agencies.

Ongoing funded projects include health effects of occupational exposures among workers at the Department of Energy facility in Paducah, Kentucky in collaboration with the University of Kentucky, University of Cincinnati, and University of Cincinnati Children's Medical Center; and environmental risk factors for Progressive Supranuclear Palsy (PSP). The Department's research laboratory is exploring toxic effects of metal nanoparticles and the direct effect of ultrafine particles on vascular endothelial cells.

Newly developing collaborations will focus on the application of sophisticated biomonitoring equipment and principles of exercise physiology and ergonomics to prevent workplace injuries, a center for environmental genomics and integrative biology, high school career development programs on environment health, school absenteeism due to asthma, and the role of the environment on the fetal basis of adult disease.

The Department of Epidemiology and Population Health

https://www.sphis.louisville.edu/ecis_home.cfm
(502) 852-3003

Department Faculty

Chair
Richard N. Baumgartner, Ph.D.

Professors
Carlton Hornung, Ph.D., MPH

Associate Professors
Kathy Baumgartner, Ph.D.

Assistant Professors
Frank Groves, M.D.
Susan B. Muldoon, Ph.D., M.P.H.
Chenxi Wang, M.D., M.Sc., Ph.D.

Adjunct/Associate/Gratis
Timothy E. Aldrich, M.P.H., Ph.D.
Terry Altpeter (Gratis)
LeRoy Allen Furr, Ph.D.
Jennifer L. Gregg, Ph.D.
Carol L. Hanchette, Ph.D.
Joy Hart, Ph.D.
Kraig Humbaugh, Ph.D. (Gratis)
Susan E. Kelly, Ph.D.
Damian A. Laber, M.D.
T. Howard Stone, J.D., LLM
Jamie L. Studts, Ph.D.
Ann Swank, Ph.D.
Cathy R. Whalen, Pharm.D. (Gratis)

Mission Statement

Epidemiology and Population Health is directed at identifying the determinants of health, disease, disability and death in populations for the purposes of promotion, control and prevention. Thus, it is a core discipline for Public Health that provides much of the information necessary for the development, implementation and evaluation of public health intervention, policy and law. Modern Epidemiology is a ***transdisciplinary*** science, and epidemiologists regularly integrate new knowledge on disease biology and mechanisms with environmental and behavioral science and complex statistical methods in population-based studies designed to illuminate disease etiology and test preventive interventions. They also often play a significant role in designing clinical trials to test new treatments to ameliorate disease or improve prognosis.

The Mission of the Department of Epidemiology and Population Health is:

- To provide the highest possible quality education and training in the philosophy, principles and practice of modern epidemiology
- To promote interdisciplinary teaching and health research within the School of Public Health and Information Sciences and across the University
- To conduct innovative, interdisciplinary research on the causes and consequences of disease in populations using state-of-the-art methods
- To conduct research that translates findings from "the bench" to "the community" and from the "the community" to the "bedside"
- To help build epidemiologic capacity and infrastructure at local, state and federal levels and to become recognized as a major provider of education, research, and service throughout the region.

Overview of Programs

The Department of Epidemiology and Population Health currently offers an MPH concentration in Epidemiology and MS Degree in Epidemiology and PhD degrees in Epidemiology and Health Services and Outcomes Research. The MPH concentration in Epidemiology prepares students for a career in public health practice as a local, state or federal field epidemiologist. The MS/PhD track in Epidemiology is designed for students wishing to pursue a career in academic research and teaching and provides intensive training in the philosophy, materials and methods of epidemiology with emphasis on risk factors and disease etiology. The PhD track in Health Services and Outcomes Research emphasizes broader training in health services organization, clinical epidemiology and outcomes research, and prepares students to conduct studies that assess the effectiveness and efficacy of alternative health service delivery systems or treatment modalities on health status, survival, and quality of life in patient populations.

Basic Admission Requirements

Applicants must complete all forms for admission to the University of Louisville Graduate School and must meet the **Graduate School's requirements** for admission. The minimum required documentation for full admission must include:

- For applicant with degree from accredited US institution:
  - Official transcripts
  - Official GRE score

NOTE: Program may substitute other recognized test(s) in place of the GRE (e.g., MCAT, LSAT, etc.)
    - Two (2) letters of recommendation
- For applicant with degree not from accredited US institution:
    - Official transcripts
    - Official GRE score
    - Two (2) letters of recommendation
    - Official TOEFL score
    - Foreign credential evaluation

Additional Admissions Requirements

MS Degree Program

In addition to the above graduate school requirements, all applicants to the MS degree program in Epidemiology are required to submit the following items with their application:

- Resume/CV
- A personal statement describing the applicant's qualifications, including prior experience, proposed (general) area of research, and career plans.
- Two letters of reference from individuals knowledgeable about the applicant's qualifications, abilities, and potential for a successful career in Epidemiology and academic medicine.
- GPA > 3.0 on a 4.0 scale
- GRE scores taken within the past 5 years (official from ETS). Scores > 50^{th} percentiles on both the Quantitative and Verbal sections are recommended.
- TOEFL > 60^{th} percentile

Eligibility for the MS Program

A prior BA/BS or more advanced degree, in an appropriate field of study, from a regionally accredited university or college is required for entry into the MS Program in Epidemiology. Previous coursework in statistics and biological or health sciences (for example, biology, biochemistry, anatomy, physiology, microbiology) is strongly preferred.

PhD Degree Program

Minimum Requirements

In addition to the above graduate school requirements, all applicants interested in the PhD program are required to submit the following items with their application:

- Resume/CV
- A personal statement describing the applicant's qualifications, including prior experience, proposed (general) area of research, and career plans.
- Two letters of reference from individuals knowledgeable about the applicant's qualifications, abilities, and potential for a successful career in Epidemiology and academic medicine.
- GPA > 3.0 on 4.0 scale

- GREs with the last 5 years (official from ETS) are required: applicants with a prior doctoral degree in a related field may request a waiver. Scores > 50th percentile on Quantitative and Verbals sections are strongly recommended.
- TOEFL > 60th percentile

Eligibility for the PhD Program

Applicants should have a strong background in biological sciences and mathematics. A prior MA/MS, or more advanced degree, in an appropriate field of study, from a regionally accredited university or college is required for entry into the PhD Program. The MS in Epidemiology is the preferred degree for the PhD track in Epidemiology. Students with other Master's degrees, including the MPH-concentration in Epidemiology, may be provisionally accepted but required to complete additional coursework as advanced coursework in biostatistics is strongly preferred for the PhD track in Epidemiology.

Application Deadline

The deadline for early admissions is April 30; however, the program will receive applications until the incoming class selection has been filled.

All documentation should be sent directly to the University of Louisville Graduate School, 105 Houchens Building, Louisville, KY 40292 (502) 852-3101

Masters of Science (MS) in Epidemiology: Standard Curriculum

In contrast to the MPH-concentration in Epidemiology, the MS in Epidemiology is explicitly designed to prepare students for a career in research, not public health practice, and is the preferred entry degree for the PhD Track in Epidemiology.

Program of Study

Upon admission to the MS program, each student will be assigned a faculty advisor who will work with the student to develop a Program of Study that will identify required and optional coursework.

Competencies

To graduate, students in the MS program in Epidemiology must demonstrate the following competencies:

- Mastery of the principles of epidemiologic, observational study design, including:
  - °The merits and limitations of cross-sectional, retrospective and prospective designs
  - °Methods of disease surveillance and case ascertainment
  - °Methods of population-based sampling
  - °Sample size and statistical power calculation
  - °Issues in the measurement of exposure and disease transmission
  - °Identification and correct interpretation of potential biases in study design
- Knowledge of the socioeconomic and geographic distribution, risk factors, and etiology of major acute, infectious and chronic morbidity and mortality.
- Mastery of basic methods of analysis of epidemiologic data, including:
  - °Measures of disease frequency, prevalence and incidence

°Methods for adjusting rates for age, gender, etc.
°Measures of association, odds ratio, relative risk
°Control of confounding and effect modification through stratification and statistical control
°Modeling in multiple logistic regression
°Principles of survival analysis
°Correct interpretation of results with regard to issues of error, bias and criteria for causality

Minimum Requirements

36 Total Credit Hours including
- 6 credit hours in Biostatistics
- 3 to 6 credit hours in another Public Health discipline
- 6 credit hours of thesis research

Thesis Requirement

The MS thesis will be an original, professional quality, potentially publishable paper on one or more of the following:

- a critical review of the contemporary epidemiologic literature on a specific disease, risk factor, or health related condition
- a meta-analysis of results from several epidemiologic studies of a specific disease
- a research report on analysis of collected data
- an evaluation of epidemiologic statistical methodology

Schedule of Courses

Year 1 – Fall Semester

PHEP 602 Epidemiologic Methods (3)
PHEP 619 Biology of Disease in Populations (3)
*PHST xxx (3)

Year 1 – Spring Semester

PHEP 618 Epidemiologic Methods II (3)
PHEP 604 Epidemiology of Acute and Infectious Diseases (3)
PHST XXX (3)

Year 2 – Fall Semester

PHEP 607 Epidemiology of Cancer (3)
PHEP 609 Epidemiology of Chronic Diseases (3)
**PHxx elective (3)

Year 2 – Spring Semester

PHxx elective OR
PHEP 650 Advanced Topics in Epidemiology (3)
PHEP 666 Thesis Research (6)

* To be determined by negotiation with Dept. Bioinformatics/Biostatistics

** To be selected from course offerings of another SPHIS department

*List of Acceptable Biostatistics (PHST) Courses

PHST 624 Clinical Trials I
PHST 650 Advanced Topics in Biostatistics
PHST 680 Biostatistical Methods I
PHST 681 Biostatistical Methods II
PHST 661 Probability
PHST 662 Mathematical Statistics
PHST 683 Survival Analysis
PHST 684 Categorical Data Analysis
PHST 682 Multivariate Analysis

**List of Acceptable Elective Courses in Public Health Sciences (PHxx)

PHEP 606 Genetic and Molecular Epidemiology
PHEP 611 Nutritional Epidemiology
PHEP 612 Epidemiology and Bioterrorism
PHEP 613 Epidemiology of Aging
PHEP 615 Epidemiology of Maternal/Child Health
PHCI 671 Preventive Medicine I
PHCI 672 Preventive Medicine II
PHCI 605 Survey Research Methods
PHCI 611 Introduction to Clinical Epidemiology
PHEH 650 Advanced Topics in Environmental and Occupational Health
PHKC 650 Advanced Topics in Health Knowledge and Cognitive Sciences
PHMS 650 Advanced Topics in Health Management and Systems Science

Additional courses may be added pending their development by other departments in the School of Public Health and Information Sciences

PHD Program Tracks in Epidemiology and Health Services & Outcomes Research: Standard Curricula

Program of Study

Upon admission to the PhD program, each student will be assigned a faculty advisor who will work with the student to develop a Program of Study that will identify the track, Epidemiology or Health Services and Outcomes Research, and associated required and optional coursework.

Qualifying Exams

Students will be eligible to sit for the Doctoral Qualifying Examination after completion of two semesters of required coursework. Successful completion of the exam will admit the student to doctoral candidacy. Students who do not successfully complete the exam may be required to take additional or remedial coursework and will be allowed one opportunity to retake the exam.

Dissertation

Dissertation work is generally started upon successful completion of the Doctoral Qualifying Exam. Exceptions may be granted upon appeal to the department faculty. Dissertation research may be credited at no more than 9 hours per semester as PHEP 777.

PhD Track in Epidemiology

Competencies

To graduate, students in the PhD program must demonstrate the following competencies:

- In depth knowledge of the history and philosophy of epidemiology
- Mastery of experimental and observational study designs and the ability to identify optimal designs for specific hypotheses
- Ability to develop and apply
    - °Questionnaires
    - °Biomarkers for health status, exposure and susceptibility
- Mastery of multivariate analytic methods for evaluating risk and prognosis
- Ability to critically evaluate the published epidemiologic research
- Expertise in one or more epidemiologic specialty such as nutritional, molecular, genetic, cancer, or chronic disease epidemiology
- Practical knowledge of issues in research management including:
    - °Formation and leadership of multidisciplinary teams
    - °Staffing, budgeting, tracking
    - °Subject recruitment and retention
    - °Data quality control and data safety management
    - °Funding mechanisms and grantsmanship
    - °Research ethics and regulations
- Professional quality peer-review, oral and poster presentation, report, grant, and manuscript writing
- Mentoring of junior-peers

Minimum Requirements

84 Total Credit Hours

- 36 credit hours required for MS or equivalent from an accepted program
- 39 credit hours of required coursework including:
    - 9 credit hours of required seminars
    - 6 credit hours in minor area of concentration
- 9 credit hours of dissertation research

Schedule of Courses

Year 3 – Fall Semester

PHEP 701 Advanced Epidemiologic Methods (3)
PHEP 702 Epidemiologic Research Management (3)
PHEP 613 Epidemiology of Aging (3)
Minor Elective (3)

Year 3 – Spring Semester
PHEP 611 Nutritional Epidemiology (3)
PHEP 615 Epidemiology of Maternal/Child Health (3)
PHEP 750 Seminars in Epidemiology (3)
Minor Elective*(3)

Qualifying Exam

Year 4 – Summer Semester
PHEP 777 Dissertation Research (optional) (3)

Year 4 – Fall Semester
PHEP 606 Molecular/Genetic Epidemiology (3)
PHEP 612 Epidemiology and Bioterrorism (3)
PHEP 750 Seminars in Epidemiology (3)
PHEP 777 Dissertation (3)

Year 4 – Spring Semester
PHEP 750 Seminars in Epidemiology (3)
PHEP 777 Dissertation (9)

Seminars in Epidemiology
Students in the PhD concentration in Epidemiology will be required to complete at least 9 credit hours of PHEP 750 Seminars in Epidemiology. This group course will be jointly taught by the faculty of the department and designed to provide a collegial experience that provides an opportunity to integrate learning from other courses, discuss hot topics, brain-storm about research ideas, and acquire professional skills in scientific manuscript and grant writing, oral and poster presentations, grantsmanship and peer-review.

Minor Requirement
As a part of their approved Program of Study, students will be required to complete 6 hours of coursework in a minor field of concentration. Areas directly relevant to the science of epidemiology are preferred including, but not limited to, biostatistics, bioinformatics, medical geography, molecular or population genetics, environmental health, toxicology, microbiology, health services research, outcomes research, health knowledge and behavior. These courses may be selected from ones offered within the School of Public Health and Information Science, other departments within the University, or from sources outside the University with permission and acceptance of credit by the Graduate School.

*List of Acceptable Courses for PhD Minor Elective

PHST 624 Clinical Trials I
PHST 650 Advanced Topics in Biostatistics
PHST 680 Biostatistical Methods I
PHST 681 Biostatistical Methods II
PHST 661 Probability
PHST 662 Mathematical Statistics

PHST 683 Survival Analysis
PHST 682 Multivariate Analysis
PHST 684 Categorical Data Analysis
PHST 710 Advanced Statistical Computing
PHST 711 Advanced Statistical Computing II
PHST 724 Advanced Clinical Trials
PHST 782 Generalized Linear Models
PHST 783 Advanced Survival Analysis
PHST 785 Nonlinear Regression
PHBI 750 Statistical Methods for Bioinformatics
PHBI 751 High-throughput Data Analysis
PHEH 650 Advanced Topics in Environmental and Occupational Health
PHKC 650 Advanced Topics in Health Knowledge and Cognitive Sciences
PHMS 650 Advanced Topics in Health Management and Systems Science
GEOG 657 Geographic Information Systems
GEOG 656 Spatial Statistics
PHTX 630 Toxicology: Principles and Application
PHTX 618 Topics in Pharmacology & Toxicology
PHTX 607 Seminar in Genetics and Molecular Medicine
PHTX 661/BIOC 661 Molecular Mechanisms of Toxicology
BIOC 660 Molecular Endocrinology
BIOC 641 Advanced Eukaryotic Genetics
BIOC 667/668 Molecular Biology
BIOC 675 Cancer Biology
EXP 600 - Physiology of Exercise
EXP 605 - Human Physiology
MBIO 601 Molecular Microbiology (Introductory to Infectious Diseases)
MBIO 602 Introduction to Immunology
MBIO 658 Cellular and Molecular Immunology
MBIO 670 Molecular Virology
MBIO 685 Microbial Physiology
MBIO 687 Microbial Pathogenesis
MBIO 618 Topics in Advanced Microbiology
MBIO 680 Genetics of Infectious Diseases
PHZB 605 Systemic Physiology I
PHZB 611 Advanced Human Physiology
NURS 670 Cancer Epidemiology and Pathophysiology

Students may petition to take courses not on this list with approval of the instructor and the Chair of the Department of Epidemiology and Clinical Investigation Science. All students must provide a written rationale for their choice of minor coursework in a Program of Study.

PhD in Health Services and Outcomes Research

Competencies

To graduate, students in the PhD program must demonstrate the following competencies:

- In depth knowledge of the history and philosophy of health services & outcomes research
- Mastery of experimental and observational study designs and the ability to identify optimal designs for specific hypotheses
- Ability to develop and apply
    - °Methods for evaluating health care systems
    - °Methods for assessing population and individual health status, including questionnaires for quality of life, disability and other disease outcomes
    - °Biomarkers for disease progression, prognosis, survival
- Competency with statistical analytic methods used in health services & outcomes research
- Ability to critically evaluate the published research
- Expertise in one or more specialty such as health services research, outcomes research, clinical epidemiology, or clinical trials
- Practical knowledge of issues in research management including:
    - °Formation and leadership of multidisciplinary teams
    - °Staffing, budgeting, tracking
    - °Subject recruitment and retention
    - °Data quality control and data safety management
    - °Funding mechanisms and grantsmanship
    - °Research ethics and regulations
- Professional quality peer-review, oral and poster presentation, report, grant, and manuscript writing
- Mentoring of junior-peers

Minimum Requirements

42 Total Credit Hours beyond the Master's degree

32 credit hours of coursework including

18 hours of required courses

14 hours of electives

10 credit hours of dissertation research

Schedule of Courses

Fall I Semester

PHCI 603 Program Evaluation (2)
HADM 620 Introduction to the Business of Health Care Systems (3)
PHCI 671 Preventive Medicine I: Community Health (2)
Electives* (5)

Spring I Semester

PHCI 604 Quality Assessment in Health Care (2)
PHCI 605 Survey Research Methods (2)
PHCI 672 Preventive Medicine II: Individual Health Assessment and Risk Factor Modification (2)
Select 1 of the following:

- PHCI 613 – Epidemiology of Cancer (1)

- PHCI 612 – Epidemiology of Cardiovascular Disease (1)
- PHCI 614 – Epidemiology of Infectious Diseases (1)

Electives* (3)

Summer II Semester

PHCI 799 Dissertation Research (optional) (6)

Fall II Semester

Select 2 of the following:

- PHCI 642 – Programs and Research in Maternal and Child Health (1)
- PHCI 643 – Programs and Research in Adult Health (1)
- PHCI 644 – Programs and Research in Geriatric Health (1)
- PHCI 645 – Programs and Research in Women's Health (1)
- PHCI 646 – Programs and Research in Minority Health (1)
- PHCI 647 – Programs and Research in Urban Health (1)

Electives* (6)

PHCI 799 Dissertation Research (2)

Spring II Semester

Select 2 of the following:

- PHCI 642 – Programs and Research in Maternal and Child Health (1)
- PHCI 643 – Programs and Research in Adult Health (1)
- PHCI 644 – Programs and Research in Geriatric Health (1)
- PHCI 645 – Programs and Research in Women's Health (1)
- PHCI 646 – Programs and Research in Minority Health (1)
- PHCI 647 – Programs and Research in Urban Health (1)

PHCI 799 Dissertation Research (8)

* Elective courses may be taken from either the PHCI or PHEP series of courses, based on the student's Program of Study. Electives may also be selected from the recommended list for the PhD track in Epidemiology with approval of the instructor, student's advisor, and department Chair.

The Department of Health Knowledge and Cognitive Sciences

https://www.sphis.louisville.edu/hkcs_home.cfm
(502) 852-2491

Department Faculty

Chair
Richard Wilson, D.H.Sc., M.P.H.

Professors
Ronald M. Atlas, Ph.D.
Richard D. Clover, M.D.
William P. McKinney, M.D.

Assistant Professor
Ruth Carrico, Ph.D.
Muriel Harris, Ph.D., M.P.H.
A. Scott LaJoie, Ph.D., M.S.P.H.
Peter L. Walton, M.D.

Programs
The Department of Health Knowledge and Cognitive Sciences represents a unique and innovative approach to key aspects of health information sciences, including health informatics. The Department's research focus is on health information utilization by and effects on individuals, including traditional and automated techniques in such areas as semantics and vocabularies, information access and integration, risk communication, and decision-making. Partnerships exist or are being formed with local healthcare organizations, other departments and schools in the University, and government and commercial entities.

The Department of Health Management and Systems Sciences

https://www.sphis.louisville.edu/hmss_home.cfm
(502) 852-2491

Department Faculty

Chair
Robert J. Esterhay, M.D.

Professors
Stanley A. Gall, M.D.
Rob P. Steiner, M.D., M.P.H., Ph.D.
Larry I. Palmer, LLB (Associate/Joint Appointment)

Associate Professors
Robert Slaton, Ed.D.
Adewale Troutman, M.D., M.P.H.

Assistant Professors
Raymond E. Austin, Ph.D.
Barry Wainscott, M.D., M.P.H.

The Department of Health Management and Systems Sciences focuses on health systems structures, properties, and behaviors, including effects of and on people and organizations and methods for implementing change.

Interest areas include health information management, health services research, health economics, health regulations and policies, and the structure and dynamics of networks related to information management and systems.

The Department is collaborating with other groups in the University, Louisville Metro Health Department, Kentucky Department for Public Health, Kentucky Cabinet for Health and Family Services, as well as state and local healthcare organizations.

The Department is participating with the Department of Health Knowledge and Cognitive Sciences in courses in health informatics.

Course Descriptions

Department of Biostatistics and Bioinformatics (PHBI/PHDA/PHST)

PHBI 750 Statistics for Bioinformatics
Development of high throughput technologies has changed the face of biological sciences. The high dimensional complicated data generated from DNA sequences, amino acid sequences, genetic maps and polymorphic marker data etc. help to unravel the mysteries of many biological processes. However, sophisticated statistical methods and computational tools are needed to analyze these data. This course will introduce basics of genetics and introduction of such data, knowledge of statistical inference and probability, Introduction to stochastic processes, Analysis of DNA and protein sequences, Hidden Markov models, Evolutionary models etc. This course is developed for individuals interested in pursuing research in computational biology, genomics and bioinformatics. Students are expected to be familiar with some elementary statistics and probability concepts.

PHBI 751 High throughput data analysis
High-throughput technology has changed the dimension of biotechnology. The array of high-speed, highly automated biotechnical equipment DNA sequencers, microarray (DNA, Protein), proteomic analyzers (mass spectrometers) and cell sorters are all designed to capture and process vast amounts of biological data at high speeds. We will briefly discuss some of these technologies. Secondly, this course will concentrate with the process of microarray data mining (analysis) from beginning to end. In particular, this course will provide the researchers and practitioners guidelines to use appropriate statistical methodology for experimental design, image processing, normalization, identifying differentially expressed genes, clustering and classification techniques etc. Introduction to S-PLUS/R library for the data analysis will also be attempted

PHDA 601 Introduction to Medical Decision Analysis
Introduction to decision analysis in health care. Students will learn the principles and application of decision analysis and to use decision analysis software. Topics: identification of problems suitable for decision analysis, utility theory and measurement, importance and estimation of probability, creation/analysis of decision trees including sensitivity analysis, advanced methods of decision modeling, and illustration and presentation of results.

PHDA 603 Biostatistics-Decision Science Public Health Practicum I
A student is assigned to a health care agency and works with the staff of that agency on a policy issue facing that agency.

PHDA 604 Biostatistics-Decision Science Public Health Practicum II
A study is assigned to a health care agency and works with the staff of that agency on a policy issue facing that agency.

PHDA 605 Ethics and Bioethical Decision Making
A study of ethical issues in contemporary bioethics. Ethical dilemmas in medical science will be analyzed for the philosophical assumptions, interplay of facts and values, the role

of rules and principles, and the contextual factors involved. Such topics as abortion, elective death, genetic engineering, organ transplants, and health care reform will be explored.

PHDA 606 Health, Law & Policy
Introduce students to the broad legal and policy context of health care, with diverse topical areas that are useful for demonstrating the broad range of legal and policy responses.

PHDA 663 Decision Analysis
This course teaches methods for making decisions in complex situations especially those involving conflicting values, uncertainty, or risk. Thinking from the early foundations in economics through current methods is covered. Included are methods of value or utility elicitation and probability assessment. Analysis methods covered include decision trees, conjoint measurement, and multiattribute utility theory. Also covered are findings from psychology on cognitive errors, which are common in decision making.

PHDA 666 Master's Thesis Research
Mentored research; Thesis Preparation.

PHDA 673 Biostatistics-Decision Science Research
A doctoral student rotates through at least two research projects of the Biostatics-Decision Science Program faculty, conducting research and learning the details of the design, implementation, and analysis of the project. PHDA 673 must be taken initially during the first year of residence in the doctoral program. PHDA 673 may be repeated once, focusing on one research project of the Program Faculty, with the consent of the Graduate Studies Director or the student's major professor.

PHDA 690 Utility Theory and Assessment
A seminar course to study the theory, assessment, and use of utility in health care measurement and research.

PHDA 701 Advanced Medical Decision Making
A course to study advanced features of Medical Decision Making including theory, applications, model building, and analysis in health care research.

PHDA 777 Dissertation Research
The Ph.D. student may take a total of up to 24 hours credit for the planning, data collection, analysis, and writing of the research project that results in the doctoral dissertation. PHDA 777 must be taken under the direction of the student's major professor. Dissertation research hours are seen as a major component of the doctoral program.

PHST 600 Introduction to Biostatistics for Public Health
An introduction to descriptive and inferential statistics including descriptive methods and graphing, binomial and Gaussian probability theory, estimation, confidence intervals, hypothesis testing, correlation, and regression. One-, two- and multi-group parametric and nonparametric methods will be introduced. Sampling distributions covered include the Z, t, F, and Chi-squared distributions. Multivariate methods will be introduced.

PHST 602 Biostatistics-Decision Science Seminar
Students are given an evaluation protocol for each semester and must turn in a written evaluation of the presentation. The protocols will vary according to the presentation topic, but each will focus on a critical component of research design or analysis.

PHST 610 Statistical Computing and Data Management for Public Health
This course addresses data processing, data management and statistical computing tools utilized most often in the field of public health. Additionally, this course will allow the public health student to master skills in preparing and analyzing public health research data through the use of software packages such as Excel, EPI DATA and SPSS. Emphasis will be on storing and manipulating research data, along with elementary and moderate level data analyses.

PHST 620 Introduction to Statistical Computing
This course addresses fundamentals of statistical computing with special emphasis on software tools employed most often in biostatistics. This course will develop essential skills associated with the preparation and statistical analysis of research data through the use of statistical software packages, such as SAS, SPSS and other software. Emphasis will be on research data management, implementation and interpretation of basic statistical procedures, and documentation of coding and other work.

PHST 630 Applied Statistical Methods
Topics will include linear and multiple regression, analysis of variance, analysis of covariance, logistic regression, survival analysis using Cox regression, and repeated measures. These will be addressed from an applications standpoint, without derivations or other theoretical development. Emphasis will be placed on appropriate use of the different models and interpretation of parameter estimates, etc. Students completing this course will develop the ability to apply statistical methods as implemented in commonly used statistical software and facilitate communication between health sciences researchers and statisticians with regard to interpretation of data analyses and research findings.

PHST 640 Statistical Methods for Research Design in Human Studies
Statistical methods for clinical research and interpretation of the literature. Course includes basic features of design and analysis of clinical research studies looking at cause and effect relationships, surveys, case control studies, cohort studies, and randomized controlled trials. Topics include sampling, sample size calculations, matching, confounding, and methods for analysis of simple and complex studies.

PHST 650 Advanced Topics in Biostatistics
A treatment of one or more topics in advanced biostatistics not usually covered in a regularly offered course. May be repeated under different subtitles.

PHST 660 Mathematical Tools
This course focuses on the basic techniques of analytic geometry, differential and integral calculus, and matrix algebra; topics include limits, the chain rule, higher-order derivatives, partial derivatives, integration by parts, improper integrals, multiple integrals, sequences and series, vector and matrix arithmetic, and eigenvalues

PHST 661 Probability
This course in introductory probability theory; includes probability spaces, random variables, probability distributions, moments, moment generating functions, mathematical expectation, joint distribution, transformations of random variables, sampling distributions.

PHST 662 Mathematical Statistics
This course in introductory statistical theory; includes limiting distributions, central limit theorem, point estimation, maximum likelihood estimation, least squares, sufficiency and completeness, confidence intervals, Bayesian estimation, Neyman-Pearson theory of hypothesis testing, statistical power, uniformly most powerful tests, likelihood ratio tests, non-central distributions, advanced topics as time permits.

PHST 671 Special Topics in Biostatistics and Decision Science
A treatment of one or more topics in advanced Biostatistics and /or Decision Science not usually covered in a regularly offered course. May be repeated under different subtitles.

PHST 675 Independent Study in Biostatistics
Advanced study conducted under the direction of a faculty member. May be repeated under different subtitles.

PHST 679 Practicum Experience: Biostatistics and Bioinformatics
As a central experience and requirement for the Master of Public Health degree in the School of Public Health and Information Sciences, students must complete a 6 credit hour course—260-contact-hour project—in an external health/health-related setting. This practicum experience, including a final paper or written report and oral presentation, constitutes the final examination. A site for each practicum project may be selected by the student or by one of the School's departments. Practicum sites will be selected based upon student's major.

PHST 680 Biostatistical Methods I
A mathematically sophisticated presentation of principles and methods of: exploratory data analysis; statistical graphics; point estimation; interval estimation; hypothesis testing of means, proportions and counts; chi square analysis; rate ratio; and Mantel- Haensel analysis. Matrix algebra is required. Data sets will be analyzed using statistical computer packages; examples will be drawn from the biomedical and public health literature. Emphasis will be placed on methods and models most useful in clinical research.

PHST 681 Biostatistical Methods II
A mathematically sophisticated introduction to: general linear models; regression; correlation; analysis of covariance; one and two-way analysis of variance; and multiple comparisons. Matrix algebra is required. Data sets will be analyzed using statistical computer packages; examples will be drawn from the biomedical and public health literature. Emphasis will be placed on methods and models most useful in clinical research.

PHST 682 Multivariate Statistical Analysis

Focuses on the multivariate statistical methods; topics include the multivariate normal distribution, inference for mean vectors; inference for covariance and correlation matrices, analysis of covariance structure, analysis of serial measurements, factor analysis, and discriminant analysis. Instruction will also be given in the proper use of software to carry out these analyses. Emphasis will be placed on methods and models most useful in clinical research.

PHST 683 Survival Analysis
Focuses on statistical methods for analyzing survival data, including both parametric and nonparametric methods. Topics include life-table analysis, proportional hazard models, log-rank tests, parametric survival distributions, graphical methods, and goodness- of -fit tests. Emphasis will be placed on methods and models most useful in clinical research.

PHST 684 Categorical Data Analysis
Focuses on statistical methods for analyzing survival data, including both parametric and nonparametric methods. Topics include life-table analysis, proportional hazard models, log-rank tests, parametric survival distributions, graphical methods, and goodness- of -fit tests. Emphasis will be placed on methods and models most useful in clinical research.

PHST 691 Bayesian Inference and Decision
Focus on the use of Bayesian probability and statistics in both scientific inference and formal decision analysis. The frequency and subjective interpretations of probability are explored, as well as probability and decision making.

PHST 697 Integrating Learning and Experience in Public Health
The course is independent study for bringing together the student's studies and real-world activities in public health into a culminating experience. The student will integrate what he or she has learned in the classroom, in presentations, in informal discussions, in the practicum, and elsewhere into a paper, a poster, and a presentation. These will represent the student's practicum experience and results within the context of the concepts and techniques acquired by the student from participation in the MPH program.

PHST 710 Advanced Statistical Computing I
This course will cover modern/classical statistical/biostatistical methods like smoothing techniques and data summaries, linear models, generalized linear models, modern nonlinear regression techniques, multivariate statistics using S-PLUS/R and SAS. Several real data examples will be analyzed following the 4th Edition of the book titled "*Modern Applied Statistics with S*" by Venables and Ripley.

PHST 711 Advanced Statistical Computing II
The course covers advanced topics in statistical computing, with an emphasis on biostatistical applications. Topics include matrix factorization methods, numerical optimization, the EM algorithm, random number generation, Monte Carlo techniques, simulation, randomization and resampling methods, bootstrapping, and recursive partitioning. Computer programming will be conducted using MATLAB, R, and SAS IML.

PHST 724 Advanced Clinical Trials

Advanced statistical methods for design and analysis of clinical trials. Content includes analysis of complex clinical trial designs, including post-stratification, cross-over, and phases I, II, and III clinical trials. Sample size calculations will be covered. Interim analysis methods and sample size re-estimation methods will be developed.

PHST 725 Design of Experiments
The course introduces experimental design principles and covers specific designs in detail. Topics include the completely randomized design, the randomized complete block design, cross-over designs, nested and hierarchical designs, factorial treatment arrangements, incomplete block designs, response surface methodology, and optimal designs. Concepts will be illustrated using examples from the health sciences.

PHST 726 Clinical Trials Statistics Laboratory
Statistical methods laboratory to accompany PHCI 624: Clinical Trials I, a.k.a. Design of Clinical Trials. Statistical methods described in Clinical Trials I will be demonstrated and taught with hands-on examples and homework problems. Methods covered include randomization methods, sample size calculations, post-stratification, Phase II early-stopping designs, repeated-measures analysis, survival analysis, and methods to avoid or reduce multiplicity.

PHST 762 Advanced Statistical Inference
This course is a mathematically sophisticated introduction to the theory and methods of statistical inference. Students will learn fundamental technical tools that are essential to carry out methodological research in the field of Biostatistics. Emphasis will be placed on how to correctly propose statistical methods in a general setting including concepts such as asymptotic unbiasedness, robust variance estimation and efficiency.

PHST 780 Advanced Nonparametrics
A mathematically advanced introduction to theory and methods of nonparametric statistical methods. Course will be useful to students planning to analyze data that do not follow a standard parametric distribution.

PHST 781 Advanced Linear Models
An introduction to the theory of linear models, with an emphasis on health sciences applications. Topic coverage includes projections, distributions of quadratic forms under normality, estimation procedures, general linear hypotheses, estimating and testing linear parametric functions, simultaneous inference, multifactor ANOVA models, hierarchical linear models, mixed effects models, and covariance parameter estimation methods. Examples will be illustrated using advanced statistical software.

PHST 782 Generalized Linear Models
Advanced statistical methods using inference based on the exponential family of distributions. Relationship to linear and non-linear regression. Theoretical development of link functions. Model-building and assessment of goodness-of-fit. Estimation and hypothesis testing. Correlated response methods using generalized estimating equations.

PHST 783 Advanced Survival Analysis
This course is a mathematically advanced introduction to the theory and methods of survival analysis. This course will be useful for students planning to analyze complex

event time data including multivariate survival and multistate data. Also it will be useful for students who are planning to carry out research in the general area of survival analysis.

PHST 785 Non-Linear Regression
Advanced statistical methods for non-linear models. Review of linear models and intrinsically linear models. Survey of generalized linear models. Development of nonlinear models, with emphasis on uses in Phase I clinical trials, relationship to differential equations. Estimation and goodness-of-fit. Sample size methods.

Department of Environmental and Occupational Health

PHEH 600 Introduction to Environmental and Occupational Health
This course will provide students the basic concepts and principles of environmental health, including environmental agents in water, air and soil, such as chemicals, biological, and physical agents and other important factors that may constitute a risk to humans. It will also provide basic principles and methods of risk assessment and risk management. This course is designed for all public health practitioners and meets the environmental health requirement for all professional master's degree programs.

PHEH 610 Occupational Health and Safety
This course will focus on the prevention of work-related injuries and illnesses as well as the management and control of workplace hazards. Information on the identification of workplace hazards, governmental regulations and issues pertaining to specific industries, and safety management programs will also be presented. The course will also include discussion of principles of ergonomics, including the role of job design in maximizing productivity and injury prevention.

PHEH 620 Global Issues in Environmental and Occupational Health
This course will focus on the nature, impact and determinants of health problems among disadvantaged populations in developing countries. A review of the history of international health and key contemporary issues involving global policies will be discussed. This course provides an overview of the physical, chemical, and biological determinants of global environmental change and of potential consequences of these changes on human health.

PHEH 650 Advanced Topics in Environmental and Occupational Health
This course will build upon principles acquired in the introductory course entitled Introduction to Environmental Health Science (course number) by presenting advanced concepts of environmental and occupational health sciences and novel factors that may constitute a risk to humans in industrialized and developed countries. Policy required for regulation and alternative strategies for prevention and control of environmental and occupational hazards will be discussed. This course provides in depth examination of current scientific literature on environmental and occupational health published articles.

PHEH 679 Practicum Experience: Environmental and Occupational Health
As a central experience and requirement for the Master of Public Health degree in the School of Public Health and Information Sciences, students must complete a 6 credit hour

course—260-contact-hour project—in an external health/health-related setting. This practicum experience, including a final paper or written report and oral presentation, constitutes the final examination. A site for each practicum project may be selected by the student or by one of the School's departments. Practicum sites will be selected based upon student's major.

PHEH 697 Integrating Learning and Experience in Public Health
The course is independent study for bringing together the student's studies and real-world activities in public health into a culminating experience. The student will integrate what he or she has learned in the classroom, in presentations, in informal discussions, in the practicum, and elsewhere into a paper, a poster, and a presentation. These will represent the student's practicum experience and results within the context of the concepts and techniques acquired by the student from participation in the MPH program.

Department of Epidemiology and Clinical Investigational Sciences (PHCI/PHEP)

PHCI 501 From Bench to Bedside: Introduction to Clinical Research
Designed to introduce students in health professions to the intellectual challenges and rewards of clinical research.

PHCI 521 Introduction to Clinical Research Administration
Students will be introduced to the field of clinical research and how it is organized, conducted and regulated.

PHCI 522 Intermediate Clinical Research Administration
Students will be introduced to the specific operations of a clinical trail.

PHCI 601 Evaluating Health Care Literature
A review of formal methods for evaluating the medical literature including those of the University of Rochester Clinical Pharmacology Group; and the Evidence Based-Medicine Group. Meta-Analysis: sources of information, using medical informatics, selection of trails, pooling of data, analyzing pooled data and interpreting results, problems and limitations of meta analysis will be covered.

PHCI 602 Health Services and Outcomes Research
Understanding the multiple dimensions of health status and conceptual basis for measuring health status and outcomes; review and evaluation of the strengths and weaknesses of common measures. Formalization of research questions and design of appropriate methodology including sample selection, measurement, data, collection and statistical analysis.

PHCI 603 Program Evaluation
Describes the major strategies for formative, process and outcome evaluation of health care interventions with particular emphasis on the evaluation of government sponsored programs in healthcare.

PHCI 604 Quality Assessment in Health Care

This course would review the major efforts to measure Quality in health care including the development of the HEDIS,SF-36 and other measures, alternative methods risk of adjustment, and the organizations involved in health care quality assurance and accreditation.

PHCI 605 Survey Research Methods
Previews the advantages and disadvantages of alternative methodologies for the collection of health data including record reviews, face-to -face and telephone interviews as well as the design of data collection instruments, scale construction, and data management. Special consideration is given to the sources of bias in alternative data collection strategies and to the reliability and validity of the data. Attention is also given to data management issues.

PHCI 606 Health, Law & Policy
Will introduce students to the broad legal and policy context of health care, with diverse topical areas that are useful for demonstrating the broad range of legal and policy responses.

PHCI 610 New Drug & Device Development
This course introduces the rationale for, practical aspects of, and new issues in drug and device development as well as the relevant industry and government policies and regulations.

PHCI 611 Introduction to Clinical Epidemiology
A comprehensive introduction to public health with an emphasis on population-based approaches to health issues. Both classical and clinical epidemiology will be presented. The course will cover health status indicators, including morbidity, mortality, vital statistics and measures of quality of life. The global applications of epidemiology and international health through investigations of the leading causes of morbidity and mortality in developed, developing and under developed nations. Epidemiological concepts will be linked with computer exercises to re-enforce learning and practical applications

PHCI 612 Epidemiology of Cardiovascular Disease
Surveys the current clinical epidemiology studies operating nationally for research on cardiovascular disease (CVD) outcomes in the United States and Europe. Focuses on federal agency documents announcing these programs, and on published literature related to the design and conduct of these studies.

PHCI 613 Cancer Epidemiology
This course reviews the epidemiology of selected cancers and the relationship between environmental and genetic factors in cancer etiology. The roles of risk assessment and screening for cancers in selected organ systems are also addressed.

PHCI 614 Infectious Disease Epidemiology
This course covers epidemiology of infectious diseases with an emphasis on basic methods as applied to dynamics of transmission, vaccine effectiveness, acute respiratory infections including tuberculosis, diarrheal diseases, sexually transmitted diseases (e.g. HIV), and hepatitis.

PHCI 621 Fundamentals of Biostatistics
An introduction to descriptive and inferential statistics including measurement theory; Bayesian Probability; the logic of hypothesis testing (alpha, beta and power); confidence intervals; the Normal, Student's t, Chi Square and F sampling distributions and their application will be covered. Computer assisted instruction and laboratory assignments including an introduction to SAS and SPSS.

PHCI 622 Case Control Studies
Advantages and disadvantages of case-control designs, population based controls, matching, sources and types of bias, confounding, statistical methods including Chi Square, loglinear methods, analysis of variance, logistic regression, and McNemar's Test.

PHCI 623 Design and Analysis of Cohort Studies
Advantages and disadvantages of prospective and retrospective designs, sources of bias in cohort studies, quality of data in retrospective designs, registries, case loss, controlling for confounders, cross classification and procedural methods, multivariate statistical methods, and applications of the general linear model.

PHCI 624 Clinical Trials I: Planning and Design
Phases of trials, experimental designs, inclusion and exclusion criteria, randomization and blinding, the general linear model and mixed and fixed effects repeated measures analysis of variance, intention to treat methods, survival analysis.

PHCI 625 Clinical Trails II
Protocol development; patient recruitment and retention; safety and efficacy; benefit to risk assessment; monitoring and auditing trials; terminating or extending clinical trials; and, regulatory, patent and legal considerations.

PHCI 626 Clinical Trials III: Practicum in Clinical Trials
Designed to give the CREST trainee practical experience in all stages of a Phase III or Phase IV clinical trial including: IRB submission, patient recruitment, safety monitoring and data analysis in accordance with GCP and ICH guidelines.

PHCI 628 Fundamentals of Biostatistics Computing Laboratory
Provides students with an opportunity to learn the biostatistical computing techniques and computing programs required in PHCI 621 Fundamentals of Biostatistics.

PHCI 629 Special Topics in Epidemiologic Research Methodology
Provides an opportunity for students to address specific methodological issues such as bias or confounding or specific statistical problems in clinical research. Topics covered depend upon student interest and faculty availability.

PHCI 630 Pharmacovigilance
Review of Good Clinical Practice (GCP) requirements and quality assurance methods for clinical trials and post-marking surveillance.

PHCI 631 Social and Behavioral Sciences in Health Care

This course introduces public health students to social science perspectives and research on selected topics in health and health care. The course is organized into the following units: the sociology of knowledge and health behavior modeling; the social distribution of health, disease and utilization by social variables; social problems (e.g., violence and substance abuse) as public health concerns; health care industry and policy health behavior and the psychology of illness; international health and health care systems; and genetics and public health.

PHCI 632 Ethical Conduct of Health Care Research
An introduction to the ethical principles and topics of medical research and data collection and evaluation. The basic ethical principles to be covered include autonomy, beneficence, rights and justice. Specific topics include: the ethics of treatment of patients versus research on human subjects; informed consent including proxy consent; subject confidentiality in research and publication; and the special problems of pediatric research.

PHCI 633 Legal Aspects of Biomedical, Behavioral & Public Health Research
Students will examine the legal, ethical, and policy aspects of current topics and controversies in research ethics, including topics related to human subject protection, research integrity and conflicts of interest.

PHCI 642 Programs and Research in Maternal and Child Health
Review of significant Federal and State programs targeted at improving the health of newborns and mothers.

PHCI 643 Programs and Research in Adult Health
An intermediate, survey class of the “other chronic diseases”. Focus of the course content is on describing the myriad disease control and client support programs implemented through public health departments, voluntary agencies, and related agencies (e.g. universities and institutes).

PHCI 644 Programs and Research in Geriatric Health
Review of special research issues related to the geriatric population, which will include health service, methodological and conceptual issues such as frailty and comorbidity.

PHCI 645 Programs and Research in Women’s Health
A review of significant Federal and State programs targeted at improving the health of women. The organization, delivery of service and evaluation of access, cost-effectiveness and quality is stressed.

PHCI 646 Programs and Research in Minority Health
A review of significant Federal and State programs targeted to improve the health of minorities. The organization, delivery of service and evaluation of access, cost-effectiveness and quality is stressed.

PHCI 647 Program & Research in Urban Health
A review of significant Federal and State programs targeted at improving health of the population in the urban environment. The organization, delivery of service and evaluation of access, cost-effectiveness and quality is stressed.

PHCI 650 Introduction to Medical Decision Analysis
Introduction to decision analysis in health care. Students will learn the principles and application of decision analysis and to use decision science software. Topics: identification of problems suitable for decision analysis, utility theory and measurement, importance and estimation of probability , creation/analysis of decision trees, including sensitivity analysis, advanced methods of decision modeling, and illustration and presentation of results.

PHCI 651 Introduction to Environmental Health
The course will lay a foundation for students to build upon their medical and scientific background in applying clinical skills in the resolution of real, in-the-field, community-based problems. The course will cover: Environmental molecular epidemiology; Environmental toxicology principles and practices; Exposure assessment in environmental sciences; Fundamentals of residential health surveillance; Fundamentals of occupational health surveillance; Air monitoring for toxic substances; principles and practices; Hazardous waste management; Fundamentals of health risk assessment.

PHCI 661 Introduction to Public Health Informatics
Students will learn the fundamentals of HTML; the use of MEDLINE, Ovid, PubMed, and Grateful Med; become familiar with the roles and domains for computer scientists, epidemiologists, policy makers and programmers in information system development; be able to think in terms of information systems and underlying technologic infrastructure; have a basic understanding of computer networking; understanding the basics of database management systems and current database technology.

PHCI 662 Health Care Economics
The course aims to provide a comprehensive groundwork in the economics of health care and a health care sector. The trainee will be able to effectively analyze issues in the health sector from an economic perspective and determine primary and secondary effects of change in the health care market. Attention is given to the basic theory and techniques of cost-benefit, cost-effectiveness and cost-utility analysis as well as methods for valuing outcomes.

PHCI 663 Role of Federal Government in Health Care
This course introduces non-lawyers to the important role of both the Federal and state governments in public health. Their roles in such issues as individual rights and privacy, public health initiatives, and legal rights to access health care are examined using judicial opinions, statutes and regulations.

PHCI 665 Genetics and the Law
Will explore the many legal issues in genetics, including but not limited to reproduction, access to health care, discrimination, forensics, and gene therapy.

PHCI 667 Reproductive Health Law & Ethics
Addresses technological developments in reproduction (e.g., acceptability of human cloning, stem cell research) which has raised a host of legal and ethical concerns.

PHCI 668 Legal Medicine

Focus on the legal principles and constraints applicable to health services and the health professions.

PHCI 669 Readings in Law, Medicine & Health
Deals with various special topics in law as they pertain to medicine and health. Particular focus will be directed towards current and emerging topics arising from developments in medicine and science.

PHCI 671 Preventive Medicine I: Community Health
This course focuses on the development, implementation and evaluation of disease prevention health promotion programs at the community level. Theories of community organization are reviewed with an emphasis on population based efforts to improve public health.

PHCI 672 Preventative Medicine II: Individual Health Assessment and Behavioral Risk Factor Modification
This course examines techniques for assessing and evaluating the health behaviors of individuals and on the techniques and strategies for modifying individual's risk factors for illness. Risk factors for cardiovascular disease, cancer, infectious diseases, STD's (e.g. HIV) and other chronic diseases are emphasized.

PHCI 699 Mentored Research-Thesis Preparation

PHCI 796 Effective Grant Writing
This course is designed to prepare students to write competitive grant proposals. Topics to be covered include overall strategy for grant writing, concerns commonly cited by reviewers, how NIH applications are reviewed, and grant administration.

PHCI 799 Dissertation Research

PHEP 601 Introduction to Epidemiology
This is an introductory course in the basic science of public health and preventive medicine. Epidemiology is taught from a conceptual as well as practical perspective. The emphasis of the course is for understanding fundamental concepts of disease occurrence in human populations. This class provides a broad synopsis of disease in the United States and around the world; it includes a survey of major causes of death and leading health challenges. In the process of discussing these global, national, regional and local disease patterns, basic epidemiological methods are presented, specifically focusing on terminology, study design, and issues of contemporary practice. This class will instruct non-statistical or non-epidemiological staff in the basic skills for conversing with epidemiologists, reading the professional disease control literature, and drawing upon epidemiological concepts. The course provides instruction in the fundamentals of epidemiological research; both observational approaches and structured methods (e.g., study designs). There is a small amount of calculation involved with the course [calculators should be brought to the class]. The class is taught through lectures, in-class exercises in reading the professional literature, and on-line exercises. This course aims to provide a familiarization with principles of epidemiological reasoning and research methods while surveying trends and patterns for disease in contemporary settings.

PHEP 602 Epidemiological Methods
This is a methods course in the design, conduct, and analysis of epidemiologic research studies [a.k.a. case-control, and cohort]. Classes will be conducted as lectures. The course will provide in-depth training with skills for the design and conduct, but especially the analysis of epidemiologic research studies. The course aims to provide a thorough orientation to these fundamental epidemiological research designs in their use for hypothesis generation, hypothesis testing, and with investigations of chronic disease risks in particular. Students are expected to have a basic understanding of epidemiological and biostatistical concepts, and methods. Likewise, students are expected to have professional-caliber writing and verbal communication skills. The course will not require extensive memorization, but will involve analytic calculations and a grasp of statistical software for their graded assignments. As an advanced skills class, timeliness and product quality will be graded.

PHEP 604 Epidemiology of Acute Infectious Disease
This course will discuss the epidemiology and prevention of infectious disease, focusing on diseases of major impact to world health and emerging diseases, emphasizing the interrelationships of biology and behavior and infectious agents. It will focus on new techniques for research and changes in understanding of disease biology, susceptibility, and pathogens. It will include discussion of the social burden of disease and impact of intervention strategies.

PHEP 606 Genetic and Molecular Epidemiology
The purpose of this course is to examine basic principles of Mendelian inheritance in humans and the fundamentals of gene actions, cytogenetics, biochemical genetics and population genetics.

PHEP 607 Epidemiology of Cancer
This is a survey course of the descriptive epidemiology and clinical studies in practice nationally for research on cancer outcomes in the United States and Europe. The course opens with conventional training in carcinogenesis and progresses to cancer biology. Next is the litany of ‘cancer of...” epidemiological profiles: incidence, prevalence, mortality, distribution, risk factors, high risk populations, key biological markers, priority populations, treatments, history of clinical studies/advances, active clinical trails, etc. From this foundation the class focuses on federal agency documents announcing emerging research programs, and priorities for research. The National Cancer Institute, American Cancer Society, Centers for Disease Control and select other agencies will be highlighted. The course will examine specific published literature related to the design and conduct of these studies. Attention will be given to evaluations of preventive services, clinical care and assessments of disparities related to cancer management outcomes.

PHEP 609 Epidemiology of Chronic Disease
This course provides an opportunity for students to address the epidemiology and prevention of cardiovascular disease, focusing on coronary heart disease, stroke, and end stage renal disease, emphasizing the interrelationships of biological and behavioral aspects. It focuses on established major modifiable risk factors for cardiovascular diseases, putative risk factors, and genetic susceptibility. It describes the social and

economic burden of disease and prevention strategies.

PHEP 611 Nutritional Epidemiology
The purpose of this course is to examine epidemiologic methodology in relation to nutritional measures, and to review the current state of knowledge regarding diet and other nutritional indicators as etiologic factors in disease. This course is designed to enable students to better conduct nutritional epidemiologic research and/or to better interpret the scientific literature in which diet or other nutritional indicators are factors under study.

PHEP 612 Epidemiology and Bioterrorism
This course provides an opportunity for students to address specific methodological approaches to the detection and response to outbreaks of illness linked to biothreat agents. Topics covered depend upon student interest and faculty availability.

PHEP 613 Epidemiology of Aging
This course introduces the demography of aging, epidemiology of chronic disease, functional impairment, dementia, and end of life issues, emphasizing the interrelationships of biological and behavioral aspects. It focuses on theories of aging, assessment of function and disability, and healthcare. It covers perspectives of aging and its implications for individuals, families, and society. It describes the economic impact of an aging society and the impact of a national health care system. It describes ethical and legal issues in a vulnerable population.

PHEP 615 Epidemiology of Maternal and Child Health
Concentrating on women of childbearing age, pregnant women, infants and children from one through 21 years, this course provides an introduction to the epidemiology of the health of women and children. The course will allow students to identify the public health basis of maternal and child health, and will provide an introduction to the epidemiology of maternal and child health, data-based needs assessment, and program evaluation.

PHEP 616 Disease Surveillance
This course will review issues and methods in the design and implementation of disease surveillance systems. The history of public health surveillance, existing surveillance systems, national and international, for reportable infectious diseases and cancer registries will be reviewed. The course will consider novel approaches to monitoring for sentinel events, linking multiple data systems, surveillance of syndromes and other health-related conditions, and applications to bioterrorism.

PHEP 617 Field Epidemiology
This course will focus on the practical aspects of doing field epidemiology, including topics such as: the organization of teams and methods for detecting and investigating disease outbreaks; data collection methods, including the collection, transport, and storage of biological and environmental samples; data analysis using Epi Info, GIS, and other statistical packages; interpretation and communication of findings to public health authorities, the press and general public; intervention, follow-up and evaluation methods; and ethical and legal issues.

PHEP 618 Epidemiologic Methods II
This course reviews epidemiologic methods including stratified and logistic regression analysis, survival and proportional hazards modeling and strategies for model building in multivariate analysis.

PHEP 619 Biology of Disease in Populations
This course provides an overview of the biology and basic pathophysiology of common acute and chronic diseases and conditions from the epidemiologic perspective.

PHEP 650 Advanced Topics in Epidemiology
The purpose of this course is to provide an opportunity for students to address specific issues in epidemiology.

PHEP 666 Thesis Research
This course is for mentored thesis research in the MS Program in Epidemiology. Students are required to complete 6 credit hours of research that culminates in a minimum 30 page original Master's thesis manuscript.

PHEP 679 Practicum Experience: Epidemiology
As a central experience and requirement for the Master of Public Health degree in the School of Public Health and Information Sciences, students must complete a 6 credit hour course—260-contact-hour project—in an external health/health-related setting. This practicum experience, including a final paper or written report and oral presentation, constitutes the final examination. A site for each practicum project may be selected by the student or by one of the School's departments. Practicum sites will be selected based upon student's major.

PHEP 697 Integrating Learning and Experience in Public Health
The course is independent study for bringing together the student's studies and real-world activities in public health into a culminating experience. The student will integrate what he or she has learned in the classroom, in presentations, in informal discussions, in the practicum, and elsewhere into a paper, a poster, and a presentation. These will represent the student's practicum experience and results within the context of the concepts and techniques acquired by the student from participation in the MPH program.

PHEP 701 Advanced Epidemiologic Methods
This course provides hands-on experience with advanced statistical methods in epidemiologic analysis under complex study designs and methods for critical analysis of published results and research proposals. Upon completion of this class, students will be able to:

- Describe multiple epidemiologic study designs, including matched case-control, cohort, longitudinal, family and sib designs, and clinical trials.
- Apply and appropriately interpret results from multivariate Cox Proportional Hazards analyses with time-dependent covariates
- Apply and appropriately interpret results from polytomous and ordinal logistic regression models

- Apply and appropriately interpret results from statistical analyses of familial and sib study designs, including tests of linkage and association.
- Demonstrate understanding of the principles and methods of application of meta-analysis of results from several epidemiologic studies
- Provide thorough, critical analyses of three or more published epidemiologic studies to be selected by the instructor
- Demonstrate understanding of the principles for critical review of an NIH-format epidemiology research proposal
- Demonstrate understanding of disease biology in study design, analysis, and critical review

PHEP 702 Epidemiologic Research Management
This course provides a comprehensive introduction to the practical methods necessary for conducting epidemiologic research including regulations, databases, sampling, recruitment and tracking, instrument design, and data quality control. Upon completion of this class, students will be able to:

- Describe various methods and sources for ascertaining cases of specific diseases or health related conditions for epidemiologic research, and their respective strengths and limitations
- Describe various methods and sources for sampling or selecting healthy controls, and their respective strengths and limitations
- Describe methods for recruiting and enrolling participants in population-based observational studies and clinical trials, and their respective strengths and limitations
- Describe methods for tracking subjects for follow-up in prospective studies, retention, and compliance with procedures in both observational studies and clinical trials
- Explain the consequences of problems in each of the above with regard to internal and external validity of study findings
- Develop and pilot test a questionnaire for participant or interviewer administration
- Design forms for tracking, recording, and monitoring quality control in the collection of study data from different sources, including questionnaire, physical exam, medical record, and laboratory, using computer systems
- Develop a manual of procedures for a specific study design
- Demonstrate understanding of human subjects research regulations, privacy laws, and research ethics

PHEP 750 Seminars in Epidemiology
Doctoral students engage with faculty as junior-peers to develop skills such as research proposal writing, grant budgeting, peer review, manuscript preparation, oral and poster presentation. The content of this course will vary from semester to semester based on the instructor and needs of the students. In general, upon completion of this class, students will be able to:

- Demonstrate ability to interact with faculty and peers in an professional manner
- Display accurate and appropriate understanding of human research ethics and regulations

- Form a research team with 2 or more students and develop a complete NIH-formatted "mock" research proposal, including budget, personnel, research environment, and research plan
- Provide one publication-quality research manuscript that provides: (1) a useful review of epidemiologic literature for a disease; (2) a critical review of epidemiologic methods; or, (3) results from a primary or secondary analysis of data
- Present one poster or oral presentation
- Discuss and critically review recently published research on "hot topics" in epidemiology

PHEP 777 Dissertation Research
This course is for mentored dissertation research in the PhD Program in Epidemiology. Students are required to complete 21 credit hours of dissertation research culminating in an original, scholarly body of work in the science of epidemiology that demonstrates a thorough understanding of research methods and ability to conduct independent research.

Department of Health Knowledge and Cognitive Sciences (PHKC)

PHKC 601 Introduction to Health Behavior
This course reviews theoretical constructs of the causation of health-related behavior, including preventive, early diagnosis, treatment, and rehabilitation behavior. The course then follows a systematic analysis of the theories as they apply to important public health problems. In addition, discussion of the national Healthy People project will be an important component of the course

PHKC 602 Cognitive Issues in Health Communication
Addresses health communication from the standpoint of the various cognitive factors involved in the process of communicating health information, both at the receiving end of the communication and the sending end. The cognitive issues considered include, but are not limited to: selection and transmission of the health information by the sender; reception and filtering of the information by the receiver; storage and retrieval of the information, and principles of dialogue and exchange between two or more communicators. The foundation principles of this course lie in basic cognitive and communication theories; however they are specifically applied to health issues, topics, situations, and roles.

PHKC 604 Health Decision and Risk Analysis
This course is a study of how patients, practitioners, researchers, educators, and policy makers understand risk and approach complex decision problems in health, recognizing that multiple outcomes are possible from any given health situation, with variations in the likelihood and desirability of those outcomes. Complex health decisions are approached from the standpoint of the values placed on various health states, the potential for cascading events (both desirable and undesirable), sources of risk and bias, effectiveness of diagnosis and/or treatment decisions, and the allocation of resources. Attention is given to risk analysis and decision making by health care providers, policymakers, payers, researchers, educators, society as a whole, and patients, recognizing that

differences in values, expectations, and informational inputs can vary significantly with role and can have a major effect on both the decision making process and result. Specific focus is placed on the ability of individuals to analyze and ameliorate their own health risks, including the impact of social networks, trusted advisors, and societal factors. Formal decision analysis is also addressed, including an introduction to the use of expected value decision making tools such as decision trees and Markov modeling.

PHKC 606 Health Knowledge Diffusion
In this course, the spread of health knowledge into populations, the acceptance of new information, and its integration into practices among health care professionals and the general public will be examined. Theories of innovation and communication will be used as a framework for examination of deliberate and accidental knowledge acquisition and dissemination.

PHKC 607 Population Health Management
See PHMS 607

PHKC 608 Public Health Program Evaluation
This graduate level course presents the application of program theory, principles and methods in the evaluation of health programs.

PHKC 612 Health Communications Campaign: Theory and Practice
Health Communications Campaigns: Theory and Practice will review principles and concepts of health communication campaigns, with a specific emphasis on application and competency in using health communications to solve public health problems.

PHKC 650 Advanced Topics in Health Knowledge and Cognitive Sciences
This course is an in-depth treatment of one or more advanced topics in Health Knowledge and Cognitive Sciences, not usually covered in a regularly offered course and intended to significantly advance the student's understanding in the field.

PHKC 679 Practicum Experience: Health Knowledge and Cognitive Sciences
As a central experience and requirement for the Master of Public Health degree in the School of Public Health and Information Sciences, students must complete a 6 credit hour course—260-contact-hour project—in an external health/health-related setting. This practicum experience, including a final paper or written report and oral presentation, constitutes the final examination. A site for each practicum project may be selected by the student or by one of the School's departments. Practicum sites will be selected based upon student's major.

PHKC 696 Issues in Public Health
This course will provide students with several broad topical concepts encountered within the field of public health. This course is meant to serve as an introductory course, providing a framework upon which to build all other subsequent core courses. It will also serve as a venue to introduce students to the five core areas of public health (epidemiology, biostatics, health management and policy, health knowledge and environmental health) through various presentations and activities.

PHKC 697 Integrating Learning and Experience in Public Health

The course is independent study for bringing together the student's studies and real-world activities in public health into a culminating experience. The student will integrate what he or she has learned in the classroom, in presentations, in informal discussions, in the practicum, and elsewhere into a paper, a poster, and a presentation. These will represent the student's practicum experience and results within the context of the concepts and techniques acquired by the student from participation in the M.P.H. program.

PHKC 697 Integrating Learning and Experience in Public Health
The course is independent study for bringing together the student's studies and real-world activities in public health into a culminating experience. The student will integrate what he or she has learned in the classroom, in presentations, in informal discussions, in the practicum, and elsewhere into a paper, a poster, and a presentation. These will represent the student's practicum experience and results within the context of the concepts and techniques acquired by the student from participation in the MPH program.

PHKC/PHMS 614 Critical Thinking and Program Evaluation
The course is designed to give students basic skills in the evaluation of health and human service programs in community settings. Student will learn evaluation terminology, ways to conceptualize evaluation tasks, specific evaluation techniques, and guidelines regarding the application and dissemination of evaluation results**.**

Department of Health Management and Systems Science (PHMS)

PHMS 601 Introduction to Public Health and Administration
This course emphasizes the practical application of the principles of health care organization to public health at the national, state, and local levels. Course objectives reflect an overview of the principles of managing a public health organization: legal basis of public health, organization and delivery of public health services, health planning and community needs assessment, epidemiological approach to diseases, methods for chronic and infectious disease control, future changes that can impact the provision of public health services, etc. This is a hybrid web-based and face-to-face course.

PHMS 603 Legal & Bioethical Aspects of Public Health
This introductory course will focus on the legal and bioethical principles and constraints (including case law, regulations and policy) that are applicable to public health services and the public health professions. How these principles and constraints developed over time, and how they operate in public health practice—based upon in-depth review of case studies—will be examined. Special attention will be directed towards analyzing significant legal cases, current legislation, and public policy, including their bioethical underpinnings and frames of reference, that pertain to the government's public health authority, the obligations of public health professionals and public health facilities, the interests of the community and society, and the rights and interests of individuals. Students will explore a broad range of current and historically relevant legal, ethics, political, and social topics and issues that bear upon matters such as disease and injury prevention; surveillance; health promotion and access to health services; public health emergencies; standards of practice; regulation of health facilities and the licensing of health professionals; special populations (e.g., children, prisoners, decision-incapacitated); and public health research.

PHMS 605 Governance and Management of Healthcare Organizations
This course is designed to provide an understanding of how the multiple dimensions and facets of healthcare result in highly complex and problematic governance and management that is unique to healthcare organizations. Course participants will study the broad and complex nature of consumer demand in healthcare and how it drives organizational purpose and value propositions. Governance and management of healthcare organizations representing the full continuum of care across life span and treatment approaches will be covered. Governance and management of the array of functions within healthcare organizations will be studied, including leadership, resource acquisition and allocation, operations and marketing. The critical nature of transactions with the external system in which healthcare organizations operate and how to manage them will be studied. A systems-theory based approach, informed by complexity theory, will be used to understand healthcare organizations as complex adaptive systems.

PHMS 607 Population Health Management
"Population health management" will be defined from perspectives of various stakeholders. Four broad questions will be addressed during the course: 1. Who are the populations and what are their wants and needs for health? 2. What resources are currently used to meet their health needs? 3. What are the processes to meet the health needs of population groups? 4. How is progress measured and marketed? The constructs of population health and medical care will be compared and contrasted, using levels of disease prevention and health promotion and other models. A paradigm of positive health and health protection for individuals and organizations will complement the disease-illness care model. The role of medical care and population health will be examined within the context of socially enmeshed health concerns. Factors influencing the variations in selection and reporting of health status indicators will be explored. Successful and failed health policies will be explored in relationship to the impacts of demand- and supply-side forces on the structure, processes and marketing of population health. Select models of population health management and community change will be studied. Varieties of leadership styles and modes of governance for managing population health will be considered. Tools for assessing organizational resources and needs in the context of the internal and external socio-political environments will be analyzed. Building partnerships and organizational networks will be examined as means to improve population health.
(Cross listed with PHKC 607)

PHKC/PHMS 614 Critical Thinking and Program Evaluation
The course is designed to give students basic skills in the evaluation of health and human service programs in community settings. Student will learn evaluation terminology, ways to conceptualize evaluation tasks, specific evaluation techniques, and guidelines regarding the application and dissemination of evaluation results**.**

PHMS 615 Introduction to Health Systems
This course is designed to provide an introduction to the health sector as it currently operates in the US. A systems-theory based approach, informed by complexity theory, will be used to present health systems as complex adaptive networks. Through a review of the history of the health sector the student will learn how the industry has evolved (adapted) to where it is today, and where it may be going in the future. The complex

structure of the health sector will be explored, looking at dynamic interrelationships between patients, government, employers, payers, vendors, educators, institutional providers, practitioners and other participants in the health sector. Health sector financing and cost, in both the public and private sectors, will be reviewed. Additionally, ways in which both money and information move through the complex structure of the health sector will be considered. The impacts of different structures and processes of health on access to and quality of care will be explored. Finally, impacts of new technologies on the future of the health sector will be explored, with an emphasis on information technology.

PHMS 650 Advanced Topics in Health Management and Systems Science
This course will usually focus on one topic in advanced health management and systems sciences, not usually covered in a regularly offered course (or if offered in a regularly offered course, not covered in depth). This course will be repeated under different subtitles.

PHMS 679 Practicum Experience: Health Management and Systems Science
As a central experience and requirement for the Master of Public Health degree in the School of Public Health and Information Sciences, students must complete a 6 credit hour course—260-contact-hour project—in an external health/health-related setting. This practicum experience, including a final paper or written report and oral presentation, constitutes the final examination. A site for each practicum project may be selected by the student or by one of the School's departments. Practicum sites will be selected based upon student's major.

PHMS 697 Integrating Learning and Experience in Public Health
The course is independent study for bringing together the student's studies and real-world activities in public health into a culminating experience. The student will integrate what he or she has learned in the classroom, in presentations, in informal discussions, in the practicum, and elsewhere into a paper, a poster, and a presentation. These will represent the student's practicum experience and results within the context of the concepts and techniques acquired by the student from participation in the MPH program.

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Appendix V-2
Complete Listing of MPH Courses

MPH Program—Course of Study

The full time curriculum for the MPH program is described below and is designed to be completed in two academic years. A part time program of study is also available for students unable to attend class full time and can be arranged upon entry into the MPH Program.

In the first year, all students take the core MPH courses. These courses are designed to provide an overview of the core areas of public health. Students will also take a course that is focused on *Issues In Public Health* and a course in *Critical Thinking and Program Evaluation*.

Towards the end of the first year students will select there area of concentration from one of the five core areas of public health (Biostatistics, Environmental Health, Epidemiology, Health Behavior, and Health Management). This will lead students into the second year of the curriculum where they will take 15 credit hours in their area of concentration and perform a community based practicum.

The following chart provides a general overview of the first and second years of the MPH curriculum. A more detailed curriculum for each areas of concentration is provided on the following pages.

Core course overview: (common in all concentrations)

Year 1 Fall Semester

PHEP 601	Introduction to Epidemiology	(3 credits)
PHST 600	Introduction to Biostatistics I	(3 credits)
PHMS 601	Introduction to Public Health Practice and Admin	(3 credits)
PHKC 696	Issues in Public Health	(2 credits)

Year1 Spring Semester

PHEH 600	Introduction to Environmental Health Sciences	(3 credits)
PHKC 601	Introduction to Health Behavior	(3 credits)
PHST 610	Statistical Computing & Data Management for Public Health	(3 credits)
PHKC 614	Critical Thinking and Program Evaluation	(3 credits)

Concentration course overview:

Year 2 Fall Semester

Concentration major courses	(9 credits)
Concentration-specific Public Health Practicum	(3 credits)

Year 2 Spring Semester

Concentration major courses	(6 credits)
Concentration-specific Public Health Practicum	(3 credits)
PHXX 697 Integrating Learning and Experience in Public Health	(1 credit)

Total **45 Credits**

MPH Concentration in Biostatistics:

Year 2 Fall Semester

PHCI 624	Clinical Trials I	(2 credits)
PHST 726	Clinical Trials Stats Lab	(1 credit)
PHST 620	Introduction to Statistical Computing	(3 credits)
PHXX ___	3rd concentration course	(3 credits)
PHST 679	Public Health Practicum	(3 credits)

Year 2 Spring Semester

PHST 640	Stat Methods for Rsch Design in Health Studies	(3 credits)
PHST 679	Public Health Practicum	(3 credits)
PHST 681	Biostatistical Methods II	(3 credits)
PHST 697	Integrating Learning and Experience in Public Health	(1 credit)

MPH Concentration in Environmental Health

Year 2 Fall Semester

PHEH 610	Occupational Health and Safety	(3 credits)
PHEH 650	Advanced Topics in Environmental Health	(3 credits)
PHXX ___	3rd concentration course	
PHEH 679	Public Health Practicum	(3 credits)

Year 2 Spring Semester

PHEH 620	Global Issues on Environmental and Occ. Health	(3 credits)
PHEH 679	Public Health Practicum	(3 credits)
PHEH 697	Integrating Learning and Experience in Public Health	(1 credit)
Elective course		(3 credits)

Student can select from any area they are interested in. Courses may vary and require prior approval from the students major Department Chair.

MPH Concentration in Epidemiology

Year 2 Fall Semester

PHEP 602	Epidemiologic Methods	(3 credits)
PHEP 616	Disease Surveillance	(3 credits)
PHXX___	3rd concentration course	(3 credits)
PHEP 679	Public Health Practicum	(3 credits)

Year 2 Spring Semester

PHEP 617	Field Epidemiology	(3 credits)
PHEP 679	Public Health Practicum	(3 credits)
PHEP 697	Integrating Learning and Experience in Public Health	(1 credit)
PHEP 650	Advanced Topics in Epidemiology	(3 credits)

MPH Concentration in Health Behavior

Year 2 Fall Semester

PHKC 604	Health Decision and Risk Analysis	(3 credits)
PHKC 608	Public Health Program Evaluation	(3 credits)
PHXX ___	3rd concentration course	(3 credits)
PHKC 679	Public Health Practicum	(3 credits)

Year 2 Spring Semester

PHMS 607	Managing Healthy Communities	(3 credits)
PHKC 612	Health Communication Campaigns	(3 credits)
PHKC 679	Public Health Practicum	(3 credits)
PHKC 697	Integrating Learning and Experience in Public Health	(1 credit)

MPH Concentration in Health Management

Year 2 Fall Semester

PHMS 603	Legal & Bioethical Aspects of Public Health	(3 credits)
PHMS 615	Introduction to Health Systems	(3 credits)
PHMS 679	Public Health Practicum	(3 credits)
PHXX ___	3rd concentration course	(3 credits)

Year 2 Spring Semester

PHMS 605	Governance and Management of Healthcare Org.	(3 credits)
PHMS 607	Managing Healthy Communities	(3 credits)
PHMS 679	Public Health Practicum	(3 credits)
PHMS 697	Integrating Learning and Experience in Public Health	(1 credit)

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Appendix VI-1
Publications by SPHIS Faculty and Staff, Calendar Years 2003 through 2006

Publications of SPHIS Faculty and Staff, Calendar Year 2003

1. Advisory Committee on Immunization Practices (ACIP). Notice to readers: supplemental recommendations about the timing of influenza vaccination, 2003-04 season. *MMWR - Morbidity & Mortality Weekly Report* 2003; 52(33):796-797.
   Note: **Clover RD**, Liaison Representative of American Academy of Family Physicians to ACIP
2. Bowden CL, Calabrese JR, Sachs G, Yatham LN, Asghar SA, Hompland M et al. A placebo-controlled 18-month trial of lamotrigine and lithium maintenance treatment in recently manic or hypomanic patients with bipolar I disorder. *Archives of General Psychiatry* 2003; 60(4):392-400.
   Note: **Smoot TM**, coauthor
3. **Clover RD**. Preventing invasive pneumococcal disease in children [Editorial]. *Journal of the American Board of Family Practice* 2003; 16(5):464-465.
4. Derr J, **Goldsmith LJ**. How to Report Nonsignificant Results: Planning to Make the Best Use of Statistical Power Calculations. *Journal of Orthopaedic & Sports Physical Therapy* 2003; 33(6):303-306.
5. Derr J, **Goldsmith LJ**. How to Report Nonsignificant Results: Frequently Asked Questions. *Journal of Orthopaedic & Sports Physical Therapy* 2003; 33(7):367-368.
6. Fleming DR, **Ziegler C**, Baize T, Mudd L, Goldsmith GH, Herzig RH. Cefepime versus ticarcillin and clavulanate potassium and aztreonam for febrile neutropenia therapy in high-dose chemotherapy patients. *American Journal of Clinical Oncology* 2003; 26(3):285-288.
7. Godleski LS, **Goldsmith LJ**, Vieweg WV, Zettwoch NC, Stikovac DM, Lewis SJ. Switching from depot antipsychotic drugs to olanzapine in patients with chronic schizophrenia. *Journal of Clinical Psychiatry* 2003; 64(2):119-122.
8. Haddy RI, **Clover RD**. Selected Infectious Diseases. In: Taylor R, editor. Family Medicine: Principles and Practice. New York: Springer-Verlag, 2003: 375-383.
9. Harper SA, Fukuda K, Cox NJ, Bridges CB, Advisory Committee on Immunization Practices (ACIP). Using Live, Attenuated Influenza Vaccine for Prevention and Control of Influenza. *MMWR - Recommendations and Reports* 2003; 52(RR13):1-8.
   Note: **Clover RD**, Liaison Representative of American Academy of Family Physicians to ACIP
10. Hoel DJ, Hammond SK, Koller LD, Loomis DP, Rappaport SM, Smith TJ et al. Characterizing exposure of veterans to Agent Orange and other herbicides used in Vietnam: interim findings and recommendations. Washington, DC: National Academy Press, 2003.
    Note: **Tollerud DJ**, coauthor
11. Lengerich EJ, Siedlecki JC, Brownson R, **Aldrich TE**, Hedberg K, Remington P et al. Mentorship and competencies for applied chronic disease epidemiology. *Journal of Public Health Management & Practice* 2003; 9(4):275-283.
12. Litonjua AA, Sparrow D, Guevarra L, O'Connor GT, Weiss ST, **Tollerud DJ**. Serum interferon-gamma is associated with longitudinal decline in lung function among asthmatic patients: the Normative Aging Study. *Annals of Allergy, Asthma, & Immunology* 2003; 90(4):422-428.
13. May ML, Bowman GJ, Ramos KS, Rincones L, Rebollar MG, Rosa ML et al. Embracing the local: enriching scientific research, education, and outreach on the Texas-Mexico border through a participatory action research partnership. *Environmental Health Perspectives* 2003; 111(13):1571-1576.
    Note: **Ramos IN**, coauthor
14. McClave SA, Lowen CC, Kleber MJ, McConnell JW, Jung LY, **Goldsmith LJ**. Clinical use of the respiratory quotient obtained from indirect calorimetry. *JPEN: Journal of Parenteral & Enteral Nutrition* 2003; 27(1):21-26.

15. Morpurgo E, Petras R, Kimberling J, **Ziegler C**, Galandiuk S. Characterization and clinical behavior of Crohn's disease initially presenting predominantly as colitis. *Diseases of the Colon & Rectum* 2003; 46(7):918-924.

16. National Foundation for Infectious Diseases. Increasing influenza immunization rates in infants and children: putting recommendations into practice 2003. 1-34. 2003. Bethesda, MD, National Foundation for Infectious Diseases
Note: **Clover RD**, Contributor

17. Schoenberg NE, Amey CH, Stoller EP, **Muldoon SB**. Lay referral patterns involved in cardiac treatment decision making among middle-aged and older adults. *Gerontologist* 2003; 43(4):493-502.

18. **Tollerud DJ**, Emmett EA. Educational opportunities. In: McCunney R, editor. A Practical Approach to Occupational and Environment Medicine. Wilkins, PA: Lippencott Williams, 2003: 209-217.

19. Tsunoda M, Tsunoda H, Guevarra L, **Tollerud DJ**. The relationship between serum cytokine levels and common laboratory tests in healthy Japanese men. *Environmental Health & Preventive Medicine* 3 A.D.; 8(1):6-12.

20. Tsunoda M, Litonjua AA, Kuniak MP, Weiss ST, Satoh T, Guevarra L et al. Serum cytokine levels, cigarette smoking and airway responsiveness among pregnant women. *International Archives of Allergy & Immunology* 2003; 130(2):158-164.
Note: **Tollerud DJ**, coauthor

21. Verlato G, Drane JW, **Aldrich TE**. Statistical methods for surveillance of diabetes events. *Diabetes, Nutrition and Metabolism: Clinical and Experimental* 2003; 16(3):198-199.

22. Weinrich SP, Iyun BF, Shittu O, **Weinrich MC**, Doll MA, Hein DW. Prostate cancer in Nigerian men: glutathione S-transferase case-control pilot study. *Austral-Asian Journal of Cancer* 2003; 2(3):191-197.

23. Weinrich SP, **Weinrich MC**, Hudson J, Fodi C. Self-reported reasons African-American and low-income men decide not to participate in free prostate cancer screening. *Oncology Nursing Forum* 2003; 30(1):E12-E16.

24. Zimmerman RK, Middleton DB, Burns IT, **Clover RD**. Routine vaccines across the life span, 2003. *Journal of Family Practice* 2003; 52(1 Suppl):S1-21.

Publications of SPHIS Faculty and Staff, Calendar Year 2004

1. Advisory Committee on Immunization Practices. Prevention and Control of Influenza. *MMWR: Morbidity and Mortality Weekly Report* 2004; 53(RR-6):1-40.
2. **Atlas RM**, **Clover RD**. Implications of the 1971 smallpox outbreak in Aralsk, Kazakhstan, for U.S. smallpox vaccination policy. CNS Occasional Papers # 9. 10-4-2004. Monterey, CA, Monterey Institute of International Studies.
3. Bass PF, Stetson B, **Rising W**, Wesley G, Ritchie C. Development and Evaluation of a Nutrition and Physical Activity Counseling Module for First-Year Medical Students. Medical Education Online 9. 2004.
4. Cloud RN, **Ziegler CH**, Blondell RD. What is Alcoholics Anonymous affiliation? *Substance Use & Misuse* 2004; 39(7):1117-1136.
5. **Clover RD**, Young HF. Recommended childhood and adolescent immunization schedule, United States, July to December, 2004. *American Family Physician* 2004; 69(10):2471-2472.
6. Committee on Poison Prevention and Control. Forging a Poison Prevention and Control System. Washington, D.C.: National Academies Press, 2004.
7. Committee to Assess the Distribution and Administration of Potassium Iodide in the Event of a Nuclear Incident NRC. Distribution and Administration of Potassium Iodide in the Event of a Nuclear Incident. Washington, D.C.: National Academies Press, 2004.
8. Furman CD, **Rayner AV**, Tobin EP. Pneumonia in older residents of long-term care facilities. *American Family Physician* 2004; 70(8):1495-1500.
9. Jones JD, **McKinney WP**. Malaria in Kentucky: a zebra among Thoroughbreds. *Journal of the Kentucky Medical Association* 2004; 102(12):553-558.
10. Kiat-Amnuay S, Gettleman L, **Goldsmith LJ**. Effect of multi-adhesive layering on retention of extraoral maxillofacial silicone prostheses in vivo. *Journal of Prosthetic Dentistry* 2004; 92(3):294-298.
11. Kyasa MJ, Hazlett L, **Parrish RS**, Schichman SA, Zent CS. Veterans with chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL) have a markedly increased rate of second malignancy, which is the most common cause of death. *Leukemia & Lymphoma* 2004; 45(3):507-513.
12. Morpurgo E, Vitale GC, Galandiuk S, Kimberling J, **Ziegler C**, Polk HC, Jr. Clinical characteristics of familial adenomatous polyposis and management of duodenal adenomas. *Journal of Gastrointestinal Surgery* 2004; 8(5):559-564.
13. Mukhopadhyay P, Greene RM, Zacharias W, **Weinrich MC**, Singh S, Young WW, Jr. et al. Developmental gene expression profiling of mammalian, fetal orofacial tissue. *Birth Defects Researach Part A Clinical and Molecular Teratology* 2004; 70(12):912-926.
14. **Parrish RS**, Spencer HJ, III. Effect of normalization on significance testing for oligonucleotide microarrays. *Journal of Biopharmaceutical Statistics* 2004; 14(3):575-589.
15. Picker LJ, Hagen SI, Lum R, Reed-Inderbitzin EF, Daly LM, Sylwester AW et al. Insufficient production and tissue delivery of CD4+ memory T cells in rapidly progressive simian immunodeficiency virus infection. *Journal of Experimental Medicine* 2004; 200(10):1299-1314.
16. Rothstein MA, **Hornung CA**. Public Attitudes About Genetics and Life Insurance. In: Rothstein MA, editor. Genetics and Life Insurance: Medical Underwriting and Social Policy. Cambridge: MIT Press, 2004: 1-25.
17. **Wang C**, Weindruch R, Fernandez JR, Coffey CS, Patel P, Allison DB. Caloric restriction and body weight independently affect longevity in Wistar rats. *International Journal of Obesity & Related*

Metabolic Disorders: Journal of the International Association for the Study of Obesity 2004; 28(3):357-362.

18. **Wang C**, Li Q, Redden DT, Weindruch R, Allison DB. Statistical methods for testing effects on "maximum lifespan". *Mechanisms of Ageing & Development* 2004; 125(9):629-632.
19. **Weinrich MC**, Weinrich SP, Weissbecker I, Mayberry-Brent K, Seger RE. Recruitment incentives to reduce disparities among medically underserved men. *American Journal of Health Studies* 2004; 19(1):45-53.
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(2) **Atlas RM**, **Clover RD**, **Carrico R**, Wesley G, Thompson M, **McKinney WP**. Recognizing biothreat diseases: realistic training using standardized patients and patient simulators. *Journal of Public Health Management & Practice* 2005 November;Suppl:S143-S146.

(3) **Brock GN**, Maher BS, Goldstein TH, Cooper ME, Marazita ML. Methods for detecting gene x gene interaction in multiplex extended pedigrees. *BMC genetics* 2005 December 30;6(Suppl 1):S144.

(4) **Carrico R**, Goss L. Syndromic surveillance: hospital emergency department participation during the Kentucky Derby Festival. *Disaster Management & Response: DMR* 2005 July;3(3):73-9.

(5) Cesari M, Kritchevsky SB, **Baumgartner RN** et al. Sarcopenia, obesity, and inflammation--results from the Trial of Angiotensin Converting Enzyme Inhibition and Novel Cardiovascular Risk Factors study. *American Journal of Clinical Nutrition* 2005 August;82(2):428-34.

(6) Coffey CS, Gadbury GL, Fontaine KR, **Wang C**, Weindruch R, Allison DB. The effects of intentional weight loss as a latent variable problem. *Statistics in Medicine* 2005 March 30;24(6):941-54.

(7) Culligan PJ, **Myers JA**, Goldberg RP, Blackwell L, Gohmann SF, Abell TD. Elective cesarean section to prevent anal incontinence and brachial plexus injuries associated with macrosomia--a decision analysis. *International Urogynecology Journal* 2005 January;16(1):19-28.

(8) Culligan PJ, Blackwell L, **Goldsmith LJ**, Graham CA, Rogers A, Heit MH. A randomized controlled trial comparing fascia lata and synthetic mesh for sacral colpopexy. *Obstetrics & Gynecology* 2005 July;106(1):29-37.

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(10) **Datta S**, Satten GA. Rank-Sum Tests for Clustered Data. *Journal of the American Statistical Association* 2005 September;100(471):908-15.

(11) Edds AC, Walden JE, Scheetz JP, **Goldsmith LJ**, Drisko CL, Eleazer PD. Pilot study of correlation of pulp stones with cardiovascular disease. *Journal of Endodontics* 2005 July;31(7):504-6.

(12) Godleski LS, **Goldsmith LJ**, Vieweg WV, Zettwoch N, Stikovac D, Lewis S. Switching depot antipsychotic drug responders to oral olanzapine. *Progress in Neuro-Psychopharmacology & Biological Psychiatry* 2005 January;29(1):141-4.

(13) Irwin ML, McTiernan A, Bernstein L et al. Relationship of obesity and physical activity with C-peptide, leptin, and insulin-like growth factors in breast cancer survivors. *Cancer Epidemiology, Biomarkers & Prevention* 2005 December;14(12):2881-8.

Note: **Baumgartner KB and Baumgartner RN**, coauthors

(14) Irwin ML, Aiello EJ, McTiernan A et al. Pre-diagnosis physical activity and mammographic density in breast cancer survivors. *Breast Cancer Research and Treatment* 2005 November 30;1-8.

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(16) Jneid H, Chandra M, Alshaher M et al. Delayed preconditioning-mimetic actions of nitroglycerin in patients undergoing exercise tolerance tests. *Circulation* 2005 May 24;111(20):2565-71.

Note: **Hornung CA**, coauthor

(17) Kiat-Amnuay S, Gettleman L, Mekayarajjananonth T, Khan Z, **Goldsmith LJ**. The influence of water storage on durometer hardness of 5 soft denture liners over time. *Journal of Prosthodontics* 2005 March;14(1):19-24.

(18) **LaJoie AS**, **McCabe SJ**, Thomas B, Edgell SE. Determining the sensitivity and specificity of common diagnostic tests for carpal tunnel syndrome using latent class analysis. *Plastic & Reconstructive Surgery* 2005 August;116(2):502-7.

(19) Lindeman RD, Wayne SJ, **Baumgartner RN**, Garry PJ. Cognitive function in drinkers compared to abstainers in the New Mexico elder health survey. *Journals of Gerontology Series A-Biological Sciences & Medical Sciences* 2005 August;60(8):1065-70.

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(23) **McKinney WP**, Wesley GC, Sprang MV, **Troutman A**. Educating health professionals to respond to bioterrorism. *Public Health Reports* 2005;120 Suppl 1:42-7.

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University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendix VII-1
Community and Professional Service and Service Committee Documents

Community and Professional Service

Mission

Promote and advance the service activities of the School of Public Health and Information Sciences to our communities and members of the public health professions.

Goals

Promote:
- Public health expertise and research interests of faculty and departments
- Center for Health Hazards Preparedness
- Continuing education offerings
- Current community programs and service activities

Advance:
- Center for Health Hazards Preparedness
- Connections between community and public health partners and SPHIS faculty and resources
- Development of practicum projects for MPH students
- Identification of new partnerships
- Relationships and partnerships to further the mutual needs of the community, School, and University

Activities
- Developing and promoting of current continuing education courses such as public health grand rounds and Center for Health Hazards Preparedness activities
- Maintaining a list of School community partners and projects
- Assisting in the creation of a web-based portal and database to collect, organize and maintain information from faculty and staff about their service activities, research, and publications
- Developing a robust evaluation program to measure the impact of these partnerships and continuing education efforts.
- Demonstrating the impact of partnerships
- Improving the effectiveness and accountability of the programs and services we provide
- Increasing awareness of the ways in which community leadership positions (e.g., community/agency board involvement) can impact the school
- Providing current and accurate data to stakeholders (e.g., Dean's office, University President's office, and accrediting bodies) regarding service activities and impact
- Supporting the efforts of the Service Committee to establish and continuously refine the process for identifying new opportunities
- Other activities as needed to meet goals and fulfill mission

Organization

Location: Dean's Office, reporting to Peter L. Walton, MD, Associate Dean

Director: Ruth Carrico, PhD (10%)
Program Coordinator: Melissa Schreck (10%)

Service Committee, Robert J. Esterhay, MD, Chair

Issued by the Office of the Dean, 09/15/06; reissued 03/06/07

Service Committee

Charge

To advise and assist Community and Professional Service in promoting and advancing service by the School to the community and the public health professions, including selection of annual service awards to faculty, staff, and students.

For purposes of the Committee, service is defined as "contributions of professional expertise to the public, including professional practice" (from CEPH Criterion VII). An activity may or may not generate revenue and still be considered as service.

Organization and Composition

- The Committee is an ad hoc committee created by the Dean within the Dean's Office and reporting to an Associate Dean.
- One person (faculty or staff) selected (elected or appointed) by each department and the Center.
- Up to four persons (faculty or staff) appointed by the Dean's Office.
- Two MPH students, one 1st year and one 2nd year, selected (elected or appointed) by the School's KPHA Student Chapter.
- One non-MPH student selected (elected or appointed) by the School's Student Association. [Added 03/07/07.]
- The Director of Community and Professional Service (ex officio).

Support

The Dean's Office shall supply administrative and clerical support to the Committee.

Term

Members of the Committee other than students shall serve staggered three-year terms and may not serve more than two consecutive terms. Terms for non-student members begin July 1.

Student members of the Committee shall serve for one year. The non-MPH student shall be selected toward the end of the academic year prior to being seated on July 1. The 2nd year MPH student member shall be selected toward the end of the 1st year prior to being seated on July 1. The 1st year MPH student member shall be selected as soon as practicable after the start of classes for the 1st year MPH cohort. Student terms expire on June 30th. A student member may serve no more than three consecutive one-year terms.

Rules

- The Committee shall elect a Chair in June of each year, who shall serve from July 1 to June 30. A person may serve as Chair for as many consecutive years as desired by the Committee. To facilitate the startup of the Committee, Bob Esterhay will serve as the Chair for the first year ending June 30, 2007.
- The Chair may be recalled by a two-thirds vote of all members of the Committee.
- A Committee member may be removed by the Dean, by the sponsoring department, or by a two-thirds vote of all members of the Committee.

Issued by the Office of the Dean, 09/15/06; reissued 03/06/07

- Parliamentary procedures shall be governed by *Robert's Rules of Order, Newly Revised*.
- The Committee may establish other rules provided that they do not contravene any of the above rules.

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendix IX-1
MPH Marketing Plan

School of Public Health and Information Sciences
MPH Marketing Plan

Situation Analysis: The MPH program would like to double its enrollment in the coming years and is not currently receiving a pool of qualified applicants that will allow it to achieve these results.

Objective: Successfully recruit a pool of quality applicants sufficient to meet class size goals for the 2007-2008 academic year.

Applicants must have a bachelor's degree from an accredited institution or its equivalent, a recommended GPA of 3.0 on a 4.0 scale, test scores (GRE, GMAT, MCAT, LSAT, or DAT), TOEFL exam score of 250 (computer-based) or 600 (paper-based) – if applicable.

Key Messages:

1. **Professional opportunities:** The MPH program at the University of Louisville's School of Public Health and Information Sciences prepares students for successful careers in public health and related fields through a program that stresses what's needed to get and enjoy rewarding jobs, including leadership positions.

2. **Public health education for today and tomorrow:** The MPH program at University of Louisville's School of Public Health and Information Sciences provides students with an education that combines today's and tomorrow's needs in public health, preparing them to lead the health field in the 21st century.

3. **It is not too late to apply to begin a vital health career:** The MPH program at the University of Louisville's School of Public Health and Information Sciences is currently accepting applicants for the MPH program's cutting-edge curriculum, offering concentrations in biostatistics, health behavior and cognition, environmental and occupational health, epidemiology, and health management.

Target Audiences:

- Qualified applicants not admitted to the U of L School of Medicine, School of Dentistry and graduate programs of the School of Nursing (as FERPA allows);
- Graduates of regional institutions in public health-related fields, including Pre-medicine, Nursing, Chemistry, Biology, Psychology, Business, Education & Counseling, Sociology, Social Work, Management Information Systems, Communication, Anthropology, and others.
- Professionals in the public health, nursing, and other health sciences fields looking for additional education or career advancement, who are in a position to enroll full-time.

Target Feeder Schools and Professional Organizations:

- University of Louisville
- University of Kentucky
- Kentucky State University
- Bellarmine University
- Centre College
- Transylvania
- Georgetown College
- NKU
- WKU
- EKU
- Murray State
- Morehead State
- University of Cincinnati
- Xavier University
- IU Southeast
- IU Bloomington
- IUPUI
- Butler University
- University of Evansville
- Wabash College
- Hanover College
- University of Southern Illinois, Carbondale
- Depauw
- Louisville Metro Health Department
-

Communications Executions:

1. What is Public Health? Handout and PowerPoint Presentation (Q&A with concrete examples)

2. Brochure with Tear-Off/Mail Back information card (500) print and pdf, detail about curriculum

3. Poster with Mail Back Card (Less detail, more attention getting)

4. Mailing to Career Services and Advisors Include letter, posters, brochure, way to email for pdf files

5. Mailing to students not accepted to medical/dental school beginning in January and continuing through April Letter and brochure

6. Develop internal process for following up on recruitment contacts and increasing number of completed applications through ongoing contact with prospective students

7. Student Group Campaign: SPHIS staff contact student organizations and ask for opportunity to make presentation at a meeting of each organization. Call to action: Consider a public health career track, use MPH to enhance marketability and career options, still time to apply.
   - ~ AED (Biology)
   - ~ Minority Association of Pre-med Students
   - ~ Society of Undergraduate Chemistry Students
   - ~ Society of Porter Scholars
   - ~ McNair Scholars Program
   - ~ Pre-dental Society

8. News Item Placement: Attempt to place a short news item stating degrees offered, admissions requirements, and application deadlines & contact information in selected publications or newsletters of selected organizations:
   - ~ Kentucky Health and Fitness (monthly)
   - ~ Courier Journal
   - ~ Lexington Herald-Leader
   - ~ JCMA Newsletter
   - ~ Louisville Metro Health Department
   - ~ Kentucky Department of Public Health
   - ~ Kentucky Public Health Association
   - ~ Kentucky Nurse
   - ~ KDA Today
   - ~ Indianapolis Star
   - ~ Cincinnati Paper
   - ~ Business First
   - ~ Indiana public health organizations
   - ~ U of L internal publications

9. Place web stories on U of L site in December, January, February and March

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendix IX-2
Application Summary Sheet and Applicant Score Sheet

Applicant Name	**Last:**			**Others:**				
Anticipated Status	Full	Part	Unk	**Starting Term:**				
Test Scores	**GRE**	**V**	**Q**	**AAW**			**Month**	**Year**
	MCAT	**PS**	**VR**	**BS**	**WS**		**Month**	**Year**
	GMAT	**V**	**Q**	**Tot**	**AWA**		**Month**	**Year**
	LSAT							
	DAT							
	TOEFL	**Score**	**Type**				**Month**	**Year**
Undergraduate	**University**		**GPA**	**Major**		**Deg.**	**Month**	**Year**
Graduate	**University**		**GPA**	**Major**		**Deg.**	**Month**	**Year**
Graduate	**University**		**GPA**	**Major**		**Deg.**	**Month**	**Year**
Public Health Experience	Weak	2	3	4	Strong		Nothing Listed	
Sex	Male	Female						
Ethnicity	Caucasian	African-American	Native American	Asian/Pacific Islander	Hispanic		Other	
In-state Residency Status	Resident	Non-Resident		**State of Residency (or Foreign):**				
Comments:								

Rating	Very Weak	2	3	4	Very Strong	
Recommendation	Reject	Accept	**Full Discussion Needed?**		Yes	No

Student ID#: **Reviewer:** **Date:**

(office use only)

University of Louisville
School of Public Health and Information Sciences
MPH APPLICATION EVALUATION FORM

NAME:_____ **STUDENT ID NO.**_____

_____ **GPA**

GPA	Score
3.50 and up	45
3.00-3.49	40
2.99 – 2.75	30
2.74 – 2.50	20
< 2.5	0

_____ **GRE or OTHER TEST SCORE**

Score	Possible Points	GRE (Verbal + Quantitative)	PCAT	Score	Possible Points	GRE AAW	PCAT
	15	>1000	>50%		5	>5	4-5
	13	800-1000	40-50%		3	3-4.9	3
	8	600-800	20-40%		2	2-2.9	2
	0	<600	<20%		0	2	1

Score	Possible Points	MCAT	GMAT	DAT	LSAT
	20	26+	540+	18+	155+
	15	23-25	520-539	16-17	150-154
	10	20-22	500-519	14-15	140-149
	5	17-19	480-499	12-13	130-139
	0	<17	<480	<12	<130

_____ **PERSONAL STATEMENT (**Content, Grammar, Spelling, etc.) **Strong = 5-10 pts; Weak = 0-5 pts**

_____ **REFERENCES**

SCORE		POINTS
	Three (3) favorable references	**15**
	Two (2) favorable references/1 neutral/1 negative	**10**
	One (1) favorable reference/2 neutral/1 negative	**5**

_____ **WORK EXPERIENCE**

Work Experience	Points
> 10 years	20
6 to 10 years	15
1 to 5 years	10
Volunteer	0 - 5

_____ **PROFESSIONAL DEGREE** (U.S. Ph.D., M.D. or other doctorate) = 15 pts

_____ **TOTAL POINTS** 70-ABOVE=ACCEPTED 50-69=COMMITTEE DECISION 49–BELOW=NOT ADMITTED

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

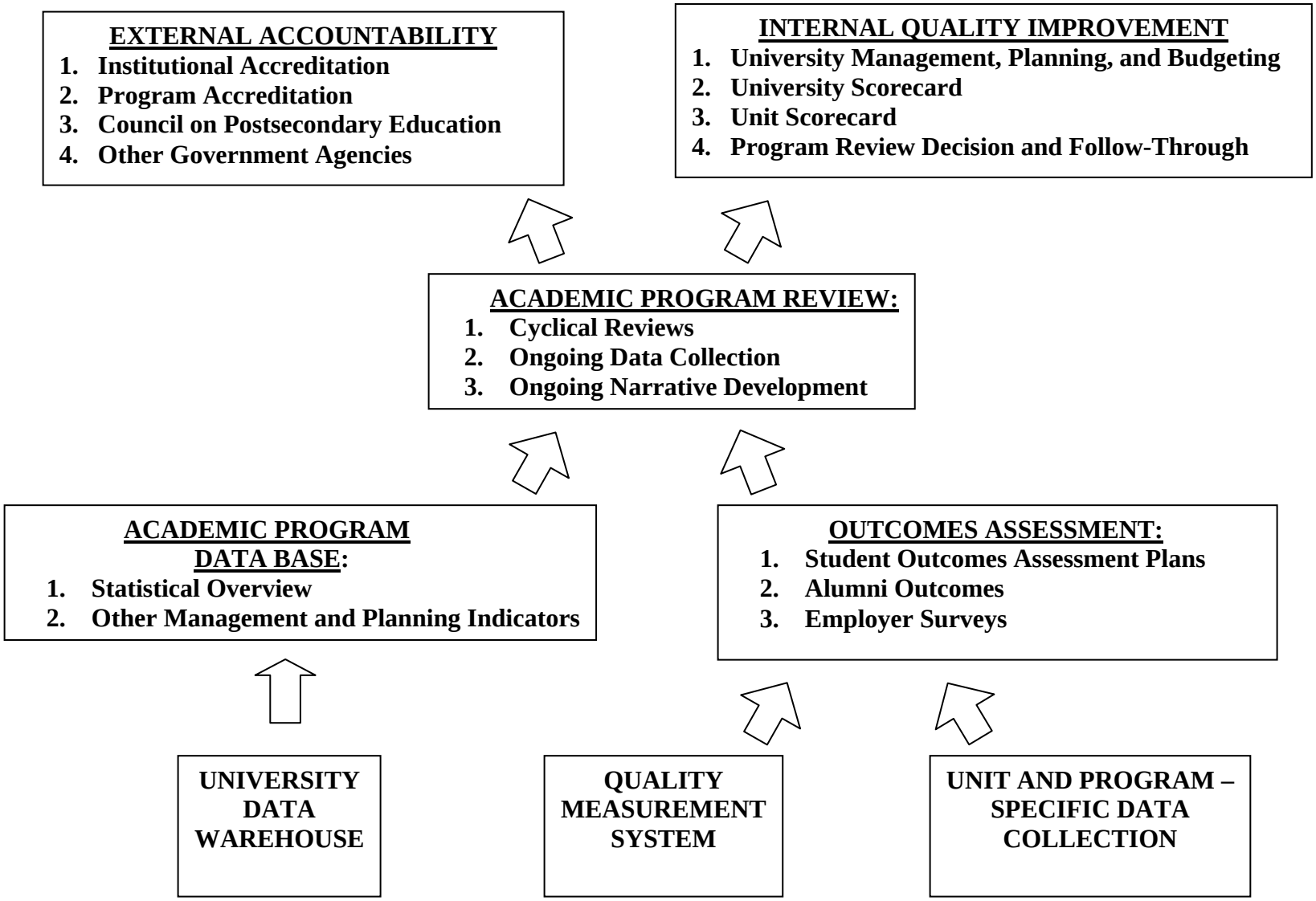
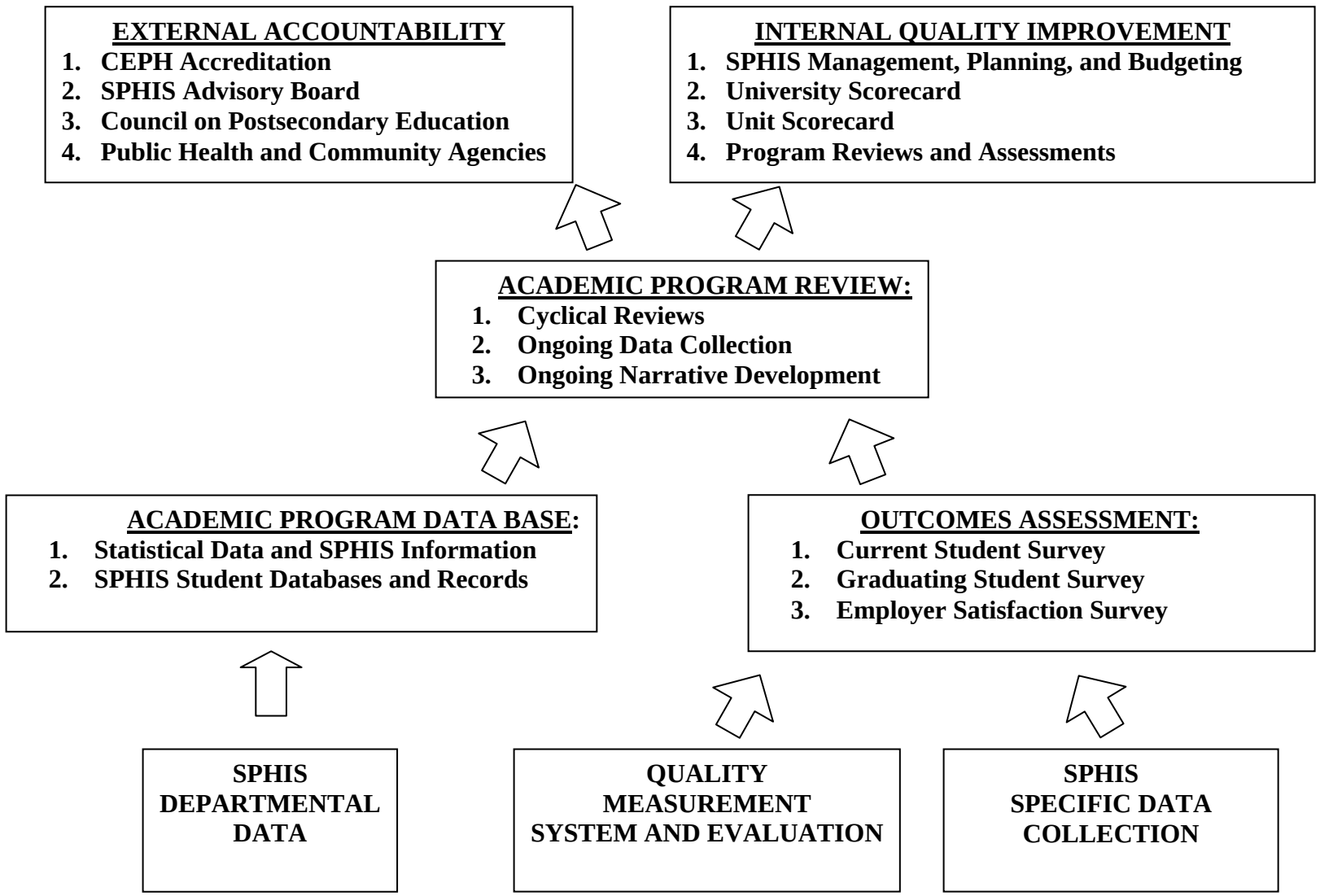
Appendix IX-3
Recruitment Materials

Recruitment materials are included separately.

University of Louisville School of Public Health and Information Sciences
CEPH Accreditation Self-Study

Appendix X-1
Quality Assurance Framework

QUALITY ASSURANCE FRAMEWORK AT THE UNIVERSITY OF LOUISVILLE



Quality Assurance Framework for the School of Public Health and Information Sciences