

REVIEW FOR ACCREDITATION
OF THE
PUBLIC HEALTH PROGRAM
AT THE
THE INSTITUTE OF PUBLIC HEALTH
AT
THE FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the MPH Program offered by the Institute of Public Health (IPH) at the Florida Agricultural and Mechanical University (FAMU). The report assesses the program's compliance with the *Accreditation Criteria for Programs of Public Health, amended June 2005*. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation and a visit in October 2012 by a team of external peer reviewers. During the visit, the team had an opportunity to interview program and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided on site in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

The university traces its origins to 1890 as a land-grant public Historically Black College and University (HBCU). The institution offers 53 undergraduate degrees, 28 master of science degrees, three professional degrees, 12 doctoral degrees and one jurisprudence degree. FAMU is made up of seven colleges: (1) science and technology; (2) agriculture and food sciences; (3) social sciences, arts and humanities; (4) pharmacy and pharmaceutical sciences; (5) engineering; (6) law; and (7) education; seven schools: (1) nursing; (2) architecture; (3) allied health sciences; (4) business and industry; (5) journalism and graphic communication; (6) environment; and (7) developmental research; and one institute (Institute of Public Health, IPH).

The MPH degree program admitted its inaugural class in fall 1997 and graduated its first seven students in May 1999. The self-study notes that at the time of the site visit the program has graduated 235 students with the MPH degree. Enrollment for 2012-2013 was 45 campus-based MPH students, 15 distance-based MPH students and 23 DrPH students.

The MPH program was first accredited by CEPH in 2005 for a seven year term with no interim reporting required. This is the program's third review for accreditation.

Characteristics of a Public Health Program

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

- a. The program shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education.
- b. The program and its faculty shall have the same rights, privileges and status as other professional preparation programs that are components of its parent institution.
- c. The program shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research, and service. Using an ecological perspective, the public health program should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem-solving, and fosters the development of professional public health concepts and values.
- d. The public health program shall maintain an organizational culture that embraces the vision, goals and values common to public health. The program shall maintain this organizational culture through leadership, institutional rewards, and dedication of resources in order to infuse public health values and goals into all aspects of the program's activities.
- e. The program shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. As a minimum, the program shall offer the Master of Public Health (MPH) degree.
- f. The program shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the FAMU degree programs. FAMU has been continuously accredited by the Southern Association of Colleges and Schools (SACS) since 1935. The program embraces an ecological perspective in its public health instruction, research and service. The program's value of Excellence with Caring, "to provide an environment that is nurturing while striving for excellence in academic performance and public health practice," demonstrates the program's aim to promote collaboration and foster professional public health values. The program's funding consists of state appropriations, grants and contracts, a university fund to augment program support and indirect cost recovery. The program continues to develop and implement new evaluation methods to ensure the professional preparation of its graduates. The use of problem-based learning, diversity of students and faculty, interactions of IPH faculty with other colleges and schools at FAMU and transfer of knowledge and ideas among other institutions of higher learning in Florida and neighboring HBCUs creates an energized environment for learning and information exchanges. Site visitors were reminded that graduates of the FAMU MPH and DrPH programs are not just graduates of a degree program, but forever

members of the FAMU family, representatives of the field of public health, advocates for improving public health of communities in need and ambassadors for future applicants and graduates.

1.0 THE PUBLIC HEALTH PROGRAM.

1.1 Mission.

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

This criterion is met. The FAMU MPH program has a mission statement that includes instruction, research and service. The mission statement of the MPH program is:

To develop and produce culturally competent public health practitioners and leaders through graduate training, research and service.

The program has specific goal statements, with attendant objectives, which address each of the major elements contained in the mission statement. The major goals are:

Instruction

- To provide quality graduate education and training in public health.
- To advance knowledge of the cultural competencies required to decrease high-risk behaviors and to promote health behavior choices.
- To promote and advance competencies in professional development in public health.

Research

- To conduct research that provides an evidence base for improving the health of those who bear a disproportionate burden of disease.
- To disseminate and translate research knowledge and findings gained to all public health stakeholders and the community at large.

Service

- To encourage effective health promotion and disease prevention measures through pro-active community outreach efforts statewide.
- To contribute to the development of effective public health policy for Florida's poor and underserved populations.
- To contribute to the development of a sustainable, culturally competent public health workforce.
- To strengthen existing partnerships and establish new sustainable service linkages with university, local, state, and national agencies and organizations.

The mission, goals and objectives of the MPH program were initially developed by a special study group that was commissioned by the Florida legislature in 1993. Since this initial development, the mission, goals and objectives have been revised and augmented based on the continued development of the DrPH program and on the creation, development and implementation of the distance-based generalist MPH degree. The revisions were inclusive of input from all MPH program constituencies, as confirmed by the site team's discussion sessions.

The mission, goals, objectives and values of the MPH program are regularly monitored by the dean, associate dean, program director and faculty. The mission and goals of the MPH program are published as part of the program's information package that is sent to each prospective applicant and posted throughout the college and university, in addition to being widely disseminated locally, statewide and nationally. As confirmed with key stakeholders during the site visit, the mission, goals and objectives address the public health needs of underserved communities in the state of Florida.

The IPH describes seven core values upon which the MPH has been built. These values were originally created in 2005 and resulted from revisions informed by the development of new programs (eg, DrPH program). The seven values are:

- Honesty and integrity
- Excellence with caring
- Respect for the individual
- Equality of opportunity
- Social justice
- Cultural sensitivity
- Community empowerment
- Peer review

The seven values are operationalized and applied in a number of ways in the MPH program including all facets of the academic program and curriculum.

1.2 Evaluation and Planning.

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

This criterion is met with commentary. The MPH program follows an IPH policy that institutes a culture of assessment. Assessment focuses on the implementation of each academic degree program, program operations and measurement of program effectiveness. The program additionally considers its relevance to stakeholders. The program utilizes a number of evaluation procedures and planning processes to measure and document the accomplishment of its mission, goals and objectives.

The University Office of Assessment (UOA) is responsible for reviewing and monitoring assessment plans, activities and outcomes regarding student learning and performance. The MPH program submits annual assessment plans and annual outcome results to the UOA. FAMU uses the FAMOUS assessment Approach. This approach involves six sequential steps and is a planning and implementation model that includes: (1) formulating statements of outcomes/objectives aligned to the institutional mission/goals; (2) ascertaining criteria for success; (3) measuring student/service performance using direct and indirect

methods; (4) observing and analyzing results for congruence between expected and actual outcomes; (5) using the results to improve instructional programs and administrative and educational support services; and (6) strengthening programs and services by continuously evaluating, planning, allocating resources and implementing new approaches to ensure congruence between expected and actual outcomes. The university FAMOUS assessments specifically measure student performance and outcomes. These annual assessments are a subset of the program's assessment regarding effectiveness in achieving its defined mission, measurable objectives and subsequent outcomes.

The mission, goals and objectives are routinely reviewed throughout the year and during annual faculty retreats. Where weaknesses are identified, program administration and faculty have implemented corrective actions to address areas of needed improvement. For example, data driven decisions have resulted in enhanced and formal career counseling; increased extramural funding and increased program marketing.

The IPH faculty and staff assist the program director in both operational and strategic planning using a collaborative process to secure input from students, the IPH Advisory Committee and other program constituents. Each fall, the faculty and staff review and evaluate the previous academic year's accomplishment of objectives. During fall 2011, the program director introduced a formal strategic planning process covering July 2012 to June 2017 and a strategic plan was available for review. The strategic plan is intended to provide for continuous quality improvement in the program and to bring strategic focus to the newly implemented MPH online degree. The plan also clarifies strategic action steps necessary for the program to be recognized in the future as a school of public health.

Preparation of the self-study document began during the spring of 2011 with a series of planning discussions between the program director and the faculty. A Self-Study Committee was convened to discuss the self-study and to intermittently present updates and narratives. The section drafts were open for comment from the committee and were modified as warranted. Every IPH faculty member contributed to the self-study process. The criteria were divided among the faculty, and each individual was responsible for leading the development of an initial draft of the assigned section. To develop the final document, faculty worked individually and in small groups and met as a committee of the whole to ensure that each criterion was fully addressed. The document was then compiled primarily by the program director and self-study coordinator. The preliminary self-study document was distributed to students, alumni and community members for review and feedback for incorporation into the final document.

The commentary relates to the organization and harmonization of the various assessment initiatives. The IPH reports 17 individual data collection instruments for assessing performance. While this is laudable, data appear to be stored in multiple locations across campus. Data access, integration and analysis

would benefit from a more unified capture and storage system. This would build upon efforts reported in the self-study related to the creation of the MPH Assessment Committee, whose aim is reportedly to provide a common evaluation platform.

1.3 Institutional Environment.

The program shall be an integral part of an accredited institution of higher education.

This criterion is met. FAMU is accredited by the Southern Association of Colleges and Schools (SACS). The university completed its most recent re-accreditation in 2009, with its next reaffirmation in 2018. The university traces its origins to 1890 as a land-grant public Historically Black College and University (HBCU). FAMU is part of Florida's State University System (SUS).

The institution offers 53 undergraduate degrees, 28 master of science degrees and three professional degrees, 12 doctoral degrees and one jurisprudence degree. FAMU is made up of seven colleges: (1) science and technology; (2) agriculture and food sciences; (3) social sciences, arts and humanities; (4) pharmacy and pharmaceutical sciences; (5) engineering; (6) law; and (7) education; seven schools: (1) nursing; (2) architecture; (3) allied health sciences; (4) business and industry; (5) journalism and graphic communication; (6) environment; and (7) developmental research; and one institute (Institute of Public Health, IPH).

The College of Pharmacy and Pharmaceutical Sciences (COPPS) was established in 1951 to address the need for pharmaceutical services across the country. The COPPS houses the IPH, which was created in 1995 by the Florida legislature as a Type II Center in the SUS of Florida. The IPH offers the MPH degree and Doctor of Public Health (DrPH) degrees at FAMU.

The BOG consists of 17 members with 14 members appointed by the Florida governor and confirmed by the Florida senate and serves staggered terms of seven years. The other three members of the BOG consist of the Commissioner of Education, Chair of the University System Faculty Senate Advisory (or the equivalent) and the President of the Florida Student Association (or the equivalent). The BOT consists of 13 members appointed by the governor of Florida and serves under the BOG. The BOT is tasked with the oversight of the university and adopts rules, regulations and policies governing FAMU. The BOT also has authority over curricular development, use of property, development of facilities and fiscal and human resources management.

The president is the university's chief executive officer and has responsibility for the operation of the university in conformity with the purposes and policies determined by the BOT. The BOT appoints the university president and evaluates his/her performance. The provost and vice-president for academic affairs, who reports to the president, is the university's chief academic officer and the president's principal

deputy. The dean of the COPPS reports directly to the provost and vice-president for academic affairs and provides overall budget, personnel and curricular management of the COPPS. The dean of the COPPS is a member of the Dean's Council.

The director of the IPH serves as the program director of the FAMU public health program and is responsible for the administration and management of the MPH and DrPH programs. The director of the IPH reports directly to the associate dean of the COPPS regarding programmatic issues and directly to the dean of the COPPS regarding budgetary matters. The director of the IPH is a member of the Executive Council of the college, which is responsible for developing and executing policy matters pertaining to college operations and is also a member of the College Graduate Council which is responsible for policies pertaining to all graduate programs within the college, including the review of graduate applicants and recommendations for admission.

The MPH program has authority for initiating internal organization and structure based on the needs of the discipline, faculty and students. All new degree programs (non-doctoral) must be approved by the MPH program, COPPS, the Faculty Senate and the BOT. All doctoral degrees must be approved by the BOT with final approval from the BOG.

Decisions for funding allocations for the MPH program are negotiated between the COPPS dean and the IPH's Office of the Academic Affairs. The COPPS receives a budget allocation which contains a separate budget for the MPH and DrPH programs. All annual budget requests are reviewed by the Office of the Vice President for Administrative and Fiscal Affairs and the university president. The university annual budget request is submitted to the BOT for review and final approval.

The program follows university and COPPS recruitment, hiring, selection, academic standards and advancement procedures for faculty members. This includes the use of search committees, annual faculty evaluations and promotion and tenure policies by the COPPS Tenure and Promotion Committee.

The Faculty Senate at FAMU is responsible for establishing academic standards and policies. Due to this fact, every college and department within the university is governed by the decisions of the Faculty Senate. All curricular oversight for approval of all new degree programs, courses and academic standards is a shared responsibility among the IPH committees, the College Graduate Council, the College Curriculum Committee and the University Curriculum Committee.

1.4 Organization and Administration.

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

This criterion is met. The IPH houses the FAMU MPH and DrPH programs. The IPH is a unit of the COPPS. All program faculty and staff report to the director.

A management team of four personnel provides assistance to the IPH director and meets biweekly. The members include: the associate director, the program assistant and two program coordinators. In addition, the coordinator for student services in the dean's office provides support to the program. Each of the four MPH concentrations has a senior faculty member who provides for communication and coordination. The associate director has responsibilities for planning and coordinating academic tasks assigned to the faculty, coordinating internships and rotations, interacting with field placement preceptors and, preparing program and IPH reports for the program director.

The program assistant provides administrative and clerical support to the MPH and DrPH program directors, faculty and students and also serves as the project coordinator for the federally-funded Geographic Information Systems and Spatial Analysis Laboratory. The two program coordinators provide administrative support for extramural research and service programs. One coordinator provides academic support services. The other coordinator serves as the FAMU program coordinator for the University of Florida-FAMU Rural South Public Health Training Center (RSPHTC), which is federally funded by the Health Resources and Services Administration (HRSA). The student services coordinator provides assistance to the public health program and program director. She is responsible for recruiting new students and processing applications, managing student records, coordinating student enrollment, providing oversight of graduate student assistants, providing counseling related to financial assistance, informing students of career placement opportunities and maintaining policies and procedures regarding academic performance and matriculation status of students. Administrative staff reporting to the college dean provide additional support to the IPH in the areas of sponsored research, academic coordination and budgetary and financial planning and reporting.

The IPH faculty, students and the 19-member IPH Advisory Committee value interdisciplinary coordination, cooperation and collaboration. In a meeting with the college dean and MPH and DrPH program directors, site visitors were informed that public health faculty teach a required introductory course in public health plus a statistics course for pharmacy students. In addition, the faculty and students from pharmacy and public health engage with each other in providing outreach such as community service and continuing education. If joint degrees are established in the future, the first will be a PharmD-MPH dual degree program, due to these successful interactions and the mutual interest that is

generated. Collaboration among the IPH faculty is credited for the success of at least nine named initiatives. Collaboration with other academic units on campus especially through instructional and research activities and faculty serving on thesis and dissertation committees for students in other programs is evident. The Center for Healthy Options and Innovative Community Empowerment (Project CHOICE), funded by the National Center for Minority Health and Health Disparities, is designed to address health disparities such as diabetes, hypertension and infant mortality in predominantly African American communities. In addition to the IPH, the collaborating partners include the School of Allied Health Sciences, School of the Environment, School of Nursing, Department of Psychology, School of Social Work, Department of Physics and the Economic, Social and Administrative Pharmacy Program of the College of Pharmacy. Other collaborative research grants involve faculty in the Department of Psychology and in the College of Agriculture and Food Sciences.

Beyond the campus, the IPH engages in collaborative work with state agencies and other Florida universities offering public health training and serves as the Coordinating Center for the Consortium of African American Public Health Programs, which has eight university members. The site visitors agreed that these collaborations represent excellent interdisciplinary learning and research opportunities for students and faculty. In a meeting with the site visitors, the interim university president reinforced the importance of interdisciplinary collaboration, especially in the area of research.

Numerous policies available through websites, the faculty handbook and the COPPS graduate student handbook describe FAMU's and the IPH's commitment to fair and ethical dealings. These policies address commitment to accessibility, federal laws and regulations supporting human rights and equal opportunities, grievance procedures and appeals, dishonesty in academic matters, conflict of interest, sexual harassment, responsible research conduct, faculty workload and many other areas. In addition, guidance is offered through the documents "Personal Matters for FAMU Employees" and through collective bargaining agreements with various unions representing employees.

For handling student complaints and grievances, the IPH follows clearly detailed appeals policies and procedural steps, outlined in the student handbook and available online, including the School of Graduate Studies and Research website. The procedures are designed to resolve the issue at the level closest to the conflict situation and informally if possible. If a solution is not found at the course instructor or advisor level, assistance may be obtained from the IPH director, followed by the college dean. If not resolved at the program level, formal written grievances are processed through the COPPS Grievance Committee, University Grievance Committee, provost and vice president for academic affairs and the president. A provision is available allowing for appeal directly to the IPH director and then to the college's associate provost for academic programs. The IPH reports that no formal student complaints or grievances were filed during the past three years.

1.5 Governance.

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

This criterion is met. Administrators, faculty and students have defined roles and responsibilities in the governance of the IPH and with influencing its academic policies and practices. They are active participants in decision making. Faculty and students participate in defining, evaluating and realigning the program and express feelings of ownership and pride in the program.

The IPH director is responsible for providing leadership and governance for the IPH's programs, including planning, budgeting and resource allocation, submitting reports, conducting personnel evaluations, appointing members to the advisory committee and other program management responsibilities. Four management team members assist the program director in meeting overall responsibilities. Full-time faculty share in the governance of the program. Faculty and staff meet monthly to discuss issues and function primarily as a committee of the whole, receiving and acting on recommendations and reports from standing and ad hoc committees. Community research affiliates, with whom faculty conduct community-based research projects, participate in governing research initiatives. The IPH's Advisory Committee, first formed in 1996, meets on an annual basis and offers guidance, direction and evaluation of the academic programs.

The COPPS Graduate Council and the FAMU School of Graduate Studies and Research provide governance oversight for all IPH academic standards and policies, based on input and recommendations by the IPH director and faculty. The program director, two faculty and one public health student serve on the College Graduate Council. The college's Graduate Council assures that all program tracts adhere to guidelines of the University Graduate Council and of accrediting agencies. The COPPS Graduate Council is responsible for setting standards of quality, evaluating priorities for allocating student stipends and tuition waivers and for reviewing the academic status of all graduate students, including making recommendations regarding academic probation and dismissal. The College Curriculum Committee reviews and makes recommendations on proposals for addition, deletion or substantive modification of courses, curricula and programs.

Faculty research and service are expected by college and university tenure and promotion committees. Progress toward tenure, based on teaching, research and service, is documented in late spring each year as a faculty evaluation requirement. Each faculty member, in consultation with the IPH director, develops a work plan that includes research projects. The program director assigns the percent of workload effort to be directed to instruction, research, service and other activities, which is formalized with university

forms signed by the faculty member, program director and dean. Each faculty submits a monthly report to the IPH director for review and individual discussion.

The FAMU faculty handbook clearly defines rights and responsibilities of faculty related to instruction, research, service, tenure and promotion. The collective bargaining agreements with unions outline administration and faculty rights. The COPPS graduate student handbook, distributed at fall orientation, provides guidance on graduate education within the college. The MPH and DrPH handbooks provide policies and procedures pertinent to the public health programs. In meetings with the site visitors, faculty expressed satisfaction with the opportunities for shared governance at academic unit and university levels.

Reflecting shared governance and broad faculty participation, six standing IPH committees and four ad-hoc committees support the IPH and are responsible for examining various functions, recommending programmatic modifications and assisting in the implementation of initiatives. The standing committees which typically meet twice per year include the following: Curriculum Committee, Research Committee, Program Development Committee, Recruitment and Retention Committee, Assessment Committee and Continuing Education Committee.

The Curriculum Committee provides review of course learning objectives, competencies, new courses proposals and the practicum experience. The Research Committee reviews research policies and procedures, identifies and disseminates opportunities for research grants and partnerships, makes recommendations regarding student research projects and doctoral dissertation research and coordinates with the college's Grants Management Office and the Division of Sponsored Research. The Program Development Committee works through three sub-committees which focus respectively on new degree program development, continued enhancement of the DrPH program, and the online MPH program. The Recruitment and Retention Committee is charged with identifying effective student recruitment mechanisms and venues and developing marketing materials. The Assessment Committee is charged with continuing assessment of all IPH activities related to instruction, research, service, program mission, goals and objectives. The Continuing Education Committee develops policies and procedures regarding the development of continuing education activities. With few exceptions, these committees include one or more representatives from staff, alumni, students and the community. The Curriculum Committee does not have a staff representative, and the DrPH sub-committee does not have a staff or community representative.

Four ad-hoc committees include the following: Self-Study/Re-Accreditation, Tenure and Promotion Standards, Awards and Recognition and Strategic Planning. Students are represented on the ad-hoc committees with the exception of the Tenure and Promotion Standards Committee. Committees provide

input based on their deliberations to the monthly IPH faculty and staff meetings with actionable items forwarded to the COPPS Graduate Council, associate dean and dean of the college. The IPH Advisory Committee includes members with expertise in community development, minority health, curriculum development, doctoral program development, distance education, accreditation reviews and health disparity research.

With the exception of two tenure-leading faculty, all core faculty are engaged in committee work at college and university levels. In addition to service on search committees for five deans, one director and one vice president, at least six IPH core faculty are represented on various university committees including the following: PhD/Graduate Program Strengthening Taskforce, Faculty Senate, Institutional Review Board, Biotechnology Center Taskforce, Animal Protocol Review Committee, University Retention Committee, Academic Policy Guidelines Committee, Center and Institutes Committee, Selection Committee for Investigator Awards, Research Careers at Minority Institutions Translational and Behavioral Science Committee, Scholarship Committees and others.

Student perspectives of program functioning are provided through student representation on the standing and ad-hoc committees, student evaluation of courses, annual surveys and informal discussions with faculty advisors and the program director. Students have representation on all IPH standing committees and on all ad-hoc committees except the Tenure and Promotion Standards Committee. Students have a lead role in student recruitment and have opportunities to evaluate courses and to identify resource needs. They provide input through annual cohort satisfaction surveys and exit discussions with the program director. For faculty searches, students have opportunity to be involved in interviewing candidates and making recommendations for appointment.

The FPHP is the official dues-paying student organization for public health, which was founded in 1997. The FPHP has a constitution and by-laws and is governed by nine elected officers. One of the offices is that of faculty liaison; this individual provides direct counsel to the IPH director, faculty and staff regarding student issues and is invited to attend some monthly meetings of the faculty. The FPHP conducts an annual new student orientation, sponsors National Public Health Week functions, sponsors a trip to the American Public Health Association's annual meetings and engages in a variety of community service and fundraising activities. Students also are represented on the FAMU Graduate Student Association. The FPHP officers, along with other students, met with the site visitors and provided highly supportive comments about the faculty and their experiences with the program. Students indicated that they were aware of the self-study process and had the opportunity to serve on committees and to provide input and review.

1.6 Resources.

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

This criterion is met with commentary. Annual funding for the SUS, which includes FAMU, begins with each university submitting an operating budget request to the SUS chancellor. Staff review the submissions for compliance with BOG guidelines and priorities. After approval by the chancellor and the BOG, a Legislative Budget Request for the SUS is transmitted to the Florida legislature and governor for legislative review and appropriations. The state legislature has not used a specific funding formula to allocate resources to each state university since 2008 due to the state of the economy. Following an appropriation of funds to FAMU, the university president approves guidelines for distributing funds, and the chief financial officer, with the assistance of the Budget Office, distributes operating funds to each division. For the Division of Academic Affairs, the provost distributes resources based on consultation with deans and department heads and on the president's guidelines. These decisions result in a preliminary operating budget, which is subsequently reviewed and approved by the president, the BOT and the BOG.

The program has a separate budget which is part of the overall college budget. The IPH faculty and staff discuss budget and resource needs with the program director who submits a budget request for the next academic year to the college dean. The dean working with the college's Executive Council amends prioritized program requests as needed and submits the request to the provost who also may make modifications prior to submitting the budget request to the vice president for administrative and fiscal affairs, the president and the University Budgeting and Planning Committee as part of the annual University Legislative Budget Request. The dean must defend his budget request by providing appropriate justification. The FAMU BOT provides review and final approval of the budget.

Table 1 presents seven years of IPH budget information. The primary sources of IPH funding support include state appropriations, grants and contracts, a university fund to augment program support and indirect cost recovery. Over the seven years of the budget report, state appropriations have provided the most significant funding, but grants and contract funding has increased over the past three years. Of total revenues for the most recent academic year, nearly 47% of funding was from state appropriations and an additional 40% resulted from grants and contracts. Beginning with academic year 2011-2012, tuition income of nearly \$220,000 from the online MPH program plus additional university support of nearly \$16,000 became a source of funds, representing nearly 9% of the available funding. Indirect cost recovery provides 5% return to the principal investigator. Due to the influence of grant funding, expenditures for operations have been uneven over the seven years, with the smallest expenditure occurring in academic year 2008-2009 and the highest in academic year 2011-2012. Travel support has

declined since academic year 2007-2008. Student support was highest during academic year 2010-2011.

Table 1. Sources of Funds and Expenditures by Major Category, Fiscal Years 2010 to 2013							
	2005- 2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
Source of Funds							
Tuition & Fees (revenue from online program)	n/a	n/a	n/a	n/a	n/a	n/a	\$235,586
State Appropriation	\$1,085,563	\$1,085,563	\$1,055,344	\$1,180,110	\$1,290,184	\$1,274,895	\$1,235,827
*University Funds	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$75,000
Grants/Contracts	\$500,000	\$500,000	\$500,000	\$521,640.60	\$763,582.03	\$724,690.60	\$1,065,410
**Indirect Cost Recovery	\$13,250	\$13,250	\$13,250	\$13,823	\$20,235	\$19,204	\$28,233
TOTAL Income (allocation)	\$1,648,813	\$1,648,813	\$1,618,594	\$1,765,573.60	\$2,124,001.03	\$2,068,789.60	\$2,640,056
Expenditures							
Faculty Salaries & Benefits	\$897,872	\$897,872	\$881,803	\$1,030,577	\$1,191,238	\$1,182,554	\$1,260,409
Staff Salaries & Benefits	\$55,954	\$41,804	\$50,001	\$50,000	\$55,000	\$55,000	\$54,500
Operations	\$217,184	\$217,184	\$150,119	\$57,088	\$284,946	\$117,341	\$405,834
Travel	\$14,553	\$14,553	\$24,618	\$17,444	\$14,000	\$15,000	\$15,400
Student Support	\$442,222	\$427,496	\$479,608	\$579,443	\$518,761	\$679,867	\$411,600
Total Expenditures	\$1,627,785	\$1,598,909	\$1,586,149	\$1,734,552	\$2,063,945	\$2,049,762	\$2,147,743

All full-time faculty have 12-month, tenure-track or tenured positions and participate in instruction, research, service and advising. The number of core faculty supporting each of the four concentrations meets the CEPH minimum standard for adequacy of faculty over two of the past three years. The online generalist MPH degree program, during academic year 2011-2012, required involvement of 10 core faculty from the other concentrations during the start-up year. Of 16 core IPH faculty members for fall 2011, 13 were reported as 1.0 full-time equivalence (FTE) and three were 0.50 FTE, for an overall 14.5 FTE. However, one health policy and management faculty member resigned mid-year. Of 15 core faculty for spring 2012, eight are tenured and seven were tenure-track, and all were on hard money. Updated data for 2012- 2013, at the time of the site visit showed twelve faculty.

Monitoring student to core faculty ratios (SFRs) is important for ensuring high quality teaching-learning. The most recent SFRs are 6.6 for Behavioral Science and Health Education (BSHE), 3.9 for Environmental and Occupational Health (EOH), 4.6 for Epidemiology and Biostatistics (EPBI) and 1.9 for Health Policy and Management (HPM). The program reported the SFR for the online generalist concentration as 5.7, but this concentration during the first year of implementation drew on 3.15 FTE contributions of 10 core faculty assigned to the other four concentrations, without adjusting FTEs for their primary concentration responsibilities.

The FTEs for current core faculty appear to be sufficient to maintain a reasonable SFR for the next few years, if the three additional faculty for the generalist concentration and one replacement faculty for the HPM track are hired in a timely manner. With the implementation of the online generalist MPH program during fall 2011 requiring a minimum of three full-time faculty and the creation of a faculty vacancy during spring semester 2012, the program recognized the critical and challenging need to employ four new faculty as soon as possible. The college and university approved the search requests. As an update regarding the faculty searches, the site visitors verified that an HPM faculty member has been appointed to begin November 1, 2012; and this new faculty member was present to participate in one of the meetings. In addition, the program was highly successful in hiring two qualified faculty members for the online program with start dates of November 1, 2012 and May 1, 2013. A third faculty member for the online program after receiving the program's offer decided to take another position.

The first commentary relates to the need for the program to recruit and fill the third faculty line for the online program in the very near future, even if this requires immediately re-opening the faculty search. The program will not meet the faculty adequacy standard by dividing a full-time faculty member's workload to show 0.50 FTE each for the online and an existing specialty concentration. After the site visit, the program provided a letter of acceptance from a candidate to fill the third faculty position by fall of 2013.

A second commentary relates to the workload of the existing faculty, which appeared to the site visitors to be heavy, considering the research and community involvements, the instructional assistance provided in implementing the online program, participation in faculty searches and committee work, direction of doctoral dissertation research and numerous other responsibilities. In response to questions, the students reported that faculty were just as accessible and responsive to them after they began teaching an overload for the online program as before. Several students agreed that most faculty were available to them 24/7 due to technology. It is clearly an asset to have a dedicated and caring faculty, but program and college administrators will need to find a way to help faculty achieve a more reasonable work-life balance. The site visitors recognize that the online instructional activities will lessen for faculty following the three new faculty hires. However, with the possibility of sabbaticals being awarded to one or more senior faculty in 2014-2015, workloads will again need to increase in order to cover responsibilities for those who are on professional leave for one semester or one year.

Regarding IPH program administration and staff, the director, the associate director, one program assistant and two program coordinators are identified plus a director of graduate programs and a coordinator of student services who hold administrative support positions in the dean's office. An additional two program assistants support the University of Florida-FAMU RSPHTC. The FAMU Office of Instructional Technology provides additional technical assistance to support the online MPH program.

The IPH has 18 offices for faculty and administrative staff plus a resource center/library located in the Science Research Center (SRC) totaling 2772 square feet of space. Two classrooms are available in the SRC, which are also used for meetings. Other classrooms are located in the new pharmacy building, where most public health classes are taught. These classrooms include six with 40 seats, plus a 200-seat classroom and a 500-seat auditorium. Dedicated study carrels and a lounge break area are available on the second floor of the SRC. Access to another lounge is provided in the new pharmacy building.

The Geographic Information System, Data and Spatial Analysis Laboratory, known as the "GIS Lab," is the primary academic computing support structure for the IPH and has 600 square feet of space in the SRC. The GIS Lab, supported by federal Title III funds, provides hardware, software and consultation support for research and is managed by an IPH professor and a program assistant.

All administrators, faculty and staff have personal computers and printers in their offices. Each faculty member also has a laptop computer. The college maintains a 100 station state-of-the art computer laboratory in the new pharmacy building, which is available both for instruction and open access. A computer laboratory in the SRC features 20 stations and is available 24 hours per day using secured access. University computer specialists provide technical support. The FAMU Office of Instructional Technology provides a variety of computing services. The online MPH program offers courses through the Blackboard Learning System.

The Samuel H. Coleman Memorial Library is the main library, with over one million catalogued volumes, over 12,000 serial subscriptions, 192,000 microforms and 76,000 non-print sources. As a federal document depository, the library provides access to government publications. Using SFX linking software, the user is linked directly to full text copy of journal articles and to interlibrary loan or references services. Through the University Libraries' web page, faculty and students have full access to the FAMU library catalog on or off campus and to the library catalogs of the State of Florida University and community college libraries. The library staff work with academic units to ensure that the collection supports the goals of the curriculum and that the library is providing the services needed to support academic programs. The Science Research Library, located in the SRC, is a branch library which provides additional support for public health and the health sciences. The SRC Library's collection includes 24,102 monographs, 5989 bound periodicals, 915 print and online journals, plus 791 microcards, audiovisuals, electronic databases and CD-ROM collections. The SRC Library has 10,000 square feet of space on two levels.

The IPH has 55 formal agreements with a variety of external organizations and agencies that provide opportunities for instruction, research and service. These organizations include voluntary health agencies, state and county health departments, coalitions, foundations, city and state government agencies, hospitals, cancer centers, the Agency for Toxic Substances and Disease Registry and others. In addition, the program identifies informal working agreements with four other community resources.

In-kind academic contributions are available due to an array of numerous community resource persons, public health practitioners and health professionals. These practitioners engage in guest lecturing and providing rotation experiences and internship sites for MPH and DrPH students. Faculty members from a wide variety of FAMU academic programs also serve as guest lecturers and provide seminars.

Data for the requested minimum program performance measures regarding resources for each of the last three years indicate that research dollars per FTE core faculty are meeting the annual target of \$40,000, with a favorable upward trend line. Expenditures per FTE student exceed the target of \$24,510 per FTE student for each of the three years but have been declining steadily during this time. Extramural funds for service or training as a percent of total budget were not reported.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Master of Public Health Degree.

The program shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional master's degree. The program may offer a generalist MPH degree or an MPH with areas of specialization. The program, depending upon how it defines the unit of accreditation, may offer other degrees, professional and academic, if consistent with its mission and resources.

This criterion is met. The program currently offers five MPH concentrations. One concentration is generalist, which is offered via the distance-learning MPH degree further described in Criterion 2.11. Table 2 presents the program's degree offerings. The program of study for the five MPH concentrations requires the completion of 50 credit hours of coursework. The curricular requirements for the campus-based MPH include: 25 credit hours of core public health courses, nine credit hours of concentration-specific courses, three hours of public health practice rotation, five credit hours of special research/independent study, and one credit hour of professional development, six credit hours of public health internship and one credit hour of comprehensive examination. The curricular requirements for the distance-learning MPH include: 25 credit hours of core public health courses, nine credit hours of generalist concentration courses, nine hours of public health practice, six credit hours of public health internship and one credit hour of comprehensive examination. A review of the curricular requirements shows an acceptable depth and level of required coursework for each concentration, which includes concentration-specific courses. The program offers two doctoral degrees further described in Criterion 2.9.

Table 2. Degrees Offered		
	Academic	Professional
Masters Degrees		
Behavioral Science and Health Education		MPH
Environmental and Occupational Health		MPH
Epidemiology and Biostatistics		MPH
Health Policy and Management		MPH
Generalist (on-line)		MPH
Doctoral Degrees		
Behavioral Science and Health Education		DrPH
Epidemiology and Biostatistics		DrPH

Although this criterion is met, the site visit team did receive student feedback regarding the health policy and management concentration. Students indicated that there should be an increase in the number of course offerings in this concentration and additional faculty expertise. The plan to hire an additional faculty member is further described in Criterion 1.6

2.2 Program Length.

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

This criterion is met. The program of study for all five concentrations requires the completion of 50 semester credit hours. Courses in the MPH program mostly consist of three semester credit hours, with the exception of the professional development courses, public health seminar (distance-based MPH) and the biostatistics laboratory course, which are all one semester credit hour. There are also two public health practice courses in the MPH curriculum that are two semester credit hours. The self-study notes that for most courses, credit hours are determined by the State of Florida, which defines a three-credit course being equivalent to 48 contact hours of instruction.

Over the last three years, no MPH degrees were awarded for fewer than 42 credit hours of coursework.

The MPH program allows students to transfer up to 27 credit hours of graduate-level courses. The transfer credit is approved by the MPH program director via a successful side-by-side comparison of course competencies and course syllabus for each class for which a student requests a credit transfer. If a review is unsuccessful the student must enroll and complete the needed MPH class requirement in the FAMU program. Site visitors learned that an example of this recently occurred when a student requested a transfer credit of a biostatistics class, and the review of syllabus and competencies indicated that the course was not comparable to the biostatistics class offered in the FAMU MPH program. All courses must be passed with a B or higher to be accepted as transfer credit.

2.3 Public Health Core Knowledge.

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

This criterion is met. All MPH students are required to complete nine core courses. The core courses address the five core disciplines in public health and total 25 credit hours. The nine core discipline courses are listed in Table 3.

Core Knowledge Area	Course Number & Title	Credits
Biostatistics	PHC 6050 Biostatistics for Public Health Practice	3
	PHC 6050L Biostatistics for Public Health Practice Lab	1
Epidemiology	PHC 6000 Introduction to Epidemiology	3
Environmental and Occupational Health	PHC 6357 Public Health Perspectives of Environmental and Occupational Health	3
Behavioral Science and Health Education	PHC 6560 Principles of Behavioral Science and Health Education	3
Health Policy and Management	PHC 6102 Principles of Health Policy and Management	3
All five core knowledge areas	PHC 6100 Introduction to Public Health	3
	PHC 6704 Applied Community-Based Research Methods	3
	PHC 6934 Topics in Public Health	3

The site visit team reviewed syllabi, and core courses are appropriate for master's level coursework. DrPH students without an MPH degree at the time of admission to FAMU are required to enroll and complete successfully all of the MPH core courses except PHC 6050L and PHC 6704. DrPH students enrolled in the behavioral science and health education concentration do complete PHC 6704 as part of the research methods core requirements for the doctoral degree.

2.4 Practical Skills.

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

This criterion is met with commentary. The campus-based MPH program requires four public health practice courses, two of which require field experience in a public health setting. MPH students complete PHC 6945 – Public Health Practice I (Rotation) in the third semester of study, following the completion of the first two semesters of core courses. This course allows students to complete a rotation in the Florida Department of Health (FDOH) divisions or bureaus in programmatic areas representative of the five core areas of public health. This association is documented by a formal Memorandum of Agreement (MOA) between FAMU and the agency. The MOA must be in effect and signed prior to the beginning of the

rotation and is active for three years. Students complete ten hours per week for a total of 12 weeks (three four-week rotations). Each student is provided with a list of possible projects and preceptors two months prior to the start of PHC 6945. Students select projects based on interest and contact the respective preceptor to discuss the project, work hours and expected deliverables. Rotation preceptors should possess the following: (1) credentials and experience in the core public health competencies; (2) experience and interest in mentoring; and (3) support from the organization to supervise MPH students. Once a successful match is made it is communicated to the preceptor, student and program coordinator. Both students and preceptors receive guidance from two rotation coordinators. The associate director of the IPH serves as the rotation coordinator for the FAMU MPH program and a representative from the rotation site serves as the site rotation coordinator. Students are evaluated via: (1) six biweekly reports; (2) three rotation products (eg, surveys, field reports, brochure development, analysis of data); and (3) a preceptor evaluation.

The distance-based MPH students are not required to complete PHC 6945- Public Health Practice I (Rotation) and PHC 6817 – 6817 Professional Development for Public Health. The reason for this difference in curricula requirements is that the distance-based MPH program is designed for students with a minimum of five years of health professional experience. Students enrolled in the distance-based program have worked in public health or health care settings. In lieu of these two courses students complete Public Health Ethics for Health Professionals and Public Health Seminar for Health Professionals for a total of four credits. At the time of the site visit course numbers were being assigned to these two courses.

Both the campus-based MPH program and distance-based MPH program requires a public health practicum (PHC 7946 – Public Health Internship) for six credits. For on-campus students, this requirement is in addition to the PHC 6945 rotation. Students locate and decide upon a practicum site at the beginning of their fourth semester of studies. Students meet with their faculty advisors and the site internship coordinator to review their resume and the completed internship information form. Students are required to complete a field experience in their area of MPH concentration, which is declared by the student at the conclusion of their third semester. Site selection is also based on previous public health experience, career interests and career goals.

Working students may complete their practicum in their primary place of employment, although this is not recommended and even discouraged. The practicum must be above and beyond their normal work duties. Permission to do so is given by the faculty advisor and MPH program director.

Once a potential practicum site is located the student, faculty advisor and the site internship coordinator communicate via conference call or in person with the proposed internship site to discuss a possible field

experience. The student, faculty advisor and site internship coordinator meet after this interaction and determine if the proposed site will be an appropriate location for an internship. If so, a letter is written to the proposed site requesting a practicum experience for the student. If approved, specific learning objectives for the field experience are identified between student and preceptor and are listed in a signed agreement between the student and preceptor. Practicum preceptors should possess the same requirements as listed above for rotation preceptors. Students are required to complete a minimum of 20 hours/week over the entire semester for a total of 240 hours. Students are evaluated by internship preceptor via the submission of a mid-semester assessment and submission of a final evaluation.

The first point of commentary relates to the lack of a post-practicum student evaluation of the practicum site and preceptor, which is paramount to informing future student placements.

The second point of commentary relates to the generality of the preceptor final evaluation form, which does not require the preceptor to reflect on the specific learning objectives that the student was to achieve during the field experience.

The final commentary relates to language contained in the Public Health Internship Program Guidelines: MPH Program spring 2012. On page 119 of this document under the section titled “academic requirements for internship,” reference is made to the 42 credit hour MPH program that did not require a practicum experience. The 42-credit hour MPH program was last offered several years ago and is no longer in existence. The continued reference to a 42 credit hour MPH program in the program guidelines can cause students to be confused regarding required elements to successfully complete the MPH course requirements.

Doctoral students are required to complete a public health practicum (PHC 7945 – Public Health Internship) for four credits. The doctoral practicum is structured to: (1) augment the student’s academic and dissertation research goals and professional interest; (2) provide opportunities for professional advancement of specific competencies that the student has not yet mastered in their coursework or prior professional experience; and (3) demonstrate the student’s ability to communicate and interact with people across diverse communities and cultures. Doctoral students are required to spend a minimum of 180-200 hours at their field placement. Students are matched with preceptors that have specific skills related to students’ individual dissertation research interests and provide extensive mentoring to students. Doctoral students provide a written report on how the practicum informed his/her dissertation.

No waivers are granted for either masters or doctoral students to omit the practicum requirement.

The IPH honors all preceptors during the early fall of every year with a certificate of appreciation that is presented at the Preceptor's Breakfast hosted by the FAMU IPH. Also, several preceptors have been inducted into the Alpha Mu Chapter of Delta Omega Public Health Honor Society for their mentoring of MPH students as practicum preceptors.

Preceptors spoke enthusiastically about field rotations and internship experiences and the knowledge that students bring to their field experiences. Preceptors indicated that students are well prepared to work in professional environments and praised students' presentation skills and ability to convey public health information to outside audiences. Site visitors learned from alumni and students that their practice experiences reinforced their knowledge of public health and expanded their knowledge and abilities to work in the field of public health. Both alumni and students praised the required rotations that allowed them to be exposed to multiple areas of public health. The site visit team also heard positive feedback from doctoral students that the practice experience aided them in dissertation research and defense and reinforced knowledge of community health issues.

2.5 Culminating Experience.

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

This criterion is met with commentary. All MPH students are required to complete a culminating experience before graduating from the program. The culminating experience consists of several requirements: (1) the completion of PHC 7965 Comprehensive Examination; (2) Public Health Practice III (Independent Study); and (3) PHC 7946 Public Health Internship. Since the public health internship was discussed in the previous section, this section will focus on the remaining components.

The comprehensive examination is taken in the last semester of study. It is a written two-day exercise which covers the basic principles and concepts of the five core areas of public health. The examination has a section which contains questions on the student's area of concentration for the campus-based students. Students must score at least 80% on each section to earn a passing grade. Students are allowed a total of two opportunities to successfully pass all parts of the exam and, if not successful, one final time in the following semester. Failure to pass the comprehensive exam, in the following semester, results in dismissal of the student from the MPH program. The site visit team learned that some professors provide review sessions to prepare students for the comprehensive exam and that 80%-85% of students are successful with passing the comprehensive exam on their first examination attempt.

All MPH students are also responsible for the development and conduct of an independent research project (Public Health Practice III- Independent Study) in their concentration area. Each student must orally present their public health research project in a public forum and submit the written project at the

conclusion of the semester. The commentary relates to the fact that a standard rubric for the evaluation of research project and presentation does not exist. Although topic areas vary, it would be beneficial for both students and the MPH program to have some degree of standardized evaluation of this requirement for student learning and competency attainment.

The culminating experience for the DrPH program consists of written and oral qualifying exams, the public health internship, a doctoral dissertation and oral defenses. Students must successfully complete all core and advanced doctoral coursework before beginning their public health internship. All research projects are guided by the major preceptor and six-member dissertation committee. Students are required to pass a doctoral pre-qualifying comprehensive examination and the doctoral specialty examination. Following acceptance of the research protocol and conduct of the study, the student writes the dissertation and orally defends it. Students are not required to seek publication of their dissertation for the degree to be conferred.

Site visitors reviewed several examples of both master's and doctoral level capstone projects and they showed rigor, professionalism and creativity. Site visitors heard positive feedback from students and alumni regarding their culminating experiences. Site visitors learned that offering the opportunity to complete the doctoral comprehensive exams outside of the normally scheduled February and September timeframes would be very beneficial to doctoral students who are completing the program on a part-time basis or if doctoral studies undergo a change in completion time due to work or family responsibilities.

2.6 Required Competencies.

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

This criterion is met. Ten core public health competencies are defined for the MPH students using such verbs as demonstrate, distinguish, analyze or apply, which involve higher-order thinking according to widely-accepted analysis of learning situations. For each competency, there is an indication of its relationship with one or more competency domains, and these are further linked to IPH goals and objectives. An additional 10 core competencies along with their linkage to competency domains and IPH goals and objectives are defined for DrPH students.

A matrix identifies five core courses basic to public health plus an additional five courses which include an introduction to public health, research methods, a current topics course, a professional development course and a special problems course. These 10 courses provide experiences through which MPH and DrPH students are expected to develop and strengthen core public health competencies. The required practice experiences and dissertation projects offer further support for competency development.

Ten competencies are identified for each of the four MPH concentrations and for each of the two DrPH concentrations. For the online MPH generalist concentration, 27 competencies are identified. Faculty in discussions with the site visitors were knowledgeable and supportive of the benefits derived through competency-based educational approaches. Faculty indicated that the sets of competencies resulted in greater consistency for courses taught by more than one faculty member. They also observed that students were more willing to participate in learning situations that were demanding, because the students recognized that they were meeting competency expectations that were in common use among accredited public health programs.

The IPH faculty developed the competencies based on their individual understanding of concepts, principles and practices of their respective disciplines and on their interaction with each other through committee meetings and general faculty meetings. The IPH cites use of the Association of Schools of Public Health Education Committee's Master's and Doctoral Degree in Public Health Competency Development Project, Version 2.3 as a source of discipline specific and interdisciplinary/cross-cutting competencies. Also, the competency guidance by the Council on Linkages between Academia and Public Health Practice is listed as a reference. Core and concentration-specific competencies are included in course syllabi, along with course objectives.

The IPH uses various mechanisms to assess the changing needs of public health practice and to establish or revise competencies, modify course expectations or add courses in response to the information received. Partnerships and connecting with public health professionals at local, state and national levels provide useful information. These contacts include community-based research affiliates, local and state agency personnel, alumni, field preceptors and the IPH Advisory Committee. The IPH also examines selected Institute of Medicine reports that address emerging issues and changing trends impacting public health practice.

Although this criterion is met, the site visitors encourage the faculty to continue examining the format and wording of the competencies to make them more consistent. Even though most competency statements begin with an action verb, several in each concentration and all HPM competencies begin with the preposition "to." Two of the HPM competencies and one of the generalist competencies begin with the phrase "to provide students with." Three additional HPM competencies begin with the phrase "to enable students." Such framing of competency statements suggests instructional approaches and does not establish expected learner-centered outcomes. The competency statement should indicate specifically what the graduate will know and be able to do as a result of the learning experiences. In addition, with the progressive growth of the program over time, a process should be established to systematically review and update the competencies. Most curricula will be strengthened and will benefit through continued review and refinement of the competency statements. Finally, the 27 competencies for the online generalist concentration appear to be out-of-balance with the other sets of specialty competencies,

which each have 10. Because three cohorts of students are now proceeding through the online courses, the instructional experiences may allow faculty to reduce the number of competencies for this generalist area.

2.7 Assessment Procedures.

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

This criterion is met. The IPH possesses a “culture of assessment” reflective of extensive and thorough assessment policies and procedures intended to evaluate student academic progress, and to verify that competencies have been met. MPH and DrPH student progress towards meeting program competencies and course objectives is monitored and evaluated through in-class written examinations, oral presentations, research papers, class participation, discussion, debate, program projects, development of analytical skills, case study evaluations and presentations and field experience. A comprehensive exam evaluating core competencies in each of the core areas of public health and specialized track areas is required. MPH candidates conduct a public health research project that is presented orally and submitted as a written product. Extensive formalized outcome performance measures for master and doctoral levels exist.

The School of Graduate Studies and Research and the COPPS require that all graduate students maintain a minimum grade point average of B during their matriculation in the program. Any student who has a grade point average below a B is placed on academic probation. Any grade below a B in a core course must be repeated. If a student receives more than two failing grades (grades of C or below) and/or does not raise his or her GPA to a minimum of a 3.0 within two academic semesters, the student is dismissed. Site visitors learned that from 2009 – 2012, a total of 15 campus-based MPH students were placed on academic probation and, during this same time, three students were dismissed. Site visitors also learned that for the newly implemented distance-based MPH program for academic year 2011-2012, three students were placed on academic probation and two students were dismissed.

Data tables and performance metrics presented and reviewed as part of the self-study reflect a deliberate and thorough process for making evidence-based decisions. Presented performance measures suggest the program has identified and is achieving desired outcomes.

The MPH program is largely a three year program due to several students who elect to go part-time after one or two semesters in the program. For DrPH students, the program is generally six years until completion. Thus, the degree completion rates, that are below 80%, are indicative of students who did not complete the program within the two year time period achieved by full-time students. These students continued and graduated in the third year (on-time). The completion rates for the DrPH students are indicative of a six year time period before graduation. During the inaugural year (January 2005) and

following fall, graduation rates were below 80% due primarily to work schedules with a few students. The program was also in its early implementation years. Starting in 2006-2007, DrPH students are graduating at or before the maximum time to graduation of six years.

In addition to academic program performance metrics, student and alumni survey data generally indicate that students and alumni have been successful in gaining the core and concentration - specific competencies. Ninety-seven percent of surveyed alumni indicated that they strongly agreed or agreed that the program gave them the knowledge and skills to be a successful public health professional.

The destination of IPH graduates is primarily federal and state government; 60-65% of the graduates remain in Florida. Worthy of note is that of students who elected to sit for the Certified Health Education Specialist (CHES) examination, between 2008-2012 100% passed the exam.

2.8 Academic Degrees.

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

This criterion is not applicable.

2.9 Doctoral Degrees.

The program may offer doctoral degree programs, if consistent with its mission and resources.

This criterion is met. The FAMU program received authority to develop and implement the Doctor of Public Health (DrPH) degree program in 2004. The first doctoral students matriculated into the program in January of 2005. The first doctoral student graduated from the program in December 2008, and since that date, 10 additional students have been conferred with the DrPH degree. As of August 2012, there are 23 DrPH students in the program.

The FAMU program offers the DrPH degree in two concentration areas: behavioral science and health education and epidemiology and biostatistics. At the time of the site visit 12 students were enrolled in the behavioral science and health education concentration and 11 students were enrolled in the epidemiology and biostatistics concentration. Competencies have been developed for each doctoral concentration that represents the goal of achieving advanced knowledge and research skills.

The number of applicants to the DrPH program has varied for 2009 – 2013. The behavioral science and health education concentration has received the larger number of applicants compared to the epidemiology and biostatistics concentration for 2009 – 2011. However in academic year 2012 – 2013 there were nine applicants for the epidemiology and biostatics concentration compared to the seven

applicants for the behavioral sciences and health education concentration. Site visitors learned that two graduates, one in each concentration are projected for spring 2013.

DrPH candidates are required to either complete 60 credit hours or 78 credit hours for conference of the degree. DrPH students without an MPH degree at the time of admission to FAMU are required to enroll and complete successfully all of the MPH core courses except PHC 6050L and PHC 6704. DrPH students enrolled in the behavioral science and health education concentration do complete PHC 6704 as part of the research methods core requirements for the doctoral degree.

In reviewing the plans of study for the doctoral programs and syllabi as well as in discussions with students and faculty involved in the doctoral programs, the site visit team determined that adequate doctoral level coursework is available. Students confirmed that faculty are actively involved as research mentors. Current doctoral students shared with site visitors that they rely on one another for support and encouragement throughout their doctoral studies and that this leads to knowledge reinforcement and decreases anxiety.

2.10 Joint Degrees.

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

This criterion is not applicable.

2.11 Distance Education or Executive Degree Programs.

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

This criterion is met with commentary. The program offers its distance-based MPH program for working health professionals who have a minimum of five years of public health and/or health care professional experience in a distance education format. The distance-based MPH program offers a generalist concentration. The first cohort of students began the distance-based MPH program in August 2011 and the second cohort of students began studies in spring of 2012. The site visit team learned that a third cohort of students began studies in fall 2012. Current enrollment in the program is 15 students.

Matriculation in the distance-based MPH program ranges from two to five years depending on whether students are completing the program full-time or part-time. All classes are one semester in length. Coursework is delivered via distance-based sessions using the Blackboard education technology platform. Blackboard has tools, including discussion forums and blogs that allow faculty to deliver course material and assess student learning in a collaborative and interactive manner. In addition, MPH program faculty also utilize Elluminate for web conferencing and Camtasia to allow the recording of audio from a microphone and the use of webcam video footage.

Students in the distance-based MPH program are expected to achieve the same core competencies as traditional MPH students. Additionally, the generalist concentration has its own specialized competency set and five student learning outcomes. As with campus-based students, online students complete a practicum and culminating experience. However, two variations occur regarding the practicum experience. On-line students are not required to enroll and complete PHC 6945 Public Health Rotation (3 credits) or PHC 6187 – Professional Development for Public Health Practice (1 credit). Instead students complete Public Health Ethics for the Health Professional (3 credits) and Public Health Seminar for the Health Professional for (1 credit). The distance-based MPH program is designed with this variation since individuals enrolled in the program have at least five years of public health and/or health care experience; the ethics and seminar requirements are more responsive to the learning experiences of the experienced non-traditional student. Currently, distance-based students may complete the comprehensive exam (culminating experience) on-line. Beginning in spring 2013, all distance-based students will be required to complete the comprehensive exam on the FAMU campus.

Students are required to attend IPH orientation during the first semester of enrollment. Currently, an online orientation program is provided for students and each student is assigned a faculty advisor. Beginning in spring 2013, all distance-based MPH students will be required to attend an on-site orientation in Tallahassee, Florida.

The commentary relates to the relative newness of the distance-based program and to the fact that evaluation of student and faculty performance is very limited. As the distance-based program matures, student performance of distance-based students in aggregate will be compared to the performance of the campus-based students in aggregate to ensure that the learning experience is comparable.

The site visit team learned that on-line capability is only available to students enrolled in the MPH distance-based program and that traditional students do not have access to this modality of class instruction. The site visit team also learned that several traditional students have inquired about on-line capability for completion of certain classes, and at this time, the MPH program will continue to offer this capability only to MPH distance-based students.

Each faculty member who teaches in the distance-based MPH program must obtain formal training by matriculating in a series of courses in instructional technology prior to serving as an instructor in the on-line program. Current IPH faculty participate in the distance-based MPH program. These faculty members serve as internal adjuncts with compensated overload for serving as instructors for courses within their area of expertise. The IPH mandates that no more than 10 of the current faculty can teach per academic year (given the existing workload). Currently, two individuals (.50 FTE and 1.0 FTE) provide administrative support to the online MPH program, and one staff member acts as the IT Coordinator; this position's time is 100% through the Office of Institutional Technology.

Students have access to program and university resources that are available to students in the campus-based MPH, including career services, library resources and scholarships.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met with commentary. Program faculty and students are engaged in research, with community-based participatory research as one of the primary approaches. Research interests are broad-based and reflect the IPH's mission and goals, including the following: environmental health and environmental justice, breast and prostate cancer research, infant mortality, program evaluation, childhood obesity surveillance, environmental epidemiology and lead poisoning, food insecurity and policies in Ghana and other areas. The program identifies global health as an emerging area of interest, which may lead to the development of an additional MPH concentration of study. The IPH identifies two research goals. These goals are "to conduct research that provide an evidence base for improving the health of those who bear a disproportionate burden of disease" and "to disseminate and translate research knowledge and findings gained to all public health stakeholders and the community at large." The program reports formal research affiliations or agreements with at least 27 governmental and community agencies.

The university's Office of Sponsored Research provides assistance to faculty for locating sources of funding, writing proposals, adhering to internal approval processes and for managing grants. The vice-president for research makes internal grants available on a competitive basis.

Consistent with university research expectations of faculty, evaluation of research and scholarly activities is included in annual faculty performance reviews and in tenure and promotion reviews. According to the

self-study, most faculty dedicate on average 40-45% of workload effort to research activities, unless mentoring doctoral students, which increases expectations for research effort by another 10%. Program faculty serve on college research committees, the University Research Council and the university's Institutional Review Board.

The first commentary relates to the need to clarify workload policies related to research. Faculty shared with site visitors that their research/scholarly workload was generally estimated to be in the range of 25-30% of workload, but the presence of grants would increase the percent effort to some extent. The program's expectation for research as part of workload should be re-examined and clearly defined to avoid the possibility of mixed messages, especially with four new faculty beginning their tenure-track positions this year.

Faculty are actively conducting community-based research projects. Of 17 sponsored research activities, 11 (65%) are listed as community-based. One example involves a collaborative, community-based partnership to translate research findings on toxicity and exposures to arsenic, lead and the polyaromatic hydrocarbons, which was funded by a Centers for Disease Control and Prevention/Agency for Toxic Substances and Disease Registry cooperative agreement. Local health care providers have been trained in environmental health, toxicology and environmental medicine; community knowledge has been increased through a site-specific toxicology curriculum and a translational research project involving modeling and environmental health tracking to link exposures to specific adverse health outcomes has been piloted. A second example of a community engagement project is an ethnographic study to detect components of obesity explanatory models from a lay perspective through interviews with African American women with healthy weight and with those who are overweight residing in Tallahassee, Florida with an objective of determining differences in explanatory models of obesity between lay and public health obesity models. A third project example seeks to reduce the risk factors for cardiovascular disease in mid-life and older African Americans by implementing and evaluating the effectiveness of the church-based health intervention, "Taking the Lead in Community Wellness," with funding by the National Center for Minority Health and Health Disparities. A fourth example involved research to measure similarities and/or differences in lead exposures in African Americans in a predominantly rural community in Florida, which was compared to African Americans in a predominantly urban community in Massachusetts, with funding by the National Center for Minority Health and Health Disparities. A final example has a focus on improving breast cancer screening in Gadsden and Leon counties through implementing and evaluating a theory-based, participatory intervention named Project Tree with a slogan of "A Friend is She Who Reminds Me." This research is funded by a National Institutes of Health P20 Center grant.

Research funding obtained by the IPH over the past three years ranges from just under \$700 thousand to nearly \$734 thousand, with an average of slightly over \$713 thousand per year. The self-study reports a

total of 19 grants with 10 of (53%) IPH core faculty serving as principal investigator (PI) and all but two of the other core tenure-track faculty serving on one or more of these grants in a co-PI role. The site visitors view the involvement of most of the core faculty in either a PI or co-PI role as clear demonstration that the program has successfully encouraged and engaged faculty in securing research funding.

According to the faculty qualifications criterion, each faculty member is expected annually to submit at least two research proposals for extramural funding, at least one abstract and one or two papers for publication in a peer reviewed or refereed journal. The program evaluates the success of research activities with a focus at the program level. Outcome measures include: extramural research funding, peer-reviewed publications, presentations at professional meetings, university/community research partnerships and interdisciplinary research collaborations. For the three year reporting period, all targets for the outcome measures were achieved, with the exception of a 10% increase in extramural funding support for 2011-2012.

Students have opportunities for involvement in faculty-led research projects. These assistantships are funded by the School of Graduate Studies and Research, federal funds such as US Department of Education Title III and funds available through faculty research grants and contracts. Students are involved in a wide variety of research roles such as conducting literature searches, assisting with conduct of focus groups, collecting data, analyzing data, transcribing tapes, providing outreach to community partners and other activities. Student research skills are further developed through completing a required applied community-based research methods course; and all students are required to conduct an independent public health research project that spans two semesters. In addition, students have opportunities for research involvement through the Florida Alliance for Health Professions Diversity, which is co-chaired by the IPH director. One of the programs, entitled the Florida Alliance Scholars Program, provides opportunity for students to work with a clinician on a research project. At least seven IPH students have participated in this program.

Sixteen (84%) of the 19 funded faculty research projects over three years indicate student participation. The single target for measuring student research participation is the submission by IPH students of at least two manuscripts for publication each year. The program reported three submissions for each of two years and 10 for 2011-2012. A listing of citations showing student co-authors for three publications and seven presentations at professional meetings, dated 2009-2012, provides evidence of research activity. Students, in a meeting with site visitors, report that they are encouraged and assisted by the faculty to engage in research.

The second commentary relates to a perceived need for the program to establish additional outcome measures with targets regarding student involvement in research as a way to track progress and

document successful attainment. Such reporting of student research activities and accomplishments is especially important for programs that offer doctoral degrees. Following discussions with faculty and students, the site visitors are convinced that students are actively engaged in research with faculty, but the single outcome measurement reported by the self-study falls short of adequately portraying this success.

3.2 Service.

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

This criterion is met. Service is a significant responsibility in and of the IPH. Faculty and students participate in a number of service programs and activities that contribute to the improvement of health status of many constituents. These service activities and affiliations are reflective of the service objectives of the MPH and DrPH programs, as well as major foci of the IPH. Faculty members are involved in service activities at the local, state and national levels, assuming leadership positions in some instances. These activities range from membership and leadership roles in professional organizations, public health associations (national, state, and local) and academic consortia, coalitions, technical assistance to community-based organizations, cultural competency training for local and state agencies, facilitating practicum experiences, conducting data management and statistical assistance workshops for faculty peers (external to the IPH and college), community health worker training and service on external dissertation committees.

Since the last accreditation visit, service expectations have increased. This increase was based on the desire to continue to increase linkages with local, state, and national agencies and organizations. In addition, MPH and DrPH students have been active in community service events in addition to sentinel public health events such as the celebration of National Public Health Week. Leadership in service is evident in the work of the student organization, FPHP and with students engaged in state and national leadership roles as officers in the state public health organization and candidates at the national level. Students must complete a minimum of 100 hours of community service as a requirement prior to being conferred with the MPH degree. For the years 2008-2012, public health students report over 9,000 hours of community service.

3.3 Workforce Development.

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

This criterion is met with commentary. The primary goal of the IPH's continuing education efforts is to ensure that training and education of the existing workforce are aligned to public health core competencies, and the ten essential public health services. One of the primary audiences for IPH workforce development programs consists of the public health workforce employed in government agencies. Currently, the IPH is working in conjunction with the Florida Department of Health Workforce

Development Office and the Florida Public Health Training Centers to conduct an updated, comprehensive workforce development needs assessment for public health professionals, by 2013. The recently funded UF-FAMU Rural South Public Health Training Center (RSPHTC) represents the most significant enhancement to the workforce development and continuing education efforts of the IPH, and the process of conducting individual county level assessments for rural counties in Florida has been initiated.

While the needs assessment is being conducted, the goal for continuing education has been to increase the number of programs offered by the IPH. Program faculty members have provided workshops and presentations on such topics as data management, health communication, health disparities, cultural competency and environmental health and environmental justice. These have been either sponsored or co-sponsored by IPH. Faculty interviewed during the site visit suggested that health department accreditation would represent an increasingly important area for workforce development.

The commentary relates to the relative lack of focus and direction of workforce development activities, which have to some large extent, been convened primarily on campus. These random acts of training will ideally be supplanted by the findings of the RSPHTC rural health workforce needs assessment, with commensurate attention provided to location and delivery vehicles suitable for the existing workforce.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The IPH identifies faculty members as core if their teaching, research, service and student advising activities equal or exceed 50% of their total work units. The IPH lists an institute director and full-time faculty members meeting this definition in four concentrations. Three of the 15 faculty are listed at 0.50 FTE. Five faculty support the BSHE concentration and five support EPBI concentration, each of which offers a DrPH degree in addition to the MPH degree. Three faculty support the EOH concentration and as of spring 2012, two faculty support the HPM specialty area due to the resignation of a faculty member mid-year. Eight core faculty are tenured and seven are tenure-track. Of the tenured faculty, two hold professor rank, five are associate professors and one is an assistant professor. Fifty-three percent of the core faculty hold the rank of assistant professor including one tenured assistant professor and seven tenure-track faculty.

All 15 core faculty have earned doctoral degrees including 12 PhDs, two DrPH degrees and one EdD degree. Two faculty have completed postdoctoral fellowships and six have earned an MPH or MSPH

degree. All faculty have degrees highly relevant to public health. Of the fifteen core faculty, 12 have past employment or practical experience in public health. The site visitors concur that core faculty members have the academic credentials and practice experiences to provide instruction for the five areas of knowledge basic to public health.

Other faculty supporting the program as instructors include six whose time commitment to the program ranges from 0.27 to 0.50 FTE. Four of the six have earned doctoral degrees and the remaining two have MPH or MHA degrees. The two masters-level prepared instructors and two of those holding doctoral degrees support the HPM concentration.

Faculty are encouraged to maintain ongoing practice linkages with communities and public health agencies in order to provide learning opportunities for students based on their personal research and service involvements. Faculty engage in the field of practice through such opportunities as: community-based intervention projects, community needs assessments, leadership positions in local public health policy making, development of health-related coalitions and other initiatives. Faculty participate in professional meetings, collaborate with local, state and national public health practitioners, and conduct community-based participatory research which broaden their perspectives regarding practice realities in the field. Guest lecturers and seminar speakers from public health settings contribute practice insights for faculty and students.

Outcome measures for faculty qualifications focus on having credentials appropriate to their course responsibilities, receiving positive ratings by students, receiving satisfactory annual faculty evaluations and obtaining graduate directive status and doctoral directive approval by the university. The program exceeded the stated targets for the six outcome measures for all three years. The IPH faculty possess relevant academic credentials and are receiving high ratings from student evaluations and satisfactory performance ratings from the program director.

4.2 Faculty Policies and Procedures.

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

This criterion is met. The FAMU faculty handbook, the collective bargaining agreements, college tenure and promotion criteria and the Faculty Senate handbook address faculty rules and regulations. These include policies, procedures and expectations governing recruitment, hiring, promotion, tenure and probationary periods for faculty. The university faculty handbook and other documents are available online.

The university supports faculty development through a variety of programs. The Office of Instructional Technology offers weekly workshops on various computer applications. The Division of Sponsored Research provides grant writing workshops and helps identify new funding sources. The Enterprise Informational Technology division offers technical assistance with computer hardware and software. Junior faculty are eligible to participate in the Faculty Research Awards Program through the School of Graduate Studies and Research, which competitively provides seed money to pilot research projects. Three IPH faculty have received funding from this program. The university's Quality Enhancement Program offers faculty development workshops that provide instructional strategies to assist faculty with improving student learning. A Faculty Development Committee at the university level examines and makes recommendations regarding requests for leaves of absence with salary for purposes of study, research or travel. At the program level, funds support faculty attending one professional meeting per year, assistance is provided through tutorials and workshops on Geographical Information System applications and monthly public health seminars are scheduled to provide opportunities for interaction with guest speakers who have expertise relevant to the program.

The IPH director is responsible for faculty recruitment, retention, annual evaluation and promotion and tenure processes with approvals required at the college and university levels. The office of the provost through the University Personnel Office must grant permission to initiate a faculty search to fill a vacancy or for a new position. Search committees of IPH faculty are formed on an ad-hoc basis. Search committees typically draft the position description, identify advertising venues for recruitment, draft interview questions and recommend candidates for on-campus interviews to the program director. Based on the ranking and recommendations of the faculty following university-approved candidate interviews, the IPH director recommends a candidate to the college dean who if in agreement will make a recommendation to the provost. If approved at that level, the provost will make a formal offer of appointment.

During the year, faculty submit written progress reports addressing teaching, research and service which are discussed during monthly one-on-one meetings with the program director. Faculty are evaluated annually for research, teaching and service based on goals defined for the upcoming year and an end-of-the-year document summarizing productivity. For teaching assessment, the program director reviews student evaluations, course materials, syllabi and survey information from community partners and preceptors. The program director also visits the classroom at least once per semester to observe faculty teaching methods and communication style. The college will implement an initiative during the 2012-2013 academic year to create college peer review committees of three faculty who will observe teaching interactions and recommend improvements.

IPH faculty were successful in influencing the tenure and promotion criteria for their academic unit. In 2002, the MPH faculty developed IPH-specific tenure and promotion guidelines which more fully recognize the value of applied public health research and service. Following approval by the college, all levels of the university review process approved the revised guidelines. An annual progress toward tenure appraisal form is completed by the program director and approved by the dean. The form provides for 5-point ratings and open-ended comments regarding teaching, research, service and other criteria to be defined individually. The program director works with faculty to develop improvement plans as needed. The promotion and tenure process is based on a detailed application prepared by the faculty member, which provides for letters of recommendation, including at least two from colleagues in the academic unit.

The program director following review by the IPH tenure and promotion committee recommends promotion and tenure actions to the College Tenure and Promotion Committee. Following approval by the college dean, recommendations are reviewed by the university's promotion and tenure committee, provost and president. A detailed tenure and promotion administrative action form clearly specifies each level of review and allows for monitoring of the process. The interim university president indicated to site visitors that the IPH criteria for promotion and tenure were among the most rigorous standards on campus which he views as a major influence for public health faculty to be productive and successful with scholarly pursuits.

The university requires that courses be evaluated. A student in each on-campus course distributes standardized evaluation forms near the end of the term with the faculty member absent during the completion of the form. The reporting form consists of eight evaluative statements regarding the instructor's performance and uses a 5-point rating system. The collected forms are submitted to the University Testing Center for tabulation. A statistical summary of student ratings is distributed to the faculty member, program director and college dean. Student evaluation results are intended to provide information for self-improvement and for use with assessing teaching effectiveness in annual faculty evaluations, and promotion and tenure reviews. As of 2012, establishing a post-tenure review process is under discussion among FAMU administrators and faculty and most likely will be implemented in a future year.

Service, as one of three areas assessed for tenure and promotion, includes service to the community as well as to the institution and to professional organizations. Faculty also design research activities to have a service component aimed at promoting the health of the community. In 2002, program faculty were successful in gaining modification of tenure and promotion criteria to reflect the significance of applied research and service in evaluating public health faculty. Faculty typically spend 15-20% each week performing community service activities.

4.3 Faculty and Staff Diversity.

The program shall recruit, retain and promote a diverse faculty and staff, and shall offer equitable opportunities to qualified individuals regardless of age, gender, race, disability, sexual orientation, religion or national origin.

This criterion is met. Females represent 60% of the core faculty and 55% of the total faculty. Among the 15 core faculty members for 2012, there are seven African American females, one African American male, one Caucasian female, two Caucasian males, one Asian/Pacific Islander male, one Hispanic female and two International males. Other, secondary faculty members include five Caucasian females, two Caucasian males, three African American females, six African American males, one Asian/Pacific Islander male and one Hispanic female. Approximately 53% of the 15 core faculty are African American, 20% are Caucasian, 7% are Hispanic and 7% are Asian/Pacific Islander. According to information in the 2011-2012 Chronicle of Higher Education Almanac, the demographic distribution for Florida's population is 22.5% Hispanic, 0.4% Native American, 2.4% Asian, 0.1% Pacific Islander, 16% Black and 75% White. Three full-time IPH staff members include two African American females and one African American male.

University policies uphold the principles of equal employment opportunity and nondiscrimination to which the IPH is committed. The university has clear definitions of discrimination and harassment and procedures for filing a complaint. Three of the eight IPH public health values highly relevant to promoting diversity include the following: equality of opportunity, cultural sensitivity and social justice. The university reflects its commitment to providing equitable opportunities through the Faculty Personnel Policy and the Non-Discrimination Policy Statement.

As a land grant HBCU, FAMU has the historic mission of educating African Americans, but the university and program embrace students of all races, ethnicities, gender and sexual orientations. The presence of a highly diverse IPH faculty is viewed as a strength for recruitment of faculty, staff and students. With health disparities research as the cornerstone and focus of the applied research conducted by IPH faculty, the program's commitment to diversity is clearly emphasized.

In promoting an environment supportive of diversity, the program celebrates its faculty diversity and seeks to identify and minimize potential cultural barriers. The program hosts health disparities seminars and workshops and with other partners takes a leading role in coordinating the annual National Minority Health Month every April. As part of ongoing strategic planning, the program reports that outreach mechanisms will be examined for the purpose of recruiting more Hispanic males and faculty from Asian American and Native American populations.

Targets for achieving a diverse faculty complement include percent of racial/ethnic faculty and staff and percent of female faculty and staff. The IPH exceeds targets set for these four outcome measures for the three year reporting period.

4.4 Student Recruitment and Admissions.

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

This criterion is met with commentary. The program has established organized admission procedures and policies. These are routinely made available to every applicant upon request. In addition, the information is made available at recruitment fairs and career expos. These policies are also orally presented and written materials disseminated at the new orientation session for new students during the first week of the fall semester.

Faculty and students are engaged in recruitment of new students. The college's director of graduate programs and the FAMU School of Graduate Studies and Research provide assistance with recruitment. Student recruitment occurs during on- and off-site information sessions with prospective student applicants, using fact sheets, brochures, conference exhibit booths, and exhibits at professional meetings. Descriptive recruitment materials are mailed to undergraduate programs in the health sciences and social sciences across the nation, especially minority serving institutions. The DrPH program recruits through information to institutions with graduate programs in the health sciences. The IPH alumni and the Future Public Health Professionals (FPHP) student organization each developed a Facebook page for timely communications which may influence securing assistance with recruitment efforts. For the MPH online program, FAMU contracts with the HBCUs' Online Program through the Tom Joyner Online Education (TJOE) foundation which has a very successful marketing strategy and forwards applications for online admissions to FAMU for processing. Another avenue for the recruitment of students, particularly the DrPH program, is the Consortium of African American Public Health Programs (CAAPHP). CAAPHP is a consortium of public health programs that are housed at a HBCU. Four of these programs (FAMU, Morehouse, Jackson State, and Morgan State) are CEPH-accredited. The purpose of the consortium is to provide support to each other and networking opportunities for faculty, students and staff. The IPH Web Site also provides useful information.

The IPH is well positioned to attract a diverse population locally, nationally, and internationally. The IPH conforms to the FAMU Non-Discrimination Policy Statement. The IPH's graduate and doctoral application, admissions and degree granting requirements, policies and procedures are consistent with those of FAMU.

One significant improvement is the ability to recruit and retain males into the program. Since the last site visit, the program has proactively recruited from within FAMU, as well as reached out to Morehouse College. Program alumni who are male have been very instrumental in attracting more males to the program through the annual FPHP Open House, public forums (National Public Health Week) and networking during the Florida Public Health Association and the American Public Health Association meetings.

Admissions are based on an online application form to the Graduate School and minimum requirements for competitive admissions are clearly presented. The Graduate School and the college screen applications for completeness and eligibility before releasing the applications to the program.

The admissions policies and procedures follow three distinct pathways. (1) The traditional on-campus MPH program requires all applicants to submit a completed University Application form with the required thirty dollar fee, two original copies of transcripts from all previously attended colleges, universities, vocational or technical schools, three letters of recommendation, a one page letter of intent communicating interest in public health and an interest in the program and one copy of the Graduate Record Examination (GRE) scores. The minimum requirements for admission are: (a) didactic course work with a grade point average of "B" or better for the last 60 semester hours of undergraduate study; or (b) a combined score (verbal and quantitative) of 297 (new GRE system). All applicants must meet the application deadline in order to be considered for admission. Positions in each class are limited and are awarded on a competitive basis. A personal interview may be required before a decision for acceptance is made. The application deadline is April 1st for the next academic school year. (2) The distance-based MPH program applicants must have a baccalaureate degree and minimum of five years of public health and/or health professional experience. The applicants must have a minimum grade point average (GPA) of 3.0 (didactic course work) in the last 60 hours of study or a score of 297 (verbal and quantitative) on the Graduate Record Examination (GRE). The GRE will be waived for those applicants with a terminal degree. The application package requires: (a) official transcripts from all undergraduate and post-graduate institutions; (b) official GRE scores (unless waived); (c) three letters of recommendation and evaluation forms; (d) personal statement; and (e) application and associated fee. The IPH faculty review applications for admission and develop a one paragraph recommendation for each applicant which is presented by the program director to the COPPS Graduate Council which takes action to admit students.

The MPH program does practice a policy of admitting up to 10% of the class whose GRE or GPA do not meet minimum requirements. Reportedly, three students, one per year for the last three years, have been, after careful consideration of their circumstances, admitted under this policy. Site visitors learned from faculty that these three exceptions have performed exceedingly well, in some cases, developed into exemplary students.

The DrPH program is designed primarily for those individuals planning careers involving public health professional practice, teaching or research. The minimum requirements for admission are: (a) a minimum of a MPH degree or a masters degree in a related area; (b) didactic course work with a grade point average of "B" or better for the last 60 semester hours of study; or (c) a combined score (verbal and quantitative) of 297 (new GRE system). The application package must contain: (a) official transcripts (undergraduate and graduate or professional), (b) official GRE scores; (c) three letters of recommendation and evaluation forms; (d) personal statement; and (e) application and associated fee. If the student meets the minimum eligibility requirements, and is approved by the College Graduate Council, the applicant may be invited for an interview by program faculty. Program faculty are represented on the College Graduate Council. Final decisions, regarding admission, are made by program faculty following the interview and evaluation of the interview process.

Students are admitted once per year for the traditional MPH and DrPH programs. For the MPH online program, applicants are admitted in cohorts twice per year. The program director each semester monitors student progress toward degree completion. The university through the School of Graduate Studies and Research officially confers graduate degrees, following approval by the program director and the college dean of the student's application for graduation.

The IPH employs both formal and informal methods of recruiting. Informal recruiting occurs during teaching opportunities at other FAMU programs, during service learning programs and through its network of committed alumni and students.

The commentary relates to the recruitment of health policy and management (HPM) majors. The paucity of HPM majors in particular suggests that additional attention is required to achieve a critical mass of students on a sustainable basis. This issue was mentioned by alumni, and has been reportedly discussed by some faculty members. This situation is made more urgent by content within the IPH 2012-2017 Strategic Plan, which calls for a DrPH in HPM by December 2014.

4.5 Student Diversity.

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

This criterion is met. The program has achieved its student diversity outcome targets. Over the last three years, approximately 75% of enrolled students are African American females; an additional 11% are African American males. The retention rate for students from disadvantaged backgrounds was above the 80% target for the reporting period. The program has formal procedures that govern the assurance of

equity in the admission and retention of students regardless of age, race, sex, disability, religion and national origin.

Consistent with its mission as an HBCU, the program accepts an interdisciplinary pool of existing baccalaureate degree students interested in careers in public health (eg, biology, chemistry, pharmacy, health care administration, sociology and criminal justice). At the same time, the program also accepts existing graduate and professional degree students wishing to augment their health backgrounds with public health science (eg, epidemiology, biostatistics).

The university advertises for all academic programs in the periodicals *Diverse Issues in Higher Education*, *Black Colleges Today* and a number of newspapers. FAMU also has an excellent graduate feeder program for undergraduate students interested in graduate education. The university-wide career expos and fairs are held on an annual basis, such as the graduate preview day hosted and promoted by the university for current FAMU students and students in the Southeastern region. Graduate education opportunities are present at these fairs. In addition, the public health program has actively recruited at several regional HBCUs and through the public health student bodies and undergraduate health programs at Consortium of African American Public Health Program (CAAPHP), students have and are recruited to the FAMU public health program, particularly the DrPH program.

Although this criterion is met it would be beneficial if students were reflective of the full array of underserved and/or minority populations, such as Native Americans.

4.6 Advising and Career Counseling.

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

This criterion is met with commentary. The program has a number of avenues for academic advisement. Roles and responsibilities for faculty and students are clearly delineated. Students receive academic advisement from the beginning of matriculation. Generally speaking, students reported being pleased with the level of academic advising and appreciated a relatively close professional relationship with faculty regarding: course progression, practicum possibilities, course evaluation and the grievance process. During 2008-2012, there were no formal grievances filed.

Student survey results (n=16) reflected a relatively poor participation rate in surveys on advisement. Survey data indicated some concern regarding the distribution and accessibility of career opportunities in public health and the significance of public health careers as part of the academic advisement process. The data illustrate more positive results during the 2011-2012 academic year. This timeframe also coincides with the inaugural offering of the professional development course. The course, Professional

Development in Public Health, includes invited public health professionals as guest speakers to discuss career opportunities in public health for MPH and DrPH students. The course also provides a venue for inquiry regarding professional development (eg, resume writing, grantsmanship and interviewing skills). This course was developed and initially offered in fall 2011.

The commentary relates to the relatively modest (55%) number of students over the last three years who agree or strongly agree that they were informed about trends and demands in public health careers. These student surveys results reveal an opportunity to improve career counseling. In keeping with the universally expressed sentiment that the IPH is an “extended family”, losing a family member as a function of graduation is equivalent to losing an opportunity for professional networking over time. Alumni expressed a need for an alumni association and conveyed support for reported plans to formalize an official FAMU IPH alumni association. Creation of such an organization may achieve multiple purposes including formalized opportunities for professional mentoring for the emerging FAMU workforce.

Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

Florida Agricultural and Mechanical University (FAMU) MPH Program

October 15 - 16, 2012

Monday, October 15, 2012

- 8:00 am Site Visit Team Pick-Up from Hotel
Charles Weaver, II
- 8:30 am Site Visit Team Request for Additional Documents
Cynthia M. Harris
- 9:00 am Team Resource File Review
- 9:30 am Break
- 9:45 am Meeting with Program and Department Administration
Michael D. Thompson
Cynthia M. Harris
Alicestine D. Ashford
Sandra G. Suther
- 10:45 am Break
- 11:00 am Meeting with Faculty Related to Curriculum and Degree Programs
C. Perry Brown
Tyra Dark
Matthew Dutton
Gebre D. Kiros
Michael J.L. Smith
Alan Becker
Selina Darling-Reed
Fran Close
Torhonda Lee
Ivette Lopez
Saleh Rahman
Sandra Suther
Carol Warren
Alicestine D. Ashford
Arlesia Mathis
- 12:15 pm Break
- 12:30 pm Lunch with Students
Babajide Sadiq
Kelsi Williams
Gerald Popp, Jr.
Ji'Lynda Walls
Teombre' Skinner-Hall
Michelle Dahnke
Bismark Larbi
Cynthia Seaborn
Y'Ingrid Padilla
Aaron Jackson
Brittney Wells
Edward Clark
Sade Collins
Trinity Weaver
Jazmyne Simmons
Aileen Martinez

Marianne Mayuga
 Fabienne Santel
 Gussie Fuller

1:30 pm Break

1:45 pm Meeting with Faculty Related to Research, Service, Faculty Issues
 C. Perry Brown
 Yussif Dokuruga
 Alan Becker
 Fran Close
 Torhonda Lee
 Ivette Lopez
 Saleh Rahman
 Sandra Suther
 Nathaniel R. Wesley, Jr.
 Margarita Southard
 Art Cooper
 Gebre E. Kiros

2:30 pm Break

2:45 pm Meeting with Alumni
 Michael J.L. Smith
 Yussif Dokurugu
 P. Qasimah Boston
 Dauda Fadeyi
 Melvena Wilson
 R.Jai Wilson

3:30 pm Break

3:45 pm Meeting with Community Representatives and Preceptors
 C. Meade Grigg
 Penny Ralston
 Sokoya Finch
 Miaisha Mitchell
 Arrie Battle
 Art Cooper
 Richard Gragg
 Mary Barley
 Corine Mealing Stancil
 Jennifer D'Urso
 Linda Dilworth
 Dennis V. Cookro
 Elizabeth White
 Mahama Duwiejua

4:45 pm Resource File Review and Executive Session

5:30 pm Adjourn

Tuesday, October 15, 2012

8:00 am Site Visit Team Pick-Up from Hotel
 Charles Weaver, II

8:30 am Meeting with Institutional Academic Leadership/University Officials
 Gita Pitter
 Rodner Wright
 Larry Robinson

9:15 am Break

9:30 am Executive Session and Report Preparation

11:30 am Working Lunch, Executive Session and Report Preparation

12:30 pm Exit Interview