

KU THE UNIVERSITY OF KANSAS

MASTER OF PUBLIC HEALTH



**Self-Study for CEPH Accreditation
September 2017**

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Abbreviations and Acronyms

ABSC	Applied Behavioral Science
AFA	Annual Faculty Assessment
AHEC	Area Health Education Center
AIHREA	American Indian Health Research and Education Alliance
APHA	American Public Health Association
ARNP	Advanced Registered Nurse Practitioner
ART	Antiretroviral Treatment
ASCEND	Achieving Successful Careers Exploring New Directions
ASPPH	Association of Schools and Programs of Public Health
ATS	Adult Tobacco Survey
ATTUD	Association for the Treatment of Tobacco Use Disorders
BIOS	Biostatistics
BRFSS	Behavioral Risk Factor Surveillance System
BS	Bachelor of Science
BSN	Bachelor of Science in Nursing
CAICH	Center for American Indian Health
CD	Compact Disc
CDC	Centers for Disease Control and Prevention
CE	Continuing Education
CEO	Chief Executive Officer
CEPH	Council on Education for Public Health
CHA	Community Health Assessment
CHIP	Community Health Improvement Plan
CIC	Certified Inpatient Coder
COPD	Chronic Obstructive Pulmonary Disease
CPACHE	Comprehensive Partnerships to Advance Health Equity
CPH	Certified in Public Health Exam
CPHQ	Certified Professional in Health Quality
CTSA	Clinical and Translational Science Awards
CV	Curriculum Vitae
DDS	Doctor of Dental Surgery
DO	Doctor of Osteopathic Medicine
DrPH	Doctor of Public Health
EAB	External Advisory Board
e-cigs	E-Cigarettes
e.g.	For Example
EHS	Environmental Health Sciences Concentration
EPI	Epidemiology Concentration

EVC	Executive Vice Chancellor
FAD	Office of Faculty Affairs and Development
FERPA	Family Educational Rights and Privacy Act
FPHS	Foundational Public Health Services
FTE	Full-time Equivalent
FY	Fiscal Year
GMap	Geographical Management of Cancer Health Disparities
GPA	Grade Point Average
GRA	Graduate Research Assistant
GRE	Graduate Record Exam
GWIMS	The Group on Women in Medicine and Science
HDEP	Human Disparities and Equity Promotion
HEB	Health Education Building
HIPAA	Health Insurance Portability and Accountability Act
HITSsystem	HIV Infant Tracking System
HIV	Human Immunodeficiency Virus
HRSA	Health Resources and Services Administration
I-ANBL	Internet-All Nations Breath of Life
IACR	International Association of Cancer Registries
ID	Identification
IDP	Individual Development Plan
i.e.	That Is
JD	Juris Doctor
JUNTOS	Center for Advancing Latino Health
KAFP	Kansas Academy of Family Physicians
KALHD	Kansas Association of Local Health Departments
KAW	Kansas Alliance for Wellness
KBC	Kansas Breastfeeding Coalition
KC	Kansas City
KCR	Kansas Cancer Registry
KCUMB	Kansas City University of Medicine and Biosciences
KDHE	Kansas Department of Health and Environment
KEHA	Kansas Environmental Health Association
KHA	Kansas Hospital Association
KHF	Kansas Health Foundation
KHI	Kansas Health Institute
KHIN	Kansas Health Information Network
KMCHC	Kansas Maternal Child Health Council
KPHA	Kansas Public Health Association

KPHWDCC	Kansas Public Health Workforce Development Coordinating Council
KPPEPR	Kansas Patients and Providers Engaged in Prevention Research
KS	Kansas
KSCQI	Kansas Survivor Care Quality Initiative
KSU MPH	Kansas State University Master of Public Health Program
KU	University of Kansas
KUCC	University of Kansas Cancer Center
KUMC	University of Kansas Medical Center
KUMC RI	University of Kansas Medical Center Research Institute
KU-MPH	University of Kansas Master of Public Health Program
KU SOM	University of Kansas School of Medicine
LCME	Liaison Committee on Medical Education
LSAT	Law School Admissions Test
LULAC	League of United Latin American Citizens
MA	Master of Arts
MAPP	Mobilizing for Action through Planning and Partnership
MBA	Master of Business Administration
MBBS	Bachelor of Medicine, Bachelor of Surgery
MCAT	Medical College Admissions Test
MCH	Maternal Child Health
MD	Doctor of Medicine
MD/MPH	Doctor of Medicine/Master of Public Health
MEd	Master of Education
MHSA	Master of Health Services Administration
MINK	Missouri-Iowa-Nebraska-Kansas (HHS Region 7 States)
MO	Missouri
MOU	Memorandum of Understanding
MPA	Master of Public Administration
MPH	Master of Public Health
MPHSO	Master of Public Health Student Organization
MPHTC	Midwestern Public Health Training Center
MS or MSc or SM	Master of Science
MSPH	Master of Science in Public Health
MSW	Master of Social Work
MUA	Master Urban Affairs
N	No
N/A	Not Applicable
NAACCR	North American Association of Central Cancer Registries
NCI	National Cancer Institute

NEA-BC	Nurse Executive Advanced – Board Certified
NIDDK	National Institutes of Diabetes and Digestive and Kidney Diseases
NIH	National Institutes of Health
NIMHD	National Institutes on Minority Health and Health Disparities
NPA	National Partnership for Action to End Health Disparities
NPCR	Centers for Disease Control and Prevention National Program of Cancer Registries
NRT	Nicotine Replacement Therapy
PBRN	Practice-Based Research Network
PCORI	Patient-Centered Outcomes Research Institute
PDA	Personal Digital Assistant
PDF	Portable Document Format
PG	Professional Geologist
PHAB	Public Health Accreditation Board
PhD	Doctor of Philosophy
PhD/MPH	Doctor of Philosophy/Master of Public Health
PHCNS-BC	Public Health Clinical Nurse Specialist – Board Certified
PHHSBG	Preventive Health and Health Services Block Grant
PHM	Public Health Management Concentration
PHPP	Public Health Practice Program
PHR	Professional in Human Resources
PHSG or KS PHSG	Kansas Public Health Systems Group
PMTCT/EID	Prevention of Mother to Child Transmission/Early Infant Diagnosis
PRVM	Preventive Medicine
RCT	Randomized Controlled Trial
RD/LD	Registered Dietician/Licensed Dietician
RE-POWER	Rural Engagement in Primary Care for Optimizing Weight Reduction
RN	Registered Nurse
RS	Registered Sanitarian
Rural LEAP	Rural Lifestyle Eating and Activity Program
SAS	Statistical Analysis System
SBH	Social and Behavioral Health concentration
SFR	Student Faculty Ratio
S(He)	Sexual Health Empowerment for Cervical Health Literacy and Cancer Prevention
SIDS	Sudden Infant Death Syndrome
SNKC	Society of Neuroscience – Kansas City Chapter
SOP	Standard Operating Procedure

SOPHAS	Schools of Public Health Application Services
SPSS	Statistical Package for the Social Sciences
TLT	Teaching and Learning Technologies
TOEFL	Test of English as a Foreign Language
TTS	Tobacco Treatment Specialist
UMKC	University of Missouri Kansas City
VCCaP	Vaccines in Correctional Settings for Cancer Prevention
VFC	Vaccines for Children
WIC or KS WIC	Women, Infants, and Children
WIMS	Women in Medicine and Science
WIRE	Wichita Initiative to Review the Environment
WMREF	Wichita Medical Research and Education Foundation
WSU	Wichita State University
YMCA	Young Men's Christian Association
Y	Yes

Introduction

The University of Kansas Master of Public Health (KU-MPH) program operates on two campuses, Wichita and Kansas City, Kansas. The program was first accredited by the Council on Education for Public Health (CEPH) in 1998 and was accredited again in 2003 and 2010 for full seven-year periods. Since the last accreditation in 2010, the program has grown substantially, integrating stronger assessment and evaluation tools to better monitor the KU-MPH program goals and objectives.

The KU-MPH program currently offers three concentrations: Epidemiology, Public Health Management, and Social and Behavioral Health. The KU-MPH program is a member of the Association of Schools and Programs of Public Health and is the longest CEPH accredited program in the state of Kansas.



1.0 The Public Health Program

1.1 Mission. The program shall have a clearly formulated and publicly stated mission with supporting goals, objectives and values.

1.1a A clear and concise mission statement from the program as a whole.

The KU-MPH program mission is *“To improve public health in Kansas, the Heartland, and the nation through excellence in education, discovery, and community engagement.”*

1.1b A statement of values that guides the program.

The KU-MPH program faculty, students, and staff are committed to the following public health values: passion, justice, learning, beneficence, and diversity.

- Passion: We live our mission and vision to the fullest.
- Justice: We champion the rights of individuals and communities.
- Learning: We are lifelong learners and inspire that in our students.
- Beneficence: We seek out opportunities to do good to our students, our colleagues and our communities.
- Diversity: We believe diverse people, backgrounds, experiences and views enrich lives and health.

1.1c One or more goal statements for each major function through which the program intends to attain its mission, including at a minimum, instruction, research and service.

Educational Goals

- 1) Prepare MPH students for professional careers
- 2) Provide education and training for our local, state and regional public health workforce

Research Goal

- 3) Conduct innovative, impactful, engaged, outcomes-oriented research that will strengthen public health science

Service and Practice Goal

- 4) Lead and support service and practice activities to meet public health needs

Program Environment Goal

- 5) Develop and maintain an organizational structure that supports the faculty and staff as they accomplish the mission of the MPH program

1.1d A set of measureable objectives with quantifiable indicators related to each goal statement as provided in Criterion 1.1.c. In some cases, qualitative indicators may be used as appropriate.

Education Goals

- 1) Prepare MPH students for professional careers

Objectives/Targets

Objective 1.1 Enroll a diverse and qualified student body

- Enroll 25 – 45 new students/year proportionally across both campuses and concentrations
- At least 5 – 10% of applicants will be from a diverse population
- At least 10% of degree seeking new enrollees will be from diverse populations
- At least 90% of degree-seeking new enrollees will have undergraduate GPA ≥ 3.0
- Investigate avenues to recruit additional students into the Environmental Health Sciences concentration (2014 – 2015)
- Explore alternative curriculum plans for graduate certificate and undergraduate education and pipeline program opportunities (2015 – 2016)

Objective 1.2 Ensure adequate graduation rates

- At least 70% of degree-seeking students will graduate within five years
- Target students after three and four years of enrollment to develop a plan of study to finish the degree within five years (all students meet with their MPH site director at least once a semester)
- Structure the curriculum to accommodate needs of employed students (provide at least three evening or web-based courses during the fall and spring semesters)

Objective 1.3 Teach a high quality, competency-based curriculum

- All courses will receive student evaluations of ≥ 4.0 out of 5.0 on at least two out of four quality indicators (instructor expertise, instructor effectiveness, course organization, and overall course quality)
- Starting fall 2014, all students will utilize the e-Portfolio to track attainment of program and concentration-specific competencies through the program. The course instructor will ensure that all students meet core and concentration competencies and follow-up with the MPH program for remediation, when necessary.
- Starting fall 2014, all students will be required to complete a public health internship at a local or state health department or other public health agency
- Starting fall 2016, 50% of students will be required to complete their internship at a state or local health department

Objective 1.4 Ensure MPH graduates are adequately prepared for careers in public health

- At least 75% of degree-seeking graduating students will utilize career advising tools
- Conduct a survey of key stakeholders and public health employers
- At least 80% of graduates will be employed or seeking additional education six months after graduation

- 2) Provide education and training for our local, state and regional public health workforce

Objectives/Targets

Objective 2.1 Lead workforce development planning activities in our region

- At least two faculty and two staff will be members of Public Health Systems Group each year
- At least two faculty/staff will participate in consultation and planning for the Kansas Health Foundation's Public Health Practice Program

Objective 2.2 Provide public health continuing education

- At least two public health continuing education courses in our region will include MPH faculty as teachers each year
- Public Health Grand Rounds will be offered to the local and state health departments and other public health partners throughout the year
- At least two faculty will participate in the planning and implementation of the Evidence-Based Public Health Course

Research Goal

- 3) Conduct innovative, impactful, engaged, outcomes-oriented research that will strengthen public health science

Objectives/Targets

Objective 3.1 Author scholarly publications and disseminate findings

- The number of scholarly authorships (peer-review journal articles or book chapters) by the faculty as a whole will total at least 40 each year
- Collect/conduct a yearly survey of the faculty to quantify scholarly productivity and impact as evidenced by journal impact factor, news and media contacts (TV, radio, print), and/or testimony at the local, state or federal level

Objective 3.2 Conduct interdisciplinary research to reduce health disparities

- At least 50% of the faculty will produce high quality research in vulnerable populations by acquiring funding from external sources

Objective 3.3 Provide opportunities for students to become involved in research

- At least 50% of MPH students will participate in research each year including but not limited to participation in the Student Research Forum, working as a graduate research assistant, or presenting at state or national level conferences
- Award at least five travel scholarships for students to present at local and/or national public health conferences

Service and Practice Goal

- 4) Lead and support service and practice activities to meet public health needs

Objectives/Targets

Objective 4.1 Assist organizations devoted to the public's health

- At least two faculty or staff will assume leadership roles in organizations devoted to the public's health each year
- At least one faculty or staff will support public health accreditation activities such as completing Public Health Accreditation Board (PHAB) Site Visitor Training, conducting a site visit through PHAB, or providing technical assistance to local health departments or KDHE in preparation for accreditation

Objective 4.2 Provide technical assistance to public health practitioners

- At least six public health programs in our region will receive technical assistance from our faculty each year

Objective 4.3 Students will participate in service activities to enhance the public's health

- The MPH students on each campus will complete at least one service activity each semester, totaling four acts of service to the state

Program Environment Goal

- 5) Develop and maintain an organizational structure that supports the faculty and staff as they accomplish the mission of the KU-MPH program

Objectives/Targets

Objective 5.1 Maintain a strong, bi-campus organizational structure for managing the program

- Evidence-based strategic planning will be accomplished through quarterly meetings or the Executive Council, with regular input from the dean, the faculty, students, and regional stakeholders
- Program priorities will be implemented through the bi-campus Operations Committee, which will meet at least monthly

- Bi-campus concentration committees will meet twice a year to discuss program objectives and targets, the curriculum, internships, and admission standards
- The following core program wide data systems will be used for program management:
 - Enrollment
 - E-Portfolio will be used to track student attainment of program competencies
 - Course evaluations
 - Bi-campus budget
 - Periodic surveys for special initiatives (includes stakeholders at least 3-5 years)
- Hold an MPH strategic planning retreat with the faculty to re-evaluate the program's mission, values, goals and objectives every two years

Objective 5.2 Foster professional development among our faculty and students

- All faculty will achieve promotion at intervals expected by the University of Kansas
- Faculty will be offered seminars from the Teaching and Learning Department at least once a semester to improve classroom and online instruction
- Provide support to MPH students to present at a state, regional or national public health conference through travel scholarships
- Offer all students the opportunity to attend the Kansas Public Health Association Conference free of charge
- Develop an orientation for new faculty to the MPH program

1.1.e. Description of the manner through which the mission, values, goals and objectives were developed, including a description of how various specific stakeholder groups were involved in their development.

The current KU-MPH mission, values, goals, and objectives were recently revised at KU-MPH program retreats in May 2015 and May 2017. These changes were made to better reflect the program's mission and strengthen alignment with our overall institution's mission to improve community engagement. The day-long retreat involved all KU-MPH faculty and staff from both the Kansas City and Wichita campuses. During the 2015 retreat, we revised the KU-MPH program values and mission statement to emphasize community engagement and the need for diversity. We are currently developing a vision statement for the program based on faculty input from the May 2017 retreat.

The KU-MPH program also has an on-going system to review and revise our goals, objectives and targets annually. The Operations Committee, Executive Council, standing committees, bi-campus faculty, students, and the External Advisory Board all provide guidance for the program:

- MPH Operations Committee meets monthly
- Bi-campus faculty and MPH Executive Council meet quarterly
- Standing committees (Admissions, Curriculum, Public Health Practice) meet at least annually and as needed
- Students provide feedback to the program via MPH Student Organization (MPHSO) participation in Executive Council meetings, program exit interviews, and the KUMC Student Satisfaction Survey
- The External Advisory Board provides feedback through in-person meetings held once every two years in addition to completing periodic surveys on program components and recommendations. We last conducted a survey in 2015.

Although the External Advisory Board (EAB) physically meets as a group once every two years, faculty and members of the MPH Operations committee interact with all sectors represented by the EAB on a regular basis. For example, we interact with local health department representatives of the EAB every semester to place MPH students for their internships. The MPH Operations team members also participate and are active in the Public Health Systems Group (PHSG) meetings that are held quarterly. Stakeholders from local health departments, the state health department, state-wide associations, and other public health entities are all represented and provide input into how to strengthen the KU-MPH Program.

The KU-MPH Operations Committee suggests revisions based on input from various internal and external stakeholders. The approval of changes in the mission, goals, objectives, and targets occur under the purview of the Executive Council. Annual updates and changes to the program are presented to the executive dean of the KU School of Medicine at an annual meeting with the KU-MPH leadership.

1.1f Description of how the mission, values, goals and objectives are made available to the program's constituent groups, including the general public, and how they are routinely reviewed and revised to ensure relevance.

The KU-MPH program's mission, values, goals and objectives are made available to stakeholders, including the general public through our website (www.kumc.edu/mph). In addition, current students and faculty can access this information through our internal learning management system, BlackBoard®, which houses our student handbook. They are reviewed every year by the KU-MPH Operations Committee and given to department chairs, faculty and the EAB to review and offer feedback.

1.1g Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program has a clear mission and values supported by our goals and objectives. The program mission, values, goals and objectives were developed and revised with input from faculty, students, and key stakeholders including the MPH External Advisory Board.

Weaknesses:

The KU-MPH program could increase the frequency of student satisfaction surveys.

Future Plans:

The KU-MPH program has initiated a process to develop a new Vision statement, which will also align with the vision of the University of Kansas Medical Center and School of Medicine.

1.2 The program shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the program's effectiveness in serving its various constituencies; and for using evaluation results in ongoing planning and decision making to achieve its mission. As part of the evaluation process, the program must conduct an analytical self-study that analyzes performance against the accreditation criteria defined in this document.

1.2a Description of the evaluation procedures used to monitor progress against the objectives defined in Criterion 1.1d, including identification of the data systems and responsible parties associated with each objective and with the evaluation process as a whole. If these are common across all objectives, they need to be described only once. If systems and responsible parties vary by objectives or topic area, sufficient information must be provided to identify the systems and responsible party for each.

The KU-MPH program has an established system for evaluation procedures and planning processes. Feedback and data from various sources and formal meetings are used to assist the program and assess the level of success in achieving the program's mission, goals, and objectives. If any change is recommended, the change is discussed by the appropriate committees, including the Admissions, Curriculum or Public Health Practice Committees, and by the Operations Committee and Executive Council before final implementation. The different mechanisms and tools used in the evaluation and planning of the KU-MPH program are described in the following table.

Table 1.2a KU-MPH Program evaluation procedures and planning processes used to monitor progress against program objectives.			
Outcome Measure	Target	Data Source/System	Responsible Party
KU-MPH Goal: Prepare MPH students for professional careers			
Enroll a diverse and qualified student body	Enroll 25 – 45 new students/year proportionally across both campuses and concentrations	SOPHAS applicant data	Admissions Committee
	At least 5 – 10% of applicants will be from a diverse population	SOPHAS applicant data	Admissions Committee
	At least 10% of degree seeking new enrollees will be from diverse populations.	SOPHAS applicant data	Admissions Committee
	At least 90% of degree-seeking new enrollees will have undergraduate GPA \geq 3.0.	SOPHAS applicant data	Admissions Committee
	Explore alternative curriculum plans for graduate certificate and undergraduate education and pipeline program opportunities.	External Advisory Board Surveys and Meetings	Operations Committee
Ensure adequate graduation rates	At least 70% of degree-seeking students will graduate within five years.	Graduation data KU student information system	Operations Committee

Outcome Measure	Target	Data Source/System	Responsible Party
	Target students at three and four years enrollment to develop a plan of study to finish the degree within five years (all students will meet with their MPH site director at least once a semester).	KU student information system BlackBoard® Student e-Portfolios	Site Directors
	Structure the curriculum to accommodate needs of employed students (provide at least three evening or web-based courses in fall and spring semesters).	KU Course Catalog	Operations Committee
Teach a high-quality, competency-based curriculum	All courses will receive student evaluations of ≥ 3.0 out of 4.0 on at least two out of four quality indicators (instructor expertise, instructor effectiveness, course organization, and overall course quality).	Course Evaluations via EvaluationKIT®	Operations Committee Curriculum Committee
	All courses will receive student evaluations of ≥ 4.0 out of 5.0 on at least two out of four quality indicators (instructor expertise, instructor effectiveness, course organization, and overall course quality).	Course Evaluations via EvaluationKIT®	Operations Committee Curriculum Committee
	Starting fall 2014, all students will utilize the e-Portfolio to track attainment of program and concentration specific competencies throughout the program. The course instructor will ensure that all students meet core and concentration competencies and follow-up with the MPH program for remediation, when necessary.	BlackBoard® Student e-Portfolio	Operations Committee/ Curriculum Committee
	Starting fall 2014, all students will be required to complete a public health internship at a local or state health department or other public health agency.	BlackBoard® Student e-Portfolio	Site Directors Public Health Practice Committee
	Starting fall 2016; 50% of students will be required to complete their internship at a state or local health department	BlackBoard® Student e-Portfolio	Site Directors Public Health Practice Committee
Ensure MPH graduates are adequately prepared for careers in public health	At least 75% of degree seeking graduating students will utilize career advising tools.	Exit Interviews	Site Directors
	Conduct a survey of key stakeholders and public health employers.	External Advisory Board Surveys	Operations Committee

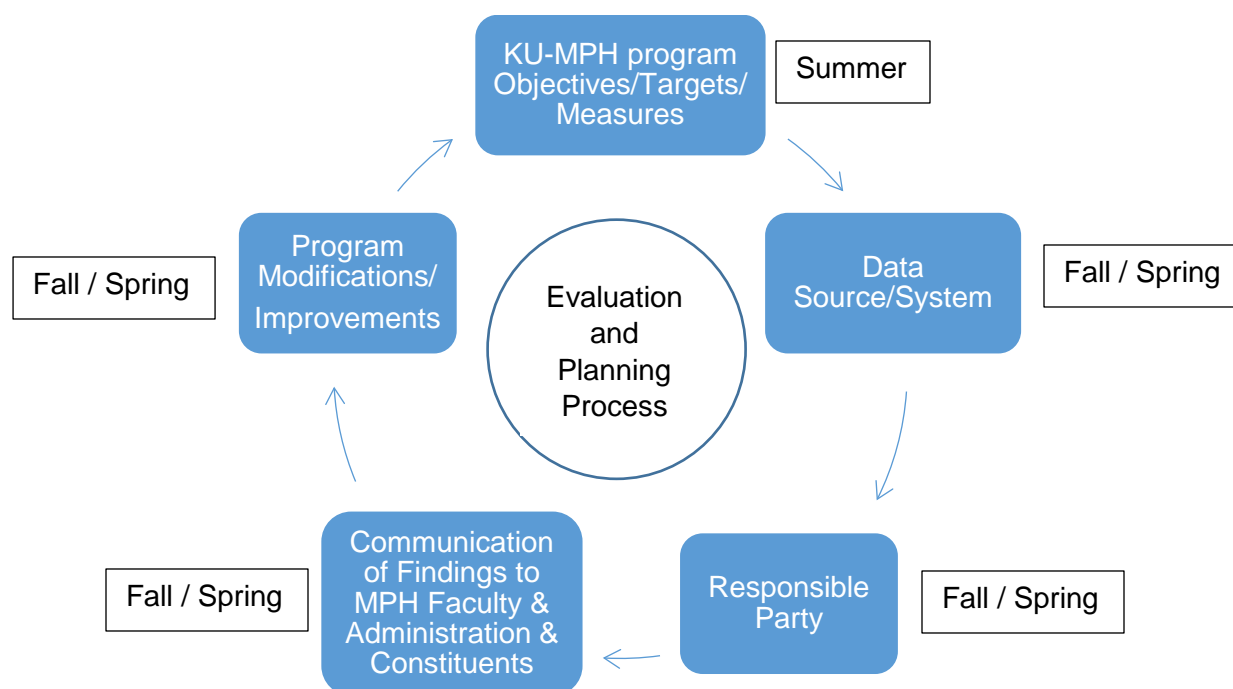
Outcome Measure	Target	Data Source/System	Responsible Party
	At least 80% of graduates will be employed or seeking additional education six months after graduation.	Exit Interviews Alumni surveys	Operations Committee
KU-MPH Goal: Provide education and training for our local, state and regional public health workforce			
Lead workforce development planning activities in our region	At least two faculty and two staff will be members of Public Health Systems Group each year.	Faculty and Staff CVs	Executive Council
	At least two faculty/staff will participate in consultation and planning for the Kansas Health Foundation Public Health Practice Program	Faculty and Staff CVs	Executive Council
Provide public health continuing education	At least two public health continuing education courses in our region will include MPH faculty as teachers each year.	Faculty CVs	External Advisory Board Operations Committee
	Public Health Grand Rounds will be offered to the local and state health departments and other public health partners throughout the year.	KUMC Area Health Education Center data	Executive Council Operations Committee
	At least two faculty will participate in the planning and implementation of the Evidence-Based Public Health Course.	Faculty CVs	Executive Council Public Health Practice Committee Operations Committee
KU-MPH Goal: Conduct innovative, impactful, engaged, outcomes-oriented research that will strengthen public health science			
Author scholarly publications and disseminate findings	The number of scholarly authorships (peer-review journal articles or book chapters) by the faculty as a whole will total at least 40 each year.	Faculty CVs Annual Faculty Review	Department Chairs Operations Committee
	Collect/conduct a yearly survey of the faculty to quantify scholarly productivity and impact as evidenced by journal impact factor, news and media contacts (TV, radio, print), and/or testimony at the local, state or federal level.	Faculty CVs	Operations Committee
Conduct interdisciplinary research to reduce health disparities	At least 50%of the faculty will produce high quality research in vulnerable populations by acquiring funding from external sources.	Faculty CVs Annual Faculty Review	Department Chairs Operations Committee

Outcome Measure	Target	Data Source/System	Responsible Party
Provide opportunities for students to become involved in research	At least five students from each campus will participate in research each year.	Faculty CVs Conference Brochures/Proceedings Graduate Research Assistant Employment	Bi-campus faculty Operations Committee
	MPH students will have an opportunity to participate in research each year including but not limited to participation in the Student Research Forum, working as a graduate research assistant, or presenting at state or national level conferences.	Faculty CVs Conference Brochures/Proceedings Graduate Research Assistant Employment	Bi-campus faculty Operations Committee
	At least 50% of MPH students will participate in research each year including, but not limited to, participation in the Student Research Forum, the Annual Research Forum, working as a graduate research assistant, or presenting at state or national level conferences.	Faculty CVs Conference Brochures/Proceedings Graduate Research Assistant Employment	Bi-campus faculty Operations Committee
	Award at least five travel scholarships for students to present at local and national public health conferences.	MPH Student Scholarship fund	Operations Committee
Conduct public health practice research	At least three faculty persons from each campus will conduct public health practice research.	Faculty CVs Annual Faculty Review	Department Chairs Operations Committee
KU-MPH Goal: Lead and support service and practice activities to meet public health needs			
Assist organizations devoted to the public's health	At least two faculty or staff will assume leadership roles in organizations devoted to the public's health each year.	Faculty CVs Annual Faculty Review	Department Chairs Operations Committee
	At least one faculty or staff will support public health accreditation activities such as completing Public Health Accreditation Board (PHAB) Site Visitor Training, conducting a site visit through PHAB, or providing technical assistance to local health departments or KDHE in preparation for accreditation.	Faculty and Staff CVs Annual Faculty Review	Department Chairs Operations Committee
Provide technical assistance to public health practitioners	At least two public health programs in our region will receive technical assistance from our faculty each year.	Faculty CVs Annual Faculty Review	Department Chairs Operations Committee

Outcome Measure	Target	Data Source/System	Responsible Party
	At least six public health programs in our region will receive technical assistance from our faculty each year.	Faculty CVs Annual Faculty Review	Department Chairs Operations Committee
	At least two faculty or staff will assist in development and implementation of a state-wide public health workforce assessment.	Faculty CVs	Operations Committee
Students will participate in service activities to enhance the public's health	At least one service activity involving a group of students will occur on each campus each year.	MPHSO Communications	MPH Student Organization
	The MPH students on each campus will complete at least one service activity each semester, totaling four acts of service to the state.	MPHSO Communications	MPH Student Organization
KU-MPH Goal: Develop and maintain an organizational structure that supports the faculty and staff as they accomplish the mission of the MPH program			
Maintain a strong, bi-campus organizational structure for managing the program	Evidence-based strategic planning will be accomplished through quarterly meetings of the Executive Council, with regular input from the dean, the faculty, students, and regional stakeholders.	Meeting minutes	Executive Council Operations Committee
	Program priorities will be implemented through the bi-campus Operations Committee, which will meet at least monthly.	Meeting minutes	Operations Committee
	The following core program wide data systems will be used for program management: <ul style="list-style-type: none"> • Enrollment • E-Portfolio will be used to track student attainment of program competencies • Course Evaluations • Bi-campus Budget • Periodic surveys for special initiatives (includes stakeholders at least every 3-5 years) 	KU student information system BlackBoard® EvaluationKIT®	Operations Committee
	Hold an MPH strategic planning retreat with the faculty to re-evaluate the program's mission, values, goals and objectives every two years.	Meeting agenda, Planning meetings, Follow-up surveys, Evaluations	Operations Committee

Outcome Measure	Target	Data Source/System	Responsible Party
Foster professional development among our faculty and students	All faculty will achieve promotion at intervals expected by the University of Kansas.	Faculty CVs Annual Faculty Review	Department Chairs Operations Committee
	Faculty will be offered seminars from the Teaching and Learning Department at least once a semester to improve classroom and online instruction.	Teaching and Learning Technologies seminars and newsletters	Operations Committee
	Provide support to MPH students to present at a state, regional or national public health conference through travel scholarships.	REDCap™ Travel Scholarship Survey	Operations Committee
	Offer all students the opportunity to attend the Kansas Public Health Association Conference free of charge.	Annual e-mail invitations to all MPH students	Operations Committee

1.2b Description of how the results of evaluation processed described in Criterion 1.2.1 are monitored, analyzed, communicated and regularly used by managers responsible for enhancing the quality of programs and activities.



The KU-MPH program uses a team-based participatory approach to monitor, analyze, evaluate and communicate overall performance and quality of the program. The Operations Committee coordinates much of the oversight and ensures that all recommendations and changes are carried out through proper channels in the program and university. In addition to our internal KU-MPH program committees, all stakeholders including students, alumni, faculty, community members, employers, administration, and External Advisory Board members provide input for the KU-MPH program.

The KU-MPH program committees include Executive Council, Operations, Admissions, Curriculum, and Public Health Practice. These committees have faculty from both the Kansas City and Wichita campuses as well as students represented to provide oversight for the respective committee functions.

The Operations Committee, along with the Public Health Practice Committee, meets with the External Advisory Board members once every two years to review and discuss program areas, including both the internship and capstone experiences.

The KU-MPH Operations Committee reviews the feedback and data from all constituents described in the previous section and meets every summer to revise and develop new program objectives and targets for the new academic year.

Specific examples of how the results of the evaluation and planning process enhanced the KU-MPH program include:

1. Revision of mission statement in May 2015 at the bi-campus faculty retreat.

Our institution underwent a strategic planning process, and our program also holds an all faculty retreat every two years to examine program issues, including the mission of our program. The revised mission has been updated on our website. This item pertains to our outcome measure, "Maintain a strong, bi-campus organizational structure for managing the program."

2. Removal of the Generalist and Biostatistics concentrations in 2013 and 2015, respectively, and suspension of the Environmental Health Sciences concentration in 2016, which resulted in our three current concentrations.

This change is related to our outcome measure, "Teach a high-quality, competency based curriculum." Since enrollment in the Biostatistics and Environment Health Sciences concentrations were low, we decided to no longer offer these in our program.

3. Development and implementation of the e-Portfolio system in fall 2015 to track student attainment of program and concentration competencies.

Our e-Portfolio system was also designed to address our outcome measure, "Teach a high-quality, competency-based curriculum." This system was developed to not only improve tracking of student attainment of program and concentration specific competencies, but to also improve faculty teaching and delivery of these competencies.

4. Mapping of each course and assignment to core and concentration competencies in 2014-2015.

See response for #3 above for relationship to outcome measure.

5. Replacement of the Research Committee with the Public Health Practice Committee in 2012 to enhance internships and collaborations with public health practice agencies.

This item is tied to two outcome measures "Provide opportunities for students to become involved in research," and "Lead workforce development planning activities in our region." Our collaborations with Public Health Practice committee members and public health stakeholders provide both student internship opportunities as well as practice collaborations between program faculty and the public health community.

6. In 2012, the KU-MPH also finalized the creation of concentration-specific competencies. This process was completed by KU-MPH faculty on the respective concentration competencies. These competencies were created in conjunction with concentration curricula.

The outcome measure, "Teach a high-quality, competency-based curriculum," corresponds to this change.

7. Provided funding for all KU-MPH students to attend the Kansas Public Health Association conference annually since 2014.

Providing opportunities for students to become involved in research is another key outcome measure of our program. Our program has provided funding for all MPH students on both campuses to attend the Kansas Public Health Association (KPHA) conference every year since 2014.

8. Creation of dedicated travel funds for KU-MPH students to present at national meetings or conferences since 2015.

Our program also has separate funds for students who wish to present at national meetings. This is also tied to the same outcome measure as #7.

1.2c Data regarding the program's performance on each measureable objective described in Criterion 1.1.d must be provided for each of the last three years. To the extent that these data duplicate those required under other criteria (e.g. 1.6, 2.7, 3.1, 3.2, 3.3, 4.1, 4.3, or 4.4), the program should parenthetically identify the criteria where the data also appear. See CEPH Outcome Measures Template (Table 1.2c).

Table 1.2c. Outcome Measures for 2014 - 2017				
Outcome Measure	Target	2014-2015	2015-2016	2016-2017
Enroll a diverse and qualified student body	Enroll 25 – 45 new students/year proportionally across both campuses and concentrations 6-10 Environmental Health Sciences 10-12 Epidemiology 6-10 Public Health Management 10-14 Social and Behavioral Health	Enrollment Target = Not Met (18) Concentration Target = Not Met (Did not meet target in any concentration)	Enrollment Target = Met (38) Concentration Target = Not Met (Did not enroll students in EHS concentration)	Enrollment Target = Not Met (23) Concentration Target = Not Met (Did not meet target in EPI; did not enroll any students in EHS)
	At least 5 – 10% of applicants will be from a diverse population	Met = 35%	Met = 19%	Met = 31%
	At least 10% of degree seeking new enrollees will be from diverse populations.	Met = 44%	Met = 32%	Met = 39%
	At least 90% of degree-seeking new enrollees will have undergraduate GPA \geq 3.0.	Met = 90%	Not Met = 88.9%	Met = 96%
	Explore alternative curriculum plans for graduate certificate and undergraduate education and pipeline program opportunities.	N/A*	Met	N/A*
Ensure adequate graduation rates	At least 70% of degree-seeking students will graduate within five years.	Met = 90%	Met = 78%	Met = 86%
	Target students at three and four years enrollment to develop a plan of study to finish the degree within five years (all students will meet with their MPH site director at least once a semester).	Met	Met	Met

Outcome Measure	Target	2014-2015	2015-2016	2016-2017
Ensure adequate graduation rates	Structure the curriculum to accommodate needs of employed students (provide at least three evening or web-based courses in fall and spring semesters).	Met	Met	Met
Teach a high-quality, competency-based curriculum	All courses will receive student evaluations of ≥ 3.0 out of 4.0 on at least two out of four quality indicators (instructor expertise, instructor effectiveness, course organization, and overall course quality).	Not Met	N/A*	N/A*
	All courses will receive student evaluations of ≥ 4.0 out of 5.0 on at least two out of four quality indicators (instructor expertise, instructor effectiveness, course organization, and overall course quality).	N/A*	Not Met	Not Met
	Starting fall 2014, all students will utilize the e-Portfolio to track attainment of program and concentration specific competencies throughout the program. The course instructor will ensure that all students meet core and concentration competencies and follow-up with the MPH program for remediation, when necessary.	Met	Met	N/A*
	Starting fall 2014, all students will be required to complete a public health internship at a local or state health department or other public health agency.	Met	Met	Met
	Starting fall 2016; 50% of students will be required to complete their internship at a state or local health department	N/A*	N/A*	Met = 51%
Ensure MPH graduates are adequately prepared for careers in public health	At least 75% of degree seeking graduating students will utilize career advising tools.	Not Met	N/A*	N/A*
	Conduct a survey of key stakeholders and public health employers.	Met	N/A*	N/A*
	At least 80% of graduates will be employed or seeking additional education six months after graduation.	N/A*	Met	Will not be calculated until November 2017

Outcome Measure	Target	2014-2015	2015-2016	2016-2017
Lead workforce development planning activities in our region	At least two faculty and two staff will be members of Public Health Systems Group each year.	Met	Met	Met
	At least two faculty/staff will participate in consultation and planning for the Kansas Health Foundation Public Health Practice Program.	Met	Met	Met
Provide public health continuing education	At least two public health continuing education courses in our region will include MPH faculty as teachers each year.	Met	Met	Met
	Public Health Grand Rounds will be offered to the local and state health departments and other public health partners throughout the year.	Met	Met	Met
	At least two faculty will participate in the planning and implementation of the Evidence-Based Public Health Course.	Met = 3	N/A*	N/A
Author scholarly publications and disseminate findings	The number of scholarly authorships (peer-review journal articles or book chapters) by the faculty as a whole will total at least 40 each year.	Met = 63	Met = 43	Met = 41
Conduct interdisciplinary research to reduce health disparities	At least 50% of the faculty will produce high quality research in vulnerable populations by acquiring funding from external sources.	Met	Met	Met
Provide opportunities for students to become involved in research	At least five students from each campus will participate in research each year.	Met	N/A*	N/A*
	MPH students will have an opportunity to participate in research each year including but not limited to participation in the Student Research Forum, working as a graduate research assistant, or presenting at state or national level conferences.	N/A*	Met	Met
	At least 50% of MPH students will participate in research each year including, but not limited to, participation in the Student Research Forum, the Annual Research Forum, working as a graduate research assistant, or presenting at state or national level conferences.	N/A*	N/A*	Met = 67%
	Award at least five travel scholarships for students to present at local and national public health conferences.	N/A*	N/A*	Not met = 2 awarded

Outcome Measure	Target	2014-2015	2015-2016	2016-2017
Conduct public health practice research	At least three faculty persons from each campus will conduct public health practice research.	Met	N/A*	N/A*
Assist organizations devoted to the public's health	At least two faculty or staff will assume leadership roles in organizations devoted to the public's health each year.	Met	Met	Met
	At least one faculty or staff will support public health accreditation activities such as completing Public Health Accreditation Board (PHAB) Site Visitor Training, conducting a site visit through PHAB, or providing technical assistance to local health departments or KDHE in preparation for accreditation.	Met	Met	Met
Provide technical assistance to public health practitioners	At least two public health programs in our region will receive technical assistance from our faculty each year.	Met	N/A*	N/A*
	At least six public health programs in our region will receive technical assistance from our faculty each year.	N/A*	Met	Met
	At least two faculty or staff will assist in development and implementation of a state-wide public health workforce assessment.	Met	N/A*	N/A*
Students will participate in service activities to enhance the public's health	At least one service activity involving a group of students will occur on each campus each year.	Met	Met	N/A*
	The MPH students on each campus will complete at least one service activity each semester, totaling four acts of service to the state.	N/A*	N/A*	Met = 6
Maintain a strong, bi-campus organizational structure for managing the program	Evidence-based strategic planning will be accomplished through quarterly meetings of the Executive Council, with regular input from the dean, the faculty, students, and regional stakeholders.	Met	Met	Met
	Program priorities will be implemented through the bi-campus Operations Committee, which will meet at least monthly.	Met	Met	Met
	Bi-campus concentration committees will meet twice a year to discuss program objectives and targets, the curriculum, internships, and admission standards.	Met	Not Met	N/A*

Outcome Measure	Target	2014-2015	2015-2016	2016-2017
	<p>The following core program wide data systems will be used for program management:</p> <ul style="list-style-type: none"> • Enrollment • E-Portfolio will be used to track student attainment of program competencies • Course Evaluations • Bi-campus Budget • Periodic surveys for special initiatives (includes stakeholders at least every 3-5 years) 	Met	Met	Met
	Hold an MPH strategic planning retreat with the faculty to re-evaluate the program's mission, values, goals and objectives every two years.	Met	N/A*	Met
Foster professional development among our faculty and students	All faculty will achieve promotion at intervals expected by the University of Kansas.	Met	Met	Met
	Faculty will be offered seminars from the Teaching and Learning Department at least once a semester to improve classroom and online instruction.	Met	Met	Met
	Provide support to MPH students to present at a state, regional or national public health conference through travel scholarships.	Met	Met	Met
	Offer all students the opportunity to attend the Kansas Public Health Association Conference free of charge.	N/A*	N/A*	Met
	Develop an orientation for new faculty the MPH program.	N/A*	Not Met	N/A*

* These targets did not exist that year and were added for later years, or were deleted and no longer tracked.

1.2.d. Description of the manner in which the self-study document was developed, including effective opportunities for input by important program constituents, including institutional officers, administrative staff, faculty, students alumni and representatives of the public health community.

In January 2016, the KU-MPH Operations Committee held our first meeting to prepare for the self-study document. Subsequently, we have held monthly meetings as part of our regular Operations Committee meetings to develop and gather input on our self-study document. The self-study document was developed with input from all stakeholders including, faculty, students, community, and External Advisory Board. We assigned a lead person from the KU-MPH Operations Committee for each criterion to work with faculty and program committees to gather data and information pertinent to their respective section:

- Criterion 1 was assigned to Dr. Won Choi (Executive Director).
- Criterion 2 was assigned to Ms. Melissa Armstrong (Site Director, Wichita campus).
- Criterion 3 was assigned to Ms. Tanya Honderick (Site Director, Kansas City campus).
- Criterion 4 was assigned to Ms. Farah Marhusin and Ms. Iva Chrisman (Administrative support).

The Operations Committee member who oversaw each criterion worked with appropriate MPH committees and their respective chairs and committee members to obtain input and feedback for their sections of the self-study document. A full draft was shared with KU-MPH faculty in April 2017 for feedback before the Preliminary Self Study was due to CEPH.

In May 2017, we held a bi-campus faculty retreat to discuss final updates to the self-study document as well as initiate plans to address the newly revised CEPH criteria. We also shared the self-study with public health practitioners and the External Advisory Board members for review and comment before the final document was submitted to CEPH ahead of the October 2017 site visit. Stakeholders were emailed a final draft copy of the self-study document with instructions to provide feedback to the MPH Operations team.

1.2e Assessment of the extent to which this criterion is met, and an analysis of the program's strengths, weaknesses and plans related to this criterion.

This criterion is met.

Strengths:

The KU-MPH program has a comprehensive and participatory team based evaluation plan through the use of multiple sources and data collection systems. The bi-campus structure of all committees as well as input from all faculty, students and the External Advisory Board ensures that all constituents are involved in the feedback loop. The program met all targets, with exception of a few targets that are addressed below.

Weaknesses:

The KU-MPH program did not meet our enrollment numbers two out of the three reporting years. Since implementing and fine-tuning the e-Portfolio system in 2014, we are now in a better position to accept more students and meet our target enrollment numbers. Additionally, two of our courses did not meet established targets on quality indicators, so the executive director and site directors met with the appropriate faculty to address the weaknesses.

Future Plans:

Despite having joined SOPHAS, the KU-MPH program has had similar challenges as other programs and schools with declining yield of MPH applicants. We have piloted an early decision process to increase the number of students who are admitted and enroll in the program, particularly trying to reach those applying from our state and region. Additionally, we have been and will continue to increase our faculty training and development via Teaching and Learning Technologies (TLT) services to improve the classroom learning experience.

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

1.3a A brief description of the institution in which the program is located, along with the names of accrediting bodies (other than CEPH) to which the institution responds.

The University of Kansas (KU) was founded in 1866 and is part of the Kansas Board of Regents system. KU is a major public research and teaching institution of 28,400 students and 2,600 faculty across five campuses (Kansas City, Wichita, Lawrence, Overland Park, and Salina). KU is accredited by the North Central Association of Colleges and Schools and is one of only 34 public institutions in the prestigious Association of American Universities. In addition, KU is one of 115 universities classified as R1: Research Universities (highest research activity) in the Carnegie Classification of Institutions of Higher Education. KU is comprised of 13 schools, including the only schools of pharmacy and medicine in the state of Kansas, and offers more than 370 degree programs.

The University of Kansas Medical Center (KUMC) is comprised of three schools: Medicine, Health Professions, and Nursing. The KU School of Medicine is offered at three locations: Salina, Wichita, and Kansas City. The KU School of Medicine was re-accredited for a full eight years by the Liaison Committee on Medical Education (LCME) in 2014.

The KU-MPH program is housed in the KU School of Medicine and in the Departments of Preventive Medicine and Public Health on the Kansas City and Wichita campuses. The KU-MPH program is accredited by the Council on Education for Public Health (CEPH).

KUMC offers numerous programs out of its schools, most all of which are accredited (if an accrediting body is available to the program). A complete list of accreditors and programs at KUMC and KU-Lawrence are available in the Electronic Resource File.

1.3b One or more organizational charts of the university indicating the program's relationship to the other components of the institution, including reporting lines and clearly depicting how the program reports to or is supervised by other components of the institution.

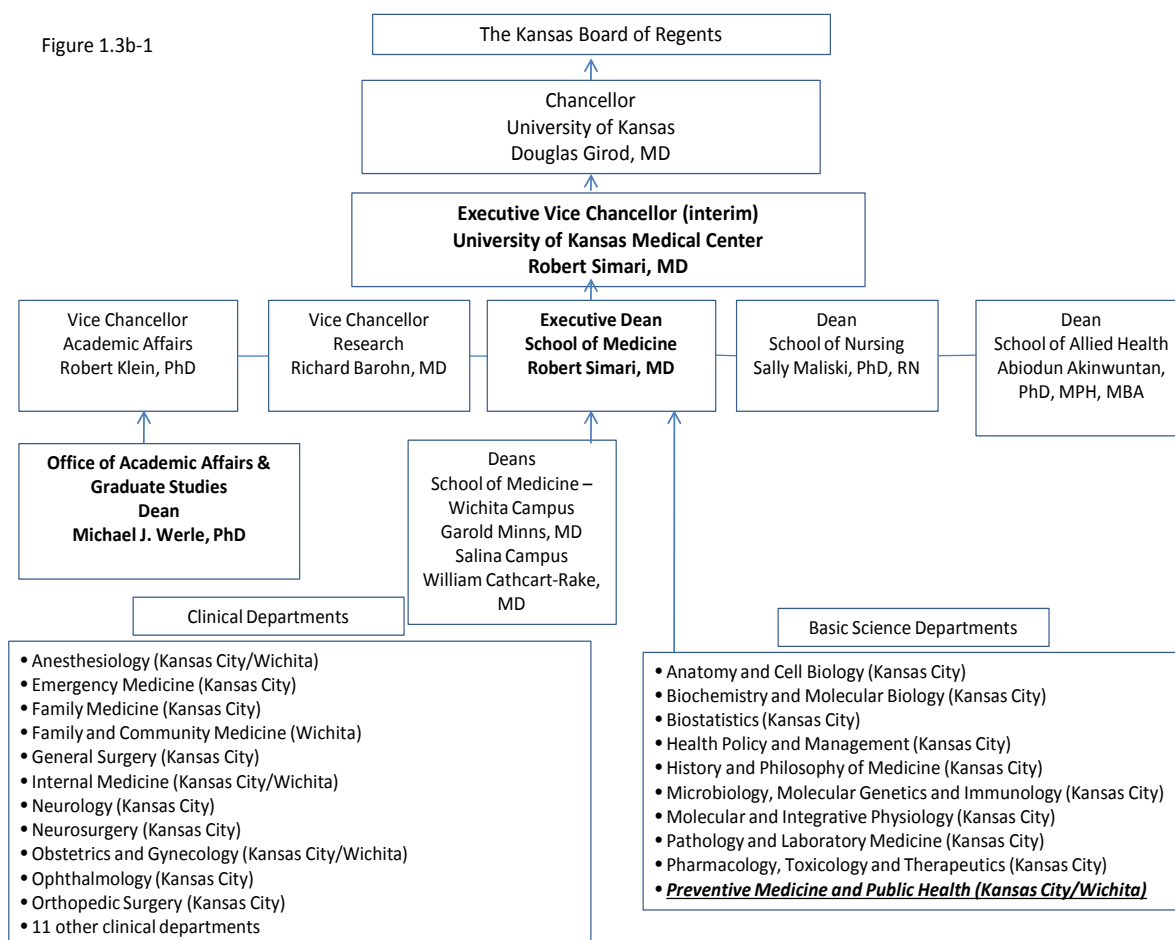
The KU-MPH program is located in the Departments of Preventive Medicine and Public Health within the KU School of Medicine in Wichita and Kansas City. KUMC also has an Office of Academic Affairs, which houses the Office of Graduate Studies. The Office of Academic Affairs provides the oversight of all graduate programs in the Schools of Medicine, Nursing, and Allied Health, and the maintenance and processing of faculty appointments and records. The executive director of the KU-MPH program reports directly to the executive dean of the KU School of Medicine (Dr. Simari).

The department chairs in the KU School of Medicine report to Dean Garold Minns in Wichita, and Executive Dean Robert Simari in Kansas City. The deans of the KU School of Medicine in Wichita and Salina report to the executive dean. The executive dean of the KU School of Medicine reports to the executive vice chancellor of KUMC. The executive vice chancellor reports to the chancellor of the University of Kansas, Dr. Douglas Girod (see figure 1.3b-1).

Lines of Accountability Including Access to Higher-level University Officials

The KU-MPH executive director reports directly to the executive dean of the KU School of Medicine – Kansas City, who reports to the executive vice chancellor at the KUMC campus, who reports to the chancellor. Dr. Douglas Girod was recently named the 18th Chancellor of the University of Kansas. He previously served as the executive vice chancellor at the KUMC campus. Dr. Simari, the current executive dean of the KU School of Medicine, has been named as the interim executive vice chancellor.

The KU-MPH executive director and site directors meet annually with the executive dean of the KU School of Medicine (Dr. Simari) to provide updates and discuss the needs of the KU-MPH program. The KU-MPH executive director also reports to the dean of the Office of Academic Affairs and Graduate Studies (Dr. Werle) for all program matters including approval of new courses and concentrations.



1.3c Description of the program's involvement and role in the following:

- **Budgeting and resource allocation, including budget negotiations, indirect cost recoveries, distribution of tuition and fees, and support for fund-raising**
- **Personnel recruitment, selection and advancement, including faculty and staff**
- **Academic standards and policies, including establishment and oversight of curricula**

Budgeting and Resource Allocation, including Budget Negotiations, Indirect Cost Recoveries, Distribution of Tuition and Fees, and Support for Fund-Raising

The MPH Program's executive director works directly with the Chair of Preventive Medicine and Public Health (Dr. Ellerbeck) and the Department Administrator (Joanne McNair) to prepare an annual budget and needs of the MPH program.

Starting in 2015, the KU School of Medicine implemented a mission-based allocation funding model for budget allocation to all departments in the KU School of Medicine. The model was developed through combined efforts of the chairs, center and institute directors, other key stakeholders and KU School of Medicine leadership. This was an iterative process with multiple meetings to provide feedback and review updated model parameters. Mission-based budgeting was developed to better align state funds with missions and a need for a transparent basis for future allocations. Finally, faculty and staff town hall meetings were held prior to implementation. Since the implementation of the new allocation model, additional meetings have been conducted to refine and improve the model assumptions and allocation categories.

The allocation model is one of many sources that support faculty and staff compensation and other operating expenses. University funding sources include: state appropriations, tuition, research overhead, grants (federal and private), indirects, graduate medical education, restricted fee funds, school of medicine commitments (recruitment and retention) and collaborations with centers, institutes and cores. Of these funding sources, the first three (state appropriations, tuition, and research overhead) comprise the funding source for the allocation model.

The allocation funding model integrates a common formula across all departments incorporating teaching, research, and service components for all tenure track and tenured faculty. This model uses a data-driven methodology to guide the distribution of school-managed funds to departments.

The KU-MPH program is funded primarily through state appropriations, operating budget, fund-raising, and e-learning fees. MPH faculty teaching, research, and service, as well as adjunct MPH teaching and staff salary support, are covered through the allocation funding model described above. Most of the MPH operating budget, which covers marketing, supplies, travel, memberships, and recruitment, comes from a special allocation from the KU School of Medicine.

Indirect cost recoveries at KUMC apply to all faculty bringing in grant funds. The department and the principal investigator recover a portion of each grant funded. These funds provide additional funding for MPH student graduate research assistantships.

The Endowment Association coordinates fundraising efforts for the MPH program as well as other departments and programs. In 2014, the MPH program in collaboration with the Endowment Association began raising funds for specifically the MPH program to provide funding for MPH students to attend national conferences.

Personnel Recruitment, Selection and Advancement, including Faculty and Staff

The University of Kansas is an equal opportunity employer and has a Department of Human Resources that monitors all hiring decisions and practices and is responsible for the recruitment, orientation, benefits and training of all medical center staff and faculty employees of the state of Kansas.

Recruitment of new faculty occurs through posting of positions on the KU jobs website, as well as in national journals and publications. The KU- MPH site directors, as well as the executive director, serve as members of the search committee for hiring new faculty with teaching responsibilities in the KU-MPH program. The approval of hiring faculty candidates includes the respective search committee, department chair, dean, executive vice chancellor of KUMC, and the chancellor.

All faculty, regardless of their tenure status (i.e., tenured, tenure track, research track, etc.), undergo an annual faculty review with their respective department chairs on each campus. In addition to the annual reviews, each junior faculty member undergoes a mid-cycle tenure review at year three in preparation for promotion to associate professor with tenure. The department chairs consult with the Operations Committee to discuss the educational goals and teaching needs and evaluations of the program for each new academic year. The executive director, with input from the site directors, retains the sole authority over final selection and recruitment of adjunct instructors and the KU-MPH practitioner faculty. The Office of Faculty Affairs in the Office of Academic Affairs processes all paperwork related to faculty appointments, including KUMC appointment forms, appointment letters, notice of non-reappointment, and title changes. In addition, it processes paperwork related to promotion and tenure, emeritus designation, and distinguished professor designation, from the schools to the vice chancellor for academic affairs, the executive vice chancellor, and the chancellor. For detailed information, see the Official Handbook for Faculty and Unclassified Staff, which is maintained by the Office of Academic Affairs.

Staff promotion in the KU-MPH program is based on annual performance and reviews are conducted by the KU-MPH site directors as well as the department chairs.

Academic Standards and Policies, including Establishment and Oversight of Curricula

Academic standards and policies of all graduate academic programs are subject to the standards set by the Office of Graduate Studies (see Graduate Catalog:

www.catalogs.ku.edu/graduate/). Oversight of academic standards and policies occurs at the program, department, medical center, and university levels, in accordance with the University of Kansas policies and standards associated with academic quality.

In the KU-MPH program, academic standards and policies are the responsibility of the Curriculum Committee, which adheres to the policies of the Office of Graduate Studies. This committee is charged with recommending to the Executive Council major revisions of existing courses as well as the ongoing evaluation of the program's curriculum. Any major additions or significant changes to a course must be approved by the Curriculum Committee before forwarding to the KUMC Graduate Council for approval.

Routine curriculum matters such as course or curriculum revisions (new courses) are addressed by the teaching faculty member, the Curriculum Committee, the Operations Committee, and the Office of Graduate Studies. More substantive matters, such as new programs or degrees, require approval from the Board of Regents after the approval from the Office of Graduate Studies.

The MPH Student Handbook also specifies standards, policies, regulations, responsibilities, and potential actions regarding academic performance or misconduct. The MPH Student Handbook may be accessed in BlackBoard®.

1.3d If a collaborative program, descriptions of all participating institutions and delineation of their relationships to the program.

Not applicable.

1.3e If a collaborative program, a copy of the formal written agreement that establishes the rights and obligations of the participating universities in regard to the program's operation.

Not applicable.

1.3f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program is offered through the departments of Preventive Medicine and Public Health, within the KU School of Medicine, which is accredited by LCME. The University of Kansas Medical Center has clear structure and reporting lines from the KU-MPH program to the executive dean of the KU School of Medicine to the Executive Vice Chancellor to the Chancellor and up to the Board of Regents.

Weaknesses:

None.

Future Plans:

Continue to maintain our bi-campus reporting structure as outlined.

1.4 Organization and Administration. The program shall provide an organizational setting conducive to public health learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration that contribute to achieving the program's public health mission. The organizational structure shall effectively support the work of the program's constituents.

1.4a One or more organizational charts delineating the administrative organization of the program, indicating relationships among its internal components.

Figure 1.4a.1 External Organizational Structure

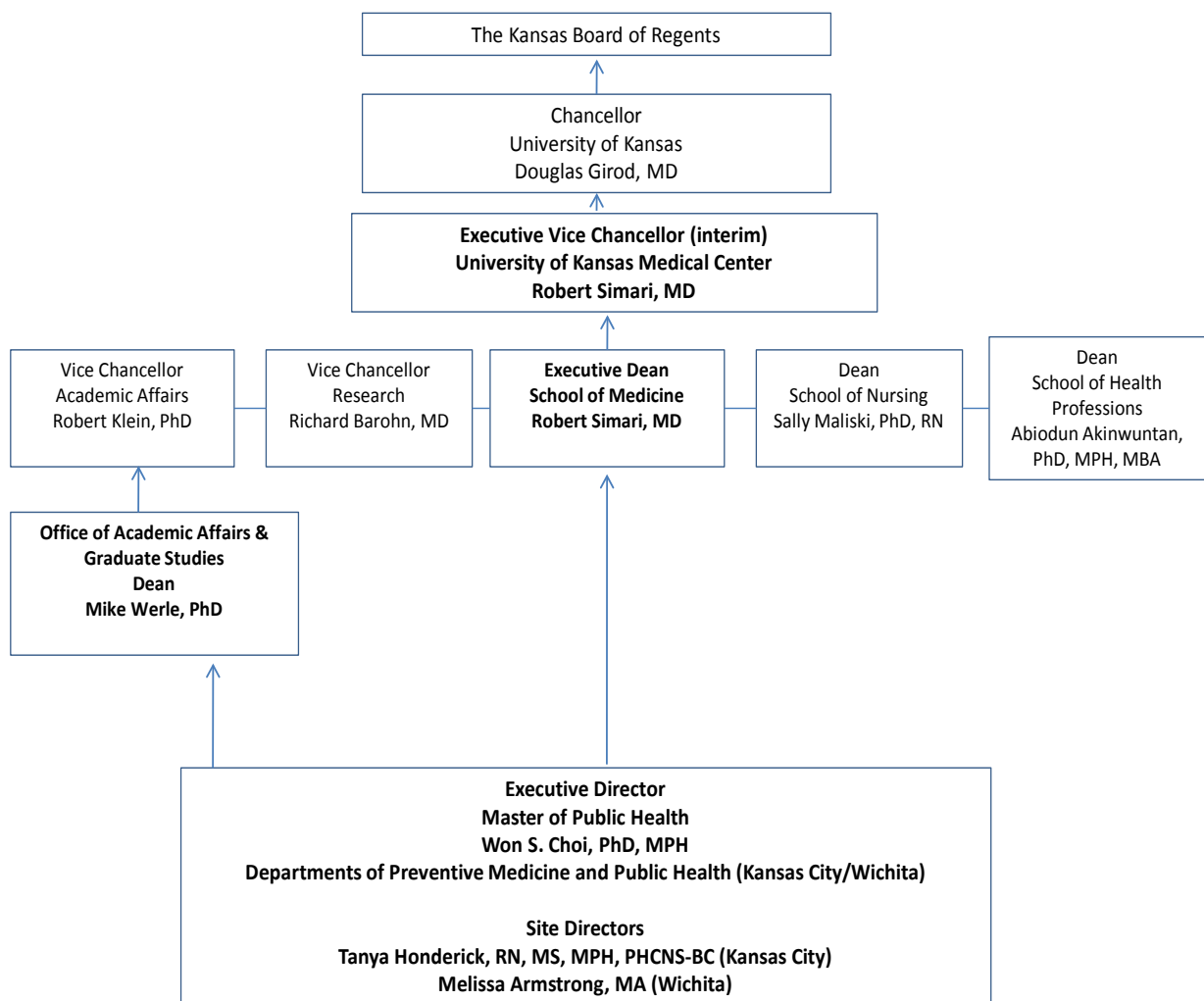
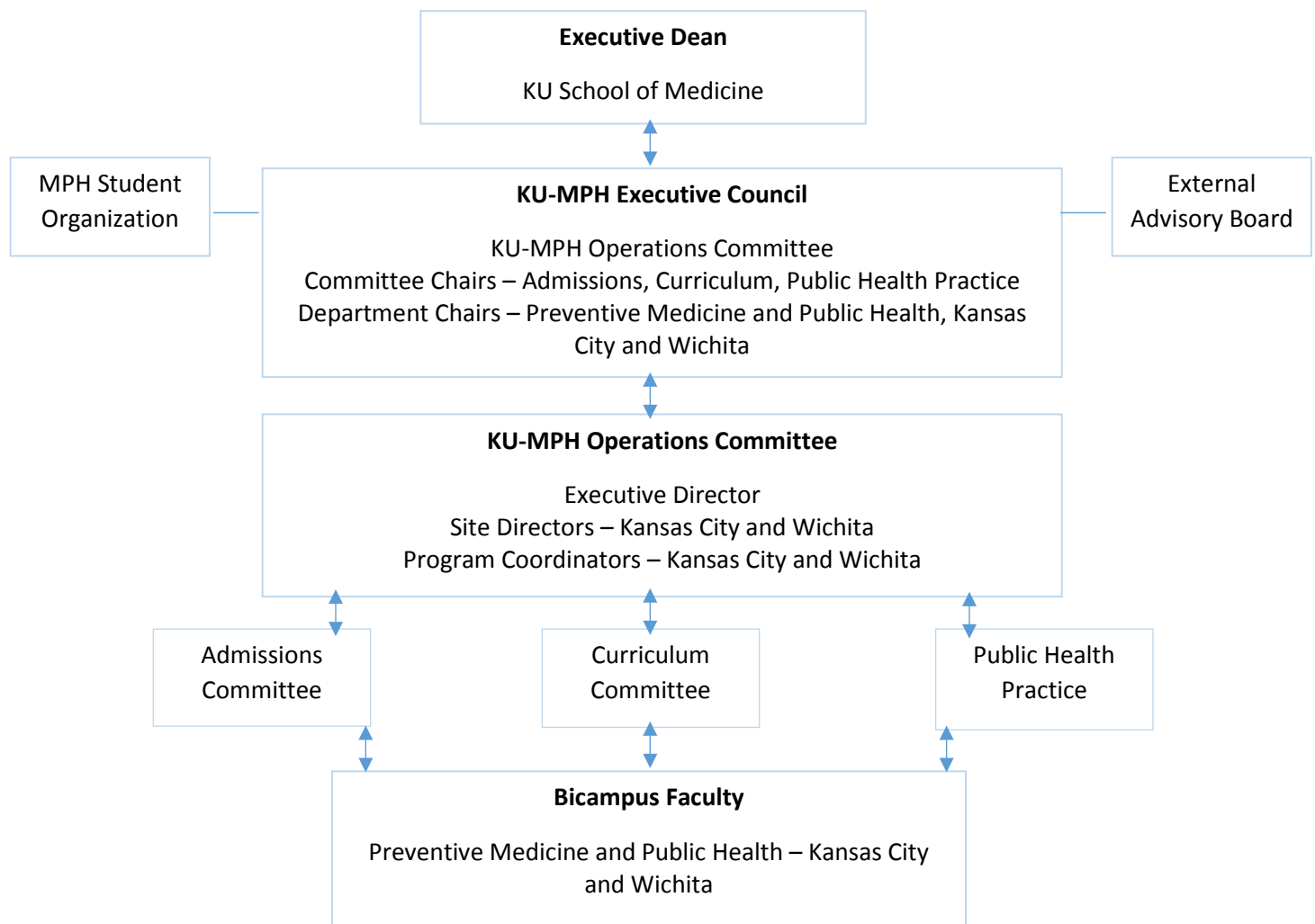


Figure 1.4a.2 Internal Organizational Structure



The bi-campus KU-MPH program is located within the KU School of Medicine in the Departments of Preventive Medicine and Public Health in Kansas City and Wichita (see figure 1.4a.2). Although the KU-MPH program is in two departments with department chairs, the KU-MPH program is autonomous and maintains policies and procedures relevant to its operation and mission. The line of authority for the KU-MPH program flows from the site directors to the executive director directly to the executive dean of the KU School of Medicine (Dr. Simari). In addition, the executive director also reports to the dean of the Office of Academic Affairs and Graduate Studies (Dr. Werle) for all academic and program issues relating to admissions, course approvals, new concentrations, and awarding of final degree approvals. Final approval for new courses, student admissions, new concentrations, new programs, awarding of degrees must be obtained from the Office of Academic Affairs and Graduate Studies. Therefore, the executive director reports to Dr. Werle for all academic matters related to the KU-MPH program and he reports to Dr. Simari for budgetary and broader programmatic issues (see Figure 1.4a-1).

The executive director (Dr. Choi) of the KU-MPH program oversees the entire program over both campuses and is ultimately responsible for the management of the program. The executive director serves at the pleasure of the executive dean of the KU School of Medicine (Dr. Simari). The primary responsibilities of the executive director are to:

- Maintain the KU-MPH program annual budget.
- Serve as the chair of the Executive Council, and to plan and direct the Executive Council monthly meetings.
- Establish and direct the following components of the program (marketing efforts, admissions processes and procedures, curriculum, student activities, faculty research and professional activities).
- Monitor the planning and evaluation system (planning initiatives and systematic strategic review, faculty evaluation and student tracking system, alumni tracking system).
- Represent the program at all Office of Graduate Studies meetings.
- Provide KU-MPH Executive Council representation at professional meetings (American Public Health Association, Association for Prevention Teaching and Research, Association of Schools and Programs of Public Health, Kansas Public Health Association, Kansas Health Foundation, and Kansas Health Institute).
- Lead the communication and accreditation procedures with CEPH (point person for accreditation with the executive secretary of CEPH, lead activities for accreditation, prepare and submit correspondence, self-study reports and interim reports).
- Supervise and conduct evaluations of site directors and to perform other duties as assigned by the executive dean.

The site directors (Ms. Tanya Honderick and Ms. Melissa Armstrong), manage the day-to-day operations of the program on each campus. The primary responsibilities of the site directors are to:

- Coordinate course scheduling each semester.
- Provide all curricular advising to KU-MPH students.
- Review and approval of all MPH student e-Portfolio each semester.
- Manage all MPH internship placements, mentor meetings, interim evaluations and final grading.
- Lead communication to faculty about deadlines and program needs each semester.
- Represent the KU-MPH program whenever the executive director is unable to attend university, state, or national meetings.
- Manage student concerns and issues related to academics.
- Coordinate ad-hoc committees when necessary to address improvements in the program.
- Serve on the Operations Committee and Executive Council.
- Assign campus faculty and student representatives to bi-campus committees.
- Provide orientation for students.

- Serve as advisor to the MPH Student Organization (MPHSO) and attend/support all campus events and activities for MPHSO and the program.
- Review admissions for respective campus after each admissions meeting.
- Oversee contracts for part-time instructors.
- Oversee budget expenses for campus regarding travel and approval from chair if needed.
- Complete exit interviews with each graduating student.
- Complete course evaluation reviews with each faculty.
- Oversee campus specific marketing plan.

The program assistants (Ms. Iva Chrisman and Ms. Farah Marhusin), assist the site directors and the executive director in managing the day-to-day operations of the program on each campus. The primary responsibilities of the program assistants are to:

- Assist in coordination of course scheduling each semester.
- Schedule all classrooms and equipment for all courses in the KU-MPH program.
- Coordinate student course evaluations every semester.
- Coordinate new student orientations for all new students.
- Coordinate student capstone orientations, once a semester on each campus.
- Maintain the website with current information.
- Support KU-MPH standing committees and MPHSO activities.
- Coordinate assignment of student representatives each year for bi-campus committees.
- Coordinate recruitment and prospective student application materials.
- Maintain program statistics.
- Maintain student records for the program.
- Collect and maintain program data and meeting minutes of all MPH related committees.
- Serve as program liaison (for students and faculty) to Academic Affairs and the Registrar's Office.
- Coordinate attendance and represent program at recruiting events, such as state and national conferences.

1.4b Description of the manner in which interdisciplinary coordination, cooperation and collaboration occur and support public health learning, research and service.

The KU-MPH program maintains a high level of interdisciplinary cooperation and collaboration with faculty, staff, and students across all three schools, Medicine, Nursing, and Health Professions. Students from different programs, including the Lawrence campus enroll in courses across other graduate programs in the three schools to gain interdisciplinary training and education.

Faculty across all three schools at the Medical Center collaborate through various channels, including research, teaching, community outreach, institutional committees and service opportunities. A few examples include:

- Dr. Faseru has developed and teaches an epidemiology course for students in the nurse anesthesia program (PRVM 826 Epidemiology for Advanced Nursing Practice)
- PRVM 800 Principles of Epidemiology and PRVM 830 Environmental Health are required courses for school of nursing programs
- PRVM 818 Social and Behavioral Health partnered with the School of Architecture at KU-Lawrence to create an interprofessional curricula that used a course assignment to Access to Healthy Food and Neighborhood Walkability
- MPH faculty and courses participate in the Master of Health Informatics program offered through the School of Nursing
- The MPH Operations Committee assisted Johnson County Community College to develop an undergraduate associate's degree in Public Health
- The KU-MPH program is currently collaborating with KU-Edwards campus to develop a BS in Public Health
- The MPH Student Organization has made efforts to include students from other disciplines in their service activities

The KU-MPH program is closely affiliated with the Department of Biostatistics and the Department of Health Policy and Management, which are also in the KU School of Medicine (see figure 1.3b-1). The core biostatistics requirement, in addition to several elective courses in biostatistics, is taught by faculty members in the Department of Biostatistics. The majority of KU-MPH elective courses in health care systems and management are taught by faculty in the Department of Health Policy and Management.

The KU-MPH program also has dual and joint degree programs with the KU School of Medicine as well as the Applied Behavioral Science doctoral program on the Lawrence campus. KU-MPH students can also choose to take elective courses in the Department of Applied Behavioral Science. All KU-MPH students are allowed to take any KU course at the graduate level with the program's approval, which may be requested during their academic advising meeting each semester.

1.4c Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program has clear and effective chains of command that are conducive to teaching and learning, research and service. The KU-MPH program has a strong bi-campus governance structure for effective and continuous collaboration and communication. The KU-MPH program has the full support of the executive dean as well as the department chairs. Regular bi-campus meetings provide opportunities for faculty to collaborate across campuses as well as across the three schools.

Weaknesses:

None.

Future Plans:

The KU-MPH program will continue to be involved in the delivery of an interdisciplinary graduate degree to students across all three schools of Medicine, Nursing, and Health Professions.

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.

1.5a A list of standing and important ad hoc committees, with a statement of charge, composition and current membership list for each.

The Executive Council meets quarterly to accomplish all strategic planning and review progress of all aspects of the program by means of review of minutes of the standing committees, the quarterly bi-campus meeting of the entire KU-MPH program faculty, and the KU-MPH Student Organization. The primary function of the Executive Council is to make final decisions about the program's policies and directions of growth. For example, the Executive Council makes the final decision on admission for each applicant after reviewing the recommendations of the Admissions Committee. Additionally, the Executive Council sets forth the annual goals and objectives (work plan) for the KU-MPH Operations Committee, the KU-MPH standing committees on Admissions, Curriculum, and Public Health Practice, as well as the External Advisory Board. Members of the Executive Council include:

- Chair: Won Choi, PhD, MPH, Professor and Executive Director
- Tracie Collins, MD, MPH Professor and Department of Preventive Medicine and Public Health Chair (Wichita)
- Edward Ellerbeck, MD, MPH, Professor and Department of Preventive Medicine and Public Health Chair (Kansas City)
- Megha Ramaswamy, PhD, MPH, Associate Professor and Chair of Admissions Committee
- Elizabeth Ablah, PhD, MPH, Associate Professor and Chair of Curriculum Committee
- Babalola Faseru, MD, MPH, Associate Professor and Chair of Public Health Practice Committee
- Tanya Honderick, RN, MS, MPH, PHCNS-BC, Research Instructor and Site Director (Kansas City)
- Melissa Armstrong, MA, Site Director (Wichita)
- Robert Lee, PhD, Professor and Chair Department of Health Policy and Management
- Jo Wick, PhD, Associate Professor, Department of Biostatistics

The Operations Committee meets at least monthly to manage the KU-MPH program. This committee consists of site directors and program staff and is chaired by the executive director. The Operations Committee meets monthly to manage the program in an evidence-based manner, implement marketing initiatives, oversee data management and analysis, as well as solve operational problems.

- Won Choi, PhD, MPH, Professor and Executive Director

- Tanya Honderick, RN, MS, MPH, PHCNS-BC, Research Instructor and Site Director (Kansas City)
- Melissa Armstrong, MA, Site Director (Wichita)
- Farah Marhusin, Program Assistant (Kansas City)
- Iva Chrisman, Program Assistant (Wichita)

The Admissions Committee is comprised of faculty and students from both campuses representing the concentrations and is charged with reviewing all applicants. It meets at least once a year and as needed to discuss the application process, admissions requirements, and other issues requested by the Executive Council.

- Chair: Megha Ramaswamy, PhD, MPH, Associate Professor (Social Behavioral Health – Kansas City)
- Michelle Redmond, PhD, MS, Research Assistant Professor (Social Behavioral Health – Wichita)
- Marvin Stottlemire, PhD, JD, Professor (Public Health Management – Kansas City)
- Lisette Jacobson, PhD, MPA, MS, PHR Research Assistant Professor (Public Health Management– Wichita)
- John Neuberger, DrPH, MPH, MBA, Professor (Environmental Health– Kansas City)
- Jack Brown, MUA, RS, Research Instructor (Environmental Health – Wichita)
- Won Choi, PhD, MPH, Professor (Epidemiology – Kansas City)
- Garth Fraga, MPH Student (Kansas City)
- Emily Umansky, MPH Student (Wichita)

The Curriculum Committee consists of faculty and students from both campuses and meets at least once a year and then as needed to discuss curricular issues related to course evaluations, needs assessments, and review of new courses and transfer credits.

- Chair: Elizabeth Ablah, PhD, MPH, Associate Professor (Social Behavioral Health – Wichita)
- Nicole Nollen, PhD, Associate Professor (Social Behavioral Health – Kansas City)
- Robert Moser, MD, Clinical Professor (Public Health Management – Kansas City)
- Tracie Collins, MD, MPH, Professor (Epidemiology – Wichita)
- John Neuberger, DrPH, MPH, MBA, Professor (Environmental Health – Kansas City)
- Ithar Hassaballa, MPH Student (Kansas City)
- Derek Norrick, MPH Student (Wichita)

The Public Health Practice Committee consists of faculty and students from both campuses and meets regularly to discuss issues related to collaborations between the KU-MPH program and the public health practice partners (e.g. public health departments, community organizations, etc.).

- Chair: Babalola Faseru, MD, MPH, Associate Professor (Epidemiology – Kansas City)
- Catherine Satterwhite, PhD, MSPH, MPH, Associate Professor (Epidemiology – Kansas City)
- Judy Johnston, MS, RD/LD, Research Instructor (Social Behavioral Health – Wichita)
- Jack Brown, MUA, RS, Research Instructor (Environmental Health – Wichita)
- Sharla Smith, PhD, Assistant Professor (Public Health Management – Wichita)
- Patience Samwata, MPH Student (Kansas City)
- Dan Clifford, MPH Student (Wichita)

The External Advisory Board consists of members from stakeholder groups, including public health practitioners, practitioners at the interface of public health and medicine, and program alumni. This group meets once every two years to give input regarding educational needs assessment data and other program feedback. Members are randomly assigned to terms of two or three years, but appointments may be renewed as necessary.

Current Members of the External Advisory Board:

- Rex Archer, MD, MPH - Director, Kansas City Missouri Health Department
- Sonja Armbruster, MA – Public Health Sciences Instructor, Wichita State University
- Nick Baldetti, MPH - Director, Reno County Health Department
- Virginia Barnes, MPH – Director, Blue Health Initiatives - Blue Cross Blue Shield of Kansas
- Terry Brecheisen – Director, Unified Government of Wyandotte County and Kansas City, Kansas
- Molly Brown, MPH – Program Manager, Pediatrics, University of Kansas School of Medicine – Wichita
- Eldonna Chesnut, MSN, RN - Council of Affiliates, American Public Health Association
- Vicki Collie-Akers, PhD, MPH - Associate Director of Health Promotion Research, KU Work Group for Community Health and Development
- Eric Cook-Wiens, MPH - Data and Measurement Manager, Kansas Healthcare Collaborative
- Craig Dietz, DO, MPH - Chief Medical Officer, Kansas City Free Clinic

- Harlen D. Hays, MPH - Manager – Quantitative Research and Biostatistics, Cerner
- Charlie Hunt, MPH - State Epidemiologist, Kansas Department of Health and Environment
- Kevin Kennedy, MPH - Managing Director, Center for Environmental Health, Children's Mercy Hospital
- Kevin Kovach, MSc, CHES - Population Health Manager, American Academy of Family Physicians
- Thomas Langer, MPA – Administrator, City-Cowley County Health Department
- Eleanor Lisbon, MD, MPH - Senior Medical Services Director - Quintiles
- Lougene Marsh, MPA – Director, Johnson County Health Department
- J'Vonnah Maryman, PhD, MPH – Director, Public Health Performance at Sedgwick County Health Department
- Christi Nance, MPH - Community Health Educator, Jackson County Health Department
- Tara Nolen, MPH - Tobacco Control Coordinator, Kansas Academy of Family Physicians
- Shirley Orr, MHS, ARNP, NEA-BC – Consultant, Robert Wood Johnson Executive Nurse Fellow
- Dan Partridge, RS, MPH - Director, Lawrence-Douglas County Health Department
- Michelle Ponce, MPA - Executive Director, Kansas Association of Local Health Departments
- Janice Powers, MPH - Administrator/Director, Butler County Health Department
- Paula Rowden, RN, MPH - Director, Stevens County Health Department
- Joanna Sabally, MPH, CHES - Health Improvement Planning Coordinator, Unified Government of Wyandotte county and Kansas City, Kansas
- Julia Soap, MPH - PRAMS Epidemiologist, Kansas Department of Health and Environment
- Chris Tilden, PhD, MHSA - Director of Community Health, Lawrence-Douglas County Health Department
- Becky Tuttle – Health and Wellness Director, Greater Wichita YMCA
- Jason Wesco, MA – President and CEO, Health Partnership Clinic

1.5b Identification of how the following functions are addressed within the program's committees and organizational structure:

- **General program and policy development**
- **Planning and evaluation**
- **Budget and resource allocation**
- **Student recruitment, admission and award of degrees**
- **Faculty recruitment, retention, promotion and tenure**
- **Academic standards and policies, including curriculum development**
- **Research and service expectations and policies**

General Program and Policy Development

The program's governance and committee structure involve many levels of oversight including program-level, KU School of Medicine, and the Office of Academic Affairs and Graduate Studies at KUMC. The executive director of the KU-MPH program is assisted by the site directors on each campus (Kansas City and Wichita). Together, the executive director, site directors, and program assistants comprise the KU-MPH Operations Committee that manages the day-to-day operations of the program.

The KU-MPH program also maintains bi-campus committees on Admissions, Curriculum, and Public Health Practice. Faculty and students from Wichita and Kansas City serve on all three committees. The Admission Committee screens and selects applicants for admission into the KU-MPH program. The Curriculum Committee reviews all courses, syllabi, and faculty qualifications, and assures that all criteria and standards set forth by CEPH are met. The Public Health Practice Committee helps coordinate practice and capstone opportunities for all MPH students. The KU-MPH Executive Council consists of the executive director, site directors, chairs of the three bi-campus standing committees and the chairs of the Departments of Preventive Medicine and Public Health. These committees in the KU-MPH program provide structure, planning, and direction for the KU-MPH program.

Planning and Evaluation

The Operations Committee meets at least monthly to plan and discuss the daily operations of the KU-MPH program. The committee meets to discuss both operational and strategic planning issues relevant to the program and general public health workforce in Kansas and the region. Issues related to the curriculum, including courses and scheduling, are also discussed. Interactions with the External Advisory Board are also maintained by the Operations Committee. All the agendas and minutes from the Operations Committee are maintained by the program assistants and are available electronically on a shared bi-campus drive.

Data sources for planning include faculty meetings, External Advisory Board meetings, student feedback, course evaluations, and other surveys. Planning is a collaborative process involving all stakeholders of the KU-MPH program.

Budget and Resource Allocation

The KU School of Medicine implemented a new allocation model of funding that incorporates teaching, research, and service across all departments in the KU School of Medicine. The executive director of the KU-MPH program meets with the department chair as well as the executive dean of the KU School of Medicine to discuss the needs of the MPH program, who works with the associate dean for finance to allocate the final budget for the KU-MPH program. The executive director is solely responsible to the executive dean for proposal and management of the budget designated specifically for the KU-MPH program. The executive director of the KU-MPH program oversees the budget that is allocated specifically to the program to operate the day-to-day functions. This budget covers the salary for the program assistants, site directors, as well as partial funding for the executive director. Much of this budget is devoted to student scholarships, adjunct faculty, marketing, membership fees, travel, and other operating costs related to running the KU-MPH program.

Student Recruitment, Admission and Award of Degrees

Student recruitment and admission begins with marketing the KU-MPH program through local, regional, and national conferences, by word of mouth, and via the KU-MPH website. In 2014, the KU-MPH program joined the Association of Schools and Programs of Public Health and soon added its application to SOPHAS. The KU-MPH program also staffs a booth at the American Public Health Association annual meeting each year. State-wide the program recruits applicants via the Kansas Public Health Association Conference, the Governor's Public Health Conference, and the Pre-Medical Student Conference. All three events take place yearly. The site directors and executive director also routinely make visits to undergraduate programs at universities across the state and in the Kansas City metro-region to promote the MPH degree and public health as a career choice. KU-MPH faculty also teach in the School of Medicine curriculum and take the opportunity to promote the dual MD/MPH degree program to students already admitted to the MD program. The Admissions Committee meets yearly and as needed to discuss and review strategies for recruitment and other issues related to admissions processes. The KUMC Office of Graduate Studies sets standards of admission, such as minimum GPA requirements and language test requirements for international students. The MPH Admissions Committee recommends applicants for admission, but ultimately it is the Office of Graduate Studies which grants final admission.

The KU-MPH site directors monitor student progress through the program, including course grades and attainment of competencies. An advising appointment is held between the site director and student each semester to establish a plan of study and set graduation goals. The site directors assure that faculty submit course grades and that all program graduation requirements are met. The Office of Graduate studies in the Office of Academic Affairs is responsible for awarding the degree as well as verifying that all graduating students have met university requirements for graduation.

Faculty Recruitment, Retention, Promotion and Tenure

Faculty recruitment and retention is primarily led by the department chairs with input and collaboration from the KU-MPH executive director as well as other KU-MPH faculty. For all faculty searches and recruitment, KU-MPH faculty serve on the search committees and provide input towards the selection process.

The KU-MPH executive director provides input to the chairs about faculty performance related to teaching, service, and scholarly activity. The department chairs conduct annual faculty reviews for each faculty member and the executive director provides input on matters related to the KU-MPH program.

Promotion and tenure guidelines (“Guidelines for Academic Promotion and the Award of Tenure” found at

<http://www.kumc.edu/Documents/somfacaffairs/KUSOMGuidelinesforPromotionandTenure.pdf>) are available to each faculty member upon beginning their appointment at KUMC. Each faculty member applying for promotion and tenure is reviewed by the departmental Promotion and Tenure Committee, followed by the KU School of Medicine Promotion and Tenure Committee prior to obtaining final approval from the executive dean, executive vice chancellor, chancellor, and Board of Regents.

Academic Standards and Policies

Academic standards and policies are established by KUMC and the KU School of Medicine. They are further specified by the Office of Academic Affairs, which oversees all academic degrees at the graduate level. KU-MPH academic standards and policies follow the standards set by the Office of Academic Affairs and Office of Graduate Studies, as well as maintaining program specific standards and policies. These are available to faculty and students in the MPH Student Handbook.

Research and Service Expectations and Policies

Research and service expectations and policies for faculty are officially described in the Guidelines for Academic Promotion and the Award of Tenure.

1.5c A copy of the bylaws or other policy document that determines the rights and obligations of administrators, faculty and students in the governance of the program, if applicable.

The KU School of Medicine faculty bylaws can be found on the KUMC Faculty Affairs and Development webpage at:

<http://www.kumc.edu/Documents/somfacaffairs/FINALBylaws.pdf>

The KUMC Handbook for Faculty can be found on the Office of Faculty Affairs website at:

<http://www.kumc.edu/Documents/faculty%20affairs/Handbook.pdf>

Through 2014, the MPH Student Handbook was available to students in a PDF format. In 2015, the KU-MPH Student Handbook was broken down from a PDF and established as a “course” in the BlackBoard® learning management system.

Documents referenced above are saved in the Electronic Resource File.

1.5d Identification of program faculty who hold memberships on university committees, through which faculty contribute to the activities of the university.

Table 1.5.d. MPH Faculty Membership on University Committees	
Faculty member	University Committee
Sue Min Lai, PhD, MBA, MS	Departmental Promotion and Tenure Committee
Kimber Richter, PhD, MPH	School of Medicine Promotion and Tenure Committee
Babalola Faseru, MD, MPH	Faculty Council Representative
Lisette Jacobson, PhD, MPA, MA, PHR	Research Committee and Elections Committee
Elizabeth Ablah, PhD, MPH	Dean's Excellence in Leadership Award Committee; School of Medicine Faculty Council; School of Medicine Faculty Liaison Committee; University of Kansas School of Medicine Research Committee
Edward Ellerbeck, MD, MPH	Dean's Search Committee; Associate Dean for Research Search Committee
Lisette Jacobson, PhD, MPA	Faculty Council
Michelle Redmond, PhD	Residency Directors Council
Tracie Collins, MD, MPH	Diversity Inclusion Cabinet; Chancellor Search Committee; Medical School Curriculum Committee; Faculty Council; Promotion and Tenure-Wichita Subcommittee
Christie Befort, PhD Christine Daley, PhD, MA, SM Kimber Richter, PhD, MPH Laura Martin, PhD Megha Ramaswamy, PhD, MPH	KU Women in Medicine and Science (WIMS)

1.5e Description of student roles in governance, including any formal student organizations.

The KU-MPH Student Organization (MPHSO) membership includes all students enrolled in the KU-MPH program and/or those who are actively seeking dual degrees. The officers consist of co-presidents, co-secretaries, and co-treasurers to represent both the Kansas City and Wichita campuses. Election of the officers and roles and responsibilities are outlined in the KU-MPH Student Handbook. The MPHSO develop and implement multiple service projects and social gatherings throughout the year in order to fulfill their mission:

The MPHSO at the University of Kansas School of Medicine strives to broaden perspectives of the MPH students through community service, involvement with the public health community, and the development of a dynamic network of current students, alumni and public health leaders.

The president of the MPH SO represents the MPH students at the Medical Center's Graduate Student Council, which consists of all the graduate programs.

Additionally, KU-MPH Students provide input to the program via all three bi-campus standing committees: Admissions, Curriculum, and Public Health Practice. Each student representative serves for a one year term that may be renewed.

1.5f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program administration and faculty have clearly defined rights and responsibilities concerning program governance and policies. Faculty and students from both campuses participate as members on all MPH standing committees and have equal opportunity to provide input in their respective committees.

Weaknesses:

None.

Future Plans:

Continuation of involvement university-wide committees to enhance student and faculty diversity.

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

1.6a Description of the budgetary and allocation processes, including all sources of funding supportive of the institution, research and service activities. This description should include, as appropriate, discussion about legislative appropriations, formula for funds distribution, tuition generation and retention, gifts, grants and contracts, indirect cost recovery, taxes or levies imposed by the university or other entity within the university, and other policies that impact on the resources available to the program.

In 2015, the KU School of Medicine implemented a new funding model for all departments incorporating a formula based on teaching, research, and service. In addition to these state/university funds, the MPH budget consists of other sources including indirect cost recovery, endowment funds, eLearning fees, and other department funds.

The KU-MPH operating budget includes administrative staff compensation, adjunct faculty teaching, printing, supplies, marketing, travel to conferences, equipment and technology fees, scholarships for tuition, research assistantships for KU-MPH students, and general operational expenses. The KU-MPH program has continued to receive this direct support from the executive dean (Dr. Simari) since the KU-MPH program is an important program for the KU School of Medicine.

Indirect cost recovery are funds retained by the faculty and department for successfully bringing in grants and contracts to the university for their research.

Endowment funds are funds provided to the university endowment office (KU Endowment) to fund specific programs. The KU-MPH program currently has an endowment fund specifically dedicated to the MD/MPH program called the "Stewart Scholarship." In addition, the MPH program has dedicated endowment funds specifically for MPH student travel scholarships to local, regional and national conferences.

1.6b A clearly formulated program budget statement, showing sources of all available funds and expenditures by major categories, since the last accreditation visit or for the last five years, which is longer. If the program does not have a separate budget, it must present an estimate of available funds and expenditures by major category and explain the basis of the estimate. This information must be presented in table format as appropriate to the program. See CEPH Data Template 1.6.1.

Table 1.6.1 Sources of Funds and Expenditures by Major Category, 2012 to 2017					
	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Source of Funds					
Tuition & Fees	49,911	46,495	54,615	56,730	66,900
State Appropriation	0	0	0	0	0
University Funds	764,878	1,031,122	1,416,040	1,428,180	1,331,032
Grants/Contracts	783,144	622,132	179,714	116,983	91,345
Indirect Cost Recovery*	0	0	0	0	0
Endowment	369,564	130,858	34,030	32,500	60,240
Gifts		1,315	1,820	1,390	0
Other – Fee for Service**	5,800	0	0	0	0
Other – Restricted Fee Account	368,550	289,769	16,524	41,000	23,312
Total	\$2,341,847	\$2,121,691	\$1,702,743	\$1,676,783	\$1,572,829
Expenditures					
Faculty Salaries & Benefits	1,834,740	1,684,914	1,385,512	1,347,624	1,231,210
Staff Salaries & Benefits	231,026	184,913	188,403	188,995	191,662
Operations	66,776	124,255	48,625	50,058	50,313
Travel	26,316	17,413	21,417	15,689	13,857
Student Support	96,087	36,770	15,452	53,009	37,831
Total	\$2,254,945	\$2,048,265	\$1,659,409	\$1,655,375	\$1,524,873

*While indirect cost recovery funds are available for use, the KU-MPH Program does not have any specific indirects specifically allocated or designated to the program.

**Received one-time contract to produce educational materials.

1.6c If the program is a collaborative one sponsored by two or more universities, the budget statement must make clear the financial contributions of each sponsoring university to the overall program budget. This should be accompanied by a description of how tuition and other income is shared, including indirect cost returns for research generated by public health program faculty who may have their primary appointment elsewhere.

Not applicable.

1.6d Identification of measurable objectives by which the program assesses the adequacy of its fiscal resources, along with data regarding the program's performance against those measures for each of the last three years. See CEPH Outcome Measures Template.

Table 1.6d Measurable objectives to assess fiscal resources.			
	2014-15	2015-16	2016-17
Diversity and Leadership scholarships	Met	Met	Met
Award at least five travel scholarships for students to present at local and national public health conferences.	N/A*	N/A*	Not met = 2 awarded
Provide support to MPH students to present at a state, regional or national public health conference through travel scholarships.	Met	Met	Met
Offer all students the opportunity to attend the Kansas Public Health Association Conference free of charge.	N/A*	N/A*	Met
MPH students will have an opportunity to participate in research each year including but not limited to participation in the Student Research Forum, working as a graduate research assistant, or presenting at state or national level conferences.	N/A*	Met	Met

* These targets did not exist that year and were added for later years, or were deleted and no longer tracked.

In addition to the objectives above on adequacy of fiscal resources, for the past 10 years, the KU-MPH program has awarded Diversity and Leadership scholarships to MPH students who have successfully completed at least one semester in the program. Each year, four or five MPH students share the approximately \$10,000 in scholarship funds.

1.6e Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The MPH program has the financial resources and support to meet the teaching, research, and service aspects of the MPH program. The KU School of Medicine implemented a new allocation model to fund all departments and programs. In addition, the executive dean (Dr. Simari) is supportive of the MPH program and supports special memberships and initiatives. For example, when the MPH program joined ASPPH, the executive dean agreed to provide funding for the annual membership fee, which has now become a regular budget item of the MPH program.

Weaknesses:

Funding for graduate research assistantships for MPH students is still primarily provided by faculty grants and funding.

Future Plans:

We will also focus on increasing student enrollment since the program has experienced a decrease in the number of applicants as well as enrollees in the past several years. The new funding allocation model is dependent on teaching, including student class sizes as well as faculty efforts in research and service.

1.7 Faculty and Other Resources. The program shall have personnel and other resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

1.7a A concise statement or chart defining the number (headcount) of primary faculty employed by the program for each of the last three years, organized by concentration. See CEPH Data Template 1.7.1

Table 1.7.1 Headcount of Primary Faculty (Kansas City and Wichita)			
	Fall 2015	Fall 2016	Fall 2017
MPH - Epidemiology	10	7	8
MPH – Public Health Management	4	5	5
MPH – Social and Behavioral Health	9	8	7

1.7b A table delineating the number of faculty, students and SFRs, organized by concentration, for each of the last three years (calendar years or academic years) prior to the site visit. Data must be presented in a table format (see CEPH Data Template 1.7.2) and include at least the following information: a) headcount of primary faculty, b) FTE conversion of faculty based on % time devoted to public health instruction, research and service, c) headcount of other faculty involved in the program (adjunct, part-time, secondary appointments, etc.), d) FTE conversion of other faculty based on estimate of % time commitment, e) total headcount of primary faculty plus other (non-primary) faculty, f) total FTE primary and other (non-primary) faculty, g) headcount of students by department or program area, h) FTE conversion of students, based on definition of full-time as nine or more credits per semester, i) student FTE divided by primary faculty FTE and j) student FTE divided by total faculty FTE, including other faculty. All programs must provide data for a), b0 and i) and may provide data for c), d), and j) depending on whether the program intends to include the contributions of other faculty in its FTE calculations.

Note: CEPH does not specific the manner in which FTE faculty must by calculated, so the program should explain the method in a footnote to this table. In addition, FTE data in this table must match FTE data presented in Criteria 4.1.a. (Template 4.1.1) and 4.1.b. (Template 4.2.2).

Table 1.7.2 Faculty, Students and Student/Faculty Ratios by Department or Specialty Area – Fall 2015										
	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
MPH – Environmental Health Sciences*	1	.50	2	.70	3	1.2	3	1.33	2.66	1.11
MPH - Epidemiology	10	10.0	0	0	10	10.0	23	18.56	1.86	1.86
MPH – Generalist**	1	1.0	0	0	1	1.0	4	1.11	1.11	1.11
MPH – Public Health Management	4	4.0	1	.30	5	4.3	15	12.11	3.03	2.82
MPH – Social and Behavioral Health	9	9.0	5	1.77	14	10.77	30	23	2.55	2.14

*The Environmental Health Sciences concentration was discontinued in fall 2016 due to lack of interest from both applicants and current MPH enrollees.

**The KU-MPH program discontinued its generalist concentration in spring 2012. However, students have seven years to complete an MPH degree at the University of Kansas. These students represent part time students who opted to continue with their admission catalog instead of choosing a concentration.

Table 1.7.2 Faculty, Students and Student/Faculty Ratios by Department or Specialty Area – Fall 2016										
	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
MPH – Environmental Health Sciences*	0	0	3	.95	3	.95	1	.56	N/A	.59
MPH - Epidemiology	7	7.0	5	1.3	12	8.3	22	16.33	2.33	1.97
MPH – Generalist**	0	0	0	0	0	0	1	.33	N/A	N/A
MPH – Public Health Management	5	5.0	1	.30	6	5.3	16	12.89	2.58	2.43
MPH – Social and Behavioral Health	8	8.0	3	1.05	11	9.05	31	24	3.0	2.65

*The Environmental Health Sciences concentration was discontinued in fall 2016 due to lack of interest from both applicants and current MPH enrollees.

**The KU-MPH program discontinued its generalist concentration in spring 2012. However, students have seven years to complete an MPH degree at the University of Kansas. These students represent part time students who opted to continue with their admission catalog instead of choosing a concentration.

Table 1.7.2 Faculty, Students and Student/Faculty Ratios by Department or Specialty Area – Fall 2017***										
	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
MPH - Epidemiology	8	8.0	7	1.85	15	9.85	25	21.55	2.69	2.19
MPH – Public Health Management	5	5.0	2	.70	7	5.7	17	13	2.6	2.28
MPH – Social and Behavioral Health	7	7.0	2	.70	9	7.7	24	18.44	2.63	2.40

*The Environmental Health Sciences concentration was discontinued in fall 2016 due to lack of interest from both applicants and current MPH enrollees.

**The KU-MPH program discontinued its generalist concentration in spring 2012. However, students have seven years to complete an MPH degree at the University of Kansas. These students represent part time students who opted to continue with their admission catalog instead of choosing a concentration.

***Fall 2017 student headcounts and FTE were calculated with enrollment from the first week of classes. These do not represent the final 20 day headcount, which will occur after the self-study due date.

Calculation of Faculty FTE

Primary faculty FTE are calculated using the departmental FTE for each faculty member in the Departments of Preventive Medicine and Public Health in Kansas City and Wichita. Faculty in both of these departments are hired to teach in the Master of Public Health program, conduct public health research and serve as ambassadors of public health and prevention medicine on various committees and boards across the state and the nation.

1.7c A concise statement or chart concerning the headcount and FTE of non-faculty, non-student personnel (administration and staff) who support the program.

The KU-MPH program has two site directors, who serve as the day-to-day program directors on the two campuses, with 1.0 FTE for each site director. In addition, each campus has 1.0 FTE program assistants to assist the site directors with the day-to-day operations of the KU-MPH program and to meet the student needs for education.

1.7d Description of the space available to the program for various purposes (offices, classrooms, common space for student use, etc.) by location.

Faculty and Administrative Office Space

The KU-MPH program has approximately 15,000 square feet of faculty office and workspace in Kansas City and 6,200 square feet of faculty office space in Wichita. KU-MPH faculty have private offices within the Departments of Preventive Medicine and Public Health in both Kansas City and Wichita. Both campuses have conference rooms for faculty and student use as well as break rooms and storage areas.

Classrooms

The University of Kansas Medical Center completed construction on a new Health Education Building (HEB) in July 2017. This building will be approximately 171,000 square feet and include approximately 47 classrooms, 32 clinical and simulation labs, and numerous community life areas. The HEB will be the primary teaching facility for the Schools of Medicine, Nursing, and Health Professions and support new teaching models. There are no tiered classrooms, instead the building will consist of flexible, state-of-the-art learning classrooms of varying sizes to accommodate competency based curriculum. Additional features of the building include technology and connectivity, a simulation laboratory as well as an environment that fosters interprofessional education.

The KU-MPH program will continue to utilize the School of Nursing classrooms. The School of Nursing building includes six levels with more than 100,000 square feet of state-of-the-art classrooms. The ground floor contains an atrium, a multimedia auditorium and administrative offices. Classes are typically held on the lower level and ground floors.

The University of Kansas School of Medicine-Wichita has access to 12 classrooms included one dedicated room within the Department of Preventive Medicine and Public Health that seats up to 18 students. The KU-MPH program also utilizes the PC Classroom, a specially designed computer lab with space to accommodate up to 16 students.

Common Space for Student Use

Study space is available for all KUMC students 24 hours a day in Dykes Library. Entry to Dykes Library requires a student I.D., and the space is routinely monitored by campus security. The ground floor offers couches and other comfortable seating. The first floor offers both individual cubicles and group study space.

Four computer workstations are also available for student use in the KU-MPH office in Kansas City. These workstations include Microsoft Office®, SAS®, SPSS®, and printing capabilities.

In Wichita, students have access to the campus 24 hours a day, seven days a week via secured access cards. Students can access the 12 library computers and four study rooms. Students also have 24 hour access to the Student Lounge that is equipped with two private computer rooms, four private study rooms and a full kitchen area.

1.7e A concise description of the laboratory space and description of the kind, quantity and special features or special equipment.

The laboratory space used by the KU-MPH students is computer laboratory space, which is described in the preceding criterion.

1.7f A concise statement concerning the amount, location and types of computer facilities and resources for students, faculty, administration and staff.

KU-MPH students in Kansas City have access to four computer workstations connected to a network printer dedicated specifically for the MPH students, located in the MPH program area of the Department of Preventive Medicine and Public Health. In addition, there are over 65 computer workstations in the Dykes Library also available to all students. The majority of students have their own laptop and all students have wireless internet access throughout the campus, including the Department.

KU-MPH students in Wichita have access to four computer study rooms in the Student Center on the KU School of Medicine-Wichita campus. In addition, 9 computer workstations are available in the Farha Library. Students are able to access both of these resources 24 hours a day, seven days a week with their assigned access card. Printers are available at each computer and students are given a copy code each month. All prints and copies are free of charge through the library and Student Center.

Faculty, staff and administration on both the Kansas City and Wichita campuses have computers with Ethernet access and HP® printers. Printers are also available through the Novell® network. The heart of this system is the campus Ethernet backbone, which connects all of the networks on the KUMC, Lawrence, Regents Center, and Wichita campus to one another and a number of outstanding local resources. These include PULSE: The KUMC On-line Information System, which is the campus's well-developed resources such as MEDLINE®, CINAHL®, PsychINFO® and others; the library catalog system; the Hospital Information System; and other large-scale computing devices.

Students have access to computer resources in various campus buildings that are available 24/7 as well as the Archie R. Dykes Library (described below). Some additional KUMC schools and departments also have local computer labs. Four workstations are available in the KUMC campus KU-MPH office. All run on Microsoft Windows® have Microsoft Office® programs, educational applications, SAS®, SPSS®, EndNote® and the Outlook® email system. Wireless Internet access is also available in numerous buildings across campus. On the Wichita campus, the PC Classroom and Farha Medical Library have computer workstations available for KU-MPH students.

1.7g A concise description of the library/information resources available for program use, including a description of library capacity to provide digital (electronic) content, access mechanisms, training opportunities and document-delivery services.

The Archie R. Dykes Library on the Kansas City campus has over 65 workstations for student use as well as scanners, printers, and study rooms. Many of the Department of Student Services, including the Writing Center, Educational Support Services, Academic Accommodation Services, and others are also physically located in the Dykes Library. All MPH students have access to all the electronic journal articles that are subscribed by the Dykes Library and available to access or download using their

username and password. For many of our MPH courses, faculty provide links or the PDF version of articles so that students have easy access to all relevant course materials.

A variety of services are offered to students to assist in research including computer training and library instruction which helps build skill and confidence in library research, information management, and software. In addition, librarians are available to act as “library liaisons” to assist students within specific areas of study, including publishing their work.

The George J. Farha Medical Library on the Wichita campus serves the University of Kansas School of Medicine-Wichita medical students, KU-MPH students, residents, faculty and staff. In addition, the public is assisted with medical information. In close collaboration with Dykes Library in Kansas City, the Farha Medical Library has access to all the books, medical journals and online subscriptions held by KUMC. The library has wireless access and a computer lab with 9 computers with Internet connections, a networked printer, a scanner, PDA docking stations and zip and CD drives. Software on the library computer lab machines consists of Microsoft Office® 2013, Outlook® email, Internet Explorer®, EndNote®, Microsoft Office® Visio, EpiInfo™, SAS® and SPSS®. All KU-MPH students can print and make copies free of charge.

Situated approximately 40 miles from KUMC campus, the Watson and Anschutz Libraries on the Lawrence campus of the University of Kansas have extensive holdings in social, behavioral, and physical sciences. Books or articles that are not held by the University of Kansas libraries can be ordered easily through an interlibrary loan system.

1.7h A concise statement of any other resources not mentioned above, if applicable.

Our environmental health classes in both Kansas City and Wichita utilize local government facilities to do water testing, air monitoring and soil sampling.

1.7i Identification of measurable objectives through which the program assesses the adequacy of its resources, along with data regarding the program’s performance against those measures for each of the last three years. See CEPH Outcome Measures Template.

Table 1.7i Outcome Measures for Adequacy of KU-MPH Resources			
Outcome Measure	2014 - 15	2015 - 16	2016-17
Student to faculty ratio	1.07	2.06	2.38
Funding to support student travel, conference registrations, partial tuition scholarships, Leadership and Diversity scholarships	\$38,633.53	\$33,576.95	\$13,550.17 (Amount spent so far)
Research/contract dollars per MPH core faculty	\$510,000	\$597,000	\$598,000
Number of GRAs	13	27	22

The KU-MPH program met the objectives related to providing student support to attend Kansas Public Health Association conference as well as for students presenting at public health conferences. Furthermore, more than 50% of the KU-MPH students participated in faculty research and/or received graduate research assistantship support. The KU-MPH program has excellent student to faculty ratio with it being less than 3.0 across all concentrations in each of the last three academic years.

1.7j Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program has adequate resources to fulfill its mission, goals, and instructional, research, and service objectives. The MPH program is well funded and students have all the necessary resources regarding space, library resources, computer, library, and travel scholarships. Starting this fall, a brand new start of the art education building will be completed for students in the Schools of Medicine, Nursing and Health Professions will participate in an interdisciplinary environment, including our MPH students.

Weaknesses:

None.

Future Plans:

The institution has plans to integrate new technology to our learning management system to enhance online as well as in-class environments. The MPH program will participate in faculty training of the new technology. In addition, we will continue to provide opportunities for all faculty to gain additional training in online technology.

1.8 Diversity. The program shall demonstrate a commitment to diversity and shall evidence an ongoing practice of cultural competence in learning, research and service practices.

1.8a A written plan and/or policies demonstrating systematic incorporation of diversity within the program.

The University of Kansas and the MPH Program is committed to diversity and has had an Office of Diversity and Inclusion since 1998 (<http://www.kumc.edu/school-of-medicine/office-of-diversity-and-inclusion.html>). Diversity is one of the core values of the MPH Program as well as the University of Kansas Medical Center. While serving as Executive Vice Chancellor, Dr. Douglas Girod, created the EVC Diversity and Inclusion cabinet to better address efforts related to cultural competency, equity, civility, and professionalism among faculty, students and staff at KUMC (<http://www.kumc.edu/diversity.html>).

The EVC's Diversity and Inclusion cabinet's strategic initiatives are to integrate diversity, cultural competence and inclusion throughout the entire medical center. See the Electronic Resource file for examples of events and activities that promoted diversity and inclusion.

The Office of Student Life in Student Services supports and provides services to all students related to diversity education, leadership, student services, all graduate student organizations, community outreach programs, and other services for students. In addition, this office has cultural resources for all under-represented populations including but not limited to racial/ethnic minorities, sexual orientation, age, women's resources, and others.

The Women in Medicine and Science (WIMS) organization at the medical center focuses on recruiting and advancing the careers of women across all three schools at the medical center. The MPH program's faculty and staff is comprised of majority women and our program's track record of recruiting and promoting women in public health careers has also been excellent. The MPH student body also comprises of majority female students and we have met or exceeded this target for all years of this self-study period.

The Institute for Community Engagement at the medical center is also very active in promoting diversity in both education, research and service at the institution. The Institute has several programs offered through the medical center to recruit and target under-represented students from K-12 grades to increase the overall diversity of the student population across all three schools. Another major goal of the Institute is to serve and collaborate with the communities in our state through community based participatory research as well as providing education and health services to all under-served communities in Kansas.

i. Description of the program's under-represented populations, including a rationale for the designation.

The KU-MPH program's under-represented populations include African Americans, Hispanics/Latinos, American Indians/Alaska Natives, and students who are first generation college graduates. These populations have been underrepresented among faculty, students and staff in the KU-MPH program. Although the MPH student body has become increasingly diverse with respect to race/ethnicity, the percentage of underrepresented faculty, staff and administration remains lower than desired. Compared to the state of Kansas population distribution, however, the percentage of under-represented students in our MPH program has been higher in recent years.

ii. A list of goals for achieving diversity and cultural competence within the program, and a description of how diversity-related goals are consistent with the university's mission, strategic plan and other initiatives on diversity, as applicable.

Objective 1.1 Enroll a diverse and qualified student body

- At least 5 – 10% of applicants will be from a diverse population
- At least 10% of degree seeking new enrollees will be from diverse populations

The MPH program has met this objective and targets and has a diverse student body.

Objective 3.2 Conduct interdisciplinary research to reduce health disparities

- At least 50% of the faculty will produce high quality research in vulnerable populations by acquiring funding from external sources

The overwhelming majority of MPH faculty are involved in research to reduce health disparities in vulnerable populations including African Americans, Latinos, American Indians/Alaska Natives, the jail population, and rural populations. Faculty have been awarded an average of \$6 million to \$7 million annually to conduct health disparities research.

The MPH Program's diversity related goals are in alignment with the university's mission of diversity and cultural competence. In 2013, the medical center initiated a review of the strategic plan, which was originally launched in 2011, and completed a refinement of the overall strategic plan. The current strategic plan includes a set of competencies in the areas of cultural competence, diversity and inclusion, ethical behavior, professionalism, alignment, collaboration, and communication across all the goals of the institution.

iii. Policies that support a climate free of harassment and discrimination and that value the contributions of all forms of diversity; the program should also document its commitment to maintaining/using these policies.

The University of Kansas Medical Center has an Equal Opportunity Office (<http://www.kumc.edu/compliance-services/office-of-compliance/equal-opportunity-office.html>), whose mission is “To create a community of equality and inclusiveness that provides full and fair opportunities for all persons and to foster an intellectually and culturally diverse environment of learning and leadership where all individuals are valued, respected, and unhindered in their pursuit of excellence in their work and education.”

The KU-MPH Program and KUMC is committed to providing an equal opportunity to everyone for employment, benefits, and educational programs and activities regardless of race, religion, color, ethnicity, sex, disability, national origin, ancestry, age, veteran status, sexual orientation, marital status, parental status, gender identity, gender expression, or genetic information.

iv. Policies that support a climate for working and learning in a diverse setting.

The KU-MPH program and KUMC is committed to supporting a learning and working climate that benefits from the diverse staff, faculty and student body at the medical center. The EVC’s Diversity and Inclusion cabinet conducts periodic climate surveys of all students, staff and faculty at the medical center to address issues of diversity and inclusion (see Electronic Resource File). In addition, this cabinet also conducts symposia throughout the year addressing pertinent topics and are open to all staff, faculty and students. The EVC’s Diversity and Inclusion award is also presented annually to anyone at the medical center whose actions and work enhance the mission of the institution with respect to diversity and inclusion.

All students, including our MPH students, are members of the Graduate Student Council and participate in the Student Diversity Council activities to promote diversity and inclusion on the medical center campus.

v. Policies and plans to develop, review and maintain curricula and other opportunities including service learning that address and build competency in diversity and cultural considerations.

The KU-MPH Program addresses competency in diversity and cultural considerations across the curriculum and throughout the students’ time in the program. All MPH students must attend a new student orientation conducted by the Operations Committee members on each campus. All students are provided orientation to the program’s mission and core values, which includes diversity and inclusion.

The core MPH courses of Social and Behavioral Health, Epidemiology, Environmental Health, Public Health Administration, as well as the required concentration class of Introduction to Public Health and Cultural Competency in Public Health all address aspects of diversity, cultural competence, health disparities, and determinants of health.

In addition, the KU-MPH program has several elective courses including, Community Based Participatory Research, Seminar in American Indian Health and Health Disparities that also enhance competencies in diversity and cultural considerations.

All KU-MPH students are strongly encouraged to complete their internships in local public health departments. Although coursework and experiences taken prior to the internship have addressed the core MPH competencies in the areas of communication and professionalism (i.e. MPH03 Demonstrate compassion, integrity, honesty, and respect for others), the internship experience provides another opportunity to address these competencies.

vi. Policies and plans to recruit, develop, promote and retain a diverse faculty.

The KU-MPH program is committed to recruiting, developing, promoting and retaining a diverse faculty. Approximately twenty percent of MPH faculty are under-represented minority faculty and the program and institution has been able to retain and promote these faculty. The MPH program works with the Institution's Office of Human Resources in all recruitment and hiring decisions. The guidelines are located at the following Human Resources website: <http://www.kumc.edu/human-resources.html>. As mentioned previously, the Executive Vice Chancellor of the Medical Center is committed to diversity and inclusion in all aspects of recruitment, development, and promotion of all faculty.

vii. Policies and plans to recruit, develop, promote and retain a diverse staff.

The KU-MPH program is also committed to recruit, hire, promote and develop a diverse staff. The program uses the institution's search and selection procedures in recruitment of all staff positions.

viii. Policies and plans to recruit, admit, retain and graduate a diverse student body.

The KU-MPH program actively recruits, admits, retains, and graduates a diverse student body. In the past three years, the MPH student body consisted of 20% - 40% of students from under-represented minority populations, which is much higher than the state proportion of minorities in Kansas (16%, 2010 Census data).

The KU-MPH program participates in undergraduate student recruitment at all state universities, including the University of Kansas, Pittsburg State University, Emporia State University, Wichita State University, Kansas State University, and other universities and colleges throughout the state and region. Furthermore, the program specifically targets undergraduate institutions with higher percentage of under-represented minority students, like Haskell Indian Nations University and community colleges in Kansas City and the region.

ix. Regular evaluation of the effectiveness of the above-listed measures.

At least once a year, the KU-MPH Admissions Committee reviews applicants. For the past three years, we have met our target for having a diverse student body in the program.

The KU-MPH program conducts exit interviews with all graduating students and assesses their experience in the program with questions related to diversity and inclusion. All graduating students are asked about how well the program addresses:

1. Recruitment of students with diverse cultural background
2. Serving students without regard for race, ethnicity or gender

The department also submits an annual report to the executive dean of the KU School of Medicine, which includes the above diversity and inclusion policies and procedures.

1.8b Evidence that shows the plan or policies are being implemented. Examples may include mission/goals/objectives that reference diversity or cultural competence, syllabi and other course materials, lists of student experiences demonstrating diverse settings, records and statistics on faculty, staff and student recruitment, admission and retention.

Diversity is a core value of the KU-MPH program and is included in several of the programs competencies. Specifically, competency MPH03, includes “compassion and respect for others,” and competencies SBH02, SBH04 and SBH05 refer to “health disparities, underserved populations, and needs of special populations.”

The list of internship sites and mentors in section 2.4b demonstrates the various local and state health departments as well as other public health agencies that work with diverse and underserved communities in the region. Examples include, Unified Government of Wyandotte County and Kansas City, which was found to have the worse health outcomes as well as risk factors of all 105 counties in Kansas. Another example is American Indian Health Research and Education Alliance (AIHREA), whose mission is to reduce health disparities among the American Indian population in the state and region. Other MPH students have worked with the Latino and African American populations across Kansas to reduce health disparities.

1.8c Description of how the diversity plan or policies were developed, including an explanation of the constituent groups involved.

The Executive Vice Chancellor’s Diversity and Inclusion Cabinet includes faculty, staff, community members and students across all three Schools of Medicine, Nursing, and Health Professions. The cabinet assumes responsibility for campus activities and goals related to diversity and inclusion, including efforts that address cultural competency, equity, civility and professionalism, and advises the Executive Vice Chancellor on

related matters. MPH faculty and Chair of Preventive Medicine and Public Health on the Wichita campus, Dr. Tracie Collins is a representative on the cabinet.

1.8d Description of how the plan or policies are monitored, how the plan is used by the program and how often the plan is reviewed.

The KU-MPH program's evaluation and monitoring process provides the mechanism for ongoing monitoring and review by the respective MPH committees and administration for diversity related plans and policies. In addition, the EVC's Diversity and Inclusion Cabinet holds regular meetings to monitor the campus climate with respect to diversity. Dr. Tracie Collins, chair of the Department of Preventive Medicine and Public Health in Wichita, is a member of the cabinet and provides feedback to the MPH program at our Executive Council meetings. Results of a KUMC Campus Climate Survey Research Study were disseminated in June 2017 and the executive summary, full report, and presentation are included in the Electronic Resource File.

The MPH Operations committee as well as the MPH Admissions committee are most involved in monitoring the diversity of the student body in our program.

1.8e Identification of measurable objectives by which the program may evaluate its success in achieving a diverse complement of faculty, staff and students, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Data Template 1.8.1. At a minimum, the program must include four objectives, at least two of which relate to race/ethnicity. For non-US-based institutions of higher education, matters regarding the feasibility of race/ethnicity reporting will be handled on a case-by-case basis. Measurable objectives must align with the program's definition of under-represented populations in Criterion 1.8.a.

Table 1.8.1 Summary Data for Faculty, Students and Staff						
Group Category/Definition	Method of Collection	Data Source	Target	2014-2015	2015-2016	2016-2017
STUDENTS--Female	Self-Report	Admissions Data	50%	63%	61%	75%
STUDENTS— Underrepresented Minorities in student body	Self-Report	Admissions Data	25%	24%	27%	31%
STUDENTS – Underrepresented Minorities amongst new enrollees	Self-Report	Admissions Data	10%	42%	19.5%	25%
STUDENTS - First generation student to pursue a graduate degree	Self-Report	Admissions Data	20%	Data not collected	35%	49%

Group Category/Definition	Method of Collection	Data Source	Target	2014-2015	2015-2016	2016-2017
FACULTY--African American/Black/Latino	Self-Report	Departmental Data	15%	20%	20%	20%
STAFF—first generation college graduate	Self-Report	Departmental Data	2	2	2	2
Annual external funding for research to reduce health disparities	Self-Report	RI and faculty CV's	N/A	\$5,813,441	\$7,394,568	\$6,396,350

1.8f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met with commentary.

Strengths:

The Institution and KU-MPH program is committed to diversity and has policies and plans in place to recruit, develop, and promote all faculty and staff. The student body is diverse and includes students from underrepresented minorities. It is mostly female and almost 50% are the first generation to pursue a graduate degree. The EVC's Diversity and Inclusion cabinet was recently formed to address issues and promote new initiatives related to diversity and cultural competence throughout the campus.

Faculty continue to conduct research with underserved and vulnerable populations and sustain this level funding in the near future.

Weaknesses:

The KU-MPH program still needs to do a better job of recruiting faculty and staff from under-represented minority populations, although this opportunity has been limited mainly due to limited funding to hire new faculty.

Future Plans:

Continue to strengthen our recruitment plan and activities to recruit and enroll diverse students and faculty.

2.0 Instructional Programs

2.1 Degree Offerings. 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 and/or an MPH with areas of specialization. The program, depending upon how it defines the unit of accreditation, may offer other degrees, if consistent with its mission and resources.

2.1a An instructional matrix presenting all of the program's degree programs and areas of specialization, including bachelor's, master's and doctoral degrees, as appropriate. If multiple areas of specialization are available, these should be included. The matrix should distinguish between professional and academic degrees for all graduate degrees offered and should identify any programs that are offered in distance learning or other formats. Non-degree programs, such as certificates or continuing education, should not be included in the matrix. See CEPH Data Template 2.1.1.

Table 2.1.1. Instructional Matrix – Degrees & Specializations		
	Academic	Professional
Master's Degrees		
Specialization/Concentration/Focus Area		Degree*
Epidemiology		MPH
Public Health Management		MPH
Social and Behavioral Health		MPH
Joint Degrees		
2 nd (non-public health) area		Degree*
Applied Behavioral Sciences		PhD/MPH
Doctor of Medicine		MD/MPH

2.1b The bulletin or other official publication, which describes all degree programs listed in the instructional matrix, including a list of required courses and their course descriptions. The bulletin or other official publication may be online, with appropriate links noted.

The KU-MPH curriculum and course descriptions can be found in two locations:

1. The University of Kansas online catalog - <http://catalog.ku.edu/schoolofmedicine/>
2. The KU-MPH website - <http://www.kumc.edu/school-of-medicine/mph/prospective-students.html>

2.1c Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

KU-MPH curricula for all degrees are published in two online formats.

Weaknesses:

Information regarding our joint PhD/MPH degree program is not easily found in the online KU Catalog.

Future Plans:

We are currently working with the Office of Graduate Studies to remedy this visibility issue and create a page in the University of Kansas online catalog specifically for the PhD/MPH joint program.

2.2 Program Length. An MPH degree program or equivalent professional master's degree must be at least 42 semester-credit units in length.

2.2a Definition of a credit with regard to classroom/contact hours.

Credit hours are defined by the Office of Graduate Studies. Per university definition, one credit hour equals one contact hour plus one to three hours of homework per week for a full 16-week semester.

2.2b Information about the minimum degree requirements for all professional public health master's degree curricula shown in the instructional matrix. If the program or university uses a unit of academic credit or an academic term different than the standard semester or quarter, this should be explained and an equivalency presented in a table or narrative.

The KU-MPH program requires completion of a minimum of 42-credit hours in order to qualify for graduation.

2.2c Information about the number of MPH degrees awarded for less than 42 semester credit units, or equivalent, over each of the last three years. A summary of the reasons should be included.

The KU-MPH program did not award a degree to a student completing less than 42 credit hours in the last three years. The KU-MPH program increased its credit hours to 42 beginning with students admitted/enrolled in fall 2007. The KU-MPH program and the KUMC Office of Graduate Studies allow students seven years to complete the degree with the vast majority of students completing the degrees in fewer than five years.

2.2d Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program complies with all credit hour requirements of the KUMC Office of Graduate Studies. The KU-MPH program increased its credit hours from 36 to 42 starting with the fall 2007 cohort in order to meet CEPH requirements. We have not awarded a degree to a student completing less than 42 credit hours in the last three years.

Weaknesses:

None.

Future Plans:

We do not have future plans to increase credit hour requirements.

2.3 Public Health Core Knowledge. All graduate professional degree students must complete sufficient coursework to attain depth and breadth in the five core areas of public health knowledge.

2.3a Identification of the means by which the program assures that all graduate professional public health degree students have fundamental competence in the areas of knowledge basic to public health. If this means is common across the program, it need be described only once. If it varies by degree or specialty area, sufficient information must be provided to assess compliance by each. See CEPH Data Template 2.3.1.

Table 2.3.1 Required Courses Addressing Public Health Core Knowledge Areas for Master of Public Health Degree		
Core Knowledge Area	Course Number & Title	Credits
Biostatistics*	BIOS 704 Principles of Statistics in Public Health OR BIOS 714 Fundamentals of Biostatistics I	3
Epidemiology	PRVM 800 Principles of Epidemiology	3
Environmental Health Sciences	PRVM 830 Environmental Health	3
Social & Behavioral Sciences	PRVM 818 Social and Behavioral Aspects of Public Health	3
Health Services Administration	PRVM 827 Public Health Administration	3

*Students in the Public Health Management and Social and Behavioral Health concentrations take BIOS 704. Students in the Epidemiology concentration take BIOS 714. These courses cover the same competencies, however, BIOS 714 requires SAS® usage for homework completion whereas BIOS 704 uses Excel®.

2.3b Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program ensures that all students receive public health core knowledge through required course work. The advising, grading, internship, capstone and e-Portfolio processes all serve to assess the students' understanding of public health core knowledge. The KU-MPH Operations Committee regularly engages the public health workforce and program alumni in order to keep the curriculum applicable and relevant to current needs of the state and region.

Weaknesses:

None.

Future Plans:

We are currently notifying administration and educating our faculty about the new CEPH criteria and how it impacts core courses and core knowledge areas.

2.4 Practical Skills. All graduate professional public health 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.

2.4a Description of the program's policies and procedures regarding practice placements, including selection of sites; methods for approving preceptors; opportunities for orientation and support for preceptors; approaches for faculty supervision of students; means of evaluating student performance; means of evaluating practice placement sites; and preceptor qualifications and criteria for waiving, altering and reducing the experience, if applicable.

Program Policies and Procedures

All KU-MPH students complete an internship in order to be eligible for graduation. Throughout the course of the internship, students must log 192 hours of work with at least 96 of those hours in residence at the internship site. The internship is a service learning experience designed to enhance and extend the student's academic experience through the application of public health concepts and skills in a supervised field experience. The internship will provide the student with an opportunity to engage in actual public health practice through an individualized experience with a host organization or a community-focused enterprise.

The goals of the KU-MPH internship are:

1. To broaden and hone student proficiency in a specified area of public health practice through a meaningful field experience.
2. To demonstrate integration of knowledge and a deeper understanding of public health practice through the completion of learning objectives/goals and activities that are mutually agreed upon by the student, site mentor, and MPH program office prior to initiation of the internship.
3. To expose the student to the expertise and leadership of a public health professional, as embodied by the site mentor.

All students complete an Internship Experience Guidelines form (see Electronic Resource File) along with the internship site mentor and KU-MPH site director. This document includes: site mentor name and title; description and location of public health agency; projected start and end dates; learning objectives; activities, KU-MPH competencies addressed; and deliverables and outputs.

Selection of Sites

The KU-MPH program has a list of potential internship sites that include accredited health departments and public health agencies across the state. Through relationships with the Kansas Public Health Association (KPHA), memberships on the KU-MPH External Advisory Board and KU-MPH alumni, the KU-MPH program has established relationships across the state with potential internship sites. Students are also allowed to identify an internship site independent of the KU-MPH program's list with the approval of their respective site director.

Students are encouraged to choose an internship outside of their current workplace. However, students can complete an internship at their place of employment if the placement is outside of their current department, is separate and distinct from any duties associated with the student's regular employment, and their immediate supervisor is not their internship site mentor. This means the 192 hours accrued while enrolled in PRVM 891 must go above and beyond the usual job description. The ways in which the internship differs from normal work responsibilities must be outlined and documented in the Internship Experience Guidelines form (see Electronic Resource File). No credit will be provided for an internship completed within the scope of the student's current work assignments.

Methods for Approving Site Mentors/Preceptors

The primary responsibility for approving the selected internship site, project and site mentor lies with the KU-MPH site directors.

Opportunities for Orientation and Support of Site Mentors/Preceptors

KU-MPH site directors individually orient internship mentors on an as-needed basis. The majority of internship mentors sit on the KU-MPH External Advisory Board or are program alumni with previous experience to the program.

Additionally, KU-MPH site directors meet with every internship mentor to create the Internship Experience Guidelines form before the internship begins to make sure that the mentor understands the educational background of the MPH intern follows the guidelines created for the intern and provides the intern with a workstation at their respective agency.

Approaches for Faculty Supervision of Students

The KU-MPH site director will meet with the site mentor and the intern three times throughout the course of the internship placement. Once at the beginning to discuss and approve the procedures; once at midterm to discuss progress to date, ask about changes and adjust the Internship Experience Guidelines form; and at the end of the semester to see a presentation of the deliverables produced and discuss the overall experience.

Means of Evaluating Student Performance

Site mentors are given an evaluation tool (see Electronic Resource File) with 14 questions discussing the intern's professional conduct and demeanor, application of skills, communication and overall experience. Site mentors are also asked to suggest a grade and answer questions regarding student strengths, areas for future development, benefit of hosting an intern and future interest in MPH interns.

This evaluation, along with the Internship Hours Tracking form (see Electronic Resource File), assist in the MPH site director's ability to assign a final grade.

Means of Evaluation for Internship Placement Sites

Internship placement sites are evaluated by the MPH site directors who visit the placement site with the student before the internship begins, at midterm and at the final internship meeting. Students are also asked about their experience at their internship site in their exit interview.

Site Mentor/Preceptor Qualifications

Qualified internship site mentors must be at least mid-level supervisors in the department that the internship takes place. It is preferred that the site mentor have at least a master's degree, however, years of experience are also considered when assessing site mentor qualifications.

Criteria for Waiving, Altering and Reducing the Experience

No student waivers are allowed for the internship experience. The internship can be altered only after consulting both the MPH site director and site mentor. All students are expected to complete 192 hours of logged work during their internship with 96 of those hours being at the internship site. Students are allowed to complete these hours in separate semesters or one credit hour at a time, but we do not allow for a reduction in hours.

2.4b Identification of agencies and preceptors used for practice experiences for students, by specialty area, for the last two academic years.

Table 2.4b Site mentors and agencies for internships.			
Internship Agency	Site Mentors	Concentration	Year
Blue Cross Blue Shield of Kansas	Virginia Barnes, MPH	Epidemiology	2017
Children's Mercy Hospital	Melissa Miller, MD	Social and Behavioral Health	2017
City of Wichita – Department of Public Works	Rebecca Lewis, MPA	Environmental Health	2017
Douglas County District Court	Linda Koester-Vogelsang, RN, JD	Social and Behavioral Health	2017
Episcopal Migration Ministries	Marla Schmidt, MSW	Social and Behavioral Health	2017
Healthy Communities Wyandotte - Unified Government of Wyandotte County and Kansas City, KS Health Department and MOCSA (Metropolitan Organization to Counter Sexual Assault)	Wesley McKain and Vanessa Crawford Aragón	Social and Behavioral Health	2017

Internship Agency	Preceptor	Concentration	Year
Johnson County Department of Health and Environment	Caitlin Walls, MPH	Epidemiology	2017
Johnson County Department of Health and Environment	Caitlin Walls, MPH	Epidemiology	2017
Kansas City Missouri Health Department	Joey Lightner, PhD, MPH	Social and Behavioral Health	2017
Kansas Department of Health and Environment	Cristi Cain	Public Health Management	2017
Kansas Department of Health and Environment	Lori Haskett	Public Health Management	2017
Lawrence-Douglas County Health Department	Vicki Collie-Akers, PhD, MPH	Social and Behavioral Health	2017
Midwest Cancer Alliance	Hope Krebill, RN, BSN, MSW	Epidemiology	2017
Public Health Accreditation Board	Jessica Kronstadt	Epidemiology	2017
Sedgwick County Health Department	J'Vonnah Maryman, PhD, MPH	Public Health Management	2017
Sedgwick County Health Department	Christine Steward, MPH	Epidemiology	2017
Stevens County Emergency Management	Rodney Kelling	Public Health Management	2017
Unified Government of Wyandotte County and Kansas City, KS Health Department	Alyssa Carodine, MPH	Public Health Management	2017
Unified Government of Wyandotte County and Kansas City, Kansas Health Department	Joanna Sabally, MPH, CHES	Epidemiology	2017
American Indian Health Research and Education Alliance (AIHREA)	Thomas E. Smith II, MA	Public Health Management	2016
American Indian Health Research and Education Alliance (AIHREA)	Thomas E. Smith II, MA	Social and Behavioral Health	2016
Center for American Indian Community Health	Won Choi, PhD, MPH	Epidemiology	2016
Children's Mercy Hospital	Edward Ellerbeck, MD, MPH	Public Health Management	2016

Internship Agency	Preceptor	Concentration	Year
Fredonia Regional Hospital	Susan John	Social and Behavioral Health	2016
Harvey County Health Department	Lynnette Redington, MEd	Public Health Management	2016
Jackson County Health Department	Ray Dlugolecki, MPH	Social and Behavioral Health	2016
Johnson County Department of Health and Environment	Elizabeth Holzschuh, MS	Epidemiology	2016
Johnson County Department of Health and Environment	Barbara Mitchell, MSW	Social and Behavioral Health	2016
Kansas Department of Health and Environment	Laurie Hart, LMSW	Social and Behavioral Health	2016
Kansas Department of Health and Environment	Kate Hoppe, MPH, MS	Social and Behavioral Health	2016
Kansas Department of Health and Environment	Joseph Scaletta, MPH, BSN, RN, CIC	Epidemiology	2016
Kansas Department of Health and Environment	Sheri Tubach, MPH, MS	Epidemiology	2016
Kansas Health Institute	Sarah Hartsig, MS	Social and Behavioral Health	2016
Kansas Healthcare Collaborative	Eric Cook-Wiens, MPH, CPHQ	Epidemiology	2016
Kansas Heart and Stroke Collaborative	Robert Moser, MD	Public Health Management	2016
Lawrence-Douglas County Health Department	Vickie Collie-Akers, PhD, MPH	Social and Behavioral Health	2016
Lawrence Memorial Hospital Community Education Department	Ken Sarber, MSE	Social and Behavioral Health	2016
Oklahoma State Department of Health	Stephen R. Gillaspay, PhD	Social and Behavioral Health	2016
Planned Parenthood Great Plains	Sarah Aanestad	Social and Behavioral Health	2016
Sedgwick County Health Department	Christine Steward, MPH	Epidemiology	2016
Unified Government of Wyandotte County and Kansas City, Kansas Health Department	Rebecca Garza, MS	Social and Behavioral Health	2016

Internship Agency	Preceptor	Concentration	Year
Unified Government of Wyandotte County and Kansas City, Kansas Health Department	Joanna Sabally, MPH, CHES	Public Health Management	2016
Unified Government of Wyandotte County and Kansas City, Kansas Health Department	Joanna Sabally, MPH, CHES	Social and Behavioral Health	2016
United States Department of Health and Human Services – Office of Inspector General	Brian Whitley, MPH	Epidemiology	2016
University of Kansas Work Group for Community Health and Development	Vincent Francisco, PhD	Social and Behavioral Health	2016
University of Kansas Work Group for Community Health and Development	Jerry A. Schultz, PhD	Social and Behavioral Health	2016
Via Christi Hospital – Department of Medical Information	Brendan Rice, MD	Public Health Management	2016
Wichita State University – Community Engagement Institute. Center for Public Health Initiatives	Sonja Armbruster, MA and Alissa Rankin, MPH	Social and Behavioral Health	2016
Area Health Education Center	Mary Beth Warren, RN, BSN, MSN	Epidemiology	2015
City of Wichita Department of Environmental Health	Shawn Maloney, PG	Environmental Health	2015
Kansas City CARE Clinic	Makini King, PhD	Social and Behavioral Health	2015
Kansas City Health Department	Mary T. Hynek, MSPH	Epidemiology	2015
Kansas Department of Health and Environment	Farah Ahmed, PhD, MPH	Epidemiology	2015
Kansas Department of Health and Environment	Laurie Hart, LMSW	Social and Behavioral Health	2015
Kansas Department of Health and Environment	Catherine Taylor-Osborne, DDS	Public Health Management	2015
Kansas Health Institute	Sarah Hartsig, MS	Public Health Management	2015

2.4c Data on the number of students receiving a waiver of the practice experience for each of the last three years.

Table 2.4.c. Number of Students Who Waived the Practice Experience			
	2014-2015	2015-2016	2016-2017
Number of Practice Waivers Granted	0	0	0

2.4d Data on the number of preventive medicine, occupational medicine, aerospace medicine, and general preventive medicine and public health residents completing the academic program for each of the last three years, along with information on their practicum rotations.

Not applicable. The University of Kansas does not have residency programs in preventive medicine, occupational medicine, aerospace medicine or general preventive medicine and public health.

2.4e Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

All KU-MPH students are required to complete an internship. Students are actively involved in choosing their internship placement and the MPH site director oversees the process throughout the semester of enrollment. Internship site mentors are qualified members of our public health community and are offered assistance throughout the internship process.

Weaknesses:

While the MPH site directors do ask students for feedback regarding their internship, we do not have a written mechanism to collect this information. We also need to increase site mentor support and appreciation.

Future Plans:

We are developing a student evaluation of the site and site mentor as well as orientation information for site mentors.

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

2.5a Identification of the culminating experience required for each professional public health degree program. If this is common across the program's professional degree programs, it need be described only once. If it varies by degree or specialty area, sufficient information must be provided to assess compliance by each.

The public health capstone (see Electronic Resource File) is a 192 hour (12 hours/week for the 16 week semester) culminating experience that requires students to synthesize and integrate knowledge and/or apply theories and principles learned to an area of public health. The capstone is completed at the end of the student's degree program, and is designed to give the student an opportunity to apply his/her skills to a variety of problems or issues in public health. The capstone should be primarily focused on addressing concentration-specific competencies. While the exact activities and outcomes of the capstone will differ across concentrations, all capstones, regardless of concentration, must include a written report and an oral defense.

The capstone will differ by concentration. It is up to the capstone committee, comprised of a concentration-specific faculty chair and two additional MPH faculty members, to determine suitable projects by concentration. Capstones do not have to entail original research. Likewise, projects do not have to include data and/or statistical analyses, although certain projects may require it.

When developing the capstone proposal, students must identify the competencies to be addressed as well as how the project will address each competency. Students are encouraged to focus on concentration competencies although many program competencies may be described in the capstone plan (see Electronic Resource File).

Students are encouraged to be creative in proposing capstones, especially if the proposed product would meet a need in the community or the setting in which the student has completed his/her internship.

Examples of capstones might include but are not limited to:

- Manuscript appropriate for submission to a peer-reviewed journal
- Technical report (narrative appropriate for submission by the grantee agency to the funding or oversight agency)
- Secondary data analysis and accompanying report/paper
- Evaluation and/or proposed evaluation of ongoing program(s)
- Research proposal (narrative appropriate for submission to a local, state, or federal granting agency)
- Grant proposal
- Public policy proposal (e.g., proposal and rationale for a new law or regulatory program to address a public health problem)

- Development, evaluation, and possible delivery of original curriculum that addresses a clear public health problem and/or need in a community
- Development and evaluation of education materials (e.g., website) and dissemination plan that includes substantial original content and address a public health problem and/or need in the community
- Organization of a community event(s) to address gaps in knowledge and/or services in a designated community
- Quality improvement project in a public health setting
- Facilitate a community health needs assessment and community improvement plan
- Cost-effectiveness analysis and report
- Development of protocols for use by an organization in responding to a public health crisis/concern (e.g., foodborne illnesses and coordination of efforts between food inspectors and health department epidemiologists)

The goals of the capstone are to demonstrate the ability to synthesize and integrate knowledge and/or apply theories and principles learned across the MPH curriculum, particularly in the student's concentration, to an area of public health. A written report is required. Students must also complete an oral defense, using the substance and content of their capstone to create a professional PowerPoint presentation that clearly demonstrates proficiency.

2.5b Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

All KU-MPH students, regardless of concentration area, are required to complete a capstone and an oral defense in the semester they wish to graduate. This capstone must be a written document that is completed with assistance from a KU-MPH faculty committee. The capstone proposal and final paper each address how the student will incorporate development of program and concentration competencies during the project. Proficiency is demonstrated in the form of an oral PowerPoint defense that must be completed in accordance with program and Office of Graduate Studies guidelines.

Weaknesses:

None.

Future Plans:

We do not have plans to alter our capstone process.

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. The program must identify competencies for graduate professional, academic and baccalaureate public health degree programs. Additionally, the program must identify competencies for specializations within the degree programs at all levels (bachelor's, master's and doctoral).

2.6a Identification of a set of competencies that all graduate professional public health degree students and baccalaureate public health degree students, regardless of concentration, major or specialty area, must attain. There should be one set for each graduate professional public health degree and baccalaureate public health degree offered by the program (e.g. one set for each BSPH, MPH and DrPH).

In 2012, the KU-MPH program finalized the creation of program-specific competencies. This process took more than one year and involved faculty, department chairs and public health stakeholder input. These 24 competencies are covered throughout the KU-MPH core and required courses which are required of all students regardless of concentration.

Table 2.6a KU – MPH Program-Specific Competencies	
	DOMAIN 1: COMMUNICATION
MPH01	Apply effective written and oral skills to communicating with different audiences in the context of professional and public health activities.
MPH02	Describe different communications strategies that impact health-related activities.
	DOMAIN 2: PROFESSIONALISM
MPH03	Demonstrate compassion, integrity, honesty, and respect for others.
	DOMAIN 3: BIOSTATISTICS
MPH04	Define basic terminology of univariate and bivariate statistics.
MPH05	Describe and identify basic univariate statistical study designs in public health.
MPH06	Interpret descriptive and inferential statistics for basic univariate and bivariate analysis of public health data.
MPH07	Assist with the design, development and implementation of public health data management strategies.
	DOMAIN 4: ENVIRONMENTAL HEALTH SCIENCES
MPH08	Describe direct and indirect human, ecological and safety effects of major chemical and biological environmental and occupational agents.
MPH09	Describe policies, regulations, laws, and programs that control environmental and occupational health practices.
MPH10	State approaches for assessing, preventing, and controlling environmental and occupational hazards that pose risks to human health and safety.
MPH11	Discuss issues of environmental justice and equity.
	DOMAIN 5: EPIDEMIOLOGY
MPH12	Explain the basic terminology and definitions of epidemiology.
MPH13	Identify key sources of data for epidemiologic purposes.
MPH14	Conduct a comprehensive review of the scientific evidence related to a public health issue, concern, or intervention.
MPH15	Describe basic epidemiological study designs.
MPH16	Draw appropriate inferences from epidemiologic data.

	DOMAIN 6: PUBLIC HEALTH MANAGEMENT
MPH17	Discuss major aspects of the policy process.
MPH18	Describe the main features of the public health systems in the U.S.
MPH19	Discuss management concepts.
MPH20	Apply administrative concepts to support decision-making and improve practice.
MPH21	Describe the role of systems thinking in public health.
	DOMAIN 7: SOCIAL AND BEHAVIORAL HEALTH
MPH22	Describe theories of health behavior and their application.
MPH23	Describe the social and behavioral factors that affect the health of individuals and populations.
MPH24	Review the evidence-based literature for understanding social and behavioral public health problems and planning public health programs.

2.6b Identification of a set of competencies for each concentration, major or specialization (depending on the terminology used by the program) identified in the instructional matrix, including professional and academic graduate degree curricula and baccalaureate public health degree curricula.

In 2012, the KU-MPH program also finalized the creation of concentration-specific competencies. This process was completed by KU-MPH faculty on the respective concentration committees. These competencies were created in conjunction with concentration curricula.

Table 2.6b Concentration specific competencies.	
MPH Concentration Competencies – Epidemiology	
EPC01	Understand the historical context of epidemiology and articulate contemporary epidemiologic and public health problems to lay and professional audiences.
EPC02	Locate, assemble, and critically appraise existing data, information, and knowledge resources.
EPC03	Design and implement studies to advance the knowledge-base of disease processes, and further improve the health of the public.
EPC04	Acquire skills to analyze, synthesize, and interpret epidemiologic data.
EPC05	Comprehend basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.
EPC06	Understand the interrelation between key players in the public health arena.

MPH Concentration Competencies – Public Health Management	
PHMC01	Identify and interpret public health laws, regulations, and policies related to specific programs.
PHMC02	Discuss the policy process for improving the health status of populations.
PHMC03	Identify the main components and issues of the organization, financing and delivery of health services and public health systems in the US.
PHMC04	Apply the evidence-based research methods and public health sciences (epidemiology, biostatistics, social and behavioral health, environmental health). These include principles of program planning, development, budgeting, management, and evaluation in organizational and community initiatives.
PHMC05	Apply basic human relations skills to the management of organizations, motivation of personnel, resolution of conflicts and the development of community partnerships.
PHMC06	Apply leadership and systems thinking to understand the dynamics among public health, private enterprise, government, community-based, and healthcare organizations.

MPH Concentration Competencies – Social and Behavioral Health	
SBHC01	Apply basic theories, concepts, and models from a range of social and behavioral disciplines to public health research and practice.
SBHC02	Describe the social and behavioral factors that affect the health of individuals and populations, including how these factors may account for health disparities.
SBHC03	Apply evidence-based research procedures for studying public health problems, planning, implementing, and evaluating public health programs.
SBHC04	Identify the role of social, community, and cultural factors in both the onset and solution of public health problems across diverse and underserved populations.
SBHC05	Use community input and linkages to conduct in-depth analysis of public health problems, develop, and promote public health programs for special populations.

2.6c A matrix that identifies the learning experiences (e.g. specific course or activity within a course, practicum, culminating experience or other degree requirement) by which the competencies defined in Criteria 2.6.a are met. If these are common across the program, a single matrix for each degree with suffice. If they vary sufficient information must be provided to assess compliance by each degree or specialty area. See CEPH Data Template 2.6.1

Table 2.6.1.a Courses and other learning experiences by which the competencies are met											
MPH Program Competencies	BIOS 704	BIOS 714	BIOS 715	PRVM 800	PRVM 809	PRVM 818	PRVM 827	PRVM 830	PRVM 875	PRVM 891	PRVM 893
Apply effective written and oral skills to communicating with different audiences in the context of professional and public health activities.				P	P	P	P	R	R	R	R
Describe different communications strategies that impact health-related activities.					P		R			R	R
Demonstrate compassion, integrity, honesty, and respect for others.				P	P			R	R	R	R
Define basic terminology of univariate and bivariate statistics.	P	P	R						R		
Describe and identify basic univariate statistical study designs in public health.	P	P	R						R		
Interpret descriptive and inferential statistics for basic univariate and bivariate analysis of public health data.			P						P	R	R
Assist with the design, development and implementation of public health data management strategies.			P						P	R	R
Describe direct and indirect human, ecological and safety effects of major chemical and biological environmental and occupational agents.								P			
Describe policies, regulations, laws, and programs that control environmental and occupational health practices.								P			

MPH Program Competencies	BIOS 704	BIOS 714	BIOS 715	PRVM 800	PRVM 809	PRVM 818	PRVM 827	PRVM 830	PRVM 875	PRVM 891	PRVM 893
State approaches for assessing, preventing, and controlling environmental and occupational hazards that pose risks to human health and safety.								P			
Discuss issues of environmental justice and equity.								P			
Explain the basic terminology and definitions of epidemiology.					P						
Identify key sources of data for epidemiologic purposes.			R		P				R		
Conduct a comprehensive review of the scientific evidence related to a public health issue, concern, or intervention.				P	R					R	R
Describe basic epidemiological study designs.				P						R	R
Draw appropriate inferences from epidemiologic data.				P						R	R
Discuss major aspects of the policy process.							P				
Describe the main features of the public health systems in the U.S.							P			R	R
Discuss management concepts.							P			R	R
Apply administrative concepts to support decision-making and improve practice.							P			R	R
Describe the role of systems thinking in public health.						P	P			R	R
Describe theories of health behavior and their application.						P				R	R
Describe the social and behavioral factors that affect the health of individuals and populations.						P				R	R
Review the evidence-based literature for understanding social and behavioral public health problems and planning public health programs.						P				R	R

P=Primary, R=Reinforcing

Table 2.6.1.b Courses and other learning experiences by which the epidemiology concentration competencies are met

MPH Concentration Competencies - Epidemiology	PRVM 813	PRVM 815	PRVM 841	PRVM 842	PRVM 891	PRVM 893
Understand the historical context of epidemiology and articulate contemporary epidemiologic and public health problems to lay and professional audiences.	P	P	R	R	R	R
Locate, assemble, and critically appraise existing data, information, and knowledge resources.	R	P	P	P	R	R
Design and implement studies to advance the knowledge-base of disease processes, and further improve the health of the public.			P	P	R	R
Acquire skills to analyze, synthesize, and interpret epidemiologic data.	R	R	P	P	R	R
Comprehend basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.	P	P		R	R	R
Understand the interrelation between key players in the public health arena.	P	P		R	R	R

P=Primary, R=Reinforcing

Table 2.6.1.c Courses and other learning experiences by which the public health management concentration competencies are met

MPH Concentration Competencies – Public Health Management	PRVM 828	PRVM 851	PRVM 861	PRVM 879	PRVM 891	PRVM 893
Identify and interpret public health laws, regulations, and policies related to specific programs.		P		P	R	R
Discuss the policy process for improving the health status of populations.	R	P			R	R
Identify the main components and issues of the organization, financing and delivery of health services and public health systems in the US.				P	R	R
Apply the evidence-based research methods and public health sciences (epidemiology, biostatistics, social and behavioral health, environmental health). These include principles of program planning, development, budgeting, management, and evaluation in organizational and community initiatives.	P			R	R	R
Apply basic human relations skills to the management of organizations, motivation of personnel, resolution of conflicts and the development of community partnerships.	R		R	P	R	R
Apply leadership and systems thinking to understand the dynamics among public health, private enterprise, government, community-based, and healthcare organizations.			P	R	R	R

P=Primary, R=Reinforcing

Table 2.6.1.d Courses and other learning experiences by which the social and behavioral health concentration competencies are met						
MPH Concentration Competencies – Social and Behavioral Health	PRVM 835	PRVM 845	PRVM 849	PRVM 877	PRVM 891	PRVM 893
Apply basic theories, concepts, and models from a range of social and behavioral disciplines to public health research and practice.	P	P	R	R	R	R
Describe the social and behavioral factors that affect the health of individuals and populations, including how these factors may account for health disparities.		P		R	R	R
Apply evidence-based research procedures for studying public health problems, planning, implementing, and evaluating public health programs.	P		R		R	R
Identify the role of social, community, and cultural factors in both the onset and solution of public health problems across diverse and underserved populations.		P	P		R	R
Use community input and linkages to conduct in-depth analysis of public health problems, develop, and promote public health programs for special populations.	P		P		R	R

P=Primary, R=Reinforcing

2.6d Analysis of the completed matrix included in Criterion 2.6.c. If changes have been made in the curricula as a result of observations and analysis, such changes should be described.

The KU-MPH program developed program-specific and concentration-specific competencies using a rigorous process, led by faculty with continuous faculty input. These competencies not only cover the core areas of public health, they also integrate cross-cutting areas such as communication and professionalism. Program competencies are covered in all of the core and required courses and are reinforced throughout the curriculum. The MPH internship and capstone allow us to tailor experiences to students if they are missing competencies in a particular area.

One change the Operations Committee continues to work on is the streamlining of the syllabus template to assist faculty with competency mapping. After reviewing syllabi on a yearly basis, we found that faculty report covering a large number of competencies outside of their core area and concentration. While repetition is helpful for student learning, we ask faculty to apply a critical eye to the learning activities in each course and only list competencies that pertain to specific graded assignments.

2.6e Description of the manner in which competencies are developed, used and made available to students.

In 2010-2011, the KU-MPH program revised the MPH program and concentration competencies. These new competencies, linked both to courses and learning activities, are listed above in Table 2.6.1a. An ad hoc education committee was formed in spring 2011 with faculty representing disciplinary expertise in each of the five areas of public

health. Two surveys were administered to all relevant faculty that reviewed and ranked Council of Linkages between Academia and Public Health Practice and Association of Schools of Public Health competencies. The education committee reviewed the results of these surveys and revised the MPH program competencies. Faculty who taught all core and required courses met and reviewed the competencies in order to provide feedback and discuss integration across campuses. These 24 new MPH program competencies were adopted for official use in fall 2012. All faculty are required to list the competencies in their syllabus and a graded learning activity must accompany each listed competency.

Following the creation of KU-MPH program competencies, the Operations Committee convened concentration-specific faculty during fall 2011 and spring 2012 semesters to finalize and map concentration competencies within all of the concentrations. These competencies are listed in Tables 2.6.1b, 2.6.1c and 2.6.1d. Concentration-specific faculty are required to meet as needed to ensure accuracy and consistency of the concentration-specific competencies.

Program and concentration competencies are distributed and explained to all students at new student orientation. Competencies are available in the Student Handbook available to students on BlackBoard®. Additionally, all syllabi are required to state the competencies specific to each class as well as the learning activity/deliverable during which the competency is attained (see syllabus template in Electronic Resource File).

2.6f Description of the manner in which the program periodically assesses changing practice and research needs and uses this information to establish the competencies for its educational programs.

The KU-MPH Operations Committee meets annually to discuss the changing needs of the program. We review course evaluations, exit interviews and other forms of student feedback in order to assess future program needs. We also solicit faculty feedback via our quarterly meetings in order to gauge ongoing teaching and training needs. We also engage our External Advisory Board to discuss issues related to concentration desirability, skill needs and future employment opportunities for students. Information from our students, faculty and external stakeholders is continually processed by the Operations Committee and changes are made when necessary.

Due to feedback from the Department of Biostatistics, one competency was deleted in 2013 and one competency was altered for accuracy. These two adjustments reflect the only two content changes to our competencies since their original creation in 2012.

2.6g Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program faculty created program and concentration-specific competencies through a rigorous process that closely reflect the needs of the state and region. The core competencies are addressed in all required courses and are integrated into a variety of learning activities. Concentration competencies are addressed throughout the concentration courses.

The KU-MPH program has developed a standard syllabus template for all faculty to use that is emailed out before each semester as a reminder to assign learning activities to each competency. Faculty are counseled individually in regard to the creation of their course syllabus and competencies are mapped every year.

KU-MPH students are familiar with the set of core competencies that they should master upon graduation.

Weaknesses:

We do have some issues with faculty using too many competencies or changing competencies without notifying instructors who teach the same course.

Future Plans:

The Operations Committee will meet with faculty each year to facilitate better coordination of competencies covered throughout the program. We will also develop a process to better define and capture which class primarily covers the competencies and which class reinforces the competencies.

2.7 Assessment Procedures. There shall be procedures for assessing and documenting the extent to which each student has demonstrated achievement of the competencies defined for his or her degree program and area of concentration.

2.7a Description of the procedures used for monitoring and evaluating student progress in achieving the expected competencies, including procedures for identifying competency attainment in practice and culminating experiences.

The KU-MPH Operations Committee researched several methods to assess student competency attainment. In fall 2012, the KU-MPH program piloted an e-Portfolio process to document competency attainment. After the initial pilot group, the KU-MPH program created a new e-Portfolio that was integrated within the BlackBoard® learning management system and required that all students starting in fall 2014 complete an e-Portfolio each semester in order to qualify for future enrollment.

The e-Portfolio is housed in the BlackBoard® learning management system and serves as a format for documenting individual student achievement of the MPH competencies. Each student chooses a template based off their concentration plan of study. Student artifacts such as papers, presentations, and homework that demonstrate achievement of each competency, along with a résumé and other reflection statements complete the e-Portfolio which students may then share with future employers.

Faculty are asked to have all assignments submitted and graded in BlackBoard® so that students can use the system to attach artifacts that have been graded within the system into their e-Portfolio each semester. Additionally, all course syllabi clearly indicate the competencies that are covered with each assignment so students can easily refer to them when updating their e-Portfolio each semester. Students may only post assignments that have earned a grade of A or B as an artifact for any given competency.

Students also indicate competencies and learning activities that will be completed in both their internship and capstone (see Internship Experience Guidelines and Capstone Plan in the Electronic Resource File). Because internship and capstone experiences are individualized, the competencies covered will differ by student.

2.7b Identification of outcomes that serve as measures by which the program will evaluate student achievement in each program, and presentation of data assessing the program's performance against those measures for each of the last three years. Outcome measures must include degree completion and job placement rates for all degrees included in the unit of accreditation (including bachelor's, master's and doctoral degrees) for each of the last three years. See CEPH Data Templates 2.7.1 and 2.7.2. If degree completion rates in the maximum time period allowed for degree completion and less than the thresholds defined in this criterion's interpretive language, an explanation must be provided. If job placement (including pursuit of additional education), within 12 months following award of the degree, includes fewer than 80% of graduates at any level who can be located, an explanation must be provided. See CEPH Outcomes Measures Template.

Table 2.7.1. Students in MPH Degree, By Cohorts Entering Between 2010-11 and 2016-17								
	Cohort of Students	10-11	11-12	12-13	13-14	14-15	15-16	16-17
2010	# Students entered	43						
2011	# Students withdrew, dropped, etc.	3						
	# Students graduated	1						
	Cumulative graduation rate	2%						
2011	# Students cont. at beginning of school year	39	37					
2012	# Students withdrew, dropped, etc.	0	1					
	# Students graduated	15	5					
	Cumulative graduation rate	37%	13%					
2012	# Students cont. at beginning of school year	24	31	32				
2013	# Students withdrew, dropped, etc.	1	3	3				
	# Students graduated	13	5	0				
	Cumulative graduation rate	67%	27%	0.0%				
2013	# Students cont. at beginning of school year	10	23	29	19			
2014	# Students withdrew, dropped, etc.	0	2	2	2			
	# Students graduated	3	11	7	3			
	Cumulative graduation rate	74%	57%	22%	16%			
2014	# Students cont. at beginning of school year	7	10	20	14	18		
2015	# Students withdrew, dropped, etc.	0	0	1	0	0		
	# Students graduated	2	5	11	4	1		
	Cumulative graduation rate	79%	70%	56%	37%	5.5%		
2015	# Students cont. at beginning of school year	5	5	8	10	17	37	
2016	# Students withdrew, dropped, etc.	0	0	0	0	0	3	
	# Students graduated	3	1	4	4	4	3	
	Cumulative graduation rate	86%	73%	69%	58%	28%	8%	
2016	# Students cont. at beginning of school year	2	4	4	6	13	31	23
2017	# Students withdrew, dropped, etc.	0	0	0	0	0	0	0
	# Students graduated	1	1	1	4	6	16	0
	Cumulative graduation rate	88%	76%	72%	79%	61%	51%	0.0%

2.7c An explanation of the methods used to collect job placement data and of graduates' response rates to these data collection efforts. The program must list the number of graduates from each degree program and the number of respondents to the graduate survey or other means of collection employment data.

Table 2.7.2 Destination of Graduates by Employment Type 2014 -02017	2013-2014	2014-2015	2015-2016
Employed	23 (72%)	18 (78%)	18 (78%)
Continuing education/training (not employed)	5 (16%)	3 (13%)	4 (17%)
Actively seeking employment	3 (9%)	2 (9%)	1 (5%)
Not seeking employment (not employed and not continuing education/training, by choice)	0 (0%)	0 (0%)	0 (0%)
Unknown	1 (3%)	0 (0%)	0 (0%)
Total	32	23	23

*Data for 2016 – 2017 will be collected in November 2017, one month after the site visit date.

A survey is sent in November to the previous year's graduates (see Electronic Resource File). On this survey, we ask for updated contact information, if they are employed, name of employer, job title and brief job description. If they are not employed, we also ask if they are actively seeking employment or if they are continuing their education. We plan to revise this survey in the future to include salary information based on the information requested by the Association of Schools and Programs of Public Health for their annual data collection.

2.7d In fields for which there is certification of professional competence and data are available from the certifying agency, data on the performance of the program's graduates on these national examinations for each of the last three years.

Table 2.7d Certified in Public Health Exam			
	2015	2016	2017
Completed exam	2	0	0
Passed exam	2	0	0
Total	100%	N/A	N/A

2.7e Data and analysis regarding the ability of the program's graduates to perform competencies in an employment setting, including information from periodic assessments of alumni, employers and other relevant stakeholders. Methods for such assessments may include key informant interviews, surveys, focus groups and documented discussions.

In 2015, the KU-MPH program conducted a survey of the public health stakeholders on the External Advisory Board. The survey was conducted to provide information about the need for public health professionals and how the KU-MPH program can improve its

curricula. A report was created to establish the public health workforce needs from incoming public health professionals. This survey also examined where students are being employed, common degrees among the current public health workforce, and highly desired concentrations.

Of the 30 External Advisory Board members, 22 completed the survey, with a response rate of 73%. These respondents represented local and state health departments, other public universities, private organizations and non-profit agencies. Our survey found that 90% of respondents had hired an employee with MPH degree; 52% were from the University of Kansas. For a full-time candidate with an MPH the salary ranged from \$30,000 to \$100,000, with a mean of \$57,300.

The table below outlines the desirability of all the KU-MPH concentration per responses from our External Advisory Board survey.

Table 2.7e EAB Survey results in 2015.				
MPH Concentration	Very Desirable	Desirable	Somewhat Desirable	Not Desirable
Epidemiology	54.5%	27.3%	18.2%	0.0%
Public Health Management	50.0%	18.2%	27.3%	4.5%
Social and Behavioral	45.5%	45.5%	4.5%	4.5%

Our overall findings indicated that the job outlook is positive for students with a Master of Public Health, with 87% of the organizations having at least one job opportunity. Salaries ranged from \$30,000 to \$100,000 for employees with a Master of Public Health, and social and behavioral health appears to be the most desirable concentration.

2.7f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program has established a system to continuously monitor student attainment of all the program and concentration competencies. The program objective that focuses on ensuring adequate graduation rates not only tracks graduation, but also allows for yearly reviews of attritioned students and allows for periodic interventions. Student employment at graduation is also tracked each year and we rotate surveys of our External Advisory Board and KU-MPH alumni to gather information about job opportunities and desirability of current KU-MPH curriculum.

Weaknesses:

We have had two graduates take the Certified in Public Health exam in the last three years. Additionally, we have not conducted an employer/public health stakeholder survey regarding graduate's abilities to complete specific competencies in the last three years.

Future Plans:

We want to start an annual process where we conduct key informant interviews with employed graduates to ask what skills/classes were most helpful and least helpful in their current workplace. We also plan to survey employers regarding competency skill level of MPH graduates and revise the employment survey to include salary information based on the information requested by the Association of Schools and Programs of Public Health for their annual data collection.

2.8 Bachelor's Degrees in Public Health.

The University of Kansas School of Medicine, Departments of Preventive Medicine and Public Health do not offer a bachelor's degree in public health.

2.9 Academic Degrees. If the program also offers curricula for graduate academic degrees, student s 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.

The University of Kansas School of Medicine, Departments of Preventive Medicine and Public Health, do not offer academic degrees in public health or any other public health discipline-based specializations.

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

The University of Kansas School of Medicine, Departments of Preventive Medicine and Public Health, do not offer any doctoral degrees in public health.

2.11 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.

2.11a Identification of joint degree programs offered by the program. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

The KU-MPH program offers one dual degree program (MD/MPH) and one joint degree program (PhD/MPH).

MD/MPH

The MD/MPH program is a dual degree program with the KU School of Medicine that requires students to complete all requirements for both the MD and MPH. Students must meet admission requirements for both degree programs. Typically, students apply to the KU-MPH program during their second year of medical school. Students then take one year off from medical school to complete the 42-credit hour MPH degree. This is done either between the second and third year of medical school, or between the third and fourth year of the medical school curriculum. MPH coursework begins in the summer for these students, rather than in the fall, so that all MPH requirements are completed by May, or July if necessary. The dual MD/MPH may be completed on either the Kansas City or Wichita campus over a five year time period.

Medical students are able to complete the MPH requirements in one year according to the following schedule: six credits of core courses and electives in summer; 18 credits of core courses, required courses, and concentration courses in fall; 18 credits of remaining core courses and concentration courses in spring, including the internship and capstone courses. Students can only complete the Public Health Management or Social and Behavioral Health concentrations due to the one-year timeframe for completion of the degree. Because this is a dual degree, no medical courses are shared.

PhD/MPH

The PhD/MPH program is a joint degree program offered in conjunction with the Department of Applied Behavioral Sciences on the University of Kansas campus in Lawrence. Students must apply to each program separately, and must meet the 72-credit hour requirements for the doctoral degree and the 42-credit hours for the MPH degree with a concentration in Social and Behavioral Health. Students in this joint degree program complete all of the MPH core and required courses as well as three credit hours of elective work, an MPH internship and capstone. Four courses are shared with the Applied Behavioral Sciences program. These courses have the same competencies outlined for MPH students who complete the Social and Behavioral Health concentration. The MPH Operations Committee coordinates with the director of the PhD program in Lawrence on a yearly basis to ensure that MPH competencies remain in this joint program.

2.11b A list and description of how each joint degree program differs from the standard program. The program must explain the rationale for any credit-sharing or substitution as well as the process for validating that the joint degree curriculum is equivalent.

The MD/MPH program does not differ from the standard MPH program. No credits are shared or substituted.

The PhD/MPH program requires students to take all of the MPH core courses, required courses, general elective, internship and capstone. Twelve credit hours of coursework are shared with the Department of Applied Behavioral Sciences. However, those courses have corresponding competencies to the MPH courses in the Social and Behavioral Health concentration (syllabi are available in the Electronic Resource File).

Listed below are the competencies covered in the Social and Behavioral Health concentration and the corresponding PhD courses that students in the PhD/MPH program take in lieu of MPH courses.

Table 2.11b PhD/MPH program competencies in Social and Behavioral Health.		
CONCENTRATION IN SOCIAL AND BEHAVIORAL HEALTH and JOINT PHD IN APPLIED BEHAVIORAL PSYCHOLOGY / MPH		ABSC Courses
SBHC01	Apply basic theories, concepts, and models from a range of social and behavioral disciplines to public health research and practice.	ABSC 710, ABSC 796 (will change to ABSC 746)
SBHC02	Describe the social and behavioral factors that affect the health of individuals and populations, including how these factors may account for health disparities.	ABSC 710, ABSC 861
SBHC03	Apply evidence-based research procedures for studying public health problems, planning, implementing, and evaluating public health programs.	ABSC 710, ABSC 735, ABSC 796 (will change to ABSC 746)
SBHC04	Identify the role of social, community, and cultural factors in both the onset and solution of public health problems across diverse and underserved populations.	ABSC 710, ABSC 861
SBHC05	Use community input and linkages to conduct in-depth analysis of public health problems, develop, and promote public health programs for special populations.	ABSC 710

2.11c Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

Students in the dual MD/MPH program complete all of the KU-MPH degree requirements and meet the credit hour requirements outlined for CEPH accreditation. Students in the joint PhD/MPH program complete all of the core and required classes along with a MPH internship and capstone. Twelve credit hours of coursework are shared with the Department of Applied Behavioral Sciences. However, those courses have corresponding competencies to the MPH courses in the Social and Behavioral Health concentration. The programs have been developed and reviewed for content between both programs and are approved by the Graduate Council and the Office of Graduate Studies at the University of Kansas Medical Center.

Weaknesses:

None.

Future Plans:

We do not have future plans regarding our joint degree programs.

2.12 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 degree 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 articulate 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 learning methods and to systematically use this information to stimulate program improvements. The program must have process in place through which it establishes that the student who registers in a distance education course or degree is the same student who participates in and completes the course or degree and receives the academic credit.

The University of Kansas School of Medicine, Departments of Preventive Medicine and Public Health, do not offer an executive MPH, nor do we offer an exclusively distance-based MPH degree.

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.

3.1a Description of the program's research activities, including policies, procedures and practices that support research and scholarly activities.

The Departments of Preventive Medicine and Public Health on both campuses are actively engaged in research in the five public health sciences: social and behavioral sciences, administration, biostatistics, epidemiology, and environmental health. Specific research areas of interest include tobacco control, cancer screening and prevention, obesity, health services, cancer surveillance, reproductive health, health promotion, environmental risk assessment, health disparities, community-based environmental research, evaluation research in governmental public health, maternal and child health, and access to care, among others. While dedicated to advancing knowledge in public health sciences, research also focuses on the unique public health needs of Kansas and the region. Hence, the research program reflects the mission statement of the KU-MPH program.

The University of Kansas Medical Center Research Institute (KUMC RI) provides policies and procedures to assist KU-MPH faculty in conducting research (<http://www.kumc.edu/kumcric/policies.html>). All proposals and applications for research or sponsored programs, including grant proposals, material transfer agreements, consulting agreements, or contract proposals submitted to an outside agency by faculty and staff must be processed through the KUMC RI for institutional approval prior to submission to funding agencies. KUMC RI also provides notices of funding opportunities to appropriate faculty, as well as periodic training in support of research, ranging from grantsmanship to research ethics.

Compliance Services at KUMC (<http://www.kumc.edu/compliance-services.html>) is a conglomerate of several offices that also support research, including the Office of Compliance which addresses conflict of interest, equal opportunity, and training programs to promote a culture of compliance and to foster adherence to applicable laws and institutional policies and procedures; the Human Research Protection Program which coordinates oversight via the Institutional Review Board, the Conflict of Interest Committee, the Institutional Biosafety Committee, and the HIPAA Compliance Office; the Environment, Health and Safety Office; and the Office of Animal Welfare.

Finally, the Office of Compliance and the Research Institute, in consultation with the University of Kansas Health System (KU Hospital) and others are in the process of updating KUMC Clinical Research Standard Operating Procedures (SOPs). These updated SOPs will further clarify applicable processes, federal and state requirements, and KUMC and KU Hospital policies and procedures to assist with compliance and

facilitate training. As SOPs are updated, they are placed on a SharePoint site for faculty review and comment.

Additional practices that support research conducted by KU-MPH faculty are in place at all levels of administration. For example, a scholarly atmosphere is encouraged through regular departmental and bi-campus meetings. The Office of Faculty Affairs and Development (FAD) within the University of Kansas School of Medicine (<http://www.kumc.edu/school-of-medicine/faculty-affairs-and-development.html>) provides a mentoring program for junior faculty. Several KU-MPH faculty are very involved with the KU Women in Medicine and Science (WIMS) organization (<http://www.kumc.edu/wims.html>). Dr. Christie Befort and Dr. Christine Daley have both served as president of the organization, and Dr. Kimber Richter will serve in the University of Kansas Joy McCann Professorship for Women in Medicine through June 30, 2019. Finally, research productivity is a formal part of the promotion and tenure process at the university, and therefore is a key component of each faculty member's annual performance evaluation with the department chair.

3.1b Description of current research activities undertaken in collaboration with local, state, national or international health agencies and community-based organizations. Formal research agreements with such agencies should be identified.

Faculty, students, and staff in the Departments of Preventive Medicine and Public Health work closely with members of the community on a wide variety of public health research activities which are driven by the needs of our state and region. In addition to formal research agreements which are specific to particular grants or projects, memoranda of understanding (MOU), which address potential research collaborations, are also in place with several agencies. These MOUs may be found in the Electronic Resource File.

Signed MOUs are in place with:

- Kansas Department of Health and Environment
- Kansas Public Health Association
- Johnson County Department of Health and Environment
- Sedgwick County Health Department
- Lawrence-Douglas County Health Department
- Wyandotte County/Unified Government of Kansas City Kansas Health Department
- Jackson County Health Department (Missouri)
- Kansas City Missouri Health Department

A full description of faculty research programs is included in the Electronic Resource File.

Additionally, several KU-MPH faculty hold leadership roles in research centers and institutes. A full description may be found in the Electronic Resource File.

3.1c A list of current research activities of all primary and secondary faculty identified in Criteria 4.1a and 4.1b, including amount and sources of funds, for each of the last three years. These data must be presented in table format and include at least the following: a) principal investigator and faculty member's role (if not PI), b) project name, c) period of funding, d) source of funding, e) amount of total award, f) amount of current year's award, g) whether research is community based and h) whether research provides for student involvement. Distinguish projects attributed to primary faculty from those attributed to other faculty by using bold text, color or shading. Only research funding should be reported here; extramural funding for service or training grants should be reported in Template 3.2.2 (funded service) and Template 3.3.1 (funded training/workforce development). See CEPH Data Template 3.1.1.

Table 3.1.c. Research Activity from July 1, 2014 to June 30, 2017									
Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Development of Worksite Wellness Web-Based Assessment Tool	Elizabeth Ablah Social and Behavioral Health	Kansas Department of Health and Environment	08/01/09 – 06/29/16	\$521,387	\$40,000	\$85,000	N/A	Y	N
WorkWell Kansas – Worksite Wellness Training	Elizabeth Ablah Social and Behavioral Health	Wichita Business Coalition on Health Care	01/01/12 – 12/31/14	\$110,000	\$ -0-	N/A	N/A	Y	Y
Health Impact Assessment of Kansas Corporate Agriculture	Elizabeth Ablah Social and Behavioral Health	Kansas Health Institute	01/03/14 – 06/30/15	\$11,000	\$11,000	N/A	N/A	Y	N
ASPPH/CDC Public Health Preparedness Project	Elizabeth Ablah Social and Behavioral Health	Association of Schools and Programs of Public Health	11/01/14 – 02/28/16	\$62,105	\$62,105	\$ -0-	N/A	N	N
WorkWell Kansas: Phase II	Elizabeth Ablah Social and Behavioral Health	Kansas Health Foundation	01/01/15 – 12/31/17	\$1,000,000	\$242,630	\$425,451	\$331,919	Y	Y
Kansas Health Information Network	Elizabeth Ablah Social and Behavioral Health	Medical Society of Sedgwick County [Centers for Disease and Prevention]	09/01/15 – 12/31/17	\$60,500	N/A	\$60,500	\$ -0-	Y	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Independence Awareness and Assessment	Elizabeth Ablah Social and Behavioral Health	United Methodist Health Ministry Fund	01/25/16 – 04/15/16	\$7,018	N/A	\$7,018	N/A	Y	N
WorkWell KS	Elizabeth Ablah Social and Behavioral Health	Kansas Department of Health and Environment	08/31/16 – 08/30/17	\$75,000	N/A	N/A	\$75,000	Y	Y
ASPPH Global Health Competency Assessment and Updating Project	Elizabeth Ablah Social and Behavioral Health	Association of Schools and Programs of Public Health	10/01/16 – 09/30/17	\$50,489	N/A	N/A	\$50,489	N	N
Worksite Wellness Assessment and Programming	Elizabeth Ablah Social and Behavioral Health	Kansas Department of Health and Environment	10/27/16 – 09/29/17	\$80,110	N/A	N/A	\$80,110	Y	Y
Institutional Clinical and Translational Science Award	Richard Barohn Neurology Won Choi Key Personnel Epidemiology Edward Ellerbeck Director – CTSA Education Epidemiology	NIH	06/01/11 – 02/28/17	\$20,100,764	\$3,950,963	\$ -0-	\$ -0-	N	N
Group Phone-based Weight Control among Rural Breast	Christie Befort Social and Behavioral Health	NIH	08/01/11 - 05/31/17	\$2,770,526	\$510,955	\$ -0-	\$ -0-	Y	Y

Cancer Survivors									
Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Rural Lifestyle Eating and Activity Program (Rural LEAP)	Michael Perri University of Florida Christie Befort Co-Investigator Social and Behavioral Health	NIH	11/01/13 - 04/30/18	\$59,481	\$14,351	\$10,787	\$15,405	Y	N
Midwestern Collaborative for Treating Obesity in Rural Primary Care	Christie Befort Social and Behavioral Health Edward Ellerbeck Epidemiology	PCORI	01/01/15 - 12/31/19	\$10,017,143	\$1,010,552	\$2,313,534	\$2,707,944	Y	Y
The Effects of Heavy Alcohol Use on Weight Gain in College Freshmen: Examining an Overlooked Calorie Source	Tera Fazzino Preventive Medicine & Public Health Christie Befort Primary Mentor Social and Behavioral Health	NIH	06/03/16 - 05/31/18	\$93,121	N/A	\$56,698	\$36,423	Y	N
Neuroimaging Studies of Reward, Impulsivity and Adherence to an Exercise Program	Cary Savage Center for Health Behavior Neuroscience Christie Befort Co-Investigator Social and Behavioral Health	NIH/NDDK	04/01/10 - 01/31/16	\$2,934,714	\$ -0-	\$ -0-	N/A	N	N

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Environmental and Health Needs After Ground Water Contamination in Wichita	Jack Brown Environmental Health John Neuberger Environmental Health	Wichita Medical Research and Education Foundation	01/01/15 – 12/31/15	\$15,000	\$15,000	\$ -0-	N/A	Y	N
Analysis of Kansas Water Well Policies and Proposal of New Water Well Policies	Jack Brown Environmental Health Elizabeth Ablah Social and Behavioral Health John Neuberger Environmental Health	Kansas Health Foundation	03/01/16 – 02/28/18	\$200,000	N/A	\$69,329	\$66,667	Y	Y
Web-Based Smoking Cessation Program for Tribal College Students	Won Choi Epidemiology Lisa Cox Social and Behavioral Health Babalola Faseru Epidemiology Niaman Nazir Epidemiology	NCI	04/01/13 - 03/31/18	\$2,703,850	\$565,964	\$568,026	\$556,175	Y	Y
Culturally Tailored Smoking Cessation for American Indians	Won Choi Epidemiology Niaman Nazir Epidemiology	NIH	09/01/09 - 01/31/15	\$2,899,954	\$ -0-	N/A	N/A	Y	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Smokeless Tobacco Cessation among American Indians Using in-Person Groups	Christine Daley Family Medicine Won Choi Co-Investigator Epidemiology Babalola Faseru Co-Investigator Epidemiology Niaman Nazir Co-Investigator Epidemiology	NIMHD	07/01/14 - 04/30/17	\$1,132,500	\$377,500	\$377,500	\$ -0-	Y	Y
Development of Tobacco Health Literacy Instrument	Christine Daley Family Medicine Won Choi Co-Investigator Epidemiology	NCI	04/01/15 - 03/31/17	\$388,259	\$211,778	\$176,481	\$ -0-	Y	Y
Development of a Telephone-Based Individual Smoking Cessation Program for American Indians	Christine Daley Family Medicine Won Choi Co-Investigator Epidemiology	NCI	05/20/16 - 04/30/18	\$361,268	N/A	\$197,055	\$164,213	Y	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Central Plains Center for American Indian Health Disparities	Christine Daley Family Medicine Won Choi Co-Investigator, Director - Education Core Epidemiology	NIMHD	05/16/10 - 01/31/15	\$8,313,097	\$ -0-	N/A	N/A	Y	Y
Continuing an American Indian Breast Cancer Disparities Training Program	Christine Daley Family Medicine Christie Befort Mentor Social and Behavioral Health Won Choi Mentor Epidemiology	Susan G. Komen for the Cure	08/13/15 - 08/12/18	\$405,000	N/A	\$135,000	\$135,000	Y	Y
Kansas Community Cancer Health Disparities Network	K. Allen Greiner, Jr Family Medicine Won Choi Co-Investigator, Director – Training Core Epidemiology Edward Ellerbeck Co-Investigator Epidemiology	NIH	09/17/10 - 08/31/17	\$4,610,513	\$914,528	\$322,152	\$ -0-	Y	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Promoting Walking in African Americans with Peripheral Arterial Disease	Tracie Collins Epidemiology Nicole Nollen Social and Behavioral Health	NIH	04/15/12 - 02/28/17	\$2,994,926	\$629,508	\$ -0-	\$ -0-	Y	Y
Promoting Walking in African Americans with Peripheral Arterial Disease – Parent Grant; Supplement titled, “Diet and Exercise Behaviors in African American Women at Risk for Peripheral Arterial Disease”	Tracie Collins Epidemiology Michelle Redmond Social and Behavioral Health	NIH	08/01/13 - 05/31/15	\$200,750	\$ -0-	N/A	N/A	Y	Y
Text Messaging to Promote Walking in Latinos with Peripheral Arterial Disease	Tracie Collins Epidemiology Ana Paula Cupertino Social and Behavioral Health	NIH	09/30/15 - 12/31/16	\$300,000	N/A	\$300,000	\$ -0-	Y	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Advancing Tobacco Use Treatment for African American Smokers	Lisa Cox Social and Behavioral Health Edward Ellerbeck Epidemiology Babalola Faseru Epidemiology Nicole Nollen Social and Behavioral Health	NIH	06/01/14 - 03/31/19	\$3,193,497	\$631,776	\$636,299	\$633,057	Y	Y
e-Decidete: Mobile Smoking Cessation for Latino Smokers	Ana Paula Cupertino Social and Behavioral Health Lisa Cox Social and Behavioral Health Won Choi Epidemiology Edward Ellerbeck Epidemiology	NIH	01/10/17 - 12/31/21	\$3,085,128	N/A	N/A	\$644,889	Y	N

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Cancer Center Support Grant Supplement: E-Decidete: Mobile Cessation Support for Latino Smokers in Mexico	Roy Jensen KU-Cancer Center Ana Paula Cupertino Co-Investigator Social and Behavioral Health Edward Ellerbeck Co-Investigator Epidemiology	NIH	07/01/15 - 06/30/17	\$292,307	N/A	\$179,698	\$112,609	Y	Y
S.C.O.R.E: Students for Community-Oriented Research and Education	Ana Paula Cupertino Social and Behavioral Health Megha Ramaswamy Social and Behavioral Health	NIH	09/03/15 - 08/31/20	\$1,218,341	N/A	\$231,007	\$257,123	Y	Y
Smoking Cessation versus Long-term Nicotine Replacement among High-risk Smokers	Edward Ellerbeck Epidemiology Nicole Nollen Social and Behavioral Health Kimber Richter Public Health Management	PCORI	04/01/14 - 06/29/17	\$2,134,843	\$698,550	\$698,255	\$48,972	Y	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Adaptation and Validation of a Nutrition Literacy Assessment Instrument	Heather Gibbs Dietetics & Nutrition Edward Ellerbeck Co-Investigator/Ment or Epidemiology	NIH	08/01/14 - 07/31/17	\$163,087	\$83,005	\$80,082	\$ -0-	N	N
Kick Butts: Mobile Engagement and Cessation Support for Latino Smoker	Edward Ellerbeck Epidemiology Ana Paula Cupertino Social and Behavioral Health Lisa Cox Social and Behavioral Health	Sub - Agile Health	08/01/15 - 07/31/16	\$89,722	N/A	\$89,722	\$ -0-	Y	Y
Building KS Capacity to Address Tobacco Dependence among People with Mental Illness	Babalola Faseru Epidemiology Kimber Richter Public Health Management	Kansas Health Foundation	05/01/16 - 04/30/19	\$264,618	N/A	\$95,784	\$83,891	Y	N
Stroke Risk & Breastfeeding History among Post-menopausal Women	Lisette Jacobson Public Health Management	Pilot Grant - Heartland Institute for Clinical and Translational Research	03/01/14 - 02/28/15	\$20,000	\$ -0-	N/A	N/A	Y	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Assessment of Obstetrical Population in Western Kansas	Lisette Jacobson Public Health Management	Wichita Medical Research and Education Foundation (WMREF)	12/09/14 – 12/09/16	\$3,015	\$3,015	\$ -0-	\$ -0-	Y	Y
Pioneer Baby – A focus group study leading to improved pregnancy and birth outcomes	Lisette Jacobson Public Health Management	Kearny County Health Care Foundation	07/01/15 – 09/30/16	\$20,000	N/A	\$20,000	\$ -0-	Y	Y
Pioneer Baby – Moving toward a health promotion program via focus groups	Lisette Jacobson Public Health Management	Kansas Department of Health and Environment	08/01/15 – 06/30/16	\$13,500	N/A	\$13,500	\$ -0-	Y	Y
Exploring Oral Health and Insurance Issues among Diverse, Medically Disadvantaged Children	Judy Johnston Social and Behavioral Health	NIH	06/03/11 – 10/31/14	\$398,500	\$ -0-	N/A	N/A	Y	Y
Development of the Healthy Congregations Initiative	Judy Johnston Social and Behavioral Health	United Methodist Health Ministry Fund	01/01/12 – 12/31/16	\$177,589	\$23,249	\$30,576	\$ -0-	Y	N

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Exploring Mechanisms for Improved Oral Health Outcomes among Older Adults	Judy Johnston Social and Behavioral Health	NIH / Frontiers Pilot	03/01/15 – 02/29/16	\$9,300	\$9,300	\$ -0-	N/A	Y	Y
Exploring innovative mechanisms for improved oral health-related outcomes among residents of assisted living communities	Judy Johnston Social and Behavioral Health	Frontiers Pilot and Collaborative Studies Funding Program and Wichita Center for Graduate Medical Education – Kansas Bioscience Authority	03/01/15 – 02/02/16	\$19,300	N/A	\$19,300	N/A	Y	Y
Community Health Improvement Research in Southwest Kansas	Judy Johnston Social and Behavioral Health	Kansas Department of Health and Environment	05/01/16 – 03/31/17	\$28,054	N/A	\$28,054	\$ -0-	Y	Y
Healthy Congregations Covenant Program	Judy Johnston Social and Behavioral Health	United Methodist Health Ministry Fund	01/01/17 - 12/31/17	\$30,576	N/A	N/A	\$30,576	Y	N

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Kansas Cancer Registry and Cancer Surveillance	Sue Min Lai Epidemiology	CDC/Kansas Department of Health and Education (KDHE)	07/01/99 - 06/29/17	\$13,648,784	\$804,436	\$831,402	\$821,522	Y	Y
Smoking Cessation and Brain Activation: How Practice Changes the Brain	Laura Martin Social and Behavioral Health Edward Ellerbeck Epidemiology Kimber Richter Public Health Management	ACS	07/01/16 - 06/30/20	\$759,000	N/A	N/A	\$189,750	N	N
Kansas Heart and Stroke Collaborative – Rural Clinically Integrated Network to Improve Heart Health & Stroke Survival for Rural Kansas	Robert Moser Executive Director Public Health Management	The Center for Medicare and Medicaid Services Innovation Center	08/01/14 – 07/31/17	\$12,523,441	\$4,530,000	\$3,800,000	\$4,370,000	Y	Y
Adapting the HIT System to Support PMTCT Retention and ART Adherence	Sarah Kessler Family Medicine Niaman Nazir Co-Investigator Epidemiology	NIH	08/01/15 – 05/31/18	\$635,617	N/A	\$236,585	\$199,079	N	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Evaluation of the HIT System to Improve Early Infant Diagnosis Outcomes in Kenya	Sarah Kessler Family Medicine Niaman Nazir Co-Investigator Epidemiology	NIH	07/15/13 - 04/30/18	\$3,387,729	\$494,308	\$1,083,086	\$848,259	N	Y
Understanding Disparities in Quitting in African American and White Smokers	Nicole Nollen Social and Behavioral Health Lisa Cox Social and Behavioral Health Taneisha Scheuermann Social and Behavioral Health	NIH	05/01/12 - 04/30/17	\$3,221,355	\$744,862	\$690,604	\$ -0-	Y	Y
Informing Tobacco-Treatment Guidelines for African American Non-Daily Smokers	Nicole Nollen Social and Behavioral Health Lisa Cox Social and Behavioral Health Edward Ellerbeck Epidemiology	PCORI	10/01/14 - 09/30/19	\$2,074,491	\$348,671	\$758,381	\$709,911	Y	N

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Electronic Cigarettes: Addressing Policy Needs of Communities and Public Health in Kansas	Nicole Nollen Social and Behavioral Health John Neuberger Environmental Health	Kansas Health Foundation	06/01/14 – 05/31/16	\$99,625	\$ -0-	\$ -0-	N/A	Y	N
Sexual Health Empowerment for Cervical Health Literacy and Cancer Prevention	Megha Ramaswamy Social and Behavioral Health	NIH	04/01/14 - 03/31/19	\$1,579,375	\$313,325	\$313,325	\$313,325	Y	Y
Correctional and Public Health Links to Bolster HPV Vaccine and Cancer Prevention	Megha Ramaswamy Social and Behavioral Health Catherine Satterwhite Epidemiology	NIH	08/08/16 - 07/31/18	\$376,689	N/A	N/A	\$171,654	Y	Y
Changing the Default for Tobacco Treatment	Kimber Richter Public Health Management Edward Ellerbeck Epidemiology Babalola Faseru Epidemiology Taneisha Scheuermann Social and Behavioral Health	NIH	02/01/16 - 01/31/21	\$3,694,518	N/A	\$782,173	\$750,747	N	N

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Assessing Tobacco Treatment in Kansas WIC Clinics	Taneisha Scheuermann Social and Behavioral Health	Internal Pilot	07/01/16 - 12/31/17	\$33,169	N/A	N/A	\$33,169	Y	Y
Injury Prevention Partnerships: The role of public health, primary care, and policy makers in reducing injury related infant mortality among vulnerable populations	Sharla Smith Public Health Management	University of Kentucky Research Foundation [Robert Wood Johnson Foundation]	11/10/14 - 10/09/15	\$24,977	\$24,977	\$ -0-	N/A	Y	N
Fluoride Varnish Initiative "Paint a Smile"	Sharla Smith Public Health Management	Arkansas Department of Health	12/15/14 - 09/14/16	\$15,095	\$7,095	\$8,000	N/A	Y	N
Effects of Budget Reductions on Foundational Capabilities and Basic Public Health Programs	Sharla Smith Public Health Management	Kansas Health Foundation, Public Health Systems Group	04/01/16 - 01/31/17	\$36,199	N/A	\$13,733	\$27,466	Y	Y

Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community-Based Y/N	Student Participation Y/N
Foundational Capabilities Fiscal Committee	Sharla Smith Public Health Management	Kansas Health Foundation, Public Health Systems Group	04/2016 – 01/2017	\$7,500	N/A	-\$0-	\$7,500	N	N
Public Health Systems Group – Kansas PBRN Study	Sharla Smith Public Health Management	Kansas Association of Local Health Departments	04/01/16 – 02/15/17	\$41,199	N/A	\$41,199	\$ -0-	N	N
Kansas Healthy Babies are Worth the Wait Program	Sharla Smith Public Health Management	March of Dimes	10/01/16 – 12/15/16	\$6,000	N/A	N/A	\$6,000	Y	N
Zero to One Continuation Project	Sharla Smith Public Health Management	KIDS Network	11/01/16 – 05/31/18	\$10,000	N/A	N/A	\$6,600	Y	N
Totals				\$115,814,615	\$17,273,403	\$15,785,296	\$14,485,444		

Bold text – non-primary faculty

3.1d Identification of measures by which the program may evaluate the success of its research activities, along with data regarding the program's performance against those measures for each of the last three years.

Table 3.1d Outcome Measure for Research Activities				
KU-MPH Goal: Conduct innovative, impactful, engaged, outcome-oriented research that will strengthen public health science.				
Outcome Measure	Target	Academic Year 2014-2015	Academic Year 2015-2016	Academic Year 2016-2017
Author scholarly publications and disseminate findings	The number of scholarly authorships (peer-review journal articles or book chapters) by the faculty as a whole will total at least 40 each year.	Met – 63	Met – 43	Met = 41
Conduct interdisciplinary research to reduce health disparities	At least 50% of the faculty will produce high quality research in vulnerable populations by acquiring funding from external sources.	Met – as per faculty CVs and Data Template 3.1.1	Met – as per faculty CVs and Data Template 3.1.1	Met – as per faculty CVs and Data Template 3.1.1
Provide opportunities for students to become involved in research	At least five students from each campus will participate in research each year.	Met	N/A*	N/A*
	MPH students will have an opportunity to participate in research each year including but not limited to participation in the Student Research Forum, working as a graduate research assistant, or presenting at state or national level conferences.	NA*	Met See Table 3.1.1e See Table 3.1.2e See Table 3.1.3e	Met See Table 3.1.1e See Table 3.1.2e See Table 3.1.3e

Outcome Measure	Target	Academic Year 2014-2015	Academic Year 2015-2016	Academic Year 2016-2017
	At least 50% of MPH students will participate in research each year including, but not limited to, participation in the Student Research Forum, the Annual Research Forum, working as a graduate research assistant, or presenting at state or national level conferences.	N/A*	N/A*	Met = 67% See Table 3.1.1e See Table 3.1.2e See Table 3.1.3e
	Award at least five travel scholarships for students to present at local and national public health conferences.	N/A*	N/A*	Not Met = only 2 awarded
Conduct public health practice research	At least three faculty persons from each campus will conduct public health practice research	Met – as per faculty CVs and Data Template 3.1.1	N/A*	N/A*

* These targets did not exist that year and were added for later years, or were deleted and no longer tracked.

3.1e Description of student involvement in research.

KU-MPH students have extensive exposure to research activities. The success of KU-MPH faculty in obtaining grant funding has allowed many of them to offer graduate research assistant (GRA) positions to students. Student involvement in research through GRA positions, capstone projects, or other opportunities has resulted in several national-level scientific publications and presentations.

See the Electronic Resource File for a complete list of KU-MPH Graduate Research Assistants.

See the Electronic Resource File for a complete list of KU-MPH Student Research Presentations.

See the Electronic Resource File for a complete list of KU-MPH Student Research Publications.

3.1f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

Faculty in the KU-MPH program are highly successful in their research efforts, as evidenced by the number of grants they are awarded, journal publications, and scientific presentations. The success of the faculty translates into substantial opportunities for students to be involved in research and to gain research experience by giving scientific presentations and/or writing publications.

Weaknesses:

The KU-MPH program would like to create a better system for collecting data on student participation in research. Information is currently collected in a retrospective manner. Ideally, there would be some sort of electronic method for students and/or faculty to report achievements to the program as they occur.

Future Plans:

The KU-MPH program will explore options for better collecting information on student participation in research activities. The e-Portfolio may provide a mechanism for this. Additionally, the KU-MPH program will find more avenues to promote travel scholarship opportunities to students to encourage even greater participation in state and national scientific conferences.

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.

3.2a Description of the program's service activities, including policies, procedures and practices that support service. If the program has formal contracts or agreements with external agencies, these should be noted.

KU-MPH faculty are committed to excellence in service. To meet the KU-MPH mission, "service" reaches far beyond the KU School of Medicine campuses in Kansas City or Wichita and extends to collaborative work with public health partners at the local, state, and national levels. The program consistently develops service-related objectives for workforce development and continuing education, assisting organizations devoted to public health, providing technical assistance to public health practitioners, and service for students. Additionally, faculty who have at least a 0.5 FTE commitment to the KU School of Medicine complete an Annual Faculty Assessment (AFA). This process includes a self-assessment and an assessment by the department chair. Assessments include performance review and outlining future goals and objectives in the areas of: 1) teaching, 2) research and scholarship, 3) and clinical and professional/academic service. These three areas are the same areas of assessment for the KU School of Medicine promotion and tenure process.

Additionally, community partners are encouraged to participate in the work of the program via participation on the External Advisory Board (EAB), guest lecturing for courses, and serving as site mentors during the MPH internship and capstone. Historically, the EAB and state-wide stakeholders were instrumental in the development of the program's concentrations. More recently, they have provided feedback to the program via face-to-face meetings and a survey in 2015. Finally, MPH internship and capstone mentors provide input to the program via student evaluations and face-to-face meetings with the campus site directors.

Formal contracts or agreements are in place for the following:

- Association of Schools and Programs of Public Health (ASPPH) - Consultant
- Blue Cross and Blue Shield of Kansas – Conduct community-based workshops
- Kansas Department of Health and Environment (KDHE) – Medical Epidemiology Consultant
- Kansas Department of Health and Environment (KDHE) – Regional Community Health Assessment
- Tobacco Treatment Specialist Training
- UKanQuit

A full description of the KU-MPH faculty service activities, including those listed above, may be found in the Electronic Resource File.

3.2b Description of the emphasis given to community and professional service activities in the promotion and tenure process.

The University of Kansas School of Medicine Guidelines for Academic Promotion and the Award of Tenure describes teaching, scholarship and service providing examples of the activities that could be included in an application (see Electronic Resource File). Two broad areas of service are defined: Clinical/Professional Service – patient care and/or activities dependent on exercise of the faculty member’s professional qualifications and expertise; and Academic Service – contributions to the academic community such as service on committees, task forces, or work groups. Examples for Early Career Level, Mid-Career Level, and Established Career Level are provided in the guidelines. As stated on page 13, “Applicants must provide both qualitative and quantitative evidence that the requirements for the requested promotion have been met or exceeded.”

Expectations for promotion on the tenure track (page 20):

- To Associate Professor – proficiency and contributions must be demonstrated in all three academic domains (teaching, scholarship and service) with documentation of attainment of at least Mid-Career Level in both teaching and scholarship, and Early Career Level in service.
- To Professor – requires demonstration of sustained contributions and achievements in all three domains with documentation of Established Career Level in the two domains most appropriate to the role of the individual and at least Mid-Career Level in the remaining domain. National or international recognition of expertise is required.

3.2c A list of the program’s current service activities, including identification of the community, organization agency or body for which the service was provided and the nature of the activity over the last three years. See Data Templates 3.2.1 (unfunded) and 3.2.2 (funded).

Table 3.2.1. Faculty Service from July 1, 2014 to June 30, 2017				
Faculty member	Role	Organization	Activity or Project	Year(s)
Ablah, Elizabeth	Member	National Institutes of Health	Advisory Committee: Ethical Standards to Improve Local Response Capacity to Infectious Disease Events	2013-2014
	Leader	Environmental Leadership Council	Wichita Initiative to Renew the Environment	2008-present
	Member	Kansas Health Foundation	Healthy Communities Advisory Committee – Promoting Health Community Design and Access to Health Foods Initiative	2011-present
	Member	Health Care Foundation of Greater Kansas City	Healthy Lifestyles Leadership Academy	2014, 2016
	Member	State of Kansas	Governor's Council on Fitness	2014-present
	Founding Partner	Kansas State of Wellness Symposium		2015-present
	Chair	South Central Kansas Prosperity	Healthy Communities Work Team	2013-2015
	Member	Wichita State University	Department of Public Health Sciences Advisory Council	2013-present
	Member	Sedgwick County	Mobilizing for Action through Planning and Partnership (MAPP) Steering Committee	2015
	Member	Wichita Sedgwick County Oral Health Coalition		2013-2015
	Co-Chair	Physical Activity Policy Research Network Plus	Physical Activity in the Worksite Group	2015-present
	Associate Editor	Journal of Disaster Medicine and Public Health Preparedness		2008-present
	KU-MPH Appointee	Association of Schools and Programs in Public Health	ASPPH Behavior and Social Sciences Council	2014-present

Faculty member	Role	Organization	Activity or Project	Year(s)
Befort, Christie	Co-Director	Cancer Prevention Program, University of Kansas Cancer Center	Cancer Survivorship Center	2008-present
	Co-Chair	Society of Behavioral Medicine	Program Track for Environmental and Contextual Factors in Health and Behavior Change	2013-2014
	Grant Reviewer	National Institutes of Health Study Section	F31/F32 Fellowships: Risk, Prevention, and Health Behavior	2015
	Grant Reviewer – Standing Member	National Institutes of Health Study Section	Psychosocial Risk and Disease Prevention	2016-2020
	Grant Reviewer	American Cancer Society	KU Cancer Center Internal Pilot Grants	2016
	President-Elect/President	KUMC Women in Science and Medicine (WIMS) – affiliate of American Association of Medical College's GWIMS and the Society for Executive Leadership in Academic Medicine	Oversee WIMS faculty organization	2014-2016
	Member	KUMC APA-Accredited Clinical Psychology Internship Program	Advisory Consortium Group	2015
Brown, Jack	Board of Directors	Kansas Public Health Association – affiliate of the American Public Health Association	Environmental Health Section Chair	2014-present
	Staff Member / Project Manager	Environmental Leadership Council	Wichita Initiative to Renew the Environment	2008-present
	Member	Oxy Chemical Facility (Sedgwick County)	Oxy-Chem Community Involvement Group	1989-present
Choi, Won	Study Section Member	National Institutes of Health Study Section	Center for Scientific Review, Health Disparities and Equity Promotion (HDEP)	2014

Faculty member	Role	Organization	Activity or Project	Year(s)
	Grant Reviewer	National Institutes of Health Study Section	Comprehensive Partnerships to Advance Health Equity (CPACHE) (U54), ZCA1 SRLB-B(01) S	2014
	Grant Reviewer	National Institutes of Health Study Section	National Cancer Institute, Cancer Management and Health Behavior, ZCA1 TCRB-B (J1) S	2014
	Grant Reviewer	National Institutes of Health Study Section	Academic Research Enhancement: Healthcare Delivery and Methodologies, ZRG1 HDM-W (81) A	2014-2015
	Grant Reviewer	National Institutes of Health Study Section	National Cancer Institute, Small Grants Program for Cancer Epidemiology, ZCA1 SRB-H (M1) S	2015
	Grant Reviewer	National Institutes of Health Study Section	National Cancer Institutes, Special Emphasis Panel, ZCA1 SRB-2 01 S, Omnibus SEP-4	2015
	Grant Reviewer	National Institutes of Health Study Section	National Institute on Minority Health and Health Disparities, Special Emphasis Panel, ZMD1 MLS (10) 1	2015
	Grant Reviewer	National Institutes of Health Study Section	National Cancer Institute, Special Emphasis Panel, ZCA1 SRB-2 (J1), Omnibus SEP-4	2015
	Full Member	KUMC	Kansas Masonic Cancer Research Institute	2005-present
	Faculty Member	KUMC	Center for Biostatistics and Advanced Informatics	2005-present
	Faculty Member	KUMC	Master of Health Informatics Advisory Committee	2010-present
Collins, Tracie	Fellow	Hedwig van Ameringen Executive Leadership in Academic Medicine Program for Women		2014-2015
	Member	Midwest Regional Society of General Internal Medicine	President-elect President Immediate Past-president (2011-2014)	2009-present
	Member	Association of Chiefs and Leaders in General Internal Medicine	President-elect President Immediate Past-president	2013-2016

Faculty member	Role	Organization	Activity or Project	Year(s)
	Reviewer	National Institutes of Health	Development and Translation of Medical Technologies that Reduce Health Disparities	2014
	Reviewer	National Institutes of Health	Mentored Career Development Award to Promote Faculty Diversity/Re-entry in Biomedical Research, Special Emphasis Panel	2014
	Convener	Kansas Health Foundation	Statewide Symposium: "Achieving Health Equity in Kansas - Where Do We Go From Here?"	2016-2017
	Member	University of Kansas	Chancellor Search Committee	2017
Ellerbe, Edward	Medical Director	University of Kansas Hospital	UKanQuit Tobacco Treatment Service	present
	Committee Member	Tobacco Free Kansas Coalition	Smoking Cessation Sub-committee	2009-2014
	Board of Directors	Association for Prevention Research and Training	Treasurer (2012-2014)	2010-2016
	Board of Directors	American Journal of Public Health	President (2014-2015)	2012-2015
	Deputy Editor	Journal of General Internal Medicine		2008-2016
	Grant Reviewer	National Institutes of Health Study Section	Dissemination and Implementation Research in Health	2014-present
	Program Director	University of Kansas Cancer Center	Cancer Control and Population Health	2007-present
	Board of Directors	KUMC	JayDoc Free Clinic	2012-present
	Member	Building Interdisciplinary Research Careers in Women's Health (BIRCWH)	Internal Advisory Committee	2005-2015
	Board of Directors	KU Research Institute	Research Committee (2012-2013)	2012-2015

Faculty member	Role	Organization	Activity or Project	Year(s)
Faseru, Babalola	Board of Directors	Association for Medical Education and Research in Substance Abuse	Treasurer	2013-2015
	Module Developer	Kansas Evidence Based Public Health	On-line Epidemiology Module	2014-present
	Editorial Board Member	Substance Abuse Journal	Associate Editor	2013-present
	Grant Reviewer	National Cancer Institute	Geographical Management of Cancer Health Disparities Program (GMaP) Early Career CHD Research Scholarship Application Review Committee	2014-present
	Scientific Advisor	University College Hospital and College of Medicine, University of Ibadan, Nigeria	Tobacco Control Research Group	2009-present
	Scientific Advisor	College of Medicine, University of Lagos, Nigeria	Tobacco Control Research Group	2014-present
	Member	Society for Research on Nicotine and Tobacco	Program Committee Member, 21 st Society for Research on Nicotine and Tobacco Annual Meeting	2015
	Member	Kansas Department of Health and Environment	Preventive health and Health Services Block Grant (PHHSBG) Advisory Committee	2014-present
	Member	University of Kansas Cancer Center	Protocol Review and Monitoring Committee	2011-2014
	Judge	KUMC Area Health Education Center	Night at the Lab (High School Students)	2015
	Member	KUMC School of Medicine	Faculty Council	2015-present
	KU-MPH Appointee	Association of Schools and Programs in Public Health	ASPPH Biostatistics and Epidemiology Council	2014-present

Faculty member	Role	Organization	Activity or Project	Year(s)
Honderick, Tanya	Board of Directors	Kansas Public Health Association – affiliate of the American Public Health Association	President (2014), Immediate Past-President (2015), Affiliate Representative to APHA Governing Council (2016)	2010-2016
	Member	Kansas Health Foundation Public Health Systems Group and Public Health Practice Program	Academic Health Department Subcommittee; Legal Subcommittee	2012-present
	Member	Kansas Public Health Workforce Coordinating Council	Chair (2015); Kansas Department of Health and Environment State and Local Public Health Workforce Assessment (2014-2015)	2010-present
	Member	Johnson County Department of Health and Environment	Community Health Assessment / Community Health Improvement Planning Committee	2010-present
	Member	Wyandotte County – Unified Government	Community Health Assessment / Community Health Improvement Steering Committee	2016-present
	Site Visitor	Public Health Accreditation Board	Local health department site visit (2014), Local health department site visit – Chair (2015-2016)	2014-present
	KU-MPH Appointee	Association of Schools and Programs in Public Health	ASPPH Public Health Practice Coordinators Council (Practice Council)	2014-present
Jacobson, Lisette	Chair-elect	Wichita Area Breastfeeding Coalition		2015-present
	Board of Directors	Kansas Breastfeeding Coalition, Inc.	Treasurer	2014-present
	Member	National Partnership for Action to End Health Disparities	Region VII Heartland Health Equity Council	2015-present

Faculty member	Role	Organization	Activity or Project	Year(s)
Jacobson, Lisette	KU-MPH Appointee	Association of Schools and Programs in Public Health	ASPPH Health Policy and Management Council	2014-present
Johnston, Judy	Member	Kansas Comprehensive Cancer Partnership	Steering Committee	2003-present
	Chairperson	Wichita Sedgwick County Oral Health Coalition		2015-present
	Member	Chronic Disease Alliance of Kansas	Health Systems/Quality of Care Committee	2015-present
	Member	Sedgwick County	Mobilizing for Action through Planning and Partnerships (MAPP) Steering Committee	2015
	Member	Sedgwick County	Community Health Improvement Plan Design Team Member	2016-present
Lai, Sue Min	Executive Committee	World Federation of Neurology	Research Group in Neuroepidemiology	1998-present
	Workgroup	Centers Disease Control National Program of Cancer Registries	Scientific Workgroup for Publication of the United States Cancer Statistics	2001-present
	Review Panel	Centers for Disease Control National Program of Cancer Registries	Central Cancer Registry Council	2011-present
	Review Panel	Centers for Disease Control	Surveillance and Research of Muscular Dystrophies and Neuromuscular Disorders Special Emphasis Panel: DD1 EEO 03	2014
	Review Panel	Centers for Disease Control	National Center for Chronic Disease Prevention and Health Promotion Special Emphasis Panel: DP15-010 Interstitial Cystitis Epidemiologic Study, Translation, and Education	2015

Faculty member	Role	Organization	Activity or Project	Year(s)
Lai, Sue Min	Advisor	Kansas Comprehensive Cancer Prevention and Control	Research Committee Member	2003-present
	Member	Oklahoma City Area Inter-Tribal Health Board	Technical Advisory Committee	2010-present
	Member	North American Association of Central Cancer Registry (NAACCR) Physician Reporting	eMaRC Collaborative Group; Curriculum Development Workgroup	2015-present
	Member	Meaningful Use	NextGen Collaborative Group, Modernizing Medicine Collaborative Group	2015-present
	Member	American Heart Association	Stroke Council; Epidemiology Council	1996-present
	Chair	Kansas Cancer Data Release Advisory Board		1997-present
	Member	Kansas and Heartland Region Geographical Information System	Steering Committee	2003-present
	Member	Kansas Cancer Partnership	Treatment/Palliative Care, Cancer Action Team; Kansas Survivor Care Quality Initiative (KSCQI)	2010-present
	KU-MPH Appointee	Association of Schools and Programs in Public Health	ASPPH Aging in Public Health Council	2014-present
Moser, Robert	Chair	Chronic Disease Alliance of Kansas		2015-2017
	Board of Directors	Kansas Public Health Association	President-elect, 2016 President, 2017	2016-present

Faculty member	Role	Organization	Activity or Project	Year(s)
Moser, Robert	Board of Directors	Association of State and Territorial Health Officers	District 7 Representative (2013-2015); Integrating Public Health and Primary Care (2012-present); NQF Health Workforce Committee (2013-2015); Workforce Development Expert Panel – Framing the Future, the Second 100 Years of Education for Public Health (2013-present); Alumni Association (2013-present)	2012-present
	Board	Kansas Patients and Providers Engaged in Prevention Research (KPPEPR)		2015-present
	Board	Kansas Healthcare Collaborative	Secretary/Treasurer (2016)	2009-present
	Board	Kansas Academy of Family Physicians	Foundation Board of Trustees (2015-present)	1988-present
	Board of Trustees	Kansas Medical Society	Vice Chair Membership Services	2016
	Member	Kansas Health Foundation Public Health Systems Group and Public Health Practice Program	Legal Subcommittee	2015-present
Neuberger, John	Co-Chair	American Public Health Association	Epidemiology Section Education Committee	2011-2014
	Member	American Council on Science and Health	Board of Scientific and Policy Advisors	1986-present
	Member	Annual Conference of the Council of State and Territorial Epidemiologists	Environmental Health Section Planning Committee	2015
	Member	American Public Health Association	Science Board	2015-2018
	Member	Mid-America Regional Council	Air Quality Forum, Active Transportation Policy Committee	2014-2015
	Member	Overland Park, KS	Environmental Advisory Council	2007-2016

Faculty member	Role	Organization	Activity or Project	Year(s)
Neuberger, John	Member	Kansas Department of Health and Environment	Fluoridation Advisory Council	2013-2014
	Board of Directors	Kansas Public Health Association – affiliate of the American Public Health Association	Oral Health Section Chair	2014
	Board of Directors	Tobacco Free Kansas Coalition		2011-present
	KU-MPH Appointee	Association of Schools and Programs in Public Health	ASPPH Environmental and Occupational Health Council	2014-present
Nollen, Nicole	Charter Member	KUMC & KU-Lawrence	American Institute of Architects Design & Health Research Consortium	2015
	Grant Reviewer	KUMC	Frontiers Pilot Program	2014
	Co-chair	Healthy Communities Wyandotte	Tobacco Free Action Team	2015
Ramaswamy, Megha	Grant Reviewer	KUMC/American Cancer Society	Institutional Research Grant Review	2010-present
	Grant Reviewer	KUMC	Frontiers Clinical and Lied Pilot Program	2014
	Member	Rose Brooks Center	Medical Advisory Board	2014-present
	Member	KUMC Women in Science and Medicine (WIMS) – affiliate of American Association of Medical College's GWIMS and the Society for Executive Leadership in Academic Medicine	Mentoring Committee (2013-2015), Recognition Committee (2015-present)	2013-present

Faculty member	Role	Organization	Activity or Project	Year(s)
Richter, Kimber	Fellow	Kansas Health Foundation	Leadership Fellows Round VIII: Tobacco and Mental Illness	2013-2015
	Founding Member	Association for the Treatment of Tobacco Use Disorders (ATTUD)	Secretary 2015-present	2003-present
	Review Panel	Vermont Tobacco Center of Regulatory Science		2015-present
Satterwhite, Catherine	Member	Johnson County Department of Health	Community Health Assessment Process	2012-2014
	Founding Member	Kansas City Data Collective		2012-2015
	Steering Committee	Kansas Department of Health and Environment	Healthy Kansans 2020 (Work Group and Implementation Plan)	2014-2015
	Member	Association of Schools and Programs in Public Health	Practice Section	2014-2015
Scheuermann, Taneisha	Poster Judge	Kansas Public Health Association	Annual Conference	2015
	Scholarship Application Reviewer	Society for Research on Nicotine and Tobacco	2016 Increasing Diversity in Nicotine and Tobacco Research Travel Scholarship	2015
	Team Member	Kansas Infant Mortality Collaborative Improvement and Innovation Network	Smoking Cessation Workgroup	2015-present
	Member	Wyandotte County Health Department	Tobacco Free Wyandotte Action Team	2015-present
Smith, Sharla	Committee Member	Kansas Maternal and Child Health Council		2015-present
	Member	Kansas Rural Obstetrics Access Taskforce		2015-present
	Member	KHF - Kansas Public Health Practice Program	Foundational Public Health Services Financial Assessment Committee; Practice Based Research Network	2015-present

Table 3.2.2. Funded Service Activity from July 1, 2014 to June 30, 2017

Project Name	Principal Investigator ¹ & Department (for schools) or Concentration (for programs)	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community -Based Y/N	Student Particip ation Y/N
Conduct Food Council Focus Groups	Elizabeth Ablah Social and Behavioral Health	Sedgwick County [Environmental Protection Agency]	09/16/14 – 03/03/15	\$7,143	\$7,143	N/A	N/A	N	N
Consultant - Kansas Association for the Medically Underserved	Christie Befort Social and Behavioral Health Kimber Richter Public Health Management Babalola Faseru Epidemiology	Kansas Health Foundation	07/01/13 – 06/30/15	\$90,471	\$ -0-	N/A	N/A	N	N
Kansas Evidence-Based Public Health Course	Edward Ellerbeck Epidemiology Babalola Faseru Epidemiology Kimber Richter Public Health Management	Kansas Association of Local Health Department (KALHD)	10/01/14 – 12/31/16	\$30,000	\$10,000	\$10,000	\$10,000	N	N

Project Name	Principal Investigator ² & Department (for schools) or Concentration (for programs)	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY 2015	Amount FY 2016	Amount FY 2017	Community -Based Y/N	Student Particip ation Y/N
Kansas Evidence-Based Public Health Course	Judy Johnston Social and Behavioral Health	KS Association of Local Health Department [Kansas Health Foundation]	10/01/14 – 12/31/16	\$25,952	\$20,952	\$5,000	N/A	N	N
Medical Epidemiology Consultant	Babalola Faseru Epidemiology	Kansas Department of Health and Environment	04/01/13 – 07/31/17	Annual Contract	\$26,032	\$26,032	\$26,032	N	N
Technical assistance for regional Bureau of Health Promotion staff	Judy Johnston Social and Behavioral Health	Kansas Department and Health and Environment	03/01/15 – 06/30/15	\$15,333	\$15,333	N/A	N/A	Y	N
Regional Early Detection Works – Research and technical assistance	Judy Johnston Social and Behavioral Health	Kansas Department of Health and Environment [Centers for Disease Control and Prevention]	03/01/15 – 08/14/17	\$67,711	\$8,471	\$44,734	\$14,506	Y	N
Healthy Kansans 2020 Mid-course review	Judy Johnston Social and Behavioral Health	Kansas Department of Health and Environment	06/01/15 – 12/31/15	\$35,288	\$35,288	-	N/A	N	N
Medical Director – KS Health & Environmental Laboratories	Robert Moser Public Health Management	KDHE / Kansas Health and Environmental Laboratories	12/01/14 – 11/30/20	\$12,000	\$12,000	\$12,000		N	N
Director – UkanQuit	Kimber Richter Public Health Management	University of Kansas Hospital	09/01/06 – 08/31/17	\$996,180	\$97,804	\$96,808	\$114,682	N	N

3.2d Identification of the measure by which the program may evaluate the success of its service efforts, along with data regarding the program's performance against those measures for each of the last three years.

Table 3.2d Outcome Measures for Service Effort				
KU-MPH Goal: Lead and support service and practice activities to meet public health needs.				
Outcome Measure	Target	Academic Year 2014-2015	Academic Year 2015-2016	Academic Year 2016-2017
Assist organizations devoted to the public's health	At least two faculty or staff will assume leadership roles in organizations devoted to the public's health each year.	Met – as per faculty CVs See Table 3.2.1 and Table 3.2.2	Met – as per faculty CVs See Table 3.2.1 and Table 3.2.2	Met – as per faculty CVs See Table 3.2.1 and Table 3.2.2
	At least one faculty or staff will support public health accreditation activities such as completing Public Health Accreditation Board (PHAB) Site Visitor Training, conducting a site visit through PHAB, or providing technical assistance to local health departments or KDHE in preparation for accreditation.	Met See Table 3.2.1	Met See Table 3.2.1	Met See Table 3.2.1
Provide technical assistance to public health practitioners	At least two public health programs in our region will receive technical assistance from our faculty each year.	Met – as per faculty CVs See Table 3.2.1 and Table 3.2.2	N/A*	N/A*
	At least six public health programs in our region will receive technical assistance from our faculty each year.	N/A*	Met – as per faculty CVs See Table 3.2.1 and Table 3.2.2	Met – as per faculty CVs See Table 3.2.1 and Table 3.2.2

Outcome Measure	Target	Academic Year 2014-2015	Academic Year 2015-2016	Academic Year 2016-2017
	At least two faculty or staff will assist in development and implementation of a statewide public health workforce assessment.	Met – see criterion 3.3a	N/A*	N/A*
Students will participate in service activities to enhance the public's health.	At least one service activity involving a group of students will occur on each campus each year.	Met – see criterion 3.2e	Met – see criterion 3.2e	N/A*
	The MPH students on each campus will complete at least one service activity each semester, totaling four acts of service to the state.	N/A*	N/A*	Met = 5* Kansas City = 3 Wichita = 2

* These targets did not exist that year and were added for later years, or were deleted and no longer tracked.

3.2e Description of student involvement in service, outside of those activities associated with the required practice experience and previously described in Criterion 2.4.

The MPH Student Organization (MPHSO) is comprised of students enrolled in the KU-MPH program. The MPHSO strives to broaden perspectives of MPH students through community service, involvement with the public health community, and the development of a dynamic network of current students, alumni and public health leaders.

Some of the MPHSO's recent service activities include:

- National Wear Red Day – February 6, 2015 – MPHSO-Kansas City celebrated the day by wearing red and providing heart healthy snacks on the KUMC campus.
- Fredrickson's Farm – October 17, 2015 – MPHSO-Wichita volunteered at the farm.
- Johnson County Department of Health and Environment Community Health Assessment – October and November 2015 – MPHSO-Kansas City conducted door-to-door surveys with staff from JCDHE that contributed to their most recent CHA/CHIP documents.
- Girls on the Run 5K – November 15, 2015 – MPHSO-Wichita volunteered to support young girls in the community to achieve goals through development of key skills that prevent future at-risk behaviors.

- Quiz for a Cause – February 16, 2016 – MPHSO-Kansas City held a trivia night to raise funds for residents affected by the Flint, Michigan water crisis.
- Regional Science Olympiad – February 27, 2016 – MPHSO-Kansas City developed “Disease Detective” test (for high school and middle school students), volunteered as proctors and graders.
- Be The Match Bone Marrow Donor Registration Drive – April 21, 2016 held on the KUMC campus.
- Newtown Documentary Screening – hosted on December 14, 2016 by the MPHSO-Kansas City.
- Standing Rock Item Drive – fall 2016 – MPHSO-Kansas City collected clothing, food, and camping supplies.
- Step Up for KIDS – April 9, 2016 – MPHSO-Wichita volunteered for this fundraiser opportunity at Old Cowtown Museum.
- 15th Annual Arkansas River Clean-up – April 23, 2016 – MPHSO-Wichita volunteered
- Regional Science Olympiad – February 25, 2017 – MPHSO-Kansas City developed “Disease Detective” test (for high school and middle school students), volunteered as proctors and graders. This year’s theme was foodborne illness.
- Be The Match Bone Marrow Donor Registration Drive – March 15-16, 2017 held on the KUMC campus.

In 2016, KU-MPH student and MPHSO-Kansas City President Christi Nance was awarded the Dorothy Knoll Outstanding Leader Award. The award is given annually in the name of the first dean of students at KUMC. The awardee is chosen for exceptional leadership skills that affect the campus, community involvement, and ability to interact with a variety of students and organizations. Ms. Nance was honored based on her work at local, state, and national levels, including testimony and other effort resulting in the passage of Tobacco 21 in several communities in the Kansas City metro area.

3.2f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

KU-MPH faculty, staff, and students are extremely dedicated to service at the local, state, and national levels. Although this creates additional responsibility and duties, these connections and experiences enhance the MPH curriculum and networking opportunities for students.

Weaknesses:

None.

Future Plans:

The KU-MPH program will continue to support and acknowledge faculty, staff, and student involvement in service activities.

3.3 Workforce Development. The program shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.

3.3a. Description of the ways in which the program periodically assesses the continuing education needs of the community or communities it intends to serve. The assessment may include primary or secondary data collection or data sources.

The KU-MPH program was one of several partners that conducted a state-wide public health workforce assessment in 2014-2015. The assessment was led by members of the Kansas Public Health Workforce Development Coordinating Council (KPHWDCC), of which KU-MPH program staff and faculty have been long-time members. Drs. Choi and Nazir provided significant support in developing the survey tool and assisted in data analysis for the assessment. Survey instrument questions were designed to conduct an overall competency assessment of the Kansas public health workforce and were based on the Council of Linkages Core Competencies for Public Health Professionals (June 2014). The survey was distributed to employees of the state health department (KDHE) and the local health departments across the state. A total of 1,648 respondents completed the assessment, with an overall participation rate of 67% (76% of KDHE employees and 61% of local health department employees). Extensive demographic data were collected along with the competency assessment data. A final report and executive summary of the findings were produced in May 2015 and may be located in the Electronic Resource File.

In 2015, the KU-MPH program also conducted a survey of the External Advisory Board (EAB). This group consists of statewide stakeholders from local and state governmental public health, non-profit agencies, and the private healthcare industry (see criterion 1.5a). The survey specifically inquired about current job opportunities, need for continuing education and employer support for continuing education, salary, desired concentrations, and interest in the Certified in Public Health credential. An issue brief for the 2015 EAB survey is located in the Electronic Resource File.

The KU-MPH program has also been a long-time member of the Kansas Public Health Systems Group (PHSG). Historically, the PHSG worked to support accreditation efforts of the local health departments in Kansas through the Public Health Practice Program (PHPP). There are currently three PHAB-accredited health departments in Kansas (Johnson, Sedgwick, and Lawrence-Douglas County). Most recently the PHSG has been conducting a state-wide assessment around the Foundational Public Health Services (FPHS), focusing on the state's capacity to meet a basic public health standard in all communities. As a result, an Advisory Council on the Future of Public Health in Kansas was convened in 2016. Council members include state and local policymakers, hospital administrators, the insurance industry, philanthropists, higher education, and grassroots groups in hopes that they can provide advice and ideas in response to assessment findings to help strengthen the public health system in Kansas.

The KU-MPH program also actively participates in an Academic Coordination Workgroup that is a sub-committee of the (PHPP) funded by the Kansas Health Foundation (KHF). In 2014, this group conducted key informant interviews and produced an issue brief to address strengthening the collaboration and coordination of efforts between academia and public health practice in Kansas. The report addressed the significant contributions made by student practicum/internship and capstone projects, and suggested ways to strengthen relationships between practice and academic partners in our state.

Finally, a survey of KU-MPH alumni was conducted in 2015 to better understand current employment of graduates, their overall satisfaction with the KU-MPH program, and best ways to increase alumni interaction and professional collaborations. The issue brief for the 2015 alumni survey may also be found in the Electronic Resource File.

3.3b A list of the continuing education programs, other than certificate programs, offered by the program, including number of participants served, for each of the last three years. Those programs offered in a distance-learning format should be identified.

Public Health Grand Rounds

- Planning Committee: Armstrong, Honderick, various KU-MPH faculty
- Title/Speaker/Date:
 - *Quality Improvement: Implementing Evidence-Based Practice* (Boothroyd) (August 27, 2014)
 - *Learning from Experience While Looking Toward PHAB 1.5* (Marsh, Byrne-Lutz, and Wilcox) (September 3, 2014)
 - *Primary & Secondary Data Sources for Public Health Practice* (Kovach and Pandya) (September 10, 2014)
 - *The Health Challenge: Mental Health Disparities and Overall Health Equity* (Sanchez) (September 17, 2014)
 - *Cultural Competency and Health Equity: Preparing to Meet PHAB Standards* (White) (September 24, 2014)
 - *"You have red spots like me!" Measles Transmission Throughout History and Today* (Lawlor) (October 8, 2014)
 - *Public Health Law 101* (Winston Morrow) (October 15, 2014)
 - *Public Health's Return on Investment: The Value of Advocacy* (Quade) (October 22, 2014)
 - *Human Trafficking in Healthcare* (Unruh) (October 29, 2014)
 - *Promoting Health Equity & Access Through Listening & Teaching in a Holistic Approach* (Griffin) (November 5, 2014)
 - *Epidemiologic Profile of E-Cigarette Use in Kansas* (November 12, 2014)
 - *Cost Analyses for Public Health Interventions* (Shireman) (December 3, 2014)
 - *Marijuana: An Emerging Public Health Concern* (Richter and Levy) (December 10, 2014)
 - *Ebola Update* (Norman) (January 21, 2015)

- *Routine vs. Novel – Preparing for Complex Crises* (Young) (January 28, 2015)
- *HRSA Midwestern Public Health Training Center (MPHTC) and Kansas* (Uden-Holman and Hawley) (February 4, 2015)
- *WorkWell Kansas: Improving Health One Worksite at a Time* (Ablah) (February 11, 2015)
- *University of Kansas Hospital Heart and Stroke Collaborative* (Moser) (February 18, 2015)
- *Public Health Ethics* (Taylor-Osborne) (February 25, 2015)
- *Brain Development in Relation to Public Health Policy* (Martin) (March 4, 2015)
- *Wichita's Master Bicycle and Pedestrian Plans – Community Planning for Improving Physical Activity and Health* (J. Brown) (March 11, 2015)
- *Let's Talk about Sex (Again): Changing the Conversation Around Long-Acting Reversible Contraception for Teenagers* (Satterwhite and Ramaswamy) (March 25, 2015)
- *Multi-Jurisdictional Sharing* (Hartsig) (April 1, 2015)
- *Got Data? Ideas and Lessons Learned in Gathering Internal Data for Public Health Practice* (Franken, Neill, Romero and Marthaler)
- *Kansas PBRN* (Pezzino) (April 15, 2015)
- *Bulldoc Clinic* (Greiner) (April 22, 2015)
- *The Kansas Public Health Workforce: Where We've Been and Where We Are Going – Results from a Statewide Public Health Workforce Assessment* (Cain) (May 6, 2015)
- *Challenges in Preventing Unintended Pregnancy in Kansas – Evidence, Policy, and Practice* (Ramaswamy, Evans and Satterwhite) (April 6, 2016)
- *What's Happening with Zika Virus Readiness in Kansas? A Look at State and Local Preparedness Activities* (Hunt and Joerke)
- Target Audience: Kansas public health workforce (state and local)
- Participants: Staff at Kansas Department of Health and Environment, multiple local health departments in Kansas, hospitals and clinics in Kansas, Kansas Department of Education, public school districts in Kansas, insurance providers in Kansas, other non-profit agencies
- Distance Learning via Adobe Connect

Kansas Evidence-Based Public Health

- Faseru, Ellerbeck, Johnston, Richter in collaboration with staff at the Kansas Department of Health and Environment
- Target Audience: Local and state health department staff
- Course Objectives:
 - At the conclusion of this course, participants should be able to:
 - 1) Conduct a community assessment
 - 2) Describe a public health issue in a quantitative way
 - 3) Discover what is known about a public health issue through the scientific literature
 - 4) Prioritize program or policy options that address a public health issue

- 5) Assist in the design and implementation of an economic evaluation of a public health program or policy
- 6) Develop an action plan for a public health program or policy
- 7) Develop an evaluation plan for a public health program or policy
- Participants:
 - November 2014 – 29 attendees
 - November 2015 – 36 attendees
 - November 2016 – 47 attendees
- Distance Learning and Classroom Learning

Latino Summer Internship in Health Disparities Research Program

- Cupertino, Ramaswamy
- 2008-present
- Target Audience: High school and undergraduate students
- Goal: To increase the number of physicians and underrepresented groups in health careers
- Participants: More than 50 students from under-represented communities in the Kansas City area
- Curriculum: Research mentorship, structured training focused on key dimension of health disparities, meetings with Latino medical students and graduate students
- Classroom Learning

3.3c Description of the certificate programs or other non-degree offerings of the program, including enrollment data for each of the last three years.

The KU-MPH program does not offer certificates.

3.3d. Description of the program's practices, policies, procedures and evaluation that support continuing education and workforce development strategies.

Practices, policies, procedures and evaluation for workforce development and continuing education (CE) initiatives fall under the KUMC Institute for Community Engagement (<http://www.kumc.edu/community-engagement.html>). Although KUMC was originally established in the far northeastern corner of the state, the university and the KU-MPH program strive to serve the entire state of Kansas. The KU-MPH program has worked most closely with the Institute's Area Health Education Center (<http://www.kumc.edu/community-engagement/ku-ahec.html>). Partnering with the KU AHEC has allowed the KU-MPH program to offer continuing education opportunities to staff at the state and local health departments through the Public Health Grand Rounds. The KU AHEC includes evaluation of the offerings as part of the CE process.

3.3e. A list of other educational institutions or public health practice organizations, if any, with which the program collaborates to offer continuing education.

Planning for the Kansas Public Health Grand Rounds and Evidence-Based Public Health Course is a regular agenda item for the Kansas Public Health Workforce Development Coordinating Council (KPHWDCC), which includes:

- KU-MPH program (Departments of Preventive Medicine and Public Health - Kansas City & Wichita)
- KUMC Area Health Education Center (Pittsburg, KS)
- Kansas Department of Health and Environment (KDHE)
- Kansas Public Health Association (KPHA)
- Kansas Association of Local Health Departments (KALHD)
- Kansas Environmental Health Association (KEHA)
- Wichita State University (WSU) Department of Public Health Sciences
- Kansas State University Master of Public Health Program (KSU MPH)
- Kansas Health Institute (KHI)

The Kansas Public Health Systems Group (PHSG) is a coalition of various public health stakeholders in Kansas that has been meeting for well over a decade and includes:

- Kansas Association of Local Health Departments (KALHD)
- Kansas Department of Health and Environment (KDHE)
- Kansas Health Institute (KHI)
- Kansas Public Health Association (KPHA)
- Kansas Environmental Health Association (KEHA)
- Kansas Hospital Association (KHA)
- University of Kansas (KU-MPH Program)
- Kansas State University (KSU MPH Program)
- Wichita State University (WSU)
- Kansas Health Foundation (KHF)

3.3f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program has a long history in supporting workforce development in Kansas beyond the MPH curriculum. Ongoing involvement in the Kansas Public Health Workforce Development Coordinating Council (KPHWDCC) and the Kansas Public Health Systems Group (PHSG) provides insight to state-wide learning needs. The addition of faculty who serve as PHAB Site Visitors also contributes to the program's understanding of workforce development needs in our state.

Weaknesses:

Communities in Kansas are extremely diverse, spanning very urban to very rural/frontier; this and the physical size of the state pose a challenge in providing equal access for face-to-face learning opportunities.

Future Plans:

The KU-MPH program will continue to seek opportunities to provide continuing public health education across the broader, state-wide workforce. The program continues to participate in the KPHWDCC and PHSG. Discussions are already underway in these meetings for a 2017 statewide workforce assessment to build upon information gleaned from the 2014-2015 assessment.

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, practice experience and research and instructional competence, is able to fully support the program's mission, goals and objectives.

4.1a A table showing primary faculty who support the degree programs offered by the program. It should present data effective at the beginning of the academic year in which the self-study is submitted to CEPH and should be updated at the beginning of the site visit. This information must be presented in table format and include at least the following: a) name, b) title/academic rank, c) FTE or % time, d) tenure status or classification, g) graduate degrees earned, h) discipline in which degrees were earned, i) institutions from which degrees were earned, j) current instructional areas and k) current research interests. See CEPH Data Template 4.1.1.

Table 4.1.1. Current Primary Faculty Supporting Degree Offerings of School or Program by Department/Specialty Area									
Department (schools)/ Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE or % Time to the school or program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Preventive Medicine and Public Health – Wichita Social and Behavioral Health	Elizabeth Ablah	Associate Professor	Tenured	1.0	PhD MPH MA	Wichita State University University of Kansas School of Medicine-Wichita Wichita State University	Community Psychology Public Health Community Psychology	Social and Behavioral Aspects of Health	Health Promotion, Chronic Disease Prevention, Access to Health Care, Nutrition and Physical Activity
Preventive Medicine and Public Health - Kansas City Social and Behavioral Health	Christie Befort	Associate Professor	Tenured	1.0	PhD MS	Colorado State University Arizona State University	Counseling Psychology	Research Methods	Behavioral Obesity and Exercise Adherence
Preventive Medicine and Public Health – Kansas City Epidemiology	Won Sup Choi	Professor	Tenured	1.0	PhD MPH	University of California, San Diego/ San Diego State University Boston University School of Public Health	Epidemiology	Epidemiology	Prevention and Control for Tobacco Use, Cigarette-related Disease Risks, Adolescent Smoking

Department (schools)/ Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE or % Time to the school or program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Preventive Medicine and Public Health – Wichita Epidemiology	Tracie Collins	Professor	Tenured	1.0	MD MPH	University of Oklahoma College of Medicine Harvard School of Public Health	Medicine Clinical Effectiveness	Epidemiology	Physical Activity, Health Disparities, Disease Prevention
Preventive Medicine and Public Health - Kansas City Epidemiology	Edward F. Ellerbeck	Professor	Tenured	1.0	MD MPH	University of Missouri at Kansas City Johns Hopkins School of Public Health	Medicine Epidemiology	Rural Health	Methods to Improve the Delivery of Preventive Services in Clinical Services
Preventive Medicine and Public Health - Kansas City Epidemiology	Babalola Faseru	Associate Professor	Tenured	1.0	MD MPH	Obafemi Awolowo University, Nigeria University of Kuopio, Finland	Medicine & Surgery Public Health (International)	Epidemiology	Nicotine Dependence and Smoking Cessation
Preventive Medicine and Public Health - Kansas City Public Health Management	Tanya Honderick	Site Director/ Research Instructor	N/A	1.0	MS MPH	University of Kansas Medical Center University of Kansas Medical Center	Nursing Public Health	Public Health Internship	N/A

Department (schools)/ Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE or % Time to the school or program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Preventive Medicine and Public Health – Wichita Public Health Management	Lisette Jacobson	Assistant Professor	Tenure Track	1.0	PhD MA MPA	Wichita State University Wichita State University Wichita State University	Psychology Psychology Public Administration	Financial and Human Resource Management	Maternal and Child Health, Evaluation Research and Public Policy Initiatives, Public Administration and Human Resource Management, Collaboration and Interrelationships
Preventive Medicine and Public Health – Wichita Social and Behavioral Health	Judy Johnston	Research Instructor	N/A	1.0	MS	Kansas State University	Adult and Occupational Education	Social and Behavioral Health	Nutrition and Physical Activity, Health Ministry & Self Care, Environmental Change, Systems Change, Community Development and Leadership, Obesity Prevention and Management

Department (schools)/ Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE or % Time to the school or program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Preventive Medicine and Public Health - Kansas City Epidemiology	Sue Min Lai	Professor	Tenured	1.0	PhD MS MBA	University of Pittsburgh, Pennsylvania Temple University, Pennsylvania Miami University, Oxford, OH	Epidemiology Statistics Accounting	Epidemiology	Chronic Disease Etiology, Population-based Registry, Study Design
Preventive Medicine and Public Health - Kansas City Public Health Management	Robert Moser	Clinical Professor	N/A	1.0	MD	University of Kansas School of Medicine	Medicine	Leadership in Public Health	Kansas Heart and Stroke Collaborative, Family Medicine
Preventive Medicine and Public Health – Kansas City Epidemiology	Niaman Nazir	Research Assistant Professor	N/A	1.0	MBBS MPH	Allama Iqbal Medicinal College, Pakistan University of Kansas Medical Center	Medicine Public Health	Data Management and Statistics	Smoking Cessation, Database Design and Implementation, Data Management and Analysis, Information Technology in Health Care

Department (schools)/ Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE or % Time to the school or program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Preventive Medicine and Public Health – Kansas City Social and Behavioral Health	Nicole Nollen	Associate Professor	Tenured	1.0	PhD MA	University of Missouri – Kansas City Ball State University	Counseling Psychology Clinical Psychology	Social and Behavioral Aspects of Public Health	Smoking Cessation and Obesity Prevention
Preventive Medicine and Public Health - Kansas City Social and Behavioral Health	Megha Ramaswamy	Associate Professor	Tenured	1.0	PhD MPH	City University of New York University of Kansas	Sociology Public Health	Cultural Competency	Policy barriers to health during jail/community transition, Social Justice
Preventive Medicine and Public Health – Wichita Social and Behavioral Health	Michelle Redmond	Research Assistant Professor	Tenure Track	1.0	PhD MS	Wichita State University Emporia State University	Community Psychology Clinical Psychology	Qualitative Methods	Health Disparities, Prevention Research and Evaluation
Preventive Medicine and Public Health - Kansas City Public Health Management	Kimber P. Richter	Professor	Tenured	1.0	PhD MPH MA	University of Kansas University of Kansas Medical Center University of Kansas	Behavioral Psychology Public Health Psychology	Grant Writing, Tobacco Dependence	Smoking Cessation, Substance Abuse Prevention/ Treatment/ Policy

Department (schools)/ Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE or % Time to the school or program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Preventive Medicine and Public Health - Kansas City Epidemiology	Andrew Roberts	Assistant Professor	Tenure Track	1.0	PharmD PhD	Drake University University of North Carolina	Pharmacy Pharmaceutical Sciences	Pharmaco-Epidemiology	Opioid Use, Medicaid data
Preventive Medicine and Public Health - Kansas City Epidemiology	Catherine Satterwhite	Associate Professor	Tenured	1.0	PhD MSPH MPH	Emory University Emory University Emory University	Epidemiology Public Health Informatics Epidemiology	Infectious Disease Epidemiology	Sexual Health, Reproductive Health, Infectious Diseases
Preventive Medicine and Public Health - Kansas City Social and Behavioral Health	Taneisha Scheuermann	Assistant Professor	Tenure Track	1.0	PhD MA	University of Akron University of Akron	Counseling Psychology Counseling Psychology	Evaluation Methods in Public Health	Smoking Cessation and Health Disparities
Preventive Medicine and Public Health – Wichita Public Health Management	Sharla Smith	Research Assistant Professor	Tenure Track	1.0	PhD MPH	University of Arkansas for Medical Sciences University of Arkansas for Medical Sciences	Health Systems and Services Research Health Policy and Management	Public Health Administration, Public Health Program Development and Management	

4.1b Summary data on the qualifications of other program faculty (adjunct, part-time, secondary appointments, etc.). Data should be provided in table format and include at least the following: a) name, b) title/academic rank, c) title and current employment, d) FTE or % time allocated to the program, e) highest degree earned, f) disciplines in which listed degrees were earned and g) contributions to the program. See CEPH Data Template 4.1.2.

Table 4.1.2. Other Faculty Used to Support Teaching Programs (adjunct, part-time, secondary appointments, etc.)							
Department (school)/Specialty Area (program)	Name	Title/Academic Rank	Title & Current Employer	FTE or % Time	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Epidemiology	Lexie Brown	Secondary	Teaching Associate	.30	MS	Biostatistics	Biostatistics
Epidemiology	Shana Palla	Secondary	Teaching Associate	.30	MS	Statistics	Biostatistics
Epidemiology	Milind Phadnis	Secondary	Assistant Professor	.30	PhD	Statistics	Biostatistics
Social and Behavioral Health	Christine Daley	Secondary	Associate Professor	.50	PhD	Public Health/Social Epidemiology	Social and Behavioral Health Disparities
Social and Behavioral Health	Sarah Kessler	Secondary	Assistant Professor	.20	PhD	Public Health, International Health, Social-Behavioral Interventions	Reproductive Health, Introduction to Public Health
Epidemiology	Milan Bimali	Part-time	Biostatistician	.10	PhD MS	Biostatistics Mathematics	Data Management
Epidemiology	John Neuberger	Part-time	Professor	.25	DrPH MPH MBA	Public Health Public Health Business Administration	Environmental Health
Public Health Management	Marvin Stottlemire	Adjunct	Adjunct Professor	.30	PhD	Public Health Law and Policy	Public Health Administration
Public Health Management	Jack Brown	Part-time	Research Instructor	.40	MUA	Public Administration	Environmental Health
Epidemiology	Deborah Barkin Fromer	Adjunct	Adjunct Teaching Associate	.30	MPH	Public Health	Epidemiology
Epidemiology	David Stuever	Adjunct	Teaching Associate	.30	PhD MPH	Epidemiology General	Epidemiology

4.1c Description of the manner in which the faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if used by the program. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

The KU-MPH program utilizes public health practitioners as course instructors and guest lecturers. Four of the thirteen instructors listed in Table 4.1.2 are current or former public health practitioners from local and state health departments, policy institutes and the United States military. Dr. Moser, listed in 4.1.1, is the former secretary of the Kansas Department of Health and Environment and joined the Kansas City faculty in 2015. He currently teaches PRVM 861 Leadership in Public Health, which is a required course in the Public Health Management concentration and also a popular elective among students in the other two concentrations. Practitioners often provide guest lectures in courses such as PRVM 809 Introduction to Public Health, PRVM 827 Public Health Administration, and PRVM 851 Public Health Policy and Law. PRVM 830 Environmental Health utilizes public health practitioners to facilitate field trips and provide tours of sewage treatment plants, water treatment facilities, hazardous waste disposal centers, and landfills.

Additionally, public health practitioners serve as site mentors for the required MPH internship. Students are required to complete at least 192 hours of work for the internship with 96 hours being mentored onsite at a public health agency. Site mentors serve as supervisors to KU-MPH students and assign work and projects throughout the internship experience.

The KU-MPH program has the ability to request special graduate faculty appointments for public health practitioners who serve on MPH capstone committees. This appointment, offered by the KUMC Office of Graduate Studies, allows public health practitioners to hold graduate faculty status for up to five years to serve on a student capstone. The KU-MPH program currently has a substantial list of practitioners who hold Graduate Faculty appointments as per the Graduate Studies website (see: http://www.kumc.edu/Documents/graduate%20studies/Gradfac_dept.pdf). Curricula vitae for select practitioners who have served on capstone committees in the last three years are located in the Electronic Resource File.

4.1d Identification of measureable objectives by which the program assesses the qualifications of its faculty complement, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Outcomes Measures Template.

Table 4.1d Maintain a Qualified Faculty Complement				
Outcome Measure	Target	2014-2015	2015-2016	2016-2017
Author scholarly publications and disseminate findings	The number of scholarly authorships (peer-review journal articles or book chapters) by the faculty as a whole will total at least 40 each year.	Met – 63*	Met– 43*	Met = 41*
Conduct interdisciplinary research to reduce health disparities	At least 50%of the faculty will produce high quality research in vulnerable populations by acquiring funding from external sources.	Met– as per faculty CVs	Met– as per faculty CVs	Met– as per faculty CVs
Foster professional development among our faculty and students	All faculty will achieve promotion at intervals expected by the University of Kansas.	Met– as per faculty CVs	Met– as per faculty CVs	Met– as per faculty CVs

*Articles counted once, even if multiple faculty were authors.

4.1e Assessment of the extent to which this criterion is met and an analysis of the program’s strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The KU-MPH program maintains a qualified primary and secondary/adjunct faculty complement. Additionally, the program effectively utilizes public health practitioners as course instructors, guest lecturers, and internship or capstone mentors.

Weaknesses:

None.

Future Plans:

The KU-MPH program will continue to maintain the professional relationship we have with external public health practitioners.

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.

4.2a A faculty handbook or other written document that outlines faculty rules and regulations.

The University of Kansas School of Medicine, under which the KU-MPH program and affiliated departments exist, provides a faculty handbook that outlines faculty rules and regulations, including information on the university's organizational structure, governance, recruitment strategies, appointment, research, teaching, and promotion. The faculty handbook can be found on their Office of Faculty Affairs website (<http://www.kumc.edu/kumc-academic-affairs/kumc-faculty-affairs-and-interprofessional-development.html>) and in the Electronic Resource File.

4.2b Description of provisions for faculty development, including identification of support for faculty categories other than regular full-time appointments.

Faculty in the KU-MPH program and Departments of Preventive Medicine and Public Health have several opportunities for development, in particular opportunities for continuing education, internal funding, and support for research from the university:

- The KU School of Medicine offers six different funding mechanisms for pilot research: research transitioning from the pilot stage to extramurally funded projects, and cross-disciplinary collaborations.
- The Research Institute at the KU School of Medicine also supports all faculty with grant applications, from reviewing applications, setting up budgets for grants, and submitting final applications to non-profit, state, and federal agencies.
- The KU School of Medicine also has 12 research support facilities, for example laboratory and bioinformatics support.
- The KU School of Medicine has 25 research centers, and KU-MPH faculty currently collaborate with or have the potential for collaboration with half of these centers (<http://www.kumc.edu/research.html>).

In addition to these resources, faculty are also given standard sources of support: leave of absence for sabbatical, vacation, sick leave, bereavement leave, military leave, as well as leave with/without pay; every single faculty member is oriented upon employment to university policies, health care coverage options, retirement options, computer and building security, and available mentoring through the KU School of Medicine.

There are also several institutional and external opportunities available for improving teaching skills and methods, as well as grant writing support. Examples includes courses and workshops in the Department of Teaching and Learning Technologies, a regular KU School of Medicine Educators' Breakfast Series, and grant writing

workshops organized through the KUMC Research Institute. An example of a recent email highlighting faculty development opportunities can be found in the Electronic Resource File.

4.2c Description of formal procedures for evaluating faculty competence and performance.

As per the faculty handbook, faculty competence and performance are evaluated annually in the following manner:

1. Each faculty member is evaluated annually by the department chairperson, according to criteria and methods established in the department for research, teaching, and service.
2. The department chairperson invites faculty to submit a portfolio of relevant information for the purposes of evaluation, including for example, peer evaluation of teaching, student evaluations of teaching, and documentation of scholarly activity. The department chairperson provides the evaluation to the faculty member in writing, prior to being adopted and placed in the faculty member's personnel file.
3. If the faculty member's performance requires improvement, the written evaluation specifically identifies areas and strategies for improvement.
4. The faculty member may provide a written response to his or her evaluation, which will also be placed into his or her personnel file.
5. The department chairperson also reviews the assignment of differential effort with the faculty member and decides what changes are appropriate and practical.

Faculty mentoring is built into the process of annual departmental review. In addition, the department chairperson can recommend, or the faculty member can request, outside mentorship opportunities. Mentoring is also available and encouraged for all faculty through the Associate Dean of Professional Development and Faculty Affairs, the same body that helps coordinate promotion and tenure at the institution.

The different categories for faculty rank and appointment type, based on evaluation of faculty performance at the department and institution level, are as follows:

- Professor
- Associate professor
- Assistant professor
- Instructor

These titles can be modified as appropriate to the faculty member's primary relationship to KUMC by the prefix clinical, research, visiting, adjunct or courtesy added to the principal title; e.g., "research" indicates the primary relationship is the conduct of research or clinical investigation. The Promotion and Tenure Guidelines and a table

listing examples of early, mid, and established career level expectations can be found in the Electronic Resource File.

4.2d Description of the processes used for student course evaluation and evaluation of instructional effectiveness.

Prior to 2015, the program utilized REDCap™ to create and distribute student course evaluations near the end of every semester. Starting in 2016, the program utilized software called EvaluationKIT®. Course evaluations are administered electronically to students. Students are emailed a link and need to log in using their KUMC student accounts to access the course evaluation system. Student feedback is anonymous and presented only as aggregate data.

The results are tabulated and forwarded to the program site directors and department chairperson. Every semester, the site directors discuss the evaluation with each respective faculty member after semester grades have been posted. Student course evaluations are then placed in the faculty member's personnel file to be considered in the annual evaluation with the department chair and eventually in tenure and promotion review.

Additionally, the KU-MPH program has an annual target that all courses will receive student evaluations of equal to or greater than four out of five on at least two of the four quality indicators: instructor expertise, instructor effectiveness, course organization and course quality. With the exception of FY15, course evaluations were completed using a scale where a rank of (1) represents an unsatisfactory rating, and a rank of (5) represents an outstanding rating. For FY15, the KU-MPH program utilized a different scoring system with a maximum rank of (4), instead of (5). Data from courses taught during FY15, FY16, and FY17 are shown in Table 4.2.d.1. The average student response rate was 74.3% in FY15 compared to 86.1% in FY16. Since the number of students per class was small (median 10.5 students), the quality indicators are interpreted with some caution because of the potentially large statistical influence of a single data point (i.e. one student's concerns).

Table 4.2.d.1 Summary of Quality Indicators from Student Evaluations of Courses for FY15, FY16, FY17									
	FY15*			FY16			FY17		
	Mean	Min	Max	Mean	Min	Max	Mean	Min	Max
Demonstrated expertise on the subject	3.69	3	4	4.71	3.67	5	4.68	3.75	5
Demonstrated effectiveness as a teacher	3.55	2.6	4	4.51	3.29	5	4.52	3.43	5
Overall organization of the course	3.48	2.2	4	4.29	2.36	5	4.36	2.83	5
Overall quality of the course	3.41	2.2	4	4.41	2.71	5	4.41	3	5

*For FY15, the program utilized a different evaluation software using a scale with the maximum rank of 4.

There were two courses in FY15 and FY16 that did not meet the target. Site directors, as well as department chairs, reviewed each course evaluation with the instructors and addressed deficiencies or suggested course changes.

In addition to student course evaluations of teaching effectiveness, the KU-MPH program has a voluntary program for peer observation of teaching effectiveness.

4.2e Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

There is strong support for faculty development provided by the university. The KU-MPH program has a systematic and transparent method of utilizing course evaluations for measuring teaching effectiveness and overall quality of courses taught in the program.

Weaknesses:

None.

Future Plans:

The KU-MPH program plans to provide training for faculty to fully utilize EvaluationKIT®. This will allow faculty to compare courses across semesters over time. We will continue to explore opportunities for faculty development via Teaching and Learning Technologies and resources external to the university.

4.3 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.

4.3a Description of the program's recruitment policies and procedures.

The KU-MPH program's recruitment strategies are consistent with the mission of the program:

To improve public health in Kansas, the Heartland, and the nation through excellence in education, discovery, and community engagement.

- The KU-MPH program hosts an on-campus information session at least four times a year (two in the spring/summer terms and two in the fall).
- In fall 2016, the program started hosting a campus-wide information session for the dual MD/MPH degree program, targeting first and second year medical students enrolled in the KU School of Medicine. The program will continue to host the MD/MPH information session on an annual basis.
- Representatives from KU-MPH attend the following conferences annually for recruitment purposes:
 - Kansas Public Health Association Conference
 - American Public Health Association Conference
 - Statewide Pre-Medical Student Conference
 - Governor's Public Health Conference
- Program representatives also attend other recruitment events as invited, such as the University of Missouri-Kansas City Health Sciences Career Panel, and the KU Career Fair.
- The KU-MPH website (<http://mph.kumc.edu>) also serves as an effective recruiting tool. The website is regularly updated with upcoming information sessions and recruiting events. Prospective students and organizations are encouraged to contact the program through the website to set up a face to face meeting or attend a recruitment event.

Additionally, as a member of the Association of Schools and Programs of Public Health (ASPPH), the KU-MPH program maintains an updated profile in the SOPHAS database. Prospective applicants identified through SOPHAS are encouraged to visit with the program site directors to learn more about the program's mission and values.

4.3b Statement of admissions policies and procedures.

Applicants for admission to the KU-MPH program must meet all requirements for admission to the University of Kansas Office of Graduate Studies and the KU-MPH program. All applicants must submit:

- A personal statement
- Official transcripts for all undergraduate and graduate course work
- Three letters of recommendation
- Applicants who have not earned a doctoral or other terminal degree must also submit a graduate level standardized test score (GRE®, MCAT®, LSAT®, etc.). Starting with fall 2018 admissions, the program will consider accepting extensive public health experience in lieu of the GRE or other standardized test scores. Applicants who have completed another master's degree may also waive the GRE.
- Official certified copies of non-English transcripts and evaluation of transcripts through World Education Service or Educational Credential Evaluators, and an official TOEFL® score for international students.

Additionally, applicants must meet concentration pre-requisites:

- Epidemiology – successful completion of one semester of Calculus
- Social and Behavioral Health – successful completion of one semester of College Algebra
- Public Health Management – successful completion of one semester of College Algebra

The admission deadline is March 1 each year. The Operations Committee recently revised the admissions guideline to include an early decision period. Completed applications submitted between the dates of September 1 through December 1 can expect to receive a decision from the program four to six weeks from the date of their completed application on SOPHAS. This was done to admit and retain exceptional applicants earlier in the year.

Each site director on respective campuses monitors incoming applications on SOPHAS. Applications that are deemed to be complete are posted on BlackBoard® to comply with FERPA and reviewed annually by the Admissions Committee. The committee is comprised of a chair, four faculty members representing all three concentrations and two student representatives – distributed across campuses. Each committee member is given access to the Admissions Committee shell on BlackBoard® where they can review and assign a score of one to five (one being the highest). Applications are reviewed NIH-style where each applicant is reviewed by three randomly selected reviewers. Scores are then averaged and applicants are rank ordered and discussed by the committee via televideo conference based on average scores. Students are admitted after group discussion and according to admission goals and targets. The committee's final recommendations for new admissions are then reviewed and approved by the Operations Committee, Executive Council, and finally the Office of Graduate Studies.

4.3c Examples of recruitment materials and other publications and advertising that describe, at a minimum, academic calendars, grading and the academic offerings of the program. If a program does not have a printed bulletin/catalog, it must provide a printed web page that indicates the degree requirements as the official representation of the program. In addition, references to website addresses may be included.

Recruitment materials for the KU-MPH program are available in printed brochures, online, and in the Academic Catalog.

- The program brochure describes the program requirements, the concentrations offered, and faculty resources. Examples of these are located in the Electronic Resource File.
- The Academic Catalog is available online and describes all graduate degree programs and grading policies: <http://catalog.ku.edu/graduate-studies/kumc/#admissiontext>. Links to the Academic Catalog appear on the KU-MPH website: <http://mph.kumc.edu>.
- The academic calendars are made available on the Office of Graduate Studies website: <http://www.kumc.edu/kumc-academic-affairs/graduate-studies/calendars.html>. Links to the academic calendars appear on the KU-MPH website: <http://mph.kumc.edu>.

4.3d Quantitative information on the number of applicants, acceptances and enrollment by concentration, for each degree, for each of the last three years. Data must be presented in table format. See CEPH Data Template 4.3.1

Table 4.3.1 Quantitative Information on Applicants, Acceptances, and Enrollments, 2014 to 2017				
		2014-2015 (AY15)	2015-2016 (AY16)	2016-2017 (AY17)*
Environmental Health Sciences	Applied	3	2	0
	Accepted	3	2	0
	Enrolled	1	0	0
Epidemiology	Applied	16	23	33
	Accepted	9	17	16
	Enrolled	6	12	6
Public Health Management	Applied	8	13	20
	Accepted	5	10	11
	Enrolled	3	10	6
Social and Behavioral Health	Applied	24	26	25
	Accepted	16	23	19
	Enrolled	8	16	11

*The KU-MPH program joined SOPHAS for the 2015-2016 application cycle with successful applicants being reviewed for summer/fall 2016 admissions. This was the first time a student was allowed to apply to multiple concentrations and multiple campuses. We reviewed these applications for all designated concentrations and campuses, so one applicant may be represented twice in the applied numbers; however, students were only accepted into one concentration on one campus.

4.3e Quantitative information on the number of students enrolled in each specialty area of each degree identified in the instructional matrix, including headcounts of full- and part-time students and an FTE conversion, for each of the last three years. Non-degree students, such as those enrolled in continuing education or certificate programs should not be included. Explain any important trends or patterns, including a persistent absence of students in any degree or specialization. Data must be presented in table format. See CEPH Data Template 4.3.2.

Table 4.3.2 Student Enrollment Data from Fall 2015 to Fall 2017						
Degree & Specialization	Fall 2015		Fall 2016		Fall 2017***	
	HC	FTE	HC	FTE	HC	FTE
MPH – Environmental Health Sciences*	3	1.33	1	.56	1	.33
MPH – Epidemiology	23	18.56	22	16.33	25	21.55
MPH – Generalist**	4	1.11	1	.33	0	0
MPH – Public Health Management	15	12.11	16	12.89	17	13
MPH – Social and Behavioral Health	30	23.00	31	24.00	24	18.44

*The Environmental Health Sciences concentration was discontinued in fall 2016 due to lack of interest from both applicants and current MPH enrollees.

**The KU-MPH program discontinued its generalist concentration in spring 2012. However, students have seven years to complete an MPH degree at the University of Kansas. These students represent part time students who opted to continue with their admission catalog instead of choosing a concentration.

***Fall 2017 student headcounts and FTE were calculated with enrollment from the first week of classes. These do not represent the final 20 day headcount, which will occur after the self-study due date.

4.3f Identification of measurable objectives by which the program may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Outcome Measures Template

Table 4.3f Enrolling a Qualified Student Body				
Outcome Measure	Target	2014-2015	2015-2016	2016-2017
Enroll a diverse qualified student body	Enroll 25 – 45 new students/year proportionally across campuses/concentrations <ul style="list-style-type: none"> • 6-10 EHS • 10-12 EPI • 6-10 PHM • 10-14 SBH 	Enrollment Target = Not Met (18) Concentration Target = Not Met (Did not meet target in any concentration)	Enrollment Target = Met (38) Concentration Target = Not Met (Did not enroll students in EHS concentration)	Enrollment Target = Not Met (23) Concentration Target = Not Met (Did not meet target in EPI; did not enroll any students in EHS)
Enroll a diverse qualified student body	At least 5 – 10% of applicants will be from a diverse population	Met = 35% (18/51) American Indian = 8% Black/African American = 10% Hispanic = 2% Two or more races = 4% Non-resident aliens = 11%	Met = 19% (12/64) American Indian = 5% Black/African American = 11% Hispanic = 1.5% Two or more races = 1.5%	Met = 31%* (23/75) American Indian = 1% Black/African American = 8% Pacific Islander = 1% Two or more races = 3% Non-resident aliens = 15%
Enroll a diverse qualified student body	At least 10% of degree seeking new enrollees will be from diverse populations.	Met = 44% (8/18) American Indian = 17% Black/African American = 22% Two or more races = 5%	Met = 32% (12/38) American Indian = 3% Black/African American = 8% Hispanic = 8% Two or more races = 10% Non-resident aliens = 3%	Met 39% (9/23) Black/African American = 22% Two or more races = 8.5% Non-resident aliens = 8.5%
Enroll a diverse qualified student body	At least 90% of degree seeking new enrollees will have undergraduate GPA of ≤ 3.0	Met = 90%	Not Met = 88.9%	Met = 96%

*With the change to SOPHAS in 2016-2017, ethnicities categories changed from our previous CollegeNet system. Additionally, some students applied to multiple concentrations/campuses. In this table, each applicant is represented only once, resulting in a different denominator than in table 4.3d.

4.3g Assessment of the extent to which this criterion is met.

This criteria is met with commentary.

Strengths:

The KU-MPH program has been consistent in attracting and enrolling qualified applicants from diverse populations.

Weakness:

The number of applicants and enrollees has decreased in the last three years. While we have not always met our enrollment goals, we continue our recruitment efforts across the state and at national conferences.

Future Plans:

The KU-MPH program will increase recruitment efforts as opportunities arise to attract well qualified applicants from diverse populations. Additionally, the KU-MPH program revised the GRE requirements for admission in fall 2018. Although the program will continue to require a GRE or other standardized test score, the program will consider waiving the requirement for public health practitioners on a case-by-case basis.

4.4 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.

4.4a Description of the program's advising services for students in all degrees and concentrations, including sample materials such as student handbooks. Include an explanation of how faculty are selected for and oriented to their advising responsibilities.

Since spring 2014, all curricular advising in the KU-MPH program has been provided by the site directors on each campus. Students are expected to have a face-to-face meeting with their advisor at least once per semester. A plan of study is drafted early in the program based on the student's concentration, full-time or part-time status, and projected graduation. Ongoing topics of discussion during individual advising meetings each fall and spring include course selection and enrollment, research interests, student employment needs and opportunities, internship and capstone interests, and long-term career goals.

In addition to individual advising, students must update their e-Portfolio each semester and share it with their respective site director. The e-Portfolio is created by each student in the BlackBoard® learning management system. An enrollment hold is placed on each KU-MPH student's account before the enrollment period opens. This reminds students to update their e-Portfolio for the current semester with graded artifacts that map to their course competencies as outlined in the course syllabus. Once the e-Portfolio is updated, the student sends an electronic link to his/her site director. The site director then reviews the e-Portfolio, provides feedback to the student, and releases the hold allowing the student to enroll in the next semester courses. Completion of the e-Portfolio each semester allows the student and KU-MPH administration to assure the progressive attainment of core and concentration competencies throughout the program.

4.4b Description of the program's career counseling services for students in all degree programs. Include an explanation of efforts to tailor services to meet specific needs in the program's student population.

In 2014, KUMC provided an office for Career Services via Student Services. Students could meet individually with that office to work on resume writing, job searches, and interviewing skills. Group activities, such as Etiquette Dinners, were also offered to the KUMC student body. Those services were discontinued in 2015 due to funding.

Since that time, the Office of Postdoctoral Affairs and Graduate Studies has offered ASCEND (Achieving Successful Careers Exploring New Directions) (see <http://www.kumc.edu/kumc-academic-affairs/graduate-studies/ascend.html>) which is based on the NIH Broadening Experiences in Scientific Training (BEST) program. Recent topics and dates for the ASCEND program include:

- Goals, IDPs and Conversation Skills (August 30, 2016)
- Personal Inventories and Self-Assessment Tools (September 13, 2016)
- Career Speed Dating (September 26, 2016)
- Job Searches and Professional Networking (October 11, 2016)
- Applying for a Position (October 25, 2016)
- CV and Resume Writing (November 9, 2016)
- Interview Skills (November 30, 2016)
- Negotiating and Accepting and Offer (December 7, 2016)

Workshops were promoted to KU-MPH students via email announcements (see examples in the Electronic Resource File). Adobe Connect was used so students could join the workshops from a distance and recordings, presentations, and handouts are available on the website: <http://www.kumc.edu/kumc-academic-affairs/graduate-studies/ascend/ascend-workshop-series.html>.

In addition to these services, KUMC also has writing services via the KUMC Writing Center located in Dykes Library. In addition to individual services, the Writing Center also offers peer-to-peer activities such as write-ins. Video consulting with a writing specialist is available to students at a distance. A link to the Writing Center webpage (<http://www.kumc.edu/student-services/counseling-and-educational-support-services/writing-services.html>) is available to students on the KU-MPH website.

Finally, the KU-MPH program has paid for conference registration and arranged travel to the annual Kansas Public Health Association Conference. This provides an excellent opportunity for students to network with public health professionals, faculty and students from across the state.

4.4c Information about student satisfaction with advising and career counseling services.

In addition to programs provided by the Office of Graduate Studies, the KU-MPH program offers informal career counseling via advising each semester and student-faculty meetings as requested by the student. Student satisfaction with advising is assessed via an exit interview questionnaire (see Electronic Resource File) completed by each student at the end of the program.

Table 4.4c. Summary of advising and career preparation from MPH Exit Interviews			
	FY15* (N = 9)	FY16 (N = 12)	FY17 (N = 22)
The advising system meets the needs of students.	Strongly Agree = 22.2% Agree = 33.3% Neutral = 22.2% Disagree = 11.1% Strongly Disagree = 11.1%	Strongly Agree = 58% Agree = 33% Neutral = 0% Disagree = 9% Strongly Disagree = 0%	Strongly Agree = 54% Agree = 36% Neutral = 5% Disagree = 5% Strongly Disagree = 0%
The curriculum prepares students for public health careers.	Strongly Agree = 22.2% Agree = 55.5% Neutral = 22.2% Disagree = 0% Strongly Disagree = 0%	Strongly Agree = 50% Agree = 50% Neutral = 0% Disagree = 0% Strongly Disagree = 0%	Strongly Agree = 27% Agree = 55% Neutral = 18% Disagree = 0% Strongly Disagree = 0%

*Starting in FY16, the KU-MPH changed the Exit Interview from a paper document to an online survey that allowed for easier calculations and a higher response rate.

4.4d Description of the procedures by which students may communicate their concerns to program officials, including information about how these procedures are publicized and about the aggregate number of complaints and/or student grievances submitted for each of the last three years.

Students are encouraged to communicate any concerns to program officials and are informed of the official grievance policy at New Student Orientation and via the MPH Student Handbook. Grievance Policy and Procedures for Graduate Studies are located online in the Academic Catalog ([http:// catalog.ku.edu/graduate-studies/kumc/#regulationstext](http://catalog.ku.edu/graduate-studies/kumc/#regulationstext)) and encourage students to present grievances to the program or appropriate department chairperson. The policy also directs student to the Equal Opportunity Office in cases regarding illegal discrimination or harassment.

Any student who believes his or her work in a course warrants a grade other than that assigned by the faculty member, should communicate this to the instructor and provide justification for the opinion. The student must make the request within one semester of receiving the grade. If the faculty member does not agree that the grade should be changed, the student may appeal to his/her respective site director. If the faculty member and site director disagree, then a third faculty member, such as the KU-MPH program executive director, will provide the final opinion as to the appropriate grade for the course.

There have been no grievances filed in the last three years.

4.4e Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

Advising and career counseling are provided to KU-MPH students individually via advising sessions with the site directors and through programs such as ASCEND. Students are encouraged to provide feedback to the program via exit interviews, surveys, and one-on-one communication.

Weaknesses:

University-wide career preparation programs are not specific to public health. Additionally, we recognize that assessment of student satisfaction with career counseling and advising is weak. Therefore, we plan to enhance the student exit interview with appropriate questions to assess student satisfaction.

Future Plans:

Seek additional opportunities to strengthen career counseling for KU-MPH students.