REVIEW FOR ACCREDITATION

OF THE

COLLEGE OF PUBLIC HEALTH AND HEALTH PROFESSIONS

AT THE

UNIVERSITY OF FLORIDA

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

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SITE VISIT TEAM:
Adele Amodeo, MPH, Chair
James Anderson, PhD
Lynn Kozlowski, PhD

SITE VISIT COORDINATOR:
Nakita Kanu, MPH
Table of Contents

Introduction.................................................................................................................................................... 1
Characteristics of a School of Public Health .................................................................................................. 2
1.0 THE SCHOOL OF PUBLIC HEALTH.................................................................................................... 3
  1.1 Mission. ............................................................................................................................................... 3
  1.2 Evaluation and Planning ...................................................................................................................... 4
  1.3 Institutional Environment .................................................................................................................... 5
  1.4 Organization and Administration ......................................................................................................... 7
  1.5 Governance ....................................................................................................................................... 12
  1.6 Fiscal Resources ............................................................................................................................... 16
  1.7 Faculty and Other Resources ........................................................................................................... 19
  1.8 Diversity. ............................................................................................................................................ 21
2.0 INSTRUCTIONAL PROGRAMS. .......................................................................................................... 24
  2.1 Degree Offerings .............................................................................................................................. 24
  2.2 Program Length ................................................................................................................................. 26
  2.3 Public Health Core Knowledge .......................................................................................................... 27
  2.4 Practical Skills ................................................................................................................................... 28
  2.5 Culminating Experience ..................................................................................................................... 30
  2.6 Required Competencies .................................................................................................................... 32
  2.7 Assessment Procedures. .................................................................................................................. 33
  2.8 Other Graduate Professional Degrees ............................................................................................. 36
  2.9 Bachelor's Degrees in Public Health. ................................................................................................ 39
  2.10 Other Bachelor's Degrees .............................................................................................................. 39
  2.11 Academic Degrees .......................................................................................................................... 40
  2.12 Doctoral Degrees ............................................................................................................................ 41
  2.13 Joint Degrees .................................................................................................................................. 42
  2.14 Distance Education or Executive Degree Programs ....................................................................... 43
3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE............................................. 46
  3.1 Research. .......................................................................................................................................... 46
  3.2 Service ............................................................................................................................................... 49
  3.3 Workforce Development .................................................................................................................... 50
4.0 FACULTY, STAFF AND STUDENTS. .................................................................................................. 53
  4.1 Faculty Qualifications ....................................................................................................................... 53
  4.2 Faculty Policies and Procedures ........................................................................................................ 53
  4.3 Student Recruitment and Admissions ............................................................................................... 56
  4.4 Advising and Career Counseling ..................................................................................................... 57
Agenda ........................................................................................................................................................ 61
Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the College of Public Health and Health Professions (PHHP) at the University of Florida (UF). The report assesses the college's compliance with the Accreditation Criteria for Schools of Public Health, amended June 2011. This accreditation review included the conduct of a self-study process by college constituents, the preparation of a document describing the college and its features in relation to the criteria for accreditation, and a visit in February 2014 by a team of external peer reviewers. During the visit, the team had an opportunity to interview college and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the college and verify the self-study document.

Founded as a small seminary in 1853, UF has become the largest member of the State University System of Florida (SUSF). Serving more than 50,000 students, UF offers nearly 100 undergraduate degree programs and over 250 graduate degree programs. The university is organized into the Graduate School and 16 colleges, including the College of Agricultural and Life Sciences, the College of Business Administration, the College of Design, Construction and Planning, the College of Education, the College of Engineering, the College of Journalism and Communications, the College of Law, the College of Liberal Arts and Sciences and the College of Public Health and Health Professions.

Along with two major hospitals in Gainesville and Jacksonville and numerous satellite facilities throughout north central Florida, the UF Health Science Center (HSC) is part of the greater University of Florida Health System. The HSC is home to the PHHP, the colleges of dentistry, nursing, medicine, pharmacy and veterinary medicine and the following six research institutes: the Clinical and Translational Science Institute, the McKnight Brain Institute, the Genetics Institute, the UF Health Cancer Center, the Institute on Aging and the Emerging Pathogens Institute. The PHHP and the colleges of nursing and pharmacy are housed in the same building, the Health Professions, Nursing and Pharmacy (HPNP) Complex, within the HSC.

The PHHP was founded in 1958 as an interdisciplinary college in the HSC. The dean reports directly to the senior vice president for health affairs and the provost and senior vice president for academic affairs. The PHHP is organized into nine departments: biostatistics, epidemiology, environmental and global health, behavioral science and community health, health services research, management and policy, occupational therapy, physical therapy, clinical and health psychology and speech, language and hearing sciences.

The college was first accredited by CEPH in 2009. This review resulted in a term of five years, with required interim reporting in 2010, 2011, 2012 and 2013. The Council accepted the program’s interim reports, of which the most recent related to issues identified in CEPH’s annual reporting process.
Characteristics of a School of Public Health

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

a. The school shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education.

b. The school and its faculty shall have the same rights, privileges and status as other professional schools that are components of its parent institution.

c. The school shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research, and service. Using an ecological perspective, the school of public health should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem-solving, and fosters the development of professional public health concepts and values.

d. The school of public health shall maintain an organizational culture that embraces the vision, goals and values common to public health. The school shall maintain this organizational culture through leadership, institutional rewards, and dedication of resources in order to infuse public health values and goals into all aspects of the school’s activities.

e. The school shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. As a minimum, the school shall offer the Master of Public Health (MPH) degree in each of the five areas of knowledge basic to public health and a doctoral degree in at least three of the five specified areas of public health knowledge.

f. The school shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in UF’s PHHP. The college is located in a regionally-accredited institution, which has remained accredited by the Southern Association of Colleges and Schools (SACS) since 1913. The college and its faculty and students enjoy the same rights, privileges and status as the other five HSC colleges. Organized into several interdisciplinary departments, including five that align with the core public health knowledge areas, the PHHP is supported by faculty with diverse training and experience. Through its strong ties to the practice community and an array of collaborative instructional programs and research and service activities, the college cultivates faculty and student collaborations with other programs in departments and colleges across campus and throughout the community.

The PHHP’s mission statement emphasizes the importance of instruction, research and service, and its organizational culture embraces key public health values and goals. The college has sufficient physical, human and fiscal resources to offer the Master of Public Health (MPH) and Doctor of Philosophy (PhD) degrees in each of the five core areas of public health. The PHHP has implemented a clear and ongoing...
process of evaluation and planning to monitor and improve student performance and ensure that all internal operations continue to support its mission, goals and objectives.

1.0 THE SCHOOL OF PUBLIC HEALTH.

1.1 Mission.

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

This criterion is met. The PHHP has a clear and concise mission statement and aligned goals, objectives and value statements that reflect a collective commitment to advancing instruction, research and service.

The mission of the PHHP is to 1) preserve, promote and improve the health and well-being of populations, communities and individuals and 2) foster collaborations among public health and the health professions in education, research and service. The college’s core values emphasize the importance of diversity, integrity, social responsibility, teamwork, a commitment to excellence and a respect for human dignity. In support of its mission, the college identifies three goals that relate to instruction, research and service. Each goal is linked to three or four measurable, outcome-oriented objectives.

The mission, values, goals and objectives are accessible on the PHHP website, framed and displayed on the walls of each common space and presented in student handbooks to all incoming students during orientation.

Site visitors determined that the process for developing and revising the college’s mission and supporting values, goals and objectives was strategic, iterative and inclusive. The current mission, values, goals and objectives were originally developed between 2004 and 2007, through a strategic planning retreat, departmental faculty meetings and a series of committee meetings, including those involving the Executive Leadership Committee, the Public Health Executive Committee and the Public Health External Advisory Committee. The PHHP also provided faculty, staff, students and community representatives with several opportunities to review the drafted proposals and submit third-party comments. Incorporating the feedback and suggestions received from internal and external stakeholders, the Accreditation Steering Committee finalized and adopted the statements in the fall of 2007. The college revisited and reaffirmed the strategic plan in 2009 and 2012, and conducted preliminary discussions with the Public Health External Advisory Committee in the fall of 2013 to begin defining the college’s priorities for the future.

The PHHP intends to revise the current strategic plan before the end of spring 2014. On-site discussions with the dean informed the site visit team that the Health Science Center began revising its strategic plan in January 2014, in tandem with the college’s strategic planning process. The dean emphasized that, as a
result of the college’s extensive involvement in and influence on the development of the HSC’s strategic plan, the center-wide strategic plan is consistent with that of the college.

1.2 Evaluation and Planning.

The school shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the school’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 school must conduct an analytical self-study that analyzes performance against the accreditation criteria.

This criterion is met. The PHHP has established explicit protocols for monitoring and evaluating progress against its objectives and for assessing the college’s effectiveness in achieving its mission and goals. The self-study describes the processes used to measure progress against each objective, including the data collection systems, responsible parties and the frequency with which these procedures are conducted.

The self-study presents measurement data for the past three academic years, along with appropriate and specific target values and timelines pertaining to the college’s objectives.

The evaluation of the PHHP’s activities involves several data systems managed by a variety of constituents that serve on various college-wide committees, other internal departments and interdepartmental programs. For example, the department chairs and the associate dean for educational affairs are collectively responsible for monitoring enrollment data, including GRE scores and the race or ethnicity of all incoming students, and the fraction of those enrolled in joint degree programs; the associate dean for research and planning reviews faculty- and department-level research funding and productivity, including the percent of community-based research projects; and the senior associate dean for public health and the associate dean for educational affairs both collect and report information on faculty and student service activities. Student enrollment and graduation data are reviewed at the beginning and end of each semester, research data are tracked quarterly and service activity is monitored annually.

The Executive Leadership Committee, the associate deans and the department chairs responsible for monitoring each data system meet weekly and/or monthly with the dean to review and analyze the overall results of the ongoing evaluation processes, identify and discuss any issues that emerge from the data and formulate plans to ensure goal attainment and continuous quality improvement. The Executive Leadership Committee also convenes during an annual or biennial day-long retreat to further examine the college’s high priority issues and follow up on any action plans discussed during the weekly and monthly meetings.

On-site interviews with the dean and the department chairs revealed that some of the university-wide data systems on which the PHHP relies are incompatible with others and/or are outdated, requiring a
significant amount of manual data entry; as a result, certain data collection procedures, particularly the integration of data, are quite time-consuming. In an attempt to address related technical issues and enhance the capacity of its data systems, the university plans to update and/or replace the software that is currently in use. PeopleSoft Campus Solutions, the new software program in which the university plans to invest, is expected to meet the college’s data collection needs, though it will take the university three to four years to complete the installment across campus. At the time of the site visit, the PHHP was in the process of hiring a senior statistical analyst to navigate and facilitate the college’s transition to the new data systems and support its data collection activities.

Institutional officers, administrative and program staff, department chairs, faculty, students, alumni and community representatives and partners all contributed to the development of the self-study. During weekly meetings of the Executive Leadership Committee, which includes Faculty Council representation, faculty and chairs were engaged in ongoing discussions about the content of the self-study and asked to review drafts of the entire document and provide feedback. Department chairs, program directors and staff assumed primary responsibility for drafting and revising the majority of the document. As validated by on-site discussions with students, alumni, community representatives and members of the Public Health External Advisory Committee, preliminary drafts of the self-study were posted on the PHHP website and several e-mail and newsletter announcements invited stakeholders to review the documents and submit third-party comments.

1.3 Institutional Environment.

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

This criterion is met. UF has remained accredited by the Southern Association of Colleges and Schools since 1913; the most recent review for reaccreditation occurred in 2004 and resulted in a 10-year term. The university responds to nearly 20 specialized accrediting agencies in fields such as nutrition and dietetics, midwifery, pharmacy, law, occupational therapy, physical therapy and psychology.

UF comprises 16 colleges. The PHHP is an interdisciplinary college in the Health Science Center, which is also home to the colleges of dentistry, nursing, medicine, pharmacy and veterinary medicine and the following six research institutes: the Clinical and Translational Science Institute, the McKnight Brain Institute, the Genetics Institute, the UF Health Cancer Center, the Institute on Aging and the Emerging Pathogens Institute.

The PHHP dean, as with the other HSC deans, reports directly to the senior vice president for health affairs on matters related to the college’s research and clinical activities, clinical training and interdepartmental instruction; and to the provost and senior vice president for academic affairs on issues related to state funding. The self-study and on-site discussions with the dean and the senior vice
president for health affairs confirmed that the PHHP enjoys the same level of autonomy and authority accorded to the other HSC colleges. The provost and the senior vice president for health affairs both report to the university president, who in turn reports to the UF Board of Trustees.

State appropriations are allocated by the provost’s office to the PHHP. The dean exercises ultimate budgetary authority over the college and supervises decisions related to the allocation of resources to its various departments. In consultation with the dean, each department chair negotiates a department budget based on the prior year’s allocation and an estimate of all projected expenses. The assistant dean for finance and human resources distributes state funds to each department accordingly.

Department chairs initiate all faculty and staff recruitment, appointments and promotions, with oversight from the dean. All faculty hiring and advancement recommendations, including those for or against promotion or tenure, must be submitted to the dean for review and approval. The dean also appoints all associate deans and department chairs and maintains the authority to terminate or reassign college administrators as necessary and in accordance with university policy.

Department chairs oversee the development and implementation of academic standards, policies and curricula by program faculty and administrators. Curricular or course changes or the establishment or termination of courses, certificates or degree programs must be reviewed and approved by the PHHP Curriculum Committee, the executive associate dean and the dean. Any proposals to modify the MPH curricula or develop new public health programs also require the approval of the Public Health Executive Committee. Subsequently, proposals for new graduate degree programs and courses are reviewed and approved by the Graduate School, and proposals for new professional and undergraduate degree programs and courses are reviewed and approved by the University Curriculum Committee. New degree programs also require the approval of the Faculty Senate, the Board of Trustees and the Florida Board of Governors.

The extent to which the dean can authorize any modifications in the college’s internal administrative structure is limited; he or she must acquire university approval before executing major organizational changes. The approval process varies, depending on the type of structural change requested. For example, establishing new departments or research centers or changing the titles of such entities requires the approval of the University Curriculum Committee, the Faculty Senate and the Board of Trustees. All academic units on campus follow the same procedures for the approval of organizational changes.
1.4 Organization and Administration.

The school 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 school’s public health mission. The organizational structure shall effectively support the work of the school’s constituents.

This criterion is met. Maintaining an organizational structure with clear lines of authority and responsibility, the PHHP facilitates interdisciplinary collaboration in learning, research and service.

The dean oversees the instructional, research, service, fiscal, human resource and information technology activities of the college. As the chief executive officer, he or she supervises the college-wide strategic planning process and assumes responsibility for securing funding, facilities and other resources to advance the college’s mission and goals. Several administrative staff report directly to the dean in coordinating such activities.

The executive associate dean reports to the dean and oversees all academic and student affairs, including student progression and conduct and the development of new curricula and programs, as described in Criterion 1.3. He or she also serves as a key liaison between the PHHP and the UF Division of Enrollment Management, the Graduate School, the Division of Student Affairs and the provost’s office. In the dean’s absence, the executive associate dean serves in the capacity of acting dean.

The associate dean for research and planning, who also reports to the dean, oversees all of the college’s research-related activities, including the processing of contracts and grants. Responsibilities also include mentoring new and junior faculty in support of their career development. Eight staff members report to the associate dean, identify appropriate funding opportunities, review and approve grant proposals and manage and monitor awards.

The associate dean for educational affairs reports to the dean and supervises the daily operations and strategic planning of academic programs across the college. Each program director, therefore, reports to the associate dean. The associate dean for educational affairs consults the executive associate dean on issues concerning any of the interdisciplinary programs. Responsibilities of the associate dean for educational affairs also include directing PHHP-specific SACS accreditation activities. His or her administrative assistant is responsible for student appointment scheduling, academic data management, undergraduate application processing and clinical affiliation agreement tracking.

The director of public health programs, who reports to the associate dean for educational affairs, supervises five staff members who support the MPH and public health certificate programs: the MPH associate director, the MPH internship coordinator, the director of public health professional programs, the coordinator of student services and the MPH program assistant.
The senior associate dean for public health reports to the dean and monitors the development of the college’s public health programs; in doing so, he or she is expected to identify new academic opportunities to engage public health students and to coordinate career development support for faculty. Serving as the CEPH liaison and accreditation coordinator, this associate dean is also responsible for managing data collection and interpretation and collaborating with each department to ensure compliance with the accreditation criteria. The senior associate dean for public health also serves as the primary liaison between the PHHP, the Public Health External Advisory Committee and the practice community. The self-study indicates that, before the end of the 2013-2014 school year, the college will transfer the ongoing accreditation-related responsibilities of this position to the associate dean for educational affairs.

The assistant dean for finance and human resources reports to the dean and supervises the college’s fiscal, human resources and information technology activities.

The assistant director for finance reports to the assistant dean for finance and human resources. He or she is primarily responsible for coordinating the annual budgetary planning process; advising departments on their financial management and compliance with fiscal policies and procedures; conducting annual budgetary review meetings with the dean and individual department chairs; and preparing all financial reports requested by the dean’s office.

The assistant director for human resources also reports to the assistant dean for finance and human resources. The assistant director manages all personnel issues and ensures compliance with human resource policies and procedures, such as those regarding search committees, position descriptions, offer letters and the appointment and termination of faculty and staff.

The network manager for information technology reports to the assistant dean for finance and human resources and manages the college’s central computer equipment and support services for the dean’s office and all of the college’s departments and programs.

The director of public relations reports to the dean and oversees all college-level publications, from content identification and development to layout and design. Publications include print and electronic newsletters and PHHP contributions to Health Science Center and university publications. He or she is also responsible for promoting the college through marketing, social media, website communications and news releases to all types of media.

The associate director for development and alumni affairs reports to the dean. He or she works in concert with the dean, department chairs and program directors to solicit potential benefactors for donations and
to plan fundraising activities. Serving as the primary point of contact with PHHP alumni, the associate
director is also charged with organizing the alumni reunion each fall and conducting the Development
Advisory Board’s semi-annual meetings. This position was open at the time of the site visit.

The college is organized into nine departments in the following areas: behavioral science and community
health, biostatistics, epidemiology, health services research, management and policy, environmental and
global health, occupational therapy, physical therapy, clinical and health psychology and speech, language
and hearing sciences. Each department chair reports to the PHHP dean and supervises his or her
department’s fiscal affairs and student services, the administration and delivery of the respective degree
programs and the teaching, research and service activities of department faculty. Faculty and staff report
directly to their respective department chairs.

The Department of Biostatistics and the Department of Epidemiology are uniquely and organizationally
co-located within the PHHP and the College of Medicine (COM). The two departments were established
in 2010 to replace and merge the PHHP’s Department of Epidemiology and Biostatistics and the COM’s
Department of Epidemiology and health policy research. On-site discussions with faculty revealed that the
transition was well-planned and transparent. Although both departments are physically located one block
away from the main PHHP building, in the Clinical and Translational Research Building (CTRB) and in
closer proximity to the COM, the PHHP dean asserted that he maintains primary responsibility for the
oversight and support of the departments and their respective academic programs, student services and
fiscal and human resources and needs. The involvement of the COM dean in the administration and daily
operation of the two departments is limited to monthly meetings with the PHHP dean to review and
discuss any department-specific issues or concerns. Any disagreements between the two deans may be
brought to the attention of and adjudicated by the senior vice president for health affairs, though both the
PHHP dean and the senior vice president indicated that major disagreements between the two current
parties have not occurred.

As confirmed by the memorandum of understanding provided to site visitors, the departments of
biostatistics and epidemiology differ from the other PHHP departments in five ways: 1) the department
chairs report to both the PHHP dean and the COM dean, 2) faculty and department chair hires require the
review and approval of both deans, 3) indirect cost returns and student credit hours are evenly shared
between the two colleges, 4) the colleges share responsibility for funding the departments’ budgets and,
as discussed in Criterion 4.2, 5) biostatistics and epidemiology faculty may choose whether to be
reviewed for promotion and tenure according to the PHHP criteria or the COM criteria. The dean and the
faculty who met with site visitors seemed pleased with this arrangement and organizational structure.
The PHHP is home to 11 research centers and institutes. The directors of the Center for Pain Research and Behavioral Health, the Center for Pediatric Psychology and Family Studies, the Center for the Study of Emotion and Attention and the National Rural Behavioral Health Center report to the chair of the clinical and health psychology department. The director of the Florida Institute on Disability and Rehabilitation and the Florida Trauma Rehabilitation Center for Returning Military Personnel also serves as the chair of the occupational therapy department, to whom the director of the Institute for Mobility, Activity and Participation reports. The directors of the Hearing Research Center and the Institute for Advanced Study of Communication Processes report to the Department of Speech, Language and Hearing Sciences. The director of the Center for Statistics and Quantitative Infectious Diseases reports to the chair of the biostatistics department. The director of the Florida Center for Medicaid and the Uninsured reports to the Department of Health Services Research, Management and Policy. The center directors oversee the research activities of their respective centers, the faculty and students involved and their center’s efforts to solicit and secure funding.

The physical location of the college and the configuration of its programs and departments are conducive to interdisciplinary learning, research and service. As a member of the Health Science Center, the PHHP remains in close proximity to the colleges of dentistry, nursing, medicine, pharmacy and veterinary medicine and the six HSC research institutes listed in Criterion 1.3. Opportunities for interdisciplinary collaboration among PHHP, nursing and pharmacy faculty, staff and students are particularly abundant, due to the position of the colleges of nursing and pharmacy in the same building as the PHHP. In an effort to promote interdepartmental coordination and collaboration in the development of curricula and the delivery of courses, the dean’s office administers the MPH program, the Public Health Certificate program and the Bachelor of Health Science (BHS) program. The organizational co-location of the departments of biostatistics and epidemiology in the COM, and their physical location in the Clinical and Translational Research Building, provide additional opportunities for faculty, staff and students to engage in collaborative research across both colleges.

As reflected in its mission statement, the college remains committed to fostering collaboration among public health and other health professions. Many faculty members offer courses in a variety of programs and disciplines within the PHHP, while receiving support from faculty in external departments across the HSC. Faculty from each of the college’s departments, for example, teach BHS courses and the delivery of the PhD program in rehabilitation science involves faculty from the departments of occupational therapy and physical therapy, as well as orthopedics and neurology. Many adjunct faculty members and guest lecturers hold joint appointments with departments in other colleges across campus, including the COM, the College of Dentistry, the College of Veterinary Medicine, the College of Health and Human Performance and the College of Liberal Arts and Sciences. Similarly, faculty affiliated with the PHHP’s
research centers and institutes hold joint appointments with various departments within the college, other UF colleges, and other affiliated universities.

The Collaboration Committee, Executive Leadership Committee and other college-wide and university-level committees on which faculty and students participate provide a forum for interdisciplinary collaboration, strategic planning and decision-making.

The college offers many seminars that are open to students and faculty in departments, programs and colleges across campus. The Interprofessional Learning in Health (IPLH) seminar series, for example, joins MPH, occupational therapy and physical therapy students with dental, medical, nursing and pharmacy students and those enrolled in physician assistant programs. Developed by the HSC colleges and the Office of Interprofessional Education, these sessions facilitate team-based learning and interdisciplinary collaboration among students through assigned group discussions and case studies. Faculty and other experts in various departments and disciplines are called upon to instruct and facilitate the seminars. As the ILPH program moves into its second year, the college plans to conduct a formal evaluation of its effects on the knowledge and values of students with regard to collaboration.

The PHHP has developed a number of joint degree programs—both internally and with colleges and departments across campus—that expose students to various public health perspectives and promote students’ cross-disciplinary understanding of the field. The college individually offers a joint degree program in health science and physical therapy. Joint degree programs with other colleges are available in law, medicine, pharmacy and veterinary medicine. The PHHP also provides a framework for students in any bachelor’s, master’s, or doctoral degree program across the university to develop alternative and non-traditional joint degree programs with the MPH. Details pertaining to each joint degree program are outlined in Criterion 2.13.

Collaboration in research is integral to the vision and mission of the college. The college encourages faculty to participate in collaborative research with faculty and students from any college, center or institute across the university. As stated above, the PHHP is home to 11 interdisciplinary research centers, which offer formal opportunities for interdisciplinary investigation. The HSC research centers and those located across campus facilitate research and service collaborations between faculty and students within and outside the college. As a result, the 43% of research grants awarded to the college involve multiple investigators from a variety of disciplines. The Collaboration Committee, as described in Criterion 3.1, is a particularly frequent sponsor of research collaborations between public health and health professions faculty and students. In fact, grant applications submitted to the committee for review must be multidisciplinary and involve students and faculty mentors from at least two departments or units within the college, with one representing a public health discipline and the other a health professions discipline.
The involvement of faculty in collaborative research and service activities complements and enhances their instruction of students and serves as a platform for faculty to introduce the importance of interdisciplinary collaboration into the classroom.

1.5 Governance.

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

This criterion is met. The PHHP demonstrates a clear governance structure with broad representation and defined roles and responsibilities. Fifteen standing committees participate in policy development and decision-making, program planning and evaluation, budget and resource allocation, student recruitment and admissions and curriculum development, among other functions.

The Executive Leadership Committee convenes weekly to review data on college-wide objectives, identify and discuss any emerging issues and formulate plans to ensure goal attainment and continuous quality improvement. Responsibilities also include facilitating the implementation of strategic plans and other college-wide initiatives and operations and advising the dean on administrative policy development and implementation. The dean, who serves as the chairperson, appoints all of the associate deans and assistant deans for membership on the committee. Membership also includes all of the department chairs and the elected chair of the Faculty Council.

The Public Health Executive Committee meets at least three times per year and oversees all policy decisions related to the development and management of the college’s public health programs, including the corresponding academic standards and policies, curricula and student recruitment and admissions. The dean serves as the chairperson and appoints several associate deans for membership on the committee. Membership also includes the directors and associate directors of the public health programs, the chairs of the five public health departments, the MPH concentration coordinators, the MPH internship coordinator, the chair of the Public Health External Advisory Committee and one student representative—the president of the Public Health Student Association (PHSA).

The Bachelor of Health Science Oversight Committee is responsible for establishing the curricular requirements and sequencing of the BHS program, monitoring its evaluation procedures and student learning outcomes and advising the BHS program director on the daily operations of the program. The dean appoints the BHS program director as the chair of the committee, which convenes once each semester. Membership includes one student representative, who serves as the president of the Health Science Student Organization, and all instructors of core BHS courses, though all BHS faculty members are welcome to participate.
The Rehabilitation Science PhD (RSD) Steering Committee oversees all aspects of the PhD program in rehabilitation science, from its marketing activities, scholarship awards and curricular changes to student admissions and progression, policy development and the appointment of program faculty. Chaired by the RSD program director, the committee meets on a monthly basis. Membership includes two faculty members from the Department of Physical Therapy and one from the Department of Occupational Therapy.

The Faculty Council serves as the voice of the entire faculty body and as a forum for the mutual exchange of ideas between college administrators and faculty. The Council convenes on a monthly basis to develop and make policy recommendations on a broad range of issues, including shared governance, faculty welfare and development, faculty awards, resource allocation and the college’s mission, strategic plan and commitment to instruction, research and service. Responsibilities also include advising the dean in college-wide decision-making and supervising elections to the college’s standing committees. The Council includes the dean and one elected faculty representative from each department. As stated above, the chairperson also serves as a member of the Executive Leadership Committee.

The Research Committee consists of one elected faculty representative from each department, one research staff member, one college administrator and one doctoral student; the research staff member and the college administrator are both appointed by the dean. The committee meets monthly to coordinate PHHP research activities and events, review research awards and grant proposals, identify community-based research opportunities and discuss the college’s overall research activities and policies.

The Curriculum Committee is primarily responsible for reviewing and approving proposals for curricular changes and the development of new courses and programs. Members include one elected faculty representative from each department and one student representative. The committee meets one time each month.

The Promotion and Tenure Committee meets semi-annually to review all matters relating to faculty promotion and tenure. The committee is charged with reviewing tenure and promotion guidelines, considering faculty candidates for appointment, promotion and/or tenure and providing subsequent recommendations to the dean. Membership consists of one representative from each department; all members must hold the rank of associate, research associate or clinical associate professor, or higher.

The Financial Aid and Scholarship Committee comprises the PHHP financial aid officer and a minimum of five faculty members; the faculty members are recommended by the Faculty Council and appointed by
the dean. The committee convenes annually and is responsible for advertising, organizing and reviewing student applications and making subsequent recommendations to the dean for PHHP-specific scholarships, loans and awards. The committee also reviews nomination packets and makes recommendations to the dean for college- and university-level faculty and staff awards, as requested by the dean.

The Teaching Excellence Committee solicits nominations, reviews applications, and makes recommendations to the dean for recipients of the teaching excellence, teacher-advisor and teacher-scholar awards. The committee performs these activities annually. Membership includes three faculty members and one student representative; the three faculty members must be previous recipients of a teaching award.

The Collaboration Committee comprises two student representatives and one faculty representative from each department. The committee is charged with promoting research, teaching and service collaborations among faculty and students across the public health and health professions departments. Monthly committee meetings provide a forum for participants to plan college-wide networking opportunities and events to highlight collaborative research activities.

The Diversity Committee includes one faculty representative from each department, the dean, the assistant dean, the dean’s administrative coordinator, two administrative staff and one graduate student; one of the faculty members is appointed committee chair. The committee, which meets once a month, is charged with examining and enhancing multicultural competency in the college and promoting campaigns to increase awareness about the importance of health equity and to reduce health disparities through education, research and service. A more detailed description of the committee’s activities is provided in Criterion 1.8.

The Blended Learning Task Force convenes every two weeks and is charged with developing and implementing a five-year plan to integrate new educational strategies, such as blended courses, into the curricula of instructional programs; blended courses, further discussed in Criterion 2.14, involve a combination of in-person and online components. The Task Force continues to identify courses that are best suited for blended learning, set targets for implementation by the college, develop an infrastructure to support blended learning, create a business plan, and assess the quality of learning for students and faculty. Membership includes one faculty representative from each department, one staff member, one research scientist from the dean’s office and the executive associate dean, who serves as the committee chair.
The Public Health External Advisory Committee convenes once each year to advise the college on specific aspects of public health workforce needs, MPH programming, internship opportunities for students, curricular content, community engagement, research collaborations and the college’s priorities for the future. Membership includes the dean emeritus, two department chairs, the former vice president for health affairs, 10 representatives from programs and research centers throughout the HSC and across campus and six community representatives from a variety of local, state and national public health agencies. Between scheduled committee meetings, the dean and other college administrators consult individual members of the committee on a frequent basis.

The Development Advisory Board consists of 35 members, the majority of whom are alumni, former faculty and/or senior leaders in the practice community. The board, which meets twice each year, advises the college on strategies for generating resources to meet its strategic goals and develop new projects and programs.

The Accreditation Steering Committee, mentioned in Criterion 1.1, is formed on an ad hoc basis to prepare the PHHP self-study and guide the reaccreditation process. Members include the dean, the associate and executive associate deans, the senior associate dean for public health, the director of public health programs and two additional college administrators. According to the senior associate dean for public health, one student also served as a member of the committee and graduated before the time of the site visit.

Faculty search committees are formed on an as-needed basis, at the request of the chair of the department in which a particular position is located, to recruit and evaluate prospective faculty members. Search committees for new tenure-track faculty positions require the approval of the dean, while department chairs advertising non tenure-track positions confer with department faculty to select appropriate search committees. Search committees include faculty members within the respective department, but they may also include qualified faculty from outside the department. Students are also granted opportunities to assess candidates’ qualifications through individual meetings, group interviews and candidate presentations. The search committees provide department chairs with recommendations for hiring selected candidates; each department chair shares his or her final recommendations with the dean, who has the authority to accept or reject the candidates presented or request that additional candidates meeting the established search criteria be offered for consideration.

In addition to supporting the governance of the college, twenty-five percent of PHHP faculty are active in other department-, college- and university-level committees. The self-study provides information about the standing and ad hoc committees on which PHHP faculty serve, including the COM’s Population Health Education Group, the HSC Student Conduct Committee, the UF Faculty Senate, the UF Graduate
Council and the University Curriculum Committee. Many faculty members hold several committee appointments within the college and across campus. The self-study also notes that the PHHP and the COM are in the midst of developing a set of policies to establish an appropriate process for electing representatives from the departments of biostatistics and epidemiology to serve on the UF Faculty Senate, due to the organizational co-location of the departments.

Advocating for students’ needs and providing input on matters related to the curriculum and other program requirements, students serve as active members on the Public Health Executive Committee, the BHS Oversight Committee, the Curriculum Committee, the Teaching Excellence Committee, the Collaboration Committee and the Diversity Committee. Students are also appointed to a variety of departmental and ad hoc committees. Each student representative is nominated by the chair of his or her department or by the dean’s office, though participation is voluntary. The College Council, the primary student organization at the PHHP, was established to promote an interdisciplinary approach to health services, enhance student awareness about the various public health and health professions within the college and organize and facilitate community service projects. The college is also home to several program-specific student organizations, including the Health Science Student Organization and the Public Health Student Association. The Health Science Student Organization provides opportunities for students in the BHS program to interact with prospective students and engage in service activities across campus and in the community. Similarly, the PHSA seeks to connect MPH students to community service and social and professional development opportunities. Over half of the student body, 30% of which holds a leadership position, reports participation in at least one student organization.

Students interviewed on site indicated that the college is very receptive and responsive to their needs, concerns and input on academic and administrative issues.

1.6 Fiscal Resources.

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

This criterion is met. The college’s fiscal resources, which have steadily increased since the last accreditation review, adequately support the college’s mission, goals and instructional, research and service activities.

Since the 2010-2011 fiscal year, the university has adopted and utilized the Responsibility Center Management (RCM) budget model. The fundamental basis of the RCM model is to move decisions and resulting revenues and expenses to designated responsibility centers, such as the PHHP and other colleges, and to create transparency in the budget allocation process. By definition, the PHHP must
generate revenue, which is allocated to the college after costs are deducted. Costs are categorized as "shared" (e.g., utilities) and "unit specific". The RCM model is updated each year to accommodate any changes in the fiscal environment and assure adequate resources for all units across the university.

Under the RCM budget model, the PHHP must pay for services provided to the college through an allocation or assessment system. The amount of money that the college pays to support core university functions is based on the amount of money that the college spends over the 18-month period ending on December 31 of the year preceding the beginning of the budget year. Any revenue that the college saves is exempt from such assessments.

The Florida Legislature appropriates funds to three budgetary units at the university: the Health Science Center, the Institute of Food and Agricultural Sciences and the Education and General unit. All PHHP-specific state funds are processed through the Education and General unit and the provost's office. As with all other colleges within the university, the formula used to determine the amount of funding the college will receive each fiscal year is primarily based on student credit hours and the weighted cost of delivery. The dean supervises the college’s internal budget and resource allocation process in close consultation with the provost.

Grant and contract awards are transferred directly to the principal investigator’s department. The distribution of indirect cost recovery funds is based on expenditures in designated categories: 10% and 7.5% of returns are distributed to the principal investigators and their departments, respectively; any participating research centers or institutes receive an additional 7.5% and the remaining funds are returned to the college. Although indirect cost recovery funds are used to support faculty salaries, the dean noted that 100% of faculty salaries are guaranteed, regardless of how much research money faculty receive. Due to the organizational co-location of the biostatistics and epidemiology departments in the COM, research funds and the associated indirect costs generated by biostatistics and epidemiology faculty are evenly split between the two colleges.

Table 1 presents the PHHP’s budget for the last five years. The budget primarily covers personnel costs, including salaries for the dean, the associate deans and primary faculty and partial salary support for jointly-appointed adjunct faculty.

The PHHP’s financial resources have grown significantly over the past five years. The college has also been successful in diversifying its sources of income, as planned at the time of the last accreditation review, and offsetting slight reductions in state funding with income generated from external research, service and training awards, gifts and self-funded programs.
### Table 1. Sources of Funds and Expenditures by Major Category, FY 2009 to 2013*

<table>
<thead>
<tr>
<th>Source of Funds</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
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<tr>
<td>State Appropriation</td>
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<td>Grants and Contracts</td>
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<td>Indirect Cost Recovery</td>
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<td>Endowment</td>
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<td>Gifts</td>
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<td>Self-Funded Programs</td>
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<td>Service Income</td>
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<td><strong>Total</strong></td>
<td><strong>$38,321,725</strong></td>
<td><strong>$47,607,447</strong></td>
<td><strong>$47,406,851</strong></td>
<td><strong>$55,239,776</strong></td>
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<table>
<thead>
<tr>
<th>Expenditures</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
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<tbody>
<tr>
<td>Faculty Salaries and Benefits</td>
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<td>Staff Salaries and Benefits</td>
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<td>Operations</td>
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<td>University Tax</td>
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<td><strong>Total</strong></td>
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<td><strong>$39,535,092</strong></td>
<td><strong>$44,071,689</strong></td>
<td><strong>$42,572,750</strong></td>
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</table>

*Data are reported by fiscal year, period 07/01 to 06/30

Contract and grant funding, which increased from $16.4 million in fiscal year 2009 to over $26.4 million in fiscal year 2013, is the largest source of income and contributes 45% of the college’s total revenue. Sixty percent ($15.8 million) of this external funding for research, training and service was generated by the college’s public health departments and faculty in 2013.

The university allows for certain degree and non-degree programs to be offered in a self-funded model, which allows the PHHP to capture and re-coup its full overhead costs. The income generated by self-funded programs has risen dramatically from $79,000 in 2009 to $1.3 million in 2013.

The PHHP identifies two measures by which the college assesses the adequacy of its fiscal resources: 1) the amount of state appropriations that the college receives after taxes are deducted and 2) the amount of grant and contract funding awarded to the college for research, training and service. In principle, the college can influence its state funding by increasing student credit hours, though such influence is limited by the university’s annual adjustments to the RCM model.

While discussions with the dean, faculty and college administrators confirmed that they are more than satisfied with the total amount of fiscal resources available to the college, site visitors were also informed that the RCM model for the allocation of state appropriations has placed significant limitations on college-level planning; the methodology is not consistent from year to year and is not revealed in advance. According to the self-study, the university is aware of such limitations and is in the process of developing a plan to address them. The dean is actively involved in these discussions.
1.7 Faculty and Other Resources.

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

This criterion is met. The PHHP exhibits an adequate faculty complement and sufficient physical resources to assure the continuity of the college’s programs and meet its commitments to students and other constituents.

At the time of the site visit, the college employed a total of 141 primary faculty and 85 adjunct faculty, 51 and 45 of whom, respectively, support public health departments. The biostatistics, behavioral science and community health, environmental and global health, epidemiology and health services research, management and policy departments are supported by 14, 10, nine, 12 and six primary faculty, respectively. The primary faculty complement has grown steadily over the last three years and, as a result, student-faculty ratios for the biostatistics, behavioral science and community health, environmental and global health and epidemiology departments have remained under 10:1. As of fall 2013, student-faculty ratios, based on primary faculty FTE, for each of these four departments ranged between 2.3:1 and 4.5:1. Although the health services research, management and policy department’s student-faculty ratio, based on primary faculty FTE, exceeded the 10:1 threshold during each of the last three years and peaked at 14:1 in 2012-2013, the department’s student-faculty ratio, based on total faculty FTE, has ranged from 8.4:1 to 9.8:1 over the last three years. According to the self-study, the chairs of the biostatistics and health services research, management and policy departments are both currently searching for additional faculty members.

On-site discussions with the dean revealed that the university considers primary biostatistics and epidemiology faculty members to be full-time (1.0 FTE) in both the PHHP and the COM.

The PHHP is supported by 230 staff members, 42 of whom work in the dean’s office and 69 of whom perform many of the public health departments’ daily administrative operations, including student appointment scheduling, academic data management and student recruitment and admissions. Departments across the college are assigned between six and 43 administrative personnel; each public health department is supported by seven to 22 staff members.

The PHHP is located in the Health Science Center, in close proximity to the other HSC colleges—particularly the colleges of nursing and pharmacy, which are housed in the same building as the PHHP. The HPNP Complex is a large, open facility with numerous shared conference rooms and common spaces for student and faculty use. All three colleges share a 500-seat auditorium, a 76-seat distance learning lab and 20,000 square feet of classroom space, each equipped with a broad range of audio-
visual equipment and state-of-the-art computer support. The PHHP also has access to classrooms in the Communicore Building of the Health Science Center, located across a courtyard from the HPNP Complex. In addition to a 520-seat auditorium and two large conference rooms, the Communicore Building houses classrooms ranging in size from 10 to 179. The departments of biostatistics and epidemiology occupy two floors of the Clinical and Translational Research Building, which is located one block away from the HPNP Complex. In addition to faculty and staff offices, the CTRB houses several conference rooms and common spaces that are shared by the two departments and the COM. On-site discussions with faculty, staff and students did not reveal any concerns about the amount of classroom or office space.

As the college transitions more courses to a blended learning format, explained in Criterion 2.14, and promotes students’ application of knowledge and skills in small groups, classroom space is increasingly in demand. On-site observations and discussions with the dean confirmed that plans are underway to ensure that the university is able to meet the PHHP’s future space needs. The construction of a new classroom building, adjacent to the HPNP Complex and intended for use by all HSC colleges, began in the fall of 2013.

The college’s 25 laboratory facilities, four of which are managed by public health departments, provide specialized equipment and state-of-the-art facilities to support the scientific research interests and teaching activities of students and faculty across the PHHP. Resources include both wet and dry laboratories.

The PHHP maintains an adequate collection of computer facilities and equipment to support the diverse needs of its faculty, staff and students. The college owns a total of 899 desktops and laptops and 40 servers; in addition to 76 computers in the dean’s office, the five public health departments each utilize between 14 and 69 computers. Faculty, staff and students also have access to 127 shared computers and several printers in the Health Science Center Library. The PHHP Information Technology office provides technical assistance to all of the college’s faculty, staff and students; services include systems administration, security, software development and customer support. SAS, STATA, SPSS, MATLAB and JMP are included in the suite of available statistical software.

The University of Florida Library System consists of seven libraries that, collectively, maintain an extensive collection of more than 4.7 million volumes, 1.2 million government documents, 6.4 million microforms, 1.0 million maps and images, 150,000 full-text e-journals, 800,000 electronic books and 800 online research databases. The HSC libraries, which provide access to over 582,000 electronic books, nearly 127,000 electronic journal volumes and almost 349,000 printed journal volumes, serve as primary information centers for PHHP faculty, staff and students. Students also have access to remote library
access and free interlibrary loans and document-delivery services. The designated public health liaison, along with other HSC librarians, conduct tutorials each semester to guide faculty, staff and students in utilizing and navigating the libraries’ online research databases, managing data and preparing bibliographies.

1.8 Diversity.

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

The criterion is met. The PHHP demonstrates a concerted commitment to cultivating diversity and cultural competence through its instructional, research and service practices and among its faculty, staff and students.

The self-study outlines three goals for achieving diversity and cultural competence within the college: to 1) enhance the recruitment and retention of a diverse student body and faculty, 2) foster a culture that encourages open and constructive dialog about cultural differences and 3) assure cultural competence in the curricula across programs. These goals are reinforced by department- and program-specific diversity promotion plans, as well as the university’s mission and strategic plan to enhance the overall climate of diversity across campus. The Diversity Committee has been instrumental in establishing the PHHP’s diversity and cultural competence goals and plans, monitoring the college’s diversity-related data and progress against its related objectives and developing plans to address emerging issues.

The college identifies African Americans and Hispanics/Latinos as underrepresented in its student body. African American and Hispanic/Latino student populations, 8% and 13% respectively, are significantly lower than that of the State University System and the state of Florida and have thus prompted the college to focus its attention on these particular ethnic groups. Enrollment for Hispanic/Latino students has steadily increased over the past three years, though the college has not reached its target of 15%. African American student enrollment, on the other hand, has slightly decreased over the past three years and reversed the college’s progress towards its target of 10%. Minority student enrollment also varies significantly by degree program: while minority student enrollment in the BHS program, for example, exceeds the college-wide targets for diversity, approximately 23% and 30% of students enrolled in MPH programs and public health PhD programs, respectively, are African American or Hispanic/Latino. Several other programs, such as the MS in biostatistics and the MS in epidemiology, have not enrolled students of either ethnicity.

The college also recognizes that African American and Hispanic/Latino faculty and staff are underrepresented. The percent of primary African American faculty (4%) is lower than the national average and roughly half the rate of the African American student population. Although the fraction of primary Hispanic/Latino faculty (5%) is slightly higher than the national average, the college seeks to
ensure that each minority faculty population is comparable to that of the respective minority student group. The Hispanic/Latino faculty population has only slightly decreased since 2011, while the fraction of African American faculty has slightly increased during the same time frame. The percentage of African American staff (11%) is lower than that of the African American population in the region. Although the Hispanic/Latino staff population (8%) is slightly higher than the local population, it is considerably lower than the percentage of Hispanic/Latino students in the college. Ultimately, the college seeks to create a faculty and staff complement that reflects the diversity of its student body and the surrounding communities it serves.

The PHHP supports the attainment of its diversity goals with policies that create a climate free of harassment and discrimination, including university policies that prohibit sexual harassment and discrimination, enforce equal employment opportunity and affirmative action and require the provision of accommodations for individuals with disabilities. The college also follows the university’s procedures for tracking and responding to related complaints. Information and announcements regarding these policies are posted on InfoGator, an online resource portal for members of the university, and disseminated to faculty, staff and students through faculty and student handbooks and during faculty and student orientations.

The college prioritizes efforts to recruit, admit, retain and graduate a diverse student body, and create a welcoming and inclusive learning environment. In accordance with university policies, the PHHP admits students regardless of race, ethnicity, age, disability, religion, sex or national origin. The UF Office of Graduate Minority Programs, the UF Career Resource Center and the UF Multicultural and Diversity Affairs Division all help the college connect prospective and enrolled minority students with financial aid packages, mentoring services and other materials that support their transition to university life and their pursuit of advanced degrees. Services include a campus visitation program that provides prospective minority students with an opportunity to visit the campus, learn more about the college’s degree programs and meet with current graduate students and faculty. Research assistantships and summer fellowships for newly admitted minority and first generation graduate students serve as additional recruitment tools.

During a four-week summer camp organized by the COM’s Office for Diversity and Health Equity, faculty from each department conduct presentations to introduce minority high school students to the PHHP and inform them about the academic and career opportunities the college has to offer. The self-study suggests that the college plans to coordinate additional PHHP-specific shadowing opportunities for prospective minority students in the near future.

The PHHP also prioritizes efforts to promote and retain a diverse faculty and staff, ensure equity and transparency in the recruitment process and create a welcoming and inclusive working environment. The
college abides by university rules and regulations regarding equal opportunity in recruitment and employment, without regard to race, color, national origin, sex, age, disability or veteran status. In an effort to access a diverse pool of applicants, all open faculty and staff positions are posted to the INSIGHT into Diversity website. The college also follows the university’s affirmative action policies, which are designed to expand employment opportunities for qualified women and minorities. All faculty and staff search committee members are required to review the UF Faculty Recruitment Toolkit, which outlines best practices for recruiting diverse faculty and underrepresented minority candidates, and to complete an online training session about diversity considerations and university requirements pertaining to the search process.

All newly hired faculty and staff are required to attend an orientation, during which they are introduced to the university’s policies pertaining to diversity, equal employment opportunity and sexual harassment, among others. Faculty and staff are trained in sexual harassment prevention and given the option to complete additional courses that address specific diversity-related issues. In support of equitable and unbiased career advancement, start-up packages and professional development opportunities are provided to all faculty and staff, including minorities. Minority faculty are encouraged to apply for research supplements and other funding opportunities that specifically target minorities.

The aforementioned strategies have yielded promising results. In 2012-2013, for example, faculty hires included two Hispanics/Latinos and one African American. Since 2009, four research supplements have been awarded to minority faculty. The college has also been successful in disseminating information about diversity and cultural competence to faculty and students, though not as consistently with staff. Survey data on staff perceptions of their work environments, specifically with regard to diversity and cultural competence, were collected for the first time in 2013 and suggest that 85% of staff members perceive the work environment to be tolerant and supportive of diversity. More than 90% of respondents reported that they are familiar with university policies regarding discrimination and harassment, though 20% were unaware of how to report related complaints. The survey also reveals that more than 13% of staff respondents were unaware of the college’s diversity and cultural competence mission and goals and 10% were unaware of the university’s related resources.

The PHHP’s new diversity website, which serves as a central repository of the college’s diversity and cultural competence goals and links to related university resources, is expected to increase faculty, staff and student awareness of diversity and inclusion initiatives within the college and across the university.

Diversity and cultural competence are well integrated into the curricula of the college’s degree programs. Most degree programs require students to take several courses in which diversity and cultural competence are addressed. The internship requirement also exposes students to culturally and ethnically
diverse workplace environments, in which students must apply their diversity and cultural competence knowledge, skills and training. Other service learning opportunities include a global health workshop, which prepares students for international service and research projects; HealthStreet, a community-based program in which students interact with diverse communities and medically underserved individuals; the Rural South Public Health Training Center (RSPHTC), in which students participate in public health workforce development, research and service projects related to health disparities; and the Better Tomorrow for Haiti initiative, which joins faculty and students in collaborative research and service projects in Haiti.

The self-study acknowledges that the college has yet to develop uniform standards by which to assess the effectiveness of each department’s cultural competence instruction and service learning activities. At the time of the site visit, the Diversity Committee was still working to develop a cultural competency education framework and establish related learning objectives and standards. Once complete, the framework will serve as an important measure by which the college can evaluate cultural competence learning activities and make evidence-based recommendations to improve the curricula. The Diversity Committee also plans to 1) solicit recommendations from departments that have achieved a diverse student body and share the best recruitment and retention practices with departments across the college and 2) organize a series of lectures, panel discussions and student poster presentations on Diversity Day.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

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

This criterion is met. In addition to professional MPH and academic PhD degrees in each of the five core public health areas, the PHHP offers the Bachelor of Health Science degree and various academic and professional master’s and doctoral degrees that align with the college’s mission.

The PHHP offers the BHS degree with tracks in health science, pre-occupational therapy, pre-public health and communication sciences and disorders.

The college offers professional MPH degrees in biostatistics, epidemiology, environmental health, public health management and policy, social and behavioral sciences and public health practice, which is offered in both on-campus and online formats. The PHHP offers academic Master of Science (MS) degrees in biostatistics and epidemiology, as well as several other professional degrees: a Master of Arts (MA) degree in communication sciences and disorders, a Master of Health Administration (MHA) degree,
a Master of Occupational Therapy (MOT) degree and a Master of Health Science (MHS) degree in environmental and global health, or “one health,” a cross-disciplinary concentration involving a combination of public health, environmental health and veterinary health.

The PHHP also offers a professional Doctor of Physical Therapy (DPT) degree and academic PhD degrees in biostatistics, epidemiology, environmental and global health, social and behavioral sciences, health services research, one health, clinical psychology, rehabilitation science and communication sciences and disorders. The Department of Speech, Language and Hearing Sciences offers a professional Doctor of Audiology (AuD) degree in both on-campus and online formats.

The college currently offers joint MPH degrees with health science, law, medicine, pharmacy, veterinary medicine and physical therapy. The Department of Health Services Research, Management and Policy offers a joint MHA degree with business administration. Other joint degree programs are developed and offered on an individual basis with the review and approval of the student’s advisor and both of the participating programs, as described in Criterion 2.13. Table 2 lists the college's standard degree offerings at the time of the site visit.

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<thead>
<tr>
<th>Table 2. Instructional Matrix</th>
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<tr>
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<tr>
<td><strong>Bachelor's Degrees</strong></td>
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<tr>
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<tr>
<td>Pre-Occupational Therapy</td>
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<td>Pre-Public Health</td>
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<td>Communication Sciences and Disorders</td>
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<td><strong>Master's Degrees</strong></td>
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<td>Epidemiology</td>
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<tr>
<td>Environmental and Global Health</td>
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<tr>
<td>Social and Behavioral Sciences</td>
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<tr>
<td>Health Services Research</td>
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<tr>
<td>One Health</td>
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The college classifies the MHS in one health as a non-public health degree, due to its strong emphasis on veterinary health, in addition to public health and environmental health. Although the PhD degree in one health focuses on the same three disciplines, the college classifies the degree as a public health degree.

In addition to the five core courses and the internship and culminating experiences, MPH students must complete between 12 and 27 semester-credits in the area of specialty, depending on their concentration, and complete appropriate electives.

The self-study notes that the college is considering offering the public health management and policy concentration in two separate tracks: one in public health policy and one in public health management.

2.2 Program Length.

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

This criterion is met. One semester credit is defined as 16 hours of classroom instruction. All traditional MPH degrees, as well as the online MPH in public health practice, require a total of 48 semester-credit hours. The MPH degree is also offered in an accelerated 42-credit format for individuals who already possess terminal health-related degrees such as an MD, PhD, DVM, PharmD, DMD, DDS or DO. Over the last three years, the PHHP has not awarded an MPH degree to a student with fewer than 42 semester credits.

The college approves course exemptions and substitutions, though such requests are thoroughly reviewed by the concentration coordinator and/or the course instructor on a case-by-case basis. The
course instructor takes the following aspects into consideration: course syllabi, course competencies and the level of work required. No credit is awarded for waived courses. When a course waiver is approved, the student must substitute a higher-level course for the required units.

2.3 Public Health Core Knowledge.

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

This criterion is met. MPH students must complete coursework that allows them to attain knowledge about the five core areas of public health. The core biostatistics course requirement differs slightly across concentration areas: students in the biostatistics, environmental health and epidemiology concentrations must take PHC 6052, Introduction to Biostatistical Methods; all other MPH students must take PHC 6050 Statistical Methods for Health Science I. The core knowledge expectation is achieved through the successful completion of the courses identified in Table 3.

<table>
<thead>
<tr>
<th>Core Knowledge Area</th>
<th>Course Number and Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biostatistics</td>
<td>PHC 6050 Statistical Methods for Health Science I (SPSS) OR</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>PHC 6052 Introduction to Biostatistical Methods (SAS)</td>
<td>3</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>PHC 6001 Principles of Epidemiology in Public Health</td>
<td>3</td>
</tr>
<tr>
<td>Environmental Health Sciences</td>
<td>PHC 6313 Environmental Health Concepts in Public Health</td>
<td>3</td>
</tr>
<tr>
<td>Social and Behavioral Sciences</td>
<td>PHC 6410 Psychological, Behavioral, and Social Issues in</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Public Health</td>
<td></td>
</tr>
<tr>
<td>Health Services Administration</td>
<td>HSA 6114 Introduction to the U.S. Health Care System</td>
<td>3</td>
</tr>
</tbody>
</table>

All of the core course syllabi provided to site visitors explicitly list the learning objectives associated with each course and reflect an appropriate level of breadth and depth to expose MPH students to the five core knowledge areas.

Waivers for core courses, which undergo the same review process as waivers for all other required courses, are permitted on a case-by-case basis and require the substitution of a higher-level course. Students may transfer and substitute core MPH coursework completed at another institution. The corresponding course instructor, concentration coordinator and program director review the syllabi of each course and verify that the appropriate content and competencies are addressed before deeming it acceptable to count for core MPH credit. In cases where a core MPH course is completed at another CEPH-accredited school or program, the course instructor is not involved in the review or approval process.
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 students’ areas of specialization.

This criterion is met. The PHHP requires all MPH students to complete a five- to eight-credit (240 to 384 hours) internship, depending on their concentration. Before the start of their internship experience, students enrolled in programs that offer a flexible internship component—a range, rather than a specified amount, of hours or credits required—collaborate with their faculty advisor, the internship coordinator and the preceptor to determine the number of credits they will receive for the completion of their internship project. The decision is based primarily on the project length and level of rigor. Faculty who met with site visitors confirmed that most MPH students complete five-credit internships.

Conducted during the student’s final semester and after the completion of all core and concentration courses, the internship is planned, organized, supervised and strategically designed to provide an opportunity for students to apply their academic knowledge and acquired skills to a specific public health project. The internship also serves to extend students’ learning experiences beyond the classroom and into a professional environment.

The internship team consists of the site preceptor, the student, his or her faculty advisor and the MPH internship coordinator. The self-study indicates that the college plans to hire a program assistant to support the administrative tasks associated with internships.

Students are asked to complete an internship questionnaire, in which they identify their long-term career goals, areas of interest and site preferences, as well as the MPH competencies that they have mastered through the curriculum and those that might be reinforced through the internship experience. Students also prepare a project proposal and work plan, in which they identify at least one core competency and one concentration-specific competency on which to base their internship project, though most internships incorporate more than one of each.

Students may select internship sites from a pre-approved list of opportunities identified by the internship coordinator, or they may identify other agencies with which to partner. Students are also encouraged to attend an annual preceptor luncheon, during which students can meet potential preceptors and discuss options for internship projects. The internship coordinator and faculty advisor review and approve prospective preceptors and internship sites to ensure adequate guidance and supervision, organizational capacity to support students and appropriate projects and deliverables that align with the MPH competencies, the proposed learning experiences and the students’ career goals. Standard preceptor qualifications also include a master’s degree and extensive public health practice experience, which is
reviewed on a case-by-case basis; the MPH program has not established a quantitative requirement regarding a minimum number of years of experience.

Working students may fulfill the internship requirement at their current place of employment, but only in rare circumstances. To preserve the educational quality of such a practical experience, students must report to someone other than their current supervisor and work on a completely different project and in a different department. The student and site preceptor must sign an agreement to comply with these conditions before the internship coordinator and faculty advisor will review and approve such a request.

In addition to hosting an annual preceptor luncheon to introduce current and prospective preceptors to the MPH faculty and students, the internship coordinator provides all preceptors with a copy of the MPH preceptor handbook and a voice-over slide presentation to help orient new preceptors, in particular, to their responsibilities. A separate slide presentation is also available to help orient faculty to their advising responsibilities. The internship coordinator contacts each preceptor mid-semester to assess the progress of the internship and assist with any challenges; he or she is also readily available throughout the semester to answer any questions and provide ongoing support.

Students are required to attend an internship orientation prior to selecting their internship sites. Midway through the internship, faculty advisors participate in an on-site evaluation session with each student and preceptor in order to assess the student’s progress, provide both the student and preceptor with informal feedback and discuss, if necessary, any possible modifications to enhance the internship experience going forward. The faculty advisor also meets and remains in constant contact with the student throughout the progression of the internship.

After the completion of the internship, students must prepare and submit a time log and a brief description of the completed projects and assignments. Required deliverables also include a final preceptor evaluation and a final student assessment. Preceptor evaluation forms provide preceptors with an opportunity to evaluate the student’s overall performance, including their professional behavior and demonstration of the competencies identified in the project proposal. Similarly, students assess their satisfaction with the preceptor and internship site. Ultimately, the faculty advisor is responsible for conducting a final evaluation of each student’s performance and assigning an overall course grade (pass or fail) based on the completed assignments and the preceptor and student evaluation results.

Internship waivers are not permitted.

Students who met with site visitors spoke highly of their internship experiences and the support provided through the internship orientation and by their faculty advisors and the internship coordinator. The most
recent student exit survey confirms that over 90% of respondents were either satisfied or extremely satisfied with 1) the applicability of the internship experience to the classroom and/or their career goals and 2) their increased knowledge and understanding of the field and further attainment of the programmatic competencies as a result of the experience. Additionally, 70% were either satisfied or extremely satisfied with the advising they received from faculty throughout the internship. The preparation, dedication and well-developed skills of the MPH interns far exceeded the expectations of community partners who were interviewed on site. In fact, many preceptors who have been so impressed with the interns and the quality of their work have hired several graduates of the program.

2.5 Culminating Experience.

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

This criterion is met. All MPH students, regardless of concentration, are required to complete a culminating experience during their final semester and in tandem with the internship. While the content area of this requirement varies by concentration, all such experiences are designed to assess and ensure each student’s ability to integrate, synthesize and apply the knowledge they acquired in their coursework.

The MPH culminating experience is closely integrated with the internship, though it consists of several distinct components. Prior to the commencement of his or her internship, each student is required to attend six culminating experience presentations by graduating students; at least two of these presentations must be conducted by students in the same concentration. This requirement, as conveyed through on-site discussions with faculty, helps to familiarize students with the culminating experience requirements and the innovative work of their peers.

During the internship period, students must also attend 16 one-hour seminar sessions, held one to two times per week throughout the semester. Offered by the PHHP’s various departments, these sessions engage students in professional development workshops and highlight a variety of interdisciplinary and emerging public health issues. Three of these sessions, which comprise the Interprofessional Learning in Health series, facilitate team-based learning and interdisciplinary collaboration among students through assigned group discussions and case studies. At the beginning of each session, students are tested on the assigned reading material. At the conclusion of the series, student self-assessments and peer evaluations are used to monitor students’ application of teamwork skills and content knowledge.

After the completion of the internship, each student identifies a particular internship activity, known as a special project, on which to base their scholarly paper. In the development of this written report, students are expected to conduct a literature review and discuss the scientific basis for their selected intervention
or special project, the methodology, their interpretation of the findings and outcomes, the limitations of
their research, the lessons learned and the implications for public health research and/or practice. The
report must also include a detailed description of the manner in which all of the core and concentration-
specific competencies are integrated into and reinforced by the special project. Once the paper is
finalized, students prepare a corresponding oral or poster presentation. Students present their work on
Public Health Day, towards the end of their final semester in the program. Faculty, preceptors and
students from across the university are invited to attend.

With the exception of those enrolled in the online MPH degree program, all MPH students must also
prepare an online portfolio. The portfolio offers students the opportunity to demonstrate their academic,
research and service accomplishments and their achievement of each core and concentration-specific
competency through a compendium of electronic documents, including evidence of completed
coursework, writing samples, a curriculum vitae or resume and copies of the special project report and
presentation. Each student uploads these materials, along with any other documents he or she may
choose to showcase, to a personalized account and webpage, to which students are granted lifetime
access and ownership. Students must submit a complete an informative competency-based dossier prior
to graduation. Faculty and students alike emphasized the value of this portfolio project in presenting
students’ knowledge, skills and experience to potential employers long after they graduate; in fact, the
unique format of the portfolio in and of itself helps graduates of the program stand out among other job
applicants.

As with the internship, the faculty advisor is ultimately responsible for conducting a final evaluation of
each student’s performance and assigning an overall letter grade based on the completed assignments
and requirements listed above.

As validated by site visitors’ reviews of student handbooks, syllabi and sample student reports and
presentations, the culminating experience is truly integrative and provides an adequate level of rigor to
evaluate each student’s knowledge and abilities. Students who met with site visitors spoke highly of their
culminating experiences and the support provided by their faculty advisors and the internship coordinator.
The most recent student exit survey confirms that over 75% of respondents were either satisfied or
extremely satisfied with the overall culminating experience, the relevance of the content to their
coursework and the MPH program’s preparation of students for the special project report and
presentation.
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 degree programs. The school must identify competencies for graduate professional public health, other professional and academic degree programs and specializations at all levels (bachelor’s, master’s and doctoral).

This criterion is met. The college has adopted a set of 10 core MPH competencies derived and adapted from the Ten Essential Public Health Services and informed by feedback from the Public Health Executive Committee, faculty, students, alumni, preceptors and employers.

The Public Health Executive Committee and faculty from each public health concentration developed unique concentration-specific competencies based on current standards in each discipline and faculty consensus on what competencies are critical for a successful career in public health. The number of competencies for each public health MS and PhD concentration ranges from three to 25. With the exception of the public health practice concentration, each MPH concentration is assigned a standard set of five to eight competencies. Selecting competencies from two to four of the other five concentrations, public health practice students work with their faculty advisors to develop a customized set of 10 to 20 concentration-specific competencies that support their long-term career goals and to establish a corresponding plan of study to achieve the identified competencies.

Each core and concentration-specific competency is systematically and strategically mapped to one or several required courses that either emphasize or reinforce the competency. The site visit team confirmed that faculty address and incorporate the competencies throughout the curricula. The competencies are clearly integrated into the fabric of the college and its degree programs.

The PHHP introduces and consistently communicates the competencies to students during new student orientations and a seminar during each student’s first semester, in student handbooks and on program webpages. Although the majority of course syllabi reviewed on site do not list competencies, all syllabi clearly display the associated learning objectives addressed in each course.

The Public Health Executive Committee oversees the periodic assessment of the competencies and any curricular changes that are proposed as a result of annual faculty and department reviews. The current set of core and concentration-specific competencies were originally developed in 2008 and 2012, respectively. According to the self-study and on-site discussions with the senior associate dean for public health, the original competencies remain relevant and appropriate. Feedback from faculty, students, alumni, preceptors, employers and the Public Health External Advisory Committee was taken into account during the most recent review of the competencies, in 2012. No significant revisions, however,
have been made to the core competencies since their establishment to ensure relevance and responsiveness to emerging public health practice and research needs and priorities.

2.7 Assessment Procedures.

There shall be procedures for assessing and documenting the extent to which each professional public health, other professional and academic degree student has demonstrated achievement of the competencies defined for his or her degree program and area of concentration.

This criterion is met. The self-study documents a clear and robust plan to evaluate students’ competency attainment. The PHHP monitors and evaluates student progress in achieving the expected competencies through course grades, overall grade point average and self-assessment surveys completed by graduating students and alumni. For MPH students, academic advising sessions, the internship and culminating experiences and employer interviews serve as additional assessment opportunities. Depending on their concentration, MS students are assessed during their thesis experience or through a comprehensive examination, master’s report and corresponding oral presentation. The college also assesses PhD students through the qualifying examination, which includes both written and oral components, a written research dissertation and a corresponding oral defense.

With competencies mapped to coursework for all degrees, the successful completion of degree requirements is one indication of competency attainment. Faculty in all departments and instructional programs are responsible for assigning overall course grades based on their evaluations of students’ performance on course assignments and examinations and their mastery of the competencies and associated learning objectives addressed in course lectures and class discussions.

The university expects all students to maintain at least a 3.0 overall grade point average in order to graduate. The mean grade point average of MPH graduates and those of other degree programs has reached or exceeded 3.7 in the last three years.

One-on-one academic advising sessions throughout each MPH student’s matriculation through the program provide an opportunity for the various program administrators and faculty advisors to reinforce the role and importance of the competency-driven curriculum. Within the first few months after enrollment, each incoming MPH student is required to meet with the associate director of the MPH program and his or her faculty advisor to develop and establish an individual plan of study. Students continue to meet with their faculty advisors to review their portfolios and discuss their progress towards achieving the programmatic competencies.

As noted in Criterion 2.4, faculty advisors and preceptors meet with MPH students during an informal on-site evaluation session midway through the internship in order to provide verbal feedback and monitor
and gauge students’ overall proficiency in the competencies. Upon completion of the internship, preceptors use the internship evaluation form to conduct a more detailed assessment of each student’s performance, including his or her achievement and practical application of each core and concentration-specific competency identified in the project proposal. According to the most recent survey, preceptors reported that 84% of student interns demonstrate a high level of competence and are prepared to successfully perform the programmatic competencies in entry-level positions. Mean scores are consistently above four on a five-point scale, with five indicating excellence. In addition to the quality and completion of the deliverables, faculty advisors consider the results of the above mechanisms in their review of each student’s overall performance and their calculation of final grades.

During student presentations of their culminating experiences, or special projects, faculty members assess each student’s integration, synthesis and application of his or her knowledge and skills and of the core and concentration-specific competences. Measures include the delivery and visual appeal of each presentation, the relevance of each project, the quality and appropriateness of data collection and statistical analysis procedures, the interpretation of the findings and the articulation of their implications. The nature of the portfolio component of the culminating experience, described in Criterion 2.5, also encourages students to review and perform a personal assessment of their achievement of the competencies. Site visitors were informed that each student’s online account contains several checklists with which the student can reflect on his or her perceived competence throughout the completion of coursework and the development of the portfolio.

At the time of graduation, MPH students are required to complete a student exit survey, in which they rate the quality of the program and the extent to which they have achieved the competencies. Graduating students are also asked to suggest areas in which the program might benefit from improvement. According to the most recent exit survey, the vast majority of respondents believe that the program has helped them attain a thorough understanding of the competencies. For each core competency, between 68% and 96% of graduating students rated their mastery of the competency as “good” or “excellent,” though eight of the 10 competencies each received above average ratings by at least 82% of respondents.

The college administers alumni surveys to assess MPH and PhD graduates’ abilities to perform the core competencies in their employment settings. The first competency-based alumni survey for those who graduated from the MPH program between fall 2009 and fall 2012, however, was not conducted until the spring of 2013. The response rate was 39%. Survey results suggest that 71% of alumni agree that they were “extremely” or “very” well prepared to successfully perform the programmatic competencies in the workplace. Another 27% considered themselves adequately prepared. Alumni also recommend that the program place greater emphasis on program evaluation and data analysis.
Similar to that of the MPH program, the first competency-based alumni survey for those who graduated from the college’s PhD programs over the previous five years was not conducted until the spring of 2011. The response rate was 63%. The majority of respondents remained extremely positive and either agreed or strongly agreed on their level of academic preparation, especially with regards to research methods (93%) and ethics (89%), statistics (96%) and manuscript preparation (85%). Overall, 97% of alumni either agreed or strongly agreed that they acquired critical skills necessary to stand out in the job market and secure employment after graduation. PhD alumni were less positive, however, about their skills in grant writing, preparing teaching materials and teaching courses. In response to these findings, the college has developed more structured opportunities, including several new courses, in which students gain skills in grant-writing and teaching. Follow-up surveys of more recent graduates of the PhD program, in regards to their development of foundational skills and their level of preparation, have yet to be conducted.

On-site discussions with alumni confirmed their high satisfaction with the competence and skills they developed as PHHP students, and the usefulness and applicability of the competencies in the workforce. The frequency with which the competency-based alumni surveys have been conducted (every three or five years), however, may not provide an accurate illustration of graduates’ outcomes.

Employer feedback on MPH graduates’ abilities to perform competencies in the workplace is collected through key informant interviews. The first series of interviews, for which seven employers were selected, was conducted in spring 2013. The college invited employers who had hired more than one graduate of the program to participate in an in-person or telephone interview, and six of the employers who accepted the invitation had supervised an average of 11 MPH students or graduates. Consistent with the results gleaned from student, preceptor and alumni surveys, six of the employers agree that graduates of the MPH program are highly competent and “extremely well prepared” or “very well prepared” for a career in public health. On-site discussions with employers confirmed a high level of satisfaction with the competence and skills of the program’s graduates. Other employer comments, however, indicate that graduates would benefit from further engagement in policy development and stronger quantitative analysis skills. Discussions with faculty revealed that the college plans to conduct additional focus group interviews with current and past employers and disseminate surveys to potential employers, regarding their workforce needs, before the end of spring 2014.

The PHHP assesses student achievement in all degree programs by tracking graduation rates, though the university does not set a time limit on the completion of each degree. Based on the expectation that bachelor’s degree students will graduate in two years, the cohort of BHS students entering in 2011-2012 achieved a graduation rate of 97%. Based on the expectation that MPH students will graduate in five years, those entering in 2008-2009 achieved a graduation rate of 90%. MS students who entered in 2010-
2011 achieved a graduation rate of 100% before their three-year expected time to graduate. Students in all other master’s degree programs, who are expected to graduate within two to three years, achieved graduation rates ranging from 86% to 98%. Most doctoral degree programs’ expect students to graduate in seven years, though the majority of public health PhD programs have not been in operation for that long and no students have thus reached the expected time to graduation. Those programs that existed in 2006-2007 have graduated 63% of the students who enrolled during that year. Students in all other doctoral degree programs exhibit graduation rates ranging from 83% to 100%.

The college administers graduation surveys and annual alumni surveys to collect job placement data for each degree program. The self-study provides job placement data for the last three cohorts of graduates. Of the MPH students who graduated in 2010-2011, 100% responded to the surveys and 91% reported being either employed or enrolled in additional education within 12 months of graduation. All MS students and PhD students who graduated that same year also responded to the surveys and reported being either employed or continuing their education. Of the MPH students who graduated in 2011-2012, all responded and 86% reported employment or continuing education. All MS and PhD students who graduated during that year responded to the surveys; 100% and 92% of MS and PhD students, respectively, reported being either employed or continuing their education. According to the most recent alumni survey of students who graduated in 2012-2013, 100% responded and 87%, 100% and 97% of MPH, MS and PhD students, respectively, reported employment or continuing education. Faculty and staff who met with site visitors attribute the high job placement rates to the MPH program’s frequent communication with alumni and its commitment to connecting graduates with job opportunities.

The Executive Leadership Committee, the Public Health Executive Committee, the department chairs and faculty from each concentration review and analyze aggregate data collected from the above measures at the end of each academic year to identify any gaps in the curricula and determine if corrective actions, such as curricular or competency revisions, are necessary. A subcommittee consisting of the core course instructors, the MPH program director, and the associate dean for educational affairs was established in fall 2013 to 1) further examine the root causes of the lower mean scores collected from exit surveys and alumni and employer feedback and 2) develop recommendations to improve competency-based scores.

2.8 Other Graduate Professional Degrees.

If the school offers curricula for graduate professional degrees other than the MPH or equivalent public health degrees, students pursuing them must be grounded in basic public health knowledge.

This criterion is met. The college offers several graduate professional degrees outside the realm of public health: a Master of Arts degree in communication sciences and disorders, a Master of Health Administration degree, a Master of Occupational Therapy degree, a Master of Health Science degree in environmental and global health, known as one health, a Doctor of Physical Therapy degree and a Doctor
of Audiology degree, in both on-campus and online formats. Each degree requires a practical and/or culminating experience.

The MA degree in communication sciences and disorders is a 60 semester-credit degree based on a set of core and cross-cutting competencies specific to the field of speech-language pathology. Graduates of the program develop the knowledge and skills that are needed to deliver evidence-based clinical services to a wide range of populations in a variety of clinical settings. In fulfillment of the practical experience requirement, or clinical internship, students conduct original research in laboratory or real-world settings under the mentorship of graduate faculty. The culminating experience requires the completion of either a comprehensive examination or a master's thesis.

The MHA degree involves 63 credit hours and is based on a set of competencies that address the fundamental aspects of the healthcare business and the management of healthcare settings. Graduates are prepared for employment in healthcare delivery settings such as hospitals, ambulatory care centers, mental health facilities, rehabilitation facilities, nursing homes, home care agencies, and physician group practices. Graduates are also hired by non-provider settings, including insurance companies, Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs) and other managed care systems, consulting firms, regulatory agencies and professional associations. The internship provides students with a unique opportunity to actively contribute to a health care organization and apply their knowledge and management skills in a practice setting. The capstone course engages students in the analysis of a series of case studies and in a final project for a community-based organization.

The MHS degree in environmental and global health, or one health, requires the completion of 40 credit hours of coursework. The curriculum emphasizes working across public health, veterinary health and environmental health disciplines to solve difficult public health problems—particularly the transmission of infectious diseases. Other focus areas include agricultural industries, biosecurity, entomology, zoonotic diseases, animal health, pathogen detection and identification, food production and environmental controls. Graduates of the program are expected to work in universities, federal, state and county health departments, consulting and research companies, food and pharmaceutical industries and occupational safety industries. In addition to a three-credit field research experience, MHS students prepare a corresponding poster presentation, which serves as the culminating experience.

The MOT degree program, which requires a total of 58 credit hours, provides a strong background in occupational therapy theory and assessment and in therapeutic interventions. As a prerequisite, students must complete 21 credits of baccalaureate level coursework that covers the biological, psychological, and social systems that impact the performance of occupational roles. Many students will have completed the
BHS degree in pre-occupational therapy prior to enrolling in the MOT program. A 12-credit internship serves as both the practical and culminating experiences.

The DPT curriculum incorporates 113 credits, including an 18-credit full-time clinical internship. Based on a set of core competencies specific to the field of physical therapy, the curriculum provides a strong background in the biological, kinesiological and behavioral sciences, as well as the principles underlying logical reasoning and the scientific method.

The curriculum for the campus-based AuD degree program is designed to meet the needs of the audiology profession and provide a sound foundation for students interested in subsequently pursuing a PhD in audiology. Through 125 credits hours, the program emphasizes the principles and practices underlying the evaluation and rehabilitation of human auditory and vestibular disorders. Didactic instruction overlaps clinical rotations during the first eight semesters of the program. Students complete a 12-month clinical externship during their final year.

The online AuD degree program requires 45 credits of coursework designed to provide working professional audiologists with the complex and diverse skills necessary to meet the challenges of the dynamic healthcare marketplace. Students are required to take a comprehensive examination prior to graduation.

In addition to the above requirements, all graduate professional degree students are required to complete an Introduction to Public Health course. Through an online format, this course provides a broad introduction to public health, as well as an understanding of the relationship between public health and the other health professions. Students may choose to take the course for academic credit (three credits) or as a non-credit program requirement. As validated by site visitors’ review of syllabi, the course content and competencies for the three-credit and non-credit versions of the course are identical. The primary difference between the two courses is evident in performance evaluations: Non-credit students must successfully complete each module, with a grade of at least 70%, to pass the course. Students who do not receive a passing score on each quiz must repeat the entire module and retake the quiz. Each module quiz completed by students enrolled in the three-credit course is weighted differently; the quiz with the lowest score is exempted from final grade calculations.

Site visitors learned that most students complete the orientation to public health during their first year of study and find that the course transforms and expands their conceptualization of the health professions and their respective disciplines. Additional public health content is integrated into required courses throughout each curriculum. Each degree, therefore, surpasses the minimum requirements for basic public health knowledge.
2.9 Bachelor’s Degrees in Public Health.

If the school offers baccalaureate public health degrees, they shall include the following elements:

**Required Coursework in Public Health Core Knowledge:** students must complete courses that provide a basic understanding of the five core public health knowledge areas defined in Criterion 2.1, including one course that focuses on epidemiology. Collectively, this coursework should be at least the equivalent of 12 semester-credit hours.

**Elective Public Health Coursework:** in addition to the required public health core knowledge courses, students must complete additional public health-related courses. Public health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.

**Capstone Experience:** students must complete an experience that provides opportunities to apply public health principles outside of a typical classroom setting and builds on public health coursework. This experience should be at least equivalent to three semester-credit hours or sufficient to satisfy the typical capstone requirement for a bachelor’s degree at the parent university. The experience may be tailored to students’ expected post-baccalaureate goals (eg, graduate and/or professional school, entry-level employment), and a variety of experiences that meet university requirements may be appropriate. Acceptable capstone experiences might include one or more of the following: internship, service-learning project, senior seminar, portfolio project, research paper or honors thesis.

The required public health core coursework and capstone experience must be taught (in the case of coursework) and supervised (in the case of capstone experiences) by faculty documented in Criteria 4.1.a and 4.1.b.

This criterion is not applicable.

2.10 Other Bachelor’s Degrees.

If the school offers baccalaureate degrees in fields other than public health, students pursuing them must be grounded in basic public health knowledge.

This criterion is met. The college offers two Bachelor of Health Science degrees in fields other than public health: health science and communication sciences and disorders.

The health science major is offered in three tracks: health science, pre-occupational therapy and pre-public health. The health science track is designed primarily for students whose career goal is to work in health care and/or pursue graduate or professional education to become health care providers. The pre-occupational therapy track is tailored for students who want to pursue graduate-level training to become practicing occupational therapists. The pre-public health track supports students interested in advancing their studies in public health, or a related field, and/or working in a healthcare setting.

The communication sciences and disorders curriculum provides a broad introduction to speech anatomy and physiology, language and hearing, speech and language disorders and the principles of clinical observation.
All BHS students must complete a three-credit Public Health Concepts course prior to graduation. This course introduces the five core public health knowledge areas, with particular emphasis placed on epidemiology. The course also provides a forum through which students discuss current events and issues in the field of public health and develop their understanding of the relationship between public health and the other health professions.

The undergraduate student who met with site visitors said she saw great value in being located within the PHHP and appreciated the perspective and support public health students and faculty offer.

2.11 Academic Degrees.

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

This criterion is met. The college offers academic MS and PhD degrees in biostatistics and epidemiology, as well as several other PhD degrees in the following areas: environmental and global health, social and behavioral sciences, health services research, one health, clinical psychology, rehabilitation science and communication sciences and disorders.

The PHHP has adopted a college-wide framework to ensure exposure to a broad introduction to public health, orient students to general public health principles and help students gain an understanding of how their specializations contribute to public health goals beyond their discipline. PhD students specializing in one health, social and behavioral sciences and environmental and global health are all required to take the five core MPH courses described in Criterion 2.3. All other academic degree students are required to complete the same Introduction to Public Health course completed by graduate professional degree students in non-public health fields. As noted in Criterion 2.8, this online course provides a broad introduction to public health, as well as an understanding of the relationship between public health and the other health professions. Students may choose to take the course for academic credit (three credits) or as a non-credit program requirement.

The five core MPH courses that PhD students in one health, social and behavioral sciences and environmental and global health are required to complete include, as described in Criterion 2.3, a Principles of Epidemiology in Public Health course. All other academic degree programs within the college also require students to complete the same introductory course to ensure their familiarity with the basic principles and applications of epidemiology.

Each academic degree program requires a culminating experience. For the MS degrees, the experience may be in the form of a thesis or a master’s report and corresponding oral presentation. All PhD students
are required to develop a written research dissertation and corresponding oral defense after the completion of all coursework. The PhD program in psychology also requires a one-year internship after the completion of the dissertation. These requirements provide an adequate level of rigor to evaluate each student’s knowledge and abilities.

2.12 Doctoral Degrees.

The school shall offer at least three doctoral degree programs that are relevant to three of the five areas of basic public health knowledge.

This criterion is met. The PHHP currently offers six doctoral-level public health degree programs: PhD degrees in biostatistics, epidemiology, environmental and global health, social and behavioral sciences, health services research and one health. The PhD is an academic degree primarily designed for students wishing to pursue careers in academic teaching and research. PhD students are focused on developing strong content area knowledge and research skills and pursuing the acquisition of new knowledge through research.

Each PhD program requires 90 post-baccalaureate credits. New students start with a set of core courses and/or pre-requisites that are often part of master's-level instructional programs. PhD students specializing in one health, social and behavioral sciences and environmental and global health are required to take the five core MPH courses described in Criterion 2.3. All other PhD students are required to complete an Introduction to Public Health course and the Principles of Epidemiology in Public Health course described in Criterion 2.3. This introductory coursework is followed by a set of four to five three-credit core courses that are designed to develop discipline-specific research knowledge and skills at the doctoral level. PhD students also select a focused area of specialization within their discipline and take didactic courses on that topic; didactic coursework is, therefore, specific to each student and usually includes courses drawn from other departments and programs.

All PhD students are also required to develop a written research dissertation and corresponding oral defense after the completion of all coursework. The PhD program in psychology also requires a one-year internship after the completion of the dissertation. Site visitors reviewed the curricula for the PhD programs and verified that each demonstrated an appropriate level of in-depth doctoral-level coursework. Discussions with doctoral students confirmed that they are highly satisfied with their progression through their respective programs and with the amount of rigorous and challenging coursework.

Doctoral students are supported by a variety of mentorship opportunities, fellowships, teaching and research assistantships and need-based scholarships, though the self-study notes that the college has secured relatively few sources of external funding. Student travel, for example, is often supported by grant and indirect costs funds and awards offered by the UF Office of Research and the UF Division of
Sponsored Programs. The UF Graduate Student Council offers travel grants, which may be used to cover travel-related expenses for presenting research or participating in professional development opportunities at relevant scientific and/or public health conferences. Students may apply for travel awards—up to $400 per trip—and matching funds from the college and/or their home departments. Thirty-five percent of PhD students are supported by research grants or a combination of grant and department support.

The PHHP is successful in doctoral student recruitment, retention and graduation. As stated in Criterion 2.7, public health PhD students entering in 2006-2007 achieved a graduation rate of 63%, based on the doctoral degree programs’ seven-year expected time to graduate. In 2012-2013, a total of 39 PhD students advanced to candidacy and 36 graduated. In 2013, the college received a total of 192 applications for doctoral-level public health work. Of the 43 candidates who were accepted, 23 enrolled in the college’s PhD programs. At the time of the site visit, a total of 91 doctoral students were enrolled in public health programs: 16 in biostatistics, 24 in epidemiology, 10 in environmental and global health, 15 in social and behavioral sciences, 17 in health services research and nine in one health.

2.13 Joint Degrees.

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

This criterion is met. The PHHP offers seven standing joint degrees, six of which involve combinations of the MPH degree and degrees in other disciplines: the Bachelor of Health Science, the Juris Doctor, the Doctor of Medicine, the Doctor of Pharmacy, the Doctor of Veterinary Medicine and the Doctor of Physical Therapy. Other joint degree programs are developed and offered on an individual basis with the review and approval of the student’s advisor and both of the participating programs.

Joint degree students complete largely the same curriculum, including the internship and culminating experiences, as standalone MPH students. In fact, students are expected to complete all of the required courses within their respective MPH programs. No substitution of MPH credit is involved in the BHS/MPH degree program, which simply permits undergraduate students to get a head start on their MPH degree by completing up to 15 credits of core MPH coursework during their senior year. Efficiency for all other joint degree programs is achieved with nine to 12 credits of approved elective courses—depending on the particular joint degree—that may be applied toward both degree programs. In cases where course sharing is permitted, the Public Health Executive Committee thoroughly reviews each elective, compares the syllabi and verifies that the appropriate content and competencies are addressed before deeming it acceptable to count for MPH credit. Site visitors reviewed the programs of study for each joint degree, as well as the syllabi and course descriptions of substitute courses that are accepted for MPH credit, and confirmed that equivalent or related MPH content is addressed.
The PHHP provides a framework for students in any bachelor’s, master’s, or doctoral degree program across the university to develop alternative and non-traditional joint degree programs with the MPH. Over the past three years, students have proposed and enrolled in joint degree programs involving the Master of Arts in journalism, the Master of Arts in agriculture-animal science and the Doctor of Philosophy in the following concentrations: clinical psychology, rehabilitation science, anthropology, sociology, agriculture and genetics. At the time of the site visit, faculty confirmed that the college is in the midst of developing a proposal for a joint degree program with the MPH and the Doctor of Dental Medicine (DMD). Such joint degree programs are developed on an individual basis with the approval of the participating programs and the dean of the Graduate School. As with the BHS/MPH degree, no substitution of MPH credit is involved in any joint bachelor’s/MPH degree program; such programs permit undergraduate students to get a head start on their MPH degree by completing up to 15 credits of core MPH coursework during their senior year. Master’s and doctoral students, on the other hand, work with their advisors to identify courses that will be acceptable as electives in the MPH program. Once approved, up to nine credits of coursework may be applied toward both degree programs.

Prospective joint degree students must submit a separate application to and be accepted by each participating program. The time commitment required for each joint degree, however, is less than that required of students who pursue each program separately. Each joint degree program is designed for completion in three to five years, depending on the particular degree. Documentation provided to site visitors shows evidence of significant effort on the part of each program to design curricula that meet the three- or five-year commitment and encourage enrollment.

A total of 34 students were enrolled in joint degree programs at the time of the site visit. The BHS/MPH and DVM/MPH degrees appear to be the most popular among students, with annual enrollment numbers as high as 12 and 18, respectively, over the past three years. Based on the five-year expected time to graduate, joint degree students entering in 2008-2009 achieved a graduation rate of nearly 94%.

Students with whom site visitors met value the college’s joint degree programs as a convenient opportunity to expand their knowledge and expertise beyond public health and collaborate with other programs and colleges across campus. Furthermore, several students asserted that one of the college’s greatest strengths lies in the vast array of opportunities it provides students to essentially create their own joint degree programs and corresponding programs of study—of course with guidance, as appropriate.

2.14 Distance Education or Executive Degree Programs.

If the school offers degree programs using formats or methods other than students attending regular on-site course sessions spread over a standard term, these programs must a) be consistent with the mission of the school and within the school’s established areas of expertise; b) be guided by clearly articulated student learning outcomes that are rigorously evaluated; c) be subject to the same quality control processes that other degree programs in the school and
university are; and d) provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of adult learners. If the school offers distance education or executive degree programs, it must provide needed support for these programs, including administrative, travel, communication and student services. The school must have an ongoing program to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. The school must have processes in place through which it establishes that the student who registers in a distance education or correspondence education course or degree is the same student who participates in and completes the course and degree and receives academic credit.

This criterion is met. The PHHP offers the MPH degree in public health practice in a distance education format. This online option is designed to accommodate working public health and healthcare professionals seeking to develop or enhance their training in public health. The college launched this program in response to several market surveys—including those completed by students enrolled in the PHHP’s certificate programs—that revealed a demand for online degree programs. Students with whom site visitors met value this program as a convenient opportunity to advance their public health knowledge and careers.

The online MPH program maintains the same admissions criteria, described in Criterion 4.3, as the campus-based MPH program, except with additional expectations for relevant work experience.

Curriculum requirements for online MPH students are nearly equivalent to that of students enrolled in the traditional MPH program; the format and delivery, rather than the content, are the primary differences. The program requires all five core courses, 27 concentration credits, an internship and a culminating experience. Two curricular differences exist between the traditional and online MPH programs: there are fewer internship credits and there is no portfolio requirement. Instead of six to eight internship credits, as is required of some campus-based students, online MPH students complete five internship credits. Given the fact that the majority of online MPH students, by virtue of the admissions criteria, already possess a significant amount of work experience and thus find the portfolio project (e.g., organizing a curriculum vitae and selecting appropriate writing samples to submit to a potential employer) less useful, the PHHP does not expect online MPH students to prepare a portfolio as part of their culminating experience requirement. Site visitors verified that online MPH students are expected to complete, with the exception of the minor differences listed above, an internship and culminating experience equivalent to that required of traditional MPH students.

A total of 60 students were enrolled in the online MPH program at the time of the site visit. Annual enrollment numbers have increased steadily over the past three years. The first cohort of online MPH students entered the program in spring 2010 and has since achieved a graduation rate of 70%. A total of 20 online MPH students have graduated to date.
As confirmed with faculty and online students who met with site visitors, administrative and advising support provided to online students exceeds students’ expectations and is comparable to the services provided to campus-based students. Each online MPH student is assigned a faculty advisor and works in collaboration with the internship coordinator to plan his or her internship and culminating experience project. The director of public health programs and the associate director of the MPH program are responsible for ongoing academic advising and monitoring of students’ overall academic progress. All online students have access to the electronic UF Health Science Center Library, as well as online support and instructions on how to utilize this resource. The designated public health liaison librarian also conducts research training sessions and provides students in this program with technical support. Several discussion boards are available for students to reach out for academic and/or technical assistance.

The PHHP implements sufficient measures to ensure that each student who registers for the online MPH program is the same student who participates in and completes the corresponding courses and receives academic credit. All online students must present proper identification and are video and audio monitored by the PHHP for all exams that exceed 10% of their course grade. Students submit all other exams via a Sakai course website, which utilizes a lock-down browser and a limited-time allowance feature to prevent students from accessing other course material during such exams.

The methods of evaluating student performance are nearly always the same, regardless of whether the course is taken by traditional or online degree students. The UF Office of Teaching and Technology continuously monitors online course offerings and instructors, as well as their academic rigor. All course evaluations and review processes, as described in Criterion 4.2, utilize the PHHP’s course evaluation system to ensure educational outcomes and academic quality. Online degree students have the same opportunity to evaluate course content and format, as well as their instructors. Course evaluations provide faculty with insights about the strengths and weaknesses of their course delivery methods and instructional approaches.

In addition to the online MPH program, the Blended Learning Task Force responds to the increasing public demand to integrate education and modern technology on a broader scale. The committee has succeeded in developing and implementing several blended, or flipped, courses that involve a combination of in-person and online instruction. Such courses introduce students to new content, through online lectures and presentations, before they enter the classroom and in between scheduled classes. In-person classroom time is primarily reserved for more interactive classroom activities and the practical application of the knowledge and skills students glean from the online material. As with all other students in the PHHP, those enrolled in blended courses have the opportunity to provide feedback on the course content, format and instructors. Faculty who met with site visitors, including those who serve on the Task Force, expressed their interest in adopting similar teaching techniques and modules to improve the
effectiveness of their instruction. Depending on their learning styles, most students find blended learning courses helpful and more engaging than the traditional alternatives.

In addition to face-to-face workshops and online toolkits to support the continued development of innovative instructional methods, the university offers an array of online and in-person training seminars to promote the integration of technology into the college's instructional programs.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. As reflected in its mission statement, the PHHP is committed to promoting timely high quality research that is response to priority health needs and aimed at enhancing the health of populations, communities and individuals at local, state, national and international levels. In support of this effort, the college has recruited and developed a faculty of productive researchers and promotes policies and practices that support a vibrant research environment.

The University of Florida is a leading research institution of higher education. Between 2013 and 2018, the state will award the university $15 million annually to nurture the scientific and scholarly progress that will bring the university recognition as a top public research university. Starting in the fall of 2013, the university began matching state dollars with private fundraising to hire additional faculty in the PHHP, among other colleges and disciplines, and support their work with laboratories, graduate assistants, and other services and facilities.

The college maintains an impressive portfolio of extramural funding for research. Research funding from the National Institutes of Health exceeded $11.5 million in 2012. The college’s emphasis on collaborative research has contributed to the overall increase in funding as well: between 2011 and 2013, contributions from collaborative research increased from 65% to 70%, and collaborative research within and outside the college continues to expand. Total research grants and contract awards have increased from $16 million in fiscal year 2011 to $23 million in fiscal year 2013, and are on track to reach the college’s five-year target of $25 million. In 2013, the college’s primary faculty secured an average of $168,000 per capita in research grant and contract funding. Among faculty with new funding in fiscal year 2013, the per capita average was $239,624. With research funding from the National Institutes of Health at $11.6 million in 2012, the college ranks among the top 20 accredited schools of public health with respect to NIH funding.
Research productivity among public health faculty has grown steadily over the last three years, with a notable two-fold increase, from $6 million to 13.4 million, in external funding. This increase is consistent with a corresponding increase in the number of new faculty hires. The percent of tenured and tenure-track primary faculty who serve as investigators on funded research grants or contracts has also increased from 77% to 90% over the last three years. At the time of the site visit, however, only 30% of externally-funded research projects involved partnerships with community-based organizations, including local, state, national and international health agencies. Approximately 40% involve partnerships with students.

The impact of the college’s research is reflected, in part, by the publication of peer-reviewed research articles and conference presentations each year. Faculty productivity with regard to peer-reviewed publications (averaging nearly five per faculty member per year) and presentations (averaging over five per faculty member per year) remains appropriate, especially in light of their teaching and service responsibilities.

As described in Criterion 1.4, the PHHP is home to 11 research centers and institutes, which offer formal opportunities for interdisciplinary investigation: the Center for Pain Research and Behavioral Health, the Center for Pediatric Psychology and Family Studies, the Center for the Study of Emotion and Attention, the National Rural Behavioral Health Center, the Florida Institute on Disability and Rehabilitation, the Florida Trauma Rehabilitation Center for Returning Military Personnel, the Institute for Mobility, Activity and Participation, the Hearing Research Center, the Institute for Advanced Study of Communication Processes, the Center for Statistics and Quantitative Infectious Diseases and the Florida Center for Medicaid and the Uninsured. In addition to these research centers, faculty research is supported by the infrastructure of multi-college institutes and centers, such as the Clinical and Translational Science Institute, the Emerging Pathogens Institute, the UF Health Cancer Center and other multidisciplinary centers across the HSC.

The PHHP Office of Research is dedicated to fostering the scientific advancement of faculty and students and providing them with helpful information, guidance and assistance in navigating the overall administration of research projects. Responsibilities include informing faculty and students of individual and collaborative funding opportunities and supporting faculty and staff throughout the grant process, from grant proposal development to submission, and in all post-award activity, including compliance issues, ethical concerns and fiscal and report management. The Office of Research also coordinates the college’s annual research fair, which provides opportunities for students at all levels to present their research and compete for research awards. In 2012-13, 126 students prepared a poster presentation and 10 received a monetary award for their work. The self-study notes that the visibility and recognition of research productivity and quality, however, could be enhanced.
The Collaboration Committee, as described in Criterion 1.4, fosters academic and research collaborations among faculty and students, including student collaborations with faculty mentorship, across the public health and health professions departments in the college. The committee issues an annual call for proposals of student-initiated research projects that include faculty and students in public health and health professions programs. All proposals are reviewed and scored by the committee and up to $10,000 is awarded based on merit. Four student-led projects were funded over the last two years.

The college offers grant-writing workgroups and other trainings to assist faculty, staff and students in preparing grant applications and effectively conducting their research. All grant proposals are reviewed and approved at four levels prior to their submission to external agencies; this includes approval by the chair of the applicant's home department, a grant specialist, the associate dean for research and planning, and the director of the UF Division of Sponsored Programs. To supplement these efforts, the college facilitates consultations with outside experts to review grant applications prior to their submission to external agencies.

Promotion and tenure policies adopted by both the university and the college promote excellence in research. The following factors are taken into consideration during reviews for promotion and tenure: faculty research productivity (eg, peer-reviewed publications and research presentations), success in securing research funds (eg, external contracts and grants) and participation in collaborative research (eg, participation as a co-investigator with other faculty members). Faculty members are expected to contribute at least 0.5 FTE to research and scholarship. On-site discussions with faculty confirmed that the program’s promotion and tenure policies encourage them to strengthen their contributions towards research.

In addition to implementing the support mechanisms mentioned above, the college incentivizes student participation in research through various research and graduate assistantships and graduate student research grants. Over the last two years, over $10,000 has been distributed to support graduate student research. Students may also receive course credit for supervised or independent research. At the time of the site visit, over 58% of students were involved in faculty research in some capacity. As mentioned in Criterion 2.12, individual departments support student research by encouraging students to submit abstracts for presentations and poster sessions and by funding poster development and student travel. Site visitors learned that the Public Health Student Association also provides similar travel stipends.

On-site discussions with faculty and students confirmed that the college supports research-related travel to promote interdisciplinary research collaborations and/or research dissemination. Whether partnering with a primary faculty member with an existing research grant or collaborating with a community-based organization on a research project, students enjoy opportunities to become involved in a variety of
research activities. Faculty identified the grant writing workgroup as a particularly supportive, collegial and useful in each phase of the grant process.

3.2 Service.

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

This criterion is met. The PHHP is committed to professional and community service activities, as reflected in its mission statement. Despite its research-intensive mission, the college encourages service among faculty and students alike.

The PHHP embraces the principle of “Service Plus,” which emphasizes the college's responsibility to provide service to individuals and populations in need in the North Central Florida region, across the United States and abroad, while also providing educational opportunities to students and conducting research that is directly relevant to those groups. Essentially, Service Plus highlights the strong connection between research, teaching and service, and how service opportunities can be leveraged to generate collaborative teaching and/or research opportunities. Within this context, the dean and department chairs support and encourage a variety of service projects, some of which are carried out by individual students or faculty; others are organized by departments, programs or student organizations for group participation.

Faculty members are expected to make service contributions and community service, at 0.25 FTE, is included in their tenure and promotion reviews. In addition to community and professional service, service to the university is accepted by the college in fulfillment of this requirement. In 2012-2013, only 39% of primary faculty were involved in community and/or professional service. The self-study asserts that, since most faculty members are tenure track and have significant responsibilities for research and teaching, the established target remains a reasonable expectation for service.

Community service activities in which students and faculty work together include community health fairs, screenings for hearing loss and memory problems, the annual March of Dimes Walk and various other activities in support of the Ronald McDonald House and the St. Francis House, a shelter for homeless individuals and families. In addition, the Beta Upsilon Chapter of Delta Omega sponsors at least one day of service each year. Faculty and students are also involved in the Department of Epidemiology's, HealthStreet program, a major community-based initiative that assesses the health needs and concerns of the community and links individuals to appropriate medical and social services. A number of global health service projects are also conducted by interested groups of faculty and students each year.

Between 2011 and 2013, each department received at least one grant or contract to support service. The total amount of external funding for service activities during this three year period was nearly $826,000.
Service projects were funded by the Centers for Disease Control and Prevention, the Florida Department of Health, the UF Area Health Education Center Program and the National Institutes of Health, among others. Projects focused on community engagement, health disparities, needs assessments, data analysis, health education and infectious diseases.

The college asserts that engaging students in community service is an important means of communicating the values of the college—especially diversity, respect for human dignity, social responsibility and teamwork. Students are encouraged to engage in service activities, outside of those associated with the required internship experience. The UF Presidential Service Award serves as a major driving force behind student participation in community service; students receive the award based on performing 100 or more hours of service during the previous year. Three PHHP students received the award in 2013. The Public Health Student Association also organizes and engages students in annual volunteer activities, including events for World AIDS Day and Public Health Week. Thirty-eight percent of students were actively engaged in community service projects in 2012-2013.

On-site discussions with faculty confirmed their active engagement in community-based service. Faculty participate in an impressive array of local, regional, state, national and international service activities. Several research grants and activities presented in the self-study and discussed on site incorporate and even require a distinct service component, due to the nature of the work.

3.3 Workforce Development.

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

This criterion is met. The college is actively engaged in workforce development through a variety of continuing education programs.

The college utilizes a variety of data collection methods to determine the continuing education and workforce development needs of the communities it serves. Sponsored by the Health Resources and Services Administration, the college administers training needs surveys at local health departments, collects primary and secondary data from the Florida Department of Health, conducts quantitative and qualitative statewide needs assessments and solicits feedback from the Public Health External Advisory Committee.

Results from the needs assessments reveal an urgent need for training in the following areas: health education and communication (eg, counseling techniques and interviewing skills), disease prevention and health promotion, community outreach (eg, building community partnerships and working with faith-based organizations) and public health management and financial planning. Assessments conducted among
rural residents revealed the need for public health workers to be trained in patient-centered care, cultural competency and humility, social justice, confidentiality, evidence-based care and professionalism.

The college’s findings have translated into effective training programs. Planned and initiated as a result of the data collected from the needs assessments, the Rural South Public Health Training Center offers monthly continuing education courses and free continuing education credits, all delivered in an online format, for public health professionals. Select courses are also available on campus. Each training session involves one hour of instruction and focuses on a single topic. Since February 2012, the RSPHTC has offered at least one new continuing education program for public health workers each month. On average, 44 individuals participate in each monthly training session.

Needs assessments have also resulted in the creation and implementation of collaborative workforce development projects. For example, the RSPHTC worked with the Suwannee/Lafayette County Health Department to create a workforce development plan for the agency and provide staff training on customer service, teamwork and conflict resolution. The RSPHTC also provided the Alachua County Health Department with the technical and management support necessary to implement the Perinatal HIV Prevention Collaborative Project. In addition to enhancing the capacity of the workforce to provide better HIV services, this project provides perinatal HIV updates to ensure that the workforce is educated on the most up-to-date protocols for the prevention of vertical HIV transmission.

Public Health Conferences were conducted in the spring of 2009, 2010 and 2011 in partnership with the UF Area Health Education Centers (AHEC) Program, the Suwannee River Area Health Education Program (SRAHEC), WellFlorida Council and several local health departments across North Central Florida. Each conference addresses a range of issues identified in the needs assessments. The 2009 conference was presented on campus and attracted 81 enrollees. The 2010 and 2011 Public Health Conferences were held on campus, and live stream and archived recordings of the conferences were made available online. A total of 133 individuals either attended the 2010 conference in person or registered to view it online, and 156 participated in the 2011 conference. It is important to note, however, that, as of 2011, participants are no longer required to register online to view the conference recordings; the recorded enrollment for 2011 is, therefore, likely to be an underestimate of the actual participation rates.

The college offers a 15-credit Graduate Certificate in Public Health, in on campus and online formats. Students enroll in the same five core courses completed by MPH students. The program is designed for working professionals in public health and related fields and provides students in other programs with opportunities to explore public health coursework before committing to a full MPH degree. A certificate may also be awarded for a specific plan of study, in which students take the core course in their chosen
area, nine credits of intermediate and advanced coursework in that concentration and an additional three credits in either the core or concentration area. Beginning in fall 2013, students must also pass a final examination, which focuses on the Ten Essential Public Health Services. Forty-nine new students enrolled in the graduate certificate program in 2012-2013, though the majority of those students enrolled in the online version of the program.

The college also offers a 12-credit Graduate Certificate in Emerging Infectious Disease Research that involves a combination of in-person and online components. Sponsored by the US Department of Defense Global Emerging Infections Surveillance and Response System (DoD-GEIS), the Centers for Disease Control and Prevention, the US Department of State, the US Agency for International Development (USAID) and the Fogarty International Center, this program provides graduate-level education in emerging infectious disease research to nominated international public health professionals. The curriculum consists of five graduate-level courses. Total annual enrollment declined from 39, in 2010-2011 to 35, in 2011-2012, and 19 new students joined the program in 2012-2013. The college plans to transition the current graduate certificate program to a Graduate Certificate in One Health, a three month, nine-credit program designed to introduce students to the fundamental principles of the concentration. The transition from a one year, 12-credit program to a three-month nine-credit program involving less online casework is expected to accommodate the vast majority of international trainees who frequently experience issues in accessing web-based materials due to language differences, poor internet connections, conflicts with professional work and travel and other barriers.

The PHHP offers numerous continuing education programs for graduate credit and/or professional continuing education units (CEUs). The UF Division of Continuing Education (DCE) works with the college to develop and offer flexible opportunities to students who might not otherwise have access to adult learning. The DCE provides assistance with business plan development, management software, marketing services, student services and general facilitation of continuing education delivery.

The college has been successful in acquiring external support for workforce development programs. Over the course of the last three years, the college was awarded a total of $3.0 million for workforce development. Such funding has bolstered the college’s ability to reach the public health workforce with accessible and relevant competency-based training. RSPHTC funding, however, was reduced by 80% in 2014. This significant loss of funding may jeopardize the college’s ability to continue conducting workforce needs assessments and to ensure an ongoing robust workforce development campaign. The dean asserted his commitment to sustaining the activities of the Center, though he recognizes that the college will require alternative strategies and resources to restore the full complement of workforce development activities.
4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

The school 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 school’s mission, goals and objectives.

This criterion is met. The college’s faculty complement is robust in public health expertise. Faculty members are individually well-qualified and collectively offer both breadth and depth in relevant sub-disciplines of public health to support all of the college’s instructional programs.

All primary public health faculty hold terminal degrees (usually PhD degrees) appropriate to the field of public health or related disciplines, and many received degrees from CEPH-accredited institutions. Although only two adjunct faculty members possess a DrPH degree, most primary faculty (over 51%, exceeding the target of 50%) demonstrate significant practice experience.

Faculty also exhibit significant research interests and expertise in adolescent health, chronic disease, infectious disease, tobacco cessation, sexually transmitted diseases and mental health, among other areas. The faculty complement demonstrates breadth in research through scientific and professional publications and presentations, participation in national scholarly organizations, attainment of sponsored research and community engagement through service. These qualifications are augmented by a number of additional faculty who are public health practitioners, and a number of public health practitioners who serve as guest speakers and lecturers.

4.2 Faculty Policies and Procedures.

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

This criterion is met. The college follows the university’s policies for recruitment, appointment, promotion and tenure. Faculty are governed by institutional faculty rights and responsibilities, as stated in the UF faculty handbook and constitution. The rights and responsibilities of faculty, specific to the PHHP, are outlined in the college’s constitution. Such documents, which describe the university’s policies related to recruitment, appointment, promotion and tenure, leave of absence and retirement, are provided to all new faculty during orientation and posted on the university website.

Faculty with whom the site visit team met were well familiar with the university’s policies and procedures related to faculty, and reported satisfaction with the fairness and implementation of these processes. Discussions confirmed that the college’s policies and procedures ensure the fair and equitable treatment of faculty and are consistently applied.
All faculty members are evaluated annually on their performance, qualifications and competence in three areas: teaching, research and service. Tenure-track faculty are also subject to three-year reviews. The process of review for promotion and tenure begins at the departmental level, with significant input from faculty colleagues. Each faculty member eligible for promotion and tenure prepares a Faculty Activity Report (FAR), which lists all of the teaching, research and service activities he or she completed in the preceding year. The faculty member also delineates his or her academic goals, along with the results of course evaluations completed by his or her students and colleagues. Senior faculty in the department review the FARs and vote via secret ballot. The department chair provides his or her recommendation, as well as the results of the departmental vote, to the dean and the candidate. The college’s Promotion and Tenure Committee also reviews FARs, registers each member’s individual assessments by confidential ballot and shares the results with the dean. The dean reviews all of the submitted materials and forwards his or her recommendation to the UF Academic Personnel Board, which serves in an advisory capacity to the university president. After consulting the senior vice presidents as necessary, the president forwards the final promotion and/or tenure recommendations to the Board of Trustees for approval. The dean reviews and discusses all faculty evaluation results letters with the department chairs before they are issued.

As mentioned in Criterion 1.4 and outlined in the memorandum of understanding between the PHHP and the College of Medicine, faculty appointed to the biostatistics and epidemiology departments may choose to be reviewed for promotion and tenure according to PHHP criteria or the COM criteria. On-site discussions with the dean and the senior vice president for health affairs suggest that the only difference between the two criteria is the length of the probationary period before the award of tenure: while the PHHP allows seven years, the COM allows 10 years. For those faculty who decide to follow the COM criteria, faculty packets for tenure and/or promotion are reviewed by a Promotion and Tenure Committee that comprises three tenured faculty from each of the two colleges. In the event of a disagreement, both deans will consult the senior vice president for health affairs before submitting a collective recommendation to the Academic Personnel Board.

Conversations with faculty, the senior vice president for health affairs and the associate provost for academic affairs suggest that the process of accommodating both the PHHP criteria and the COM criteria has been unproblematic. In consideration of the feedback received from faculty, the Faculty Council and the Executive Leadership Committee, however, the college is in the process of revising its guidelines for promotion and tenure. In addition to considering more specific definitions of research distinction, the review will include an assessment of the impacts of tenure probationary period differences across colleges and ensure consistency and transparency. The dean and the senior vice president indicated that the PHHP will likely align its promotion and tenure guidelines with that of the COM and extend the
probationary period to 10 years. Faculty will be granted an opportunity to vote on the proposed revisions prior to implementation.

All faculty members are appointed to departments and classified as tenured, tenure-track, or non-tenure track. In 2012-2013, over half of the college’s primary faculty, and nearly 67% of primary public health faculty, were either tenured or in tenure-track positions.

In support of teaching, research and scholarship and service excellence, a variety of faculty development resources are provided at the university, college and department levels: mentoring, start-up funds, a grant writing workgroup, intramural funding, incentive plans and bonuses and teaching enhancement resources and workshops. Department chairs mentor new faculty hires and pair them with senior faculty mentors to facilitate their professional development and provide guidance in their pursuit of scholarly activity. Informal mentoring by other senior faculty is also encouraged. The distribution of primary faculty across tenured and tenure-track categories allows for a pipeline of junior faculty to move into senior ranks and for a comparable number of senior faculty to provide leadership and mentoring. Junior faculty also enjoy reduced teaching loads, seed money to jumpstart their research activities, bonuses for exceptional performance in research, teaching and service and additional funds for traveling to conferences. Faculty who met with site visitors reported a high level of satisfaction with the college’s mentoring program and the supplemental support systems.

The college also offers Faculty Enhancement Opportunities (FEOs), or short-term sabbaticals, to advance the academic, professional and/or scholarly abilities of faculty. They are intended to be more flexible in nature and duration than traditional sabbaticals. FEO funds are used primarily for short-term salary or benefit offsets and/or travel costs associated with conferences or similar learning experiences.

Faculty competence and instructional effectiveness are also evaluated in student and peer course evaluations at the conclusion of each semester. With student response rates declining over the last few years, faculty are asked to discuss the importance of the evaluations with their students and encourage them to complete the available forms. Nearly 90% of faculty received high ratings and scores above 3.5, on a scale of one (poor) to five (excellent), over the last three years. The college also encourages other faculty to participate in the peer-review process, via classroom observation, and complete peer evaluation forms. The electronic system through which all evaluations are completed ensures anonymity and honest feedback. Summary results are made available to faculty and appended to Faculty Activity Reports, where they become a component of annual faculty evaluations and are considered in decisions regarding annual incentives and tenure and promotion.
4.3 Student Recruitment and Admissions.

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

This criterion is met. Student recruitment efforts are individualized for each instructional program in the college. The broad range of activities utilized to identify and attract qualified applicants includes: program descriptions in university catalogs and newspapers, direct advertising in university and professional media and email communications, presentations to students in courses and health-related career clubs, information sessions hosted by individual instructional programs, representation at university-wide recruitment fairs and exhibitions and presentations at professional conferences. Staff also participate in Schools of Public Health Application System (SOPHAS) Virtual Fairs, which provide an efficient way for the college to recruit applicants and showcase its degree programs in a live virtual setting. New scholarships for highly qualified applicants serve as additional recruitment tools; similarly, the college plans to offer additional financial support to attract PhD students.

Recruitment activities are directed to a local audience, including undergraduate students and students in other professional degree programs across the university and the state of Florida. The college’s bachelor’s degree program serves as a particularly important and convenient pipeline for recruitment into the college’s master’s degree programs. Similarly, the master’s degree programs constitute a talent pool from which the college’s doctoral degree programs often recruit. Several PhD students with whom site visitors met were, in fact, also graduates of the college’s MPH or MS degree programs.

Prospective students must meet the university’s minimum admissions requirements. Each instructional program engages in a competitive admissions process to identify students who are qualified and motivated to succeed in the program and the associated discipline. Admissions criteria are clearly stated and easily accessible on the college’s website. Undergraduate admission, for example, requires the completion of 60 college-level transferable semester credit hours, a cumulative grade point average of 3.0 or higher, official transcripts and an essay describing the applicant’s career interests. Admission to the Graduate School requires a bachelor’s degree from a regionally accredited institution and a minimum grade point average of 3.0 for the last 60 hours of undergraduate coursework. Applicants must also perform satisfactorily on a recent Graduate Record Examination (GRE) and submit a professional statement of purpose, a resume and three letters of recommendation.

The PHHP utilizes a holistic approach to the review of applications when making admissions decisions. Exceptions to the GPA and GRE requirements are made when these and other criteria, especially letters of recommendation, are considered by the department and the college and approved by the dean of the
Graduate School. Although not required for admission, all applicants are assessed for prior work experience, service or education in a health-related field.

The college’s outcome measures related to recruitment and admissions are 1) the mean percentile of GRE scores of new enrollees and 2) the percent of MPH students enrolled in joint degree programs. Data in the self-study illustrate that the PHHP has not completely met either of these targets.

On-site review of updated fall 2013 data confirmed that the college’s recruitment efforts have increased the overall pool of qualified applicants over the last three years. Thirty-two percent of applicants in fall 2013 qualified for admission; of those who were accepted, approximately 67% enrolled in the college. The PHHP’s total student head count as of fall 2013 is 1,461. Twenty percent of the student body (205 master’s degree students and 91 doctoral students) is enrolled in a public health degree program. Epidemiology appears to be the most popular discipline among public health students, with 30 MPH students and 24 PhD students enrolled in the concentration. Enrollments of only three and four students suggest that the MPH degrees in biostatistics and public health practice are least popular. Concerned about the low enrollment numbers, the new chair of the Department of Biostatistics launched a campaign to strengthen the department’s recruitment efforts and expand its outreach.

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.

This criterion is met. Student academic advising and career counseling involves several approaches implemented at the university, college and department levels, from the time of enrollment to graduation.

The Graduate School offers an orientation session for all new graduate students before the beginning of each fall and spring semester. In fall 2013, the university also initiated a family-student welcome picnic to provide income students and families an opportunity to meet and learn about the university’s student resources and other support services.

At the college level, assigned faculty members serve as academic advisors for each student from matriculation to graduation, and provide guidance on course selection, curricular requirements and career opportunities. The dean’s office also assists individual students with course registration or other advising concerns as requested.

New MPH students are required to attend a three-hour orientation session before classes begin in the fall and spring semesters. The first half of the session covers key elements in the MPH Student Handbook: registration, academic advising and career development services, financial aid, academic integrity, the Health Science Center Library, the Public Health Student Association, Delta Omega and more. During the
second half of the session, students divide into concentration-specific groups and meet faculty from their respective departments and concentrations. Following orientation, the associate director of the MPH program serves as the primary student advisor. He or she works with students to identify their career goals, familiarize them with the core and concentration-specific competencies and establish a plan of study to meet those goals and competencies. Each student is also assigned a faculty advisor within his or her concentration. Faculty advisors meet with their advisees on an ongoing basis to review and approve plans of study and internship proposals, supervise internships and final papers and approve final presentations. As a student matriculates through the program, he or she may request a different faculty advisor with more similar interests; on site discussions with faculty and staff, however, suggest that such requests are rare.

PhD and MS programs assign faculty advisors to new students, often before the commencement of the fall and spring semesters. These advisors assist students in selecting faculty to serve as members of their supervisory committees. For MS programs, the supervisory committee consists of at least two graduate faculty members. For PhD students, the supervisory committee comprises no fewer than four graduate faculty members: at least two committee members, including the chair, must be recruited from the student’s home department; one member must be selected from an outside department to serve as an external member; and one other member can be recruited from any department. The responsibilities of each supervisory committee include informing the student of all curricular requirements, reviewing his or her qualifications, approving his or her proposed plan of study and research proposal, administering qualifying examinations, supervising thesis or dissertation research and approving dissertations or final examinations.

PHHP students have unrestricted access to the UF Career Resource Center for guidance in resume and cover letter writing, searching for jobs and practicing job interviewing skills. The center also offers individual and group career counseling to support students in their career decision-making process. Additional resources include career fairs, networking opportunities, career development workshops and online job databases and practical tools. Similarly, the PHHP sponsors an annual career fair, and the Graduate School hosts a series professional development workshops covering a wide range of topics, from effective time management and research strategies to manuscript publishing and student grant solicitation.

Within the MPH program, job opportunities are shared with students and alumni—especially those who indicate in the exit survey that they are still actively seeking employment—via email and the MPH Alumni Facebook page. Faculty advisors also advise current and graduating students to optimize their use of the MPH portfolio, described in Criterion 2.5, to prepare for job interviews. The internship coordinator organizes professional development seminars and discussions throughout the academic year.
Career counseling in the MS and PhD degree programs is managed by faculty mentors who meet regularly with students and often provide or find resources for travel to professional meetings, where students can network with professional colleagues and identify job opportunities.

Instructional programs use a variety of methods to assess student satisfaction with academic advising and career counseling. MPH students have the opportunity to provide feedback through informal discussions with faculty and staff, as well as a formal exit survey. The most recent survey results suggest that most graduating students agree that the MPH program’s infrastructure for academic and career advising is adequate: on a scale of one (poor) to five (excellent), mean scores rating the accessibility of faculty, course selection advice, internship and special project support, general academic support and career counseling from faculty and staff range from 4.0 to 4.2. Students interviewed on site expressed their appreciation for faculty members’ “open-door policy” and availability to schedule frequent and informal in-person meetings.

In the 2011-12 survey of PhD students, 64% agreed or strongly agreed that academic advising support is adequate and appropriate. Ninety-six percent of alumni, on the other hand, agreed or strongly agreed with this statement. The self-study suggests that the value of academic advising may be better recognized after graduation and entrance into the workforce. In an attempt to rectify the situation, the college plans to enhance efforts to convey the value of advising during the PhD experience.

The MS programs in the college are new; in fact, the oldest MS program is three years old and the second program admitted its first student in fall 2013. Systematic assessments of the advising and career counseling experiences of these students have, therefore, not been undertaken. The college acknowledges this deficit in the self-study and plans to develop exit surveys to assess MS student satisfaction with academic advising and career counseling.

The university has a clear set of procedures that govern student grievances. Student handbooks direct students to the Office of the Ombuds website, where these procedures are outlined. Grievance procedures are also posted on the Dean of Students Office website and introduced during new student orientations. Procedures may involve a student’s course instructor(s) and department chair, the executive associate dean, the dean and/or the provost, depending on the nature of the complaint and level of inquiry or appeal. The college also accommodates informal complaints through individual faculty members and department chairs.

The college received a total of six formal complaints in the last three years: two in 2010-2011, one in 2011-2012 and three in 2012-2013. Two complaints are related to academic program dismissals, and
others involve faculty communication about academic performance evaluation, academic requirements and course scheduling flexibility, the management of an honor code violation and a postdoctoral fellowship termination.
Monday, February 3, 2014

8:30 am  Request for Additional Documents
Mary Peoples-Sheps
Michael Perri

9:30 am  Meeting with Core Leadership Team
Amy V. Blue
Andrea Burne
Robert Cook
Linda B. Cottler
Barbara Curbow
Gregory Gray
Scott Griffiths
Stephanie Hanson
William Latimer
Arch Mainous
William Mann
Mary Peoples-Sheps
Michael G. Perri
Peihua Qiu
Krista Vandenborne

10:45 am  Break

11:00 am  Meeting with Self-Study Committee
Amy Blue
Andrea Burne
Linda B. Cottler
Joanne Foss
Stephanie Hanson
Sarah McKune
Mary Peoples-Sheps
Michael G. Perri
Cynthia Toth

11:45 am  Break

12:00 pm  Lunch with Students
Ben Anderson
Nicole Cranley
Soya Davis
Victoria Hunter
Margo Klar
Carol Lewis
Blosmeli Leon
Isaac Sia
Amanda Tudeen
Cesar Escobar Viera
Martin Wegman

1:30 pm  Break

1:45 pm  Meeting with Instructional Programs: Group 1
Amy Blue
Amy Cantrell
Barbara Curbow  
Allyson Hall  
Sarah McKune  
Michael Moorhouse  
Mary Peoples-Sheps  
Cindy Prins  
Tara Sabo-Attwood  
Krishna Vaddiparti

3:15 pm  Break
3:30 pm  Executive Session
5:00 pm  Adjourn

Tuesday, February 4, 2014

8:30 am  Meeting with Faculty Related to Research, Service and Workforce Development  
Mark Bishop  
Linda B. Cottler  
Gregory Gray  
William Latimer  
Sarah McKune  
Shalewa Noel-Thomas  
Michael G. Perri  
Linda Struckmeyer

9:45 am  Break

10:00 am  Meeting with Instructional Programs: Group 2  
Mark Bishop  
Steven Boggs  
Babette Brumback  
Joanne Foss  
David Fuller  
Allyson Hall  
Stephanie Hanson  
Alice Holmes  
Kenneth Logan  
Jamie Pomeranz  
Cindy Prins  
Tara Sabo-Attwood

11:30 am  Break

11:45 am  Lunch with Alumni and Community Stakeholders  
Pamela M. Blackmon  
Jeff Feller  
Karen Harris  
Marilyn Mesh  
Glenn Morris  
Darryl Pastor  
Barbara Richardson  
Allison Trainor  
Barbara Lock

1:15 pm  Break

1:45 pm  Meeting with Leadership of University  
David Guzick  
Angel Kwolek-Foliand

2:45 pm  Break

3:00 pm  Meeting with Faculty and Staff Related to Faculty Issues, Student Recruitment and Advising  
Slande Celeste  
David Fuller  
David Janicke  
Telisha Martin
Catherine Price
Emily Pugh
Richard Rheingans
Catherine Striley
Wanda Washington
Susan White
Mary Ellen Young
Xiaohui Xu

4:00 pm  Break
4:15 pm  Executive Session
5:30 pm  Adjourn

Wednesday, February 5, 2014

9:00 am  Executive Session and Report Preparation
11:30 am  Working Lunch
12:30 pm  Exit Interview