MINUTES OF THE MASTER OF PUBLIC HEALTH EXECUTIVE COUNCIL

Date:      July 20, 2012
Location:  Mosier Hall N202

Members Present:  Cates (MPH), Chengappa (DMP), Dzewaltowski (Kinesiology), Haub (Nutrition), Neill (Statistics), Odde (AS&I)
Ex-Officio Members Present:  Dorhout (Dean, Arts & Sciences), Moxley (Dean, Human Ecology), Richardson (Dean, Veterinary Medicine), Shanklin (Dean, Graduate School)
Other:  Stevenson (MPH)
Not Present:  Pierzynski (Interim Dean, Agriculture), Rush (Clinical Sciences), Sneed (HMD), Spooner (Division of Biology)

Called to Order:  By director Dr. Cates at: 8:30 AM
Quorum:  X Yes  _____ No
Adjourned:  12 Noon

<table>
<thead>
<tr>
<th>AGENDA ITEM</th>
<th>PRESENTATION/DISCUSSION</th>
<th>RECOMMENDATION/ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>CALL TO ORDER</td>
<td>Meeting was called to order by Dr. Cates</td>
<td></td>
</tr>
<tr>
<td>APPROVAL OF MINUTES</td>
<td>Minutes from March 1, 2012 were approved.</td>
<td>Post minutes to website and K-State Online</td>
</tr>
<tr>
<td>INFORMATION ITEMS</td>
<td>MPH Program Update, July 3, 2012 (Attachment 1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>MPH Program Highlights 2012 (Attachment 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>MPH Primary Faculty and Core Course Instructors (Attachment 3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>CEPH June 8, 2012 correspondence with Provost (Attachment 4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>CEPH Accreditation Criteria for Public Health Programs, highlighted (Attachment 5)</td>
<td></td>
</tr>
</tbody>
</table>
### Agenda Item 4. Need recommendation to Provost regarding CEPH Self-Study (Attachment 6)

The majority of the meeting focused on how to proceed with accreditation. Items discussed included:

- **The advantages of being accredited and/or the disadvantages of not being accredited:** Dr. Cates explained that the designation “MPH” is internationally known, so marketing would be more difficult if the title of the degree was changed to an MS degree in Public Health or an MS in Veterinary Public Health. There are 138 accredited programs in the US – 49 Schools of Public Health and 89 Public Health Program. Non-accredited programs are not listed on CEPH’s website. Students are aware of accreditation and are asking about it. One student withdrew her application when she learned the program was not accredited. Students are not eligible to take one of the national MPH exams unless they graduate from an accredited school/program. The armed forces do not recruit from non-accredited programs although some allow current officers to attend non-accredited programs. Some training grants are only available to accredited programs.

- **More curricular control needed:** Accreditation would require an additional oversight of the program including a yearly review of MPH course content via syllabi for core courses and a four year rotating review of emphasis area courses unless there is a substantial change in content and/or instructor. The MPH Faculty Advisory Council (FAC) proposed that this could be done by an MPH FAC subcommittee. It is understood that all changes would need to go through the regular departmental and institutional procedures. This would need to be spelled out in the document and we should use the exact wording in CEPH’s letter to the Provost.

- **Qualifications and required quantity of MPH primary faculty.** A review by document by department heads would insure information is presented in the best possible light.

- **Financial model and programmatic support.** Five deans meet at least each year to ensure that this interdisciplinary program has the resources it needs.
• **MPH course designation – cross listing of courses.** The group discussed the merits of cross-listing the courses with the MPH designation for the core courses and field experience credit so that they program mirrors a regular department. It would also eliminate confusion for students as to what MPH courses they need to take. Three core courses were created for the MPH program (HMD 720, KIN 818 and DMP 754), along with the Public Health Field Experience courses – DMP 840, FDSCI840, HN 840 and KIN 840. Other students take them but the majority of enrollees are MPH students (only MPH students take field experience).

It was pointed out that cross-listing creates a problem for the instructor on course capacity.

Dr. Neill indicated that the Statistics Department would prefer to retain the current course number for Biostatistics (STAT 701) and not have the course cross listed or have an MPH designation.

It was suggested that the MPH designation also carry the department teaching the course in the designation (for example: MPH DMP, etc.).

• **The following recommendation was passed:**
  o Continue to pursue accreditation under the current self-study process timeline, making the necessary changes as proposed by the MPH Faculty Advisory Council.
  o Further clarify the roles and responsibilities in the MPH Support Agreement for continuing oversight of the program using language from CEPH letter.
  o An additional new prefix listing should be established for the MPH core courses and field experience.
  o Dr. Cates will work with the Executive Council to update the support agreement.

| **Future Meeting(s)** | Fall Semester 2012 | The MPH Office will coordinate the next formal meeting in the Fall semester. | Dean Shanklin will find out from the Registrar what/how to list the new designation for the courses (STAT 701, DMP 806, DMP 754, HMD 720, KIN 818, Field Experience 840). |
Attachment 1. MPH Program Update dated 7-3-2012
Attachment 2. MPH Program Highlights 2012

MPH Graduates: We had 21 graduates in Fiscal Year 2012, by far the highest one-year total of graduates in our program’s history. We exceeded the 3 year target set by the Provost’s office in 2009 (i.e., a 3 year total of 39 graduates versus the Provost’s target of 33). You can see from one of the charts that our graduates have gone on to a very diverse mixture of further education or jobs in local, state, federal, university, non-profit, and for-profit organizations. Our total number of graduates is now 65, and 17 of those have both DVM and MPH degrees.

MPH Students: We had 39 new students start in Academic Year 2012, bringing the yearly average for the past 3 years to 39. As a comparison, we averaged less than 10 new students per year for the first 6 years of this program. For AY 2012, we had more students (93) enrolled in fall semester courses than in any previous year, and there are now 95 students who have made some progress, in the past 12 months, on their graduate certificate or degree. The total number of MPH program students’ credit hours was 1308 for this academic year, significantly higher than any other year.

MPH Faculty: We are fortunate to have a total of 55 MPH faculty, 12 of whom are considered “primary faculty” by guidelines from the Council on Education for Public Health (CEPH). Our graduate faculty members are currently from 5 colleges / 11 different departments at Kansas State University.

Kansas Board of Regents Program Review: We completed the recurring Kansas Board of Regents review of our program, exceeding all their requirements, and the university’s recommendation was to continue the program.

CEPH Accreditation: We have made multiple adjustments to our program, in an attempt to meet accreditation criteria. These include a newly approved curriculum for each of the areas of emphasis, aligned with required competencies; a new governance structure, to include all participating deans and department heads; the provost’s commitment of additional annual funds to the academic home, for administration of the program in coming years; commitments from the participating colleges and departments regarding curricular, faculty, and other support; increased field experience sites; and enhanced programmatic and student learning assessment through collaboration with the Office of Educational Innovation and Evaluation. The CEPH staff recently reiterated continuing concerns regarding our governance and financial models, specifically as they impact curricular control, and we will continue to work with faculty and senior administrators toward possible solutions.

Student Travel Awards: In the past year, MPH students received $15,980.00 in travel awards—$7980 from the MPH Foundation Accounts, through donations to the College of Veterinary Medicine Development Office, and $8000 from the College of Veterinary Medicine Dean’s Office. Travel awards for MPH students have totaled $26,480.00 — $12,480 from the MPH Foundation Accounts and $14,000 from the College of Veterinary Medicine—since we started making them available in Summer 2010.

Attachment 3. MPH Primary Faculty and Core Course Instructors

<table>
<thead>
<tr>
<th>Food Safety</th>
<th>Public Health Nutrition</th>
<th>Other Core Course Instructors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dan Fung</td>
<td>Mark Haub</td>
<td>Cliff Blair</td>
</tr>
<tr>
<td>Justin Kastner</td>
<td>Ric Rosenkranz</td>
<td>Deb Canter</td>
</tr>
<tr>
<td>Abbey Nutsch</td>
<td>George Wang</td>
<td>Bob Larson</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mike Sanderson</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Infectious Diseases</th>
<th>Public Health Physical Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keith Chapes</td>
<td>Katie Heinrich</td>
</tr>
<tr>
<td>Dave Renter</td>
<td>Mary McElroy</td>
</tr>
<tr>
<td>Deon van der Merwe</td>
<td>Vacant Position</td>
</tr>
</tbody>
</table>

Dr. Michael Cates: 785-532-2117  
Barta Stevenson: 785-532-2042  
E-mail: mphealth@ksu.edu  
Website: www.k-state.edu/mphealth
Attachment 4. CEPH June 8, 2012 correspondence with Provost

From: Mollie Mulvanity [mailto:mmulvanity@ceph.org]  
Sent: Friday, June 08, 2012 10:28 AM  
To: masona@k-state.edu  
Cc: Michael Cates; Laura Rasar King  
Subject: MPH program accreditation

Dr. Mason,

Thank you so much for your letter and for forwarding the current Agreement of Support statement for the MPH program. I have had a chance to review the documents, and my observations are below. I hope that they are helpful.

First, I must note that all of the advice that we provide as CEPH staff is based on our experience with the Council over many decisions, but the Council is the decision-making body, and they have the sole discretion to determine whether a program or school complies with our accreditation criteria.

The adjustments to governance and to the financial structure absolutely strengthen the program’s solidity and autonomy in many ways. Unfortunately, we cannot make a determination on whether the current agreement provides sufficient guarantees of curricular control to satisfy accreditation requirements. This is likely to be a major sticking point and area of focus for site reviewers and Councilors in the accreditation process.

The agreement, as written, might support the degree of curricular control that we expect for an accredited MPH program, but this is truly a case where the details of implementation matter greatly. For accreditation purposes, we expect that control over the content of all required MPH courses rests primarily with the program director and the primary faculty, who are trained and experienced in public health. The agreement that you forwarded for review asks that colleges and departments guarantee that they will offer courses and/or seats in courses, but it does not specify a role for the program director or MPH Faculty Advisory Council in ensuring that course content and implementation align with the public health competencies as defined by the program and use appropriate, current public health examples, readings, etc. The agreement indicates that the Faculty Advisory Council will “provide[s] insights on student learning and course/curriculum issues,” but there is no indication that the insights are binding or of what the process would be for implementing changes to required MPH courses in the various departments/colleges if recommended by the Advisory Council and/or program director.

Our reviewers are typically concerned in situations where the MPH relies on courses developed for and offered by other disciplinary areas. Such courses may have competing demands for content, readings and assignments that focus on disciplinary areas other than public health. An accredited public health program must ensure that public health values, mission and competencies, as defined by the program, are the primary guides for the development and implementation of required MPH coursework.

I’m sorry that I couldn’t provide a more definitive answer on the issue of curricular control, but I hope that these comments highlight some of the important issues and questions for our reviewers. As I mentioned above, the financial and governance components of the agreement are very positive steps and will allay a number of concerns that our reviewers might raise.

I will be out of the office for most of the next two weeks on business travel, but I will be checking e-mail regularly if you have any questions. We appreciate all of the thought and effort that university stakeholders have invested in moving the MPH program toward accreditation review, and we look forward to continuing to work with you.

Regards,

Mollie Mulvanity
Mollie Mulvanity, MPH
Deputy Director, Council on Education for Public Health

800 Eye Street, NW, Suite 202
Washington, DC 20001-3710
Phone: (202) 789-1050, Fax: (202) 789-1895
E-Mail: mmulvanity@ceph.org Web: www.ceph.org
Attachments

Attachment 5. CEPH Accreditation Criteria for Public Health Programs, highlighted

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

Interpretation. Within the framework of the university’s rules and regulations, program administration and faculty should have sufficient prerogatives to assure integrity of the program and to allow accomplishment of the program’s stated mission, goals and objectives. Program faculty should have formal opportunities for input in decisions affecting admissions and progress, resource allocation, faculty recruitment and promotion, curriculum design and evaluation, research and service activities, and degree requirements. Where degrees are awarded to program students through the university’s graduate school, program faculty should represent program views and interests in graduate school policy setting and decision making. Students should have formal methods to participate in policy making and decision making within the program.

Students should participate in appropriate aspects of governance including providing student perspectives on instruction, research and service opportunities, field experiences, and career counseling and placement procedures. Administrative mechanisms should permit appropriate student involvement in program policy formulation and review. Standing and ad hoc committees, with explainable exceptions, should include student members.

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

Interpretation. Program financial resources shall be sufficient to achieve the program’s mission, goals and objectives. Financial support must be adequate to sustain all core functions, including offering coursework and other elements necessary to support the full array of degrees, and must adequately support the program’s ongoing operation.

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

Interpretation. Program resources shall be sufficient to achieve the program’s mission, goals and objectives. These include personnel (faculty, administration and staff), offices, classrooms, library facilities and holdings, laboratories, computer facilities, field experience sites and other community resources that facilitate partnerships with communities to conduct instruction, research and service.

Adequate faculty resources are critical to the development and sustenance of a public health program. A critical mass of faculty is necessary to support each MPH degree offered, including generalist degrees. While instructional resources may be drawn from other parts of the university and from professionals in practice settings and the community, there must be primary faculty to sustain the curricular requirements for each specialty. To assure a broad ecological perspective, the faculty complement will need to represent various public health disciplines, regardless of the size of the student body.

The size of the faculty complement in relation to the size of the student body should support and encourage effective and regular student/faculty interactions. An appropriate student/faculty ratio (SFR) depends on a number of factors, including the nature of the institution, the range of instructional responsibilities (bachelor’s, master’s and doctoral) and instructional intensity (eg, didactic material, laboratory supervision, practical experiences, electronic methodologies). Public health instruction students, 2) be adequate for the specific curricular goals and methods of delivery and 3) demonstrate consistency with normal and acceptable ratios for other baccalaureate programs within the institution.
An accredited public health program must have at least three primary faculty for each concentration offered and for a generalist degree, if offered. If the program also offers a doctoral degree in any concentration area within the unit of accreditation, then the minimum faculty requirement rises: the program must have five primary faculty in each concentration area that includes both master's and doctoral degrees.

Collaborative programs are subject to the same minimum faculty requirements. Each concentration offered must be supported by the requisite number of faculty members, although faculty may be drawn from multiple institutions to support a single concentration, when appropriate but, typically, the minimum number of faculty may not be sufficient.

Primary faculty are full-time university employees. Primary faculty spend a majority of time/effort (.50 FTE or greater) on activities associated with the public health program. These activities must include regular responsibility for a public health class or classes. Research and service effort should be included in the FTE if the project impacts the public health program and its students.

Adjunct faculty whose primary appointment is elsewhere (e.g., at a local health department) are not eligible to count as primary faculty, regardless of their level of commitment to the program, nor are individuals whose appointment at the university is less than full-time. Faculty with nine-month contracts may constitute primary faculty if nine-month contracts are usual practice at the university.

Overall adequacy of resources relates to the ability of the program to assure the continuity of its degree programs and meet its commitments to students and other constituents. The probable stability of resources is a factor in evaluating resource adequacy.

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

**Interpretation.** The research program shall be consistent with the program’s stated mission and goals and should complement learning objectives stated for the program’s instructional programs. The program should provide an environment that is conducive to research and scholarly inquiry by all faculty. Such endeavors may involve basic and applied topics and appropriately include research aimed at improving the practice of public health. Opportunities should be available for students who would benefit from research experiences, whether or not such is required as a part of the curricula.

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

**Interpretation.** Faculty adequacy relates to a number of factors, including those stated above. The faculty of a public health program must draw broadly from the many disciplines that contribute substantially to public health and must, in particular, be able to support the instructional concentrations the program elects to offer. The full- and part-time faculty referenced in Criterion 1.7 who support each concentration area must be trained and experienced in disciplines appropriate to their instructional, research and service activities. The primary faculty may be complemented by faculty from other parts of the university as well as individuals from the community.

Faculty should teach and supervise student research and practice experiences in areas of knowledge with which they are thoroughly familiar and qualified by education and experience. To assure a broad public health perspective, in spite of increasing specialization in the field of public health, there should be faculty who have professional experience and have demonstrated competence in public health practice. To assure the relevance of curricula and individual learning experiences to current and future practice needs and opportunities, programs should regularly involve public health practitioners and other individuals involved in public health work through such arrangements as adjunct and part-time faculty appointments and use as preceptors. Programs should also encourage faculty to maintain ongoing practice links with public health agencies, especially at state and local levels.
Attachments

Attachment 6. Agenda Item 4. Need recommendation to Provost regarding CEPH Self-Study

Possible Options:
1. Move forward with our current organization and processes and submit the self-study document in May 2013.
2. Try to make enough changes to meet the criteria before the start of the 2013 academic year in mid-August 2012. Then, submit the document in May 2013 as planned.
3. Withdraw the application at this time and continue to work toward meeting all criteria. Re-apply when we are more aligned with the accreditation criteria. Possibly, hire a consultant (independent of CEPH) to provide advice.
4. Withdraw the application at this time and continue indefinitely with a non-accredited program.
5. Withdraw the application at this time and begin the process to discontinue the MPH program.

Recommendations from MPH Faculty Advisory Council:
1. Pursue accreditation under currently self-study process timeline, making necessary changes by start of Academic Year 2013 (Option 2 above);
2. Further clarify roles/responsibilities, in MPH Support Agreement, of Faculty Advisory Council, for continuous oversight of MPH-related course content, and Executive Council, for ensuring changes are made within the same academic year;
3. Cross-list all seven MPH Core Courses, with a corresponding “MPH” course designation, and designate all four Public Health field experience courses as “MPH 840.”

Opinions from the Program Director:
1. Agree with Faculty Advisory Council recommendations;
2. In addition, still need financial linkage from program to primary faculty and core course instructors.