CRITERION X.A: THE SCHOOL SHALL HAVE AN EXPLICIT PROCESS FOR 
EVALUATING AND MONITORING ITS OVERALL EFFORTS AGAINST ITS MISSION, 
GOALS, AND OBJECTIVES; FOR ASSESSING THE SCHOOL’S EFFECTIVENESS IN 
SERVING ITS VARIOUS CONSTITUENCIES; AND FOR PLANNING TO ACHIEVE ITS 
MISSION IN THE FUTURE.

X.A.1. Description of evaluation procedures and planning process being used.

Our Mission, goals, and performance against measurable objectives (described in detail in Table I-1) 
are reviewed, assessed, and revised as necessary through typically annual COPH strategic planning 
retreats. Four college-wide retreats have been held in May 2001, October 2002, November 2003, 
and October 2004. Two additional college-wide retreats have been planned for September 2006 and 
January 2007. COPH-wide retreats are planned to occur on an annual basis, and address reviewing 
and revising the COPH’s Mission, goals, and objectives as needed, as well as planning for further 
development of College activities. The initial retreat had a broad focus on visioning and developing 
the College’s Mission, Vision and core values. The latter retreats have been more focused on high-
priority issues for the College as determined by the Dean’s Executive Committee (DEC) with input 
from faculty members. Each of these retreats led to the identification of working groups with clear 
charges for the development of recommendations to be sent to the Dean, the DEC and the faculty. 
Issues deemed to require further review or development will be addressed through one of the 
permanent COPH committees, if applicable, or through the formation of an ad hoc working group. 
These committees or working groups report to the Dean and DEC, and updates are provided to the 
COPH community at the next strategic planning retreat or distributed to faculty for 
comment/reaction via other mechanisms (e.g., e-mail), depending on the urgency of the issue. A 
broadly focused retreat is also being planned for Spring 2007, five years after the College began 
classes and became operational; this retreat will explicitly be focused on reviewing the College’s 
Vision, Mission and core values and revising our five-year strategic plan.

In addition to the College-wide retreats, the COPH has made use of planning retreats for a limited 
number of faculty as need dictates. For instance, in a retreat for teaching faculty in the Fall of 2005, 
COPH faculty reviewed the core competencies for public health as developed by the ASHP Core 
Competencies project. The faculty reached consensus that the ASHP Core Competencies should be 
used as a guide for the COPH’s MPH Core Curriculum. Faculty responsible for teaching the MPH 
core courses reviewed the ASHP Core Competencies against their course objectives and activities 
determined that their courses already addressed over 90% of the competencies. Upcoming 
teaching faculty retreats planned for early spring 2007 will continue the process of integrating the 
ASPH Core Competencies into the MPH Core Curriculum.

The COPH is also fortunate to be able to benefit from the independent evaluation being conducted 
by the RAND Corporation, as part of its evaluation process for the Tobacco Settlement 
Commission which is charged by state law with overseeing the expenditure of all tobacco funds in 
Arkansas. COPH leadership worked specifically with staff from RAND to ensure that the measures 
in this evaluation would serve as a rich source of data that would not only meet the needs of the 
Tobacco Settlement Commission but also provide important information on CEPH-related
performance criteria and other items of significance to the development of our programs. The logic model and an outline of the RAND evaluation plan are provided in Appendix X.A, and RAND’s most recent report to the College is provided in the Resource File.

Finally, the COPH identified several specific internal mechanisms that were needed in order to monitor the overall development of our instructional, research and service programs, to develop and implement new policies and programs, and to ensure that CEPH guidelines were being fully addressed during all phases of the College’s development. These mechanisms are listed below.

X.A.1.a Working Groups Developed from Retreats

At the October 2002 Retreat, several working groups were identified to develop specific proposals based on the discussion and decisions reached at the retreat. These working groups were formed around the following topics: (1) Research Infrastructure needs within the COPH; (2) MPH Preceptorship and Integrative Experience Requirements, Methods, and Procedures; and (3) DrPH Program and Curriculum, Planning and Development, including preparation of an application to the Arkansas Department of Higher Education (ADHE) to establish this program. The proposals and recommendations from these working groups were conveyed to the DEC and the Dean for review, modification, and approval, followed by distribution of final proposals and recommendations to the entire faculty.

After the November 2003 Retreat, three new working groups were identified: (1) an Academic/Research Program Working Group to review the established priorities and current status of COPH research programs and recommend priorities for the development of future interdisciplinary academic training programs (i.e., MS and PhD); (2) a Distance Education Working Group to examine and make recommendations concerning the optimal methods to provide distance education in the COPH, considering such issues as blended vs. totally distance education methods and the use of different methods based on course content among other relevant issues; and (3) a Student Admissions Working Group to review admissions standards being used in other schools of public health along with data concerning the performance of our students in the MPH programs and develop recommendations concerning any changes in current admissions criteria and methods. Each of these groups developed recommendations and plans that were conveyed to the DEC and the Dean for review, modification, and approval, and then distributed to faculty.

The October 2004 Retreat focused on two issues: (1) methods for developing stronger collaborations between the Arkansas Department of Health (now called the DHHS Division of Health - DOH) and the COPH; and (2) MPH program issues, addressing plans for preceptorships and integration projects and ensuring core connections within the MPH curriculum. Two overall themes emerged from discussions of the first topic: (1) building relationships and interactions through the model of using the DOH as a “lab” for COPH teaching, service, and research; and (2) building relationships through improved and more formalized communication. Rather than appointing a working group as had been done during previous retreats, the UAMS/DOH Joint Oversight Council was charged by Dean Raczyński and Dr. Boozman, Director of the DOH at the time, with developing plans to build from these two themes. Similarly, issues raised during the MPH program issues discussions were referred to the College’s standing Academic Standards Committee.

Other working groups will convene on an ad hoc basis as determined either through DEC meetings or annual COPH retreats. As some working groups fulfill their original charge (e.g., develop the
curriculum or needed policies for the DrPH program), the DEC may request that the working group members (or a subset thereof) continue to meet regularly to evaluate the implementation of policies and procedures that fall within its area of focus. Thus, the COPH working groups provide a means of on-going planning and evaluation within identified areas of need.

X.A.1.b Departmental Faculty Meetings/Retreats
All departments engage in planning and evaluation on a continuing basis, often as part of regular faculty meetings or retreats. Chairs are encouraged to work with their departments’ faculty members to address department-specific learning objectives, curricular revisions, budget, research activities, student feedback, recruitment needs, and other related issues. They are further encouraged to tie their activities and recommendations to the guidelines from the Council on Linkages between Academia and Public Health Practice, the Institute of Medicine reports on Public Health, and, most recently, the ASPH Core Competencies. Chairs provide information to the Dean regarding departmental activities, plans, and needs during regular, monthly individual meetings with the Dean and during DEC meetings. For the purpose of the self-study, data regarding learning objectives, curricula, faculty recruitment, and research are collected from department chairs on the basis of these department meetings and retreats.

X.A.1.c Individual Faculty Data
Individual faculty data for this self-study document were collected from faculty curriculum vitae, COPH research and service activity records, and polling individual faculty. However, the COPH is working with UAMS Information Technology staff to develop a database system that will facilitate data collection regarding individual faculty activities. This will minimize the burden of annual performance review and provide a repository of data for faculty to utilize in preparing tenure and promotion portfolios and will facilitate an active monitoring approach with regard to faculty performance measures that are of importance to the COPH.

X.A.1.d Dean’s Executive Committee Meetings
The Dean’s Executive Committee (DEC) reviews the work of COPH committees as described in Criterion III. In addition, the DEC develops operational policies for the COPH and reviews performance data to identify the College's strengths and weaknesses. These twice-monthly meetings provide the Dean, members of the Dean’s office, departmental chairs and interdisciplinary center directors an opportunity to engage in continuous, up-to-date COPH monitoring and planning.

X.A.1.e Student Data
The COPH tracks student matriculation through three data systems: STARS, SIS, and OASIS. The STARS system, designed by UAMS Academic Computing Services, serves as the database for all data related to student applications to any of the COPH academic programs as well as non-degree-seeking applicants. STARS also generates the blinded score sheets for the admissions committee, tracks scores by committee member on each student, and generates summary reports for the Assistant Dean for Student Affairs and Associate Dean for Academic Affairs on the raw and mean scores awarded to each applicant. The number of accepted applicants and the demographics of accepted and admitted students are reported to the Dean, DEC, Dean's staff, and other entities in compliance with FERPA regulations. The UAMS Academic Computing Services designed the SIS system that serves as the primary database for enrolled students. This system tracks the demographic and other status information that STARS tracks for admitted students. It also tracks
advisor assignments, credit hours completed, grades earned, grade point averages, and status changes by student. The SIS system generates transcripts, student rosters, and student grade sheets in addition to maintaining data tables for instructors, classes taught for each term, and method of delivery for each class. Reports from the SIS system are given to the Dean, DEC, and other entities as requested in compliance with FERPA regulations and COPH operational policies. The OASIS system is the only system that shares student information with other entities outside of the UAMS campus. OASIS tracks all basic demographic information that STARS and SIS track as well as student tuition and fees, tuition discounts given, financial aid, student loans, student credit hours earned, and student status. Information from the OASIS system is reported to the Arkansas Department of Higher Education, various lending agencies, the University of Arkansas system office, the COPH Dean and DEC, and the UAMS Chancellor.

X.A.1.f Stakeholder Group Feedback Meetings

The COPH also continues to engage our community partners and other stakeholder groups in a continuing discussion about the COPH and our development. Comments and suggestions are solicited during meetings of the COPH Friends Group (a group of prominent leaders from various sectors and from across the state who meet on a regular but infrequent basis to learn more about the College and support us), the COPH Student Council, and during various community meetings. In addition, the retreats planned for September 2006 and January 2007 are focused entirely on enhancing the College’s focus on community-based public health, including actively problem-solving with community partners about how to make our partnerships increasingly productive and valuable to all involved. We believe that these meetings provide us with important information about how well the COPH is meeting our mission and engaging with stakeholders. Information gathered from these meetings is discussed and addressed through established mechanisms, such as the DEC, ad hoc working groups, and annual COPH retreats. As a College deeply committed to community-based public health, we strongly value an on-going dialogue with all of our partners.

X.A.2. Identification of measures by which the school may evaluate the effectiveness of its evaluation and planning activities, along with data regarding the school’s performance against these measures over the last three years.

As a result of the retreats and the self-study process, the COPH has identified several measures of our performance, all of which are included, as available, in the relevant sections of this document. These measures cover such areas as research productivity (grant funding, publications, etc.); service and practice activities; teaching evaluations; faculty and student demographics; student performance and post-graduation employment; and faculty, student, and alumni survey results. Measures that specifically address the goals and measurable objectives are also summarized in Table I-1.

Many of the self-study measures outlined in this document overlap with those identified for the measurement of College-specific goals (presented in Table I-1), but this overlap is not complete. In addition, the RAND evaluation (described in section X.A.1, above) includes multiple overlapping measures, but also some unique measures. The COPH Dean’s Office staff have taken responsibility for collecting data as well as tracking these measures, and for providing these data to the DEC and faculty members during retreats and annual all-College faculty meetings so that they may be evaluated and incorporated into strategic planning.
Other qualitative data, such as those obtained through meetings with COPH partners and other stakeholder groups are not as easy to quantify and track over time. They are, however, provided on a continuing basis for evaluation of the COPH performance.

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

The COPH meets this criterion. Planning and evaluation take place at multiple levels, including within individual departments, within the COPH as a whole, and between the COPH and our institutional, agency, and community partners. Institutional effectiveness measures, and the COPH’s performance against those measures, are established and will continue to be monitored using a regular and proactive approach. Qualitative evaluation will also be used as an important information source, particularly between the COPH and our external constituent groups.

CRITERION X.B: FOR PURPOSES OF SEEKING ACCREDITATION BY CEPH, THE SCHOOL SHALL CONDUCT AN ANALYTICAL SELF-EVALUATION AND PREPARE A SELF-STUDY DOCUMENT THAT RESPONDS TO ALL CRITERIA IN THIS MANUAL.

X.B.1. Provision of all documentation specified as being expected.

This self-study report contains documentation that responds fully to all criteria specified by CEPH and reflects a comprehensive analytical approach in the self-study process used to create this report.

X.B.2. Description of the process used for the self-study.

The College initiated writing the self-study document in September 2005 with the formation of a primary writing team composed of senior members of the Dean’s staff. This writing team then assigned among themselves the primary responsibility for initial drafts of each chapter, based on their respective areas of expertise and interest. The primary author, in conjunction with support staff and other members of the Dean’s Office and COPH Departments obtained data for each section.

The writing team also developed a multi-stage review process for the criterion chapters that would ensure that representatives from the COPH stakeholder groups would have an adequate opportunity to review and comment, and that those comments could then be fully addressed. The first stage of review took place within the writing team itself. As drafts of criterion sections were written, they were circulated among the four members of the team, and comments were provided to the original author. All members of the writing team met weekly to discuss progress on the self-study document, to formulate major themes for the document, to ensure that CEPH criteria had been adequately addressed, to ensure accuracy of COPH data, and to address any team concerns.

As each chapter was revised to the satisfaction of the writing team, it was then distributed to the members of the DEC (i.e., Department Chairs, the Associate Deans, designated college-wide Center Directors, the College’s Administrator, and Assistant Deans invited by the Dean to be standing members on the DEC) for the second stage of review and comment. The DEC members provided these comments via e-mail and were encouraged to contact any of the members of the writing team with questions about particular issues. These comments were then addressed and incorporated into revised sections.
The DEC convened a Self-study Review Committee for the next level of input and review. This committee first met in February 2006 to begin the final stage of review. The Self-study Review Committee is composed of 20 representatives of the COPH stakeholder groups, including students, alumni, faculty members, members of other UAMS colleges and departments, representatives from related institutions (e.g., Arkansas Children’s Hospital, other UA System institutions, UALR Bowen School of Law), the College’s Friends Group, community partners, a member of the Tobacco Commission, and state legislators (see Appendix X.B for a list of Self-study Review Committee members). Prior to the February 2006 meeting, Self-study Review Committee members were provided with up-to-date draft copies of the Introduction and Criteria I and II, which had already gone through the stages of review outlined above. During the February 2006 meeting, Review Committee members provided comments and suggestions to the primary writing team regarding these chapters, which were subsequently incorporated into the self-study document by the writing team.

In addition, Self-study Review Committee members were asked to volunteer, based on expertise and interest, to review at least one other criterion section as a primary reviewer and another section as a secondary reviewer. As a result, at least one primary reviewer and two secondary reviewers evaluated each criterion section. Self-study Review Committee members were encouraged to distribute themselves in order to provide diversity in the review of each criterion section, and the composition of the primary/secondary reviewer groups for each section was reviewed by the primary writing team members to ensure that diversity existed. Several Self-study Review Committee members volunteered to review more than one section, based on their level of interest. All criteria were distributed to all Review Committee members after the sections had been reviewed by the DEC, and any comments or questions had been resolved. Although primary and secondary reviewers were asked to carefully review and critique their criteria, all committee members were encouraged to read all criteria and to provide critical and constructive comments. The Self-study Review Committee then met again in April 2006 to provide their analyses and suggested changes regarding the chapters that covered Criteria III through X. Members of the primary writing team then incorporated the feedback into the self-study document. The Self-study Review Committee provided valuable information to the Dean and the primary writing team about the self-study document and about the ways in which members of our stakeholder groups view the COPH and our development.

The self-study document was resubmitted to the DEC in late April 2006 for review after the Self-study Review Committee’s contributions had been incorporated into the document. DEC members were asked to review the document and to comment specifically on the completeness and accuracy of the report, and offer suggestions for changes that should become part of the assessment and/or evaluation sections of each chapter. The primary writing team conducted a final review for editing and fact checking in early May 2006 before submission of the self-study document to CEPH for preliminary review in mid-May 2006.

Upon receipt of feedback from the preliminary reviewers and CEPH, members of the primary writing team and the DEC reviewed the comments and made recommendations on how to address comments. These comments were then incorporated in the final self-study document to be resubmitted to CEPH in mid-October 2006.
X.B.3 An analysis of the school’s responses to recommendations in the last accreditation report, if any.

Summarized below are criteria which were either not met or partially met, the major concerns raised for each of these criteria during our last pre-accreditation review, and the progress we have made in addressing each of these criteria:

**Criterion III. Governance – partially met**

Concerns were raised that, while extensive planning had occurred for the new College, not all committees were “fully operational and membership on the committees appears to be burdensome to faculty because of a large number of committees and relatively small number of primary faculty”.

**Response to Criterion III concerns** – As we describe in Criterion 8, our primary faculty has continued to grow and develop since our pre-accreditation review, providing us with more primary faculty to serve on committees and relieving some of the burden experienced by faculty during earlier periods of the College. In addition, all committees have now been fully constituted and become operational. Thus, we believe that the COPH now meets this criterion fully.

**Criterion IV. Resources – partially met**

While adequacy of space was noted, and partnerships were seen as a strength, the College was seen as not having sufficient faculty resources in all six departments or concentration areas.

**Response to Criterion IV Concerns.** The College has re-organized to now only involve five departments, each offering a concentration of the MPH. All of these departments and concentration areas have at least 4.0 FTE of faculty. Thus, we believe that the COPH now meets this criterion fully.

**Criterion V.D. Assessment of Student Achievement – partially met**

Concerns were raised that planned MPH exit interviews were not implemented at the time of the site visit.

**Response to Criterion V.D. concerns.** Exit interviews have now been implemented with all graduating students as a contributor to assessment of student achievement. Thus, we believe that the COPH now meets this criterion fully.

**Criterion V.F. Doctoral Degrees – Not met**

While the College had enrolled students into our DrPH program at the time of the accreditation site visit, the site visitors raised concerns that the program was too young to evaluate its viability and success. In addition, during the Council meeting, “the Councilors expressed concern that this doctoral degree in public health leadership was not directly ‘relevant’ to one of the five basic areas of public health.”

**Response to Criterion V.F. concerns.** Students have now progressed in their coursework in the DrPH program, and the first cohort of students are finalizing their comprehensive examinations in Fall 2006, before the scheduled site visit. Further examination leads program faculty to believe that
the program is directly relevant to two areas (Health Policy and Management, and Health Behavior and Health Education) as an interdisciplinary program and meets the criterion for providing a doctoral degree in public health that is relevant to more than one of the five basic areas of public health. Further, this doctoral program is viewed by the faculty as being highly relevant to the College’s Mission. Thus, we believe that the COPH now meets this criterion fully.

**Criterion VIII.A. Faculty Qualifications – Partially met**

While it was determined that the COPH is “on its way to building a faculty complement”, it was noted that the faculty in some, lower-prioritized departments had not established a core, primary faculty.

**Response to Criterion VIII.A. concerns.** All five departments currently have at least 4.0 FTE of faculty, and searches are in place to increase the faculty complement in all departments to 5.0 FTE, with at least 5.0 FTE of primary, full-time faculty in departments which offer a doctoral program and at least 5.0 FTE of faculty for each educational program offered by the College. Thus, we believe that the COPH now meets this criterion fully.

**Criterion VIII.C. Faculty Diversity – Partially met**

While it was noted that females are fairly well represented among the COPH faculty, concerns were raised about the proportion of women among senior faculty and, of greater concern, the number of faculty members from racial and ethnic minority groups.

**Response to Criterion VIII.C. concerns.** While we recognize that recruitment of both senior-level female faculty and faculty members representing racial and ethnic minority groups will be an on-going challenge, we believe that we have made progress in both of these areas since our last review. Specifically, we have added three new minority faculty since 2002-2003, increased our number of female faculty to 25, and increased the number of female full professors to 4. While we still struggle to recruit female and racial and ethnic minority faculty, our proportion of female to total faculty is currently 47.7%, and our proportion of minority faculty has risen to 18.9%. Thus, we believe that the COPH now meets this criterion fully.

**X.B.4 Summary statement of the school’s strengths and weaknesses in regard to each accreditation criterion and the school's performance overall. (This statement may be organized as an executive summary, if the school so chooses.)**

**Criterion I: Mission and Goals**

**Strengths**

The unusual manner in which this COPH was funded by Tobacco Settlement funds, providing us with sufficient funding to develop a new college and erect a new building has enabled the COPH to remain highly mission-driven with a clear Mission and related goals.

**Weaknesses**

Although clearly presently very focused on Vision, Mission, and goals, the COPH is only five years old at the time that this self-study is being submitted, and our College thus has not yet had sufficient time to ensure that we can maintain our present Mission-driven focus. We recognize that the COPH has substantial progress to make to fully realize our goals and certainly our Mission.
Criterion II: Organizational Setting

Strengths

We believe the organizational setting of the COPH is a strength. The COPH is fully recognized at the same administrative level as all other Colleges at UAMS and at the same level as all other Colleges and Schools in the UA system. The Dean of the COPH has the same degree of autonomy and responsibility as the other five units headed by a dean at UAMS. Dean Raczynski reports directly to the Chancellor, and he has open and free access to the Chancellor, meeting frequently in one-on-one meetings with him, as well as weekly with the other deans as part of the Chancellor’s Cabinet to discuss policies and directions for the campus. Further, the COPH is internally organized in a manner that maximizes efficiencies while encouraging departmental advancements and creativity. The philosophy and activities of the COPH accurately reflect our Vision and Mission statements. External collaborations permit us to maximize our resources to strengthen the public health workforce and improve the health of Arkansans.

Weaknesses

While the organizational setting unquestionably ensures that the COPH has appropriate autonomy and responsibilities and the COPH has quickly developed a strong internal structure, developmentally we realize that we are still very young as a College. Progress has been made since our last self-study in hiring key positions, including a permanent Chair of the Department of Epidemiology, but a permanent Chair of the Department of Health Behavior and Health Education still has to be hired. In addition, while searches are actively in progress for faculty members in epidemiology and biostatistics, we recognize that additional faculty need to be in place in these two departments to ensure that we have sufficient faculty resources.

Criterion III: Governance:

Strengths

As with the development of a Vision and Mission, the COPH has substantially benefited from the manner in which it has been funded to develop a clear Vision and focus in our governance. The COPH has full authority and sufficient infrastructure to establish necessary policies and procedures for a professional school located in an academic health center within the UA system. Current policies and procedures provide input from faculty, students, and staff. In addition, substantial partnerships are in place with communities, agencies, institutions, and organizations to provide collaborations that are consistent with and will help support our community-based public health focus.

Weaknesses

We believe that there are some areas of our governance that need further strengthening, as may be expected for a College at this early developmental stage. For example, our internal budgetary and resource allocation processes are moving toward an eventual largely incentive-based system that will also incorporate components based on historical allocations to ensure that no drastic shifts occur in funding levels and school priorities as monitored by the Dean. However, over the short-term, with the need to develop all departments and interdisciplinary programs and an overall budget that is certainly adequate for the development of a COPH but not generous enough for the concurrent development of all departments and programs at the same rate, a prioritized developmental approach must, we believe, be maintained. We recognize a need to develop governance policies in some areas, such as with resource allocation, as the COPH matures. Nonetheless, for our early developmental stage, we believe that we fully meet governance criteria.
Criterion IV: Resources

**Strengths**
The COPH has resources adequate to fulfill our stated Mission and goals, as well as our instructional, research, and service objectives. Space is currently adequate to meet current office, classroom, research, and common space needs, and has been designed under faculty direction to provide a model environment for a school of public health. Research and instructional equipment is new, providing excellent computer facilities and resources for students, faculty, administration, and staff. The focus on community-based public health approaches with an Office of Community Based Public Health and strong community partnerships is a clear strength for instruction, research, and service programs.

**Weaknesses**
Although space is currently adequate, the College’s allotted space is nearly completely occupied while faculty, research programs with needed staff, and students are expected to continue to increase, creating challenges for future space. Plans are in place for additional on-campus space as current campus building projects are realized and/or off-campus space rental to meet future needs if necessary, but space needs will need to be closely monitored to ensure that the College has adequate space when needed. In addition, the need to occupy future space outside of the COPH building has the risk of fragmenting programs and creating inefficiencies. Faculty searches (Chair for the Department of Health Behavior and Health Education; faculty searches for Departments of Biostatistics and Epidemiology) also need to be successful to ensure adequate faculty resources and leadership. Finally, while adequate library resources are currently available, rapidly escalating subscription costs and increasing numbers of students on the UAMS campus raise concerns about the degree to which library holdings and space will remain adequate.

Criterion V: Instructional Programs:

**Strengths**
A major strength of the College’s instructional programs, as in many areas for this new College, is the degree to which they relate to the College’s Mission. Consistent with our Mission, the COPH has focused initial programs on professional degrees, offering a generalist and five specialized MPH degrees, and the DrPH. Three combined professional degree programs (JD/MPH, MD/MPH, PharmD/MPH) also exist, and students in these programs must fully meet all MPH program requirements. The MHSA program, an equivalent degree to the MPH, recently transitioned from the University of Arkansas at Little Rock (UALR) campus to the COPH and began enrolling students at UAMS in Fall 2006; this program move was driven by a consistency with the College’s Mission and a desire not to duplicate programs. The COPH offers the MS in Occupational and Environmental Health, and has just begun offering one new PhD program in Health Systems Research with students admitted in Fall 2006.

**Weaknesses**
Although we believe that we fully meet this criterion, we also realize that the breadth and depth of our degree programs and resources to support them will need to develop. Existing programs will probably also need to be refined. The range of available courses in MPH specialty tracks must expand and be responsive to student need and our Mission as well as the changing nature of the public health profession. The MHSA program, although established at UALR for more than 25 years, has just undergone further refinement to provide training in all core areas of public health. Finally, although resources are adequate for mounting the new PhD program, a health economist is
still needed for the Health Systems Research PhD program. In addition, a permanent chair is still needed for the Department of Health Behavior and Health Education which will house the new Health Promotion and Prevention Research PhD program, which is expected to open in Fall 2007.

**Criterion VI: Research**

*Strengths*

While we realize that our research programs are somewhat modest by absolute levels, we believe that they also show a strong trend to increase, given the early stage of our development. Full-time faculty are rapidly increasing in number as ongoing searches successfully conclude. While we believe that junior faculty have strong research potential, senior-level faculty being hired have established records of research productivity, adding to our confidence that current trends in our research productivity will increase as faculty become established. With a strong mission orientation guiding the hiring of our faculty, we anticipate that even junior-level faculty will find the mentorship and support to enable them to become productive in research very quickly.

*Weaknesses*

The current developmental stage of our College notwithstanding, even recognizing the likelihood of enhanced productivity as newly-hired faculty with strong research records become established, we realize that our current level of productivity is still only modest in absolute terms. Federal allocations to research also present reasons for concern in the research community. Nonetheless, particularly given our current relatively modest state funding level despite increases in our state allocation by the Chancellor, research productivity will be essential to our continued growth and development and will need to grow. In addition, in a new College, we recognize the need to develop a culture and concrete methods of ensuring that junior faculty are adequately mentored.

**Criterion VII: Service**

*Strengths*

With the strong service orientation of the COPH and the strong network of academic, state agency, and community-based organization partnerships, we believe that service is a significant strength of the COPH. In addition to service rendered through and with these partners, COPH faculty, staff, and students participate in a complement of service programs at: state agencies (particularly the DOH) and community-based organizations; UAMS as well as other institutions in the UA system; with the Arkansas legislature, the Governor, and other elected officials; among residents of the state; and in providing state and national service to public health and the other related professions. The COPH is young in our evolution, but already the links between service, learning, and research and between practice and theory have been established to a surprisingly broad extent.

*Weaknesses*

Although we believe that performance of the COPH in service is at a significant level, particularly at this early stage in our development, clearly the extent of service contributions has yet to be fully realized. This is particularly the case with contributions to service at the national level. Nonetheless, with the strong service records of several recently recruited faculty and some time to mature, we anticipate that the COPH will expand our service contributions at all levels, increasing those at the national level to match what is currently contributed within Arkansas.
Criterion VIII: Faculty

Strengths
The COPH has, in a relatively brief time since our inception, amassed a well-trained, diverse, and multidisciplinary faculty, many of whom come to the College with strong records of research, funding, publication, education, teaching, and service. The COPH benefits not only from our salary-supported faculty members’ contributions, but also from significant involvement from a large, non-salary-supported faculty, many of whom are closely involved in the teaching, research, and/or service missions of the COPH. There are close links established between the faculty and the practice community; indeed, practice issues are integrated into faculty research and teaching activities and practice involvement is rewarded in the promotion and tenure process. Faculty development is supported through a variety of mechanisms and continues to be a focus for the COPH. We anticipate that the COPH faculty will continue to grow over the next several years, and that multidisciplinary collaboration and productivity in community-based research, practice, teaching, and service will continue to be encouraged and rewarded.

Weaknesses
The COPH recognizes that we must continue to expand our faculty to fully engage in the research, teaching, and service activities that are central to our Mission. Therefore, ongoing recruitment, particularly in smaller departments (e.g., Biostatistics and Epidemiology), is critical. As part of this recruitment effort, the COPH also must continue to maintain our efforts to recruit and retain racial and ethnic minority faculty members. The activities of the Dean’s Office, particularly the Assistant Dean for Minority Affairs, will continue to be supported. In addition, as the faculty expands, so must the COPH-based programs supporting faculty development. The Associate Dean for Academic Affairs and Assistant Dean for Minority Affairs are working together to develop more focused programs in addition to those already available.

Criterion IX: Students

Strengths
The COPH is fortunate to have a growing student body that is highly diverse in terms of age, ethnicity, gender, and state geographic regions. Focused efforts in recruiting a strongly diverse student body have been successful and will continue to be implemented, with a continuing focus on serving the COPH community partners. Admissions policies and procedures have been developed to ensure impartial review of student applications. Finally, a variety of student services, including a two-tiered academic advising system and a variety of university resources for counseling and support, are available to students.

Weaknesses
Although the student body is highly diverse, a vast majority of students are currently working and only take classes on a part-time basis. Few traditional students are being recruited at the present time. We thus recognize that we need to develop relationships with undergraduate programs and educate faculty in these undergraduate institutions; in addition to educating undergraduates themselves about careers in public health. Presentations at undergraduate institutions is now a high priority of the Office of Student Services, but we must be successful in attracting high-quality, traditional students, particularly as some of the demand for graduate education among those in the Arkansas public health workforce lessens over time.
Criterion X: Evaluation and Planning

Strengths
We believe that the COPH’s planning and evaluation has significantly benefited from our rapid developmental course made possible by significant funding from the Tobacco Settlement. Founding faculty and pro tem administrators had the foresight and experience to take advantage of the significant new funding to plan carefully for the development of the COPH and an appropriate evaluation plan, without having to address previous plans. Building on early planning, permanent COPH leadership and faculty have focused on developing a set of detailed goals, an evaluation plan with carefully developed measurable objectives, associated measures, and an ongoing strategic planning process that will ensure a problem-solving approach during our development. Since the legislation that established the COPH requires an independent evaluation, we also benefit from the Arkansas Tobacco Commission’s subcontract to RAND, allowing us to gain a perspective from this independent evaluation.

Weaknesses
As with several other criteria discussed in this self-study, we realize that there is still much work to be done. Evaluation measures which overlap but somewhat differ from CEPH Criteria, our measurable objectives, and the RAND evaluation results in a fairly complex set of measures for which we will need to collect data. Prioritizing these measures and grappling with issues related to needing to be accountable and responsive to RAND, the Arkansas Tobacco Commission, and the Arkansas General Assembly, in addition to the usual constituents, will remain a challenge for our College. In addition, while a clear strategic planning process is in place, we recognize that the COPH still has much to plan in further developing our new College (e.g., an expansion of existing and development of new instructional programs; College infrastructure for the development of new programs), requiring us to ensure that our planning remains systematic and does not become unfocused over time.

X.B.5 Assessment of the extent to which this criterion is met.
The COPH meets this criterion. All documentation has been provided as requested in CEPH guidelines, and the self-study process was conducted in a thorough, systematic, and open manner. Through the self-study process, the COPH has identified strengths and weaknesses within our programs and is actively addressing any concerns as well as ensuring that our strengths continue to be developed.