DEPARTMENT OF PUBLIC AND ALLIED HEALTH
PROGRAM REVIEW COMMITTEE REPORT

The Department of Public and Allied Health prepared a self study following program review guidelines. A two-person external review team (Dr. Jeanne Thomas, Dean, College of Health and Human Services, Eastern Michigan University and Dr. Kathleen McEnerney, Dean, College of Health Sciences, Tennessee State University) visited the campus; reviewed the self-study documents; interviewed unit personnel, university administrators, undergraduate and graduate students; and submitted an external report. The Program Review Committee studied all written materials. The Committee liaison for the Department discussed the self study with the department chair and faculty. The Committee discussed the Department with the Dean of the College of Health and Human Services. This document reflects the Committee’s findings and recommendations.

SUMMARY OF THE SELF STUDY

Introduction

The Department of Public and Allied Health is one of three departments in the College of Health and Human Services. The Department offers three academic degrees, the Bachelor of Applied Health Science, the Bachelor of Science in Medical Technology, and the Master of Public Health. The Department has been approved for seven faculty lines of which six are filled. There are one full-time and one half-time hard-funded administrative staff who have administrative and teaching duties. There is one soft-funded full-time administrative staff with administrative and teaching duties. While all faculty work with students across subunits, faculty in the area of medical technology are located in the Life Sciences Building and faculty in the Masters of Public Health program are housed in the College of Health and Human Services Building. The department secretary is housed in the Life Sciences Building.

Mission. The Department has developed a mission and vision statement. Its mission is to “prepare people to contribute to the well-being of others by providing knowledge, training, and skills required to promote health, prevent disease, and provide optimum health care.” Its vision is to “be recognized nationally and internationally for the quality of its graduates and the contributions the faculty and graduates make to health care delivery and public health services” (self study, p. 3). In addition to an overall departmental mission statement, there are mission statements for Medical Technology and for Applied Health Science. The mission of Medical Technology is to “prepare its graduates to accurately perform laboratory tests on blood and body fluid specimens that aid in the diagnosis, management, and treatment of disease” (Appendix 1, p. 1). The mission for Applied Health Science is “to provide optimal preparation for a health career or post baccalaureate program in a health profession” (Appendix 1, p. 1). The departmental mission is congruent with the mission of the College of Health and Human Services.
Services. The mission of the College is to contribute to the improvement of the spectrum of health and human services in Northwest Ohio, the state of Ohio and the nation through instructional programming, research, and community service (p. 4).

The departmental mission is also congruent with themes of the Academic Plan (leadership in learning, critical thinking about values, understanding cultures and nations, and new media and emerging technology). The Department infuses these themes into its coursework and instruction (p.4).

History. The Department is relatively new, having been created in 2001 through a merger between the program in Public Health and the Department of Medical Technology. The Department of Medical Technology was responsible for the degree program in Medical Technology, the Applied Health Science degree and the HIV/AIDS Education program. The program in Public Health was responsible for the Administration major of the Master of Public Health degree. Because of shared and interactive interests in the curriculum, in the laboratory domain and in research, both faculties voted unanimously to engage in the merger to become the Department of Public and Allied Health. Environmental Health was initially involved in the merger dialogue, but chose not to participate. Following the merger in 2001, a systematic evaluation of curricula was undertaken, resulting in several new courses for the undergraduate degrees as well as several new elective courses for the Masters of Public Health. In 2002, the Department introduced a minor in public health. In 2003, at the request of the Dean of the College of Health and Human Services, the Department prepared an Academic Plan, which serves as a “template for its future” (pp. 3-4 & Appendix 1, p. 1). Because the Department is in its infancy, this will be the first university program review of the Department.

Description of the Unit

Program identification. The Department of Public and Allied Health offers undergraduate degrees in Medical Technology and Applied Health Science. Students in Medical Technology acquire a background in basic and medical laboratory science suitable for clinical testing, graduate school, and research. In addition to working in clinical laboratories, graduates of this program may find employment in cytogenetics, medical informatics, fertility testing, DNA analysis, and forensic science. The Medical Technology program is accredited by the National Accrediting Agency for Clinical Laboratory Sciences.

The Bachelor of Applied Health Science degree provides students with a firm foundation in basic and health-related sciences. The degree is designed to meet the needs of a wide variety of students with diverse health science interests and career goals. There are three separate specializations in Applied Health Science degree, as follows:

- Allied Health. This specialization is designed to offer a program of study for students who have already completed an associate’s degree in an allied health field such as dental hygiene, radiology technology, health information technology,
optometric technology, diagnostic technology, diagnostic medical sonography, surgical technology, or respiratory care.

- Applied Microbiology: This specialization prepares students for work in microbiology careers.
- Health Science: This specialization prepares students for entry into a number of graduate programs in the allied health and medical fields such as master’s degree programs in occupational therapy and physician assistant. (p. 2)

At the graduate level, the Department offers a minor in Public Health focusing on information in the public health field. The minor requires 18 semester hours of coursework selected from eight approved courses (24 semester hours).

Also at the undergraduate level, the Department offers three courses related to AIDS. With advisor approval, these courses may be applied to undergraduate graduation requirements (Appendix 1, pp. 1-4).

At the graduate level, the Master of Public Health (MPH) is granted jointly by Bowling Green State University, Medical University of Ohio at Toledo and the University of Toledo. These three universities comprise the Northwest Ohio Consortium for Public Health (NOCPH). Five major areas of concentration within the MPH degree are available: Environmental and Occupational Health, Health Promotion and Education, Public Health Administration, Public Health Epidemiology, and Public Health Nutrition. Students will complete core courses, major courses, and elective courses in an area of concentration. Students will complete approximately 50% of their credits at one institution while the remainder of coursework may be taken at other member universities of NOCPH (p. 2, Appendix 1, pp. 1-4).

Faculty resources. The Department has been approved for seven faculty lines of which six are filled. One full-time and one half-time administrative staff have administrative and teaching duties. One soft-funded full-time administrative staff has administrative and teaching duties. Three faculty members and one administrative staff have 12-month contracts because the medical technology training program is year round. Faculty workloads are differential and depend on tenure status, grant support, and administrative responsibilities. The time-averaged allocation of effort for faculty is consistent with the department’s merit, promotion and tenure guidelines (55%=teaching; 35%=research; 10%=service) (pp. 1, 5, and Appendices 2, 3, and 4).

Graduate assistant resources. Since there is only one graduate program in the department (MPH), the program receives an allocation of two full-time (0.5 FTE) graduate assistants. The Department receives an added full-time graduate assistantship (as two 0.25 FTE GA’s) to assist with the Health Sciences Residential Community. Graduate assistants are assigned to administrative duties and research, but do not teach any courses (p. 5).

1 Since the self study was written, the University of Toledo and the Medical College of Ohio have joined. The consortium now involves just two named institutions, but the basic organization and agreement have not changed.
**Staff resources.** There is one full-time secretary, whose work area is located in the Life Sciences Building. This secretary serves as the secretary for the five faculty and staff members located in the Health Center building as well as the five located in the Life Sciences Building. The Department has 2.5 FTE Administrative Staff. One of these FTEs is allocated permanently to the laboratory manager, assisting with all ten medical technology laboratory courses, supplemental instruction in all laboratory courses, clinical site coordination at three hospitals, and teaching the program’s laboratory management course. One FTE is a temporary Administrative Staff responsible for being the HIV/AIDS Education Coordinator and the MPH Program Coordinator. This position is supported by grant funds and the college’s part-time instructional budget. The remaining half FTE is used to provide the medical technology program with an instructor for Hematology courses and a clinical site coordinator for four hospitals. This position is funded by the college’s part-time instructional budget, summer instructional budget, and money from the Provost’s Office as release time for the HSRC Director (who is also the Department Chair) (p. 6).

**Student credit hour production.** For the 2004-05 academic year, the number of undergraduate majors and minors in the Department were as follows:

<table>
<thead>
<tr>
<th>Major/Minor</th>
<th>Specialization</th>
<th>Count</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applied Health Science</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Allied Health</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Applied Microbiology</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health Science</td>
<td>76</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physical Therapy</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pre Physical Therapy</td>
<td>176</td>
<td></td>
</tr>
<tr>
<td>Medical Technology</td>
<td></td>
<td></td>
<td>271</td>
</tr>
<tr>
<td>Minor in Public Health</td>
<td></td>
<td>36</td>
<td></td>
</tr>
<tr>
<td>Department sum</td>
<td></td>
<td>316</td>
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</tbody>
</table>

At the graduate level, the number of majors in the Master of Public Health Degree for the 2004-05 academic year was 80, of which 28 were in Public Health Administration.

The student credit hour (SCH) production for the Department and the SCH per full-time equivalent (FTE) faculty ratio were as follows for 2004:

<table>
<thead>
<tr>
<th></th>
<th>SCH</th>
<th>SCH/FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spring, 2004</td>
<td>1042</td>
<td>125</td>
</tr>
<tr>
<td>Fall, 2004</td>
<td>1230</td>
<td>205</td>
</tr>
</tbody>
</table>

The self study notes a decline in SCH/FTE between Fall 2000 and Fall 2001 coincident with the decline in the number of medical technology majors. The self study also notes an
increase in SCHs and SCH/FTE ratios beginning in Fall 2002 when tenure-track faculty were teaching workloads of five courses per academic year (pp. 6-9).

Recruitment and retention efforts. At the undergraduate level, the Department engages in a number of recruitment activities including development of Web sites for both Applied Health Science and Medical Technology; providing booths at Preview Days; providing information sessions and laboratory open house on President’s Day; posting color posters on bulletin boards in the College; disseminating posters to high school advisors in northwest Ohio; participating in Enrollment Network tours and High School Counselor Day; contacting prospective majors via health-related events such as the Wood County Hospital Open House and the Health Sciences Residential Community MUOT Night; working with the Office of Admissions to mail information to interested high school students; and introducing students to the health care profession through MEDT 101 “Introduction to Health Professions.”

Retention efforts at the undergraduate level include requiring freshmen to see an advisor at least once during both fall and spring semesters before they can register; requiring freshmen not receiving a GPA of 2.0 or higher at the end of their first semester to participate in a UNIV 100 class; providing advising via faculty and through the college advising office; providing remedial assistance for students encountering learning problems; and encouraging students to participate in the Health Sciences Residential Community, Study Skills Laboratory, Writer’s Laboratory, and Math Laboratory.

At the graduate level, the Department uses a Web site, brochures, and an electronic newsletter. Faculty also are represented at the Ohio and American Public Health Association annual meetings. Retention efforts at the graduate level include notifying a student in writing if they do not meet the criteria for passing a graduate course and placing them on academic probation (pp. 11-13).

Facilities and equipment. Some programs in the Department, such as Allied Health Science and Public Health Administration, do not require special classrooms or laboratories, so faculty use standard classrooms. Other programs, such as Medical Technology and Microbiology, require special laboratory facilities. Medical Technology is housed in the Life Sciences building and laboratory courses are held in room 513 of Life Sciences. Microbiology laboratory courses are held in 531 in the Life Sciences building. Due to OSHA safety requirements, eye-wash stations and approved safety showers are housed in rooms adjacent to the two laboratory classrooms (rooms 511 and 532). Specialized equipment is required for both of these programs, e.g., special storage areas for chemicals that are hazardous, fire extinguisher, microscopes, refrigerators, freezers, compressed air, dishwashers, drying ovens, centrifuges, incubators, and clinical chemistry analyzers (pp. 14-15, Appendix 6).

Information resources and services. All faculty and staff are provided with a desktop computer system. Graduate assistants may use any of the computer labs on the BGSU, MUOT, or UT campuses. The medical technology laboratory contains three computers that have specialized medical technology software programs. Additional
software programs can be accessed by students and faculty through the University of Washington Department of Laboratory Medicine MTS Training Library, to which the Department subscribes. The Department also maintains a library of reference books to be used by students in the laboratory classes (pp. 16-17, Appendix 8).

**Financial resources.** The self study (p. 17) reflects a large increase in personnel expenditures from academic year 1997-98 ($279,632) to academic year 2003-04 ($754,027). In large part, this was due to hiring three new faculty. The operating expenditures during this same time span showed a minimal increase from $32,500 in 1997-98 to $35,400 in 2003-04. The self study raised several questions regarding the financial report supplied by the Office of Institutional Research. One question raised was how Institutional Research would reconcile the personnel expenditures/SCH ratios for faculty who are on 9-month contracts and for those who are on 12-month contracts. Further, the self study asserted that under operating expenditures, Institutional Research erroneously charged computer equipment against the budget for the Department (pp.17-18).

**Self Evaluation**

**Faculty quality and productivity.** The Master of Public Health faculty are drawn from several departments at the three consortium institutions. Of the 28 faculty members who have appointments on the MPH faculty, eight have at least two graduate degrees. Over one-third of the MPH faculty hold the academic rank of full professor.

For the undergraduate program in Medical Technology, three full-time faculty, one full-time administrative staff, and one part-time administrative staff are responsible for teaching all of the professional training courses. The faculty members assigned to teach these specialized courses in medical technology are registered technologists with several years of experience working and teaching in their particular disciplines. In addition, there are 67 adjunct faculty members who are responsible for training students during their clinical rotations at one of ten hospitals in northwest Ohio.

Faculty members in Applied Health Science are assigned course instruction based on their areas of expertise and background experiences. The self study (pp.19-23) emphasizes that the credentials, teaching, and professional experiences of the faculty in the programs in the Department are commensurate to the norms of those programs at other universities and at medical schools that have MPH and medical technology programs.

From 1997-98 to 2003-04 (computed on four faculty prior to 2000 and seven faculty members between 2000-2004), on a per capita basis faculty in the Department had an average of 3.2 peer-reviewed publications per year. Department faculty members have been awarded an average of four grants per year throughout this same period of time. It should be recognized that many of the research projects and the grant proposals awarded to department faculty are centered on scholarship of engagement activities. These include such grants as the Ohio HIV Evaluation and Training Project; the Ohio AIDS Education
Project; Medical Supplies and Training to African Nations; the Toledo Lead Monitoring Project (Ohio Environmental Protection Agency); and the Lead Exposure and Nutrition Program (Toledo Botanical Gardens) (pp. 23-24).

**Student entry attributes.** For entering freshmen in 2004, the ACT scores of Allied Health Sciences majors was 21.9 and the ACT scores of Medical Technology majors was 23.1. For comparison, the university-wide mean composite ACT score was 21.9. During this same time frame, the GPA of students admitted to Medical Technology was 3.19 compared to the mean GPA (2.91) for juniors at BGSU (pp. 25-26). Entrance requirements for the MPH Program is a GPA of 3.0 (p. 29).

**Assessment of student learning outcomes.** The programs in the Department have established learning outcomes and assessment procedures to evaluate and measure those learning outcomes. Assessment methods for Applied Health Science include the following:

- Survey of students in the program for relevance of courses to learning outcomes
- Survey of AHS graduates for career preparation
- Tracking of AHS graduates into graduate programs
- Tracking of AHS graduates into careers
- Feedback from graduate programs accepting our graduates
- Feedback from instructors teaching capstone courses

Assessment methods for Medical Technology are more detailed and include the following:

- Comprehensive capstone examinations at the end of training
- Comparisons with national averages on certification exams
- Evaluation of each student’s clinical performance by rotation supervisors
- Formal and informal evaluation of graduates during their probationary period of employment
- Evaluation of the program by graduates
- Rigorous review of program content by accreditation site visitors
- Feedback from regional laboratory managers who comprise the External Advisory Board of the program
- Review of annual goals with the college dean

The self study did not address learning outcomes or assessment measures for the Master’s Degree in Public Health (pp. 29-32, Appendix 10).

**Curriculum, instruction, and support services.** The curriculum for Applied Health Science was designed to be non-technical in nature in order to permit transition by students into a wide range of post-baccalaureate training programs or into a health care related field. Initial curriculum modifications focused on adding new health-related courses, including some that would meet the general education requirement in the social sciences. A second modification of the curriculum came about to bring it into line with the needs of the MUOT programs with which it articulates, Physical Therapy, Occupational Therapy, and Physician Assistance. The Department uses student
evaluations and tracking of students and postgraduate follow-up to monitor curriculum development in Applied Health Science. Strengths of the Applied Health Science curriculum are its relevance, flexibility, and interdisciplinary nature. The self study attributes potential weaknesses in the curriculum to the high rate of faculty turnover.

The curriculum and professional training program in Medical Technology has been accredited by the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS). It is one of four accredited university-based clinical laboratory science programs at state-supported schools in Ohio. The curriculum takes nine semesters to complete. The first five semesters are devoted to general education and basic science core classes for clinical applications. Accreditation standards and changing clinical environments have necessitated that additional coursework in management and molecular biology be added to the curriculum. Modifications in the curriculum are based on student evaluations and feedback as well as on performance-based measures such as student pass rates on external certification examinations. Strengths of the program are the expertise and experience of its faculty in core curriculum areas, the student laboratory experiences, and the one-on-one training by clinical affiliates. Weaknesses include a shortage of laboratory space and a declining population of students who seek a career in clinical laboratory sciences.

The Council on Education for Public Health accredits the master’s degree program in Public Health. Course curriculum is monitored closely and curricular modifications are heavily based on student evaluations/ feedback, accreditation standards, and self study by the faculty. The strengths of the Public Health curriculum and program are the wide-ranging diversity of its faculty, the pooling of learning resources from three academic institutions, and the offering of the entire program through evening courses. Weaknesses of the program include the time needed to coordinate schedules, policies and facilities of three academic institutions as well as the relatively large size of many core curriculum classes (pp. 26-29).

Service. As a department, services focus on student advising, the promotion of health, and increasing the public’s understanding of disease. On an individual basis, faculty and staff engage in a wide variety of services to the institution, to professional societies, and to various communities (p. 33).

Comparative advantage and program distinctiveness. The Masters of Public Health program was the first consortium for public health in Ohio. The advantage of this program is its ability to share faculty resources across institutions capitalizing on the strengths of the partnering institutions. The self study notes an added distinctiveness of the program due to the fact that the university’s two health-related components (Public Health Administration and Public Health Nutrition) are housed in two different colleges, the College of Business and in the College of Education and Human Development.

The distinctiveness of Medical Technology is that it is one of only four clinical laboratory-science training programs at Ohio-supported universities. The distinctiveness
Demand. The U.S. Bureau of Labor Statistics projects an increase of three million jobs in all health care areas by 2008. The Occupation Outlook Handbook for 2004-2005 projects a 10 to 20% increase in job opportunities for medical technologists in the U.S.A. Consequently, there would appear to be an increased demand for trained health care professionals in all programs being offered by the Department of Public and Allied Health.

Relative to class/course demands for the Department, it would appear that the demands for lower division classes such as MEDT 101 “Introduction to Health Professions” and MEDT 205 “Acquired Immunodeficiency Syndrome” are higher in the fall semester than in the spring semester. In the Masters in Public Health, it would appear that there is a heavy demand for PUBH 605 “Concepts and Issues in Environmental Health” as class size for this graduate course often exceeds 35 students (pp. 34-36).

Connection to the mission. The mission for the Department is consistent with the mission for the College of Health and Human Services as well as being consistent with the mission of Bowling Green State University. The University’s mission is “to uphold, promote, and implement the educational values essential for the continuation of a free society.” This is accomplished by “providing quality academic programs in a learning environment that promotes academic and personal excellence in students, as well as appreciation of intellectual, ethical and aesthetic values.” The mission statement identifies the purpose of the university, but the vision statement and its academic themes (The Academic Plan for BGSU, 2003) provides the roadmap for the future. “Bowling Green State University aspires to be the premier learning community in Ohio, and one of the best in the nation.” Educating those who care for the health of others as well as providing general knowledge about personal health and the health of the public are functions essential to the full expression of the university’s mission and vision (pp. 36-38).

Financial considerations and adequacy of resources. According to the self study (pp. 45-46), the personnel resources based on existing lines (filled and unfilled) are adequate to meet the instructional, research and service expectations for the Department. However, the operating budget is inadequate, and often ends up borrowing from other areas within the budget. It was also noted that the consortium operating budget has been inadequate since the program’s inception (pp. 44-46).

Unit Planning

The planning process. The planning section of the self study seems more like an historical narrative with some future projections added. The planning goals and processes are not clearly articulated nor are organized timelines offered. It would appear that most of the Unit Planning would be done program by program rather than by the unit as a
whole. Committee structures within the unit are not delineated nor are there any indications of what role unit committees might play.

**Goals and strategies.** Goals for the unit as a whole would seem to include the following:
- Increase faculty productivity (especially in grant awards) through collaboration with other department faculty, with other members of the public health consortium, and with faculty in other departments/programs within the university.
- Pursue new incentives with the Dean to reward faculty members who engage in research activities beyond those that fall within the expectations of their normal workload (pp. 47-52).

The goals and strategies for the Department are not clearly articulated. Some goals identified for Medical Technology include the following:
- Develop and implement a more aggressive marketing campaign
- Increase the number of majors by 75 by Fall, 2009
- Increase the number of admissions by 14 each year, starting in 2005
- Increase the number of graduates by 12 each year beginning in 2005

Goals are more clearly articulated for Allied Health Sciences.
- Develop/deploy a Web-based version of PUBH 301 “International Health by Summer, 2006
- Develop specializations for Health Care Administration and Community Health Planning by Fall, 2007
- Increase the success of graduates entering medical school and graduate programs at MUOT by an average of 20% over the next seven years
- Review the effectiveness of the Applied Microbiology specialization meeting the college mission in 2008
- Make the Allied Health specialization available continuously on line by Fall, 2007 for any student who has completed an approved associate degree program and the basic science classes
- Work with the College of Education and Human Development to transfer the Health Promotion degree to the College of Health and Human Services

Goals for the Masters in Public Health are less detailed and include the following:
- Increase the number of the Department’s own graduates who enter the MPH program
- Determine the future direction of the program by Fall, 2006 and prepare initial proposals for new majors or a doctoral degree by Fall, 2007
- Develop a revised plan for staffing and scheduling of core courses by Fall, 2006
- Work with the Dean of Health and Human Services and the Environmental Health program director to define the responsibilities of MPH faculty for teaching environmental health courses and the role of environmental health faculty for participating in MPH courses
Timetable and implementation plan. There is no clearly outlined timetable for the goals set forth in the self study.

Relationship to the Academic Plan. The goals seem to be consistent with the Department Academic Plan found in Appendix 1 of the self study. However, it should be noted that the Department Academic Plan contains some goals that are not addressed in the Unit Planning section of the self study. These include:

- To address the topic of “Elderly” in the Applied Health Science Degree Curriculum
- Consider a course on “personal health” that would become part of General Education and would not duplicate the content of HED 215 Personal Wellness
- Target selected undergraduate programs at the University (e.g., Biology, Chemistry, Environmental Health, Environmental Policy, and Environmental Science) for the consortium program in the MPH and the Doctor of Physical Therapy.
- Consider a consortium program for a Doctor of Public Health (Appendix 1)

Questions for the external team. The self study did not include any questions for the external reviewers.

RESULTS OF PREVIOUS REVIEWS

The Department was newly created with a merger in 2001 of Public Health and Medical Technology. Thus, this is the first university program review of the Department. The self study does not address the previous review for any component programs in the Department.

SUMMARY OF THE EXTERNAL REPORT

A two-member review team conducted an external review on September 18-20, 2005. The reviewers were Jeanne Thomas, Dean of the College of Health and Human Services at Eastern Michigan University and Kathleen McEnerney, Dean of the College of Health Sciences at Tennessee State University. The external review team reviewed the self study, the Undergraduate Catalog and other materials citing the Department. In addition, they met with Department faculty, the Environmental Health faculty, the Dean of the College of Health and Human Services, University administrators, and the liaison from the Program Review Committee.

Overview. The external reviewers noted that the Dean of the College of Health and Human Services was particularly interested in the strengths of the programs, feedback on faculty research productivity, and evaluative information on departmental and program planning. In addition to meeting with personnel in the Department, the reviewers asked to meet with the faculty of the Environmental Health program to discuss the relationship between that program and the Department of Public and Allied Health. The reviewers noted that the faculty in the Department were respectful of each other, yet
seemed primarily involved in their historic programs. They also noted that the quality of the individual programs in the Department were strong.

**Self study.** The reviewers were complimentary regarding the self study and appreciated the departmental history and the inclusion of the faculty vitae. They were extremely positive about the assessment plan in the self study.

**Faculty.** Faculty workloads were appropriate and fairly distributed. Faculty research productivity varies widely across the faculty. If the faculty is to increase this productivity, areas of research should be identified and incorporated into a department-wide planning process. Faculty members were proud of their successes and shared them readily with the review team (e.g., the excellent pass rate of the medical technology students on the Board of Registry Exam).

**Leadership.** The reviewers were impressed with the leadership being offered in the Department. They noted that the chair managed the business of the Department extremely well and that he had earned the respect and trust of his colleagues. They were also positive about the leadership for the consortial MPH program. At the college level, the review team commended the dean for her leadership skills.

**Strengths and weaknesses.** The reviewers found the following strengths and weaknesses/areas of concern:

**Strengths**
- The Department has a mature, fully-institutionalized assessment program.
- Medical Technology students have posted a 100% passing rate on the Registry Examination for Medical Technology.
- Faculty are dedicated to the Department and the institution.
- Faculty’s student-centered orientation is exemplary.
- Some faculty have active research programs.
- Department staff members are knowledgeable, hard-working, and supportive of faculty.
- The medical technology laboratory manager and the College’s Advising Center Director are valuable assets to the students and faculty in the Department.
- The department head and college dean provide outstanding leadership.
- The Department is to be commended for its role in implementing the consortial MPH program.
- The HSRC and the HIV/AIDS Education programs are distinctive and serve the students well.

**Weaknesses/ Areas of Concern**
- The Public Health and Environmental Health programs are in two different departments which is a departure from the norm in structure and professional organizations.
- The MPH program is vulnerable if the unit is not vigilant in maintaining open communication with all constituent members.
• The work and storage space in the Medical Technology Laboratory is woefully inadequate.
• The MT Laboratory is not ADA/Section 504 accessible.
• The MT Laboratory poses a potential fire hazard.
• The MT Laboratory may have an overloaded electrical system.
• The MT Laboratory is in need of improved ventilation.
• The Department still needs to develop and articulate a seven-year plan with goals, timelines and expected outcomes.

**Planning.** While there is no shortage of productive initiatives for the Department in the future, the reviewers noted that neither the self study nor interviews with faculty yielded any well-articulated long-range (seven-year) plan. The Department needs to arrive at a well-articulated plan with goals, timelines, and outcomes (p.4).

**Recommendations.** Based on the self study and the site visit, the reviewers offered four recommendations.

1. Reconsider the current organizational structure; explore the possible combination of Public Health and Environmental Health in the same unit.
2. Update the Medical Technology Laboratory to increase space, provide safety measures, and provide ADA accessibility.
3. Pursue opportunities to incorporate the Health Promotion and Health Care Administration programs into the Department of Public and Allied Health.
4. Participate in a department-wide planning process that would yield a long-range plan for the Department. The plan should be well-articulated and placed in the context of the academic plans of the College and University. The plan should also provide for goals related to research productivity for faculty.

**PROGRAM REVIEW COMMITTEE FINDINGS AND RECOMMENDATIONS**

The Program Review Committee extends congratulations to the Department of Public and Allied Health for successfully completing the work required for the program review process. The Committee agrees with the external reviewers that the College and Department have been most fortunate to have competent leadership and dedicated faculty and staff who support student learning in the health fields. The PRC also concurs with the external reviewers that the Department’s strengths can be found in collaborative programs such as the Masters in Public Health; the degree of quality preparation in programs such as the Medical Technology program where students have posted a 100% pass rate on the registry examination for Medical Technology; the distinctiveness and value of having a program like the HIV/AIDS Education program; and the knowledgeable and dedicated administration, faculty, and support/advising staff.

The following findings and recommendations are intended to assist the Department in fulfilling its mission “to prepare people to contribute to the well being of others by providing knowledge, training, and skills required to promote health, prevent disease, and
provide optimum health care” and its vision “to be recognized nationally and internationally for the quality of its graduates and the contributions the faculty and graduates make to health care delivery and public health services.”

1. Develop a Strategic Plan for the Department

Findings. The Committee concurs with the findings of the external reviews that the Department needs to develop a department-wide long-range plan that is well articulated and that is in harmony with the missions and plans of the College of Health and Human Services and the University. The current planning section of the self study lacks perspective on planning for the Department as a whole. Much of the planning section seems historical in nature and planning is on a program-by-program basis. The Department needs to prioritize goals/recommendations across programs. Departmental committee structures are not delineated in the current plan; furthermore the current plan does not assign the committees roles relative to departmental planning. The strategic plan should provide goals as well as outcomes, timelines, and steps needed to achieve departmental goals.

Recommendations. The Committee recommends that the Chair work with the Dean in developing a procedure to formulate a strategic (seven-year) plan for the Department that would address the following:

- Develop a long-range plan for the Department as a whole unit;
- Develop a long-range plan for each of the program areas in the Department; and
- Develop strategies for addressing issues impacting the Department and its program areas, e.g.,
  - pending merger of the Medical University of Ohio with the University of Toledo;
  - enrollment-management issues;
  - job market for majors;
  - staffing needs and resource allocations; and
  - strategies for increasing faculty research productivity.

The strategic plan should be developed in close consultation with the dean. The PRC recommends a target date of May, 2007 for completion.

2. Update the Medical Technology Laboratory

Findings. The Committee agrees with the recommendation of the external reviewers that there is an urgent need to update the Medical Technology Laboratory due to space needs, safety needs, and ADA/Section 504 accessibility problems. Although we acknowledge there are plans to move Medical Technology to a renovated Health and Human Services Building in two to three years, the safety and other problems with the Lab are serious and must be addressed in the immediate future.

Recommendation. The faculty should meet with the Chair to identify specific modifications and updates that need to be done in order to make the laboratory a safer
and more accessible place. The Chair should consult with the Office of Disability Services and the Office for Environmental Health and Safety regarding accessibility and safety needs. The Chair then needs to meet with the Dean of the College to discuss these modifications and determine possible funding sources.

The Committee believes these issues to be urgent, and recommends resolution of these issues by August, 2006.

3. Reorganize to Facilitate Collaboration

*Findings.* The Committee agrees with the recommendation of the external reviewers that there is a need to explore organizational restructuring. This restructuring would involve further discussions with the Environmental Health program to consider its inclusion in the Department. Public and Allied Health is just completing Program Review this year (2005-2006) and Environmental Health will go through Program Review in 2006-2007. The final decision should be informed by both reviews. However, the collective benefit to the College and its students must be given the greatest weight in deciding on a course of action.

*Recommendation.* Following the program review of Environmental Health in 2006-2007, the Dean should convene a meeting of all affected faculty to discuss a potential merger.

4. Incorporate Other Health Programs in the Department of Public and Allied Health

*Findings.* The Committee concurs with the findings of the external reviewers that the Department should pursue opportunities to incorporate the Health Promotion and Health Care Administration programs into the Department. Joining health-related programs all in one college would have many obvious benefits for students and faculty.

*Recommendations.* The Committee recommends that the Vice President for Academic Affairs formulate an *ad hoc* committee of deans and faculty of health-related programs on campus to discuss reorganization of health-related programs. The time line for this work is to be determined by the VPAA.

5. Continuing Work on Assessment Plans

*Finding.* The Committee concurs with the external reviewers that some of the programs in the Department (e.g., Medical Technology) have developed excellent assessment plans. However, that finding is not uniform across all programs. The Committee also notes that neither the self study nor the external reviewer’s report addressed how the assessment plans impact program planning and curriculum development/modification.
Recommendation. The Committee recommends that each program area review its assessment plans to determine how to strengthen them and how to use them to evaluate and improve the curriculum. Program areas should present an analysis of their assessment program, including its impact on curriculum and pedagogy, to the Department Chair for approval; the analysis is to be included in the annual SAAC report.

6. Developing an Enrollment Management Plan

Finding. The Committee noted a “disconnect” between the information provided in the self study regarding “Job Outlooks for all Health Care Areas” (projected increase of three million jobs by 2008) and the “Current Student Enrollment Trends in PAH.” Specifically, enrollments have not been tracking the apparent increases in job opportunities.

Recommendation. The Committee recommends that the Department Chair work with department faculty in developing an enrollment management plan. The enrollment management plan could be part of the Department’s strategic plan. The enrollment management plan should address recruitment and retention for all programs in the Department. The plan should be shared with the College Dean for review and approval, by Spring, 2007.

The Department of Public and Allied Health should report annually to the Dean of the College of Health and Human Services, with a copy to the Provost, on the implementation of these recommendations.