



**Board of Trustees**

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**ESTABLISHMENT OF THE COLLEGE OF PUBLIC HEALTH**

Resolution No. 2007-84

Synopsis: Proposal to establish the College of Public Health is proposed.

WHEREAS the School of Public Health, established in 1995, is the only accredited school of public health in Ohio, and has the largest and most comprehensive public health offerings; and

WHEREAS the move to college status, accompanied by an aggressive growth strategy, will enhance recruitment of faculty, making it comparable in size and configuration to benchmark institutions; will help it enhance its research, teaching, and outreach contributions to the University and thus its visibility within and outside the University; and will help remove the ambiguity concerning the School's eligibility for continued accreditation; and

WHEREAS the multidisciplinary nature of public health can benefit the entire University, both in research and in educational programs; and its active dual or combined degree programs can help attract excellent students to both degrees; and

WHEREAS the proposal adheres to the *Guidelines for Determining College Status*, was reviewed and endorsed by the Faculty Council, the full Council on Academic Affairs, and approved by the University Senate at its January 11, 2007 meeting:

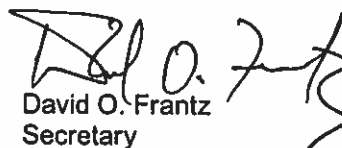
NOW THEREFORE

BE IT RESOLVED, That the proposal to establish the College of Public Health, be hereby approved, effective immediately.

Upon motion of Mrs. Davidson, seconded by Mr. Shumate, the Board of Trustees adopted the foregoing resolution by unanimous roll call vote, cast by Trustees Duncan, Hendricks, McFerson, Cloyd, Davidson, Ong, Borrer, Wexner, O'Dell, Shumate, Hicks, Fisher, Schottenstein, and Shackelford.

**CERTIFIED**

This is to certify that the foregoing is a true and accurate excerpt from the minutes of the Board of Trustees meeting held February 2, 2007.

  
David O. Frantz  
Secretary

**Dutta, Lakshmi**

**From:** Smith, Randy  
**Sent:** Saturday, February 03, 2007 1:23 PM  
**To:** 'lemeshow'  
**Cc:** Dutta, Lakshmi; Snyder, Barbara; winer@mps.ohio-state.edu  
**Subject:** College status

Stan:

As you know, the proposal from the School of Public Health, for College status, was approved by the Board of Trustees at its meeting on February 2, 2007. Thank you for attending the meeting.

Within a few days you will get a copy of the official resolution from the Board Office.

Congratulations on the successful completion of the review/approval process and good luck with this important and exciting initiative.

Randy

W. Randy Smith  
Vice Provost

## Memorandum

To: University Senate

From: Brian L. Winer, Chair  
Council on Academic Affairs

Date: December 27, 2006

### A PROPOSAL FROM THE COUNCIL ON ACADEMIC AFFAIRS TO ESTABLISH THE COLLEGE OF PUBLIC HEALTH

- WHEREAS the School of Public Health, established in 1995, is the only accredited school of public health in Ohio, and has the largest and most comprehensive public health offerings; and
- WHEREAS the move to college status, accompanied by an aggressive growth strategy, will enhance recruitment of faculty, making it comparable in size and configuration to benchmark institutions; will help it enhance its research, teaching, and outreach contributions to the University and thus its visibility within and outside the University; and will help remove the ambiguity concerning the School's eligibility for continued accreditation; and
- WHEREAS the multidisciplinary nature of public health can benefit the entire university, both in research and in educational programs; and its active dual or combined degree programs can help attract excellent students to both degrees; and
- WHEREAS the proposal adheres to the Guidelines for Determining College Status; was discussed with the University Senate's Faculty Council on November 2, 2006; and was approved by the reviewing subcommittee and then by the full Council on Academic Affairs on November 15, 2006.

NOW THEREFORE BE IT RESOLVED that the University Senate approve the proposal to establish the College of Public Health, and respectfully request concurrence from the Board of Trustees.

**Dutta, Lakshmi**

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**From:** Smith, Randy  
**Sent:** Wednesday, November 15, 2006 5:13 PM  
**To:** 'lemeshow.1@osu.edu'  
**Cc:** Dutta, Lakshmi; 'Brian Winer'; Smith, Randy; Snyder, Barbara; Holbrook, Karen; Zacher, Chris; Gillespie, Josh; silverman.3@osu.edu; 'perry.6@osu.edu'; 'Harald Vaessin'; Osme Patrick (.1); 'Elliot Slotnick'; Royster, Jacqueline; Adelson, Edward (.3); 'Brad A. Myers'; 'dickhaut.1@osu.edu'; Sherman, Michael; Garland, Martha; 'Matt Platz'; Stewart, Mac; Gandert, Lucy; Sharkey, Maureen  
**Subject:** Public Health: Proposal for College Status

Stan:

I am very pleased to inform you that the proposal from the School of Public Health to obtain college status was approved by the Council on Academic Affairs at its meeting on November 15, 2006. Thank you for attending the meeting and responding to questions/comments.

The proposal will now be sent to the University Senate for action at a forthcoming meeting. Once that date has been determined, I will contact you with additional information. If the proposal is approved by the University Senate, it then will be sent to the Office of the Board of Trustees for the final level of approval at a Board meeting.

This message represents my formal communication with you about this action. Please keep a copy of the message for your file(s) on the proposal and I will do the same for the file in the Office of Academic Affairs.

Congratulations on the successful completion of this important stage in the review/approval process! I am well aware of the high quality effort that you and your colleagues have put into the development of this proposal.

If you have any questions/comments about the Council's action, please contact Professor Brian L. Winer (Council Chairman).

Randy

W. Randy Smith  
Vice Provost

October 26, 2006

TO: Vice Provost Randy Smith  
FROM: Subcommittee B (Barringer, Evans, Gunther, Halasek)  
RE: Proposal to Obtain College Status for the School of Public Health

**Recommendation**

Subcommittee B recommends the approval of the proposal.

**Purpose and Rationale for the Proposal**

The School of Public Health articulates the following rationale for obtaining College status, which will

1. Enhance recruitment of faculty
2. Establish a platform for growth
3. Increase the visibility of the School
4. Remove lingering concerns about the University's commitment to public health education

The subcommittee found the rationale sound and convincing.

**Background Information**

Subcommittee B discussed the proposal Wednesday, October 25, at which time it discussed questions related to thresholds for faculty and students, the anticipated hiring in Epidemiology, and the PhD in Biostatistics (in the Statistics Department). None of the issues was considered significant and the subcommittee voted unanimously to forward to CAA a recommendation for approval.



## Dutta, Lakshmi

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**From:** Smith, Randy  
**Sent:** Thursday, September 07, 2006 11:01 AM  
**To:** 'EVONNE HALASEK'; 'Richard Gunther'; 'Jane Evans'  
**Cc:** 'lemeshow.1@osu.edu'; Snyder, Barbara; 'Brian Winer'; Smith, Randy; Dutta, Lakshmi; Mye Brad (.7); 'dickhaut.1@osu.edu'; Sherman, Michael; Zacher, Chris  
**Subject:** Public Health Proposal

Kay, Dick, and Jane:

Attached is a proposal from the School of Public Health to move to college status.

The contact for the proposal is **Professor Stanley A. Lemeshow, Dean, School of Public Health** (3-3913; lemeshow.1@osu.edu).

Please give this proposal your immediate attention with the goal of bringing it to the full Council on Academic Affairs for review/action before the end of Autumn Quarter 2006, if at all possible. If approved by the Council, this proposal will need subsequent review/action by both the University Senate and the Board of Trustees.

As you review the proposal, please use the "Guidelines for Determining College Status", as specified in the Academic Organization and Curriculum Handbook (pp.3-4).

After the Subcommittee has had an opportunity to complete its initial review of the proposal, and before it meets with Professor Lemeshow, it would be useful if Professor Brian Winer (Council Chair) and I could meet briefly with you to discuss it.

Randy

W. Randy Smith  
Vice Provost

OCT 27 2006

**OFFICE OF ACADEMIC AFFAIRS**

**Proposal for The Ohio State University School of Public Health  
to Obtain College Status**

**The Ohio State University  
School of Public Health  
Stanley Lemeshow, Dean**

**August 2006**

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## **Proposal for The Ohio State University School of Public Health to Obtain College Status**

### **Introduction**

The Ohio State University School of Public Health was created by the merger of the former Department of Preventive Medicine and the Division of Health Services Management and Policy, both units within the College of Medicine, approved by the Board of Trustees effective July 1, 1995. It remains the only accredited school of public health in Ohio, and has the largest and most comprehensive public health offerings in the state. The first permanent dean, Stanley Lemeshow, was appointed by the executive vice president and provost in August 2003. In order to move the School ahead in its mission and enhance its contribution to the University's Academic Plan, it is imperative that the School make the transition to status as the College of Public Health. The rationale for this transition can be summarized in two principal objectives: first, to remove existing obstacles to full recognition, both on campus and among peer institutions; and, second, to create a platform for growth in size and quality in this critical priority area for Ohio State. Within these two fundamental objectives, the most important components of the rationale are these:

1. College status will enhance recruitment of faculty (and possibly also students) by making the unit more clearly a "major league" entity.
2. College status will establish the platform needed for growth to the typical size and configuration for schools of public health.
3. College status would remove the lingering concern of our peer institutions and external constituencies about the commitment of Ohio State to public health education.
4. College status is required to remove the ambiguity concerning the School's eligibility for continued accreditation.

5. College status would increase the School's visibility and clarify its status on campus by removing its constant "special case" situation.
6. The School of Public Health is already functioning as a college in almost every way except in name and formal approval.

This proposal will describe the current structure and operation of the School, clarify and expand upon the rationale for change, provide a historical context for understanding the necessity for this change, and present responses by the School to the University's "Guidelines for Determining College Status" (see Appendix 2). In order to keep the core proposal as brief as possible, much of the explanatory and supporting material is included in a series of appendices.

### Current Structure and Operation of the School

Beginning in 2003-2004 and continuing to the present, the School of Public Health has moved progressively into a unique status at Ohio State. At present the School operates as a *de facto* college in almost every respect except name and formal approval. The chief administrative officer is the "dean for public health," a unique title approved by the Council on Academic Affairs and the University Senate. The dean reports directly to the executive vice president and provost rather than to the dean of a college. The School receives its budget directly from the Office of Academic Affairs, rather than through a college, and has its own senior fiscal officer. The School of Public Health is the only unit designated as a school that appears on the University's table of organization along with the colleges and other units reporting to the executive vice president and provost (see Appendix 1).

The School is a single tenure-initiating unit, organized internally into five academic divisions: Biostatistics, Environmental Health Sciences, Epidemiology, Health Behavior and Health Promotion, and Health Services Management and Policy (see Appendix 1). Each division is headed by a chair, who is appointed by the dean. The office of the dean includes two associate deans, an assistant dean of administration and finance (senior fiscal officer), a development officer, and a director of communications. In addition to the academic divisions, the School contains the Center for Health Outcomes, Policy, and Evaluation Studies (HOPES), and the Office of Workforce Development. The latter includes the Ohio Center for Public Health Preparedness, the OSU component of the Pennsylvania and Ohio Public Health Training Center, and the Ohio Public Health Leadership Institute.

The academic programs of the School are presently concentrated at the graduate level. The Master of Public Health (MPH) and Master of Health Administration (MHA) are “tagged” degree programs oriented toward professional practice, and the MS and PhD in public health are the traditional research/academic degrees. Within these four degree programs there are several specialization tracks available, though not every specialization is available in every degree (see Table 1 on page 4). In addition to the specializations shown, it is possible to pursue an emphasis in clinical investigation within the existing epidemiology and biostatistics curricula, and we expect to propose a formal specialization in that area in the near future when the curriculum has been fully designed.

Public health degrees are also popular components of dual and combined degree programs. The most common pairings have been the MPH/MD, MHA/MD, MPH/JD, MHA/JD, MHA/MBA, and MPH/MS in nursing. A combined MPH/PharmD program was approved by the Council on Research and Graduate Studies in 2005 and has admitted its first students, and we are nearing completion of a proposal creating a dual MPH/MSW degree program with the College of Social Work.

**Table 1. Degrees offered in the School of Public Health**

Areas of Specialization	Tagged Degrees	Research/Academic Degrees*
Biostatistics	MPH	MS, PhD
Epidemiology	MPH	MS, PhD
Environmental Health Sciences	MPH	MS, PhD
Health Services Management and Policy	MPH, MHA	PhD
Health Behavior and Health Promotion	MPH	PhD
Veterinary Public Health	MPH	
Program for Experienced Professionals <i>"Nontraditional" school-wide program</i>	MPH	

\*These degrees are the MS in public health and the PhD in public health; the specializations are tracks within those two degrees, not separate degree programs.

In addition to the degree programs, the Council on Academic Affairs approved an undergraduate minor in public health that will be implemented beginning Autumn 2006. Our Center for Public Health Preparedness is working with the Undergraduate International Studies Program in the Colleges of the Arts and Sciences on a certificate program in homeland security and public health protection. The School offers courses and workshops oriented toward practicing public health professionals through our Office of Workforce Development, which receives funding from several sources, including the federal Health Resources and Services Administration and the Centers for Disease Control and Prevention. The Summer Program in Applied Biostatistical and Epidemiological Methods, offered through the University's Center for Biostatistics and co-sponsored by the School of Public Health, has provided an important additional venue

for the School. With faculty from multiple universities and students from several countries and all 88 Ohio counties, the Summer Program expands our visibility and contributes to our mission of serving the practice community.



### **The Rationale for Change in Status: Discussion**

This section presents each component of the rationale for college status and provides additional explanation and justification.

***1. College status will enhance recruitment of faculty (and possibly also students) by making the unit more clearly a “major league” entity.***

The Ohio State University is striving to build a distinguished faculty in every area, by recruiting, hiring, and retaining renowned scholars and those who show promise of establishing excellent reputations in their fields. The future of the School depends heavily on the success of this effort. Some faculty candidates have told the School that they are concerned about its relative lack of status and continuing ambiguous structure. Early in the history of the School this problem led to the abandonment of the original search for a permanent dean, when it became clear that no desirable candidates wanted to take the risk of trying to lead the School through its initial growth and accreditation because of the well-known organizational structure issue.

The School has experienced a period of rapid growth in size and quality since 2003. However, we are attempting to recruit faculty in an extremely competitive environment because of the national priority on public health and the opportunities it creates for outstanding faculty candidates. It is essential that the School be able to offer an attractive organizational setting, free of the sort of distracting issue that would cause a candidate to hesitate. Although organizational structure is unlikely to be directly a major concern of students, anything that enhances our ability to attract and retain the best faculty will improve our student recruitment (and certainly in the longer run, the quality of our graduate students is an important element in faculty recruitment).

**2. *College status will establish the platform needed for growth to the typical size and configuration for schools of public health.***

Although all are called collectively “schools of public health,” the actual local name of the public health unit depends on the internal organization of the university. For example, the Universities of Iowa, Arizona, and Oklahoma have colleges of public health. Those that are formally designated schools of public health are in universities where all professional units (law, medicine, engineering, etc.) are schools, and where the term “college” is reserved either for the undergraduate unit or for the arts and sciences.

The School of Public Health at Ohio State is one of only two accredited schools of public health that are not recognized as having the desired organizational status. The other is the school of public health at Yale University, which is “grandfathered” because it existed under the old accreditation standards, but which has also struggled constantly to stay accredited and is currently threatened. In fact, the dean at Yale resigned in 2005, partly because of the unsatisfactory organizational relationship and lack of commitment from the university.

Our vision for the future is to move the School of Public Health to a position among its peer institutions similar to Ohio State’s overall position and aspirations nationally. In order to do that, when Dean Lemeshow was appointed in 2003, he undertook an aggressive growth strategy, planning approximately to double the size of the School within five years. Fortunately, the startup funds available with the appointment of the new dean provided support for this level of growth, given the associated increase in revenue from enrollment and the increase in research funding. By the end of the 2006/2007 academic year, the School will have achieved its goal of doubling the size of the faculty and expects to have a faculty size of over 45. Within ten years of Dean

Lemeshow's appointment, the School expects to be in a size range quite comparable with its usual benchmark public institutions. At that point, we project that we will wish to reorganize the College into a departmental structure, which is the typical arrangement in schools of public health.

Growth is not only desirable internally to meet the goals of the School of Public Health, but can be expected to confer significant mutual benefits on the University as a whole. The Association of Schools of Public Health (ASPH), the national organization that represents the deans, faculty, and students of accredited schools of public health, has conducted a variety of surveys concerning the contributions of schools of public health to their campuses. According to the most recent comparative information made available by ASPH, in 2002 the average nationwide NIH awards per FTE faculty member were fifty percent higher in public health than in medicine. There are also private foundation sources with significant commitments to public health (e.g., Gates Foundation, Robert Wood Johnson Foundation, etc.). Though such funding success depends in part on the specific areas of research, it illustrates the opportunity potentially available from expanded efforts in public health. The multidisciplinary nature of public health is unusually pervasive; it means that the benefits can be widely dispersed in the university, both in research and in educational programs. Public health faculty at Ohio State already come from fields as diverse as medicine, business, anthropology, engineering, education, toxicology, and political science, and this diversity is only expected to grow. They will actively seek research collaborators elsewhere on campus, and public health students will seek out interesting opportunities in other colleges and departments. The School of Public Health already has several active dual or combined degree programs, which in

each case can help attract excellent students to both degrees.

**3. *College status would remove the lingering concern of our peer institutions and external constituencies about the commitment of Ohio State to public health education.***

Because the School was created with an administrative structure that was known at the time probably to be unacceptable for accreditation, the field has been suspicious of the University's sincerity and support. Our faculty is asked by colleagues elsewhere at every national academic meeting whether we've yet been able to overcome our remaining hurdle to be a "real" school of public health. Our widely publicized battles with CEPH have left many in the field uncertain about our accreditation status, even though we have never actually had any period in which we were not accredited. The peer institutions are in fact very supportive of Ohio State's entry into the "major leagues" in public health, and find it hard to understand why we have spent so long dealing with an issue that should have been resolved at the outset. By comparison, the University of Iowa chose to create a new school of public health at approximately the same time as Ohio State, and originally intended to follow the same organizational model with the school inside their medical college. However, after observing the amount of disruption and unproductive time Ohio State spent dealing with CEPH, Iowa created a new college. It has since been quite successful, despite a university budget environment as challenging as Ohio State's.

The School supports the University's vision, "To advance the well-being of the people of Ohio and the global community through the creation and dissemination of knowledge." With clear commitment from the University, the School hopes, in the words of a component of the Academic Plan, to "help build Ohio's future" by strengthening collaboration with state and local health agencies, other health-related organizations, and

private industry to provide effective health messages and education for the public, advance knowledge through our research efforts, and provide learning experiences for students.

Collaboration with external constituencies is necessary to maximize the opportunities for research and programmatic funding and to continue to provide students with access to excellent community-based field experiences. Increasing research funding is critical not only for its impact on faculty research productivity, but also because it provides students with financial support and the opportunity to participate in faculty research and optimize the learning experience.

**4. *College status is required to remove the ambiguity concerning the School's eligibility for continued accreditation.***

The Council on Education for Public Health (CEPH) is the accrediting body in public health. Institutions may seek accreditation either as a *graduate school of public health*, or as a *graduate program* in community health education or community health/preventive medicine.<sup>1</sup> A graduate program may offer a single degree (usually the MPH) in a single field of specialization, and may be located within a unit not otherwise engaged in public health (e.g., a school of education). Ohio State first achieved accreditation in public health in 1985, as a graduate program in community health/preventive medicine, for the MS and PhD in preventive medicine.

Accreditation as a school of public health requires a wider range of degree programs and specializations, as well as additional criteria with respect to organizational structure,

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<sup>1</sup> The term "school of public health" is used inclusively by CEPH, as it is by the Association of Schools of Public Health, to refer to units that are called both "school" and "college" on their campuses. This point is discussed further on page 12 of this proposal. For accreditation purposes the criterion is simply that the name and status of the unit in public health must be equivalent to whatever is the practice in the other major health professions on the campus.

resources, research, and so on. In the early 1990s, before the creation of the School of Public Health at Ohio State, CEPH altered its accreditation criteria to require that in each university the school of public health must “have the same level of independence and status accorded to professional schools in that institution.” This standard was developed in specific response to problems that had occurred in several settings in which the school of public health was located within a medical school. Although Ohio State was warned by a CEPH consultant (and many colleagues at peer institutions) not to do so, a decision was made to create the school of public health within what was then called the College of Medicine. This began a long, and at times very acrimonious, struggle over the acceptability of the organizational structure of public health at Ohio State. A more complete historical summary is provided in Appendix 4. Almost a decade later, the single contentious aspect of accreditation remains the School’s organizational status.

At present the School exists in a unique configuration created in 2000 specifically to respond to the accreditation requirement, because CEPH had indicated that it would revoke accreditation based on the unacceptable organizational structure. Under this special arrangement, which has evolved somewhat since that time, the School is treated as a *de facto* college in terms of reporting lines, budget independence, etc. Without this arrangement, accreditation would certainly have been withdrawn. In fact, former president William Kirwan modified the arrangement as he left office in 2001 (as explained in Appendix 4), setting off a chain of potential adverse accreditation consequences that were stopped when interim president Edward Jennings restored the prior arrangement in 2002.

In order to satisfy CEPH that our organizational structure meets the requirements of



independence and equivalent status, and is stable and not subject to the whim of an administrator, it is essential that the School move to college status. In 2002, the SPH was cautioned that "the matter of independence and status will be weighed very carefully" in future accreditation evaluations. In the letter transmitting our most recent re-accreditation result (June 2004), CEPH included a requirement for an interim report providing evidence that the school "has status and prerogatives comparable to other professional schools at the institution and has achieved significant progress toward complete independence from the College of Medicine and Public Health (Criterion II.A)." We submitted the required report in May 2006, and were informed in June 2006 that our progress had been sufficient to justify an extension of our current accreditation term for two additional years. It is important to note that, as part of the evidence concerning this criterion, our interim report included a letter from President Karen Holbrook assuring CEPH that the School was "treated as a de facto college" with the expectation that college status would be achieved during the 2006-2007 academic year.

It may be worth noting that the question of accreditation as a school of public health is not trivial in its consequences. Although Ohio State's individual public health degree programs could be accredited under the less stringent graduate program criteria and thus protect the credentials of graduates, there are several benefits that are available only to accredited schools of public health. These include access to substantial federal research and programmatic funding and to internship and fellowship opportunities for graduates. Because of the small number of accredited schools of public health (37 at present) and their prominence in issues of public concern, membership in this group is vitally important to our national visibility as well as our eligibility for restricted resources.

**5. *College status would increase the School's visibility and clarify its status on campus by removing its constant "special case" situation.***

At present, the administrative hierarchy of the University is at times not quite sure how to deal with the School of Public Health, because it does not fit the standard model for a school at Ohio State. The administrative realignment that made it possible for the School to get somewhat tenuous approval for accreditation relies on a series of agreements that are outside the usual administrative structure and confusing to other units. For example, Dean Lemeshow is recognized as a member of the Council of Deans. However, in correspondence from the Graduate School, the "dean's copy" has frequently been addressed to Fred Sanfilippo as Dean of the College of Medicine and Public Health (now the College of Medicine), and Dean Lemeshow received the "chairperson's copy." While this is a minor example, it illustrates the confusion and is typical of many examples.

We believe that moving the school from *de facto* college status to "real" college status will end this awkwardness. It will also enhance the potential for collaboration with other units and their faculty through increased visibility on campus. Public health is an intensely multidisciplinary field, and our faculty members are eager to reach out to colleagues on campus in joint efforts of all kinds. The current national policy importance accorded to public health means that this is an unusually opportune time for undertaking new research directions, but our success will depend upon assembling teams with the very best the University has to offer.

**6. *The School of Public Health is already functioning as a college in almost every way except in name and formal approval.***

As noted above, the School has been functioning as a college without the formal

designation for more than two years. Because of that fact, many considerations for converting the School to college status have already been addressed. The School has developed a strategic plan to enable a smooth conversion and set the direction and priorities for a College of Public Health. The School has identified space that will allow the entire faculty within the College to be housed in one area (though laboratories and other special facilities may be accommodated elsewhere) until a more permanent solution can be implemented. The startup package afforded to the dean at the time of his appointment contained the basic funds necessary to meet the transition expenses to college status. Because the School already has the basic administrative structure of a college, no additional costs would be expected except minor symbolic costs (new printed materials, signage, etc.) and those that would be incurred in any case as the school grows. The former should be covered by the existing resources and the latter by the increase in resources generated by the growth.

**The School's Position with Respect to the University's  
Guidelines for Determining College Status**

The preceding section has presented the principal arguments for a change in status. In this section we present the evidence comparing the School to the existing "Guidelines for Determining College Status" (Appendix 2). In the opening statement of assumptions in those guidelines, one is cautioned, "It is deemed appropriate to view these as guidelines only and that no hard and fast rules can be written to cover all possible requests." While we believe the School generally meets the guidelines well, it is also important to remember that there are significant arguments for college status irrespective of the guidelines.

Within the guidelines there are three operational sections, to which we have responded below. The first section (Part II of the Guidelines) consists of a series of statements that establish the academic scope and distinction necessary to create a college:

***A. Have a generally recognized academic subject matter containing one or more fairly discrete areas of academic concern.***

There is certainly no question that public health is a recognized field of study, with well-established programs in distinguished universities. Within the CEPH accreditation criteria there are five areas that every school of public health must contain: epidemiology, biostatistics, environmental health sciences, social and behavioral sciences applied to health, and health services administration. Additional fields that are commonly found in schools of public health include maternal and child health, international health, public health nutrition, etc. At present our School contains the basic five fields, as well as veterinary public health in collaboration with the College of Veterinary Medicine.

***B. Have a general area of subject matter that is significantly different from areas that are included within the purview of another school or college.***

Although public health's multidisciplinary nature means that some elements of the subject matter of public health naturally overlap partially with other areas (e.g., statistics, psychology, medicine), public health is distinctive. The focus is on the application to issues of population health, prevention, and health policy. It is the assembly of the varied fields in a single unit that is unique and creates the critical mass for good academic work in public health. In public health, "the patient is the population." Both in content and methods, public health is related to but different from the individual disciplines it incorporates, in much the same way that medicine is distinguished from biology, chemistry and other overlapping fields.

***C. Have substantive academic programs at professional or undergraduate levels and the graduate level and offer degrees in those programs.***

As noted on page 4, the School currently offers the MS, PhD, MPH, and MHA degrees. It will also begin offering an undergraduate minor in Fall 2006. Until recently, almost all degrees in public health nationwide were graduate or professional (at many schools the MPH and MHA offered as graduate degrees at Ohio State would be considered professional degrees). However, there is a growing interest in undergraduate education in public health, spurred in part by a recent Institute of Medicine study calling for much wider access to public health coursework by undergraduates (and by graduate and professional students in other fields, especially medicine).<sup>2</sup> Our undergraduate minor will provide students with a broad exposure to the concepts of population health and the issues involved in assuring health, improving health and protecting against threats to

<sup>2</sup> Kristine Gebbie, Linda Rosenstock, and Lyla M. Hernandez, eds. *Who Will Keep the Public Healthy? Educating Public Health Professionals for the 21<sup>st</sup> Century*. Washington, D.C.: National Academies Press, 2003.

health. We are actively interested in potential future developments in undergraduate offerings, but believe that they need to be phased in strategically.

***D. Have a source of faculty members prepared to offer academic work in the academic areas concerned.***

Faculty members in public health are drawn both from doctoral programs in the basic fields of public health (epidemiology, biostatistics, etc.) and from programs in the related disciplines (economics, toxicology, demography, etc.). All of the accredited schools of public health are required to have doctoral programs, and thus serve as a source of faculty, and of course there are many excellent programs in the constituent disciplines. Our current faculty comes from both sources; some of those whose doctoral training is in another discipline also have professional degrees in public health, though this is not a requirement.

***E. Undertake teaching, research, creative work, and public service in a manner which has the potential for developing national and international recognition. It is expected that some of the professors in the proposed college will have national and international reputations for their research and creative work at the time of attaining college status.***

Public health is a field that has both a strong professional practice orientation and a strong research base. The potential for recognition, both among academic peers and more broadly in society, is immense. Public health is associated with events and issues of great interest and public concern, including natural disasters (with the obvious recent examples of hurricanes and tsunamis), outbreaks of disease, bioterrorism, food safety, and many others. Faculty members are frequently consulted by government officials, used as expert sources by the media, and called upon to train those who are "first responders" in critical events.



Public health's importance in research is highlighted by the existence of the federal Centers for Disease Control and Prevention, and public health is included in the mission of many of the National Institutes of Health as well as private foundations and other organizations sponsoring research. A summary of the current funded research activity of the faculty is provided in Appendix 6. In addition to research with external funding, there are of course many research streams underway in areas that do not typically require such support.

Faculty members in public health are visible nationally and internationally in a variety of ways. A few examples are given here, and more information is available in Appendix 7. As one would expect, many faculty members serve on the editorial boards of scholarly journals, on National Institutes of Health study sections and similar research review bodies, and are active in presentations at professional meetings. There are several whose work takes them internationally with regularity; most recently we have had faculty members working with the Karolinska Institute in Sweden, lecturing at Erasmus University in Rotterdam, and giving a variety of presentations in Portugal, France, and Belgium. Collectively the faculty was responsible for approximately 150 refereed journal articles and book chapters in 2006. Clear evidence of external reputation includes the election of three members of the faculty to fellowship in the American Academy for the Advancement of Science.

***F. Enhance the academic programs of other units of the University and enhance the reputation of the University without decreasing the effectiveness of the mission of the college from which it is detached.***

The creation of a strong College of Public Health is perhaps one of the most efficient and effective ways to enhance the reputation of the University, and especially its

programs in the health sciences. Because of the multidisciplinary orientation and the research intensity of public health, it frequently serves as a catalyst for collaboration. Individual faculty members have skills that make them quite valuable as team members in other areas (e.g., to provide new dimensions of inquiry and analysis in clinically-oriented research). Several units are already collaborating with public health at Ohio State, both in research and education. We expect the enhanced visibility offered by the creation of the College will expand this collaboration and increase effectiveness rather than the reverse.

Letters of support for this proposal from a variety of other units are included in Appendix 10. Notable among those is the letter from Fred Sanfilippo, Senior Vice President and Executive Dean for Health Sciences.

***G. A proposed administrative structure that meets the qualifications spelled out in Rules 3335-1-05(H), 3335-3-29, 3335-3-32, 3335-3-33 of the Administrative Code.***

Because the School has already been operating as a *de facto* college for some time, the administrative structure typical of a college is in place, with a dean and associate deans, etc., as shown in Appendix 1. All that is missing to satisfy the stated rules is for the administrative structure to receive the full approval that would be accorded to a college so that the persons can be appointed in the proper manner.

The second section (Part III of the Guidelines) requires that, "*The organization wishing to attain college status shall have demonstrated or have adequate plans to be able to carry out the powers of college faculties as outlined in 3335-5-14 of the Administrative Code.*" Again, this section is already clearly met because the School has been functioning with the powers of a college in these respects.

The final section indicates that “an organization wishing to attain college status should meet . . . minimum quantitative requirements unless persuasive academic reasons demonstrate the need for exceptions.” Each of these requirements is discussed below:

***A. Fifty regular FTE faculty spread through the three academic ranks from assistant professor to professor. At least 50 percent of these shall have attained tenure.***

At present there are 31 FTE faculty, spread through the ranks, and more than 50 percent of the tenure-eligible faculty have attained tenure. With the new recruits for the 2006/2007 academic year, the School will increase its size to over 40 FTE (headcount of over 45) faculty. Though this number is slightly fewer than the guideline, it is important to note two things. First, there are other colleges already at Ohio State with fewer than 50 faculty, some of which are approximately the current size of the School. Second and more importantly, the School is in the process of growing this faculty rapidly and expects to have well over 50 faculty in the next few years. The new division chairs have been given resources to pursue systematic faculty growth that is expected to continue for several years.

***B. An annual budget of at least 5.45 million dollars (based on the CPI conversion noted in the Guidelines).***

Appendix 8 contains budget information demonstrating that the School already exceeds this requirement. It also illustrates the commitment of the University to provide flexible startup resources to enable the projected rapid growth of the School/College.

***C. Graduate 100 professional or undergraduate students annually.***

At present the School offers exclusively graduate degrees, with 84 graduates in the most recent complete academic year (AU04-SU05). With the anticipated growth, we will exceed 100 graduates in these programs very shortly. We will also implement our new undergraduate minor in public health in Autumn 2006. Based on the enrollment in the

School's existing undergraduate offerings (e.g., we were asked to raise the capacity on an undergraduate epidemiology course to more than 100 in Winter 2006, and will be expanding to two sections in 2007), the minor will be quite popular. Once the minor has been well-established, planning will begin for eventual progression to an undergraduate major. It has also been proposed that in the longer run we consider creating a Doctor of Public Health degree (DrPH), which is the professional doctorate offered in almost all schools of public health.

***D. At least three departments or academic faculties.***

The School meets this criterion without difficulty. As shown in Appendix 1, the School is currently organized with five academic divisions: Biostatistics, Environmental Health Sciences, Epidemiology, Health Behavior and Health Promotion, and Health Services Management and Policy. As the School/College grows, the plan is to reorganize into departments when that becomes appropriate.

**Summary:**

In conclusion, the School has already shown it can function as a college, by doing so for more than three years. The School has shown substantial growth in size and quality of its faculty and will reach a total faculty size of over 45 during the 2006/2007 academic year. The transition to full college status is a natural evolution that is essential to the future of public health at Ohio State, and promises substantial benefits to the University and the larger community. The short run costs necessary to accomplish the transition are already fully incorporated into the budget of the School. In the longer run the additional costs are those associated with growth in any program, and will be handled by the normal budget process of the University. This is a clear turning point for Ohio State. If public health is to be a part of the University, it must be as a college in order to survive, prosper, and contribute optimally to the University's mission and vision.

**ORGANIZATION OF THE OHIO STATE UNIVERSITY**

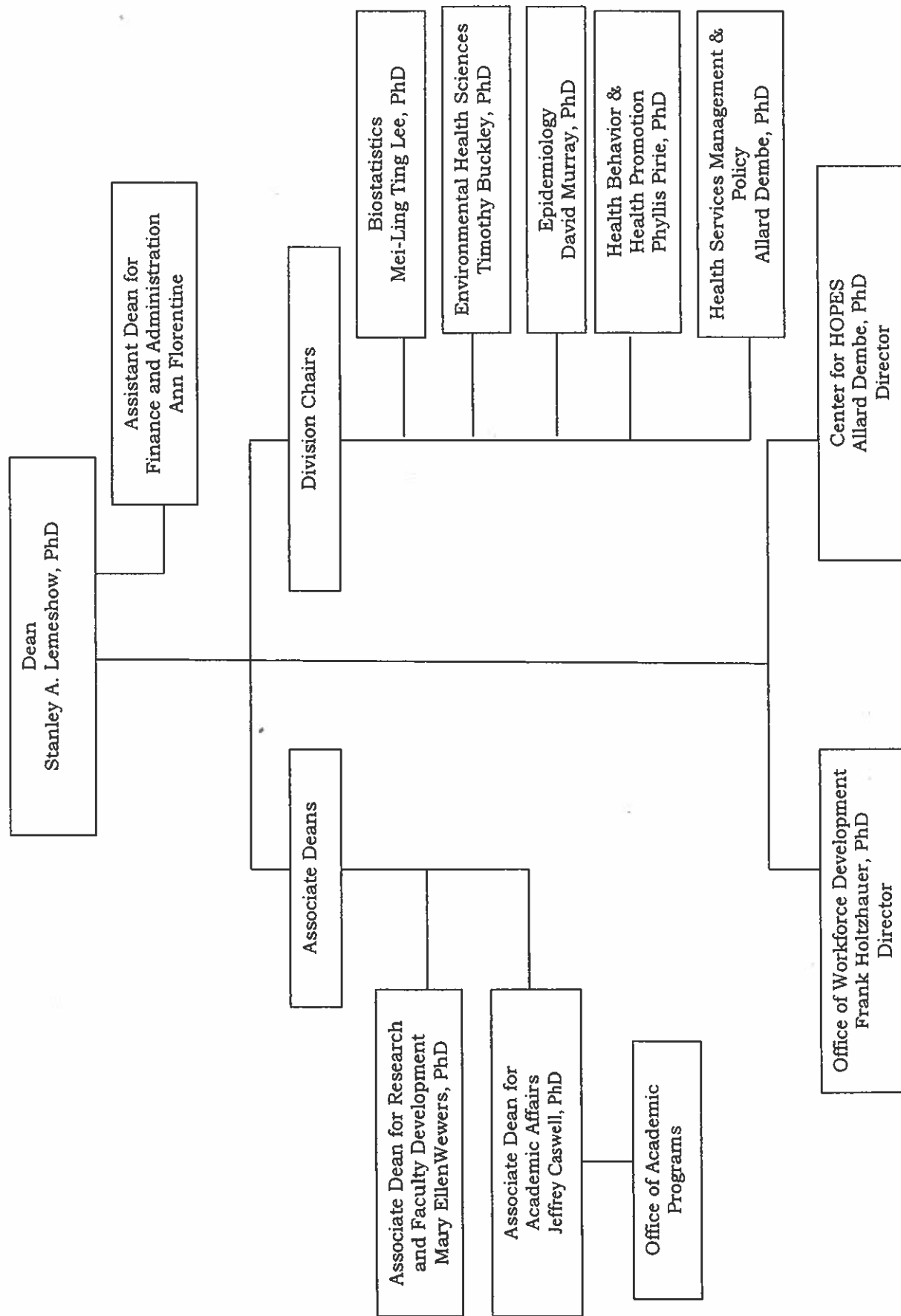


27



**The Ohio State University  
School of Public Health  
Organizational Structure**

**28**



## FACULTY RULES GOVERNING THE UNIVERSITY ORGANIZATION

3335-1-05	University organization
3335-3-25	Organization of the University
3335-3-26	Establishment of Colleges and Graduate School
3335-3-261	Establishment of Regional Campuses
3335-3-262	Coordinating Dean for Regional Campuses
3335-3-27	Organization of the Graduate School
3335-3-28	Organization of the Colleges of the Arts and Sciences
3335-3-34	Schools, departments, divisions, and sections; defined and located
3335-3-36	Academic Centers; defined
3335-5-14	Powers (college faculties)
3335-5-35	Powers and functions (Council on Research and Graduate Studies)
3335-5-41	Powers (University Senate)

## GUIDELINES FOR DETERMINING COLLEGE STATUS

### I. Assumptions.

- A. It is deemed appropriate to view these as guidelines only and that no hard and fast rules can be written to cover all possible requests. A quick review of our existing college structure shows a wide range of reasons for granting college status. These guidelines will be needed to evaluate new proposals and not to restructure the University.
- B. College status would enable faculty to carry out more effectively their responsibility for teaching, research, creative work and service than would be the case with the existing structure.
- C. College status makes the faculty in that unit responsible for setting the goals, mission, objectives and general direction of the unit.
- D. College status provides fiscal control to that unit and thereby (hopefully) improves the teaching, research, creative work, and service mission.
- E. There is a "critical mass" necessary for an effective administration to function at the college level. A lack of flexibility or a lack of options resulting from size would not seem to be in the best long-run interests of the unit.

### II. A college should:

- A. Have a generally recognized, academic subject matter containing one or more fairly discrete areas of academic concern.
- B. Have a general area of subject matter that is significantly different from areas that are included within the purview of another school or college.
- C. Have substantive academic programs at professional or undergraduate levels and the graduate level and offer degrees in those programs.
- D. Have a source of faculty members prepared to offer academic work in the academic areas concerned.
- E. Undertake teaching, research, creative work, and public service in a manner which has the potential for developing national and international recognition. It is expected that some of the professors in the proposed college will have national and international reputations for their research and creative work at the time of attaining college status.

- F. Enhance the academic programs of other units of the University and enhance the reputation of the University without decreasing the effectiveness of the mission of the college from which it is detached.
- G. A proposed administrative structure that meets the qualifications spelled out in Rules 3335-1-05 (H), 3335-3-29, 3335-3-32, 3335-3-33 of the Administrative Code.

- III. The organization wishing to attain college status shall have demonstrated or have adequate plans to be able to carry out the powers of college faculties as outlined in 3335-5-14 of the Administrative Code. See Below:

#### 3335-5-14 Powers

The several college faculties shall have, subject only to the separate powers of the faculty of a school (see rule 3335-3-34 of the Administrative Code) and of the faculty of the arts and sciences (see rule 3335-5-27 of the Administrative Code), the following general powers:

- (A) To adopt requirements for admission subject to the approval of the university senate and the board of trustees;
- (B) To adopt, alter or abolish courses and curricula subject to the approval of the council on academic affairs and the president and the board of trustees (see rules 3335-5-48 and 3335-7-02 of the Administrative Code);
- (C) To create and abolish schools, bureaus, and departments of instruction within the college subject to approval of the council on academic affairs, the university senate, the president and the board of trustees (see rules 3335-3-25 to 3335-3-28 and 3335-5-48 of the Administrative Code);
- (D) To adopt and abolish academic degrees administered by them subject to approval of the council on academic affairs, the university senate, the president and board of trustees;
- (E) To recommend to the faculty membership of the university senate and the board of trustees, candidates for degrees.

- IV. In addition to the above criteria, an organization wishing to attain college status should meet the following minimum quantitative requirements unless persuasive academic reasons demonstrate the need for exceptions:

- A. Fifty regular FTE faculty spread through the three academic ranks from assistant professor to professor. At least 50 percent of these shall have attained tenure.
- B. An annual budget of at least three million dollars.\*
- C. Graduate 100 professional or undergraduate students annually.
- D. At least three departments or academic faculties.

\*In 2004 dollars, \$3M is now \$5.45M using the U.S. Consumer Price Index  
 Approved by the Council on Academic Affairs, 2/16/83.

# APPENDIX 3

## Schools of Public Health and Graduate Public Health Programs Accredited by the Council on Education for Public Health

### GRADUATE SCHOOLS OF PUBLIC HEALTH

**University of Alabama at Birmingham**  
School of Public Health  
1530 Third Ave. South  
RPHB 140  
Birmingham, AL 35294-0022  
(205) 975-7742  
[www.uab.edu/PublicHealth/](http://www.uab.edu/PublicHealth/)  
Dean: Max Michael, MD  
(1978) 7/1/08

**University of Arizona**  
Mel and Enid Zuckerman  
College of Public Health  
1295 North Martin Avenue, Building 202  
Drachman Hall  
PO Box 245163  
Tucson, AZ 85724-5163  
(520) 626-7083  
[www.publichealth.arizona.edu/](http://www.publichealth.arizona.edu/)  
Dean: G. Marie Swanson, PhD, MPH  
(1994) 5/28/05 Preaccreditation

**University of Arkansas for  
Medical Sciences**  
Fay W. Boozman College of Public Health  
4301 W. Markham, #820  
Little Rock, AR 72205-7199  
(501) 526-6600  
[www.uams.edu/coph](http://www.uams.edu/coph)  
Dean: James M. Raczynski, PhD  
(2004) 5/13/06 Preaccreditation

**Boston University**  
School of Public Health  
715 Albany St.  
Boston, MA 02118  
(617) 638-4640  
<http://www.bumc.bu.edu/SPH>  
Dean: Robert F. Meenan, MD, MPH, MBA  
(1981) 7/1/11

**University of California, Berkeley**  
School of Public Health  
19 Earl Warren Hall  
Berkeley, CA 94720  
(510) 642-2082  
<http://isi-socrates.berkeley.edu/~sph/>  
Dean: Stephen M. Shortell, PhD, MPH  
(1946) 12/31/07

**University of California, Los Angeles**  
School of Public Health  
Center for the Health Sciences  
Box 951772  
Los Angeles, CA 90095  
(310) 825-6381  
[www.ph.ucla.edu](http://www.ph.ucla.edu)  
Dean: Linda Rosenstock, MD, MPH  
(1960) 7/1/06

**Columbia University**  
Mailman School of Public Health  
722 West 168th Street, 14th Floor  
New York, NY 10032  
(212) 305-3929  
<http://mailman.hs.columbia.edu>  
Dean: Allan Rosenfield, MD  
(1946) 7/1/10

**Drexel University**  
School of Public Health  
Mail Stop 660  
245 N. 15th Street  
Philadelphia, PA 19102-1192  
(215) 762-3940  
[www.drexel.edu/pubhealth/default.html](http://www.drexel.edu/pubhealth/default.html)  
Dean: Marla J. Gold, MD  
(2004) 5/13/06 Preaccreditation

**Emory University**  
Rollins School of Public Health  
1518 Clifton Rd., NE  
Atlanta, GA 30322  
(404) 727-8720  
[www.sph.emory.edu](http://www.sph.emory.edu)  
Dean: James W. Curran, MD, MPH  
(1978) 7/1/12

**George Washington University**  
School of Public Health & Health Services  
2300 Eye St., NW  
Washington, DC 20037  
(202) 994-5179  
[www.gwu.edu/sphhs](http://www.gwu.edu/sphhs)  
Dean: Ruth J. Katz, JD, PhD  
(1990) 12/31/07

**Harvard University**  
School of Public Health  
677 Huntington Ave.  
Boston, MA 02115  
(617) 432-1025  
[www.hsph.harvard.edu](http://www.hsph.harvard.edu)  
Dean: Barry Bloom, PhD  
(1946) 12/31/08

**University of Illinois at Chicago**  
School of Public Health  
1603 West Taylor St., MC. 923  
Chicago, IL 60612-4394  
(312) 996-6620  
[www.uic.edu/sph/](http://www.uic.edu/sph/)  
Dean: Susan C. Scrimshaw, PhD  
(1972) 12/31/06

**University of Iowa**  
College of Public Health  
200 Hawkins Dr., E220H1 GH  
Iowa City, IA 52242  
(319) 384-5452  
[www.public-health.uiowa.edu](http://www.public-health.uiowa.edu)  
Dean: James A. Merchant, MD, DrPH  
(2000) 12/31/10

**Johns Hopkins University**  
Bloomberg School of Public Health  
615 North Wolfe St.  
Baltimore, MD 21205-2179  
(410) 955-3540  
[www.jhsph.edu](http://www.jhsph.edu)  
Dean: Michael J. Klag, MD, MPH  
(1946) 12/31/06

**University of Kentucky**  
College of Public Health  
121 Washington Street  
Lexington, KY 40536  
(859) 257-5678  
[www.mc.uky.edu/publichealth/](http://www.mc.uky.edu/publichealth/)  
Dean: Stephen W. Wyatt, DMD, MPH  
(2005) 7/1/10

**Loma Linda University**  
School of Public Health  
Loma Linda, CA 92350  
(909) 558-4578  
[www.llu.edu/llu/sph/](http://www.llu.edu/llu/sph/)  
Dean: James L. Kyle, II, MD, MDiv  
(1967) 12/31/09

**University of Massachusetts Amherst**  
School of Public Health & Health Sciences  
715 North Pleasant St., 129 Arnold House  
Amherst, MA 01003  
(413) 545-1303  
[www.umass.edu/SPHHS](http://www.umass.edu/SPHHS)  
Interim Dean: Eileen T. Breslin, RN, PhD  
(1970) 2/1/07 Probation

**University of Medicine and Dentistry of  
New Jersey**  
**Rutgers, The State University of  
New Jersey**  
**New Jersey Institute of Technology**  
School of Public Health  
683 Hoes Lane West  
PO Box 9  
Piscataway, NJ 08854  
(732) 235-9700  
<http://sph.umdj.edu/>  
Dean: Audrey R. Gotsch, DrPH, CHES  
(1986) 12/31/06

**University of Michigan**  
School of Public Health  
109 South Observatory St.  
Ann Arbor, MI 48109-2029  
(734) 763-5454  
[www.sph.umich.edu/](http://www.sph.umich.edu/)  
Dean: Kenneth E. Warner, PhD  
(1946) 7/1/12

**University of Minnesota**  
**School of Public Health**  
 Mayo Mail Code 197, 420 Delaware St., SE  
 Minneapolis, MN 55455-0381  
 (612) 624-6669  
[www.sph.umn.edu](http://www.sph.umn.edu)  
 Interim Dean: John Finnegan, PhD  
 (1946) 7/1/07

**University at Albany,**  
**State University of New York**  
**School of Public Health**  
 One University Pl., Room 100  
 Rensselaer, NY 12144-3445  
 (518) 402-0283  
[www.albany.edu/sph](http://www.albany.edu/sph)  
 Dean: Peter J. Levin, ScD  
 (1993) 7/1/07

**New York Medical College**  
**School of Public Health**  
 Valhalla, NY 10595  
 (914) 594-4531  
[www.nymc.edu/sph/](http://www.nymc.edu/sph/)  
 Dean: Robert W. Amler, MD  
 (2003) 10/05/05 Preaccreditation

**University of North Carolina,**  
**Chapel Hill**  
**School of Public Health**  
 170 Rosenau Hall, CB # 7400  
 Chapel Hill, NC 27599-7400  
 (919) 966-3215  
[www.sph.unc.edu/](http://www.sph.unc.edu/)  
 Dean: Barbara K. Rimer, DrPH  
 (1946) 12/31/08

**University of North Texas Health**  
**Science Center**  
**School of Public Health**  
 3500 Camp Bowie Blvd.  
 Fort Worth, TX 76107-2699  
 (817) 735-2323  
[www.hsc.unt.edu/education/sph/](http://www.hsc.unt.edu/education/sph/)  
 Dean: Fernando M. Treviño, PhD, MPH  
 (1999) 7/1/07

**Ohio State University**  
**School of Public Health**  
 M-116 Starling Loving Hall  
 320 W. 10th Ave.  
 Columbus, OH 43210-1240  
 (614) 293-3913  
[www.sph.osu.edu](http://www.sph.osu.edu)  
 Dean: Stanley A. Lemeshow, PhD, MSPH  
 (1985) 7/1/07

**University of Oklahoma**  
**College of Public Health**  
 PO Box 26901  
 801 NE 13th St.  
 Oklahoma City, OK 73104-5072  
 (405) 271-2232  
<http://w3.ouhsc.edu/coph/>  
 Dean: Gary E. Raskob, PhD  
 (1967) 12/31/06

**University of Pittsburgh**  
**Graduate School of Public Health**  
 A-624 Crabtree Hall  
 130 DeSoto St.  
 Pittsburgh, PA 15261  
 (412) 624-3001  
[www.publichealth.pitt.edu](http://www.publichealth.pitt.edu)  
 Dean: Bernard D. Goldstein, MD  
 (1950) 12/31/06

**University of Puerto Rico**  
**Graduate School of Public Health**  
**Medical Sciences Campus**  
 PO Box 365067  
 San Juan, Puerto Rico 00936  
 (787) 764-5975  
<http://www.rcm.upr.edu>  
 Interim Dean: Ralph Rivera-Gutiérrez, PhD  
 (1956) 12/31/06

**Saint Louis University**  
**School of Public Health**  
 3545 Lafayette Ave., Suite 300  
 St. Louis, MO 63104-1314  
 (314) 977-8100  
<http://publichealth.slu.edu>  
 Interim Dean: Homer Schmitz, PhD  
 (1983) 12/31/07

**San Diego State University**  
**Graduate School of Public Health**  
 San Diego, CA 92182-4162  
 (619) 594-1255  
<http://publichealth.sdsu.edu>  
 Interim Dean: Ann de Peyster, PhD  
 (1982) 12/31/06

**University of South Carolina**  
**Arnold School of Public Health**  
 800 Sumter St., 109 Health Sciences Building (#76)  
 Columbia, SC 29208  
 (803) 777-5032  
[www.sph.sc.edu/](http://www.sph.sc.edu/)  
 Interim Dean: Donna L. Richter, EdD, FAAHB  
 (1977) 12/31/08

**University of South Florida**  
**College of Public Health**  
 13201 Bruce B. Downs Blvd. (MDC-56)  
 Tampa, FL 33612-3805  
 (813) 974-6603  
<http://www.hsc.usf.edu/publichealth/>  
 Dean: Donna Petersen, MHS, ScD  
 (1987) 7/1/11

**Texas A & M University System**  
**Health Science Center**  
**School of Rural Public Health**  
 1266 TAMU  
 College Station, TX 77843-1266  
 (979) 845-2387  
<http://tamhsc.edu>  
 Dean: Ciro V. Sumaya, MD, MPHTM  
 (2001) 7/1/11

**University of Texas Health Science**  
**Center at Houston**  
**School of Public Health**  
 PO Box 20186  
 Houston, TX 77225  
 (713) 500-9050  
[www.sph.uth.tmc.edu/](http://www.sph.uth.tmc.edu/)  
 Dean: Guy S. Parcel, PhD  
 (1969) 7/1/10

**Tulane University Health Sciences Center**  
**School of Public Health and Tropical Medicine**  
 1440 Canal St., Suite 2430  
 New Orleans, LA 70112-2715  
 (504) 988-5397  
[www.sph.tulane.edu](http://www.sph.tulane.edu)  
 Dean: Pierre Buekens, MD, PhD  
 (1947) 7/1/10

**University of Washington**  
**School of Public Health and Community Medicine**  
 Box 357230  
 Seattle, WA 98195  
 (206) 543-1144  
<http://sphcm.washington.edu>  
 Dean: Patricia W. Wahl, PhD  
 (1970) 7/1/06

**Yale University**  
**Department of Epidemiology and Public Health**  
**School of Medicine**  
 PO Box 208034, 60 College St.  
 New Haven, CT 06520-8034  
 (203) 785-2867  
<http://info.med.yale.edu/eph/>  
 Interim Dean of Public Health and Chair:  
 Brian Leaderer, PhD, MPH  
 (1946) 12/31/06



## APPENDIX 4

HISTORICAL SUMMARY OF ACCREDITATION IN PUBLIC HEALTH  
AT OHIO STATE

The table presented below appeared as Table 1 in the "Report of the Special Inquiry Panel from the Council on Education for Public Health Regarding the Ohio State University School of Public Health, September 23 and 24, 2002." Except for the correction of typographical errors occurring in the original, the table is as presented in that report and reflects the judgments and interpretations of the visitors. Criterion II.A., mentioned several times, refers to the organizational structure of the School in the university.

Mid-1950s	OSU developed MS and PhD degree programs in preventive medicine and over the next 30 years awarded some 200 masters and doctoral degrees.
1985	CEPH first accredited the OSU Graduate Program in Preventive Medicine and Community Health offered through the Department of Preventive Medicine in the College of Medicine as a community health/preventive medicine program. An MPH was added in 1990.
July 1995	OSU Board of Trustees established a new school of public health through the merger of the Department of Preventive Medicine and the Division of Health Services Management and Policy, both existing units within the College of Medicine. Dr Randall Harris, chair of the former Department of Preventive Medicine, was named the interim director reporting to the dean of medicine, Manuel Tzagournis, who at the time as also was vice president for health sciences.
October 1996	Based on a May site visit, CEPH evaluated the new school for the first time against the school of public health criteria and conferred preaccreditation, meaning that the school did not fully meet the criteria but that there was reasonable assurance that it could do so within 2 years. There were a number of deficiencies cited at that time, including Criterion II.A. The letter communicating the preaccreditation decision specifically noted that the reporting lines to the dean of the College of Medicine did not reflect comparable status and decision-making prerogatives. All other health professions units at OSU were colleges, headed by deans who reported to the provost. The letter also advised that if the university preferred not to make organizational changes that would bring the school into compliance with Criterion II.A., the university could qualify for continued accreditation as a community health/preventive medicine program. Following an unsuccessful search for a permanent dean shortly after the establishment of the new school, Dr Antoinette Eaton was appointed part-time interim director. She reported to Dr Bernadine Healy, who had been appointed dean of the College of Medicine; Dr Tzagournis retained the duties of vice president for health sciences.



May 1997	At the urging of Dr Healy, the University Board of Trustees approved changing the name of the College of Medicine to the College of Medicine and Public Health. Dr Healy's plan, never fully implemented, was that the new college would have 4 schools: medicine, biomedical sciences, allied medical professions, and public health. The last 3 of these schools were eventually developed; the school of medicine was not. Thus, the 3 schools had a reporting line to the dean comparable to the reporting lines of the medical school departments, and the chief executive officer of each carried the title of director.
March 1998	The Office of Academic Affairs approved allowing the School of Public Health to use the title of "dean for" public health, rather than director, as is typical of other schools at OSU. "Dean for" is distinguished from "dean of," which is the title used for the chief executive officer of colleges.
June 1999	Based on a site visit conducted in March 1999, CEPH determined that the organization of the school, still a part of the COMPH and reporting to the dean of medicine, did not meet the requirements of Criterion II.A. CEPH acted to revoke accreditation, extending the existing accreditation status to June 5, 2001, in order to provide for an orderly transition for currently enrolled students. By this visit, Ronald L. St. Pierre was serving as interim part-time dean for public health; his primary full-time job was vice dean of the COMPH.
Summer 1999	In lieu of appealing the revocation decision, OSU asked CEPH to conduct an expedited review as a community health/preventive medicine program prior to the expiration of the current accreditation term. CEPH agreed to do this and scheduled a visit for late April 2000.
March 1, 2000	A proposal to change the reporting line of the School of Public Health from the dean of the COMPH to the executive vice president and provost was approved by the president, provost and university senate. By this time, Dr Healy had left OSU and Dr Daniel Sedmak was named interim dean of medicine.
April 2000	Before the April visit took place, OSU officials communicated that the university had agreed to organizational changes that they believed would satisfy Criterion II.A. and asked that the expedited review be conducted using the school of public health criteria rather than the criteria for community health/preventive medicine programs. CEPH agreed to do this. The resolution proposed by OSU was to consider the School of Public Health a part of the COMPH but to have it report to Dr Edward J. Ray, the executive vice president and provost, for all academic and financial matters; this is the same reporting line in use by the colleges of nursing, dentistry, pharmacy, optometry and veterinary medicine. The COMPH also reports to the provost for academic matters, but reports to the president on all fiscal matters. In effect, the School of Public Health now had a direct reporting line to the provost and a dotted line to the dean of medicine, the latter reflecting the university's desire for close coordination and collaboration between medicine and public health. The outcome of this visit was accreditation of the school.
September 1, 2000	The university appointed Fred Sanfilippo, MD, as senior vice president for health sciences and dean of the COMPH. This appointment was described in an OSU announcement as follows: "The new position was restructured to encompass duties previously performed by Dr Manuel Tzagournis who recently retired as vice president for health sciences, and Dr Bernadine Healy who stepped down to become the president and chief executive of the American Red Cross." The appointment was not characterized as appointing Dr Sanfilippo to both positions, but rather as consolidating the duties into a single position.

June 14, 2001	Days before his departure as OSU president, William E. Kirwan communicated by memo to Dr Ray and to Dr Sanfilippo that he was transmitting "modifications in the Reorganization Plan for the Academic Medical Center" regarding reporting relationships. The effect of these changes was to make the School of Public Health report to the senior vice president for health sciences and dean of the COMPH for budget and fiscal matters and to the provost for academic matters.
January 2002	The senior vice president for health sciences initiated the search for a permanent dean for public health, anticipating the retirement of Dr St. Pierre at the end of June 2002. At the first meeting of the search committee, the dual reporting lines of the dean for public health were discussed. Except for Dr St. Pierre, who received a copy of the June 14, 2001, memo the following day, no faculty or administrators in the School of Public Health appear to have been made aware of the change.
March 12, 2002	Dr St. Pierre submitted a substantive change notice to CEPH, advising that the reporting lines had been changed and that both the dean for public health and the dean of the COMPH would report to the senior vice president for health sciences for budgetary purposes and that both would report to the provost for academic matters. There was no indication as to when the change had occurred (10 months earlier) and no explanation that subsequent to the CEPH site visit the vice president for health sciences and dean of the COMPH had been consolidated into 1 position filled by the same individual.
June 21, 2002	CEPH notified OSU that it intended to undertake a special inquiry and would send a delegation to the campus to assess the school's continued compliance with Criterion II.A. Working with Dr Dev Pathak, who was appointed interim dean following the retirement of Dr St. Pierre, CEPH arranged to visit the campus on September 23 and 24, 2002.
August 5, 2002	Dr Edward H. Jennings, the interim president following Dr Kirwan's departure, wrote a memorandum to the provost and senior vice president for health sciences, returning the reporting arrangement of the School of Public Health to the executive vice president and provost "on all matters."
September 23-24, 2002	The CEPH panel visited the Columbus campus, reviewed documents and interviewed selected officials at the university, college and school levels. The visit occurred a few days before the new president, Dr Karen Holbrook, was scheduled to begin her tenure as president. Constituents at OSU indicated that she had been consulted about the accreditation issues related to the School of Public Health and was in agreement with the actions taken by the interim president to return to the earlier reporting arrangements.

The continuation of the table below was constructed by the School of Public Health for this document, using the same format as the one taken from the CEPH report, in order to bring the accreditation history to the present.

October 2002	CEPH sent the report of the special inquiry panel to OSU, indicating that it would take no action immediately because the regular site visit for re-accreditation would occur in 2003, and that "At that time the matter of independence and status will be weighed carefully."
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August 2003	Stanley Lemeshow appointed as the first permanent dean for the School of Public Health.
October 8-10, 2003	Site visit for re-accreditation.
June 2004	CEPH notified OSU that the School of Public Health had been re-accredited for a period of three years, with consideration of an extension for an additional two years based on a satisfactory interim report in Spring 2006. It noted that the interim report should "provide evidence that the school . . . has status and prerogatives comparable to other professional schools at the institution and has achieved significant progress toward complete independence from the College of Medicine and Public Health (Criterion II.A.)"
May 2006	Interim report submitted to CEPH, outlining progress since the October 2003 site visit and June 2004 re-accreditation decision. Report includes letter from President Holbrook indicating strong support for the school, and assuring CEPH that the school is "treated as a de facto college," with an expectation that the school will achieve college status during the 2006-2007 academic year.
June 2006	CEPH notified Dean Lemeshow that it had accepted the interim report and extended the term of accreditation for two additional years (until spring 2009).

**APPENDIX 5**

**SCHOOL OF PUBLIC HEALTH  
STRATEGIC PLAN**



# SCHOOL OF PUBLIC HEALTH

## STRATEGIC PLAN

2005–2010

April 2005

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# INTRODUCTION

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The Ohio State University (OSU) School of Public Health (SPH) was created by the merger of the former Department of Preventive Medicine and the Division of Health Services Management and Policy on July 1, 1995 by approval of the University Board of Trustees. On July 1, 2004, the School formally became a freestanding academic unit with the Dean of the School of Public Health reporting directly to the Executive Vice President and Provost of the University. The School is now in the process of obtaining the University's approval to become a College.

The School currently has four academic divisions: Environmental Health Sciences, Epidemiology and Biostatistics, Health Behavior and Health Promotion, and Health Services Management and Policy. The School also houses several academic centers and programs, including the Center for Health Outcomes, Policy and Evaluation Studies (HOPES), and the Office of Workforce Development, which includes the Pennsylvania and Ohio Public Health Training Center (POPHTC) and Center for Public Health Preparedness. The School is also closely associated with the OSU Center for Biostatistics.

As a relatively young academic unit, the OSU School of Public Health has grown steadily. As of Autumn Quarter 2004, the School has 240 students and 27 faculty members. The School's Master of Health Administration program is ranked among the best in the country by the US News and World Report (No. 14 in 2003-2004).

As the only accredited School of Public Health in Ohio, this is an exciting time for the OSU School of Public Health. The challenge for the School is not only to embark on a growth trajectory to meet the increasing needs for public health professionals in Ohio and the nation, but also to continuously improve the quality of the research, education and service of the School.

In September 2004, the Executive Committee of the School appointed a committee to review and examine the strategic directions and priorities of the School and to draft the School's Strategic Plan for 2005-2010. The Strategic Planning Committee consists of 8 faculty and staff members, assisted by an external facilitator.

The strategic planning committee has revisited the School's mission, vision and core values. Through personal interviews, on-line surveys, focus groups, and benchmark studies, the committee engaged the broad constituencies of the School in the discussion of its future direction as well as the strategic choices facing the School. The resulting Strategic Plan for 2005-2010 reflects the general consensus on the vision and mission of the School as well as the strategies for achieving the School's vision.

# PLANNING CONTEXT

Strategic planning is a dynamic process and changes in the environment require that the organization react accordingly to stay competitive and viable. Emerging trends in recent years may require the School of Public Health (SPH) to make adjustments to its strategic goals, its strategies in achieving these goals, and the setting of organizational priorities.

## **SPH is a freestanding academic unit**

First and foremost, the School of Public Health is now a freestanding academic unit within the Ohio State University. The Dean of the School, who previously reported to the Dean of Medicine, now reports directly to the Provost and Executive Vice President of the University. The School is also in the process of requesting the support and approval from the University to change its status from School to College. By becoming an independent academic unit, SPH not only meets the Council on Education for Public Health's requirement for accreditation, but more importantly gains newfound autonomy in making decisions.

## **SPH is presented with opportunities to grow**

Ever since its inception in 1995, the School of Public Health has grown steadily. In recent years, changes both within and outside of the University have presented the School with more opportunities to grow its academic programs.

According to the Centers for Medicare and Medicaid Services, the country's national health care expenditure is projected to grow from \$1,779 billion in 2004 to \$3,080 billion by 2012, a growth of more than 73% in 8 years (Source: Statistical Abstract of the United States, 2004). Such a rapid growth in national health expenditure is likely to drive the growth of health-related sectors and subsequently

the needs for public health and health management professionals. Partially reflecting this trend, applications for admission to public health majors increased 50.9% in the last 10 years from 1993 to 2003 (Source: ASPH 2003 Data Report), and this trend is likely to continue for the foreseeable future.

The internal environment at the Ohio State University is also a facilitating factor for positive changes in the School of Public Health. The University's Academic Plan calls for concerted efforts to make the Ohio State University "recognized worldwide for the quality and impact of its research, teaching, and service. Our students will be able to learn and to advance knowledge in all areas. As a 21st century land-grant university, The Ohio State University will set the standard for the creation and dissemination of knowledge in service to its communities, state, nation, and the world. Our faculty, students, and staff will be among the best in the nation."

To support the attainment of the University's Academic Plan goals, the School, like all other academic units at the University, is encouraged to build a world-class faculty; develop academic programs that define Ohio State as the nation's leading public Land-Grant university; improve the quality of the teaching and learning environment; enhance and better serve the student population; and create a more diverse university community.

In 2002, the Ohio State University began the implementation of a system-wide budget restructuring process in support of the Academic Plan. This budget model reallocates new resources according to Academic Plan priorities as well as academic unit performance. Academic units that make positive additional contributions are now positioned to retain more resources for program support. This restructuring provides more local control of the budget process and creates an incentive for program growth.

### **Competition for resources and recognition**

While there are many favorable conditions that may facilitate the School's growth, there are also limiting factors that need to be addressed. Notably, state support for public higher education has been in decline over the last 10 years. The unfavorable budget situation at the state level often translates into budget cuts to state college campuses. Decreased state support puts pressure on the School to diversify sources of revenue and to generate more resources from research and services.

Nationally, there is intense competition among public health programs for quality faculty and students, research dollars, and academic reputation. The School must carefully plan and effectively implement its strategic plan in order to successfully compete in this crowded field and be counted as one of the best.

# STRATEGIC PLANNING PROCESS

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A successful strategic plan depends on the active involvement of the stakeholders. The buy-in from key stakeholder groups of the mission, vision, goals, strategies, and tactics to achieve the strategic plan is essential to the plan's effective implementation. In drafting the strategic plan, the School of Public Health engaged faculty, staff, students, and community leaders broadly in its strategic planning process through personal interviews, web-based surveys, focus groups, and benchmarking studies.

The Executive Committee of the School appointed a Strategic Planning Committee consisting of 8 faculty and staff members to lead the strategic planning effort. An external facilitator from the Strategic Planning Office of the OSU Medical Center assisted the Committee. The strategic planning process at the Ohio State University School of Public Health consists of the following components:

## **Performing an Environmental Scan**

An environmental scan is a systematic examination of the environmental factors that may influence the course of action resulting from the School's planning efforts. Typically, an environmental scan includes the evaluation of both internal and external environments. Internal scanning focuses on identifying the School's strengths and weaknesses and external scanning reveals opportunities and threats. Based on input from the faculty retreat, constituency surveys, and personal interviews, a profile of the strengths, weaknesses, opportunities, and threats (SWOT) of the School of Public Health was generated.

The SWOT analysis provides the information to help understand the fundamentals of the School's key resources: finance, capital, technology, human resources, and organizational process. It also helps identify the School's core competencies — the specific strategic strengths, combinations of skills, and processes and knowledge

that help position SPH for strategic growth. The goal of the analysis is to develop a set of strategies that match the School's strengths with opportunities and to locate solutions to minimize the School's vulnerability to external threats and internal weaknesses.

### **Reaching a Consensus on Mission, Vision, and Core Values**

The mission and vision statements convey an organization's fundamental purpose and forward-looking objectives. The core values are operating principles that reflect deeply held ideals of the organization and its constituencies.

Based on survey results and in-depth discussions, the Strategic Planning Committee reached a consensus on (1) a mission statement that describes the overall purpose of the School; (2) a vision statement that outlines an exciting future for the School; and (3) a set of core values of the School.

### **Setting Strategic Goals**

Guided by the analysis of strategic opportunities, a self-assessment of strengths and the School's vision and mission, the planning committee identified a set of strategic goals. These goals will serve as the guide to set performance targets for major program areas. In principle, goals are designed and worded to be specific and measurable as well as realistic and timely. Goals should help extend the capabilities of those working to achieve them.

### **Formulating Strategies**

Closely associated with the setting of strategic goals is the identification and articulation of a set of strategic initiatives to achieve the targeted performance. The planning committee proposed a set of strategies and tactics to support each of the strategic goals identified. These strategic initiatives reflect the School's vision and its overall positional strategy for competition. The strategies are linked directly to the key driving forces that will propel the School's move towards its goals.

### **Generating an Implementation Plan**

Goals and strategic initiatives must be translated into a set of specific, disciplined, and time-sensitive actions. Collectively, these actionable items form the implementation plan. The implementation plan should identify priorities and allocate resources to support them. One of the inherent rationales for strategic planning is the realization that organizations are constrained by limited resources. Thinking strategically means setting priorities and making decisions that may have trade-offs.

The planning committee proposed an implementation plan that outlines the specific actions to be carried out within a given timeframe. It includes the assignment of



personal responsibility to each action item. It specifies methods to monitor and evaluate the plan so that senior leaders are able to know who has done what and by when. It is also indicate what level of resource might be needed to support the implementation effort.

### **Instituting Performance Tracking**

The implementation of the strategies must be monitored and timely adjustments need to be made. Successful strategic planning depends on effective implementation, which must include a systematic performance tracking mechanism. The planning committee believed that a tracking mechanism such as a balanced scorecard should be developed to include a set of performance indicators addressing various aspects of the School's operation, benchmarking against the performance of its peer schools.

Strategic goals and priorities derived from the strategic planning process will help inform the performance scorecard design and tracking process. What gets measured gets done. Performance tracking should include the selection of a set of indicators, definition of the parameters to be measured, identification of the target values for those parameters, comparison of measured results to the target values and to performance level of benchmark schools.

Each indicator in the Performance Scorecard should have drill-down data to divisional level performance to enhance accountability. Performance data should be compared to historical trend, performance targets, or benchmark norms.

### **Conducting Annual Review**

Strategic planning is a dynamic process and modifications to the plan are critical when original assumptions are proved to be inaccurate or there are changes in the environments. Even the best-made strategic plan requires constant review and updates. The planning committee recommended that the Executive Committee of the School conduct an annual review of planning assumptions, organizational vision and objectives, and strategic priorities to keep pace with changes internally and externally.

# MISSION, VISION, AND CORE VALUES

## **Mission**

The Ohio State University School of Public Health exists for the improvement of the health of the public through the creation, dissemination, and application of knowledge. It prepares students for the challenges of leadership and service in public health and related professions, adds to knowledge through basic and applied research, and serves in the tradition of land-grant universities.

## **Vision**

To make a difference in the health of the public by advancing knowledge through multidisciplinary research and education and by reaching out with knowledge, service and leadership to Ohio and the world.

## Core Values

**Quality Learning Experience** — Educating women and men to be effective practitioners and professionals to improve the public's health status. Student interests, educational and professional development needs, and outcomes of the educational process are cherished and protected.

**Pursuit of New Knowledge** — Producing and disseminating new knowledge applicable to the School's mission. Encouragement, support, and recognition are also values maintained to sustain the efforts required to pursue new knowledge.

**Respect and Support for Diversity** — Integrating and respecting students, staff, and faculty with diverse ethnic, racial, religious, and ideological backgrounds.

**Interdisciplinary Collaboration** — Stimulating and expanding collaboration between and among the health sciences, particularly public health and medicine, as well as public and private sector organizations to attain better understanding of the mechanisms for improving the public's health status.

**Equality of Health Access** — Supporting policies and programs in the public and private sectors that facilitate equal access to health care services and equal opportunities to achieve maximum possible health outcomes.

# STRENGTHS, WEAKNESSES, OPPORTUNITIES, & THREATS

## Strengths

As Ohio's only accredited School of Public Health, the School has the reputation and ability to attract students within and outside of Ohio. The accreditation status also allows the School to compete for ASPH and CDC funding – an advantage that accredited programs and non-accredited schools do not enjoy.

The School's faculty has an established track record in collaborative and multidisciplinary research – with both publication and funded research showing a trend of healthy growth.

The School's faculty is known for their emphasis on classroom teaching. Students perceive the School's multidisciplinary curriculum, ample opportunities for student field experience, and outreach to the public health workforce as key strengths of the academic programs.

The School is located in the state capital, which facilitates the collaboration between the School and the health departments of the State of Ohio and the City of Columbus. In the community, there are many potential partners for collaboration, and students are encouraged to participate in service and outreach activities through their organizations, SPHERE and ACHE.

The School's Health Services Administration (Master's) program is ranked in the top 15 by the US News and World Report.

## Weaknesses

One of the most mentioned weaknesses of the School is its lack of national visibility and reputation. The School has yet to establish a sizable faculty with a high level of research, education, and service activities to attract the attention and respect that most well-established programs currently enjoy.

The School is financially constrained, with both declining state support and low research funding limiting its ability to grow.

The academic divisions and administrative offices of the School are currently located in multiple buildings across the campus. This significantly limits interaction and collaboration among faculty and students. Teaching space and facilities are not in the ideal condition to attract high caliber students.

Students have expressed dissatisfaction with curriculum design and vigor in several program areas and with the lack of response to make changes. They are also dissatisfied with the level of financial assistance for graduate studies, especially for students in doctoral programs.

Faculty involvement in public service and outreach is not an integral part of the School's culture. There is a strong perception among public health professionals that many faculty are too deeply entrenched in their "Ivory Tower" to pay attention to outreach and service commitments.

## Opportunities

The most significant opportunity is the increasing demand for public health professionals. Population growth, especially in the group who are age 60 and above, will increase the need for greater public health resources. Other opportunities such as the high incidence of obesity and diabetes, the threat of large-scale bio-terrorism, and the internationalization of infectious diseases such as SARS are all driving forces for the expansion of public health research, education, and service.

The Ohio State University hosts one of the most comprehensive life sciences campuses in the country, with medicine, veterinary medicine, pharmacy, nursing, biomedical and biological sciences all clustered around the School of Public Health. The opportunity for collaborative research, education, and service is abundant.

The School has many untapped opportunities to expand academic program offerings that meet the different needs of students, including an MPH-MBA combined degree program, an MPH with a specialization in Clinical Investigation, and a new degree program such as a Dr. PH. Executive education, continuing education, and on-line training programs are all viable options to pursue.

The School is also in a favorable position to expand into undergraduate education. As one of the largest campuses in the country in student enrollment, with a sizable health sciences student population, the School's undergraduate minor and major programs have a vast internal market.

The State of Ohio and the City of Columbus have strong health departments that are supportive of the School's mission and vision. The relationships between the School and public health agencies are cordial and there is significant opportunity for broader engagement and cooperation in public health outreach, research, and training.

### **Threats**

As a School with a relatively short history, the School is facing intense competition with well-established programs around the country. The gaps in funding, student enrollment, and faculty resources between OSU SPH and the top-tier schools of public health are significant.

With government deficit problems at both the federal and the state level, government support for higher education has been in decline. The School's growth is dependent on diversifying funding sources and developing higher capability to expand its research operation.

With growing student enrollment in public health, there is a greater demand for public health faculty. The recruitment of new faculty, especially those who fit with the School's strategic focuses, is becoming more difficult.

The other public health programs in Ohio offer alternative education opportunities. OSU's status as the only accredited school of public health in Ohio, while affording the School the opportunity to pursue certain restricted funding, has yet to offer tangible benefits in recruiting and placing students.



# STRATEGIC GOALS

The Strategic Planning Committee recommends that the School of Public Health pursue the following strategic goals:

- Enhance OSU SPH's reputation as a national leader in public health research, education, and service.
- Grow a dynamic and productive faculty.
- Foster innovative and high quality interdisciplinary research.
- Build strong and growing academic programs that attract high caliber students and provide quality learning experience.
- Promote diversity.
- Promote outreach and public service.
- Expand resources to support continuous growth.

# STRATEGIC INITIATIVES AND TACTICS

**Goal 1: Enhance OSU School of Public Health's reputation as a national leader in public health research, education, and service**

**Strategic Initiative 1:**

- Utilize communications and marketing tools to effectively enhance OSU SPH's image and visibility nationally.

**Tactics:**

- Hire a full-time staff to direct communications and marketing efforts.
- Overhaul the design of SPH's website, improve contents, and ensure timely updates.
- Send Annual Reports with emphasis on accomplishments to deans and chairs of all accredited SPH, legislators, state and regional agency leaders, and other opinion leaders.
- Develop electronic newsletters to faculty, staff, and students with emphasis on communicating key changes within the School.
- Plan a nationwide "branding" campaign to be implemented within 2-3 years.

**Strategic Initiative 2:**

- Recognize the faculty's contribution and encourage their involvement in enhancing the SPH's reputation.

**Tactics:**

- Encourage and make available funding support for faculty paper presentations in major academic conferences.
- Invest in the recruitment of 2-3 "star" faculty who have accomplished research and publication records, especially in fields that SPH wants to establish national prominence.
- Recognize best achievers in research funding, publication, and classroom teaching at school faculty and staff functions.
- Encourage and provide ways for faculty to serve on journal editorial boards and NIH, CDC, DHHS, and other national review committees.
- Host a national and a statewide conference on pressing public health issues, rotating with a two-year schedule.
- Actively promote SPH faculty nationally for recognition of achievements.

**Goal 2: Grow a dynamic and productive faculty****Strategic Initiative 1:**

- Grow faculty in all academic areas to establish a critical mass to enable program expansion and sustainable growth.

**Tactics:**

- Recruit division chairs to fill all academic leadership positions, including: Biostatistics, Environmental Health Sciences, Epidemiology, Health Services, Management, and Policy, and Director of HOPES.
- Recruit tenure-track and research-track faculty to ensure that each division has at least 10 faculty FTEs by 2008 to meet the requirement for an academic department.
- Invest in the recruitment of 2-3 "star" faculty who have accomplished research and publication records, especially in fields that SPH wants to establish national prominence.

**Strategic Initiative 2:**

- Use a fair and generous incentive structure and mentoring system to attract and retain productive faculty.

**Tactics:**

- Develop and implement an incentive structure that links performance expectations directly with rewards – a faculty productivity expectation system.
- Perform an annual review of incentive structure implementation to ensure that desirable outcomes are achieved.
- Explore alternative approach to benchmark faculty productivity with due consideration to disciplinary differences in research, teaching, and service efforts.
- Offer new faculty a competitive start-up package.
- Institute a mentoring system to encourage collaboration between established and starting faculty, with incentives for senior faculty to get involved.

**Goal 3: Foster innovative and high quality interdisciplinary research****Strategic Initiative 1:**

- Encourage and facilitate collaborative research and leverage multidisciplinary resources at the Ohio State campus.

**Tactics:**

- Strengthen research grant facilitation capacity to provide infrastructure support to grant-writing, budgeting, maintenance of funded projects, and assistance in interdisciplinary grant opportunities
- Increase faculty awareness of grant facilitation support services available.
- Encourage each faculty to present at least one research seminar per year and announce it to all health sciences colleges.
- Ensure the inclusion of SPH faculty publication and grant records in OSURF's Expertise database and OSU's Knowledge Bank.
- Locate all academic divisions to a single building in about 2 years (by June 2007).

**Strategic Initiative 2:**

- Institute a system of support that promotes innovative and high-impact research and collaboration.

**Tactics:**

- Based on careful analysis of external and internal data and a broad consultation with stakeholders, within one year (by January 2006), identify one or two academic areas to receive more resources to grow at a faster rate in order to establish early national prominence.
- Institute a competitive, peer-reviewed process to award one full-quarter release time for faculty to develop a highly innovative or high-impact research project with real potential for substantial external funding.
- Give prominent space to highlight faculty research in annual report to the stakeholders.

**Goal 4: Build strong and growing academic programs that attract high caliber students and provide quality learning experience****Strategic Initiative 1:**

- Grow academic programs continuously to meet the needs of students and the public health community.

**Tactics:**

- Leverage existing strengths of academic programs at OSU to develop new degree options: MPH-Vet Med and MPH-Clinical Investigation track.
- Create a Dr. PH program.
- Pursue executive education opportunities such as Executive MPH in Biostatistics or Executive MHA in Health Services Management and Policy.
- Establish undergraduate minor and major in Public Health.
- Establish graduate minor or specialization in Public Health.

**Strategic Initiative 2:**

- Implement a coordinated effort to expand student enrollment.

**Tactics:**

- Increase overall enrollment 10% each year for the next 10 years – doubling graduate student enrollment by academic year 2010-2011.
- Increase the share of doctoral student enrollment from the current 11% to 25% by 2009 – to align with the average of peer institutions.
- Strengthen admissions / recruitment capacity by increasing student recruitment budget and resources 15% over the next 5 years.
- Develop and implement an aggressive student recruitment campaign to reach out to students in and around Ohio.
- Increase total financial support to students by 12% each year over the next 5 years.

**Strategic Initiative 3:**

- Provide a quality learning experience for students.

**Tactics:**

- Strengthen the Office of Public Health Practices to include career and placement services.
- Increase student involvement in faculty research by increasing funded GRA positions by 3-4 50% positions each year over the next five years.
- Give placement priority to SPH students in research and service projects at the Center for HOPES and the Office of Workforce Development.
- Establish a fund to support graduate student travel to present research papers at national and regional conferences.
- Improve access to faculty and quality of student advising.
- Maintain a faculty-to-student ratio that is better than the average of all accredited Schools of Public Health.
- Institute entering and graduating student web-based surveys and communicate findings to the leadership for continuous program improvement.



**Strategic Initiative 4:**

- Review and improve public health curriculum to better serve students and the public health community.

**Tactics:**

- Conduct a major review of the PEP curriculum to address delivery and quality issues.
- Revise and set standards for learning objectives and competencies for all degree programs and specializations.
- Ensure that faculty are fully informed about course contents and sequence to better serve the needs of students.
- Develop a curriculum in public health preparedness that sets the standard for the field.
- Develop undergraduate public health minor and major curricula that become a model for other schools of public health.
- Develop Executive MPH or MHA curriculum.

**Goal 5: Promote diversity****Strategic Initiative:**

- Develop and institute a systematic approach to promote diversity in the classroom and in the workplace.

**Tactics:**

- Ensure student recruitment and retention efforts emphasize diversity objectives – with 12% increase in minority student support each year.
- Strongly encourage female and under-represented minority group candidates to apply for faculty or faculty leadership positions.
- Protect and encourage the diversity of opinions and perspectives in the pursuit of knowledge and discoveries.
- Ensure divisional representation at the “Diversity Enhancement Committee”.
- Implement an education and communication process to promote diversity.

## **Goal 6: Promote outreach and public service**

### **Strategic Initiative:**

- Build strong relationships with external constituents and increase SPH's visibility in public service efforts.

### **Tactics:**

- Give public recognition for faculty involvement in community public health events through newsletters and school functions.
- Place SPH faculty into advisory positions at state and regional public health agencies and associations and build relationships with public health leaders.
- Provide media relationship coaching to faculty and encourage them to speak to media regarding public health issues and concerns.
- Encourage, actively assist, and provide incentives to faculty to serve on journal editorial boards and national review committees.
- Encourage faculty to pursue state and local research and consulting contracts.
- Establish annual "Champions of Public Health" award to 2-3 individuals in the state of Ohio for their distinguished contributions to public health causes such as in community activities, public policy making, and service involvement.

## **Goal 7: Expand resources to support continuous growth**

### **Strategic Initiative 1:**

- Grow academic programs to increase resources from traditional sources (tuition and state support).

### **Tactics:**

- Increase overall enrollment 10% each year for the next 10 years.
- Create degree options that build on the strengths of other OSU academic programs, such as MPH-Vet Med and MPH-Clinical Investigation.
- Create a Dr. PH program.
- Pursue executive education opportunities such as Executive MPH in Biostatistics or Executive MHA in Health Services Management and Policy.
- Establish undergraduate minor and major in Public Health.
- Establish graduate minor or specialization in Public Health.

**Strategic Initiative 2:**

- Diversify revenue sources through expanded funded research.

**Tactics:**

- Develop and implement an incentive structure that links performance expectations directly with rewards — with due consideration for research, teaching, and service efforts.
- Develop an economic model to evaluate revenue streams from various sources and to analyze the cost structure to assist budgetary decisions.
- Institute a research-faculty track to allow concentration in funded research.
- Institute a clinical teaching track (non-tenure teaching contract) to allow faculty who excel at teaching an opportunity to stay in the classroom.
- Enhance capacity to provide infrastructure support for grant-writing, budgeting, maintenance of funded projects, and assistance in inter-disciplinary grant opportunities.
- Encourage faculty to pursue state and local research and consulting contracts.

**Strategic Initiative 3:**

- Raise funds from development efforts.

**Tactics:**

- Hire a full-time development officer to actively pursue charitable contributions, private donations, and corporate gifts to support the School's growth and academic endeavors.
- Ensure at least 10% annual growth in new endowed funds and gifts in the next five years.

# PERFORMANCE SCORECARD

Strategic goals and priorities derived from the strategic planning process should drive the performance scorecard design and tracking process. What gets measured gets done. Performance tracking should include the selection of a set of indicators, definition of the parameters to be measured, identification of the target values for those parameters, comparison of measured results to the target values and to performance level of benchmark schools. Each indicator should include the School's aggregate data and whenever possible, drill-down data at the academic division level.

The following is a list of performance indicators that was recommended to and reviewed by the Executive Committee of the School. Each indicator report tracks not only the overall school level performance but also detailed divisional level drill-down.

## **Goal 1: Enhance OSU SPH's reputation as a national leader in public health research, education, and service**

1. Public Health program ranking by the US News and World Report.
2. Health Services Administration program ranking by the US News and World Report.
3. Publications per Faculty FTE.

## **Goals 2: Grow a dynamic and productive faculty**

4. Total operating funds and research funding.
5. Indirect cost recovery and release time totals.
6. Faculty size.

## **Goal 3: Foster innovative and high quality interdisciplinary research**

7. Total research expenditure per faculty FTE.
8. Number and percent of publications in top journals.

**Goal 4: Build strong and growing academic programs that attract high caliber students and provide quality-learning experience**

9. Growth in student applications.
10. Growth in student enrollment.
11. Doctoral student enrollment size.
12. Faculty to student ratio.
13. Percent of students receiving financial assistance from the School and the University.
14. Student overall satisfaction with learning experience (Exit Survey).

**Goal 5: Promote diversity**

15. Percent of students who are minorities.
16. Percent of faculty, staff and students who are female or underrepresented minorities.

**Goal 6: Promote outreach and public service**

17. Total state and local research and service contracts by dollar amount and per faculty FTE.

**Goal 7: Expand resources to support continuous growth**

18. Total operating funds per faculty FTE.
19. Total income from endowments and gifts.

# ANNUAL REVIEW PROCESS

Strategic planning is a dynamic process and modifications to the plan are critical when original assumptions are proved to be inaccurate or there are changes in the environments. Even the best-made strategic plan requires constant review and updates. Periodic review of plan assumptions, organizational vision and objectives, and strategic priorities is needed to help the School keep pace with changes internally and externally.

It is recommended that the School of Public Health conduct its annual review of planning assumptions, achievement of strategic goals, and progress in implementing strategic initiatives in January of every year. Persons accountable for the implementation of key plan initiatives and actions should prepare a formal progress report as well as a plan for continuous improvement for the next fiscal year.

The Executive Committee should communicate performance outcomes to faculty, staff, and students and seek input on the implementation plan for the next fiscal year.



## **APPENDIX 6**

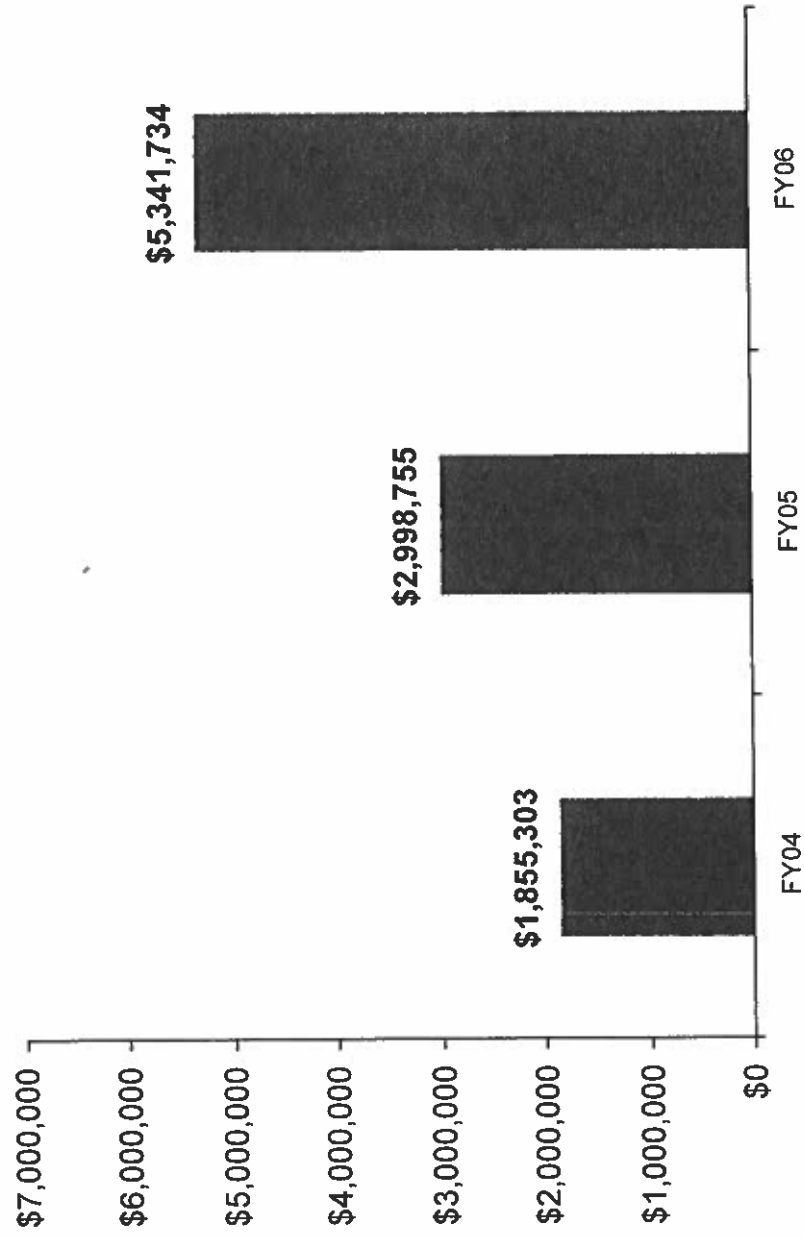
**TOTAL RESEARCH EXPENDITURES (FY 2004-2006)**

**INDIRECT COST RECOVERY AND RELEASE TIME (FY 2004-2006)**

**RESEARCH EXPENDITURES BY SOURCE (FY 2004-2006)**

**EXTERNAL RESEARCH FUNDING BY DIVISION AND FACULTY MEMBER**

**Total Research Expenditures, FY 2004 - 2006**

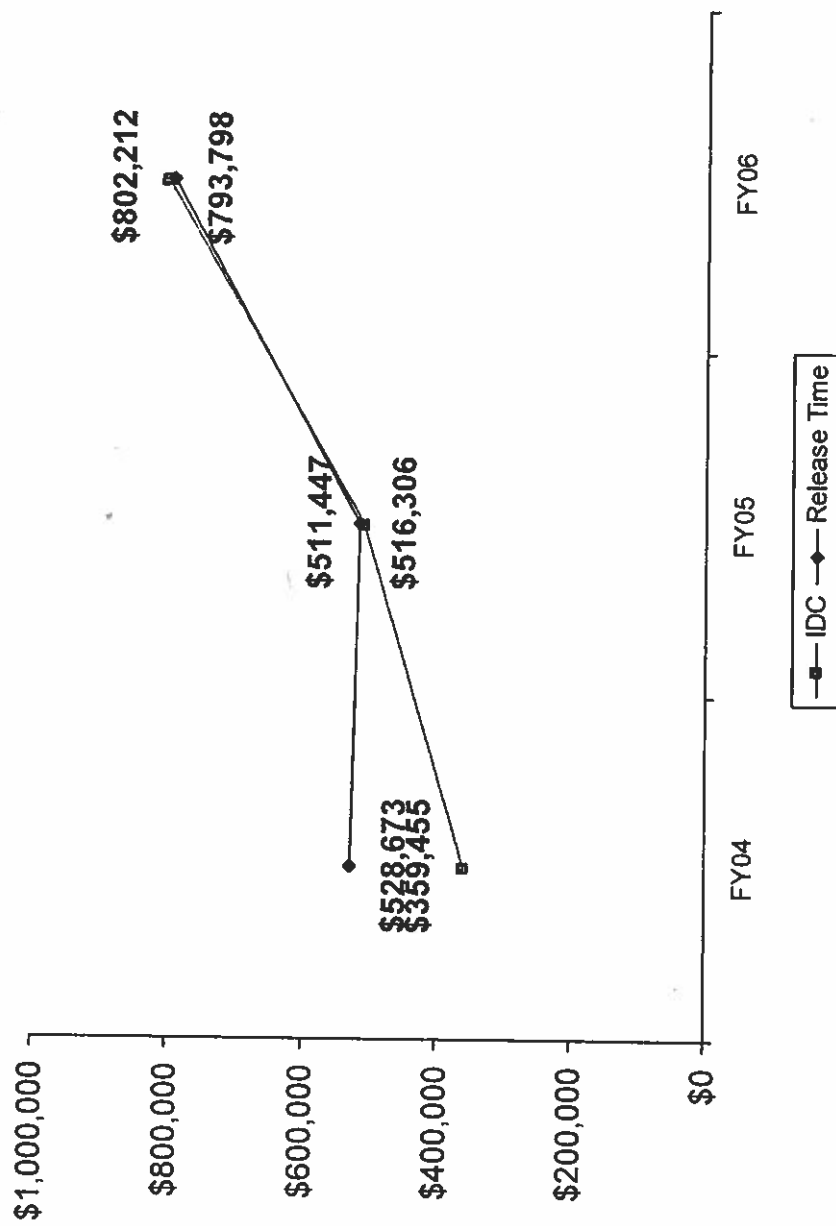




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**Indirect Cost Recovery and Release Time from  
Research Grants, FY 2004 - 2006**



## Research Expenditures in the School of Public Health for FY 2004 - 2006 By Source

Source	Sponsor Direct			Sponsor F&A			Sponsor Total		
	FY 2004	FY 2005	FY 2006	FY 2004	FY 2005	FY 2006	FY 2004	FY 2005	FY 2006
NIH	\$338,326	\$378,751	\$771,777	\$144,156	\$143,251	\$265,046	\$482,482	\$522,002	\$1,036,823
Federal - Other	\$1,008,358	\$1,715,177	\$2,437,144	\$210,970	\$322,516	\$428,560	\$1,219,328	\$2,037,693	\$2,865,705
State	\$0	\$266,603	\$982,313	\$0	\$9,282	\$42,744	\$0	\$58,919	\$1,025,057
Foundation	\$18,966	\$51,048	\$236,509	(\$491)	\$7,871	\$26,217	\$18,475	\$275,885	\$262,726
Corporate	\$50,449	\$59,909	\$86,791	(\$42)	\$28,528	\$39,645	\$50,407	\$88,436	\$126,436
Other	\$79,748	\$15,820	\$24,988	\$4,861	\$0	\$0	\$84,610	\$15,820	\$24,988
<b>Grand Total</b>	<b>\$1,495,847</b>	<b>\$2,487,308</b>	<b>\$4,539,522</b>	<b>\$359,454</b>	<b>\$511,448</b>	<b>\$802,212</b>	<b>\$1,855,302</b>	<b>\$2,998,755</b>	<b>\$5,341,734</b>

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
<b>Stanley Lemeshow, PhD, Professor and Dean</b>									
PI		60008413	10/01/05	12/31/06	Cleveland Clinic Foundation	Individual and age-dependent risk of cancer in Cowden syndrome (CS) and bannayan-ruvalcaba-riley syndrome	100%	n/a	\$34,040
Core PI	Caligiuri	743839	09/30/02	08/31/06	National Cancer Institute/NIH	Innate Immunity: Elucidation/modulation - cancer therapy - Core B: Biostatistics	n/a	100% 46050; 0% 40030	\$97,496
Project PI/ Award Co-PI	Award PI: Caligiuri	747069	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$139,913 (total direct)
Core PI	Ostrowski	60002390	09/15/04	07/31/06	National Cancer Institute/NIH	Genetic analysis of the breast tumor microenvironment - Core C	60%	20% 40030; 20% 46050	\$68,280
Core PI	Paskett	60006080	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core B	25%	25% 40030; 50% 46050	\$90,497
<b>Co-PI</b>									
	Marras	743933	90/01/02	08/31/06	National Institute for Occupational Safety and Health/CDC	Biomechanical/psychosocial risks for low back disorders	50%	50% 14570	no cost extension
Award and Project Co-PI	Award and Project PI: Caligiuri	747064	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$2,912,387 (total direct)
Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Otterson	747065	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$553,497 (total direct)
Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Knopp	747066	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$2,724,309 (total direct)
Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Saltz	747067	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$414,669 (total direct)
Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Stoner	747068	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$533,952 (total direct)

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Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Wewers	747070	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$258,801 (total direct)
Co-PI	Glaser	60000509	03/16/05	02/28/07	National Cancer Institute/NIH	Stress, the immune system and basal cell carcinoma	10%	78% 46450; 10% 25500; 2% 25252	\$444,106
Co-PI	Stevenson	60008085	02/01/06	01/31/07	Centers for Disease Control and Prevention	Ohio State health network infection control collaborative: Epi-centers for prevention of healthcare related infections	26%	74% 25258	\$263,594
Investigator	Caligiuri	60002925	12/01/04	11/30/06	National Cancer Institute/NIH	The Ohio State University comprehensive cancer support grant - Biostatistics	n/a	100% 46050	\$201,324
Investigator	Love	60004873	02/01/05	08/31/06	National Cancer Institute/NIH	Adjuvant hormonal therapy in vietnamese breast cancer	n/a	90% 46050; 10% 25256	\$176,167
Investigator	Love	60004874	02/01/05	02/28/07	National Cancer Institute/NIH	Luteal adjuvant oophorectomy in vietnamese breast cancer	n/a	90% 46050; 10% 25256	\$402,301
Investigator	Paskett	60005359	10/01/05	09/30/06	Breast Cancer Research Foundation	"Women's Health Initiative (WHI) Cancer Survivor Cohort	10%	90% 46050	\$208,333
Mei-Ling Ting Lee, PhD, Professor and Chair (Hire Date 11/01/05)									
PI		60008291	11/01/05	10/31/06	National Human Genome Research Institute/NIH	Power and sample size for microarray studies	100%	n/a	\$51,052
Investigator	Caligiuri	60002925	12/01/04	11/30/06	National Cancer Institute/NIH	The Ohio State University comprehensive cancer support grant - Biostatistics	n/a	100% 46050	\$201,324



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Melvin L. Moeschberger, PhD, Professor									
Co-PI	Walters	60006938	07/15/06	06/30/07	National Institute of Dental and Craniofacial Research/NIH	Aggressive periodontitis and formylpeptide receptor SNPs	25%	75% 21550	\$151,630
Investigator	Ferguson	742010	09/30/01	08/31/06	National Heart, Lung, and Blood Institute/NIH	Mechanisms of chronic pathobiology in allografts	n/a	100% 25956	\$80,000
Investigator	Curley	744155	01/01/91	12/31/06	National Cancer Institute/NIH	Analog studies of 4-HPR and its glucuronide	n/a	50% 18000; 50% 25954	\$171,190
Investigator	Griffen	747155	08/01/04	04/30/07	National Institute of Dental and Craniofacial Research/NIH	Molecular analysis of the biofilm in caries and health	n/a	50% 21500; 50% 21350	\$339,571
Investigator	Zadnik	60005538	07/01/96	06/30/06	National Eye Institute/NIH	Myopia development in children (expect to continue)	n/a	100%	\$2,062,148
Investigator	Mitchell	60005839	09/30/04	08/31/06	National Eye Institute/NIH	The convergence insufficiency treatment trial	n/a	100% 27000	\$261,754
David Jarjoura, PhD, Research Professor									
Co-PI	Stevenson	60008085	02/01/06	01/31/07	Centers for Disease Control and Prevention	Ohio State health network infection control collaborative: Epi-centers for prevention of healthcare related infections	26%	74% 25258	\$263,594
Investigator	PI: Caligiuri/ Core PI: Lemeshow Whitacre	743839	09/30/02	08/31/06	National Cancer Institute/NIH	Innate Immunity: Elucidation/modulation - cancer therapy - Core B: Biostatistics	n/a	100% 46050; 0% 40030	\$97,496
Investigator	PI: Caligiuri/ Core PI: Lemeshow	746299	02/01/04	01/31/07	NIH	Effect of pregnancy on EAE and MS	n/a	100% 25150	\$225,816
Investigator	PI: Caligiuri/ Core PI: Lemeshow	747069	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$139,913 (total direct)
Investigator	Caligiuri	60002925	12/01/04	11/30/06	National Cancer Institute/NIH	The Ohio State University comprehensive cancer support grant - Biostatistics	n/a	100% 46050	\$201,324
Investigator	Love	60004873	02/01/05	08/31/06	National Cancer Institute/NIH	Adjuvant hormonal therapy in vietnamese breast cancer	n/a	90% 46050; 10% 25256	\$176,167
Investigator	Love	60004874	02/01/05	02/28/07	National Cancer Institute/NIH	Luteal adjuvant oophorectomy in vietnamese breast cancer	n/a	90% 46050; 10% 25256	\$402,301
Investigator	Liu	60005003	02/15/06	03/14/07	Army Medical Research and Materiel Command	Hunting for novel x-linked breast cancer suppressor genes in mouse and human	n/a	100% 25500	\$300,000
Investigator	Byrd	60005934	10/01/05	09/30/06	Leukemia and Lymphoma Society	Specialized Center of Research; Experimental therapeutics in CLL - Core D	n/a	100% 25256; 0% 46050	\$75,000

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<b>Bo Lu, PhD, Assistant Professor</b>									
PI	Award PI: Olsen	60009658	07/01/06	06/30/07	National Institute of Child Health and Human Development/NIH (Initiative in Population Research (IPR) Seed Grant)	Causal inference in observational studies via a propensity score approach	n/a	100% 07080	\$19,691
<b>Lei Shen, PhD, Assistant Professor</b>									
PI		60006987	10/07/05	08/30/06	Ohio Department of Health	Connecting Ohio hospitals to the real- time outbreak and disease surveillance system (RODS)	100%	n/a	\$6,688
PI		60007108	10/07/05	08/30/06	Ohio Department of Health *	Connecting Ohio hospitals to the real- time outbreak and disease surveillance system (RODS)	100%	n/a	\$189,000
<b>Co-PI</b>									
	Crouser	747268	07/09/04	06/30/07	National Heart, Lung, and Blood Institute/NIH	Stromal gene expression during pulmonary sarcoidosis	10%	70% 25080; 18% 46050; 2% 25250; 0% 25160; 0% 25261	\$150,000
Co-PI	Fowler	60006347	07/15/05	07/14/07	Henry M. Jackson Foundation for the Advancement of Military Medicine	Gynecological cancer center for health disparities - Project 1	5%	80% 46050; 10% 25262; 5% 25500; 0% 25160; 0% 25350	\$91,184
Investigator	PI: Caligiuri/ Core PI: Lemeshow	743839	09/30/02	08/31/06	National Cancer Institute/NIH	Innate Immunity: Elucidation/modulation - cancer therapy - Core B: Biostatistics	n/a	100% 46050; 0% 40030	\$97,496
Investigator	Lairmore	744472	04/21/03	03/31/07	National Cancer Institute/NIH	Retrovirus models of lymphocyte transformation and disease - Core A	n/a	80% 46050; 20% 29400	\$115,303
Investigator	PI: Ostrowski/ Core PI: Lemeshow	60002390	09/15/04	07/31/06	National Cancer Institute/NIH	Genetic analysis of the breast tumor microenvironment - Core C	60%	20% 40030; 20% 46050	\$68,280
Investigator	Lin	60006245	09/30/04	08/31/06	National Cancer Institute/NIH	Integrating genomic & epigenomic alterations in cancer and its microenvironment - Project 2	9%	82% 46050; 9% 25262; 0% 06940; 0% 25150; 0% 25160; 0% 25500	\$171,353

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Division of Environmental Health Sciences

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
Timothy J. Buckley, PhD, Associate Professor and Chair (Hire Date 08/01/05)									
None									
Christopher M. Weghorst, PhD, Associate Professor									
PI		60000662	09/28/04	06/30/07	National Institute of Dental and Craniofacial Research/NIH	Chemopreventive agent-responsive genes in oral cancer	5%	90% 46050; 5% 25450	no cost extension
PI		60005676	02/01/06	01/31/07	California Strawberry Commission	Prevention of oral cancer by dietary and topical administration of lyophilized strawberries	100%	n/a	\$58,200
PI		60006811	07/01/06	06/30/10	American Cancer Society	Chemoprevention of oral cancer in Appalachia	85%	10% 25450; 5% 25256	\$799,998 (total direct)
Core PI	Ravlin	60002196	08/15/03	08/14/06	Cooperative State Research Education and Extension Service	Special research grant for dietary intervention, OH	n/a	73% 46050; 12% 11560; 10% 25256; 5% 56000	no cost extension
Core PI	Ravlin	60002202	08/15/03	08/14/06	Cooperative State Research Education and Extension Service	Special research grant for dietary intervention, OH	n/a	73% 46050; 12% 11560; 10% 25256; 5% 56000	no cost extension
Francis J. Holtzauer, PhD, Clinical Associate Professor and Director of the Office of Workforce Development									
Co-PI	D'Ambrosio	60001923	03/10/05	02/28/07	National Cancer Institute/NIH	Apoptotic mechanisms in NSAID chemoprevention	10%	50% 46050; 40% 25903	\$154,287
Co-PI	Walters	60006938	07/15/06	06/30/07	National Institute of Dental and Craniofacial Research/NIH	Aggressive periodontitis and formylpeptide receptor SNPs	25%	75% 21550	\$151,630
Public Health Training Center									
PI		60003184	09/01/05	08/31/06	University of Pittsburgh (prime HRSA)	Public health workforce curriculum development and implementation program	100%	n/a	\$111,093
PI		60004590	04/22/05	08/31/06	Ohio Dept of Health	Public health workforce curriculum development and implementation program	100%	n/a	\$328,593
PI		60004591	04/22/05	06/30/09	Ohio Dept of Health	Public health workforce scholarship program	100%	n/a	\$321,000
PI		60004721	10/01/05	09/30/06	Association of Schools of Public Health	Ohio Public Health Leadership Institute	100%	n/a	\$25,700
PI		60005004	04/22/05	06/30/09	Ohio Dept of Health	Public health workforce scholarship program (ADMIN)	100%	n/a	\$20,000

None

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
<b>David M. Murray, PhD, Professor and Chair (Hire Date 09/01/05)</b>									
PI		60005346	09/01/05	08/31/06	University of North Carolina	Trial of activity in adolescent girls: Coordinating center	100%	n/a	\$29,025
PI		60006822	09/01/05	03/31/06	University of Washington	Community youth development study (to be extended)	100%	n/a	\$7,278
<b>Co-PI</b>									
	Stevenson	60008085	02/01/06	01/31/07	Centers for Disease Control and Prevention	Ohio State health network infection control collaborative: Epi-centers for prevention of healthcare related infections	26%	74% 25258	\$263,594
Investigator	Paskett	60006895	11/01/05	10/31/06	American Cancer Society	Ohio patient navigation program	10%	80% 46050; 10% 25130	\$400,000
<b>Randall E. Harris, MD, PhD, Professor</b>									
PI		60001981	09/01/04	08/31/06	Pfizer Inc.	Cancer chemoprevention by cyclooxygenase (COX-2) blockade: case control study	100%	n/a	\$153,302 (total direct)
<b>Electra D. Paskett, PhD, Professor, Marion N. Rowley Designated Chair in Cancer Research; Associate Director for Population Sciences, Program Co-Leader, Cancer Control Program, Comprehensive Cancer Center; Director, Diversity Enhancement, James Cancer Hospital</b>									
PI		743900	10/01/02	09/30/06	The Breast Cancer Research Foundation	A randomized comparison of a low fat versus a low carbohydrate dietary pattern for weight loss and impact on biomarkers associated with breast cancer in overweight and obese premenopausal women	0%	100% 46050	\$212,892 (total direct)
PI		746154	10/01/03	09/30/06	The Breast Cancer Research Foundation	Effects of tailored communication and peer social support on physical activity in overweight postmenopausal women	0%	100% 46050	\$208,333 (total direct)
PI		746457	09/30/03	09/29/06	Public Health Service	Springfield regional cancer screening program	0%	100% 46050	\$165,749
PI		60001283	10/01/04	09/30/06	The Breast Cancer Research Foundation	Breast cancer prevention through nutrition	10%	90% 46050	\$208,333 (total direct)
PI		60009290	05/24/06	06/30/07	University of Kentucky	Appalachian cancer center network	10%	90% 46050	\$158,580
PI		60005359	10/01/05	09/30/06	The Breast Cancer Research Foundation	"Women's Health Initiative (WHI) Cancer Survivor Cohort	10%	90% 46050	\$208,333 (total direct)
PI		60006076	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Project #1	0%	100% 46050	\$180,329
Award PI/ Project Co-PI	Project PI: Wewers	60006077	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Project #2	100%	0% 46050	\$164,314

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Budget Direct Costs	Current
PI		60006078	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Project #3	0%	100% 46050	\$214,144	
PI		60006079	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core A	10%	90% 46050	\$86,767	
Award PI	Core PI: Lemeshow	60006080	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core B	25%	25% 40030; 50% 46050	\$90,497	
Award PI/ Core Co-PI	Core PI: Jewell	60006081	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core C	20%	80% 46050	\$117,535	
Award PI/ Core Co-PI	Core PI: Ahijevych	60006082	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core D	50%	50% 46050; 0% 17000	\$131,995	
PI		60006083	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Pilot Project	0%	100% 46050	\$31,915	
Award PI/ Project Co-PI	Project PI: Kelly	60007051	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Supplement PI Kelly	10%	90% 46050	\$94,731	
PI		60006138	01/01/06	12/31/06	Lance Armstrong Foundation	A randomized study to prevent lymphedema in women treated for breast cancer	10%	90% 46050	\$75,000	
PI		60006895	11/01/05	10/31/06	American Cancer Society	Ohio patient navigation program	10%	80% 46050; 10% 25130	\$400,000	
PI		60008016	01/15/06	01/14/07	Wayne State University	Cancer information service	0%	100% 46050	\$95,245	
PI		60009302	06/01/06	05/31/07	University of Chicago	CALGB Committee Chair Support	0%	100% 46050	prelim	
Co-PI	Fowler	60006350	07/15/05	07/14/07	Henry M. Jackson Foundation for the Advancement of Military Medicine	Gynecological cancer center for health disparities - Core A	10%	80% 46050; 10% 25350	\$115,146	
Co-PI	Fowler	60006351	07/15/05	07/14/07	Henry M. Jackson Foundation for the Advancement of Military Medicine	Gynecological cancer center for health disparities - Core B	10%	90% 46050	\$85,915	



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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
<b>John R. Wilkins III, BCE, DrPH, Professor; Deputy Director, Ohio Regional Center for Agricultural Disease and Injury</b>									
PI		746071	09/30/03	09/29/06	National Institute for Occupational Safety and Health/CDC	Adherence to NAGCAT and injury risk reduction	100%	n/a	\$274,901
<b>Co-PI</b>									
	Bean	746093	09/30/03	09/29/06	National Institute for Occupational Safety and Health/CDC	Ohio regional center for agricultural disease and injury	40%	60% 11230; 0% 56230; 0% 55010	\$78,901
<b>Co-PI</b>									
	Bean	746094	09/30/03	09/29/06	National Institute for Occupational Safety and Health/CDC	Ohio regional center for agricultural disease and injury - Education Outreach	40%	60% 11230; 0% 56230; 0% 55010	\$67,610
<b>Co-PI</b>									
	Bean	746095	09/30/03	09/29/06	National Institute for Occupational Safety and Health/CDC	Ohio regional center for agricultural disease and injury - Prevention Intervention	40%	60% 11230; 0% 56230; 0% 55010	\$97,995
<b>Co-PI</b>									
	Bean	746096	09/30/03	09/29/06	National Institute for Occupational Safety and Health/CDC	Ohio regional center for agricultural disease and injury - Research	40%	60% 11230; 0% 56230; 0% 55010	\$140,000
<b>Judith A. Schwartzbaum, PhD, Associate Professor</b>									
PI		60008444	03/15/06	09/15/06	Karolinska Institutet	Schwartzbaum collaboration at Karolinska Institute	100%	n/a	\$32,811
<b>Kurt B. Stevenson, MD, MPH, Associate Professor (Hire Date 09/01/05)</b>									
PI		60007699	03/01/06	11/30/06	Association for Professionals in Infection Control and Epidemiology	Comparing Administrative Codin	n/a	100% 25258	prelim
<b>PI</b>									
		60008085	02/01/06	01/31/07	Centers for Disease Control and Prevention	Ohio State health network infection control collaborative: Epi-centers for prevention of healthcare related infections	26%	74% 25258	\$263,594

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
<b>Amy K. Ferketic, PhD, Assistant Professor</b>									
Co-PI	VanBuskirk	60000810	9/22/2004	08/31/06	National Cancer Institute/NIH	Cytokine production, gene polymorphisms and PTLD	1%	97% 25954; 2% 25256	\$50,000
Co-PI	Raman	60001411	08/01/05	07/31/07	National Heart, Lung, and Blood Institute/NIH	Iron and atherosclerosis	1%	89% 25080; 10% 06560; 0% 25251	\$150,000
Co-PI	Caligiuri	60004403	10/01/03	09/30/06	Leukemia and Lymphoma Society	Prevention of post-transplant lymphoproliferative disorder	5%	85% 46050; 10% 25256	\$180,018
Co-PI	Binkley	60007577	12/20/05	06/01/07	Pfizer Inc.	Statin induced augmentation of circulating endothelial progenitor cells and myocardial variability in patients with ischemic and nonischemic cardiomyopathy	1%	99% 25080; 0% 25251	\$69,099
Investigator	Award PI: Caligiuri/ Core PI: Lemeshow	743839	09/30/02	08/31/06	National Cancer Institute/NIH	Innate Immunity: Elucidation/modulation - cancer therapy—Core B: Biostatistics	n/a	100% 46050; 0% 40030	\$97,496
Investigator	Award PI: Caligiuri/ Core PI: Lemeshow	747069	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$139,913 (total direct)
Investigator	Caligiuri	60000039	05/01/05	04/30/07	National Cancer Institute/NIH	IL-15 characterization through experimental immunology	n/a	90% 46050; 10% 25256	\$186,756
Investigator	Award PI: Paskett/ Core PI: Lemeshow	60006080	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core B	25%	25% 40030; 50% 46050	\$90,497

School of Public Health Sponsored Research  
Division of Health Behavior Health Promotion

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
<b>Phyllis L. Pirie, PhD, Professor and Chair</b>									
PI		60006289	09/01/05	08/31/06	Case Western Reserve University (prime HRSA)	OAT special projects: Netwellness	100%	n/a	\$61,556
PI		60008057	01/01/06	12/31/06	Delta Dental Plan of Michigan, Inc.	Netwellness	100%	n/a	\$140,000
<b>Investigator</b>									
	Paskett	60006895	11/01/05	10/31/08	American Cancer Society	Ohio patient navigation program	10%	80% 46050; 10% 25130	\$400,000
<b>Mary Ellen Wewers, PhD, MPH, Professor and Associate Dean for Research and Faculty Development</b>									
PI		745825	08/01/03	07/31/06	University of California at Los Angeles	Tobacco free nurses	100%	n/a	\$46,840
PI		60006856	10/01/05	06/30/06	Walther Cancer Institute	Testing the effects of interactive computer programs for smoking cessation (expected to continue)	100%	n/a	\$12,834
Project PI/ Award Co-PI	Award PI: Caligiuri/ Project PI: Wewers	747070	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$258,801 (total direct)
Project PI/ Award Co-PI	Award PI/ Project Co-PI: Paskett	60006077	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Project #2	100%	0% 46050	\$164,314
<b>Award and Project Co-PI</b>									
Award and Project Co-PI	Award and Project PI: Caligiuri	747064	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$2,912,387 (total direct)
Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Otterson	747065	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$553,497 (total direct)
Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Knopp	747066	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$2,724,309 (total direct)
Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Saltz	747067	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$414,669 (total direct)

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
Award and Project Co-PI	Award PI: Caligiuri/ Project PI: Stoner	747068	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$533,952 (total direct)
Award and Project Co-PI	Award PI: Caligiuri	747069	10/29/03	02/28/07	Ohio Department of Development	Comprehensive program for the prevention, detection and treatment of lung cancer	10%	55% 46050; 20% 25900; 10% 25100; 5% 25256	\$139,913 (total direct)
Co-PI	Anijevych	60004037	03/15/05	02/28/07	National Institute on Drug Abuse/NIH	Menthol, ethnicity and nicotine dependence	n/a	100% 17000	\$219,713
Award Co-PI	Award and Project PI: Paskett	60006076	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Project #1	0%	100% 46050	\$180,329
Award Co-PI	Award and Project PI: Paskett	60006078	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Project #3	0%	100% 46050	\$214,144
Award and Project Co-PI	Award and Core PI: Paskett	60006079	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core A	10%	90% 46050	\$86,767
Award Co-PI	Award PI: Paskett/ Core PI: Lemeshow	60006080	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core B	25%	25% 40030; 50% 46050	\$90,497
Award and Project Co-PI	Award PI: Paskett/ Core PI: Jewell	60006081	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core C	20%	80% 46050	\$117,535
Award Co-PI	Award PI: Paskett/ Core PI: Anijevych	60006082	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Core D	50%	50% 46050; 0% 17000	\$131,995
Award Co-PI	Award and Project PI: Paskett	60006083	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Pilot Project	0%	100% 46050	\$31,915
Award Co-PI	Award PI: Paskett/ Project PI: Kelly	60007051	09/01/05	08/31/06	National Cancer Institute/NIH	Reducing cervical cancer in Appalachia - Supplement PI Kelly	10%	90% 46050	\$94,731
Investigator	Caligiuri	60002911	12/01/04	11/30/06	National Cancer Institute/NIH	The Ohio State University comprehensive cancer support grant - Program Leaders	n/a	100% 46050	\$130,785
Investigator	Paskett	60009290	05/24/06	06/30/07	University of Kentucky	Appalachian cancer center network	10%	90% 46050	\$158,580

School of Public Health Sponsored Research  
Division of Health Behavior Health Promotion

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
Randi Love, PhD, Clinical Associate Professor									
None									
Catherine Alfano, PhD, Assistant Professor (Hire Date 09/01/05)									
Investigator	Caligiuri	60002930	12/01/04	11/30/06	National Cancer Institute/NIH	The Ohio State University comprehensive cancer support grant - Development/Recruitment	n/a	100% 46050	\$59,752
Investigator	Paskett	60005359	10/01/05	09/30/06	The Breast Cancer Research Foundation	"Women's Health Initiative (WHI) Cancer Survivor Cohort	10%	90% 46050	\$208,333 (total direct)

School of Public Health Sponsored Research  
Division of Health Behavior Health Promotion

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
Brian C. Focht, PhD, Assistant Professor (Hire Date 09/01/05)									
None									
Mira L. Katz, PhD, MPH, Assistant Professor									
PI		60000500	07/01/05	06/30/10	National Cancer Institute/NIH	Patient activation to increase colon cancer screening	25%	75% 46050	\$125,100
Kenneth J. Steinman, PhD, MPH, Assistant Professor									
PI		60006825	10/01/05	09/30/06	Association of Schools of Public Health	Health behavior among religiously active black youth	80%	10% 07770; 10% 05020	\$262,061
Michèle Shipp, PhD, Research Assistant Professor									
PI		60002563	07/01/04	07/31/07	National Cancer Institute/NIH	What accounts for racial disparities in colon cancer	100%	n/a	no cost extension

School of Public Health Sponsored Research  
Division of Health Services Management and Policy

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
<b>Allard E. Dembe, ScD, Associate Professor and Chair (Hire Date 05/01/06)</b>									
PI		60009507	07/01/06	06/30/07	Zenith Insurance Company	Improving Workers' Compensation Medical Care Provided by a California Insurer	100%	n/a	prelim
PI		60009779	07/01/06	06/30/07	W.E. Upjohn Institute for Employment Research	How Demanding Work Schedules Affect Occupational Injury Risk	100%	n/a	\$74,836
PI		60009861	05/01/06	10/01/06	California Healthcare Foundation	Updating of Workers' Compensation Fact Sheets	100%	n/a	\$9,819
<b>Robert J. Caswell, PhD, Associate Professor and Associate Dean for Academic Affairs</b>									
PI		60005814	07/01/05	06/30/06	Bureau of Health Professions/ HRSA	Public health traineeship (expected to continue)	100%	n/a	\$10,748
<b>Co-PI Stevenson</b>									
Co-PI	Stevenson	60008085	02/01/06	01/31/07	Centers for Disease Control and Prevention	Ohio State health network infection control collaborative: Epi-centers for prevention of healthcare related infections	26%	74% 25258	\$263,594
Investigator	Paskett	60006895	11/01/05	10/31/08	American Cancer Society	Ohio patient navigation program	10%	80% 46050; 10% 25130	\$400,000
<b>Rajesh Balkrishnan, PhD, Associate Professor</b>									
PI		60003342	01/01/05	12/31/07	Wake Forest University Health Sciences	Center for dermatology research	n/a	100% 18241	\$142,394 (total direct)
PI		60005729	07/01/05	12/31/06	Centocor Inc.	Costs and outcomes associated with introduction of biological therapies in psoriasis	33%	67% 18241	\$32,000
<b>Co-PI Kulkarni</b>									
Co-PI	Kulkarni	60006306	09/02/05	09/01/06	GlaxoSmithKline	Prevalence and impact of poor treatment adherence in Parkinson's disease	n/a	100% 18051	\$19,312
<b>Sharon B. Schweikhart, PhD, Associate Professor</b>									
None									
<b>Sandra J. Tanenbaum, PhD, Associate Professor</b>									
PI		60004163	04/18/05	06/30/08	Ohio Department of Mental Health	Evidence and empowerment among consumers in the public mental health system	100%	n/a	\$29,050



School of Public Health Sponsored Research  
Division of Health Services Management and Policy

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Current Budget Direct Costs
Investigator	Coury	60004852	07/01/05	06/30/06	Maternal & Child Health Bureau (prime HRSA)	Leadership education in neurodevelopmental and related disabilities program	n/a	100% 48400	\$282,527

None

School of Public Health Sponsored Research  
Center for Health Outcomes, Policy and Evaluation Studies (HOPES)

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Role	PI	OSURF Project No.	Project Start Date	Project End Date	Sponsor	Project Title	% SPH Expenditure Credit	% Other Expenditure Credit	Budget Direct Costs	Current Costs
PI	Hal R. Arkes, PhD, Professor	745130	08/01/03	07/31/07	National Science Foundation	Collaborative research: the reluctance to use decision aids	50%	50% 07660	no cost extension	
PI		746323	04/15/04	03/31/07	Social, Behavioral and Economic Research/NSF	EITM: Collaborative Research: Reference Point Adaptation and Mental Accounting: Dynamic Extensions of Prospect Theory	33%	34% 07660; 33% 10350	no cost extension	
PI		60004518	04/15/04	03/31/07	Social, Behavioral and Economic Research/NSF	EITM: Collaborative research: Reference point adaptation and mental accounting: Dynamic extensions of prospect theory	33%	34% 07660; 33% 10350	no cost extension	
PI		60005920	07/01/06	06/30/07	Social and Economic Sciences/NSF	Cognitive bases of hindsight effects	50%	50% 07660	\$41,023	
Co-PI	Kagel	60002010	04/01/05	03/31/07	Social, Behavioral and Economic Research/NSF	Collaborative research in team versus individual play	17%	66% 07220; 17% 07660	\$102,394	

**APPENDIX 7**  
**CURRENT FACULTY**  
**NEW FACULTY FOR 2006-2007**

School of Public Health Faculty

Division	Name	Rank	Faculty Status*	% Time	Terminal Degree	Univ. where Degree Earned	Gender	Ethnicity
Environmental Health Sciences	Buckley, Timothy	Associate Professor and Chair	T	100%	PhD	Rutgers Univ.	M	W
	Crawford, Mac	Assistant Professor	TT	100%	PhD	Ohio State Univ	M	W
	Holtzner, Frank	Clinical Assistant Professor	AU	80%	PhD	Ohio State Univ	M	W
	Pompli, Michael	Clinical Assistant Professor	AU	50%	MS	University of Toledo	M	W
	Weghorst, Christopher	Associate Professor	T	100%	PhD	Medical College of OH	M	W
Biostatistics	Jarjoura, David	Research Professor	RT	50%	PhD	Univ of Connecticut	M	W
	Lee, Mei-Ling Ting	Professor and Chair	T	100%	PhD	Univ. of Pittsburgh	F	A
	Lemeshow, Stanley	Professor and Dean	T	100%	PhD, MSPH	UCLA / Univ of N Carolina	M	W
	Lu, Bo	Assistant Professor	TT	100%	PhD	The Wharton School	M	A
	Moeschberger, Melvin	Professor	T	100%	PhD	NC State	M	W
	Shen, Lei	Assistant Professor	TT	100%	PhD	Univ. of Wisconsin	M	A
Epidemiology	Ferketich Amy	Assistant Professor	TT	100%	PhD	Ohio State Univ	F	W
	Harris, Randall	Professor	T	100%	MD, PhD	Nebraska / NC State	M	W
	Murray, David	Professor and Chair	T	100%	PhD	Univ. of Tennessee	M	W
	Paskett, Electra	Professor	T	100%	PhD	Univ of WA	F	W
	Schwartzbaum, Judith	Associate Professor	T	100%	PhD	UCLA	F	W
	Stevenson, Kurt	Associate Professor	T	25%	MD, MPH	Univ. WA	M	W
Health Behavior and Health Promotion	Wilkins III, J.R.	Professor	T	100%	DrPH	Johns Hopkins	M	W
	Alfano, Catherine	Assistant Professor	TT	100%	PhD	Univ. of Memphis	F	W
	Focht, Brian	Assistant Professor	TT	100%	PhD	Univ. of Florida	M	W
	Katz, Mira	Assistant Professor	TT	100%	PhD	Temple	F	W
	Love, Randi	Clinical Associate Professor	AU	50%	PhD	Ohio State Univ	F	W
Health Services Management and Policy	Pirrie, Phyllis	Professor and Chair	T	100%	PhD	Ohio State Univ	F	W
	Shipp, Michele	Research Assistant Professor	RT	100%	MD, DrPH	State Univ. of Haiti/UAB	F	B
	Steinman, Kenneth	Assistant Professor	TT	100%	PhD	Univ of MI	M	W
	Wewers, Mary Ellen	Professor and Associate Dean	T	100%	PhD	Univ. Maryland	F	W
	Arkes, Hal	Professor	T	50%	PhD	Univ. of Michigan	M	W
Health Services Management and Policy	Balkrishnan, Rajesh	Associate Professor	T	30%	PhD	Univ of N Carolina	M	A
	Caswell, Robert J.	Associate Professor and Assoc Dean	T	100%	PhD	University of MI	M	W
	Dembe, Allard	Associate Professor and Chair	T	100%	ScD	Univ. of Massachusetts	M	W
	McAlearney, Ann	Assistant Professor	TT	100%	ScD	Harvard Univ	F	W
	Monguio, Rosa Rodriguez	Clinical Assistant Professor	AU	56%	PhD	Univ. Barcelona	F	??



**Appendix 8**  
**School of Public Health**  
**Statement of Sources and Uses**  
**FY 2005 - 2007**

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<b>Fiscal Year</b>	<b>2005 Actual</b>	<b>2006 Actual</b>	<b>2007 Budget</b>
<b>Sources</b>			
General Funds	\$ 4,137,096	\$ 5,289,124	\$ 5,589,124
Release Time	\$ 455,755	\$ 793,798	\$ 850,000
Other University Support		\$ 53,417	\$ 25,000
Earnings (Conferences/Workshops)	\$ 23,040	\$ 19,822	\$ 25,000
Development	\$ 41,026	\$ 32,986	\$ 50,000
Interest from Endowments	\$ 89,865	\$ 90,405	\$ 120,000
Contracts (State/Local Gov't Funding)	\$ 131,104	\$ 225,978	\$ 250,000
University Cash Investment <sup>1,2</sup>	\$ 1,772,816	\$ 1,000,000	\$ 1,000,000
Sponsored Research (OSURF) <sup>3</sup>	\$ 2,487,308	\$ 4,539,522	\$ 5,901,379
Adjustment for Release Time <sup>4</sup>	\$ (455,755)	\$ (793,798)	\$ (850,000)
<b>Total Sources</b>	<b>\$ 8,682,255</b>	<b>\$ 11,251,254</b>	<b>\$ 12,960,503 <sup>5</sup></b>
<b>Uses</b>			
<i>Personnel</i>			
Faculty	\$ 1,566,588	\$ 2,469,200	\$ 3,167,968
Staff	\$ 803,486	\$ 780,807	\$ 872,039
Specials	\$ 296,281	\$ 277,291	\$ 291,156
Benefits	\$ 877,470	\$ 1,130,683	\$ 1,385,972
<b>Total Personnel</b>	<b>\$ 3,543,825</b>	<b>\$ 4,657,981</b>	<b>\$ 5,717,135</b>
<i>Other</i>			
Operating (Supplies and Services)	\$ 416,061	\$ 553,251	\$ 608,576
Equipment	\$ 70,106	\$ 203,039	\$ 223,343
Faculty Start-Up and Space Renovations	\$ 22,264	\$ 1,031,422	\$ 2,500,000
<i>Research Expenditures <sup>6</sup></i>			
Faculty/Non Faculty Salaries	\$ 1,108,491	\$ 2,002,192	\$ 2,603,098
Benefits	\$ 386,008	\$ 540,354	\$ 702,264
Supplies and Services	\$ 980,189	\$ 1,939,753	\$ 2,521,659
Equipment	\$ 12,620	\$ 57,224	\$ 74,357
Adjustment for Release Time <sup>4</sup>	\$ (455,755)	\$ (455,755)	\$ (850,000)
<b>Total Uses</b>	<b>\$ 6,083,809</b>	<b>\$ 10,529,461</b>	<b>\$ 14,100,433</b>
<b>Cash Balance</b>			
Beginning Year Balance	\$ 2,960,425	\$ 5,558,871	\$ 6,280,664
Net Current Year Activity	\$ 2,598,446	\$ 721,793	\$ (1,139,930)
Ending Balance <sup>7</sup>	<b>\$ 5,558,871</b>	<b>\$ 6,280,664</b>	<b>\$ 5,140,734</b>

**Notes:**

<sup>1</sup> \$4M cash investment from Office of Academic Affairs (\$1M each year in FY04,05,06 and 07)

<sup>2</sup> FY05 includes \$772,816 from OAA for renovations in Cunz Hall

<sup>3</sup> Sponsored Research (OSURF) amount is equal to grant expenditures (direct costs)

<sup>4</sup> Adjustment for Release Time as it is counted as a separate line in sources and is also included in research expenditures; adjustment in uses as release time is included in research expenditures and distributed among other use categories

<sup>5</sup> FY 2007 Sources do not include funds from OAA for Targeted Investments in Excellence awards or from revenue from sale of Kravinsky Properties

<sup>6</sup> Research Expenditures are direct costs

<sup>7</sup> Funds being held for growth (new faculty start-up, student recruitment, space renovations, etc.)



## APPENDIX 9

SCHOOL OF PUBLIC HEALTH  
STUDENTS AND GRADUATES

<b>New Enrollees</b>	<b>Autumn 2001</b>	<b>Autumn 2002</b>	<b>Autumn 2003</b>	<b>Autumn 2004</b>	<b>Autumn 2005</b>
MPH	40	36	37	38	59
MPH/PEP	19	18	18	33	22
MHA	27	27	33	32	33
MS	2	4	5	5	1
PhD	2	9	3	7	4
<b>Total</b>	<b>90</b>	<b>94</b>	<b>96</b>	<b>115</b>	<b>119</b>

<b>Total Students</b>	<b>Autumn 2001</b>	<b>Autumn 2002</b>	<b>Autumn 2003</b>	<b>Autumn 2004</b>	<b>Autumn 2005</b>
MPH	71	79	78	78	95
MPH/PEP	31	44	36	53	61
MHA	55	56	67	67	70
MS	8	8	13	7	6
PhD	25	25	26	31	31
<b>Total</b>	<b>190</b>	<b>212</b>	<b>220</b>	<b>236</b>	<b>263</b>

<b>Graduates</b>	<b>2000-2001</b>	<b>2001-2002</b>	<b>2002-2003</b>	<b>2003-2004</b>	<b>2004-2005</b>
MPH	27	31	35	33	34
MPH/PEP	5	9	23	10	20
MHA	25	22	19	26	26
MS	1		1	1	1
PhD	4	5	5	4	3
<b>Total</b>	<b>62</b>	<b>67</b>	<b>83</b>	<b>74</b>	<b>84</b>

**APPENDIX 10  
LETTERS OF SUPPORT**

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- Abdelmonem A. Afifi, PhD  
Dean Emeritus, UCLA School of Public Health  
Professor, UCLA Department of Biostatistics  
University of California, Los Angeles  
BOX 951772, 51-239C CHS  
Los Angeles, CA 90095-1772  
Phone: (310) 825-0707  
Email: [afifi@ucla.edu](mailto:afifi@ucla.edu)
  
- Joseph A. Alutto, PhD  
Executive Dean of the College of Business  
Executive Dean of Professional Colleges  
Professor of Management & Human Resources  
Fisher College of Business  
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CAMPUS  
Phone: 2-2666  
Email: [Alutto.1@osu.edu](mailto:Alutto.1@osu.edu)
  
- Carole Anderson, PhD  
Interim Dean, College of Dentistry  
Vice Provost of Academic Affairs  
203 Bricker Hall  
190 North Oval Mall  
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Phone: 2-5881  
Email: [Anderson.32@osu.edu](mailto:Anderson.32@osu.edu)
  
- J. Nick Baird, MD  
Director of Health  
Ohio Department of Health  
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Columbus, OH 43215  
Phone: (614) 466-2253  
Email: [nick.baird@odh.ohio.gov](mailto:nick.baird@odh.ohio.gov)
  
- Paul A. Beck, PhD  
Dean and Professor of Political Science  
College of Social and Behavioral Sciences  
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154 North Oval Mall  
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Phone: 2-7689  
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**APPENDIX 10**  
**LETTERS OF SUPPORT**

**92**

- Robert W. Brueggemeier, PhD  
Dean of the College of Pharmacy  
Professor of Medicinal Chemistry  
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500 W 12<sup>th</sup> Avenue  
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Phone: 2-5711  
Email: [brueggemeier.1@osu.edu](mailto:brueggemeier.1@osu.edu)
  
- James W. Curran, MD, MPH  
Dean and Professor of Epidemiology  
Rollins School of Public Health  
The Robert W. Woodruff Health Sciences Center  
Emory University  
1518 Clifton Road, NE  
Atlanta, GA 30322  
Phone: (404) 727-8720  
Email: [jcurran@sph.emory.edu](mailto:jcurran@sph.emory.edu)
  
- Antoinette Parisi Eaton, MD  
Corporate Director  
Government Affairs  
Children's Hospital  
700 Children's Drive  
Columbus, OH 43205  
Phone: (614) 722-4555  
Email: [aneaton@chi.osu.edu](mailto:aneaton@chi.osu.edu)
  
- Richard R. Freeman, PhD  
Dean & Distinguished Professor  
College of Mathematical and Physical Sciences  
425 Stillman Hall  
1947 College Road  
CAMPUS  
Phone: 2-8908  
Email: [freeman.261@osu.edu](mailto:freeman.261@osu.edu)
  
- Joan M. Herbers, PhD  
Dean and Professor of College of Biological Sciences  
105 Biological Sciences Building  
484 W 12<sup>th</sup> Avenue  
CAMPUS  
Phone: 2-1627  
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**APPENDIX 10  
LETTERS OF SUPPORT**

**93**

- Elizabeth R. Lenz, PhD  
Dean and Professor College of Nursing  
145 Newton Hall  
1585 Neil Avenue  
CAMPUS  
Phone: 2-8900  
Email: [lenz.23@osu.edu](mailto:lenz.23@osu.edu)
  
- Teresa C. Long, MD, MPH  
Health Commissioner  
Columbus Health Department  
240 Parsons Avenue  
Columbus, Ohio 43215  
Phone: (614) 645-5489  
Email: [teresa1@columbus.gov](mailto:teresa1@columbus.gov)
  
- William A. Meezan, DSW  
Dean and Professor, College of Social Work  
425 Stillman Hall  
1947 College Road  
CAMPUS  
Phone: 2-5300  
Email: [Meezan.1@osu.edu](mailto:Meezan.1@osu.edu)
  
- Bobby D. Moser, PhD  
Dean and Professor, College of Food, Agriculture, & Environmental Science  
100N Agricultural Administration Building  
2120 Fyffe Road  
CAMPUS  
Phone: 2-4218  
Email: [Moser.2@osu.edu](mailto:Moser.2@osu.edu)
  
- Nancy D. Rogers, JD  
Dean and Professor, College of Law  
220B Drinko Hall  
55 W 12<sup>th</sup> Avenue  
CAMPUS  
Phone: 2-0574  
Email: [Rogers.23@osu.edu](mailto:Rogers.23@osu.edu)
  
- Thomas J. Rosol, DVM, PhD  
Dean and Professor, College of Veterinary Medicine  
0125D Veterinary Medicine Academic Building  
1900 Coffey Road  
CAMPUS  
Phone: 8-8749  
Email: [Rosol.1@osu.edu](mailto:Rosol.1@osu.edu)

- Jacqueline J. Royster, PhD  
Senior Vice Provost and Executive Dean of Arts & Sciences  
Professor of English  
114 University Hall  
230 North Oval Mall  
CAMPUS  
Phone: 2-3236  
Email: [Royster.3@osu.edu](mailto:Royster.3@osu.edu)
- Alfred "Fred" Sanfilippo, MD, PhD  
Senior Vice President and  
Executive Dean for Health Sciences  
CEO, OSU Medical Center  
200A Meiling Hall  
370 W 9<sup>th</sup> Avenue  
CAMPUS  
Phone: 2-1200  
Email: [sanfilippo.5@osu.edu](mailto:sanfilippo.5@osu.edu)
- Melvin D. Shipp, OD, MPH, DrPH  
Dean College of Optometry  
A-400 Starling Loving Hall  
320 W 10<sup>th</sup> Avenue  
CAMPUS  
Phone: 2-3246  
Email: [shipp.25@osu.edu](mailto:shipp.25@osu.edu)
- Harrison C. Spencer, MD, MPH  
President & CEO  
Association of Schools of Public Health  
1101 15<sup>th</sup> Street NW Suite 910  
Washington, DC 20005  
Phone: (202) 296-1099 Ext. 128  
Email: [hspencer@asph.org](mailto:hspencer@asph.org)
- Ronald L. St Pierre, PhD  
Special Assistant to the Senior Vice President for Health Sciences  
Associate Vice President and Professor Emeritus  
443D Atwell Hall  
453 W 10<sup>th</sup> Avenue  
CAMPUS  
Phone: 247-7205  
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DEPARTMENT OF BIostatISTICS  
SCHOOL OF PUBLIC HEALTH  
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LOS ANGELES, CA 90095-1772

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e-mail: [afifi@ucla.edu](mailto:afifi@ucla.edu)

August 9, 2006

Stanley Lemeshow, Ph.D.  
Dean, School of Public Health  
The Ohio State University M116  
Starling Loving Hall  
320 West 10th Avenue  
Columbus, OH 43210-1240

Dear Dean Lemeshow,

I am pleased to write in support of your request for your School of Public Health (SPH) to become a college at The Ohio State University. I am doing so based on my experience as Dean of the UCLA SPH for 15 years. I am also a former member of the Council on Education for Public Health (CEPH), and one of the former site visitors to the OSU SPH. However, I would like to emphasize that I am not writing on behalf of the CEPH. Rather I am expressing my own personal opinion based on my experience, which included having served as a consultant to you shortly after you were named Dean in August 2003 and as a member of your Advisory Board. I am therefore very familiar with the OSU SPH and its history, as well as with the field of Public Health and the accreditation process.

For any School of Public Health, accreditation is vital for national and international recognition, for recruitment and retention of high quality faculty, for enrollment of strong students and for access to certain federal funding. In order to satisfy the CEPH accreditation requirements, the OSU SPH has been, to the best of my knowledge, functioning as a separate entity in almost every respect for more than a year (separate budget, direct reporting line to the Executive Vice President and Provost, etc.).

Although the OSU SPH is functioning as a separate entity, achieving college status would be a symbolic as well as a functional step that would bring credit to public health at OSU and eliminate any ambiguity in its status. As required by the CEPH accreditation criteria, a College of Public Health would unambiguously "have the same status and prerogatives" of other professional colleges at OSU, e.g., the College of Nursing. In addition, college status would remove any question by peer institutions and external constituencies as to whether Ohio State is fully committed to excellence in this field.

I Strongly urge OSU SPH to continue to work towards achieving college status. College status would give OSU the platform on which to build for excellence in Public Health, attracting the best faculty and students and assembling a truly significant effort in the field. I wish you every success in your laudable efforts.

Sincerely,

A handwritten signature in black ink, appearing to read 'A. A. Afifi', written in a cursive style.

Abdelmonem A. Afifi, Ph.D.  
Dean Emeritus, UCLA School of Public Health  
Professor, UCLA Department of Biostatistics

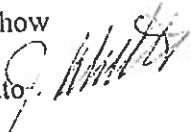




## OFFICE OF THE DEAN

July 13, 2006

TO: Stanley Lemeshow

FROM: Joseph A. Alutto 

SUBJECT: College Status for Public Health

This is to indicate complete support for the recognition of Public Health as a College. The basis for this support is multiple. To begin with, the School has clearly grown in stature and reached a point where College designation makes a great deal of institutional sense. Second, given the growth in societal concerns over public health issues and the growth of university commitments to the study of public health policy issues, the concept of a visible college designation is most appropriate in sending a signal to external constituents about the importance of our current and future institutional commitment. Third, the current school leadership has shown a clear ability to effectively recruit outstanding faculty and staff while also moving aggressively to address key health policy issues. This has allowed the school to develop appropriate degree programs designed to address critical public health issues. The effectiveness of that leadership bodes well for future growth and an ability to continually address issues critical to the state of Ohio as well as the nation. Finally, as I understand the process, college status is more consistent with accreditation requirements than is the current school designation and accreditation is essential for future success.

While I do believe the proposed College of Public Health would constitute a relatively small unit, with only about 45 faculty, there are at least two aspects of this worth noting. First, it would not be the smallest college in the university, thus it would not be setting any precedents as to college size. Second, as I understand plans, the potential for faculty growth is particularly great for this unit and, as a result, over time I would expect the college would add numbers of faculty. In effect, I do not believe that the current size of the unit imposes any particular handicap to college status.

Good luck with the proposal.



College of Dentistry

Office of the Dean  
305 West 12th Avenue **98**  
PO Box 182357  
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www.dent.ohio-state.edu

August 14, 2006

Dean Stanley Lemeshow  
School of Public Health  
Office of the Dean  
M-116 Starling-Loving Hall  
320 W. 10<sup>th</sup> Avenue  
Columbus, OH 43210

Dear Dean Lemeshow:

In response to your letter of July 13, 2006, I am in full support of your proposal to attain college status for the School of Public Health. You have made substantial progress in the development of your programs, and have hired excellent faculty and an able leadership team. It is time now for full college status that I fully endorse.

Good luck and let me know if there is anything I can do to be of assistance.

Sincerely,

Carole A. Anderson, PhD, RN, FAAN  
Vice Provost and Interim Dean

CAA/eyl

## OHIO DEPARTMENT OF HEALTH

246 North High Street  
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 Columbus, Ohio 43216-0118

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 www.odh.state.oh.us



BOB TAFT  
 Governor

J. NICK BAIRD, M.D.  
 Director of Health

JUL 27 2006

Stanley Lemeshow, Ph.D., Dean  
 Ohio State University School of Public Health  
 M-116 Starling-Loving Hall  
 320 West 10<sup>th</sup> Avenue  
 Columbus, Ohio 43210-1240

Dear Stan,

It is with great pleasure that I write this letter of support for your proposal to seek college status within the Ohio State University.

Designation of college status will formally describe what is already operational in your current reporting structure within the university. More importantly, it will properly focus attention on public health as a field of global, national, state and local importance.

The challenges of public health are many:


- 1) The potential of a global pandemic flu and other emerging infectious disease outbreaks.
- 2) The advent of bioterrorism and its implications for response.
- 3) The societal costs of chronic disease and the associated need to focus on prevention and healthy behaviors.
- 4) The pressing need for a new, highly skilled workforce as an expected 25% of the current public health workforce retires in the next five years.
- 5) The burden of persistent disparities in health outcomes due to race, ethnicity, gender, geography and income.
- 6) Environmental health.
- 7) The need for improved disease surveillance.
- 8) And the advent of real-time health information exchange and associated technologies.

In addition, public health is a multi-disciplinary field and it is crucial for academia to sort out and emphasize core and specialty knowledge.

We are especially proud of the partnership we have developed with you and your colleagues in the School of Public Health, and we welcome your formal designation as a college. It is a critical and important step forward in improving public health practice in Ohio.

We look forward to your success in this endeavor.

Sincerely,

  
 J. Nick Baird, MD  
 Director of Health



Office of the Dean  
College of Social and  
Behavioral Sciences

1010 Derby Hall  
154 North Oval Mall  
Columbus, OH 43210-1341  
Phone 614-292-8448  
Fax 614-292-9530

July 13, 2006

Stanley Lemeshow, Dean  
School of Public Health  
M-116 Starling-Loving Hall  
320 West 10th Avenue  
Columbus, OH 43210-1240

Dear Stan:

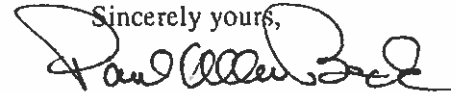
I am pleased to write in support of the School of Public Health's proposal to become a college. After almost three years of operation as a college *de facto*, it is now time for the University to recognize Public Health as a college *de jure*, so that it can realize the advantages that accrue from college status.

Public Health easily satisfies the criteria the University should use for determining college status. The School contains five clearly differentiated divisions, which can be transformed directly into departments once college status is conferred. It has a strong leadership team in place. Its faculty size is substantial, larger than that of several other colleges in the University. It maintains a sizable graduate program, which has grown dramatically in the last three years, and a new undergraduate minor is in place. It is a leader in a winning TIE proposal that will establish Public Health at Ohio State as a major national player in the area of infectious diseases, bio-defense, and public health preparedness. It also is an active participant in another winning TIE proposal in Population and Health, with my college. These exciting initiatives will involve the proposed college even more in interdisciplinary research at the highest level and spread the benefits of a vibrant College of Public Health throughout the University. The proposed change in status has full support from faculty and administrators in its former college home, the College of Medicine. Accreditation needs should not necessarily dictate the University's administrative structure, but it is beneficial that college status has brought Public Health into compliance with the accreditation standards for colleges of public health nationwide.

If granted college status, the School of Public Health will be well positioned to be an important player in both the worldwide public health community and the University. The College of Social and Behavioral Sciences has benefited from its association with Public Health in recent years, and I am looking forward to an even more fruitful relationship with the new College of Public Health in the years to come, especially (but not only) through our collaboration Population and Health TIE initiative.

If I can be of further assistance in your efforts to gain full approval of the change in status, please do not hesitate to let me know.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Paul Allen Beck". The signature is fluid and cursive, with the first name "Paul" being the most prominent.

Paul Allen Beck  
Dean and Professor  
of Political Science

**College of Pharmacy**

Office of the Dean  
217 Parks Hall  
500 West 12<sup>th</sup> Avenue  
Columbus, OH 43210-1291

Phone (614) 292-5711  
Fax (614) 292-3113  
E-mail Brueggemeier.1@osu.edu

August 14, 2006

Stanley Lemeshow, Ph.D.  
Dean, School of Public Health  
M-116 Starling-Loving Hall  
320 West 10<sup>th</sup> Avenue  
Columbus, OH 43210-1240

Dear Stan:

I wish to express my strongest support for the proposal to obtain college status for the OSU School of Public Health. The proposal clearly outlines the rationale for requesting the change to college status and also delineates the areas in which the current school meets the University's guidelines for college status.

The area of public health is a well-recognized field of study and many of the nation's most distinguished public and private universities have strong and established schools/colleges. Furthermore, public health is a field of critical importance to the nation's healthcare system and significantly partners with other health professions to enhance quality healthcare. The 2004 Institute of Medicine report entitled "Academic Health Centers: Leading Change in the 21<sup>st</sup> Century" emphasizes the importance of integrating patient-based and population-based approaches in health profession education, research and service. College status for public health will further enhance interdisciplinary approaches to the training of healthcare professionals and biomedical researchers at The Ohio State University. Achieving the goal of college status will enable public health to work as an equal partner with dentistry, medicine, nursing, optometry, pharmacy, and veterinary medicine.

The Council of Education for Public Health evaluated and re-accredited your academic programs, which include the areas of epidemiology, biostatistics, environmental health sciences, health behavioral sciences, and health services administration. The graduate programs in MPH, MHA, MS and PhD are strong. The various dual/combined degree programs with other OSU colleges are also excellent, and we in Pharmacy are particularly excited about the combined MPH/PharmD program approved in Autumn 2005. The CEPH accreditation is an important recognition of the quality programmatic components of public health at Ohio State. Demonstration of independent status for public health and a reporting structure comparable to the other health professional schools/colleges is critical for continued accreditation. Public health program accreditation is vital for national and international recognition, for recruitment and retention of high quality faculty, for enrollment of strong students, and for access to certain federal funding.

College status for public health will also help to clarify your program's status and improve your visibility on campus. College status will provide public health with the firm foundation necessary for completing the formation of your administrative team and for recruitment of high-quality faculty in an extremely competitive environment. Further, college status will facilitate joint recruitment of faculty with other health professional colleges. Indeed, your goal of achieving college status was important in our successful joint recruitment of Dr.

Raj Balkrishnan to the Merrell Dow professorship in health outcomes. Dr. Balkrishnan is a prolific researcher focusing on the effectiveness of medical care delivery, medication use patterns and behavior, and health outcomes in chronic diseases. This recruitment is hopefully the first example of more joint recruitments between our two programs that will enhance interdisciplinary approaches to the training of health professionals and biomedical researchers. Also, the partnership of Public Health with the other health sciences colleges on the successful TIE proposal entitled "Interdisciplinary Public Health Preparedness Program for Emerging Infectious Disease Threats: From Discovery to Application" further emphasizes the opportunities for collaborations and the importance of college status for Public Health.

I support your proposal to obtain college status for Public Health with my highest enthusiasm, and I look forward to continuing to work with you over the next several years as Dean of the new College of Public Health at The Ohio State University.

Sincerely,



Robert W. Brueggemeier, Ph.D.  
Dean, College of Pharmacy  
Professor, Medicinal Chemistry





ROLLINS  
SCHOOL OF  
PUBLIC  
HEALTH

James W. Curran, MD, MPH  
*Dean and Professor of Epidemiology*

EMORY

July 19, 2006

Stanley Lemeshow, Ph.D  
Dean  
School of Public Health  
Ohio State University  
M-116 Starling-Loving Hall  
320 W. 10<sup>th</sup> Avenue  
Columbus, OH 43210

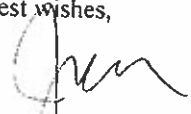
Dear Dean Lemeshow:

I am once again very pleased to write in support of the Ohio State University School of Public Health making the transition to separate college status. Ohio State University holds a special place in our family's memory since my wife obtained a degree there and I served on the adjunct faculty during the mid-1970's shortly after we were married. I have watched with interest and pride as the school has consolidated and grown and obtained accreditation as an independent school.

The Council on Accreditation for Public Health requires independent administrative status for School or Colleges of Public Health. This assures a measure of equality for public health scholars and graduate students and most facilitates the growth in size and stature of the School. In our own case at Emory, the School of Public Health has more than quadrupled in size since our accreditation as an independent school in 1992. It goes without saying that outstanding faculty and students prefer a strong accredited school and an independent College of Public Health will certainly thrive at Ohio State, an outstanding University with so many strengths in science, the arts, and the other health professions.

On a personal level and as Chair of the Association of Schools of Public Health, I am delighted that you have joined our Board of Directors and serve as Chair of our Data Committee. I look forward to continuing to work closely with you.

Best wishes,

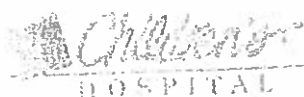
  
James W. Curran, M.D., MPH  
Dean and Professor of Epidemiology

JWC/EC

The Robert W. Woodruff Health Sciences Center  
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Tel 404.727.8720  
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Email [jcurran@sph.emory.edu](mailto:jcurran@sph.emory.edu)

Approved by the Board of Directors of the Association of Schools of Public Health



Antoinette Parisi Eaton, M.D.  
 Director of Government Affairs  
 Professor of Pediatrics (Emerita)  
 The Ohio State University

700 Children's Drive  
 Columbus, Ohio 43205-2496  
 Phone: 614-722-4335  
 Fax: 614-722-2113  
 antoinette@ch.ohio.edu

July 14, 2006

Dean Stanley Lemeshow, Ph.D.  
 The Ohio State University  
 School of Public Health  
 M116 Starling Loving Hall  
 320 W. 10th Avenue  
 Columbus, OH 43210-1240

Dear Dean Lemeshow:

Thank you for sharing a copy of the proposal for the Ohio State University, School of Public Health (SPH) to become a college. As a member of the External Advisory Committee for the School and past Interim Dean of the School, I enthusiastically endorse the proposal and the recommendation included in it.

Based on my past experience in a leadership position in the School of Public Health, I am intimately familiar with the Council on Public Health (CEPH) eligibility requirement for accreditation and the difficulties experienced in the process related to the SPH administrative structure and organizational reporting requirements. College status would remove this significant barrier to CEPH accreditation.

Additionally, College status would improve the visibility of this important University academic program nationally and on campus. The elevated status would also enhance the ability to attract highly qualified public health faculty from a competitive national pool. This is important to implement the long range strategic plan of the SPH as it begins a period of significant growth in size and quality.

In my view it would enable the SPH to continue the strong collaboration with other important programs in the Health Sciences, e.g., College of Medicine, and the joint MPH/M.D. and MHA/M.D. degrees.

In summary I applaud your efforts to achieve College status and do hope that they are successful. If I can be of assistance in any other way, please do not hesitate to contact me.

Sincerely,

Antoinette Parisi Eaton, M.D.  
 Corporate Director  
 Government Affairs

For Every Child. For Every Reason.



425 Stillman Hall  
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Columbus, OH 43210-1123

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[www.mps.ohio-state.edu](http://www.mps.ohio-state.edu)

August 15, 2006

Professor Stanley Lemeshow  
Dean, School of Public Health  
College of Medicine and Public Health  
M-112B Starling Loving  
320 W. 10th Ave  
Columbus, OH 43210

Dear Professor Lemeshow:

I have once again reviewed your document, "Proposal for The Ohio State University School of Public Health to Obtain College Status".

I am pleased to support your proposal, which offers a complete and thoughtful exposition on the reasons for your School to become a College. I am in complete agreement with your reasoning, and your conclusions.

With the successful recruitment of new chairs and the increase in both faculty and graduate students in the School of Public Health, it seems the right time to pursue this change of status. I wish to go on record as fully supporting your proposal, and will bear witness to this support in any official capacity at the University in the future.

Please accept my congratulations on a very well prepared proposal.

Sincerely,

Richard R. Freeman  
Dean and Distinguished Professor of  
Mathematical and Physical Sciences



## Office of The Dean

College of Biological Sciences  
484 West 12th Avenue  
Columbus, OH 43210-1292

Phone (614) 292-8772  
Fax (614) 292-1538

July 13, 2006

Stanley Lemeshow, Dean  
School of Public Health  
M-116 Starling-Loving Hall  
320 W. 10<sup>th</sup> Avenue  
CAMPUS


Dear Dean Lemeshow:

The College of Biological Sciences (CBS) appreciates the opportunity to review the School of Public Health's (Public Health) proposal to gain status as a college. The rationale for this request is reasonable, and the faculty of CBS see no significant or deleterious overlap in programs with our College's existing programs.

Thus, I heartily endorse Public Health's request to become a college. For Public Health to change its status from a school to a college should enhance its ability to attract talented and committed faculty and students.

I look forward to seeing the positive impact this change, if approved, will have on your programs.

Sincerely,



Joan M. Herbers  
Dean



**108**

**College of Nursing**

Dean's Office  
Newton Hall  
1585 Neil Ave  
Columbus, OH 43210-1289

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August 8, 2006

Stanley A. Lemeshow, PhD  
Dean and Professor  
School of Public Health  
The Ohio State University  
M-112B Starling-Loving  
CAMPUS

Dear Dr. Lemeshow:

I am writing in strong support of your proposal to establish a College of Public Health as a separate entity, equivalent in reporting relationship and status to the other colleges in the health sciences cluster. Major steps toward this end were taken when your position was titled dean and the reporting relationship to the provost affirmed, thereby making the School of Public Health equivalent to the other health sciences colleges in all but title. The change to college status seems very well warranted structurally, and would go a long way toward eliminating many of the concerns expressed by the accrediting body.

The School of Public Health is certainly functionally equivalent to the other health sciences colleges, and your role as dean is equivalent to the other dean positions in the cluster. You are a valued colleague in the Council of Deans and the health sciences cluster, and the school is making wonderful progress toward the goals you outlined during your first few months in the dean position. I applaud and support your proposal for college status.

Sincerely,

A handwritten signature in cursive script that reads "Betty Lenz".

Elizabeth R. Lenz, PhD  
Dean and Professor



City of Columbus

Mayor Michael B. Coleman

July 14, 2006

Stanley Lemeshow, Ph.D., Dean  
Ohio State University  
School of Public Health  
M-116 Starling-Loving Hall  
320 West 10<sup>th</sup> Avenue  
Columbus, Ohio 43210

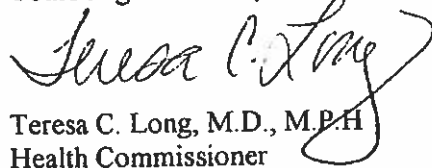
Dear Dr. Lemeshow:

I am writing to express the strong support of the Columbus Public Health for the School of Public Health's proposal to transition to college status within the university. Since the establishment of the School of Public Health several years ago, we have experienced many benefits with regard to our potential and current public health workforce. We have also been pleased to partner with the School on several key public health projects. Achieving college status can only enhance the contributions of the School of Public Health and would appear to be a logical next step in the school's growth and development.

As more people are recognizing the importance of a strong public health system at the local, statewide and national level, it is essential that the public health workforce be well trained and versatile. To the extent that college status will enable you to attract faculty and students of the highest caliber will have direct benefits to our local public health infrastructure. We look forward to continuing to partner with you on placement opportunities for students and other projects that will enhance both of our institutions and the central Ohio region.

Thank you for the opportunity to express my support for the College of Public Health at the Ohio State University and best wishes with your proposal.

Yours in good health,



Teresa C. Long, M.D., M.P.H.  
Health Commissioner

240 Parsons Avenue  
Columbus, Ohio 43215-5331

Teresa C. Long, MD, MPH  
Health Commissioner

## BOARD of HEALTH

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[www.publichealth.columbus.gov](http://www.publichealth.columbus.gov)  
[health@columbus.gov](mailto:health@columbus.gov) (e-mail)

*The City of Columbus is an Equal Opportunity Provider of Services EEO Employer.*



William Meezan, DSW, ACSW  
Dean and Professor  
College of Social Work  
Stiffman Hall  
1947 College Rd.  
Columbus, OH 43210-1162

Phone (614) 292-5300  
Fax (614) 292-6940  
Meezan, W@osu.edu

July 17, 2006

Dr. Stanley Lemeshow, Dean  
School of Public Health  
M-116 Starling-Loving Hall  
320 W. 10<sup>th</sup> Ave.  
CAMPUS

Dear Stan,

I am writing to strongly support the proposed change the status for the School of Public Health to that of a College on the OSU campus. I believe this change is critical for a number of reasons, including:

1. It recognizes that status that public health has as an applied discipline within the academic setting, and brings OSU's program into parity with peer institutions.
2. It will remove tensions around the accreditation of the public health program on this campus. The College of Social Work has a stake in your accreditation status, since we have recently developed and approved the joint MSW/MPH program. An unambiguously accredited program will make this joint degree program more attractive to our students.
3. It will give greater visibility to the public health program at Ohio State and thus improve its reputational rankings, which again is important to our future collaborations in both teaching and research.
4. It recognizes the tremendous strides the School of Public Health has made in the last year in terms of its ability to fulfill its academic mission.

For these and other reasons, you have my full backing in this endeavor. If I can provide any additional information or other help in this matter, please feel free to contact me.

Sincerely,

William (Bill) Meezan, DSW, ACSW  
Dean and Professor



College of Food, Agricultural, and Environmental Sciences

Bobby D. Moser  
VP for Agricultural Administration & Dean  
VP for University Outreach

August 11, 2006

Dr. Stanley Lemeshow, Dean  
Director, Center for Biostatistics  
M116 Starling Loving Hall  
320 West 10<sup>th</sup> Avenue  
CAMPUS

Dear Dr. Lemeshow:

The College of Food, Agricultural, and  
Environmental Sciences supports the  
establishment of a College of Public Health at The  
Ohio State University.

We look forward to continuing to work with you as  
you achieve college status.

Sincerely,

Bobby D. Moser



**Moritz**  
College of Law**112**

August 15, 2006

Stanley Lemeshow, Ph.D.  
Dean, School of Public Health  
Director, Center for Biostatistics  
M116 Starling Loving Hall  
320 West 10th Avenue  
Columbus, OH 43210-1240


Dear Stan,

I write to support the School of Public Health's proposal to change its status to the College of Public Health.

The Ohio State University and the School of Public Health would benefit from college status. Accreditation hurdles would be removed with the granting of college status. Also, the feasibility of college status has grown in recent years. Over the past year or so, the School of Public Health has recruited new chairs for each of their five divisions, and created and filled the position of Associate Dean for Research and Faculty Development. The School also expects to have approximately 45 faculty members this fall, which doubles the number of faculty members from just three years ago. Moreover, college status would provide the School of Public Health with additional prestige and visibility that could be used to recruit new faculty and students. The School of Public Health has also increased its graduate student enrollment by approximately 100 students over the past three years bringing the total number of graduate students to 270. The School of Public Health has also created an undergraduate minor in public health and will begin accepting students this fall.

For these reasons, that I support the School of Public Health's proposal to change its status to the College of Public Health.

Sincerely,



Nancy H. Rogers  
Dean and Michael E. Moritz Chair  
in Alternative Dispute Resolution

**Office of the Dean**

220 Drinko Hall • 55 West 12th Avenue • Columbus, OH 43210-1391  
Phone 614-292-2631 • Fax 614-292-1383



# College of Veterinary Medicine

Office of the Dean  
125/127 Veterinary Medicine Academic Building  
1900 Coffey Road  
Columbus, OH 43210

Phone (614) 292-1171  
Fax (614) 292-7185

July 28, 2006

Dean Stanley Lemeshow  
School of Public Health  
M-116 Starling-Loving Hall  
320 West 10th Avenue  
Columbus, OH 43210-1240

*Stan*  
Dear Stan:

The purpose of this letter is to express my strong support for establishing a College of Public Health at The Ohio State University. The College of Veterinary Medicine has a long history of interaction with the School of Public Health. The advancement of the School to college status is a necessary step that will bring credit to both the University at large and the Colleges of the Health Sciences.

As you know the College of Veterinary Medicine's Department of Veterinary Medicine has very successfully partnered with the School of Public Health to establish an area of veterinary specialization in the School's Master of Public Health Program. This area of specialization is important to the College of Veterinary Medicine and the veterinary profession because it recognizes the vital role that veterinary medicine plays in public health and highlights the interspecies nature of many of the infectious diseases that are of increasing importance in the global arena. I believe that this program is just the beginning of a relationship that will benefit both of our organizations not only in teaching but also in research as we compete together for funding in biodefense and infectious disease.

The College of Veterinary Medicine looks forward to continuing and expanding the relationship we have established with the School of Public Health as it matures into the College of Public Health. Such designation is important for your unit both within the University and externally, among our peers. Please contact me if I can support your effort in additional ways.

Sincerely,

Thomas J. Rosol, DVM, PhD  
Dean  
Ruth Stanton Chair for Veterinary Medicine



August 8, 2006

Dean Stanley Lemeshow  
School of Public Health  
M116 Starling Loving Hall  
320 West 10<sup>th</sup> Avenue  
CAMPUS

Dear Stan:

I am pleased to offer this letter in support of the proposal from the School of Public Health requesting college status. All evidence, with one exception, suggests that you have met the necessary conditions to make this request, and in the case of the exception (i.e., the number of faculty) evidence suggests that you are well within reach of this measure and that your faculty level this coming year is within the range of other colleges at the university.

In addition to the simple rendering of your having met the conditions for the change in status, in my view there are other compelling reasons for you achieving this status as well. Chief among them are the following:

- With the state of Ohio not being a site of one of the current 37 accredited colleges of public health, Ohio State has both an opportunity and an obligation to accept the challenge of providing top tier health sciences research and education in this region.
- Having college status permits the School of Public Health to be more competitive for top faculty and top research dollars, which of course adds to the capacity of the university to advance as a top research one institution.
- Today, more than ever before, there is a critical need for excellence in the health sciences, in light of such clear and present issues as HIV/AIDS and the Avian flu pandemic, as all of us are compelled in quite interdisciplinary fashion to face critical challenges, not only with regard to the health and wholeness of individuals, but also in terms of the general prosperity of communities and nations around the globe.

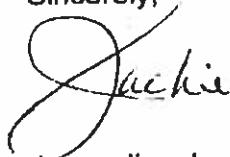
Dean Lemeshow  
August 8, 2006  
Page 2

- Within the university this change brings greater coherence to our offerings in the health sciences and constitutes a stronger springboard for the preparation of students.

With this latter point, as you know, the Colleges of the Arts and Sciences has worked with you in the past to create innovative opportunities in public health fields for our undergraduate students to expand their knowledge and experiences. The International Studies Program is the prime example of our success in this endeavor. As you make this stride to increase visibility and to expand and amplify excellence, we will be pleased to continue looking for other opportunities to cooperate in making sure that our students have the best options available in health sciences research and education.

Again, I am pleased to offer my support of this request, and I look forward to our ongoing work together in accomplishing the university's goals and aspirations.

Sincerely,

A handwritten signature in black ink, appearing to read "Jackie", written over a horizontal line.

Jacqueline Jones Royster  
Executive Dean



Senior Vice President and  
Executive Dean for Health Sciences  
Dean, College of Medicine and Public Health  
CEO, OSU Medical Center  
*Fred Sanfilippo, M.D., Ph.D.*

200 Meiling Hall  
370 West 9th Avenue  
Columbus, OH 43210

Phone: (614) 292-1200  
FAX: (614) 292-1301  
E-mail: fred.sanfilippo@osumc.edu

July 13, 2006

Stanley Lemeshow, PhD  
Dean, School of Public Health  
Starling Loving Hall  
320 West Tenth Avenue  
CAMPUS

RE: College of Public Health

Dear Stan:

I am writing to express my complete and enthusiastic support for the creation of a College of Public Health. This proposal has received the full and unanimous support of the Council of Chairs and the Faculty Council of the College of Medicine. As we have discussed, the movement of the School to College status is an important step forward, and brings Public Health to the same level at OSU as is found with virtually all other accredited schools of public health.

The establishment of a College of Public Health will have important positive implications for your program with respect to access to dedicated research funding opportunities, and in recruitment of high caliber faculty members. These faculty members will be critical to the realization of the potential that you have envisioned for the Public Health program. In addition, these faculty members, and the new research programs that they will establish, will provide excellent collaborative opportunities for faculty members in the College of Medicine, the University, and throughout central Ohio.

I look forward to our continued collaboration.

Sincerely,

Fred Sanfilippo, MD,

FS:sl



## Office of the Dean

College of Optometry  
338 West 10th Avenue  
Columbus, OH 43210-1280

Phone (614) 292-3246  
Fax (614) 292-7492  
[www.optometry.ohio-state.edu](http://www.optometry.ohio-state.edu)

July 17, 2006

Stanley Lemeshow, PhD  
Dean  
School of Public Health  
M-116 Starling-Loving Hall  
320 West 10<sup>th</sup> Avenue  
Columbus, OH 43210-1240

Dear Stan,

I am pleased to write this letter in support of the proposal for the School of Public Health to become a college within the Ohio State University.

As an elected officer and member of the American Public Health Association Executive Board, I am aware that for purposes of accreditation, the Council on Education for Public Health (CEPH) requires that your academic unit "...shall be an integral part of an accredited institution of higher education and shall have the same level of independence and status accorded to professional schools in that institution." Therefore, your unit must have the same degree of autonomy as any other professional college within the University-particularly colleges training students in the health professions-in order to be fully accredited by CEPH.

During my tenure with the University, the School of Public Health has been functioning as an independent academic unit. The level of NIH funding of the School provides an objective and independent measure of its autonomy, and the research capacity of its faculty. I have been impressed with the increasing success of your School's research enterprise. Importantly, those research activities are broad-based and engage a variety of disciplines and professions within the University.

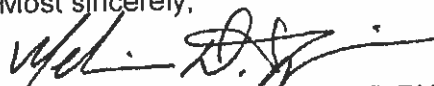
The multidisciplinary composition of the School is an important value-added to the Health Sciences and Medical Center, and the University. You and your colleagues have established key relationships within the University, and partnerships within the community, that are essential for current and future educational, research and service activities. I am particularly delighted with the collaborative research and teaching arrangements that exist between our respective faculty members, and am excited about the prospects of expanding those relationships in the future.

In summary, I enthusiastically support the proposed change in organizational standing of the School of Public Health, and am excited about the opportunities that will flow from

this evolution, not only for you and your faculty, but also, for the University and the community.

I delight in adding my endorsement of the proposal to change to status of the School of Public Health to a college within the University. Best wishes to you and your colleagues for continuing successes.

Most sincerely,

A handwritten signature in black ink, appearing to read 'Mel D. Shipp', with a long horizontal flourish extending to the right.

Melvin D. Shipp, OD, MPH, DrPH  
Dean

July 24, 2006

Stanley Lemeshow, PhD  
Dean  
Ohio State University  
School of Public Health  
M-116 Starling-Loving Hall,  
320 West 10th Avenue  
Columbus, OH 43210-1240

Dear Dean Lemeshow,

I write in strong support of the proposal for the Ohio State School of Public Health to transition to college status within the university. This is an essential step for the school if it is to maximize its full potential in teaching, research and service. I believe the university, the local community, the state and the nation will benefit enormously.

Public health is increasingly recognized as a field of critical national importance. Independent colleges of public health have become major assets to universities as opportunities have increased. Colleges of public health are intensely multidisciplinary. They are collaborative by necessity and nature. They leverage expertise in other colleges of the university and they partner closely with the community. Their faculty contributes substantially to research productivity. In fact, public health faculty often has the highest amount of extramural peer reviewed research per faculty member of any college in the university. The college of public health will contribute significantly to Ohio State's strategic vision of becoming a top public university. College status and the independence it brings is a critical step in achieving excellence.

Achieving college status is necessary for the college to attract the best faculty and students. It is a requirement for accreditation and an indicator of the quality of an institution. It will enable the faculty to access new federal resources. It will underscore the commitment of the university to improving the health of the people of Ohio and of the nation. It is a necessary platform for growth and sustainability.

It is not enough to change the structure and administrative framework without changing the name. I have visited Ohio State 3 times. I believe both internal and external constituencies of Ohio State understand what a college is within the university. Schools are understood as completely different. The final step of changing the name is critical to its success. The change will underscore the university's commitment and allow the new college to take its appropriate place within the university.

On behalf of the Association of Schools of Public Health, I write in strong support of your transition to college status. Please let me know if I can provide further information.

Sincerely,



Harrison C. Spencer, MD, MPH  
President & CEO

# ASPH

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Stanley Lemeshow, Ph.D.  
Dean, School of Public Health  
M-116 Starling-Loving Hall  
320 West 10th Avenue  
Columbus OH 43210

Dear Stan,

I strongly support the proposal of the School of Public Health to move to college status. Having personally been through the accreditation process for the School during my years as Interim Dean (1999-2002), I know how adamantly the Council on Education for Public Health (CEPH) views the issue of independence. On two occasions, now, CEPH has grudgingly agreed to the University's arrangement for the School and its reporting line. As you have so clearly pointed out in the proposal, this will probably not be tolerated for much longer. The stakes are too high for the School, the University and the State of Ohio not to eliminate the ambiguity, either real or perceived. The only real way to do this is the creation of the College of Public Health. To lose accreditation would be a serious blow to all concerned.

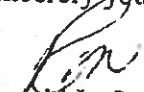
The Ohio State University is one of a relative few of the thirty-eight (38) accredited schools of public health to have the degree of comprehensiveness, on a single campus, to accomplish, with great efficiency, the role of public health in today's complex and dangerous world. We have the ability to mobilize many disciplines, from agriculture, to medicine and the health sciences, to the social sciences and law in order to meet the mission of public health, "... to fulfill society's interest in assuring conditions in which people can be healthy." (Institute of Medicine, 1988).

Allowing the move to college status will ensure that we will remain an accredited School will allow the continued successful recruitment of outstanding faculty. Failure to do so will sure cause some potential faculty to not sign on if they cannot be assured of the continuing accredited.

Stan, the School is off to an excellent start; you and the faculty have positioned it for success. The University has seen the importance of public health and provided needed resources. OSU can continue to be a model for the important, and essential, cooperation between public health and medicine. The acquisition of college status, and its associated independence, will ensure the continued growth and importance of Public Health at OSU, in the State of Ohio and the Nation.

Again, Stan, I stand solidly in favor of this proposal and am willing to do what ever I can to bring it to fruition. All the best to you and the faculty in this effort.

Sincerely yours,

  
Ronald L. St. Pierre, Ph.D.  
Special Assistant to the President  
Capital University