



# APHEA

Agency for Public Health  
Education Accreditation

SITE VISIT REPORT FOR THE  
INSTITUTIONAL ACCREDITATION

REVIEW OF

Indiana University Richard M. Fairbanks  
School of Public Health,  
Indianapolis, Indiana, United States

EXECUTIVE SUMMARY

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AGENCY FOR PUBLIC HEALTH EDUCATION ACCREDITATION  
SITE VISIT DATES: 12<sup>th</sup> November to 14<sup>th</sup> November 2019

SITE VISIT TEAM:  
Professor Ramune Kalediene (Chair)  
Professor Sian Griffiths  
Professor Steven Jones  
Dr Julien Goodman, Director APHEA

## **Executive Summary**

The review team (hereafter called the team) would like to express their gratitude for the hospitality and candour of all members interviewed from the Indiana University Richard M. Fairbanks School of Public Health (hereafter called the school) and the overall quality of the school. All the meetings were conducted in an open, congenial and collegial manner which was appreciated by the review team.

### **Criterion I: Governance and Organisation of the Institution**

The team recognised that there are issues with public health and the health of populations within Indiana. As a consequence, the school was felt to have a critical role in addressing the health challenges within the state.

The school contains a range of dynamic committees and the team was impressed by the continued involvement and engagement of alumni and stakeholders who were keen to support the school and its activities. Stakeholders had mentioned to the team that they would value a network or committee to investigate ways in which to continue and further efforts already made in increasing the preparedness and opportunities of graduates as well as the profile of the school.

The team remained slightly confused about the advantage of having two schools of public health under the Indiana University umbrella which started on the same day and appeared to compete with each other despite the articulated differences in skills and approach. However, the team was aware that such a situation was a University decision which allowed for the existence of the Fairbanks school. The team would recommend continued reflection of how to ensure greater coherence and observable collaboration between the two schools to create a critical mass of public health professionals in the state. An additional recommendation would be to encourage the school look to continue to develop, define and refine their USPs (Unique Selling Points) / value propositions to help distinguish it and raise its visibility both locally and globally.

The faculty of the school evidently recognised the need for a collective refocus on upstream public health issues and the team would encourage the school to strategically plan and implement this refocus.

## **Criterion II: Aims and Objectives of the Public Health Institution and its programmes**

The team noted that the school is heavily focused on the practical skills and future career development of their graduates which underpins their approach to contribute to society. However, care should be taken to continue to ensure that the focus on practice is not to the detriment of academic standards and research.

An observable strength of the school is its commitment to community practice and outreach through the excellent and active engagement of local stakeholders. The continuation of this engagement is crucial to enforce the school's student preparedness and future employment. Stakeholders and alumni had also mentioned during the meetings that they wished to see a higher profile for the school in policy development within the state and translation of evidence into practice. Obtaining a greater profile was a recurrent theme within many meetings conducted and the team would recommend, as one course, to look to leverage stakeholder and alumni enthusiasm to raise the external profile of the school as these groups were seen as part of the solution.

It was well recognised by the team that the school played a key role in developing the overall global agenda of the university through the development of the school's impressive global activity, collaboration and networking and would urge the school to ensure that their global leadership is reinforced and promoted campus wide.

## **Criterion III: Programmes**

The school's exposure to the community and inclusion of external practice-based speakers was well valued by everybody at the school including the speakers. There were evidently great opportunities provided to the students for community and global experience which was deemed by the team to be excellent. It was very clear from talks with the wider university that the school was a global leader within the university and this was seen as a substantial selling point of the school, reflected in the wide range of students choosing public health as a minor degree. With regard to international experience, there were questions raised about how the school might facilitate extending opportunities for international travel by identifying additional financial support to increase broader student access and opportunity. As part of this, the school may wish to strengthen its international

programmatic links through areas such as joint degrees and accreditation of student time spent abroad.

The team recognised the strength of the new integrated MPH core courses and how the school had recently reformatted the curriculum to fit in with recent changes to CEPH (Council on Education for Public Health) competency changes. From discussions with students it was clear that this is still ongoing work and the team would recommend that the school continues to pursue their present quality improvements in this area. In particular, the team was concerned that the depth of instruction in biostatistics, quantitative and qualitative methods has been detrimentally impacted by the changes made in response to CEPH.

The examples provided of interdisciplinary education were exemplary and the school is encouraged to continue to review the ways in which the culture of practice by teachers, medical staff, students, health community might be facilitated.

The new BS in Health Data Sciences programme was thought to be a great idea, reflective of need and quite unique in the states. It was recognised that at a University level there are continuing issues but the team would encourage the school to continue to develop the course and find ways of increasing visibility and attracting students.

Engagement with local health departments was found to be outstanding with departments highly engaged and positive about giving training opportunities with the school. This has been earned through a focus on delivering better health for the community. However, the team does recognise that the school is situated in a state with unenviable health indicators having declined from rank 26<sup>th</sup> in the early 90's to 41<sup>st</sup> presently and where current public health funding is ranked at 48<sup>th</sup> out of 50 states. As a consequence, it was found untenable that the Indiana State Department of Health should limit access to health data that the school could use to improve health. This is as opposed to county level at which data is readily accessible for research and projects. The school may wish to explore further how they can acquire the data which would not only develop skills in its students but also help with formulating policies and practice to improve public health and state level upstream health determinants.

The Gen-ed courses available to a wide range of students across the university were found impressive and were seen to be providing an opportunity to engage more students and promote the interest in further professional development. The courses should look to be exploited further to raise the profile of the school across the campus and university.

#### **Criterion IV: Students and Graduates**

The school has a commendably high percentage of first generation students which is clearly a selling point of the school and which could be developed further. Reflecting on the excellent peer support systems that are available, the team felt that the school may wish to continue and develop these systems particularly for first generation students as these were found to be highly impactful and appreciated by the participating students.

Recognising that public health is often not a degree option of first choice to potential undergraduates, the team appreciated the strength of the school's approach of "career options you discover" and attempts to create a pathway to the development of nuanced careers. This was seen a selling point the school might consider developing further and marketing.

The team noted the excellent engagement of alumni and stakeholders in supporting the school and providing the employment opportunities for internships and graduates. As such, the school is encouraged to continue development and include considering inter-stakeholder networking whereby different stakeholders could come together to explore and exchange the differing ways in which stakeholders provide opportunities. For example, the "Lilly Breakfast" which offers a chance for graduates to meet informally with industry, might be replicated with other major employers.

#### **Criterion V: Human Resources and Staffing**

The team commended the faculty which is evidently multi-disciplinary and interdisciplinary and seen to work across the campus utilising the strengths of the bio medical links. The school is clearly a campus leader for global outreach which should be marketed further throughout the University.

Commendable community practices were noted in regard with specific attention to the Extension for Community Health Outcomes (ECHO) leadership and the office for

community engagement is commendable and provide an exemplary example of School's engagement and impact positively on local health and service provision.

The University's Center for Teaching and Learning (CTL) clearly provided a substantial resource for both faculty and PhD students and is also available free of charge to adjunct faculty. The stakeholders from Lilly and Marion County Public Health Department clearly felt that it would be helpful to receive critical feedback about their guest lecturers and adjuncts which they could use to demonstrate to their employers how valuable their input is.

### **Criterion VI: Supportive Services, Budgeting and Facilities**

The school sits within the campus of IUPUI and has access to all of the facilities. The library was found to be well resourced and there was universal praise for the Public Health Librarian (Rachel Hinrichs) and her services and support for faculty and students. The Campus wide support for disability appeared adequate and the Counselling and Mental Health Services (CAPS) is universally accessible. The need for recognition of mental health issues was understood and the school is encouraged to take forward discussions about the availability of mental health first aid (MHFA) and LGBTQ+ safe spaces as this provides an opportunity to become a leader across the campus.

The team noted that the Department of Biostatistics is separated and on another part of the campus. In addition, there was a lack of communal space for staff and for students in which to interact. The team suggests this might be reviewed as sharing communal space is known to be beneficial and would increase cohesion within the school. In this regard the school may also wish to review the design of the office and school to enhance informal collaboration.

IUPUI was noted as being a commuter-based campus and an increased provision of housing might help increase student diversity particularly from rural areas and international students.

### **Criterion VII: Internal Quality Management**

Once again, the quality of the school's engagement with stakeholders is highly commendable. There were concerns about the University's embargo on students without a declared major on entering the Health Data Sciences program. The team recognised that

this was a University issue rather than the school's. However, this does raise issues as to how much the University supports the school and gives it the value it deserves compared to the support provided to other programs. The team also recognised the challenges in achieving and adopting CEPH (Council on Education for Public Health) competences and would suggest the school provide critical feedback to CEPH about the experiences of the staff and the students on the adoption of new frameworks and their appropriateness.

## Summary of Conclusions

<b>Criterion I: Governance and Organisation of the Institution</b>	
Sub – Criterion 1.1	Met
Sub – Criterion 1.2	Met
Sub – Criterion 1.3	Met
Sub – Criterion 1.4	Met
<b>Criterion II: Aims and Objectives of the Public Health Institution and its programmes.</b>	
Sub – Criterion 2.1	Met
Sub – Criterion 2.2	Met
Sub – Criterion 2.3	Met
Sub – Criterion 2.4	Met
<b>Criterion III: Programmes</b>	
Sub – Criterion 3.1	Met
Sub – Criterion 3.2	Met with comments
Sub – Criterion 3.3	Met
Sub – Criterion 3.4	Met
Sub – Criterion 3.5	Met
Sub – Criterion 3.6	Met
Sub – Criterion 3.7	Met
<b>Criterion IV: Students and Graduates</b>	
Sub – Criterion 4.1	Met
Sub – Criterion 4.2	Met
Sub – Criterion 4.3	Met with comments
Sub – Criterion 4.4	Met with comments
Sub – Criterion 4.5	Met
Sub – Criterion 4.6	Met

<b>Criterion V: Human Resources and Staffing</b>	
Sub – Criterion 5.1	Met
Sub – Criterion 5.2	Met
Sub – Criterion 5.3	Met
Sub – Criterion 5.4	Met
Sub – Criterion 5.5	Met
Sub – Criterion 5.6	Met
Sub – Criterion 5.7	Met
Sub – Criterion 5.8	Met
<b>Criterion VI: Supportive Services, Budgeting and Facilities</b>	
Sub – Criterion 6.1	Met
Sub – Criterion 6.2	Met
Sub – Criterion 6.3	Met with comments
Sub – Criterion 6.4	Met
Sub – Criterion 6.5	Met
<b>Criterion VII: Internal Quality Management</b>	
Sub – Criterion 7.1	Met
Sub – Criterion 7.2	Met
Sub – Criterion 7.3	Met
Sub – Criterion 7.4	Met