

REVIEW FOR ACCREDITATION
OF THE
COLLEGE OF PUBLIC HEALTH
AT THE
UNIVERSITY OF IOWA

SITE VISIT DATES:
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Table of Contents

Introduction	1
Characteristics of a School of Public Health	2
1.0 THE SCHOOL OF PUBLIC HEALTH	3
1.1 Mission	3
1.2 Evaluation and Planning.....	4
1.3 Institutional Environment	7
1.4 Organization and Administration	9
1.5 Governance	12
1.6 Resources	13
2.0 INSTRUCTIONAL PROGRAMS.....	17
2.1 Master of Public Health Degree	17
2.2 Program Length.....	19
2.3 Public Health Core Knowledge.....	19
2.4 Practical Skills	20
2.5 Culminating Experience	22
2.6 Required Competencies.....	22
2.7 Assessment Procedures	25
2.8 Other Professional Degrees.....	26
2.9 Academic Degrees	26
2.10 Doctoral Degrees.....	27
2.11 Joint Degrees	28
2.12 Distance Education or Executive Degree Programs.....	29
3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.....	30
3.1 Research	30
3.2 Service.....	31
3.3 Workforce Development.....	33
4.0 FACULTY, STAFF AND STUDENTS	35
4.1 Faculty Qualifications	35
4.2 Faculty Policies and Procedures	36
4.3 Faculty and Staff Diversity.....	37
4.4 Student Recruitment and Admissions	38
4.5 Student Diversity	40
4.6 Advising and Career Counseling.....	41
Agenda.....	43

Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the College of Public Health (CPH) at the University of Iowa (UI). The report assesses the college's compliance with the *Accreditation Criteria for Schools of Public Health, amended June 2005*. This accreditation review included the conduct of a self-study process by college constituents, the preparation of a document describing the college and its features in relation to the criteria for accreditation, and a visit in October 2010 by a team of external peer reviewers. During the visit, the team had an opportunity to interview college and university officials, administrators, teaching faculty, students, alumni and community representatives, and to verify information in the self-study document by reviewing materials provided on site in a resource file. The team was afforded full cooperation in its efforts to assess the college and verify the self-study document.

Established in 1847, UI is a major research university located on a 1,900-acre campus in Iowa City in southeast Iowa. Of the more than 30,000 students who enroll each year, some 58% come from Iowa, 25% from adjoining states and 9% from other parts of the United States. International students from 104 countries make up 8% of the university's enrollment. The university is supported by about 1,700 faculty and 13,000 staff.

The CPH was formed in 1999 as a result of UI's Public Health Initiative. It was the first new college established by the university in over 50 years. Since its establishment, the college has grown from 41 faculty in 2000 to 73 faculty in 2009. Student enrollment has increased from 162 to 379 graduate students from 1999 to 2009. The college has 27 centers and major research/service programs, the majority of which provide extensive community engagement activities both within and beyond Iowa. The college's commitment to interdisciplinary collaboration is seen in its educational and research partnerships with all UI colleges and other institutions.

The UI College of Public Health was last accredited in October 2003 for a term of seven years. During the 2003 review, all criteria were found to be met or met with commentary and no interim reporting was required.

Characteristics of a School of Public Health

To be considered eligible for accreditation review by CEPH, a school of public health shall demonstrate the following characteristics:

- a. The school shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education.**
- b. The school and its faculty shall have the same rights, privileges and status as other professional schools that are components of its parent institution.**
- c. The school shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research, and service. Using an ecological perspective, the school of public health should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem-solving, and fosters the development of professional public health concepts and values.**
- d. The school of public health shall maintain an organizational culture that embraces the vision, goals and values common to public health. The school shall maintain this organizational culture through leadership, institutional rewards, and dedication of resources in order to infuse public health values and goals into all aspects of the school's activities.**
- e. The school shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. As a minimum, the school shall offer the Master of Public Health (MPH) degree in each of the five areas of knowledge basic to public health and a doctoral degree in at least three of the five specified areas of public health knowledge.**
- f. The school shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.**

These characteristics are evident in the UI CPH. The college is located within an institution that is regionally accredited by the North Central Association of Colleges and Schools, and the college and its dean have rights, privileges and status equivalent to other UI professional schools and colleges. The CPH dean, like the deans of business, medicine and law, reports to the executive vice president and provost, who reports to the university president.

The college serves as a health promotion, disease and injury prevention policy and evaluation resource locally, nationally and internationally. Policy development activities are frequently undertaken in collaboration with state agencies, local and state public health organizations, federal agencies, international organizations and professional societies. Consistent with its mission to serve as a public health resource, the college seeks to implement the values of community, integrity, learning, quality, responsibility and social justice in ways that enhance the health and well-being of populations.

Currently, 73 primary faculty and 22 adjunct and secondary faculty (university and community-based individuals) contribute to teaching in the college and advise 291 FTE students for a student-faculty ratio (SFR) of 4.06 in various degree programs including MPH, MHA, MS and PhD.

1.0 THE SCHOOL OF PUBLIC HEALTH.

1.1 Mission.

The school shall have a clearly formulated and publicly stated mission with supporting goals and objectives. The school shall foster the development of professional public health values, concepts and ethical practice.

This criterion is met. The college has a clear, concise mission that is inclusive of engagement in education, training and research. The mission, accompanied by a vision statement and six broad themes, can be easily accessed from the college's public website. The mission describes what the college aims to accomplish through its programs and the themes give the college's activities a focus on service to the state of Iowa.

The college's mission is as follows: To promote health and prevent injury and illness through commitment to education and training, excellence in research, innovation in policy development, and devotion to public health practice.

The college's vision and themes are as follows: To serve Iowa and the Midwest as one of the nation's premier state-assisted schools of public health and lead the global community in rural public health education and training, research, and practice.

Through its educational and research programs, public service, and creative partnerships with others, the college will strive to attain this vision by focusing efforts on certain broad themes, including:

1. Protecting Iowa's families, farms, and businesses against threats to health and safety.
2. Improving Iowa's environment and quality of life for its citizens, with special emphasis on children, the elderly, and other vulnerable populations.
3. Helping Iowa families and communities in making healthy choices about diet, exercise, alcohol, tobacco, and other drugs.
4. Focusing attention on Iowa's mental health services and on the state's aging population, with special emphasis on assessment, access, and policy development.
5. Fostering superior, cost-effective health care services.
6. Promoting excellence in education and research in public health and associated disciplines.

The CPH Executive Committee develops a strategic plan every five years, with input from the college's Board of Advisors as well as faculty, staff, students, alumni and other external constituents. The 2005-2010 strategic plan, which formed the basis of the CEPH accreditation self-study, includes eight five-year goals. Each goal is accompanied by one to four objectives, and each objective includes one or more short- and long-term outcome indicators, many of which are measurable and include target levels. In

addition, these goals have been mapped to goals presented in the University of Iowa's 2005-2010 strategic plan, which is accessible on the university's website.

The goals are appropriate for this relatively young college that is continuing to grow. They originate from elements stated in the mission and vision. The goals address education and training; research; service; diversity among faculty, students and staff; enhancing the work environment through improved communication and assessment; and advancing the overall growth of the college. The objectives and associated outcome measures are well developed. The outcome measures are generally measurable with quantitative values that can be tracked and compared to targets. Examples of outcome measures include 1) identify funding for 90% of PhD students, 2) maintain a 100% job placement rate for graduates within one year of graduation, 3) increase the number of faculty to 85 by 2015, 4) achieve an average of at least 50% salary offset by grants and 5) increase the proportion of minority-tenured and tenure-track faculty to 16% by 2010.

The college recently completed its 2011-2016 strategic plan. Seven workgroups made up of faculty, staff and students conducted SWOT (strengths, weaknesses, opportunities and threats) analyses and developed a core set of strategic and aspirational goals. An annual timeline has been established to assess progress in implementing the plans, goals and objectives. Notices about the strategic plan are published in the CPH News Digest, a weekly electronic summary of news produced or collected by the CPH Office of Communications and External Relations. The strategic plan, the 2011 work plan and the timeline for review and reporting on progress for the strategic plan are available on the college's website. Each year, a progress report is completed and assessed by the CPH Executive Committee and shared with the board of advisors and the faculty, students and staff during the annual State of the College address in the fall. The mission and vision were reviewed and reaffirmed in 2009. In meetings with faculty and students, it was clear to site visitors that the development of the CPH strategic plan and the ongoing monitoring of progress includes widespread involvement.

The college is guided by six core values that can be accessed on the college's website. Five of these (ie, community, integrity, learning, quality and responsibility) are the same as those identified by the University of Iowa. The sixth core value, social justice, was added by the college and reflects the college's special focus on diversity and service to underserved populations.

1.2 Evaluation and Planning.

The school shall have an explicit process for evaluating and monitoring its overall efforts against its mission, goals and objectives; for assessing the school's effectiveness in serving its various constituencies; and for planning to achieve its mission in the future.

This criterion is met. The college has in place a number of planning processes and evaluation procedures accompanied by outcome measures that allow it to assess its education, training, research

and service activities. The college undertakes periodic strategic planning and, in addition to its self-evaluation every seven years for accreditation, conducts evaluations requested by the provost's office. The college also conducts various surveys, and all of these efforts contribute to the planning and evaluation of its programs.

The Office of the Provost reviews the college every seven years. The review has two components: a college self-study and a peer review by off-campus reviewers and university faculty outside the college. The college's five academic departments are reviewed every seven years on a rotating basis. The structure is similar to the collegiate review: each department prepares a self-study and is then reviewed by faculty outside the department and by peers outside the university. Department chairs and the dean undergo review at five-year intervals. These reviews are not conducted concomitantly with the college and department reviews.

The collegiate and departmental review reports and recommendations are shared with faculty, staff and students and the Board of Regents. The college and departments are asked to incorporate the recommendations into their five-year strategic plans.

Chair reviews are conducted by the dean's office with input from an internal and external review committee, and review of the dean is conducted by the provost's office with input from faculty, staff, students, the university community and public health practitioners. In addition, the university can initiate periodic evaluations. In 2010, all graduate programs were reviewed on the basis of a variety of student indicators (eg, number and quality of applicants and enrollments, GRE scores, GPA, etc.). The review was based on a self-assessment from each program. The programs in the CPH fared well in this process. Standard measures are also in place for review of faculty, staff and students.

The college administers and uses data from several surveys in its planning and evaluation process. A workplace survey called "Working at Iowa" was administered by the university in 2006 and 2008 to collect faculty and staff feedback about their work environment; this survey will continue at three-year intervals. A biannual college survey of the faculty was first administered in May 2010 to assess workplace satisfaction in several areas including workload, involvement in strategic planning, administrative support, collegiality, faculty mentoring and facilities. In addition, the CPH Diversity Committee administered a survey to gauge the current climate of inclusion in the college. The faculty survey pointed to concerns related to faculty mentoring and the value of teaching in the promotion and tenure process. During the site visit it was apparent that there was awareness of these concerns and ongoing discussions about how to address them.

The college has mechanisms in place for using the results from its evaluation processes to enhance the quality of its programs. At the end of each year, the college surveys all new graduates to determine their satisfaction with the program along with their current employment status. Initial response rates were low, but the response rate has increased to 67% since implementation of a change that has the surveys originating from the graduate's departmental academic program coordinator. MPH and MHA program graduates are surveyed again within the first year of graduation. The college also obtains feedback from employers regarding the competencies they look for in graduates. The college conducted a survey of alumni in spring 2010 and plans to continue this effort every three years. The alumni and employer surveys identified areas of strength (eg, strong knowledge base, professionalism, strong analytical skills) and areas for improvement (eg, oral and written communication skills, grant writing, statistical software training). The Executive Committee reviews all evaluations and there is evidence that the results are incorporated into the strategic plan and addressed as needed.

Progress on implementing and meeting goals and objectives and the targeted outcome measures of the strategic plan are tracked by annual progress reports. The Executive Committee, faculty, staff, students, the Board of Advisors and the provost review the reports. The reports are also posted on the school's website and discussed in various settings including the fall meeting of the board of advisors and the annual State of the College forum. Site visitors confirmed that objectives are regularly reviewed and addressed. For example, the leadership of the college recently identified the need to redesign the college's Diversity Committee's charge to focus not only on recruitment but also retention.

In the university's 2006 collegiate review, the college was asked to assess its curriculum support for the tracks and degrees. As a result, the MPH Steering Committee periodically reviews the MPH tracks for enrollment and faculty resources, and the Department of Health Management and Policy identified the need to strengthen the methodological training of its students. Review of the Department of Biostatistics led to updates and streamlining of its curriculum to facilitate a more timely completion of the PhD degree.

The college has measurable outcome indicators that are used to monitor its effectiveness in meeting its mission, goals and objectives. The outcome measure targets were identified using benchmark data from other schools of public health as well as the goals outlined in the University of Iowa strategic plan. The outcome indicators that are tracked longitudinally are reviewed annually by the CPH Executive Committee.

The self-study provides an informative, comprehensive, yet relatively concise, picture of the college. It provides information that allows for quantitative and qualitative assessment of the college and the extent to which it achieves its mission, goals and objectives and meets the accreditation criteria.

The college prepared an informative self-study through a process that was inclusive of faculty, staff, students and external stakeholders. Preparation of the self-study began in October 2009 with the announcement of the timeline. A plan for organizing work groups was discussed at the college forum that fall. All faculty, staff and students are invited to the forums. Four working groups were formed, each assigned to a criterion. Each group included members of the administration, faculty, department chairs and students as appropriate to the issues encompassed by the criterion. As the self-study developed, it was discussed in college forums and with the board of advisors. During the site visit it was clear that faculty and students were actively involved in the development of the self-study and that the college actively sought input from alumni and professionals in the region.

1.3 Institutional Environment.

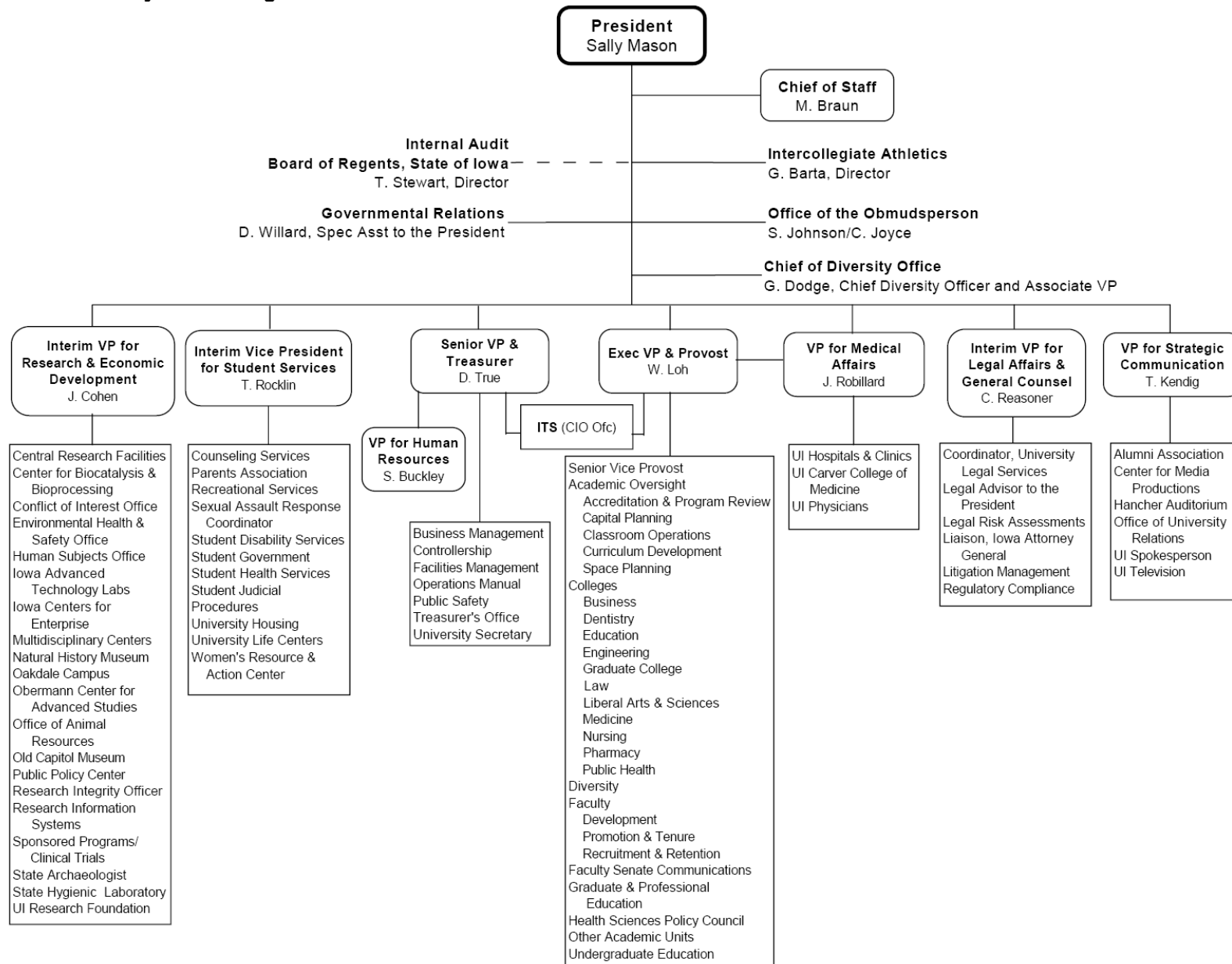
The school shall be an integral part of an accredited institution of higher education and shall have the same level of independence and status accorded to professional schools in that institution.

This criterion is met. The University of Iowa was founded in 1847 and is a comprehensive university involved in undergraduate, graduate and professional education. It is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools. Its last review for accreditation was in 2003 and it was fully accredited for seven years. The university has developed a national and international reputation in scholarship and research. The University of Iowa is guided by seven interdependent commitments: excellence, learning, community, diversity, integrity, respect and responsibility.

The UI CPH is one of 11 equal colleges, five of which are deemed health science colleges (public health, nursing, medicine, pharmacy, and dentistry). The CPH has the same level of independence, authority and status as the other professional schools at the university. The deans of the 11 colleges report directly to the executive vice president and provost, who is responsible for overseeing the university's academic programs, faculty matters, student academic affairs and strategic academic planning. The provost has leadership responsibilities for the Deans' Council (all collegiate deans are members) and for the Health Sciences Policy Council (the five health science deans are members). Figure 1 presents the university's organization.

It is clear that the dean of the college has a direct line of access to the provost as the chief academic officer who, in turn, has direct line access to the university president. This reporting line is equivalent to all other colleges at UI. The process of naming programs, developing new academic majors and degree programs and other related policy decisions follow a structured set of guidelines that are typical of comprehensive state universities. The procedures for recruitment and hiring of new faculty members place a heavy emphasis on actions taken within the college.

Figure 1. University of Iowa Organizational Structure



1.4 Organization and Administration.

The school shall provide an organizational setting conducive to teaching and learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration. The organizational structure shall effectively support the work of the school's constituents.

This criterion is met. The dean has overall responsibility for research, academic affairs, education, service, external relations, alumni communications, fundraising, strategic planning and fiscal management for the college. The college has an array of associate deans for education and student affairs, public health practice, research and academic affairs and the MPH and undergraduate programs. The self-study clearly describes duties of each member of the college leadership team. Coordination of programs and activities between the dean and the various associate deans and directors is accomplished through meetings of the Administrative and Executive Committees. Faculty governance and student input is provided by the Faculty Council and the student association. The directors of the college's three centers report directly to the dean. Figure 2 presents the college's organization.

The college's academic departments cover the core areas of public health. The academic departments have a fair amount of independence in the areas of academic programs, recruitment of faculty, staff and students, departmental budget preparation and administration and departmental strategic planning. The department chairs also have a fair amount of flexibility with respect to support of their own departmental centers, which are primarily funded by external grants. Department heads sit on the CPH Executive Committee, which serves as the collegiate leadership team.

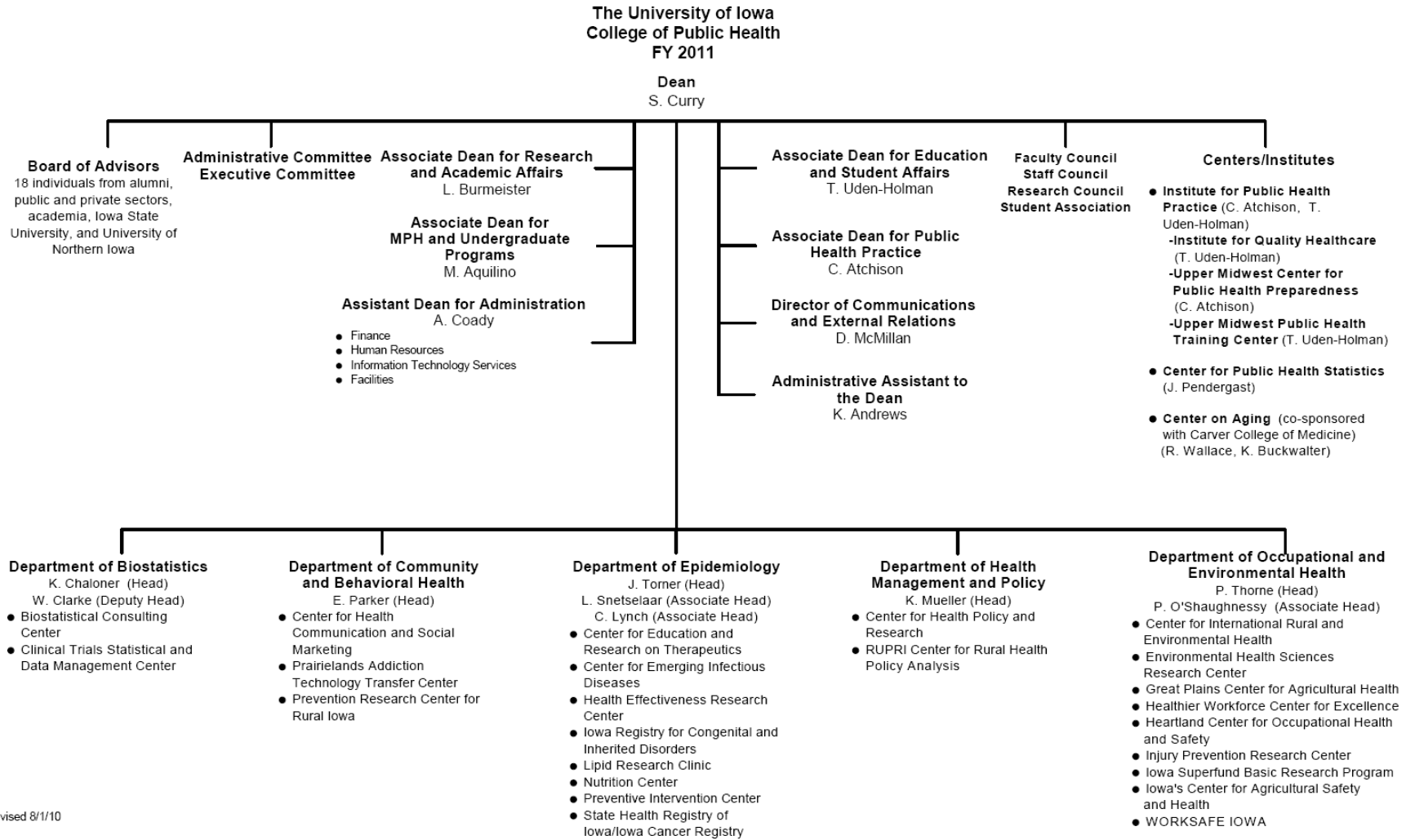
The organizational structure of the college appears to be conducive to effective administration of the college and leaves it well positioned to encourage and foster interdisciplinary teaching and research. One approach to encouraging interdisciplinary programs is the college's development of joint degree programs coupling the MPH degree with professional degrees in law, medicine, nursing and pharmacy, and joint MHA degree programs with the UI Colleges of Business, Law and the Department of Urban and Regional Planning. A combined MPH/DVM degree program with the Iowa State University College of Veterinary Medicine and participation in the Interdisciplinary Program in Human Toxicology are other examples of interdisciplinary activities. Faculty members from the college and the other professional schools often team teach a number of courses in the combined degree programs. In addition to playing a leadership role in college-originated grants, faculty members also serve as co-investigators and co-authors on grant applications and manuscripts involving principal investigators and first authors with affiliations outside the college.

The joint degree programs are slightly negative with regard to revenues but have the advantage of attracting high-quality students with clear career paths. The administration and faculty of the college view the benefits from these joint programs as far outweighing the slight impact on college revenues.

The college is committed to fair and ethical dealings and follows the policies set by the Board of Regents, State of Iowa and the University of Iowa. Written university policies in the areas of human resources, academics, research and finance are outlined in the UI Operations Manual Part II and are supplemented by collegiate policies found in the CPH Faculty Handbook and Manual of Procedure.

Students are fully informed of their grievance rights under university and college policies. Grievances that cannot be resolved at the department or college level are referred to the university following the procedures for filing a formal grievance outlined in the UI Operations Manual Part II-29. The number of grievances and complaints filed are reported by the university as a whole, and are not identified by college, thus making it difficult for the site visit team to come to any firm conclusions regarding the extent and nature of grievances over time within the college. However, students appear to be knowledgeable regarding who in the college they can go to with a grievance or a concern about harassment. The majority of student concerns are handled at the department or college level.

Figure 2. University of Iowa College of Public Health Organizational Structure



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1.5 Governance.

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

This criterion is met. The college has a well-designed governance structure with clear delineation of the chain of command. This structure includes standard administrative departments and both standing and ad hoc committees. The Faculty Council routinely evaluates college issues and makes recommendations to the dean and Executive Committee. The college's Promotion and Tenure (P&T) Committee is a subcommittee of the Faculty Council. A Research Council reviews issues concerning research activity in the college. Representation by faculty and staff is adequate among the college's committee structure. Procedures within the college and the university are easily accessible, with the UI Operations Manual, UI Graduate College Manual and CPH Faculty Handbook and Manual of Procedures all available online. In addition, students are actively encouraged to participate in college governance. Students hold seats on appropriate faculty committees, chosen through recommendations and word of mouth (ie, no formal election process). Students also participate in a broader manner through membership in student organizations.

The college's budget is determined annually by the provost in consultation with the dean and others. Department heads and administrative faculty participate in budget planning within the college. Resource priorities are determined by the dean with substantial input from the college's Executive Committee as well as appropriate faculty, staff and students. The dean hosts an open forum with faculty, staff and students to gain their feedback on resource priorities. Students and faculty at all ranks indicated that they were satisfied with their level of representation regarding college governance. Clearly, there is substantial input from a variety of sources within the college pertaining to strategic resource allocation.

Faculty are represented extensively on university-level committees. The dean serves on the Council of Deans and Health Sciences Policy Council. Three faculty members from the college serve on the university's Faculty Senate, with representation by the college faculty on the university councils for graduate education and for research.

The college's Curriculum Committee works with departments and other program units to help develop and implement curricular policies. The MPH Steering Committee serves as the oversight committee of the MPH. Committees are well coordinated to provide a consistent structure for establishing, monitoring and enhancing educational programs in the college.

1.6 Resources.

The school shall have resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

This criterion is met. The self-study presents a clear picture of all sources of revenue and expenditures from fiscal year 2003 to fiscal year 2010. Modifications in budget allocations or expenditures over time are discussed in detail. Seventy-three percent of the fiscal year 2010 budget of \$57,738,300 is derived from grants and contracts and indirect cost recovery (\$42,010,416); 22% from tuition and fees, state appropriations and unrestricted revenue; and 5% from other sources. Faculty members are expected to offset at least 50% of their salary and have created offsets ranging from 50.6% to 56.1% from 2003 to 2010. College faculty reported that other units within the health sciences group receive a higher level of faculty support. Table 1 presents financial data from fiscal year 2003 through 2010.

The college clearly exceeds the CEPH-required head count for full-time faculty in each of the five core public health areas, ranging from 10 in Community and Behavioral Health to 18 in Occupational and Environmental Health. The head count in each department has remained stable over the past three years. The SFRs by core and total faculty have ranged from 4.0 to 4.39 from 2008 to 2010. Data presented in the self-study indicate sufficient faculty resources are available to address the educational needs of the students in each department.

A large number of support staff is employed by the college in professional and clerical positions or as graduate assistants, post-doctoral trainees, fellows and student aids. Approximately 80% of staff members are funded through external research grants and have a specified set of responsibilities tied directly to the scope of work outlined in the grant application. Seven university-funded staff members are assigned to the dean's level of administration, which is viewed by the dean and associate deans as adequate. However, the 1.5 FTE staff assigned to the departments is considered to be less robust.

With regard to physical space, the college is located in 13 buildings both on and off campus. All leased space is paid by grant funding. Construction of a new CPH building began in January 2009, and the building is expected to be open for occupancy in winter 2011. The completion of the complex will provide the college with 125 faculty offices, 35 postdoctoral offices and a dedicated suite in each department for support staff and conference space. Additional space will be provided for students including computer labs, a common area, teaching assistant offices and learning and audio/visual services. The new facilities will house eight classrooms and two computer classrooms. A fifth-floor expansion space is also part of the construction plan. The new building will go a long way toward solving the geographic dispersion problem currently experienced by students, faculty and staff. The use of other state-of-the-art laboratory facilities on the health sciences campus is logical in terms of lack of duplication, and the location of rental space is consistent with the nature of the research projects located in these leased

spaces. The construction of the new building is on schedule, and the college expects to start offering classes in the new building beginning in the spring 2012 semester.

The computer facilities available to students, staff and faculty are adequate to carry out the college's academic and research mission. The addition of student computer labs in the new facility will provide additional access to computer facilities on campus. The college has access to high-quality print and electronic library services with over 200 databases and 5,000 journals including those most frequently used by public health professionals. The library also provides access to electronic interlibrary loan and other services.

The college has access to a myriad of community resources that aid instruction, research and service. Students have been engaged in internships at local health agencies and hospitals. The college has a formal agreement with the State Hygienic Laboratory and a memorandum of understanding (MOU) with the Iowa State Department of Health to help foster educational and research exchanges for students and faculty. The college also has ongoing collaborations with local school districts and medical centers around issues such as childhood obesity, nutrition and smoking cessation. The college has a number of formal agreements in place with institutions outside the United States with an emphasis on eastern and central Europe.

The amount of funds expended per student is quite high and has remained stable from 2008 to 2010. Approximately 75% of the college's resources come from external research grants and contracts. Faculty FTE external funding is at a high level and has been increasing at a steady pace over the past three years. The financial resources of the college are fairly robust, particularly extramural funding levels. The low SFRs speak to the soundness of the college's internal and external sources of support. The construction of a new building for the college will help to alleviate the need for students and faculty to rely on other venues across the campus and should provide a better geographic focus and identity for the college.

The overall budget is adequate to carry out the mission of the college, and it is reassuring that the number of tenure-track faculty and total revenue has remained fairly stable over the past three years. However, reviewers noted that the college receives a lower level of support for faculty salaries than other colleges in the university. Furthermore, in recent years, total revenues have equaled total expenditures, leaving little room for growth opportunities. The current faculty has been successful in securing external funding, and federal healthcare reform legislation is expected to produce \$15 billion in new public health funding over the next five years. It is not clear at what point the current faculty will reach a saturation point in terms of securing external funding. A reasonable increase in faculty numbers will be needed to

take full advantage of these new funding opportunities. The ability of the college to move to the next level of excellence will require a new infusion of university support to hire additional faculty and staff.

Table 1. Financial Data								
	FY2003	FY2004	FY2005	FY2006	FY2007	FY2008	FY2009	FY2010
Source of Funds								
Tuition & Fees ¹	\$3,263,084	\$3,685,720	\$4,064,616	\$4,274,022	\$4,867,304	\$5,266,124	\$5,527,895	\$6,023,135
State Appropriations ²	\$4,354,972	\$4,021,209	\$3,952,789	\$3,993,849	\$4,098,805	\$4,534,142	\$4,558,264	\$3,947,044
Grants & Contracts Totals ³	\$28,055,772	\$29,568,411	\$28,046,944	\$29,077,290	\$45,747,710	\$37,583,141	\$40,946,124	\$40,934,126
Indirect Cost Recovery ⁴	\$1,102,876	\$1,226,385	\$1,136,380	\$1,305,943	\$1,106,984	\$1,129,533	\$1,405,568	\$1,076,290
Other Unrestricted Revenue ⁵	\$2,803,941	\$2,739,030	\$2,260,125	\$2,381,500	\$2,748,127	\$2,365,534	\$2,824,317	\$2,530,955
Other Restricted Revenue ⁶	\$783,976	\$859,754	\$1,757,282	\$1,261,297	\$1,236,320	\$1,449,317	\$1,351,474	\$2,493,398
Gifts to Endowment ⁷	\$217,051	\$349,773	\$208,650	\$262,610	\$910,944	\$134,939	\$511,040	\$2,220
Gifts to Capital Projects ⁷	\$0	\$0	\$0	\$0	\$256,500	\$2,708,871	\$297,905	\$668,507
Investment Revenue ⁸	\$26,600	\$125,400	\$243,002	\$180,206	\$131,236	\$63,595	\$182,395	\$62,625
Total Revenue	\$40,608,271	\$42,575,682	\$41,669,787	\$42,736,717	\$61,103,930	\$55,235,197	\$57,604,982	\$57,738,300
Expenditures								
Faculty Salaries & Benefits	\$8,350,101	\$9,586,288	\$10,192,661	\$10,191,965	\$10,225,308	\$10,612,018	\$11,542,122	\$11,445,186
Staff Salaries & Benefits	\$13,397,514	\$15,120,828	\$15,152,393	\$16,158,324	\$17,455,748	\$18,014,252	\$19,485,216	\$19,118,580
Grad Student Salaries/Stipends & Benefits	\$1,948,132	\$2,382,871	\$2,606,712	\$2,683,774	\$2,740,740	\$2,901,797	\$2,780,990	\$2,603,163
Travel	\$844,295	\$871,056	\$1,022,735	\$1,146,334	\$1,177,551	\$1,298,361	\$1,279,256	\$1,214,773
Operations	\$5,011,404	\$5,491,693	\$4,777,729	\$5,024,528	\$5,341,279	\$4,686,040	\$5,414,310	\$6,017,532
Student Tuition & Scholarships	\$159,683	\$258,590	\$373,051	\$403,181	\$509,354	\$505,065	\$814,296	\$919,576
Equipment & Software - Non-Capitalized	\$884,978	\$515,080	\$464,463	\$670,086	\$785,270	\$750,256	\$679,737	\$1,336,005
Equipment & Software – Capitalized	\$560,007	\$786,659	\$447,348	\$586,881	\$96,263	\$367,908	\$440,509	\$357,402
Consultants & Subcontracts	\$1,294,666	\$1,689,532	\$1,703,298	\$2,140,418	\$2,952,328	\$2,964,333	\$3,954,821	\$4,712,625
Facilities & Administrative Costs ⁹	\$5,539,562	\$6,596,100	\$6,582,690	\$6,873,372	\$7,613,293	\$8,152,795	\$8,602,235	\$9,361,361
Total Expenses	\$37,990,342	\$43,298,698	\$43,323,080	\$45,878,864	\$48,897,133	\$50,252,825	\$54,993,491	\$57,086,203

¹Includes tuition portion of (GEF) from University, MHA and MPH differentials, student computer fees and distance education revenues

²State appropriation portion of GEF from University

³Includes direct costs and facility and administrative costs awarded

⁴Includes facilities and administrative cost recovery portion of GEF from University, research incentive program funds and clinical trial indirect returns.

⁵Includes General Organized Activities which include conferences and institutes, community programs and consulting, and recharge center revenues.

⁶Includes Faculty Diversity Opportunity Program funds, Colleges of Medicine and Dentistry support, instructional equipment support, fundraising allocation & gifts to non-endowed University of Iowa Foundation accounts

⁷Represents gifts and new pledges to accounts at the UI Foundation

⁸Represents funds distributed from UI Foundation operating accounts

⁹Charges to grants and contracts for recovery of facilities and administrative costs

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Master of Public Health Degree.

The school shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional masters degree in at least the five areas of knowledge basic to public health. The school may offer other degrees, professional and academic, and other areas of specialization, if consistent with its mission and resources.

This criterion is met. The college offers 37 degree programs, including the MPH in the five core areas of public health knowledge. Two of the core areas offer additional MPH subtracks: health communication administered by the Department of Community and Behavioral Health and ergonomics administered by the Department of Occupational and Environmental Health. All MPH students take 18 credits of core curriculum.

MHA, MS and PhD degrees are also offered. Several degree programs are in the process of being closed out: the PhD in preventive medicine and environmental health was established prior to the formation of the college and will be officially closed after the fall 2010 semester, and the PhD in statistical genetics has four remaining students who are post-comprehensive exams. The PhD in addiction studies is not accepting students and has no graduates to date, due to the departure of key faculty with expertise in this area. Faculty indicated during the site visit that there is still a desire within the college to hire faculty in this field to make it a viable degree program.

In addition, the college offers joint degrees that combine its professional masters degrees with other fields of study, including medicine, law, business, pharmacology, nursing, veterinary medicine and urban and regional planning. The MPH degree for practicing veterinarians is offered solely in an executive format. Table 2 presents the college's degree offerings.

Site visitors reviewed the college's general catalog and determined that each degree and subtrack includes an appropriate depth of coursework. All MPH subtracks have a required set of courses in the core areas of public health knowledge and additional subtrack-specific courses. All MS and PhD students must take core courses in biostatistics and epidemiology and there is evidence that these students receive an introduction to the areas of knowledge basic to public health and an understanding of how their discipline fits into the larger field.

At the time of the site visit, reviewers noted an issue related to the advertisement of the academic MS degree in occupational and environmental health on the college's website. Site visitors confirmed that the academic degree includes appropriate coursework and purposes that differentiate it from a professional degree, the description on the website may have been misleading to prospective students and other

constituents since it implies that it prepares students for professional positions. Subsequently the college provided adequate documentation that this issue has been addressed.

Table 2. Instructional Matrix - Degree/Specialization		
	Academic	Professional
Master's Degrees		
MPH – Biostatistics		X
MPH – Community and Behavioral Health		X
MPH – Health Communication		X
MPH – Epidemiology		X
MPH – Health Services Management		X
MPH – Policy		X
MPH – Occupational and Environmental Health		X
MPH - Ergonomics		X
MPH – General		X
MPH – Practicing Veterinarians		X
MHA		X
MS – Biostatistics	X	
MS – Community and Behavioral Health	X	
MS – Health Communication	X	
MS – Epidemiology	X	
MS – Clinical Investigation	X	
MS – Occupational and Environmental Health	X	
MS – Industrial Hygiene	X	
MS – Agricultural Safety and Health	X	
Doctoral Degrees		
PhD – Biostatistics	X	
PhD – Community and Behavioral Health	X	
PhD – Health Communication	X	
PhD – Addiction Studies (not accepting students, no grads to date)	X	
PhD – Epidemiology	X	
PhD – Health Services and Policy	X	
PhD – Occupational and Environmental Health	X	
PhD – Industrial Hygiene	X	
PhD – Agricultural Safety and Health	X	
PhD – Preventive Med and Environmental Health (not accepting students)	X	
PhD – Statistical Genetics (not accepting students)	X	
Joint Degrees		
MPH/MD		X
MPH/JD		X
MPH/PharmD		X
MPH/MSN		X
MPH/DVM		X
MHA/MBA		X
MHA/JD		X
MHA/MS or MA		X
MS/MS or MA	X	

2.2 Program Length.

An MPH degree program or equivalent professional masters degree must be at least 42 semester credit units in length.

This criterion is met. The college requires a minimum of 42 semester credits for all professional degrees including the MPH, MHA and joint degrees such as the MPH/MD, MPH/JD and MHA/MBA. All coursework is in the form of standard semester credit hours with a three-hour course having a minimum of 37.5 class contact hours per semester.

This credit-hour policy was implemented in fall 2007. Students admitted prior to fall 2007 were held to the semester-hour credit requirement in place at the time of their admission. In fiscal year 2008 (ie, summer 2007, fall 2007, spring 2008), 15 MPH degrees were awarded with 39-41 semester credits. In fiscal year 2009 (ie, summer 2008, fall 2008, spring 2009), three MPH degrees were awarded with 39-41 semester credits. All MPH degrees awarded in summer and fall 2009 met the minimum 42-semester-credit requirement. Three part-time, joint-degree students were awarded MPH degrees in spring 2010 with 39-41 semester credits. Nine MPH students admitted prior to fall 2007 are still enrolled: all are expected to graduate by spring 2011.

2.3 Public Health Core Knowledge.

All professional degree students must demonstrate an understanding of the public health core knowledge.

This criterion is met. The MPH degrees use the Association of Schools of Public Health (ASPH) competencies for the five core areas. All MPH students fulfill the core requirements for biostatistics, epidemiology, behavioral health sciences and environmental health by taking the same courses. To meet the core requirement in health services administration, students can choose from one of two course options.

The MHA degree is housed in the Department of Health Management and Policy. Students in the MHA program are required to take the same courses, totaling 9 credits, as the MPH students in three of the five core areas: biostatistics, epidemiology and health services administration. For the social and behavioral sciences and environmental health sciences, the MHA program has defined competencies the program deems appropriate to the knowledge, skills and abilities that are needed for practice in a healthcare organization setting. These competencies are a combination of those used by the MPH program and those developed by the MHA program.

For the area of environmental health, the MHA program uses two of the MPH competencies and has developed five competencies specific to the MHA program. During the site visit, MHA faculty explained that the competencies for environmental health sciences were discussed with the Department of

Occupational and Environmental Health. The course “Work, Health and the Environment” (175:101) is a broad survey course containing content that addresses the competencies developed for MHA students and more. Undergraduate enrollment is also allowed in this course.

In the area of social and behavioral sciences, the competencies include four from the MPH program in addition to four developed specifically for the MHA program. To address these competencies, five courses are taught by the Department of Health Management and Policy. During the site visit, faculty stated that the competencies and course content to cover them were not discussed with Department of Community and Behavioral Health faculty.

At the time of the site visit, reviewers identified commentary pertaining to the coverage of social and behavioral health competencies in the MHA courses listed as addressing them. A careful review of the course objectives for Introduction to Health Care Organizations and Policy and Introduction to Health Policy identified matches to the five mapped competencies. Site visitors found it more difficult to link course objectives for Health Economics to the three competencies that the curriculum map links to this course. Reviewers noted that the MHA program might work with faculty in the Department of Community and Behavioral Health to review the social and behavioral competencies and the learning objectives of the courses mapped to them to make the linkage clearer. The college’s response noted plans to address this issue in the fall of 2011 by adding content to two required courses: Introduction to Health Care Organizations (174:200) and Executive Seminar (174:100).

2.4 Practical Skills.

All professional degree students must develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to the students’ areas of specialization.

This criterion is met. All MPH and MHA students complete a practice experience. The practicum project, for MPH students, requires at least 200 contact hours at an approved site, and the internship, for MHA students, involves eight to 12 weeks of full-time work during the summer after the first year of study.

The college assigns a course director, a course coordinator and a field practice coordinator to serve as the practicum course faculty each semester. These faculty members work with students to approve sites, preceptors and project proposals. They also supervise the in-person meeting of the full group of students enrolled in the practicum in the given semester. All practicum students meet early in the semester to discuss readings that are tailored around two of the ASPH cross-cutting competencies and to discuss their practicum activities to date. Practicum course faculty are available to students throughout the semester and are able to address problems or challenges as they arise. The course director determines the practicum grade. Students complete an electronic survey at the practicum’s midpoint; course faculty review all surveys and contact students whose responses indicate that they may be having difficulties.

Students are responsible for identifying and securing practicum positions. The practicum course faculty and students' advisors can provide suggestions, but responsibility rests with the student. Sites are considered eligible if they allow the student to apply public health competencies while carrying out a project that meets the organization's needs. The college does not have explicit criteria for preceptor qualifications, but the practicum course faculty must approve all preceptors. Practicum course faculty explained to site visitors that they evaluate potential preceptors on an individual basis and look for good matches for students based on the preceptor's resume and years of professional work experience. Preceptors must be at least two years post-graduate school to be considered. Practicum course faculty also review students' written feedback on the site and preceptor at the end of the experience and use this information to determine whether sites are appropriate for future placements.

The syllabus for the practicum course contains written guidelines and web links to sample evaluation forms for both students and preceptors. Information on practicum requirements and a list of possible practicum sites is also available on the college's website.

According to the self-study, MPH students completed practica at 92 different sites in 2009-2010. Sites included hospitals, non-profit organizations, governmental organizations and international/non-governmental organizations. Most sites are in Iowa, but students completed practica in several other states and nations.

The MHA internship occurs in a hospital or other clinical healthcare setting. Students may earn credit for the internship by enrolling in and completing all requirements (including a final paper) for 174:234—Administrative Internship, or students may complete the internship during the summer without registering for a class or paying tuition. The college has a specific protocol for approving internship sites, and many sites have extensive experience hosting students from the college. The MHA program uses its alumni network to identify both appropriate sites and preceptors. New sites and preceptors must be approved via an interview and on-site visit process, conducted by college faculty. In 2009-2010, 38 different sites hosted MHA students' internships.

At the internship's conclusion, both the student and the preceptor complete an evaluation survey that relates to programmatic competencies and also addresses other aspects relating to the quality of the experience. MHA faculty meet as a group each fall to review survey results and use the data to inform decision making on selection of the next year's set of possible sites.

Neither the MPH nor the MHA program allows for waivers of the practice experience. One occupational medicine resident completed the MPH program in the past three years and completed an appropriate

practicum as part of the training. Four occupational medicine residents are currently enrolled in the MPH program.

2.5 Culminating Experience.

All professional degree programs identified in the instructional matrix shall assure that each student demonstrates skills and integration of knowledge through a culminating experience.

This criterion is met. The culminating experience for the MPH degree includes the practicum experience; a written report that describes the student's role in the practicum and includes conclusions and recommendations; and a public presentation. The practicum experience is designed to provide a venue for students to apply public health principles and theories obtained in core and other didactic coursework. The second part of the culminating experience is production of a formal written report of the experience that includes the student's role, conclusions and recommendations related to the practicum experience, and an analysis of how each public health competency was applied during the project. The third part of the experience is an oral or poster presentation. The culminating experience is evaluated by completion of each of the three components, with a final grade of either satisfactory or unsatisfactory. Students are allowed to remediate if the culminating experience is not completed successfully.

The MHA program concludes with a classroom experience that provides a forum for students to role play and interact with guest speakers who are in the healthcare administration field. The culminating experience for the MHA program is a required course titled Issues in Health Management and Policy, taken during the last semester of the program. Core principles learned during previous coursework and experience gained during the required internship are discussed in a forum setting to allow for exploration of complex issues that are encountered by healthcare professionals. The instructor is the CEO of the University of Iowa Hospitals and Clinics and is well positioned to lead this type of learning activity. In addition, practicing healthcare executives are scheduled as guest lecturers to address the class. Extensive role playing opportunities are incorporated including production of written briefing documents and formal board presentations. Students are evaluated on written assignments, class presentations and participation.

Both students and community representatives spoke highly of the culminating experience. Students felt that these activities allowed them to gain "real life" experience in their areas of interest, and that their marketability was enhanced. The community representatives also were very positive and spoke to the high quality of students coming from the college.

2.6 Required Competencies.

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of educational programs.

This criterion is met with commentary. Measureable core and subtrack-specific competencies have been identified for the MPH, MHA, MS and PhD degree programs. The MPH program has adopted ASPH competencies in each of the five core areas of public health. The MHA program uses ASPH competencies in the areas of biostatistics, epidemiology and health policy and management, and it has tailored the competencies in the areas of social and behavioral health and environmental health to ensure that graduates are prepared to work in a healthcare organization setting.

Completion of the required courses in the core areas of public health is the principal means of assuring that students meet the core competencies. These competencies are also reinforced through elective courses, seminars, practice experiences and the culminating experience. The college has identified the required and elective course(s) in which each competency is either primarily or secondarily gained.

The MPH program used the Council on Linkages between Academia and Public Health Practice competency set at the time of the last accreditation review. After the ASPH core competencies were developed, the MPH Steering Committee compared both sets, determined which were most appropriate and decided to move forward with the ASPH set. In 2005 and 2008, faculty and students assessed the inclusion of core and cross-cutting competencies in MPH core courses. Department faculty develop subtrack-specific competencies, which are reviewed and refined by the Curriculum Committee.

Expected content areas for the MHA have been prescribed by the Commission for the Accreditation of Healthcare Management Education (CAHME). The MHA Taskforce and faculty in the Department of Health Management and Policy developed educational objectives for each content area in 2000 and revised them in 2004. CAHME's most recent criteria include 19 content areas, and the faculty and taskforce have recently completed the development of competencies for each area using Bloom's taxonomy to structure the level of expectations. In addition, ASPH core competencies were also reviewed during the competency development process.

As part of the self-study process, faculty in each department reviewed the existing competencies for academic degrees and made revisions where appropriate. Literature reviews, text analyses of other self-studies submitted to CEPH and a consensus conference of health science research educators were some of the tools used to develop the competencies for academic degrees. Each department completed a matrix detailing how the competencies were met by coursework and culminating experiences, and these matrices were included in the self-study.

The MPH program assesses the changing needs of public health practice through alumni surveys, feedback from practicum preceptors, participation in national meetings and interactions with the local and state public health community. MPH faculty and staff regularly attend public health meetings (eg, ASPH,

APHA, Iowa Public Health Association) and participate in public health practice research and training activities (eg, Upper Midwest Public Health Training Center) that provide opportunities for interaction with practitioners and exposure to best practices.

Given that a majority of MHA students complete post-graduate fellowships, feedback from recent graduates and fellowship preceptors is valuable to assess changes in the field. The program surveys graduates about nine months after graduation. In addition, the Department of Health Management and Policy Alumni Board provides input regarding areas that should be included in the curriculum or that should be more or less emphasized. The post-internship survey is another source of input into areas for potential curriculum changes.

Faculty involvement on the ASPH Practice Council, the Council on Linkages and the Public Health Accreditation Board helps to keep the college informed of the changing needs of the practice and academic communities. Furthermore, faculty serve on the Iowa Department of Public Health's Advisory Council and Evaluation Committee where they are involved with public health modernization activities. Insights and feedback are shared with departments and programs to help inform curriculum development and revision. For example, focus groups have indicated that written and oral communication skills are critical for graduates. Faculty have responded by developing more take-home essay exams, reviewing outlines before papers are written and requiring more in-class presentations.

The Curriculum Committee meets monthly and is responsible for reviewing the competencies and corresponding coursework matrices for all degree programs to ensure they meet collegiate and university quality standards. The competencies adopted by each degree program are available on the college's website, shared with incoming students during orientation and listed in the student handbook.

At the time of the site visit, reviewers identified an area of concern relating to the absence of competencies for the MPH for Practicing Veterinarians. This degree was not included in the self-study matrix identifying competencies and the courses through which they are met. Many courses have been specifically designed for this executive degree program but site visitors found no evidence that the curriculum had been developed based on competencies. Subsequently, the college submitted a set of competencies for this degree program and linked the competencies to courses in the curriculum.

The second area of concern at the time of the site visit involved the lack of consistency across the college related to how competencies are used to guide the development of educational programs. Although several departments have demonstrated a clear process for developing a competency-based curriculum, such a process had not been adopted across the entire college. Site visitors noted that each department is aware of the systematic process that is needed, but until a process is institutionalized, there will be

varying levels of compliance. While competencies and learning objectives are plausibly linked, as evidenced by matrices in the self-study, not all departments have procedures in place to ensure that competencies and the curriculum remain linked. In the college's response to the site visit team's report, college leaders thoroughly document a plan, to be implemented in fall 2011, to ensure consistency across degree programs.

The third area of concern at the time of the site visit related to competency mapping in joint degrees. The college identifies courses in other degree programs that address public health issues, but it has not linked course content and learning objectives to concentration-specific public health competencies or identified a process for individually defining competencies and mapping them to the curriculum. Subsequently, the college's response documented for all four joint degree programs the mapping of identified competencies to specific courses.

The commentary relates to the need for the college to continue its efforts to implement a consistent approach to competency definition and use across all degree programs.

2.7 Assessment Procedures.

There shall be procedures for assessing and documenting the extent to which each student has demonstrated competence in the required areas of performance.

This criterion is met. Student evaluation takes the form of course final grades and feedback from instructors, faculty and preceptors throughout courses and projects. Course requirements allow instructors to evaluate student competencies at all levels of Bloom's taxonomy (ie, knowledge, attitude and skills). Coursework for doctoral degrees requires greater competency at the levels of analysis, synthesis and generation of knowledge. For all students, exams, papers and class presentations are used to assess knowledge acquisition as well as application and analysis of topics. Students must earn at least a B- (2.67) in each core course and have a 3.0 cumulative grade point average for all core courses. Students must achieve a minimum 3.0 grade point average to successfully complete the degree.

The culminating experience all students must complete at the end of their degree program provides an opportunity to demonstrate and use acquired competencies. MPH students must synthesize and integrate core public health knowledge and skills in a professional practice setting; write a formal report that includes a self-assessment of how competencies were applied; and publicly present their work through either an oral or poster presentation. The culminating experience for MHA students is a case study in which individual students are assigned designated roles. Students must provide written briefing documents and make a formal presentation that demonstrates the ability to effectively integrate the knowledge and skills acquired through previous coursework and the internship.

The college tracks graduation rates by degree and enrollment status (ie, full-time, part-time or joint degree). Although the university has set maximum limits for the allowable time to graduation at six years for masters students and 10 years for doctoral students, the college has chosen to set more stringent targets. The maximum target time to graduation for full-time MPH students is three years, part-time and joint degree MPH students is five years, full-time MHA students is two years, joint degree MHA students is four years, MS students is three years and PhD students is seven years. Graduation rates are generally high across the college. Joint-degree MPH students have the lowest graduation rates and those who withdraw report doing so to complete the other component of the joint degree. Those pursuing a joint degree make up a relatively small number of students within the entire college and all other subsets of students have graduation rates above 80%.

The college's academic program coordinators do an exceptional job keeping in touch with graduates. Of the 326 students who graduated in the last three academic years, only 26 cannot be located. Nearly all graduates who are still in touch with the college report being employed in a health-related field. The distribution of graduates is spread across several employment categories, with the healthcare setting employing the largest number of graduates each year.

The college also collects qualitative data from alumni, advisory boards, committees and employers to measure student achievement. Survey respondents indicate that graduates have a strong knowledge base, strong analytic skills and the ability to conduct themselves professionally. Survey data have also highlighted areas for curriculum enhancement, including oral and written communication, grant writing, financial management and statistical software training.

2.8 Other Professional Degrees.

If the school offers curricula for professional degrees other than the MPH or equivalent public health degrees, students pursuing them must be grounded in basic public health knowledge.

This criterion is not applicable.

2.9 Academic Degrees.

If the school also offers curricula for academic degrees, students pursuing them shall obtain a broad introduction to public health, as well as an understanding about how their discipline-based specialization contributes to achieving the goals of public health.

This criterion is partially met. The college offers academic degrees at the masters and doctoral levels. These degrees are overseen by the University Graduate School and are subject to regulations determined by the graduate faculty. All students in the academic degree programs are required to take Epidemiology I to ensure familiarity with basic principles and applications of epidemiology. In addition, all students take an introductory biostatistics course. Students have the opportunity to take courses in other

areas of public health outside of their specialty, although required courses across departments are limited.

Each academic degree program requires a culminating experience. For the MS degrees, the experience may be in the form of a thesis and/or comprehensive examination. Doctoral programs require a written and oral comprehensive examination that is taken after completion of coursework. All PhD students are required to develop a written research dissertation concluding with an oral dissertation defense. These requirements provide an adequate level of rigor to evaluate the student's knowledge and abilities.

The concern relates to the lack of a college-wide structure to assure exposure to a broad introduction to public health outside of the student's academic discipline. While some departments require coursework outside of the student's primary area of interest, there is no assurance that this coursework will be broad in scope or even outside of the student's home department. No department has established required course credit hours to address general public health principles. For example, the MS degree in biostatistics and the PhD degrees in epidemiology and biostatistics do not appear to orient students to the breadth of public health principles, and it was unclear to site visitors how these students gain an understanding of how their specializations contribute to public health goals beyond their discipline. While faculty stated that there are departmental seminars and guest lectures, these activities are only recommended and not required. Further, there does not appear to be a structure to assure that these activities address general principles for those students who do attend. The college has numerous opportunities for students to interact with public health practitioners, but again, students are not required to participate. Many students attend national meetings with a public health focus, but this is optional and there is no method of documenting that students who attend the meetings are exposed to public health principles beyond their academic field of study.

There does not appear to be a public health knowledge base that is uniform across the different degree programs. While it is not required that all components of public health knowledge be covered in academic degrees, it is expected that a rationale will be provided for how the included public health content supports the goals of the degree programs. In its response to the site visit team's report, the college described proposed plans to implement a course that provides an overview of public health for all MS and PhD students in fall 2012.

2.10 Doctoral Degrees.

The school shall offer at least three doctoral degree programs that are relevant to any of the five areas of basic public health knowledge.

This criterion is met. The college offers PhD degrees in each of its five academic departments. Over the past three years, each active PhD program has had graduates. Competencies have been developed for each doctoral track that represent the goal of achieving advanced knowledge and research skills.

In addition to eight active PhD degrees, the college includes three other doctoral degrees in its list of available degrees. At present, the PhD in addiction studies has no students, is not accepting students and has had no graduates. It has been put on hold due to lack of sufficient faculty resources. Its future viability will be closely monitored. The PhD in preventive medicine and environmental health was established prior to the formation of the college in 1999 and will be phased out after the fall 2010 semester. The PhD in statistical genetics began the phase-out process in 2006. The four remaining students are post-comprehensive exams and are working toward completion.

The number of applicants and enrolled students in the eight active doctoral programs varies widely. For the past three years, biostatistics has had the largest number of applicants (31-42). Epidemiology and health services and policy follow with applications ranging from 16 to 21 and eight to 22, respectively. The other PhD programs have smaller numbers of applicants. With regard to enrollments for the 2009-2010 academic year, epidemiology was the largest program with 41 students, followed by biostatistics with 23 students. Enrollments in the six other PhD programs range from three to 11 students. All of the active programs have graduated at least one student in the past three years. It was evident during the site visit that faculty recognize that the smaller programs pose some challenges pertaining to critical mass of students. However, some of the smaller programs represent tracks within departments; thus, students interact by taking courses together and participating in other departmental activities.

2.11 Joint Degrees.

If the school offers joint degree programs, the required curriculum for the professional public health degree shall be equivalent to that required for a separate public health degree.

This criterion is met. The college offers eight joint degree programs: MPH/DVM, MPH/JD, MPH/MD, MPH/PharmD, MHA/JD, MHA/MBA, MHA/MS or MA, and MS/MA. A ninth degree (MPH/MSN) was listed in the self-study, but site visitors learned during the site visit that this degree has been discontinued and no students are currently enrolled. Students in joint degree programs are admitted to each program separately based on the same criteria as any other applicant. Each program then confirms an agreement, through a letter of approval, for the admitted student to pursue the joint degree.

Joint-degree students earning an MPH must complete the six core public health courses, the practicum and nine credit hours of public health electives. To choose these electives, students meet with their MPH advisor to develop an individualized plan of study based on their interests. Twelve outside credits can be substituted for public health courses. The associate dean for MPH and undergraduate programs meets with the other colleges involved in these joint degrees one to two times each year to evaluate the curriculum. In addition, the MPH Steering Committee reviews the curriculum of courses that can be counted toward the MPH degree. Faculty indicated that courses are reviewed to ensure they have a

community or prevention focus, but competencies have not been linked to these courses. Faculty identified a robust process for identifying specific public health content in external courses, but, as discussed in Criterion 2.6, there is no process for linking this public health coursework beyond the five core areas to any of the college's defined competency sets.

Unofficial combined degrees with other PhD and MS programs across campus have been offered by the college. Doctoral students in women's studies, anthropology and geography have also earned MPH degrees. In addition, within the college, students can obtain an MHA and MPH through the unofficial combined degree mechanism. Students wishing to pursue an unofficial combined degree must be admitted into both programs and must have both departments/programs exchange letters of approval. Students must meet all the requirements and competencies for both degrees.

The university's business model does not provide tuition revenues to the college for students in joint degree programs because students only pay the higher of the tuition for the two programs in which they are enrolled. CPH tuition is generally lower than all other professional degree tuitions at the university.

2.12 Distance Education or Executive Degree Programs.

If the school offers degree programs using formats or methods other than students attending regular on-site course sessions spread over a standard term, these programs must a) be consistent with the mission of the school and within the school's established areas of expertise; b) be guided by clearly articulated student learning outcomes that are rigorously evaluated; c) be subject to the same quality control processes that other degree programs in the school and university are; and d) provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of adult learners. If the school offers distance education or executive degree programs, it must provide needed support for these programs, including administrative, travel, communication, and student services. The school must have an ongoing program to evaluate the academic effectiveness of the format, to assess teaching and learning methodologies and to systematically use this information to stimulate program improvements.

This criterion is met. The college offers one degree program in a distance education format: the part-time MPH for practicing veterinarians. This program is offered in collaboration with the Iowa State University College of Veterinary Medicine. This program is unique in that it provides practicing veterinarians with the opportunity to obtain an MPH degree.

The part-time MPH for practicing veterinarians was launched in summer 2007. The program incorporates both campus and distance-based courses. The students participate in two consecutive, two-week summer institutes, one on the UI campus and one at Iowa State University. Faculty at the College of Veterinary Medicine who teach in this program have adjunct appointments with the CPH, and the courses they teach during the second summer session are approved by the CPH. In the summer institutes, students complete courses offered in compressed one- and two-week formats.

All core courses are available in an online format. The Center for Credit Programs provided the college with resources to help develop the online courses. The online courses use two basic formats: 1) a synchronous format, in which lectures are broadcast live using Elluminate and distance-based students can watch live and engage with faculty online; and 2) an asynchronous format, in which recorded lectures are provided online and students participate in online discussion and submit assignments into a drop box using Iowa Courses Online (ICON), the university's online course management system. The college also uses Elluminate web conferencing software for practicum presentations. The online courses use the same course evaluation system as the on-campus courses with the addition of extra questions unique to the online format.

Over the past three years, the applicant pool for the part-time MPH for practicing veterinarians has had a pool of 10 to 17 applicants. The number of accepted students has ranged from 10 to 16 and the number enrolled has ranged from eight to nine.

This is a part-time executive program designed for a specific audience, and it uses the MPH competencies for the core courses. Many of the other courses were specifically developed for this program. However, much of the curriculum, which was developed specifically for this program, is not structured around competencies that describe what the students should attain upon completing the degree. As discussed in Criterion 2.6, the college must work with the faculty at Iowa State University to develop competencies for the program that go beyond those for the MPH core.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. The college's stated mission includes excellence in research as a means of promoting health and preventing injury and illness. Research plays a primary role at the university and college levels, and the college has targeted rural health as a focus area that is appropriate for the university's geographic location and local demographics. The university has adequate core units in place to provide support for the college's research efforts. In addition, the faculty report that the university administration is usually responsive when approached for resources to support research efforts and infrastructure. However, the indirect cost return of 3.8% to the college appears to be inadequate to provide a flexible resource base for significant growth in research infrastructure.

The college's faculty is highly productive with fiscal year 2010 funding at over \$39 million. This amount of grant and contract activity indicates a vigorous research environment that is competitive at the highest

level. Each department has a strong research record, with a broad range of collaborations among departments, other academic units on campus and extramural agencies and organizations. Notable centers and institutes within the university that house college faculty research include the Center on Aging, the Prevention Research Center, the Center for Health Policy and Research and the Iowa Center for Education and Research on Therapeutics. The breadth of research foci of these groups illustrates the broad research perspective of the college faculty.

The college is committed to providing research opportunities to students, and research is an integral part of all academic degree programs. Graduate students may qualify for research assistantships that provide a stipend and may participate in research-based internships or practica. Faculty members in the college serve as advisors and mentors and play a primary role in developing the research skills and perspectives of the students. The college and university provide an opportunity for students to present their work in an annual research forum, and students may compete for monetary and other awards.

While research directed at improving the practice of public health is not directly addressed in the self-study, the college participates in a wide variety of community partnerships that address community-based issues. Some of these partnerships involve research directed at improving the practice of public health. For example, the CDC-funded Prevention Research Center for Rural Health collaborates on numerous projects with organizations in 14 Iowa counties that address practice-based interventions. Also, the college currently has a US Department of Defense-funded study to examine former and current conventional weapons workers in an Iowa plant that has higher rates of death or cancer than are found in other local workers. This study may produce new methodologies or practices to address the increased exposure risk for those who work in the field of munitions production.

3.2 Service.

The school shall pursue active service activities, consistent with its mission, through which faculty and students contribute to the advancement of public health practice.

This criterion is met. The college delivers service to communities and to the profession through center-based and project-based activities; faculty volunteer and advisory efforts; and organizationally based and individual student volunteer projects.

The college asks departments to track their faculty members' "leadership activities," defined as holding office or membership on governing boards and advisory boards, membership on editorial boards, journal editorship and serving as a conference organizer. Over the past three years, college faculty have engaged in numerous leadership and professional service activities. The self-study's appendix presents a list of these service activities, and the list shows a great breadth of local and national service, as well as a more modest amount of international service. Faculty members have served in chair and vice-chair

roles on Institute of Medicine boards and committees and on task forces and as council members for a variety of state-based initiatives, including Iowa Statewide Suicide Prevention and the Iowa Department of Public Health Task Force on Health and Long-Term Care Access. Faculty also undertake (funded) service-oriented grants and contracts, which generally accrue relatively modest funding but fill important roles and connect faculty to state initiatives, in particular. For example, college faculty have participated in nine separate funded projects through Activate Iowa, a partnership between the college, Wellmark Blue Cross-Blue Shield, the Iowa Health System and Mercy Health Network. The self-study's appendix lists 23 funded service projects over the past three years involving 12 faculty members.

The self-study also provides a robust set of examples of center-based and faculty-driven service projects. The UI Injury Prevention Research Center (UI IPRC)'s activities include education, policy and legislative activity on young driver safety initiatives; data analysis, technical expertise and report development to support the Iowa Trauma Registry; and production of the State of Iowa Burden of Injury Report. The college also issues reports and works closely with the State Health Registry, which gathers cancer incidence and follow-up data, as well as the Iowa Registry for Congenital and Inherited Disorders. On a more concrete or grassroots level, college faculty and students contributed extensive service in the wake of the massive floods that affected Iowa City and surrounding communities in 2008. In addition to basic volunteer services, the college worked with the state hygienic laboratory to inform citizens of health risks associated with flood cleanup. They also produced information materials for the media and public health fact sheets for the community on topics including water quality, infectious disease, mold, environmental hazards, mental health, injury prevention and fraud.

Among the college's many other service initiatives are those relating to on-site digital libraries. The college's eGranary digital library is a collection of websites, textbooks, journals, multimedia presentations and resource materials loaded onto intranet web servers. The design of the technology and the storage system allows easy access to the collection in developing countries where server-based platforms operate on low bandwidths. An offshoot of this project, the Global Disability Rights Library, focuses its reference and resource materials on improving the lives of people with disabilities in developing countries. In addition to collecting a wide array of material, the project makes the library available via the web, via local and wide-area networks, via offline storage devices and on devices like notebook computers, internet tablets, DVDs, USBs and CD ROMs.

Student involvement in service, like faculty involvement, occurs through multiple channels. Students were actively engaged in the post-2008-flood activities, but have also provided in-person or fundraising support to Iowa City's Ronald McDonald House (students cook a meal once a month for guests), the North Liberty Food & Clothing Pantry and the UI Children's Hospital (participating in the annual Dance Marathon fundraiser). In 2008, several students received a grant from ASPH to create a publicity

campaign for public health week, and students sponsored a photography display, outreach efforts in local elementary schools and displays and information tables in a local shopping mall. Service learning is integrated into several curricular options that students choose as elective courses. One of three semester hours in the Maternal, Child and Family Health course is devoted to developing and implementing a service learning project to benefit mothers and children.

Service is a stated expectation for all faculty and is required for promotion and tenure. While “service” in this definition also includes participation in governance activities, service that contributes to the advancement of public health practice is a component of the 20-25% service expectation for all faculty. Faculty are expected to demonstrate increasing involvement and leadership in service as they progress in rank. The college also chooses to honor service through two faculty awards: the Faculty Achievement in Community Engagement Award and the CPH Faculty Service Award.

Community members who met with site visitors noted that the college is quite visible throughout the state and plays a key role in public policy and health advocacy efforts. For example, the college provided data to support raising tobacco prices in 2006 and has helped to expand the number of smokefree workplaces across Iowa.

3.3 Workforce Development.

The school shall engage in activities that support the professional development of the public health workforce.

This criterion is met. The college has an extensive array of workforce development activities across multiple centers and departments. The self-study’s appendix details all continuing education offerings from 2008-2010, including information on the modality and the number of participants. According to this list, over 36,000 individuals participated in the college’s continuing education activities over the three-year period. Specific groups who participated in the trainings included community health center employees, state and local health department employees, policy makers and legislators, child care providers, healthcare executives and nurses. The college collaborates with dozens of academic, governmental, industry and other practice partners to deliver its workforce development offerings.

The college has a CDC-funded prevention research center that focuses on rural health (the PRC-RH), a CDC-funded public health preparedness center (the Upper Midwest Center for Public Health Preparedness) and a HRSA-funded public health training center (the Upper Midwest Public Health Training Center). In 1999, the college developed the Institute for Public Health Practice (IPHP), which serves as a central point of coordination for several related centers and projects. IPHP staff include instructional designers, evaluators, an educational media specialist, a flash developer, program managers, writers and a learning management coordinator.

The Prepare Iowa learning management system is a collaborative effort of the IPHP and the Iowa Department of Public Health. The Prepare Iowa system provides distance-based access to/delivery of courses but also facilitates tracking of competency attainment and identification of training needs. Agencies can use the system to track individual learners or groups of employees. The IPHP has successfully used Prepare Iowa to conduct needs assessments. In some cases, public health agencies can have all staff complete self-assessments in the Prepare Iowa system, and the IPHP analyzes the aggregate data to prepare reports reflecting agency training needs. For example, WIC professionals used Prepare Iowa to assess competence in a range of skills, and the analysis revealed cultural competence as an area where workers felt less confident. The IPHP is currently developing two online courses on this topic for WIC professionals.

Other centers and projects have used focus groups and other methodologies to plan educational offerings. The Upper Midwest Public Health Training Center conducted focus groups with new and experienced public health administrators, and, as a result, developed the New Public Health Administrators Program, a series of online modules delivered through Prepare Iowa. The center also collaborates with the Iowa Counties Public Health Association to conduct an annual assessment of training and education needs and has been working on enhancing an online toolkit that public health agencies can use to orient new board members.

The college's range of activities includes face-to-face delivery methods but also focuses heavily on online and distance-based methods. The college partnered with other UI units to purchase a software license for Elluminate, a program that supports internet-based web conferencing. Elluminate has unique features that allow it to function reliably using very low-speed internet connections, facilitating use in rural Iowa communities and developing countries around the world. Over a recent 18-month period, sites in over 60 developing countries have connected to the college's web conference sessions through this technology.

Continuing education is one of the college's critical responsibilities, and the first goal of the college's current strategic plan reflects this priority. The 2011-2016 strategic initiatives couple continuing education with the college's priority on matriculated students, with a goal to "Provide outstanding public health education for both academic degree programs and non-academic training and education programs." The college's aims mesh with the university's strategic plan, "The Iowa Promise." The Iowa Promise targets lifelong learning, continuing education and professional development to Iowans and Iowa businesses, and the university reports annually to the Board of Regents on its non-credit educational offerings by number of participants and delivery modality.

Finally, the college offers three certificate programs. The most recently implemented, the Certificate in Emerging Infectious Disease Epidemiology, is currently in a state of transition. The certificate was

approved and implemented in 2008 to provide graduate-level education to nominated international public health professionals affiliated with sponsoring organizations, such as USAID, the US Department of State and others. Twenty-four students enrolled in 2009 and 31 enrolled in 2010, but the faculty member responsible for the program has left the college. With his departure, which removed a number of the connections to sponsoring organizations and a grant from the US Department of Defense, departmental faculty are revisiting the target audience and how best to market the certificate.

The Certificate in Agricultural Safety and Health is a 12-semester-hour online program that trains students to detect safety and health hazards and treat and prevent agricultural-related illnesses and injuries. It is targeted to practicing health providers in rural areas and students training to be health providers who will work in rural areas. This certificate has drawn few participants: two in 2009 and two in 2010. Departmental faculty attribute these low numbers in part to the newness of the certificate. Like the epidemiology certificate, efforts are being made to identify the most appropriate target audience and effective marketing strategy.

The Certificate in Public Health, implemented in 2002, focuses on basic public health competencies, and is delivered both on-campus and online. It is available for both undergraduate and graduate credit. Students who already have an undergraduate degree and who meet certain other qualifications may be eligible to apply nine of the 12 hours of certificate coursework toward the MPH degree. Over the last three years, 25, 23 and 27 students, respectively, have been enrolled in this certificate.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

The school shall have a clearly defined faculty which, by virtue of its distribution, multidisciplinary nature, educational preparation, research and teaching competence, and practice experience, is able to fully support the school's mission, goals and objectives.

This criterion is met. There is a well-defined, multidisciplinary faculty with excellent qualifications and relevant backgrounds to support the CPH's degree programs across five departments. Of the 73 primary faculty members, there is a preponderance of tenured faculty who hold either a PhD or ScD as a terminal degree. Several primary faculty members hold a DVM or MD degree with additional masters-level training. There is clearly sufficient depth in each department to conduct the academic and research programs of the college. Primary faculty members are productive in the area of research and external funding with many achieving national and international recognition. The college also employs the services of adjunct, part-time and secondary faculty to assist in the college's teaching mission. A large percentage of these faculty members possess a doctoral degree or another terminal degree such as the MBA. The disciplinary backgrounds of faculty members cover the areas of instruction critical to the college being able to fulfill its academic mission. The participation of non-primary faculty members also

brings students into contact with active clinical and public health practitioners. The college has recently developed a research professor track; one faculty member currently holds this title. The college will continue to monitor this experiment to determine whether further populating of this research track is beneficial.

The mix of primary and adjunct faculty places the college in a good position to reach its stated goals of providing an excellent educational experience for public health professionals and research scientists and providing meaningful service to the citizens of the state of Iowa.

4.2 Faculty Policies and Procedures.

The school shall have well-defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty, and to support the professional development and advancement of faculty.

This criterion is met with commentary. The university and the college have well-defined faculty policies and procedures as outlined in the UI Operations Manual, the CPH Faculty Handbook and the CPH Manual of Procedure. The procedures governing faculty recruitment were clearly spelled out in the self-study and are available on the college and university's websites.

The college has made faculty mentoring a priority for fiscal year 2011 and has charged the associate dean for research and academic affairs to lead the process of developing a collegiate mentoring plan. A formal mentoring program was started by the Department of Biostatistics last year for junior faculty. All new faculty members are required to participate in the college's new-faculty orientation program, which includes a discussion of the strategic plan; teaching; tenure and promotion policies and procedures; collegiate committees; centers and institutes; syllabus requirements; and the research mission of the college. The college and the university also conduct other workshops for junior faculty on time management, budgeting and online course development and delivery. Junior faculty members are also eligible for career development awards through a competitive process.

The college has developed procedures for evaluating faculty competence and performance for assistant, associate and tenured faculty annually, every two years and every five years, respectively. The annual evaluations for tenure-track faculty are conducted by the department head and the results are reported to the university and the state Board of Regents. Procedures and timelines are also spelled out for evaluating and reappointing clinical-track faculty, and for handling faculty members with joint appointments. Decisions regarding tenure and promotion are assessed at the department level by peers and at the collegiate level by the Collegiate Consulting Group. Evaluation of teaching is accomplished by peer review through direct classroom observations and student evaluation reports for each course.

The CPH Faculty Handbook explicitly discusses service expectations. Each faculty member is expected to participate in the governance of his or her department and to contribute service to the department, to the college, to the university and to the discipline or profession. Collegiate service norms have been established that represent reasonable percentages of time for tenure-track and clinical-track faculty.

The commentary relates to the lack of a well-structured faculty mentoring program identified at the time of the site visit. Although senior and some junior faculty members feel that the college's culture of collaboration creates an informal network of mentoring for junior faculty, a recent faculty survey and meetings with junior faculty suggest that the development of a more formalized approach to mentoring would be welcomed by the untenured faculty. The college's response to the site visit team's report provided detailed plans to implement a faculty mentoring program by December 2011.

4.3 Faculty and Staff Diversity.

The school shall recruit, retain and promote a diverse faculty and staff, and shall offer equitable opportunities to qualified individuals regardless of age, gender, race, disability, sexual orientation, religion or national origin.

This criterion is met. In 2009, 41% of the college's faculty were female and 14% were minorities. No data were included on faculty with disabilities. Staff were predominantly female (76%) and Caucasian (89% of female staff and 82% of male staff). By comparison, 2009 demographics for the state of Iowa included 50.6% female and 93.9% Caucasian. Faculty and staff diversity roughly reflect the population demographics of Iowa, but individuals of Hispanic or Latino descent are underrepresented. The Latino/Hispanic population in Iowa has increased dramatically in the last decade, making Latinos the largest minority population in the state. The Hispanic population is growing rapidly statewide and efforts should continue to attract faculty and staff from this population.

The college and university have appropriate policies concerning commitment to diversity and equitable opportunities for faculty and staff. Safeguards are in place to ensure full implementation of policies for faculty and staff recruitment and retention. An Office of Equal Opportunity and Diversity has been established to respond in an organized manner to the desire for a diverse workforce. This office is charged with developing, implementing and executing policies related to equal opportunity. Search and screening guidelines provide a framework for flexible searches that allow for use of all venues for recruitment that are appropriate for the state of Iowa. These guidelines affirm the university's commitment to a diverse faculty and staff. Site visitors noted that, while mechanisms are in place at the college and university levels to attract and retain a diverse faculty, faculty members who serve on search committees perceive that there is little guidance or strategies to enhance the diversity of the applicant pool. In essence, the activities to attract a diverse faculty appear to begin only after an applicant from an underrepresented group is identified. Over the last two years, the college has met the outcome measure set by the university for minority-tenured and tenure-track faculty (16%) and has exceeded the

university's target for female faculty (32%). In addition, the college has exceeded the university's target of 37% females in executive/administrative/managerial positions over the last three years. As noted in the self-study, the college falls behind the university's target level of 8% for minorities in executive/administrative/managerial positions. However, recruitment and promotion of a diverse faculty appears to be on a strong positive trajectory.

It is noted that the college has created a Diversity Committee to facilitate efforts to attract and retain diverse faculty and staff. The committee works to enhance the representation of groups currently underrepresented in the college and in the public health workforce. Activities implemented or encouraged by the Diversity Committee include sponsoring or co-sponsoring activities to promote diversity within the college and throughout campus. In addition, the committee has designed a website for faculty, staff and students to use as a resource for increasing diversity. These activities are supported by the university administration and are strengthened by the resources and activities for faculty and staff that are provided at the university level.

4.4 Student Recruitment and Admissions.

The school shall have student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the school's various learning activities, which will enable each of them to develop competence for a career in public health.

This criterion is met with commentary. The college sponsors a number of recruitment events, targeting individuals in the local community, UI undergraduate students, undergraduate students at other Iowa colleges (eg, private colleges) and undergraduate students at universities serving underrepresented minority populations. The college establishes an advertising booth at national and state meetings and advertises on internet-based and local services. The certificate in public health also serves as a recruitment tool for the MPH program.

The internet is the primary source of information for prospective students, and the college focuses on keeping web-based information timely and useful. The college and its departments also have protocols for following up with prospective students who request additional information on the college's degree programs—the college has a toll-free number identified on the website and on all recruitment materials. One department uses the GRE search service to identify year potential applicants.

The college offers financial assistance to some students in the form of graduate assistantships, scholarships and fellowships, and these serve as primary recruitment tools. The college and departmental websites highlight funding opportunities.

Departments make admissions decisions for the PhD, MS and MHA students and recommend admissions decisions for MPH students who indicate a subtrack on their application. All departments use a common

set of criteria for MPH admissions. There are specific admissions committees for students pursuing MPH combined degree programs and the professional MPH program. All recommendations for MPH admissions decisions are forwarded to the associate dean for MPH and undergraduate programs, whose office returns the final recommendation regarding admission.

Departments and degree programs establish their own review schedules: some review applications as they arrive and others evaluate applications on a given date. After the department and/or college process for admissions, students must be processed through and receive their official letter of admissions from the UI Office of Admissions.

Each department and degree program establishes its own specific evaluation guidelines, but all applicants must submit a common set of materials and document a common set of qualifications: a US bachelors degree from a regionally accredited university or the international equivalent; a minimum grade point average of 3.0; scores on a nationally standardized examination (GRE in most cases, but MHA and MPH applicants may substitute other tests including LSAT, MCAT and GMAT); TOEFL scores for applicants whose first language is not English and who do not hold a baccalaureate degree from an English-speaking university; letters of recommendation; and a statement of purpose that indicates intent and motivation for graduate study in the chosen field.

The self-study presents data on the number of students who applied, were accepted and enrolled in each degree and subtrack over the last three years. Total enrollment has been relatively stable, with an increase between the 2007 and 2008 academic years. Across the three years, total student enrollment was 278, 410 and 404. Though the college does enroll a number of part-time students, the FTE for all three years was between 75% and 80% of the headcount. Several subtracks show no or very low admissions numbers in recent years. The self-study explains that this is intentional, as some degree programs have seen faculty attrition and some departments have shifted focus. The college reviews enrollment on an annual basis to identify trends and areas of concern.

The commentary pertains to the lack of an institutionalized process for student recruitment. A number of initiatives have been implemented, but with limited consistency across departments. Some of the approaches currently in use could be adopted at the college level and customized by department.

Another point of commentary relates to the very low enrollment in the MPH in biostatistics, although site visitors noted that the MS in biostatistics has relatively high enrollment numbers. The accreditation criteria require the college to offer a professional masters degree in this core public health area, but the MPH has not admitted any new students in the past three years; its last two applicants (who were not accepted) were in 2007, and in 2009-2010, only one student, enrolled half-time, was in the MPH in biostatistics. Since the college does not offer any other professional masters degree programs in

biostatistics, ensuring that this degree program is viable is crucial to maintaining compliance with Criterion 2.1. To ensure viability, the college may focus on enhancing recruitment and admissions efforts for this degree program.

4.5 Student Diversity.

Stated application, admission, and degree-granting requirements and regulations shall be applied equitably to individual applicants and students regardless of age, gender, race, disability, sexual orientation, religion or national origin.

This criterion is met with commentary. Racial/ethnic minority students constitute approximately 12% of the college's enrollment, and international students constitute approximately 18% for fiscal year 2010. These figures surpass the college's target: the percentage of international students far exceeds the program's target of 9%, though it has been decreasing over the past three years from 21% in 2008. The class of 86 new enrollees in 2009-2010 included five African American females and three Hispanic females. In previous years, limited numbers (one to three) of new enrollees were males in these ethnic/racial categories. The majority of the college's ethnic/racial diversity consists of Asian/Pacific Islander students.

The college has a number of policies and practices that support the establishment and retention of a diverse student body. College faculty, staff and students attend select conferences at the state and national level that provide opportunities to increase the college's visibility among minority students. The college also participates in a number of summer, fellowship and enrichment activities that aim to interest minority high school or undergraduate students in graduate study in public health, some of which are university-wide or system-wide. Several of these initiatives focus particularly on recruiting minority and underrepresented students to biostatistics. The UI Graduate College competitively awards tuition scholarships to graduate students from disadvantaged and/or underrepresented groups. In the last three years, 18 CPH students have received Graduate Diversity Scholarships.

Another potentially significant tool for establishing and maintaining student diversity is the CPH Diversity Committee. The committee sent a diversity climate survey to all faculty, staff and students in spring 2010 and plans to use the results to determine new strategies. Some initial findings of the survey that were shared with site visitors include students' desire to learn more about the cultures represented in the college and an interest in diversity-related educational sessions among staff.

The college also sponsors or hosts diversity-related events throughout the year, including the luncheon for students of color in the health sciences (fall 2009), which included over 100 students from the CPH and other health sciences colleges. The college also sponsored, with the College of Medicine, the LGBT welcome dinner in fall 2009. The college is an active participant in UI Martin Luther King Human Rights Week each year. The CPH's 2010 offerings during this week included a film screening and panel

discussion on “Katrina’s Children” and a seminar on “Understanding Privilege,” which focused on specific examples that impact public health.

The college also benefits from university-wide policies and offices that support student diversity, including the Office of Graduate Ethnic Inclusion, the Office of Equal Opportunity and Diversity and the Center for Diversity and Enrichment.

The commentary relates to the fact, identified in the self-study, that the majority of effort on student diversity within the college is focused in one department, the Department of Biostatistics. On-site discussions indicated that this departmental initiative requires a strong commitment from faculty to recruit and mentor students, and it has been a struggle to expand it to other departments. Given that each department recruits students with different backgrounds, program coordinators are devoting time at their monthly meetings to discuss best practices that will work for each department.

4.6 Advising and Career Counseling.

There shall be available a clearly explained and accessible academic advising system for students, as well as readily available career and placement advice.

This criterion is met. Applicants to the CPH are asked to identify an area of interest, and faculty advisors are assigned on the basis of shared interests, although students can choose to change advisors. During the first semester of enrollment, a plan of study is documented to assure that students account for all required courses, take courses in a systematic fashion and graduate in a desirable timeframe with the appropriate number of credit hours. Students and faculty advisors meet at least once a semester to review progress and make written adjustments to the plan of study.

Each department/program in the college employs an academic program coordinator who serves as the primary point of contact between the Office of the Associate Dean for Education and Student Affairs and individual departments/programs. These coordinators are often the first point of contact for students and they are able to address routine curriculum and registration activities. They maintain student files, track course enrollment and student performance, assist with registration and help to recruit and counsel prospective students. Interviews with students indicated they are very satisfied with the advising they receive and feel the faculty and staff are readily available.

Regardless of degree, all students in the CPH benefit from career workshops and faculty connections that provide links to colleagues in other research and academic settings where internship and employment opportunities may be available. Students are strongly encouraged to attend professional conferences and funding is available to support student attendance.

A placement advisor helps MPH students prepare for job searches and identify potential job opportunities. This position was added as a result of students' feedback about their career counseling needs in exit surveys. The placement advisor is a recently retired practitioner from a local health department. The MHA program's executive in residence, who is a senior healthcare leader, serves a similar role for MHA students. The continued involvement of MHA alumni is a strength of the department and provides current and former students with networking opportunities across the world.

Student satisfaction with advising and career counseling is primarily assessed via an online survey sent to new graduates. Low response rates to the five-question survey prompted the college to review how it is administered in spring 2010. The academic program coordinators for each degree now e-mail the survey to their graduates during the last week of the final semester. The response rate increased from less than 50% to 67% in the pilot test. Students and alumni told site visitors that the faculty take an interest in their career goals and closely tie academic advising, such as selection of electives, to students' individual interests and needs. JobConnection, an online resource for the college, was also cited as a helpful resource for students looking for employment opportunities, including internships.

Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

University of Iowa
College of Public Health

October 4-6, 2010

Monday, October 4, 2010

- 8:30 am – 8:45 am Review of Resource Files and Site Visit Team Executive Session
- 9:15 am – 10:15 am Meeting with School Leadership
Mary Aquilino
Chris Atchison
Leon Burmeister
Kathryn Chaloner
Desire Christensen
Ann Coady
Sue Curry
Dan McMillan
Keith Mueller
Edith Parker
Peter Thorne
Jim Torner
Tanya Uden-Holman
Tom Vaughn
Rob Svetly
- 10:30 am – 12:15 pm Meeting with Leadership Related to Instructional Programs
Mary Aquilino
Joe Cavanaugh
Jeff Dawson
Leslie Dennis
Nate Fethke
Terry Kirk
Sam Levey
Patrick O'Shaughnessy
Tom Vaughn
- 12:30 pm – 1:45 pm Lunch with Students
Angela Colvin
Dan Astleford
Kim Quinn
Maureen Meyer
Ryan Landi
Brenda Buikema
Rachel Cain
Stephanie Lukas
Colleen Kummet
Zainab Khan
Justin Newnum
Carmen Smith
Nia Aitaoto
Blake Hanson
Suzanne Bentler
Matt Lozier
- 2:00 pm – 2:45 pm Meeting with Leadership Related to Doctoral Degrees
Shelly Campo
Chuck Lynch
Mike Jones
Patrick O'Shaughnessy
Marcia Ward

3:00 pm – 3:45 pm Meeting with Leadership Related to Admissions, Diversity, Student Affairs and Career Counseling
Dave Asa
Kathryn Chaloner
Jake Oleson
Amy Sayer
Jean Sheeley
Kay Shie
Katie Yamaki

4:00 pm – 5:00 pm Review of Resource Files

Tuesday, October 5, 2010

8:30 am – 10:15 am Meeting with Leadership Related to Research, Faculty and Staff
Trudy Burns
Chris Coffey
Jeff Dawson
Fred Gerr
Hans Lehmler
Chuck Lynch
Faryle Nothwehr
Edith Parker
Cori Peek-Asa
Larry Robertson
Jennifer Robinson
Cindy Rohret
Tom Vaughn
Fred Wolinsky
Bridget Zimmerman

10:30 am – 11:15 am Meeting with Leadership Related to Service and Workforce
Chris Atchison
Eileen Fisher
Kim Gordon
Jane Pendergast
Paul Romitti
Tanya Uden-Holman
Laurie Walkner

11:30 am – 1:00 pm Lunch with Alumni, Community Partners and Employers
Marilyn Adams
Tim Ahlers
Natoshia Askelson
Emine Bayman
Doug Beardsley
Joe Bolkom
Margaret Chorazy
Mary Rose Corrigan
Graham Dameron
Christine Hradek
Chris Klitgaard
Ian Montgomery

1:30 pm – 2:30 pm Meeting with University Leadership
Douglas True
Barry Butler
Tom Rice

3:00 pm – 3:45 pm Meeting with Junior Faculty
Renee Anthony
Ryan Carnahan
Jason Hockenberry
Dawei Liu
Marizen Ramirez
Tara Smith
George Wehby
Gideon Zamba

4:00 pm – 5:00 pm Review of Resource Files

Wednesday, October 6, 2010

8:30 am – 11:00 am	<u>Review of Resource Files and Report Preparation</u>
11:00 am – 12:00 pm	<u>Working Lunch and Executive Session</u>
12:00 pm – 12:45 pm	<u>Exit Interview</u> Sally Mason John Keller Kathy Andrews Mary Aquilino Chris Atchison Leon Burmeister Kathryn Chaloner Ann Coady Sue Curry Dan McMillan Keith Mueller Edith Parker Peter Thorne Jim Torner Tanya Uden-Holman Tom Vaughn