



# College of Public Health

## Accreditation Preliminary Self-study Prepared for the Council on Education for Public Health November 2017



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## FREQUENTLY USED ACRONYMS

ACE	Assessing the Classroom Environment
ACT	American College Testing
ADA	Americans with Disabilities Act
AIDS	Acquired Immune Deficiency Syndrome
APR	Academic and Professional Record
ASPPH	Association of Schools and Programs of Public Health
AY	Academic Year
BA	Bachelor of Arts
BIO	Department of Biostatistics
BLN	Business Leadership Network
BS	Bachelor of Science
CAHME	Commission of Accreditation of Healthcare Management Education
CBH	Department of Community and Behavioral Health
CCG	Collegiate Consulting Group
CDC	Centers for Disease Control and Prevention
CDE	Center for Diversity and Enrichment
CEPH	Council on Education for Public Health
CIEE	Council on International Educational Exchange
CITI	Certifications in Human Subjects Protections
CPH	College of Public Health
CPHSA	College of Public Health Student Association
CV	Curriculum Vitae
DAT	Dental Admissions Test
DCG	Departmental Consulting Group
DEO	Department Executive Officer
DSP	UI Division of Sponsored Programs
DVM	Doctor of Veterinary Medicine
EMHA	Executive Master of Health Administration
EPI	Department of Epidemiology
F&A	Facilities and Administrative Costs
FERPA	Family Educational Rights and Privacy Act
FY	Fiscal Year (July 1-June 30)

GEF	General Education Fund
GMAT	Graduate Management Admission Test
GPCAH	Great Plains Center for Agricultural Health
GRA	Grade Point Average
GRE	Graduate Records Examination
HIV	Human Immunodeficiency Virus
HMP	Department of Health Management and Policy
HRSA	Health Resources and Services Administration
ICON	Iowa Courses Online
IDPH	Iowa Department of Public Health
IIPHRP	Iowa Institute of Public Health Research and Policy
IPE	Interprofessional Education
IPHP	Institute of Public Health Practice
IRB	Institutional Review Board
ISIB	Iowa Summer Institute in Biostatistics
ISU	Iowa State University
IT	Information Technology
LGBT	Lesbian, Gay, Bisexual, and Transgender
LGBTQ	Lesbian, Gay, Bisexual, Transgender, and Queer
LSAT	Law School Admission Test
MAUI	Made at University of Iowa
MCAT	Medical College Admission Test
MHA	Master of Health Administration
MOU	Memorandum of Understanding
MPH	Master of Public Health
MPHTC	Midwestern Public Health Training Center
MS	Master of Science
NIOSH	National Institute for Occupational Safety and Health
OEH	Department of Occupational and Environmental Health
OVPR	UI Office of the Vice President for Research and Economic Development
PCAT	Pharmacy College Admission Test
PHAB	Public Health Accreditation Board
PhD	Doctor of Philosophy
RWJF	Robert Wood Johnson Foundation
SAMHSA	Substance Abuse and Mental Health Services Administration

SH	Semester Hour(s)
SHPEP	Summer Health Professions Education Program
SIPE	Students for Interprofessional Education
SIT	School for International Training
SOPHAS	Schools of Public Health Application Services
STEM	Science, Technology, Engineering and Mathematics
SWOT	Strengths, Weaknesses, Opportunities and Threats
TIPH	This Is Public Health
TOEFL	Testing of English as a Foreign Language
UI	University of Iowa
UIHC	University of Iowa Health Care
UIRIS	University of Iowa Research Information System
US	United States
VCAT	Veterinary College Admission Test

## **ELECTRONIC RESOURCE FILE LIST**

### **1.0 The School of Public Health**

#### 1.1 Mission

1.1.d FY2016-FY2020 CPH 5-Year Strategic Initiative Plan

#### 1.2 Evaluation

1.2.a FY2016 CPH Strategic Initiative Progress Report (FY2017 Progress Report will be included in final self-study)

#### 1.4 Organization and Administration

1.4.a CPH Organizational Chart FY2018

#### 1.5 Governance

1.5.a Charge and Membership of CPH Board of Advisors and CPH Committees and Councils

1.5.d List of Faculty Who Hold Membership on University Committees FY2018

1.5.c CPH Manual of Procedure

#### 1.7 Faculty and Other Resources

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- 2.9 Bachelor's Degree in Public Health
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  - 3.3 Workforce Development
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    - 3.3.b.2 Funded Training and Continuing Education Activities of All Primary Faculty FY2016-Fall 2017
- 4.0 Faculty, Staff and Students**
  - 4.1 Faculty Qualifications
    - 4.1.a Primary Faculty Curriculum Vitae (use bookmark in PDF to locate specific faculty)
  - 4.2 Faculty Policies and Procedures
    - 4.2.d.1 ACE Course Evaluation Questions
    - 4.2.d.2 Peer Evaluation of Teaching Form

## Introduction

The University of Iowa (UI), located in Iowa City, IA, is a comprehensive university with particular distinction in the arts, humanities and sciences, and with a wide array of exceptional graduate and professional programs. The UI developed the Public Health Initiative which led to the formation of the College of Public Health (CPH) in 1999. The CPH was the first new college established by the UI in more than 50 years. The CPH is one of eleven colleges on campus, five of which are deemed health sciences colleges (Dentistry, Medicine, Nursing, Pharmacy and Public Health).

The last Council on Education for Public Health (CEPH) re-accreditation of the CPH, for a maximum of seven years, was in 2011. Many changes have occurred since the last reaccreditation. The CPH moved into its new academic building in January of 2012. In the new CPH building each department has a dedicated suite for their faculty and staff that includes conference room space. The building also has classrooms (including two computer classrooms), auditoriums, small group rooms, two dedicated computer labs for students, and a student commons which was recently renovated and has space for individual study and collaborative work.

Although the CPH has always had a strong outreach component, it has increased its impact across the state even more during the past five years with the launch of several initiatives including the Business Leadership Network (BLN), which works with communities across Iowa to identify local public health needs through community forums and support for community grant projects. The CPH also initiated the Iowa Institute of Public Health Research and Policy (IIPHRP) which is designed to foster new collaborations within and outside of the UI by bringing together researchers, healthcare organizations, providers, citizens, community leaders, private partners and policy makers to help shape and inform public health policy. Finally, through the use of in-person and distance-learning delivery mechanisms, the CPH and its affiliated centers are providing continuing education/professional development to a diverse range of traditional and non-traditional public health and health practitioners; during the past three fiscal years, more than 60,000 participants completed trainings.

Student enrollment has also grown since the last reaccreditation with 484 graduate students enrolled in academic and professional degree programs in the Fall of 2017. Additionally, the CPH has expanded its degree programs including the Master of Science (MS) in Health Policy and multiple undergraduate to graduate degree options with students at the UI and three Iowa liberal arts colleges. Finally, the CPH launched an undergraduate program in the Fall of 2016, offering Bachelor of Arts (BA) and Bachelor of Science (BS) in Public Health degree options. Offering direct admission from high school and a mechanism for students already at the UI to join the major through standard admission; it is anticipated the program will continue to grow over time.

The College has continued our tradition of conducting interdisciplinary, rigorous, and high-impact research. Since the last reaccreditation we have initiated successful programs to support new faculty in launching their research programs, hosted annual visits from funding agencies that have led to research partnerships, and worked with other colleges and our Office of the Vice President for Research to foster new collaborations and team science projects. We have launched new programs, such as CPH Research Week, which celebrates our research success. These programs have helped us maintain an impressive track record of research productivity measured through external grants, publications, national leadership positions, and measurable impact of our research to improve health and well-being.

This self-study provides extensive details about the current status of the CPH and demonstrates how it meets the four criteria set forth by CEPH.

## 1.0 The School of Public Health

**1.1 Mission.** The school shall have a clearly formulated and publicly stated mission with supporting goals, objectives, and values.

### 1.1.a A clear and concise mission statement for the school as a whole.

The University of Iowa (UI) College of Public Health's (CPH) mission is: To promote health and to prevent injury and illness through commitment to education and training, excellence in research, innovation in policy development and devotion to public health practice.

### 1.1.b A statement of values that guides the school.

CPH core values reflect those of the UI: Excellence, Learning, Community, Diversity, Integrity, Respect, Responsibility and Social Justice. The CPH seeks to implement these values in ways that enhance the health and well-being of all Iowans, especially the most vulnerable segments of Iowa's population.

*Excellence.* The CPH is dedicated to the pursuit of excellence in public health scholarship, teaching, and community service.

*Learning.* The CPH is dedicated to the discovery and dissemination of knowledge that will improve the health status of all people, especially those with rural roots and experiences.

*Community.* The CPH is committed to collaboration and actively seeks to engage community partners in its education, research, and public service.

*Diversity.* Diversity is key to a vibrant intellectual environment. Respect for, and inclusion of, all persons and valuing their unique experiences and contributions is essential to achieving our mission.

*Integrity.* The CPH adheres to the highest standards of honesty, fairness, respect, and professional and scholarly ethics.

*Respect.* The CPH is committed to maintaining an environment that recognizes the inherent worth and dignity of every person and that fosters tolerance, sensitivity, understanding, and mutual respect.

*Responsibility.* The CPH is dedicated to the stewardship of all resources entrusted to it and fosters public policies that promote sustainability in all human activities, including environmental protection, agricultural production, economic development, and community health.

*Social Justice.* All activities within the CPH are motivated by a commitment to social equity and fairness, a spirit of compassion for all persons, and a desire to apply the tools of scientific knowledge to pressing societal health concerns. The College strives to improve the conditions in which everyone lives and thereby contribute to the formation of a just society.

**1.1.c One or more goal statements for each major function through which the school intends to attain its mission, including at a minimum, instruction, research and service.**

The CPH aspires to:

- Provide outstanding public health education in academic degree programs, certificates and continuous professional development.
- Conduct innovative, collaborative, interdisciplinary research that advances the knowledge base for public health theory, methods and practice.
- Enhance community health and improve quality-of-life in Iowa, nationally and internationally.

**1.1.d A set of measurable objectives with quantifiable indicators related to each goal statement as provided in Criterion 1.1.c. In some cases, qualitative indicators may be used as appropriate.**

In FY2016 the CPH adopted a new five-year strategic initiative plan (ERF 1.1.d) to meet its education, research and impact mission and goals. The current goals, strategies, objectives and outcome measures are in Table 1.1.d.

**Table 1.1.d: Goals, Strategies, Objectives and Outcome Measures FY2017**

Strategies	Objectives
<b>GOAL - EDUCATION:</b> Provide outstanding public health education in academic degree programs, certificates, and continuous professional development.	
<b>A curriculum of innovative, engaged teaching for undergraduates, masters, and doctoral students</b>	Develop undergraduate program curriculum
	Regularly communicate with UI leaders, CPH leaders, and CPH faculty, staff and students about the development of the undergraduate program
	Successfully recruit and enroll students in the undergraduate program
	Develop a plan for services in support of undergraduate student success
	Ensure certificate program curricula is consistent with curricula development and revisions
	Undergrad to Grad (U2G) program
	Enhance the MPH program
	Enhance academic degree program student experience
	Ensure faculty have the resources needed to be outstanding teachers and enhance student learning
	Provide graduate and professional students with opportunities for interaction across disciplines to enhance professional development
<b>Strong training and education programs for practicing professionals</b>	Continue and expand collaborative training programs
<b>The highest level of compliance with accreditation criteria</b>	Collegiate Accreditation
	MHA Program
	Industrial Hygiene Program
	Occupational Medicine Residency Program

Strategies	Objectives
<b>Sustained success in post-graduate placement</b>	Ensure graduate students attain career readiness skills needed to obtain post-graduate placement and succeed in their careers
	Expand and nurture relationships with employers
<b>EDUCATION OUTCOME MEASURES</b>	
<b>TARGET</b>	
<b>Student recruitment</b>	
Number of graduate student applications received (#)	Track
Graduate student yield rate (number of enrollees to the number of acceptances) (%)	60
<b>The quality of the students we attract</b>	
BA/BS ACT	26
BA/BS GPA	3.60
MHA GRE	305
MHA GPA	3.25
MPH GRE	305
MPH GPA	3.25
MS GRE	305
MS GPA	3.25
PhD GRE	305
PhD GPA	3.33
<b>Student enrollment</b>	
BA/BS direct admit student enrollment (#)	FY16 = NA FY17 = 32 FY18 = 34 FY19 = 42 FY20 = 47
BA/BS standard admit student enrollment (#)	FY16 = NA FY17 = NA FY18 = 18 FY19 = 35 FY20 = 60
MHA student enrollment (#)	74
MPH student enrollment (#)	185
MS student enrollment (#)	75
PhD student enrollment (#)	100
Graduate certificate in public health enrollment (#)	17
Undergraduate certificate in public health enrollment (#)	21
<b>Student funding</b>	
Funding support for full-time PhD students (%)	90
Students participating on funded research projects (#)	Track
<b>Student outcomes</b>	
FT MHA students graduating within 2 years (%)	80

EDUCATION OUTCOME MEASURES		TARGET
FT and PT MPH students graduating within 5 years (%)		80
MS students graduating within 3 years (%)		80
PhD students graduating within 7 years (%)		70
PhD degrees annually conferred (#)		20
All graduates with job placement (including internships & fellowships) at 12 months post-graduation or pursuing further education (%)		90
1 <sup>st</sup> year BA/BS student retention rate (%)		80
1 <sup>st</sup> year MHA student retention rate (%)		90
1 <sup>st</sup> year MPH student retention rate (%)		90
1 <sup>st</sup> year MS student retention rate (%)		90
1 <sup>st</sup> year PhD student retention rate (%)		90
Strategies	Objectives	
<b>GOAL - RESEARCH: Conduct innovative, collaborative, interdisciplinary research that advances the knowledge base for public health theory, methods, and practice.</b>		
<b>Robust and sustained collaborative research partnerships</b>	Build and sustain relationships with key stakeholders including business and industry, UI centers, colleges, research units, Institute for Clinical and Translational Science, cluster initiatives, state agencies, and community partners	
	Enhance research networks across CPH departments	
<b>Diversified funding of high impact research</b>	Build relationships with funding agencies	
	Expand public-private partnerships	
	Identify new avenues for conducting high impact public health activities	
	Stay abreast of compliance requirements	
<b>State-of-the-art research facilities</b>	Develop a CPH long-term research facility master plan	
	Construct or relocate selected labs	
	Identify funding sources for research lab build out and remodeling	
<b>Effective translation and dissemination of research results</b>	Target dissemination research results to peers, professionals, public, and policymakers	
	Promote research impact	
RESEARCH OUTCOME MEASURES		TARGET
Primary faculty as PI on funded grant		
% all faculty as PI		70
% faculty who have been here >3 years		100
<b>Applications</b>		
Total (#)		283
Direct (\$)		52,371,362
F&A (\$)		16,661,062
Total funding (\$)		69,032,424
<b>Applications by source</b>		

<b>RESEARCH OUTCOME MEASURES</b>	<b>TARGET</b>
NIH (#)	53
Direct (\$)	22,040,149
F&A (\$)	8,582,336
Total funding (\$)	30,622,485
Other federal (#)	54
Direct (\$)	15,648,075
F&A (\$)	3,930,255
Total funding (\$)	19,578,330
Non-federal (#)	175
Direct (\$)	14,680,936
F&A (\$)	4,148,470
Total funding (\$)	18,829,406
<b>Applications by type</b>	
New and competing (#)	155
Direct (\$)	24,584,091
F&A (\$)	7,371,673
Total funding (\$)	31,955,764
Non-competing renewal (#)	120
Direct (\$)	27,437,631
F&A (\$)	8,889,262
Total funding (\$)	36,326,893
<b>Awards</b>	
Total (#)	176
Direct (\$)	38,674,033
F&A (\$)	11,981,775
Total funding (\$)	50,655,808
<b>Awards by source</b>	
NIH (#)	28
Direct (\$)	16,489,398
F&A (\$)	6,230,846
Total funding (\$)	22,720,244
Other federal (#)	41
Direct (\$)	11,791,732
F&A (\$)	3,159,507
Total funding (\$)	14,951,239
Non-federal (#)	108
Direct (\$)	10,392,904
F&A (\$)	2,591,421
Total funding (\$)	12,984,325
<b>Awards by type</b>	
New and competing (#)	68

RESEARCH OUTCOME MEASURES		TARGET
Direct (\$)		11,889,289
F&A (\$)		3,760,316
Total funds (\$)		15,649,605
Non-competing renewal (#)		109
Renewal direct (\$)		26,784,744
F&A (\$)		8,221,458
Total funds (\$)		35,006,202
<b>Collaborations</b>		
Cross-departmental		
Grants (#)		44
All grants (%)		25
Total dollars (\$)		27,069,315
Total dollars (%)		53
Cross-Collegiate		
Grants (#)		44
All grants (%)		25
Total dollars (\$)		27,366,792
Total dollars (%)		54
External		
Grants (#)		35
All grants (%)		20
Total dollars (\$)		22,929,147
Total dollars (%)		45
Collaborative grants with CPH PI (#)		69
Collaborative grants with CPH PI (% of All Grants)		50
Collaborative grants with CPH Co-I (\$)		30,713,223
<b>Success rate</b>		
Submitted 2014 and funded by 6/30/2017		
Total (%)		65
NIH (%)		60
Other federal (%)		76
Non-federal (%)		77
Total new and competing only (%)		45
NIH new and competing only (%)		41
Other federal new and competing only (%)		64
Non-federal new and competing only (%)		44
<b>Strategies</b>		<b>Objectives</b>
<b>GOAL - IMPACT: Enhance community health and improve quality-of-life in Iowa, nationally, and internationally.</b>		
<b>Sustained recognition as a highly-sought resource</b>	Expand public-private partnerships for education and	

Strategies	Objectives
<b>for education, training, policy, and research</b>	research
	Disseminate high impact research results to multiple audiences (peers, professionals, policymakers, general public)
	Promote faculty recognition through nominations for national awards and national service
	Continue and expand collaborative training programs
<b>Awareness of and timely response to critical public health issues to inform decision-making</b>	Facilitate bringing together decision-makers with topic experts to address timely critical public health issues
<b>State-of-the-art communications that underscore the importance of public health</b>	Social media initiative
	Video storytelling initiative
	Ensure content of CPH website is current and website is user-friendly
<b>Strong engagement with practitioners, communities, organizations, and alumni</b>	Increase engagement of practitioners, community partners, organizations and alumni with the MPH program
	Continue to grow the Business Leadership Network
IMPACT OUTCOME MEASURES	TARGETS
Publications where authors are from different departments/colleges	250
Publications in peer reviewed journals	500
Publications in peer reviewed journals that include student authors (#)	Track
Number of times CPH-based publications referenced (using ISI Web of Knowledge reference tracking database) (#)	1000
Percent of faculty presenting at CE/professional development activities (%)	Track
Departmental, collegiate and university committees on which primary faculty serve (#)	Track
Primary faculty state, national and international leadership activities (#)	Track
Nominations of faculty for national awards (#)	Track
Nominations of faculty for fellow status in professional or scientific societies (#)	Track
Faculty nominated for honors and awards using AAU metric <sup>1</sup> (#)	4
Faculty receiving honors and awards using AAU metric <sup>1</sup> (#)	2
National Academy Members (NAM) (#)	7
Non-degree/continuing education activities (#)	20,000
Alumni participating in the collegiate online directory (%)	95%
CPH-funded faculty field experiences at global public health sites (#)	Track
CPH-funded student field experiences at global public health sites (#)	Track
Strategies	Objectives
<b>ALL GOALS - CROSS CUTTING: Our efforts in education, research, and impact are enhanced through</b>	

Strategies	Objectives
themes.	
<b>Best practices in collegiate governance, infrastructure support, and professional development</b>	Encourage quality teaching at all levels and in all formats
	Make appropriate use of faculty tracks
	Ensure college-wide committees are operating effectively and efficiently
	Evaluate opportunities to streamline functions across the college to increase efficiency
	Ensure sufficient infrastructure for educational programs
	Evaluate alternative models of faculty compensation and expectations
<b>Targeted growth in the number of faculty based on education, research, and service priorities</b>	Plan for new faculty hires
<b>An environment for all students, faculty, and staff that is supportive and rich in diversity and inclusion</b>	Participate in university-wide initiatives
	Maintain an active and engaged diversity committee
<b>Robust, focused, and sustained global partnerships</b>	Practicum and internship placements for CPH students
	Identify opportunities for increased global topics in our curricular content
	Highlight global health student learning opportunities for CPH students
	Identify opportunities for faculty, students and staff to engage in international activities
<b>Effective philanthropy that enhances collegiate resources</b>	Coordinate the We Are Phil campaign
	Enhance and expand outreach and engagement with alumni, non-alumni, non-profit organizations, and others
	Develop and implement fundraising strategy to support undergraduate program
	Identify and reach out to new prospects
<b>Creativity and collaboration in education, research, and service</b>	Incentivize aspirational and innovative research collaboration
	Promote collaborative and innovative teaching
<b>High-quality and diverse students, faculty, and staff</b>	Faculty, staff and student engagement and retention
<b>Strong engagement with alumni</b>	Further develop the CPH Alumni Advisory Council
	Sustain communication with alumni
	On-campus and national group and individual meetings with alumni
<b>CROSS CUTTING OUTCOME MEASURES</b>	
<b>TARGETS</b>	
<b>Fundraising</b>	
Fundraising campaign total (\$M/cumulative)	25
Gifts (\$M)	Track
Grants (\$M)	Track

CROSS CUTTING OUTCOME MEASURES	TARGETS
Philanthropic support total (\$M/fiscal year)	2
Gifts (\$)	Track
Grants (\$M)	
Alumni giving rate (%/fiscal year)	8
Funded undergraduate student scholarships	10
<b>Diversity</b>	
Minority undergraduate student enrollment (%)	Track
Minority graduate student enrollment (%)	16
Minority primary faculty (%)	16
Minority staff (%)	10
Minorities in executive or high-level administrative positions (%)	5
International graduate student enrollment (%)	12
Female primary faculty (%)	45
Females in executive or high-level administrative positions (%)	50
Conduct CPH diversity climate survey every 2 years (%)	Participation rate of 40%
<b>Faculty and Staff</b>	
Primary faculty as of June 30 (#)	Track
Secondary faculty as of June 30 (#)	Track
Adjunct faculty as of June 30 (#)	Track
<i>Teaching</i> adjunct, secondary, or other as of fall semester (#)	Track
Graduate & Professional student credit hours taught (#)	6900
Undergraduate student credit hours taught (#)	7150
Primary tenure-track faculty salary offset through external funding (%)	50
Research expenditures per full-time-equivalent faculty (\$)	500,000
Employee engagement survey conducted every 2 years by the UI (Working@Iowa); CPH results reviewed and recommendations implemented during following FY	Participation rate of 80%

<sup>1</sup>AAU metrics are used as a comparison to other AAU member institutions in regard to nominations to and receipt of highly prestigious honors and awards as identified by the National Academies. These awards are in the fields of arts and humanities; social sciences; physical sciences and engineering; and life sciences. A list of eligible awards can be found at: [http://sites.nationalacademies.org/pga/resdoc/pga\\_044718](http://sites.nationalacademies.org/pga/resdoc/pga_044718)

**1.1.e Description of the manner through which the mission, values, goals and objectives were developed, including a description of how various specific stakeholder groups were involved in their development.**

Prior to initiating the FY2016-FY2020 strategic planning process, the CPH's Executive Committee reviewed the process, format and implementation of the previous plan. The recommendations were to continue:

- The format (identify a set of strategies to achieve aspirational goals)
- Implementation approaches with the CPH Executive Committee serving as the Steering Committee
- Using annual work plans that outline objectives and tactics for each strategy
- Posting annual progress reports for each work plan

- Seeking broad input from faculty, staff, and students, the collegiate Board of Advisors, and internal and external collaborators and stakeholders

The timeline and steps involved in creating the strategic initiative are listed below:

- April 16, 2015 - Open forum #1 – focus on identifying Strengths, Weaknesses, Opportunities and Threats (SWOT) in the areas of education, research and impact
- April 20, 2015 – Open forum #2 – focus on identifying strategies (sustaining and incremental) that are important for achieving our aspirational goals in the areas of education, research, and impact
- April 21, 2015 – Discussion of strategic initiative FY2016-FY2020 at the collegiate Board of Advisors meeting
- May 7, 2015 – Open forum #3 – focus on identifying short-term (i.e., 1-year) objectives and tactics that provide forward momentum in achieving goals in the areas of education, research, and impact
- June-July, 2015 – Steering Committee synthesis of input from collegiate forums and Board of Advisors meeting to create a draft strategic plan
- August-September, 2015 – Draft strategic plan posted on the collegiate website for comments by faculty, staff, students, Board of Advisors members, and external collaborators and stakeholders
- October, 2015 – Revision of strategic plan based on comments received
- November-December, 2015 – formal adoption of strategic plan and presentation at open forum

### **Collegiate Forums**

A total of 125 faculty, staff and students and external collaborators and stakeholders participated in the three forums. Members of the Steering Committee served as facilitators and recorders. Participants worked in facilitated groups that rotated their focus across education, research and impact. Individuals who could not attend the forums were able to provide input through a web-based forum site or by e-mailing comments to the CPH Dean’s Office. The input received during the open forums is summarized below.

Our SWOT analysis shows that we have developed a very solid foundation on which to build, and that our future will be strongly influenced by our current strategic decisions. Our people are one of our important strengths and our collegiate community continues to grow. Although a relatively new college, we are well-regarded in research, education, and outreach; and we are well-regarded for our high impact, our collaboration, and our engaged approach. While we have made strides as a college, challenges in reducing departmental silos, improving facilities and space, increasing opportunities for students, and responding to a challenging workload remain.

We are well poised to compete in an increasingly competitive environment. Although we face uncertainty in the university, state, and federal leadership and political structures, we have opportunities to communicate our impact and value to bring more attention to our achievements. Engaging more partners to help tell our story will be an important activity as our CPH community of students, alumni, and partners expands. With a growing number of public health schools and programs, we will compete through the development of new and innovative educational programs and opportunities to increase engagement such as our new Iowa Institute of Public Health Research and Policy (IIPHRP) and the Business Leadership Network (BLN).

### **Comments Received from Faculty, Staff, Students and Stakeholders**

The strategic initiative was posted on our website and faculty, staff, students and stakeholders were invited to review the draft initiative and send comments by October 1, 2015. Comments received were positive and encouraged the college to be bold and innovative in its activities. Comments that included action-oriented ideas are addressed through objectives and tactics in our annual work plans.

### **Synthesis**

The Steering Committee met in June and July 2015 to review and synthesize the input from the forums and to develop a framework for the new strategic initiative. The Steering Committee revised the wording of the three aspirational goals and identified strategies in the areas of education, research, impact and those that were cross-cutting. Revision of the goals reflect the strong sentiment in the CPH that education reach a broad audience, that research be collaborative and interdisciplinary, and that the CPH have a broad impact on the health of all people. The objectives and strategies developed reflect the addition of new initiatives underway in the CPH such as the implementation of a new undergraduate program, the need for more student professional development activities, activities of the IIPHRP and increased entrepreneurship in research.

#### **1.1.f Description of how the mission, values, goals and objectives are made available to the school's constituent groups, including the general public, and how they are routinely reviewed and revised to ensure relevance.**

The strategic initiative, current work plan and progress reports are posted on the collegiate website (<https://www.public-health.uiowa.edu/strategic-plan/>). In addition, progress towards our goals are reported during the annual State-of-the-College to CPH faculty, staff and students and to our Board of Advisors during their fall meeting. Strategic initiatives are also discussed with the College of Public Health Student Association (CPHSA), CPH Faculty Council, CPH Research Council and CPH Staff Council each semester by the dean.

Annual progress is assessed both with regard to achievement of annual work plan objectives and measurable outcomes by the CPH Executive Committee. The work plan is reviewed throughout the year by the CPH Executive Committee to assess progress and to also determine if changes need to be made. A comprehensive review of the work plan is made annually at the beginning of each fiscal year by the CPH Executive Committee. Changes are made based on which objectives and strategies are completed and if there are new initiatives within the CPH. Changes can also occur as input is received by faculty, staff, students and constituent groups.

#### **1.1.g Assessment of the extent to which this criterion is met.**

This criterion is met.

### ***Strengths***

- The CPH has a clear, concise mission statement, values and goals and measurable objectives in the areas of education, research and impact. The mission, values, goals, and objectives incorporate public health values, concepts and approaches.
- The FY2016–FY2020 strategic planning process was inclusive with internal and external groups participating.
- The CPH annual work plan is a “living” document that is revised as needed to reflect new initiatives and priorities.

- Progress updates on strategic planning and implementation are provided to all CPH faculty, staff and students through open forums, meetings with constituent groups throughout the year and the CPH website.

***Weaknesses***

- The CPH's current strategic plan does not align with the new format of the UI Strategic Plan 2016-2021.

***Plans***

- The CPH will continue to review the format of its strategic plan to ensure it continues to align with the priorities and goals of the UI.
- The CPH will continue to make modifications to its work plan based on new initiatives and priorities.

**1.2 Evaluation.** The school shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the school's effectiveness in serving its various constituencies; and for using evaluation results in ongoing planning and decision making to achieve its mission. As part of the evaluation process, the school must conduct an analytical self-study that analyzes performance against the accreditation criteria defined in the document.

**1.2.a Description of the evaluation processes used to monitor progress against objectives defined in Criterion 1.1.d, including identification of the data systems and responsible parties associated with each objective and with the evaluation process as a whole. If these are common across all objectives, they need be described only once. If systems and responsible parties vary by objective or topic area, sufficient information must be provided to identify the systems and responsible party for each.**

Annual progress is assessed both with regard to achievement of annual work plan objectives and measurable outcomes by the CPH Executive Committee (ERF 1.2.a). Objectives and outcome measure have one or more members of the CPH Executive Committee accountable for reporting progress which is done throughout the year during CPH Executive Committee meetings and more comprehensively annually during the development of a new fiscal year work plan. The various data sources used and parties responsible are identified below by topic area in Table 1.2.a.

**Table 1.2.a: CPH Strategic Initiative Data Sources and Responsible Party by Topic Area FY2017**

Topic Area	Data Source Primarily Used	Responsible
Education	APR (Academic Professional Record is a database used for tracking information for faculty curriculum vitae and other data reports) BGI (UI Center for Advancement database used for tracking philanthropy, including scholarship funding) CPH Postgraduate Survey Results HAMPCAS (a centralized application service for health administration) MAUI (a UI-specific student enrollment program) SOPHAS (a centralized application service for public health) HRIS (Human Resource Information System) UI Course Catalog UI Registrar's Office	Director, Undergraduate Programs Director, MPH Program Associate Dean for Academic Affairs
Research	UIRIS (a UI-specific research information system)	Associate Dean for Research
Impact	APR (Academic Professional Record is a database used for tracking information for faculty curriculum vitae and other data reports) CPH-specific Online Alumni Directory Global Public Health Committee Records Institute of Public Health Practice (IPHP) Learning Management System ISI Web of Knowledge (a reference tracking database)	Associate Dean for Faculty Director, Communications and External Relations Chair, Global Public Health Committee Associate Dean for Academic Affairs
Cross-cutting	APR (Academic Professional Record is a database used for tracking information for faculty curriculum vitae and other data reports) BGI (UI Center for Advancement database used for tracking philanthropy, including scholarship funding) HRIS (Human Resource Information System) Iowa Scholarship Portal	Associate Dean for Administration Associate Dean for Faculty Director of Development Associate Dean for Academic Affairs

Topic Area	Data Source Primarily Used	Responsible
	MAUI (a UI-specific student enrollment program) ProView (Provost Data Warehouse Student Information System) SERU (student experience in the research university database) UI Human Resources Working@Iowa Survey Results UIRIS (a UI-specific research information system)	

**1.2.b Description of how the results of the evaluation processes described in Criterion 1.2.a are monitored, analyzed, communicated and regularly used by managers responsible for enhancing the quality of programs and activities.**

When the annual progress report is complete and reviewed by those responsible, the CPH Executive Committee analyzes the data and makes changes to its strategies, objectives and tactics for the next fiscal year’s (FY) work plan to address any concerns or new opportunities. The new FY work plan is discussed at length early in the fall semester by the CPH Executive Committee and is posted on the CPH website. If major changes are made they are discussed during an open forum for CPH faculty, staff and students or via email if more urgent.

Some examples of how the results of the evaluation process is used by managers includes:

- The CPH Office of Academic Affairs monitors graduation rates for CPH academic and professional degree programs. In reviewing the data it was determined that tracking the retention rates between the first and second year of study would provide more timely data regarding progression of students. These indicators were added to the outcome measure table for both undergraduate and graduate students.
- CPH faculty routinely make visits to funding agencies to further strengthen relationships and in turn increase opportunity for funding. Funding agency leaders are also invited to the CPH to interact with our faculty and students. CPH strategic plan outcome measures is an important tool used in building our research capacity by identifying gaps in support and training, facilitating opportunities for collaborations and publicizing and celebrating our successes. We use this measure to identify which funding agencies are a priority for faculty and students to interact with during the next fiscal year.
- In Spring 2016, the CPH Faculty Affairs Office used faculty data to develop a system for promoting award opportunities and for providing resources to complete the award nomination packets. This process was successfully piloted in the Spring of 2016 at the UI-level and will be fully implemented in FY2018.

**1.2.c Data regarding the school’s performance on each measurable objective described in Criterion 1.1.d must be provided for each of the last three years. To the extent that these data duplicate those required under other criteria (eg, 1.6, 1.7, 1.8, 2.7, 3.1, 3.2, 3.3, 4.1 and 4.3), the school should parenthetically identify the criteria where the data also appear.**

In addition to our strategic initiative’s sustaining and incremental strategies, objectives and tactics, the outcome measures below are used as general indicators to assess our educational, research and impact goals and ensures the balance of people, culture, priorities and infrastructure.

**Table 2.1.c: Measurable Outcome Objectives FY2015 to FY2017 (NA=Measure not tracked due to change in outcome measure with implementation of new FY2016 strategic initiative plan; data not available for undergraduate program which began in FY2017)**

Outcome Measures	Target	FY2015	FY2016	FY2017
<b>EDUCATION: Provide outstanding public health education in academic degree programs, certificates, and continuous professional development.</b>				
<b>Student recruitment</b>				
Number of graduate student applications received (#) <i>(Criterion 4.3.f)</i>	Track	443	467	445
Graduate student yield rate (number of enrollees to the number of acceptances) (%) <i>(Criterion 4.3.f)</i>	60	54	59	63
<b>The quality of the students we attract</b>				
BA/BS ACT <i>(Criterion 4.3.f)</i>	26	NA	NA	27.54
BA/BS GPA <i>(Criterion 4.3.f)</i>	3.60	NA	NA	3.46
MHA GRE <i>(Criterion 4.3.f)</i>	305	306	305	308
MHA GPA <i>(Criterion 4.3.f)</i>	3.25	3.49	3.45	3.43
MPH GRE <i>(Criterion 4.3.f)</i>	305	307	307	306
MPH GPA <i>(Criterion 4.3.f)</i>	3.25	3.51	3.44	3.46
MS GRE <i>(Criterion 4.3.f)</i>	305	313	311	308
MS GPA <i>(Criterion 4.3.f)</i>	3.25	3.43	3.51	3.52
PhD GRE <i>(Criterion 4.3.f)</i>	305	313	311	311
PhD GPA <i>(Criterion 4.3.f)</i>	3.33	3.75	3.55	3.67
<b>Student enrollment</b>				
BA/BS direct admit student enrollment (#)	FY16 = NA FY17 = 32 FY18 = 34 FY19 = 42 FY20 = 47	NA	NA	32
BA/BS standard admit student enrollment (#)	FY16 = NA FY17 = NA FY18 = 18 FY19 = 35 FY20 = 60	NA	NA	NA
MHA student enrollment (#)	74	72	77	76
MPH student enrollment (#)	185	182	185	177
MS student enrollment (#)	75	75	67	66
PhD student enrollment (#)	100	86	97	94
Graduate certificate in public health enrollment (#)	Track	39	17	13
Undergraduate certificate in public health enrollment (#)	Track	NA	21	23
<b>Student funding</b>				
Funding support for full-time PhD students (%) <i>(Criterion 3.1.d)</i>	90	96	96	96
Students participating on funded research projects (#) <i>(Criterion 3.1.d)</i>	Track	NA	170	200

Outcome Measures	Target	FY2015	FY2016	FY2017
<b>Student outcomes</b>				
FT MHA students graduating within 2 years (%)	80	100	86	96
FT and PT MPH students graduating within 5 years (%)	80	82	94	70
MS students graduating within 3 years (%)	80	79	81	81
PhD students graduating within 7 years (%)	70	92	50	86
PhD degrees annually conferred (#)	20	NA	22	12
All graduates with job placement (including internships & fellowships) at 12 months post-graduation or pursuing further education (%)	90	97	92	98
1 <sup>st</sup> year BA/BS student retention rate (%)	80	NA	NA	NA
1 <sup>st</sup> year MHA student retention rate (%)	90	NA	92	96
1 <sup>st</sup> year MPH student retention rate (%)	90	NA	95	92
1 <sup>st</sup> year MS student retention rate (%)	90	NA	97	90
1 <sup>st</sup> year PhD student retention rate (%)	90	NA	90	97
<b>RESEARCH: Conduct innovative, collaborative, interdisciplinary research that advances the knowledge base for public health theory, methods, and practice.</b>				
Primary faculty as PI on funded grant				
% all faculty as PI	70	58	62	66
% faculty who have been here >3 years	100	NA	67	57
<b>Applications</b>				
Total (#)	283	236	252	323
Direct (\$)	52,371,362	49,175,375	43,504,913	46,494,131
F&A (\$)	16,661,062	15,656,442	14,777,567	15,292,872
Total funding (\$)	69,032,424	64,831,817	58,282,480	61,787,003
<b>Applications by source</b>				
NIH (#)	53	48	44	65
Direct (\$)	22,040,149	17,233,415	18,447,546	17,651,861
F&A (\$)	8,582,336	7,731,336	7,395,315	7,515,888
Total funding (\$)	30,622,485	24,964,751	25,842,861	25,167,749
Other federal (#)	54	49	52	61
Direct (\$)	15,648,075	17,507,664	13,803,357	13,659,924
F&A (\$)	3,930,255	3,843,396	3,720,304	3,766,280
Total funding (\$)	19,578,330	21,351,060	17,523,661	17,426,204
Non-federal (#)	175	139	156	197
Direct (\$)	14,680,936	14,434,296	11,254,010	15,182,345
F&A (\$)	4,148,470	4,081,710	3,661,948	4,010,704
Total funding (\$)	18,829,406	18,516,006	14,915,958	19,193,050
<b>Applications by type</b>				
New and competing (#)	155	147	128	158

Outcome Measures	Target	FY2015	FY2016	FY2017
Direct (\$)	24,584,091	27,604,847	20,615,580	17,144,290
F&A (\$)	7,371,673	8,467,291	7,251,195	6,049,659
Total funding (\$)	31,955,764	36,072,138	27,866,775	23,193,949
Non-competing renewal (#)	120	89	124	165
Direct (\$)	27,437,631	21,570,528	22,889,333	29,349,841
F&A (\$)	8,889,262	7,189,151	7,526,372	9,243,213
Total funding (\$)	36,326,893	28,759,679	30,415,705	38,593,054
<b>Awards</b>				
Total (#) ( <i>Criterion 3.1.d</i> )	176	155	182	235
Direct (\$)	38,674,033	39,818,881	31,225,224	29,233,313
F&A (\$)	11,981,775	11,052,649	10,655,417	8,851,826
Total funding (\$) ( <i>Criterion 1.6.d; Criterion 1.7.i; Criterion 3.1.d</i> )	50,655,808	50,871,530	41,880,642	38,085,140
<b>Awards by source</b>				
NIH (#) ( <i>Criterion 3.1.d</i> )	28	24	20	29
Direct (\$)	16,489,398	14,683,672	12,851,839	9,073,435
F&A (\$)	6,230,846	4,537,706	5,535,514	3,761,452
Total funding (\$) ( <i>Criterion 3.1.d</i> )	22,720,244	19,221,378	18,387,353	12,834,888
Other federal (#) ( <i>Criterion 3.1.d</i> )	41	38	43	50
Direct (\$)	11,791,732	11,408,973	10,657,192	9,813,610
F&A (\$)	3,159,507	2,806,671	3,075,346	2,502,818
Total funding (\$) ( <i>Criterion 3.1.d</i> )	14,951,239	14,215,644	13,732,538	12,316,428
Non-federal (#) ( <i>Criterion 3.1.d</i> )	108	93	119	156
Direct (\$)	10,392,904	13,726,236	7,716,194	10,346,268
F&A (\$)	2,591,421	3,708,272	2,044,557	2,587,556
Total funding (\$) ( <i>Criterion 3.1.d</i> )	12,984,325	17,434,508	9,760,751	12,933,824
<b>Awards by type</b>				
New and competing (#)	68	71	65	90
Direct (\$)	11,889,289	12,458,926	7,036,421	9,968,159
F&A (\$)	3,760,316	3,338,763	2,230,912	3,190,328
Total funds (\$)	15,649,605	15,797,689	9,267,332	13,158,487
Non-competing renewal (#)	109	84	117	145
Renewal direct (\$)	26,784,744	27,359,956	24,188,804	19,265,154
F&A (\$)	8,221,458	7,713,885	8,424,505	5,661,499
Total funds (\$)	35,006,202	35,073,841	32,613,309	24,926,652
<b>Collaborations</b>				
Cross-departmental				
Grants (#) ( <i>Criterion 3.1.d</i> )	44	42	37	33
All grants (%)	25	27	20	14
Total dollars (\$) ( <i>Criterion 3.1.d</i> )	27,069,315	36,229,959	18,367,904	16,452,311
Total dollars (%)	53	71	44	43

Outcome Measures	Target	FY2015	FY2016	FY2017
<b>Cross-Collegiate</b>				
Grants (#) ( <i>Criterion 3.1.d</i> )	44	28	28	26
All grants (%)	25	20	15	11
Total dollars (\$) ( <i>Criterion 3.1.d</i> )	27,366,792	31,788,413	16,795,498	15,008,787
Total dollars (%)	54	62	40	39
<b>External</b>				
Grants (#) ( <i>Criterion 3.1.d</i> )	35	21	25	20
All grants (%)	20	14	14	9
Total dollars (\$) ( <i>Criterion 3.1.d</i> )	22,929,147	16,554,633	24,282,166	13,506,743
Total dollars (%)	45	33	58	35
Collaborative grants with CPH PI (#) ( <i>Criterion 3.1.d</i> )	69	62	81	45
Collaborative grants with CPH PI (% of All Grants) ( <i>Criterion 3.1.d</i> )	50	40	45	19
Collaborative grants with CPH Co-I (\$) ( <i>Criterion 3.1.d</i> )	30,713,223	NA	32,329,708	23,680,991
<b>Success rate</b>				
<b>Submitted 2013 and funded by 6/30/2016</b>				
Total (%)	65	NA	65	
NIH (%)	60	NA	68	
Other federal (%)	76	NA	83	
Non-federal (%)	77	NA	61	
Total new and competing only (%)	45	NA	45	
NIH new and competing only (%)	41	NA	41	
Other federal new and competing only (%)	64	NA	64	
Non-federal new and competing only (%)	44	NA	44	
<b>Submitted 2014 and funded by 6/30/2017</b>				
Total (%)	65	NA	NA	64
NIH (%)	60	NA	NA	48
Other federal (%)	76	NA	NA	70
Non-federal (%)	77	NA	NA	68
Total new and competing only (%)	45	NA	NA	44
NIH new and competing only (%)	41	NA	NA	8
Other federal new and competing only (%)	64	NA	NA	47
Non-federal new and competing only (%)	44	NA	NA	53
<b>IMPACT: Enhance community health and improve quality-of-life in Iowa, nationally, and internationally.</b>				
Publications where authors are from different departments/colleges ( <i>Criterion 4.1.d</i> )	250	196	188	165
Publications in peer reviewed journals ( <i>Criterion 3.1.d; Criterion 4.1.d</i> )	500	449	453	427
Publications in peer reviewed journals that include student authors (#) ( <i>Criterion 3.1.d; Criterion 4.1.d</i> )	Track	NA	159	112

Outcome Measures	Target	FY2015	FY2016	FY2017
Number of times CPH-based publications referenced (using ISI Web of Knowledge reference tracking database) (#) ( <i>Criterion 3.1.d; Criterion 4.1.d</i> )	1000	802	989	1006
Percent of faculty presenting at CE/professional development activities (%) ( <i>Criterion 4.1.d</i> )	Track	10	26	29
Departmental, collegiate and university committees on which primary faculty serve (#) ( <i>Criterion 3.2.d; Criterion 4.1.d</i> )	Track	NA	415	540
Primary faculty state, national and international leadership activities (#) ( <i>Criterion 3.2.d; Criterion 4.1.d</i> )	Track	NA	191	195
Nominations of faculty for national awards (#) ( <i>Criterion 4.1.d</i> )	Track	NA	3	3
Nominations of faculty for fellow status in professional or scientific societies (#) ( <i>Criterion 4.1.d</i> )	Track	NA	3	1
Faculty nominated for honors and awards using AAU metric <sup>1</sup> (#)	4	NA	0	0
Faculty receiving honors and awards using AAU metric <sup>1</sup> (#)	2	NA	0	0
National Academy Members (NAM) (#) ( <i>Criterion 4.1.d</i> )	7	3	3	3
Non-degree/continuing education activities (#)	20,000	19,499	19,229	>26,000
Alumni participating in the collegiate online directory (%)	95%	NA	NA	96
CPH-funded faculty field experiences at global public health sites (#)	Track	NA	5	2
CPH-funded student field experiences at global public health sites (#)	Track	NA	3	3
<b>CROSS CUTTING: Our efforts in education, research, and impact are enhanced through themes.</b>				
<b>Fundraising</b>				
Fundraising campaign total (\$M/cumulative) ( <i>Criterion 1.6.d; Criterion 1.7.i</i> )	25	27.9	37.26	40.05
Gifts (\$M)	Track	NA	17.26	18.00
Grants (\$M)	Track	NA	20	22.60
Philanthropic support total (\$M/fiscal year)	2	NA	2.63	3.60
Gifts (\$)	Track	NA	427,321	1,040,000
Grants (\$M)	Track	NA	2.2	2.56
Alumni giving rate (%/fiscal year) ( <i>Criterion 1.6.d</i> )	8	NA	5	5
Funded undergraduate student scholarships	10	NA	6	6
<b>Diversity</b>				
Minority undergraduate student enrollment (%) ( <i>Criterion 1.8.e</i> )	Track	NA	NA	37.5
Minority graduate student enrollment (%) ( <i>Criterion 1.8.e</i> )	16	16	19	20
Minority primary faculty (%) ( <i>Criterion 1.8.e</i> )	16	NA	17	14
Minority staff (%) ( <i>Criterion 1.8.e</i> )	10	10	9	9

Outcome Measures	Target	FY2015	FY2016	FY2017
Minorities in executive or high-level administrative positions (%) ( <i>Criterion 1.8.e</i> )	5	2	2	4
International graduate student enrollment (%) ( <i>Criterion 1.8.e</i> )	12	10	9	9
Female primary faculty (%) ( <i>Criterion 1.8.e</i> )	45	NA	43	41
Females in executive or high-level administrative positions (%) ( <i>Criterion 1.8.e</i> )	50	46	54	54
Conduct CPH diversity climate survey every 2 years (%) ( <i>Criterion 1.8.e</i> )	Participation rate of 40%	NA	21	NA
<b>Faculty and Staff</b>				
Primary faculty as of June 30 (#) ( <i>Criterion 1.7.i</i> )	Track	NA	BIO=13 CBH=11 EPI=19 HMP=18 OEH=20 TOTAL=81	BIO=14 CBH=10 EPI=19 HMP=18 OEH=18 TOTAL=79
Secondary faculty as of June 30 (#)	Track	NA	58	59
Adjunct faculty as of June 30 (#)	Track	NA	82	87
<b>Teaching</b> adjunct, secondary, or other as of fall semester (#)	Track	25	24	31
Graduate & Professional student credit hours taught (#) ( <i>Criterion 1.6.d; Criterion 1.7.i</i> )	6900	NA	6872	6906
Undergraduate student credit hours taught (#) ( <i>Criterion 1.6.d; Criterion 1.7.i</i> )	7150	NA	1677	2325
Primary tenure-track faculty salary offset through external funding (%) ( <i>Criterion 1.6.d</i> )	50	54	58	60
Research expenditures per full-time-equivalent faculty (\$) ( <i>Criterion 1.6.d; Criterion 1.7.i</i> )	500,000	578,076	535,847	572,782
Employee engagement survey conducted every 2 years by the UI (Working@Iowa); CPH results reviewed and recommendations implemented during following FY	Participation rate of 80%	NA	NA	83

<sup>1</sup>AAU metrics are used as a comparison to other AAU member institutions in regard to nominations to and receipt of highly prestigious honors and awards as identified by the National Academies. These awards are in the fields of arts and humanities; social sciences; physical sciences and engineering; and life sciences. A list of eligible awards can be found at: [http://sites.nationalacademies.org/pga/resdoc/pga\\_044718](http://sites.nationalacademies.org/pga/resdoc/pga_044718)

**1.2.d Description of the manner in which the self-study document was developed, including effective opportunities for input by important school constituents, including institutional officers, administrative staff, faculty, students, alumni and representatives of the public health community.**

The self-study was developed by the CPH Steering Committee with input opportunities from faculty, staff, students, external stakeholders and the UI Office of the Provost. An open forum was held on October 23, 2017 for CPH faculty, staff and students to participate in an information sharing session to assist with the completion of the self-study on select topic areas. There were 75 faculty, staff and students that participated. The preliminary self-study was posted for comment on the CPH website and third party comments about the college's programs practices and procedures were solicited from faculty, staff, students, alumni, the practice community and other interested

parties. Solicitation was sought via the CPH News Digest (faculty, staff, students, alumni), Iowa Department of Public Health Newsletter (practice community), CPH Board of Advisors (governance, alumni, practice community), Insight newsletter (faculty, staff, alumni, practice community, key stakeholders), Iowa Public Health Association members (practice community), and Business Leadership Network members (practice community). In addition, CPH faculty, staff, and students; CPH faculty, research, staff, alumni and student advisory councils; CPH Curriculum, MPH Program, and Undergraduate Program Committees; and the UI Executive Vice President and Provost were asked to review and comment on the entire self-study or relevant sections.

**Timeline**

Oct 2016	Discuss/adopt draft accreditation process and timeline at CPH faculty meeting
Oct-Dec 2016	Data collection
Jan-July 2017	Work on draft self-study with input from small workgroups and steering committee as needed
July 2017	Rough draft of self-study completed for consultation visit
Aug 2017	Consultation visit
Sept-Oct 2017	Faculty, staff, and student forums
Nov 1-15 2017	Steering Committee asked to review sections of preliminary self-study
Nov 27 2017	Preliminary self-study due
Jan 25 2018	Preliminary self-study comments back from CEPH
Feb 1 2018	Preliminary self-study posted for third party comment
Feb 2018	Opportunity for third-party comments announced
Feb-Mar 2018	Targeted CPH audiences asked to review entire self-study or relevant sections
Feb-Mar 2018	All comments received from CEPH, CPH faculty, staff, students, external stakeholders, and UI Office of the Provost will be addressed in final self-study
Mar 26 2018	Final self-study due and posted for comment
Apr 9-13 2018	Mock site visit scheduled
Apr 25-27 2018	Site visit
Fall 2018	Board meets for decision about accreditation

**1.2.e Assessment of the extent to which this criterion is met.**

This criterion is met.

***Strengths***

- The school has a process for reviewing progress against goals and objectives in its strategic plan and adjusts measures as needed to reflect new initiatives or programmatic changes.
- The strategic plan includes measurable and trackable outcome measures.

***Weaknesses***

- Although the college collects a great deal of data as part of its continuous quality improvement efforts, there has not been a centralized effort to ensure consistent and timely data monitoring and assessment.

***Plans***

- The college created and filled a new position for a Program Assessment and Evaluation Coordinator who will focus on evaluation, data collection, analysis and planning.

**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.

**1.3.a A brief description of the institution in which the school is located, and the names of accrediting bodies (other than CEPH) to which the institution responds.**

The UI is a comprehensive research university with particular distinction in the arts, humanities and sciences, and a wide array of exceptional professional programs. While serving as the state’s most comprehensive institution of higher education, the UI enjoys a national and international reputation for excellence and competes at that level for the best faculty and the most talented students.

The UI was founded in 1847 and carries out its academic mission primarily through its 11 colleges, which offer undergraduate and graduate education, professional education, and education and training in the health sciences. There are >33,000 students (25,000 undergraduate; 7500 graduate; 1300 postgraduate) from 114 countries and all 50 states with a 16:1 student-to-faculty ratio and 78% of classes having fewer than 30 students. It is ranked 31 among the Best Public Universities by US News and World Report.

The UI is one of three universities governed by the Board of Regents, State of Iowa. It participates in shared governance by the UI Student Government; UI Executive Council of Graduate and Professional Students; UI Faculty Senate; UI Staff Council; and many UI Charter Committees. Accrediting bodies that the UI responds to are listed in Table 1.3.a.

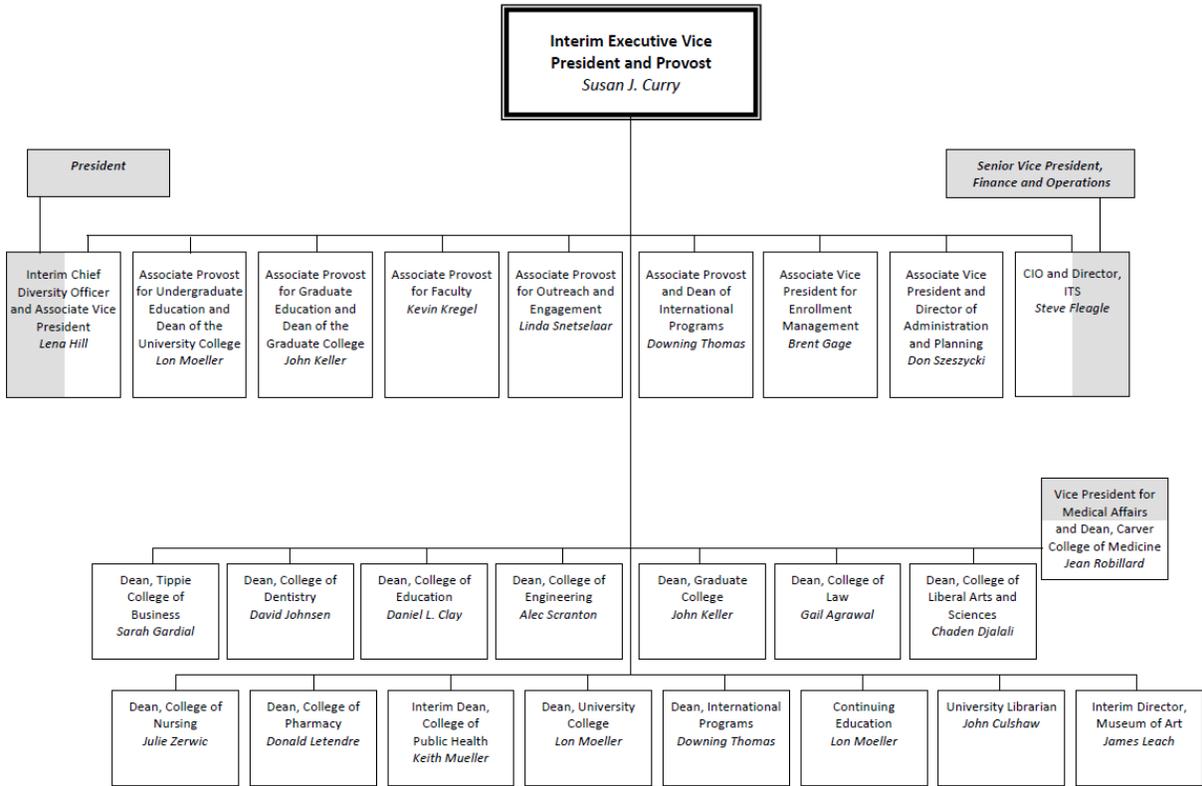
**Table 1.3.a: Current Accrediting Bodies at the UI**

Accrediting Agencies	
Accreditation Board of Engineering and Technology	Council for Accreditation of Counseling and Related Educational Programs
Accreditation Council for Pharmacy Education	Council of Accreditation of Nurse Anesthesia Education Program
Accrediting Council on Education in Journalism and Mass Communications	Council on Rehabilitation Education
American Association of Museums	Council on Social Work Education
American Bar Association	Higher Learning Commission
American Dietetic Association	Iowa Board of Nursing
American Library Association Committee on Accreditation	Iowa State Board of Education
American Psychological Association	Iowa State Board of Nursing
American Psychological Association Commission on Accreditation	Joint Commission on Accreditation of Healthcare Organizations
American Speech-Language-Hearing Association	Joint Review Committee on Educational Programs in Nuclear Medicine
Association to Advance Collegiate Schools of Business)	Joint Review Committee on Educational Programs in Radiologic Technology
Commission on Accreditation of Health Management Executives	Liaison Committee on Medical Education
Commission on Accreditation in Physical Therapy Education	National Accrediting Agency for Clinical Laboratory Sciences

Accrediting Agencies	
Commission on Accreditation of Allied Health Education Programs	National Association of Schools of Dance
Commission on Accreditation of Allied Health Education Programs	National Association of Schools of Music
Commission on Accreditation of Athletic Training Education	National Association of Schools of Theatre
Commission on Collegiate Nursing Education	National Collegiate Athletic Association
Commission on Dental Accreditation	National Recreation & Park Association
Commission on English Language Program Accreditation	Psychological Clinical Science Accreditation System

**1.3.b One or more organizational charts of the university indicating the school’s relationship to the other components of the institution, including reporting lines.**

**Figure 1.3.b: The UI Office of the Executive Vice President and Provost Organizational Chart**



**1.3.c Description of the school’s level of autonomy and authority regarding the following:**

**i. Budgetary authority and decisions relating to resource allocation**

The dean in collaboration with the CPH Executive Committee is responsible for developing and presenting the annual budget request to UI Central Administration. UI Central Administration

determines the amount the CPH receives from the General Education Fund (GEF) based on the previous year's allocation with possible addition and/or subtraction of recurring and non-recurring funds based on tuition and fee generation and F&A (Facilities and Administrative Costs) recoveries.

The dean and associate dean for administration meet with each Department Executive Officer (DEO) and their departmental administrator annually to review the total department budget for the next fiscal year, including GEF funds, grants and contracts and discretionary accounts. DEOs can also present proposals for additional non-recurring funding as needed. Faculty recruitment proposals are also submitted and considered at this time. The dean and associate dean for administration also meet with the associate dean for academic affairs to discuss the budget related to instructional programs. The budget is also reviewed with the Master of Public Health (MPH) and undergraduate program directors.

As new sources of funding become available, such as non-recurring funds in the form of philanthropy, special purpose appropriations or new tuition revenue, the dean in consult with the CPH Executive Committee will direct resources to current or new initiatives. The dean also consults with faculty, staff and students, as warranted, during departmental and collegiate faculty meetings and open forums.

## **ii. Lines of accountability, including access to higher-level university officials**

The UI CPH is one of eleven equal colleges, five of which are deemed health science colleges (Dentistry, Medicine, Nursing, Pharmacy and Public Health). The deans of the eleven colleges report directly to the executive vice president and provost who oversees the UI's academic programs, faculty matters, outreach and engagement, diversity, international programs, continuing education and information and resource management. The provost has leadership responsibilities for the Council of Deans (all collegiate deans are members) and for the Health Sciences Policy Council (the five health science deans are members). The CPH routinely meets with the provost on matters related to budgets, faculty recruitment, promotion and tenure, strategic planning, information technology (IT) and undergraduate and graduate programs.

The 11 colleges also have indirect relationships with the vice presidents at the UI (who report directly to the president):

The vice president for research and economic development provides support and advancement of research, scholarship and creative activity on campus. The college collaborates with the vice president on research compliance issues, interdisciplinary research initiatives, managing entrepreneurship activities and intellectual property, and oversight of research facility renovation.

The vice president for student life fosters student success by creating and promoting inclusive educationally purposeful services and activities within and beyond the classroom. Its priorities are health and safety, multiculturalism, and student leadership development. With the CPH implementation of the undergraduate program, the college will continue to increase its interaction with this office particularly in the areas of multiculturalism and diversity, alcohol harm reduction and anti-violence plans.

The senior vice president for finance and operations is responsible for services to the campus in the areas of business, finance, public safety, and facilities. The college works with the senior vice president on the planning and financing of new academic and research facilities, extensive

renovation of its occupied space, and financing of large initiatives such as the undergraduate program.

The vice president for medical affairs and dean of the Carver College of Medicine is responsible for integrated planning and operations for University of Iowa Health Care (UIHC) which is comprised of UIHC, the Carver College of Medicine and UI Physicians, the state's largest multi-specialty physician group practice. The CPH collaborates with these units to enhance its education and research activities.

The vice president for legal affairs and general counsel advises and represents the UI and its faculty, staff and students in matters related to their employment in accord with the myriad legal and policy requirements needed to assist in the fulfillment of the UI educational, research, and service missions. The CPH utilizes the general counsel on review of legal documents such as memorandum of understandings (MOU) and contracts.

### **iii. Personnel recruitment, selection and advancement, including faculty and staff**

**Faculty recruitment:** During the annual budget review, DEO's are asked to submit proposals that outline how the proposed faculty recruitment supports their commitment to the college's mission and goals and anticipated associated costs. These proposals are reviewed and approved/declined by the dean in consultation with the associate dean for administration. General discussions about faculty recruitment priorities occur during CPH Executive Committee meetings.

**Faculty selection:** When a search to fill a faculty position is authorized by the dean, a search committee is formed and consists of faculty from the department and often also a faculty member from another department or UI college. For collegiate faculty positions such as DEO or directors of collegiate programs, a faculty representative from each department serves on the search committee. The CPH Dean's Office, the Provost's Office, and the Office of Equal Opportunity and Diversity approve all faculty search activities in accordance with regulations outlined in the UI Operations Manual (<https://opsmanual.uiowa.edu/human-resources/hiring-and-appointments>). Faculty, staff, students and other stakeholders in the CPH and UI are part of the interview process and are asked to provide input during the campus interview. The search committee recommends the candidate of choice to the DEO who then consults with the dean. Once approved and voted on by the department, the CPH Executive Committee votes on the appointment and if tenure issues are involved the Departmental Consulting Group (DCG) and Collegiate Consulting Group (CCG) vote and make a recommendation to the dean on tenure. The final offer letter is reviewed and approved by the CPH Dean's Office, the Provost's Office, and the Office of Equal Opportunity and Diversity.

**Faculty advancement:** Tenure-track and clinical-track faculty are advanced through a promotion and tenure process that follows the UI's guidelines and is tailored to the CPH (<https://www.public-health.uiowa.edu/faculty-handbook>). The promotion and tenure process includes peer review at the departmental and collegiate levels and is voted on by the DCG and CCG whose recommendations are forwarded to the dean for approval. The applications are then forwarded to the provost and to the Board of Regents, State of Iowa for final approval.

**Staff recruitment and selection:** Staffing decisions are determined through review of organizational effectiveness and workforce planning conducted by the unit. Non-organized staff are recruited through an affirmative action process which involves centralized approvals of position creation, classification, recruitment sources, candidate selection, offer and compensation. Organized staff are selected through applicant pools based on skillsets required of

the position. All positions must be approved through the Dean's Office and the Office of Equal Opportunity and Diversity.

**Staff advancement:** Staff advancement and self-improvement are encouraged by their unit and supervisor through numerous opportunities offered by the UI and CPH including onsite training, free-web based training, tuition reimbursement programs and health/wellness opportunities at free or reduced cost. In addition, staff are encouraged to attend CPH Spotlight Series events.

#### **iv. Academic standards and policies, including establishment and oversight of curricula**

**Undergraduate Program:** The associate dean for academic affairs and the director of undergraduate programs develop academic standards and policies, including curricula, for the undergraduate program with input from the Undergraduate Program Committee. The Undergraduate Program Committee also reviews and approves academic course offerings for the Bachelor of Arts (BA) and Bachelor of Science (BS) in Public Health degrees in lieu of departmental approval. Final review and approval of academic course offerings is provided by the CPH Curriculum Committee. Both the Undergraduate Program Committee and CPH Curriculum Committee have a faculty member from each of the five academic departments as well as student representatives. Staff and the associate dean for academic affairs also serve on these committees in ex officio roles. Any new undergraduate degrees or certificate proposals require approval by the CPH, provost, and in the case of a new degree program the Board of Regents.

**Graduate Programs:** Academic standards and policies are set by the UI Graduate College as all CPH graduate degrees fall under the auspices of the Graduate College. A copy of the UI Graduate College Manual can be found at <https://www.grad.uiowa.edu/graduate-college-manual>. At the collegiate level, the associate dean for academic affairs and director of the MPH program develop academic standards and policies, including curricula, for the MPH program with input from the MPH Program Committee. The MPH Program Committee includes a faculty member from each of the five academic departments as well as student representatives. Staff and the associate dean for academic affairs serve in an ex officio capacity on the committee. Departments oversee the academic standards and policies of their academic and professional degrees with input from the associate dean for academic affairs and within the parameters set by the UI Graduate College. Any new academic course offerings must first be approved by departmental faculty before moving on to the CPH Curriculum Committee for review and approval. Any new graduate degree or certificate proposals require approval by the CPH, UI Graduate College, provost, and in the case of a new degree program the Board of Regents.

#### **1.3.d Identification of any of the above processes that are different for the school of public health than for other professional schools, with an explanation.**

None

#### **1.3.e If a collaborative school, descriptions of all participating institutions and delineation of their relationships to the school.**

Not applicable

**1.3.f If a collaborative school, a copy of the formal written agreement that establishes the rights and obligations of the participating universities in regard to the school's operation.**

Not applicable

**1.3.g Assessment to the extent to which this criterion is met.**

This criterion is met.

***Strengths***

- As required by Council on Education for Public Health (CEPH) accreditation criteria, the college is independent of and fully equal to the other eleven colleges within the university.
- The college has access to the president, provost, vice presidents, and the services provided by the university to all academic units.

***Weaknesses***

None

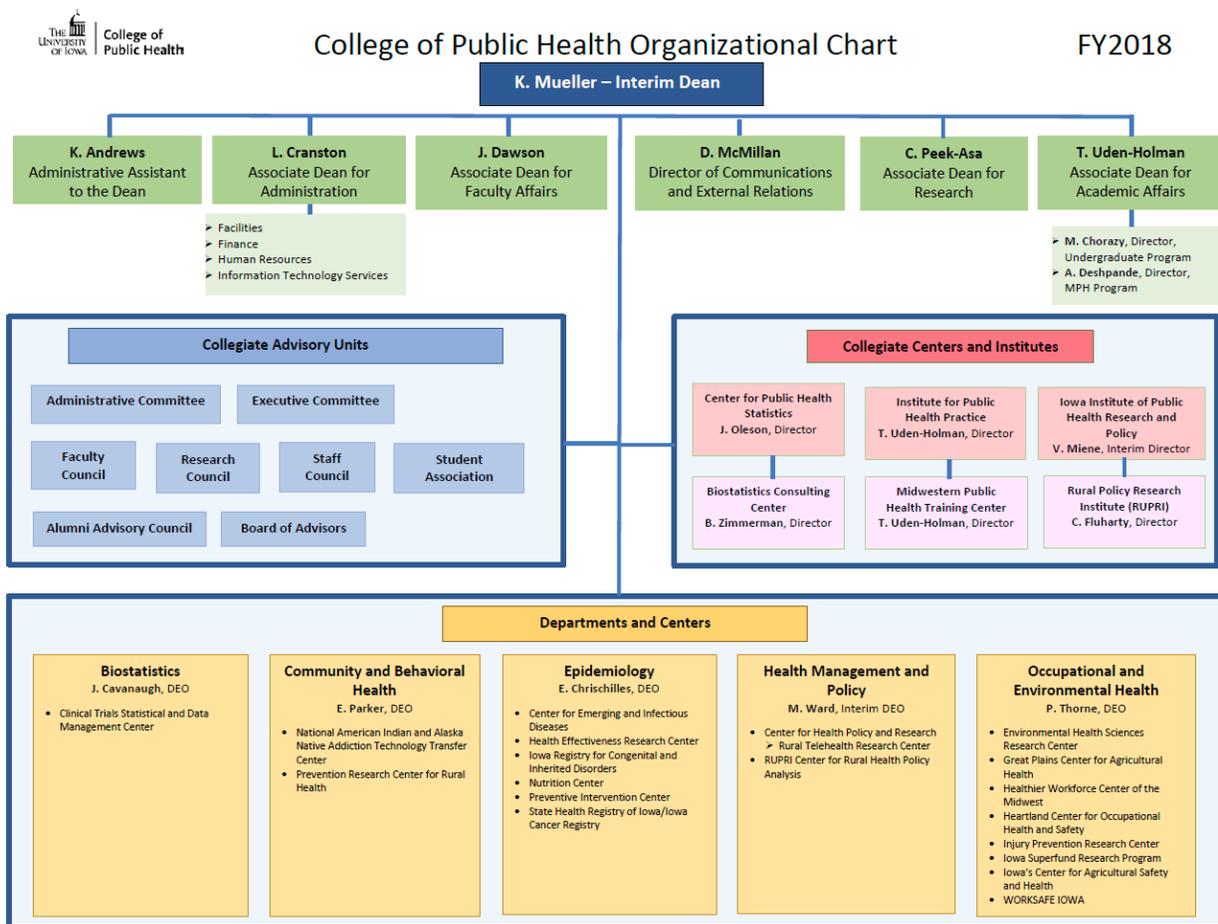
***Plans***

None

**1.4 Organization and Administration.** The school shall provide an organizational setting conducive to public health learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration that contribute to achieving the school's public health mission. The organizational structure shall effectively support the work of the school's constituents.

**1.4.a One or more organizational charts showing the administrative organization of the school, indicating relationships among its component offices, departments, divisions or other administrative units.**

Figure 1.4.a: College of Public Health Organization Chart – FY2018 (also located in ERF 1.4.a)



**1.4.b Description of the roles and responsibilities of major units in the organizational chart.**

The dean has overall responsibility for research, academic affairs, education, service, external relations, alumni communications, fundraising, facility management, strategic planning and fiscal management for the CPH.

The dean is advised by the CPH Board of Advisors, CPH Alumni Relations Advisory Council, Executive Committee, Faculty, Staff and Research Councils and the CPH Student Association. The CPH Board of Advisors meets twice a year with the Executive Committee and student

representatives. Their agenda is set by the Board's Chair with consultation from the dean and the Executive Committee. The CPH Administrative Committee meets weekly to discuss current activities and sets the agenda for the Executive Committee and Faculty meetings. The CPH Executive Committee meets at least monthly and is heavily involved in the budget and strategic planning processes. The CPH Faculty Council holds regular meetings and works on faculty policy changes and other issues identified by the dean, executive committee, faculty, and the council. The CPH Alumni Relations Advisory Council meets in the fall and spring and discusses ways to engage alumni. The CPH Research Council meets monthly during the academic year (AY) to promote collaborative research. The CPH Staff Council holds regular meetings and discusses issues related to staff and also promotes collaboration across the college. The CPH Student Association discusses graduate student issues and organizes collaborative events for all students. The dean meets with the faculty, staff, and research councils and student association once per semester or more often if needed and the council leadership attends an executive committee meeting once per semester. An undergraduate student association is in development and once formed will also meet with the dean at least once per semester.

There are three collegiate centers and institutes that support the mission of the CPH: Center for Public Health Statistics, Institute for Public Health Practice (IPHP), and the IIPHRP. These center and institute directors report to the dean.

An associate dean for academic affairs directs collegiate educational programs; oversees student affairs processes such as admissions, recruitment, and orientation; leads accreditation processes; and represents the college locally and nationally in public health education. The directors of the MPH and undergraduate program also report to the associate dean for academic affairs. The associate dean for academic affairs advises the dean on all matters related to education.

An associate dean for administration manages the fiscal, human resources, facilities, and administrative activities of the college. The associate dean advises the dean in relation to policy and planning for programs, instruction, research, and service activities.

An associate dean for faculty affairs advises the dean on policies and procedures related to all faculty appointments, faculty promotion and tenure, academic policies and procedures, and other faculty issues. The associate dean for faculty affairs also coordinates the CPH Faculty Council and serves as ex officio. In addition, the associate dean for faculty affairs represents the college locally and nationally in matters related to faculty.

An associate dean for research coordinates and leads the research programs to establish and nurture interdisciplinary collaboration, identify and support research and training programs, build relationships with funding agencies and advises the dean on research policy issues. In addition, the associate dean for research represents the college locally and nationally in public health research.

A director of communications and external relations, through various publications, multimedia resources, and the website, manages critical public health information so that it can better reach communities, the media, policymakers, and public health and other health professionals. Collegiate, department, and center publications disseminated by the communications office compile collegiate updates and offer access to important news and research from the college, its departments, and its affiliated centers. The director of communications and external relations is responsible for coordinating the Alumni Relations Advisory Council and the BLN.

An administrative assistant to the dean provides the dean with administrative support to advance the mission, vision, and goals of the CPH and UI.

There are five departments in the CPH: Department of Biostatistics (BIO), Department of Community and Behavioral Health (CBH), Department of Epidemiology (EPI), Department of Health Management and Policy (HMP) and Department of Occupational and Environmental Health (OEH). Each is led by a DEO that reports to the dean. The DEOs have substantial independence in the areas of academic programs; recruitment of faculty, staff, and students; departmental budget preparation and administration, including support of their own departmental centers that are primarily funded by external grants and departmental strategic planning.

#### **1.4.c Description of the manner in which interdisciplinary coordination, cooperation and collaboration occur and support public health learning, research and service.**

Within an institutional context that strongly promotes cross-disciplinary collaboration, the CPH emphasizes interdisciplinary coordination, cooperation and collaboration in its educational, research and service activities.

In the area of education, interdisciplinary activities are encouraged between UI colleges and their respective departments. For example, the CPH has been very involved in interdisciplinary educational programming across colleges as is evidenced by the number of combined degree programs offered. The CPH has combined MPH degree programs with the UI Colleges of Law, Medicine and Pharmacy. Beyond the UI, the CPH collaborates with other Regents institutions, developing a combined Master of Public Health (MPH)/Doctor of Veterinary Medicine (DVM) degree as well the MPH for Practicing Veterinarians program with Iowa State University's (ISU) College of Veterinary Medicine. The CPH also has undergraduate to graduate agreements for its MPH and Master of Science (MS) programs with other UI colleges and for its MPH program with Coe, Cornell, and Grinnell Colleges. In another example of interdisciplinary collaboration, the CPH is a key participant in the Interdisciplinary Program in Human Toxicology. This program, which trains toxicologists at the MS and doctor of philosophy (PhD) level, is of critical importance in light of the prevalence of chemical use and toxicant exposure in our society. The program, which is housed in the UI Graduate College, is currently directed by Dr. Larry Robertson, faculty member in CPH OEH. In addition to collaborating on formal degree programs, CPH faculty team teach with faculty from other colleges and CPH courses are often cross-listed with other departments and colleges, which encourages cross-disciplinary enrollment. CPH courses are taken by students from all colleges across campus and CPH faculty frequently provide guest lectures in courses taught by other colleges. At the college level, departmental and collegiate seminars are announced to all CPH faculty, staff and students via the collegiate website and the CPH News Digest. The CPH also hosts a Spotlight Series in the fall and spring semesters that gathers faculty, staff and students together for special seminars, workshops and forums. There has also been collaboration of faculty from across the CPH in the development of the undergraduate program curriculum, which includes a number of courses that are team taught by faculty from different departments.

The CPH is actively involved in Interprofessional Education (IPE) activities on the UI health sciences campus. The CPH associate dean for academic affairs chaired the IPE Steering Committee from its formation in fall 2012 through 2015 and continues to serve on the Steering Committee along with the MPH Director and a faculty member from HMP. The IPE Steering Committee has hosted campus visits by IPE leaders, conducted surveys of faculty and collegiate leaders, and supported the formation of a student organization, Students for Interprofessional Education (SIPE). CPH faculty also participate as facilitators for the in-person team meetings of students in

the Interprofessional Skills and Team Based Health Care course which is a required course for all first year pre-licensure students (in Dentistry, Medicine, Pharmacy and Nursing) and master of health administration (MHA) students. The MPH program is actively exploring ways to include all MPH students in the course.

In addition to encouraging interdisciplinary educational experiences, CPH students interact with other departments and colleges through a range of experiences, including service activities. The CPHSA, which represents all CPH graduate students, plans activities to encourage students from different departments and programs to get to know one another. CPH graduate students have the opportunity to participate in UI committees such as the UI Graduate Student Senate and the UI Executive Council of Graduate and Professional Students. The CPH's undergraduate students are in the process of forming a student organization. It is anticipated the organization will be in place by the beginning of AY 2019. Collaboration between the CPH's undergraduate and graduate student organizations will be encouraged. Undergraduate students also have the opportunity to participate in UI committees including the UI Student Government.

The CPH enthusiastically integrates colleagues in its scholarly mission by collaborating on research projects and on publications. In addition to the \$38 million of research funding obtained by CPH primary investigators in FY2017, \$24 million of research funding was obtained with CPH faculty serving as co-investigators. During FY2017, CPH primary faculty published 165 articles with authors at the UI but outside their own departments and 112 that included student authors.

#### **1.4.d Assessment to the extent to which this criterion is met.**

This criterion is met.

##### ***Strengths***

- The structure of the CPH facilitates the accomplishment of its mission, goals, and strategic initiatives.
- The CPH has a full complement of senior-level leaders who are assigned responsibility for specific issues and areas. The CPH has processes and mechanisms for shared responsibility.
- The CPH has a strong record of interdisciplinary coordination, cooperation and collaboration in its educational, research and service activities.

##### ***Weaknesses***

- In April 2017 Sue Curry stepped down as dean of the CPH to be the interim provost and vice president of the UI. In response, leadership transitions within the CPH (e.g., interim dean, interim DEO) were necessary as a search for a new dean is completed.

##### ***Plans***

- The dean search is currently underway. It is anticipated the search will be complete and a new dean in place by the beginning of AY2018. The interim dean will remain fully engaged in the leadership of the college until the new dean is on-board.

**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 the conduct of school and program evaluation procedures, policy-setting and decision-making.

**1.5.a A list of the school’s standing and important ad hoc committees, with a statement of charge, composition and current membership for each.**

Table 1.5.a identifies and describes collegiate committees, councils and boards. The full committee charge and membership is located in ERF 1.5.a. The awards, diversity and inclusion, global public health, undergraduate program, MPH program and curriculum committees have student and staff representation in addition to faculty. These appointments are made by the department, program directors and dean on an annual basis. The executive committee, board of advisors, and alumni advisory council routinely invite students to participate during their meetings as appropriate. Faculty Council, Faculty Council Promotion and Tenure, Faculty Council Promotion and Tenure Collegiate Consulting Group, and Departmental Consulting Group appropriately only have faculty representation. In addition, student and staff representatives are invited to regularly held collegiate faculty meetings and open forums. Faculty, research, and staff councils and CPH Graduate Student Association members are selected by their peers using an election process. The CPH Undergraduate Student Association is being developed this academic year. In addition, student and staff representatives are invited to regularly held collegiate faculty meetings and open forums are open to all faculty, staff and students.

**Table 1.5.a: Current List and Description of Collegiate Board of Advisors, Committees and Councils**

Committee	Description	Committee Composition
Administrative Committee	The Administrative Committee meets weekly to discuss current activities and sets the agenda for the executive committee, faculty meeting, open forum, and board of advisors meetings.	Dean Associate Dean for Academic Affairs Associate Dean for Administration Associate Dean for Faculty Affairs Associate Dean for Research Assistant to the Dean Assistant to the Associate Deans for Academic Affairs and Faculty Affairs Assistant to the Associate Dean for Research Director of Communication and External Relations Director of Development
Board of Advisors	The Board of Advisors meets once per semester to engage with faculty, staff, students, and UI administration on curriculum, research outreach, fundraising and other key strategic issues.	Community and healthcare practice Other Regents Institutions (ISU, UNI) CPH Alumni IDPH Director Other Academic institutions
Executive Committee	The Executive Committee meets at least monthly to address all collegiate concerns, with particular emphasis on faculty appointments, financial resources, strategic planning, educational development, alumni relations, space procurement and allocations, and policies and in concert with the administrative committee sets the faculty	Dean Associate Dean for Academic Affairs Associate Dean for Administration Associate Dean for Faculty Affairs Associate Dean for Research Assistant to the Dean

Committee	Description	Committee Composition
	meeting, open forum and board of advisors agendas.	Director of Communication and External Relations Director of Development Director, Iowa Institute for Public Health Research and Policy Director, MPH Program Director, Undergraduate Program
Awards Committee	The Awards Committee oversees college-wide awards for faculty, staff and students.	CPH faculty, staff and student representation
Diversity and Inclusion Committee	The CPH Diversity and Inclusion Committee aims to promote and develop a culture of collaboration and inclusion in the College and University.	CPH faculty, staff and student representation
Global Public Health Committee	The Global Public Health Committee supports the college's educational and research programs that reach across the globe to address critical public health concerns.	CPH faculty, staff and student representation
Undergraduate Program Committee	The Undergraduate Program Committee is to review and advise on all aspects of the undergraduate program, including curriculum and undergraduate course approval.	CPH faculty, staff and student representation
MPH Program Committee	The major function of the MPH Program Committee is to review and advise on all aspects of the MPH degree program, including curriculum.	CPH faculty, staff and student representation and community partners
Faculty Council Curriculum Committee	The major function of the Curriculum Committee is to facilitate the involvement of the faculty of the UI College of Public Health in the promotion of quality education in public health and related fields by working with departments and other program units to aid in the development and implementation of curricular policies.	CPH faculty, staff and student representation
Faculty Council Promotion and Tenure Committee	The P&T Committee acts as an independent standing committee for the CPH faculty for the purpose of reviewing all promotion and tenure material and providing recommendations on each candidate to the Dean.	CPH faculty
Alumni Advisory Council	The Alumni Advisory Council meets to serve the needs of the CPH community, through their desire to retain close ties with their alma mater and support the mission of the College.	CPH alums
Faculty Council	The Faculty Council serves as the faculty advisory body to the dean on matters of concern to faculty, participates in setting the overall priorities and objectives for the college, collegiate governance policies and procedures and collegiate programs.	CPH faculty
Research Council	The Research Council advises the dean on ways to facilitate collaborative research within the College, within and outside the	CPH faculty and staff

Committee	Description	Committee Composition
	University and advance the strategic research goals of the College.	
Staff Council	The purpose of the Staff Council is to develop and promote activities and opportunities to enhance the quality of work-life for staff, advocate changes or improvements for staff, and facilitate communication between staff and college administration.	CPH staff
CPH Graduate Student Association	The CPHSA advocates for opportunities in professional development and outreach, discusses student issues, and creates a greater sense of community for all graduate students in the college.	CPH graduate student representatives from each department
Faculty Council Collegiate Consulting Group	Three members of appropriate rank from outside the promotion candidate's department. The CCG reviews the promotion candidate's materials and votes as to whether or not the candidate meets the criteria for promotion. The CCG submits their recommendation to the dean of the college.	CPH faculty
Departmental Consulting Groups	Three members of appropriate rank within a promotion candidate's department who are familiar with his/her area of study. The DCG reviews the promotion candidate's materials and votes as to whether or not the candidate meets the criteria for promotion. The DCG submits their recommendation to the department chair.	CPH faculty
CPH Undergraduate Student Association	Is under development	CPH undergraduate students

**1.5.b Description of the school's governance and committee structure's roles and responsibilities relating to the following:**

**i. General school policy development**

The CPH has a very open and transparent policy development process. All CPH committees and councils are advisory to the dean and are asked to review issues such as strategic planning, current topics of interest, curriculum issues, and collegiate policies related to faculty including review and promotion and tenure. In particular, the board of advisors; faculty, staff, research and student councils; administrative committee; and executive committee meet on a regular basis with the dean. The dean has ultimate decision-making responsibility in line with University policy.

**ii. Planning and evaluation**

Any committee or council can advise the dean to initiate a planning activity. These activities are generally an interactive process that involves collegiate committees and councils. The CPH Executive Committee reviews the proposal and makes a recommendation to the dean. The collegiate strategic planning process is reviewed on an ongoing basis and comprehensively

reviewed annually and every five-years. All faculty, staff, students, and stakeholders are encouraged to participate in the annual review of the plan and the five-year review.

### **iii. Budget and resource allocation**

Budget and resource priorities are set by the dean with consultation from the CPH Executive Committee and CPH faculty, staff and students. The CPH Executive Committee routinely discusses major expenses related to personnel, facilities and special initiatives. Additionally, the dean meets with faculty, research and staff councils and student leadership to obtain their feedback on resource priorities. This is particularly beneficial when facing budget reallocation or non-recurring fund opportunities for special initiatives such as from philanthropy.

Philanthropy is managed at the collegiate, departmental or individual level as directed by the donor intent agreement. The director of development meets with the dean, CPH Executive Committee, DEOs, and faculty, staff and students to discuss philanthropic priorities and to develop plans to achieve fundraising goals.

Research awards are directed by the faculty investigators.

### **iv. Student recruitment, admission and award of degrees**

**Undergraduate:** Admission to the BA and BS degree programs is selective and controlled by the CPH. Students may be admitted to the CPH either through direct admission or standard admission. Admissions procedures are coordinated by the UI Office of Admissions for all undergraduate programs. Admission is automatic for students who meet the direct admission or standard admission criteria. Applicants who meet course requirements and either the test score or grade-point average requirement are also considered for admission by a committee which includes the director of undergraduate programs, associate dean for academic affairs, undergraduate advisor, and undergraduate recruitment specialist. Students who are denied direct or standard admission may file an online petition for admission. The committee listed above also reviews petitions. The UI Office of the Registrar verifies degree requirements for graduation are met. The CPH awards the BA and BS degrees.

**Graduate:** Admission to the MPH subtracks, MS, MHA and PhD programs is controlled through individual departments to assure the applicant makes contact with key faculty and staff and advising and mentoring relationships are in place when the students begin their program of study. For the MS, MHA, and PhD degrees, the departments review, recommend, and decide on admission of students. Admission of MPH subtrack students is based on a common set of criteria but each department reviews and recommends candidates for admission. Admission committees for the combined degree and professional MPH programs review and recommend students for admission. Recommendations for all MPH students are forwarded to the MPH program office for an admission decision. Since CPH academic and professional degrees fall under the auspices of the UI Graduate College, it reviews applicants recommended for admission to verify that they meet the minimum requirements for admission to the Graduate College. The UI Graduate College verifies degree requirements and awards degrees.

### **v. Faculty recruitment, retention, promotion and tenure**

**Faculty recruitment and selection:** Faculty lines vacated by resignation or retirement revert to the College. DEOs submit faculty recruitment proposals during the annual budgeting process and

priorities for faculty recruitment are discussed by the CPH Executive Committee. When a search to fill a faculty position is authorized by the dean, a search committee is formed to develop a position announcement and complete the recruitment packet which is then reviewed and approved by the Dean's Office, the Provost's Office, and the Office of Equal Opportunity and Diversity. Once approved, advertisements are placed. Once applications are received, the search committee identifies candidates to be invited to campus for interviews upon approval from the Office of Equal Opportunity and Diversity. After the interviews are complete and comments are sought from departmental faculty, staff, and students, and other stakeholders in the College and University, the search committee recommends the candidate of choice to the DEO. After the DEO consults with the dean and receives approval, the candidate is put forth to the departmental faculty for a vote. The candidate's curriculum vitae (CV), letters of recommendation, and the letter from the DEO, which includes the departmental vote, are forwarded to the dean for review and approval. The material is presented by the associate dean for faculty affairs and the DEO to the Executive Committee, which then votes on the appointment. If tenure issues are involved, the DCG and CCG must vote and make a recommendation to the dean. The draft offer letter is then approved by the dean and is forwarded along with the recruitment packet to the Office of Equal Opportunity and Diversity for final approval.

**Faculty Retention:** Faculty retention efforts are led by the DEO in consultation with the dean and others at the UI (e.g., Vice President for Research and Economic Development; Executive Vice President and Provost; other collegiate deans).

**Faculty Promotion and Tenure:** Immediately prior to the upcoming AY, candidates for promotion notify their DEO of their intent to go up for promotion and prepare their dossier. The DEO then begins to assemble the DCG to review the promotion materials at the departmental level as well as securing external evaluators of scholarship. The DCG consists of departmental faculty at or above the rank the candidate is applying to be promoted to. At the beginning of September the candidate submits their dossier of required materials to their DEO. Once the dossier is received by the DEO, they distribute the materials to the DCG and meet with them to give the charge for the review and to answer questions. The DCG selects a smaller "Internal Review Subgroup" to extensively review the materials and write a report to the full DCG. The full DCG reviews the Internal Review Subgroup report and votes on the promotion. By mid-November, the DCG submits a report to the DEO summarizing their assessment of the areas of teaching, scholarship and service as well as noting their vote on the promotion. The DEO shares the DCG report with the candidate and they have 10 working days to correct factual errors in the report. The DEO then writes their recommendation letter to the collegiate dean and shares it with the candidate. The candidate has 5 working days to respond to the DEO's recommendation, if negative, and/or to provide additional information to the promotion record. By mid-December, the department sends all materials to the collegiate dean's office to be reviewed by the CCG.

The CPH has a Promotion and Tenure Committee that includes representation from each department, comprised of tenured associate professors and professors, as well as a clinical track faculty member. At this time, the collegiate dean's office sends the promotion candidate(s) the list of Promotion and Tenure Committee members and asks them to identify any conflicts of interest. The chair of the Promotion and Tenure Committee then divides the Committee into smaller groups to serve as the CCGs for promotion candidates, avoiding any assignments that are a conflict of interest. The CCG reviews the promotion materials and votes on the promotion. By mid-January, the CCG writes a report summarizing their assessment of the areas of teaching, scholarship and service as well as noting their vote for or against the promotion. This report is submitted to the collegiate office of the dean. At this time, the candidate is given the CCG report to review and has 10

working days to submit a response to the report, if negative. The collegiate dean reviews the promotion materials and writes a letter to the university provost summarizing the areas of teaching, scholarship and service and noting their recommendation for or against promotion. By early February, the dean submits the full promotion packet to the university provost. At the same time, the dean's letter of recommendation is also shared with the candidate and they have 10 working days to submit a response letter to the university provost. In late March, the university provost office notifies the collegiate dean of their recommendation for or against promotion. Their recommendation is subject to Board of Regents, State of Iowa approval at their April meeting. The collegiate dean notifies the candidate and their DEO of this recommendation. In late April, the university provost notifies the collegiate dean of the decision by the State of Iowa, Board of Regents. The collegiate dean then notifies the candidate and their DEO of the final promotion recommendation.

#### **vi. Academic standards and policies, including curriculum development**

**Undergraduate:** The associate dean for academic affairs and the director of undergraduate programs develop academic standards and policies, including curricula, for the undergraduate program with input from the Undergraduate Program Committee. The Undergraduate Program Committee also reviews and approves academic course offerings for the BA and BS degrees in lieu of department approval. Final review and approval of academic course offerings is provided by the CPH Curriculum Committee. Both the Undergraduate Program Committee and CPH Curriculum Committee have a faculty member from each of the five academic departments as well as student representatives. Staff and the associate dean for academic affairs also serve on these committees in ex officio roles. Any new undergraduate degrees or certificate proposals require approval by the CPH, Provost, and in the case of a new degree program the Board of Regents.

**Graduate:** Academic standards and policies are set by the UI Graduate College as all CPH graduate degrees fall under the auspices of the Graduate College. A copy of the Graduate College Manual can be found at <https://www.grad.uiowa.edu/graduate-college-manual>. At the collegiate level, the associate dean for academic affairs and director of the MPH program develop academic standards and policies, including curricula, for the MPH program with input from the MPH Program Committee. The MPH Program Committee includes a faculty member from each of the five academic departments as well as student representatives. Staff and the associate dean for academic affairs serve in an ex officio capacity on the committee. Departments oversee the academic standards and policies of their academic and professional degrees with input from the associate dean for academic affairs and within the parameters set by the Graduate College. Any new academic course offerings must first be approved by departmental faculty before moving on to the CPH Curriculum Committee for review and approval. Any new graduate degree or certificate proposals require approval by the CPH, Graduate College, Provost, and in the case of a new degree program the State of Iowa, Board of Regents.

#### **vii. Research and service expectations and policies**

The UI provides funds to the CPH in the amount of 50% of tenure-track and tenured faculty salaries for teaching and service activities. CPH expects its tenured and tenure-track faculty to spend 50% of their time on research activities in order to offset their full salary. Service activity expectations are 25%. The general expectations for clinical track faculty are to spend 20% of their time in service to the department, institution, and profession. There are no research expectations. Tenure-track, tenured and clinical-track faculty expectations can be modified on a case-by-case basis after consulting with the faculty, DEO and dean. Instances where this may occur include faculty on

reduced time or high/low research salary offset. Expectations are articulated in faculty offer letters, promotion and tenure guidelines and during the annual review and post-tenure effort allocation process.

**1.5.c A copy of the school's bylaws or other policy documents that determine the rights and obligations of administrators, faculty and students in governance of the school.**

CPH Faculty Handbook: <https://www.public-health.uiowa.edu/faculty-handbook/>  
CPH Manual of Procedure: See ERF 1.5.c (also located in the CPH Faculty Handbook)  
UI Operations Manual: <https://opsmanual.uiowa.edu/>

**1.5.d Identification of school faculty who hold membership on university committees, through which faculty contribute to the activities of the university.**

The faculty serve on a wide range of university committees. Those university committees listed below are standing committees that are advisory to the UI Administration and are representative of the faculty at the UI. A complete list is in ERF 1.5.d.

- The CPH dean serves on the Council of Deans and the Health Sciences Policy Council.
- The UI Faculty Senate is composed of eighty representatives of all academic units of the University, serves as the principal channel of communication between faculty members and the central administration of the University. The CPH has three members who serve on the UI Faculty Senate.
- The UI Faculty Council is composed of elected faculty senators and meets frequently to discuss issues of current importance and to prepare action suggestions for submission to the Faculty Senate. The CPH has two members that serve on the UI Faculty Council; one of which is serving as past president.
- The Graduate College Council serves as the executive committee of the graduate faculty, assisting and advising the Graduate College dean in the conduct of college business. The Graduate Council consists of the deans of the Graduate College, thirteen faculty (eleven collegiate representatives and two at-large representatives) and four graduate students chosen by the Graduate Student Senate. The CPH currently has one faculty representative on this body.
- The UI Research Council is a University Charter Committee that meets regularly each semester to advise the vice president for research on matters pertaining to the University's research enterprise. The Council's membership is made up of nineteen faculty, staff, and students. The CPH currently has one staff member who serves on the Council.
- UI Collegiate Diversity Group has representatives from each college, university libraries, distance education and outreach and is chaired by the UI chief diversity officer and associate vice president. There are also liaisons from the Charter Committee on Diversity, Multicultural Programs, International Programs, Faculty & Staff Disabilities, Student Disabilities Services, Legal Affairs and General Counsel, and Provost's Office. They meet regularly to share information, assess the status of and concerns arising from the colleges' diversity efforts, identify and develop resources for collegiate diversity, and bring to the attention of the deans those issues in need of policy development or resolution across colleges.

**1.5.e Description of student roles in governance, including any formal student organizations.**

Students are encouraged to create and participate in formal student organizations. A description of CPH student organizations is presented below. Currently, all student organizations within the CPH are for graduate students. The undergraduate program students are in the process of developing their own student organization. It is anticipated this organization will be in place by the beginning of AY2019.

**Table 1.5.3: Current List of CPH Student Associations**

Student Association
CPH Graduate Student Association
Community and Behavioral Health Student Association
Biostatistics Student Organization
Epidemiology Student Association
Iowa-Illinois Industrial Hygiene Student Association
Iowa Student Association of Healthcare Leaders
CPH Undergraduate Student Association
CPH Undergraduate Ambassadors

**Student Participation in Collegiate Governance:** The CPH student body is very active in the governance of the CPH. By serving on committees, students provide input into evaluation of teaching, research, field experience, and career counseling and placement. Student representatives sit on each collegiate committee except for the executive and administrative committees and alumni, staff and research councils. Student representatives are asked to attend executive committee meetings each semester or as agenda items warrant. A student representative from each department and the MPH program are invited to CPH faculty meetings. When appropriate, ad hoc committees also have student representation. In addition, the dean meets with CPH student association leadership at least once during the fall semester and spring semester and more often if needed. All students are invited to the CPH forums held at least twice a semester. All students also participate in special surveys, focus groups and forums as evaluation measures and special initiatives are developed.

Student participation on the Diversity and Inclusion and Global Public Health Committees has been extensive and their input on curriculum and programming activities has been invaluable. An example of a student-initiated proposal was for the renovation of the student commons to better serve student needs. This plan was executed at the request of the CPH Student Association which involved substantial student input regarding the design of the space and furniture.

In addition, there is a graduate student representative on the current dean search committee being conducted by the Office of the Provost.

The CPH Undergraduate Ambassador program helps support recruitment activities. The CPH Undergraduate Student Association is under development this academic year.

### **1.5.f Assessment of the extent to which this criterion is met.**

This criterion is met.

#### ***Strengths***

- The CPH reviewed and updated the charge and composition of its committees in the Fall of 2017.
- There are multiple avenues for faculty, staff and students to actively participate in collegiate operations.
- Graduate students are represented on all college-wide committees, with the exception of faculty, staff and research councils and the promotion and tenure committee.

#### ***Weaknesses***

- Undergraduates do not currently serve on all college-wide committees.

#### ***Plans***

- The college is in the process of adding undergraduate students to its college-wide committees.
- An undergraduate student organization is in development.

**1.6 Fiscal Resources.** The school shall have financial resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

**1.6.a A description of the budgetary and allocation processes, including all sources of funding supportive of the instruction, research and service activities. This description should include, as appropriate, discussion about legislative appropriations, formula for funds distribution, tuition generation and retention, gifts, grants and contracts, indirect cost recovery, taxes or levies imposed by the university or other entity within the university, and other policies that impact the fiscal resources available to the school.**

The CPH primary sources of annual revenues are: 1) the GEF which includes state appropriations, tuition revenue, and F&A, 2) external grants and contracts, and 3) philanthropy. Additional revenues are received from special state appropriations and tuition and fee revenue outside the General Education Fund (GEF).

**GEF:** The amount received is determined by Central Administration, primarily based on the previous year's allocation with possible addition and subtraction of recurring funds and non-recurring funds. Non-recurring allocations could include items such as temporary support for faculty recruitment packages or institutional cost share for sponsored research. Recurring adjustments could represent changes in student enrollment and credit hours taught, changes in F&A cost recoveries, new funding for strategic initiatives or budget reversions. The College's GEF budget is adjusted on a recurring basis annually based on actual tuition revenue generated. In addition, the GEF budget is annually adjusted on a recurring basis based on a three year average of total F&A recoveries multiplied by the GEF collegiate/departmental administrative percentage of the University F&A rate.

**Grants and Contracts:** Our tenure-track faculty are expected to develop research programs that are recognized at the national level and sufficient to offset at least 50% of their salary and fringe benefits. Research expenditures per full-time equivalent faculty exceed \$500,000 per year and faculty salary offset has historically exceeded the 50% minimum threshold.

**Philanthropy:** Philanthropy is also an important funding source for the college. The college works with the UI Center for Advancement, which is the preferred channel for private gifts to the UI. Gift funds are used to support various activities including student support, research, capital projects and outreach activities. The development officer works with the dean, the director of communications and external relations and department heads to identify philanthropy priorities.

**Additional Sources of Revenue:** The CPH receives special purpose appropriation from the Iowa State Legislature for two centers. They are the State Cancer Registry and the Iowa Registry for Congenital and Inherited Disorders which are responsible for collecting critical health data collection and dissemination. The college also receives tuition and fee revenue outside of the GEF for distance-based courses, student technology fees, combined degree student fee, and the Executive MHA (EMHA) program fee.

**1.6.b A clearly formulated school budget statement, showing sources of all available funds and expenditures by major categories, since the last accreditation visit or for the last five years, whichever is longer. This information must be presented in table format as appropriate to the school.**

Table 1.6.b summarizes the CPH’s budget by major category, FY2011 through FY2017. The amounts in this table are a combination of information from the University General Ledger and the UI Foundation Financial Reports and Information system. The total revenue has decreased from \$63.5 million in FY2011 to \$56.7 million in FY2017. There is a decrease in overall Grants & Contracts revenue, which reflects the trend of fewer federally-funded grants and those that are funded have smaller budgets. In addition, the CPH faculty composition has changed to a larger number of assistant professors versus full professors due to full and phased retirements.

From FY2011 through FY2017 expenditures have increased from \$56.3 million in FY2011 to \$57.1 million in FY2017. Our primary expense continues to be in support of faculty and staff salaries and benefits, which accounts for 56% of the total expenditures in FY2017. In some years the expenditures are higher than the revenues due to carryover balances from prior years. At the end of FY2010 there was an ending balance of \$20.8 million. The ending balance for FY2017 was \$23.2 million. In addition, balances are carried forward in the UIF gift accounts each year.

**Table 1.6.b: Available Source of Funds and Expenditures by Major Categories FY2011 to FY2017**

	FY2011 (\$)	FY2012 (\$)	FY2013 (\$)	FY2014 (\$)	FY2015 (\$)	FY2016 (\$)	FY2017 (\$)
<b>Source of funds</b>							
GEF Allocation <sup>1</sup>	10,875,287	11,954,085	12,864,427	13,101,056	12,976,321	13,643,521	13,091,711
Special Purpose Appropriations	194,396	187,339	187,339	187,339	187,339	187,339	187,339
Organized Activities <sup>2</sup>	952,965	867,375	817,759	1,152,123	1,491,975	2,374,081	1,987,547
Service Centers <sup>3</sup>	752,115	723,868	781,471	807,213	1,065,722	996,336	918,575
Grants & Contracts <sup>4</sup>	48,999,457	48,085,863	32,111,680	42,672,675	37,808,374	37,739,487	39,134,403
Construction Cost Share Allocations <sup>5</sup>	0	2,016,369	141,769	0	0	0	0
UI Foundation <sup>6</sup>	1,756,992	1,624,266	949,900	1,032,581	3,235,487	251,596	1,429,056
<b>Total Revenue</b>	<b>63,531,212</b>	<b>65,459,165</b>	<b>47,854,345</b>	<b>58,952,987</b>	<b>56,765,218</b>	<b>55,192,360</b>	<b>56,748,631</b>
<b>Expenditures</b>							
Faculty Salaries & Benefits	10,915,914	11,349,095	12,147,926	11,896,738	12,278,164	12,065,538	12,991,742
Staff Salaries & Benefits	17,924,079	18,038,419	17,824,630	17,056,906	18,726,943	18,674,789	19,000,206
Teaching & Research Assistants Salaries & Benefits	2,123,873	2,118,777	1,816,341	1,870,118	1,844,977	1,903,475	2,109,036
Other Salary, Wages & Fringe	1,818,960	1,897,179	1,779,813	1,861,482	1,911,013	2,061,389	1,833,760
Student Tuition & Scholarships	885,890	1,012,830	1,010,949	942,659	992,750	1,246,948	1,355,495
General Expense/Operations	5,645,212	6,482,925	7,066,502	3,195,316	3,327,083	3,561,405	3,519,116
Travel	1,367,854	1,303,303	1,378,784	1,446,307	1,869,101	1,597,911	1,413,757
Consultants & Subcontracts	5,160,312	4,627,133	6,287,092	5,424,971	4,543,535	3,755,709	4,034,224

	FY2011 (\$)	FY2012 (\$)	FY2013 (\$)	FY2014 (\$)	FY2015 (\$)	FY2016 (\$)	FY2017 (\$)
Facilities & Administrative (F&A) Costs <sup>7</sup>	9,487,999	9,963,719	9,388,432	9,237,623	9,320,573	9,237,266	9,859,153
Equipment & Software - Non-Capitalized	636,422	855,921	553,882	682,170	628,816	636,917	533,939
Equipment & Software - Capitalized	329,397	\$62,024	315,699	354,947	164,398	357,601	434,594
<b>Total Expenses</b>	<b>56,295,913</b>	<b>58,211,326</b>	<b>59,570,051</b>	<b>53,969,237</b>	<b>55,607,353</b>	<b>55,098,949</b>	<b>57,085,021</b>

<sup>1</sup> General Education Funds (GEF) is comprised of state appropriations, tuition & fees and facilities & administrative (F&A or indirect cost) recoveries.

<sup>2</sup> Organized Activities include items such as distance education tuition and fees, miscellaneous student fees, conference & institutes and consulting.

<sup>3</sup> Service Centers revenues represent service functions supported by user charges.

<sup>4</sup> Includes direct costs and facility and administrative (F&A) costs awarded.

<sup>5</sup> Cost Share funding for construction.

<sup>6</sup> Represents gifts, new pledges and investment income to accounts at the UI Foundation.

<sup>7</sup> Charges to grants and contracts for recovery of F&A Costs

**1.6.c** If the school is a collaborative one sponsored by two or more universities, the budget statement must make clear the financial contributions of each sponsoring university to the overall school budget. This should be accompanied by a description of how tuition and other income is shared, including indirect cost returns for research generated by school of public health faculty who may have their primary appointment elsewhere.

Not applicable

**1.6.d** Identification of measurable objectives by which the school assesses the adequacy of its fiscal resources, along with data regarding the school's performance against those measures for each of the last three years.

**Table 1.6.d: Measurable Outcome Objectives for Fiscal Resources FY2015 to FY2017**

Outcome Measures	Target	FY2015	FY2016	FY2017
Total research award funding (\$)	50,655,808	50,871,530	41,880,642	38,085,140
Primary tenure-track faculty salary offset through external funding (%)	50	54	58	60
Research expenditures per full-time-equivalent faculty (\$)	500,000	578,076	535,847	572,782
Fundraising campaign total (\$M/cumulative)	25	27.9	37.26	40.05
Alumni giving rate (%/fiscal year)	8	NA	5	5
Graduate & Professional student credit hours taught (#)	6900	NA	6872	6906
Undergraduate student credit hours taught (#)	7150	NA	1677	2325

(NA=Measure not tracked due to change in outcome measure with implementation of new FY2016 strategic initiative plan; data not available for undergraduate program which began in FY2017)

**1.6.e** Assessment of the extent to which this criterion is met.

This criterion is met.

**Strengths**

- The CPH has adequate resources to carry out its mission related to education, research, and impact.

**Weaknesses**

- The UI's budget model is in transition and the final model is not yet known.
- Greater competition for federal grants and fewer funds for major grants has led to a decrease in grant funding over the past 7 years.

**Plans**

- The CPH will continue to work with central administration to ensure the college has sufficient resources for the developing undergraduate program.
- The CPH will continue to look at ways to diversity its grants and contracts funding portfolio.

**1.7 Faculty and Other Resources.** The school shall have personnel and other resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

**1.7.a A concise statement or chart defining the number (headcount) of primary faculty in each of the five core public health knowledge areas employed by the school for each of the last three years. If the school is a collaborative one, sponsored by two or more institutions, the statement or chart must include the number of faculty from each of the participating institutions.**

**Table 1.7.a: Primary Faculty Headcount as of Fall 2017**

<b>Department</b>	<b>FY2016</b>	<b>FY2017</b>	<b>As of March 2018</b>
Biostatistics	13	14	16
Community and Behavioral Health	11	10	11
Epidemiology	19	19	17
Health Management and Policy	18	18	15
Occupational and Environmental Health	20	18	18
<b>TOTAL</b>	<b>81</b>	<b>79</b>	<b>77</b>

**1.7.b** A table delineating the number of faculty, students and SFRs, organized by department or specialty area, or other organizational unit as appropriate to the school, for each of the last three years (calendar years or academic years) prior to the site visit. Data must be presented in a table format and include at least the following information: a) headcount of primary faculty (primary faculty are those with primary appointment in the school of public health), b) FTE conversion of faculty based on % time appointment to the school, c) headcount of other faculty (adjunct, part-time, secondary appointments, etc.), d) FTE conversion of other faculty based on estimate of % time commitment, 3) total headcount of primary faculty plus other (non-primary) faculty, f) total FTE of primary and other (non-primary) faculty, g) headcount of students by department or program area, h) FTE conversion of students, based on definition of full-time as nine or more credits per semester, i) student FTE divided by primary faculty FTE and j) student FTE divided by total faculty FTE, including other faculty. All schools must provide data for a), b) and i) and may provide data for c), d) and j) depending on whether the school intends to include the contributions of other faculty in its FTE calculations.

**Table 1.7.b.1: Faculty, Students and Student/Faculty Ratios by Core Knowledge Area AY2016**

Core Knowledge Area	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Biostatistics	13	13.00	1	0.06	14	13.06	47	33.30	2.56	2.55
Community and Behavioral Health	11	10.82	2	0.84	13	11.66	41	35.20	3.25	3.02
Epidemiology	19	17.85	9	0.63	28	18.48	118	99.10	5.55	5.36
Health Management and Policy	18	15.85	3	0.25	21	16.1	40	34.00	2.15	2.11
Occupational and Environmental Health	20	17.69	1	0.03	21	17.72	89	62.70	3.54	3.54
Master of Health Administration/Executive Master of Health Administration*	14	12.85	8	1.29	22	14.14	75	73.60	5.73	5.21

\*Faculty in the MHA/EMHA program are also counted in the departmental HC and FTE. MPH students who are not in a departmental subtrack are allocated to the department of their faculty advisor.

**Table 1.7.b.2: Faculty, Students and Student/Faculty Ratios by Core Knowledge Area AY2017**

Core Knowledge Area	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Biostatistics	14	14.00	1	0.13	15	14.13	49	37.70	2.69	2.67
Community and Behavioral Health	10	9.22	2	0.84	12	10.06	42	33.80	3.67	3.36
Epidemiology	19	17.35	8	0.51	27	17.86	111	93.10	5.37	5.21
Health Management and Policy	18	14.85	2	0.25	20	15.1	35	27.10	1.82	1.79
Occupational and Environmental Health	18	16.05	1	0.03	19	16.08	97	75.40	4.70	4.69
Undergraduate Program*	30	28.75	1	0.04	31	28.79	32	31.33	1.09	1.09
Master of Health Administration/Executive Master of Health Administration*	14	12.85	12	1.27	26	14.12	85	79.80	6.21	5.65

\*Faculty in the MHA/EMHA program are also counted in the departmental HC and FTE. MPH students who are not in a departmental subtrack are allocated to the department of their faculty advisor.

**Table 1.7.b.3: Faculty, Students and Student/Faculty Ratios by Core Knowledge Area AY2018**

Core Knowledge Area	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Biostatistics	16	16.00	1	0.13	17	16.13	46	34.70	2.17	2.15
Community and Behavioral Health	11	10.22	2	0.78	13	11.0	40	36.90	3.61	3.35
Epidemiology	17	15.35	6	0.70	23	16.05	119	90.10	5.87	5.61
Health Management and Policy	15	12.65	2	0.38	17	13.03	39	31.80	2.51	2.44
Occupational and Environmental Health	18	16.05	1	0.03	19	16.08	84	62.70	3.91	3.90
Undergraduate Program*	31	29.75	1	0.08	32	29.83	74	72.92	2.45	2.44
Master of Health Administration/Executive Master of Health Administration*	12	11.65	6	0.50	18	12.15	80	75.90	6.52	6.25

\*Faculty in the undergraduate program and/or the MHA/EMHA program are also counted in the departmental HC and FTE. MPH students who are not in a departmental subtrack are allocated to the department of their faculty advisor.

**1.7.c A concise statement or chart defining the headcount and FTE of non-faculty, non-student personnel (administration and staff).**

There are 232 permanent staff employed in the CPH; 141 are research staff. ERF 1.7.c provides headcount and FTE of non-faculty and non-student support staff.

**1.7.d Description of the space available to the school for various purposes (offices, classrooms, common space for student use, etc.), by location.**

The CPH occupies space in thirteen buildings on and off campus for a total of 174,787 square feet. Within the College of Public Health Building, each department has a dedicated suite for all their faculty, as well as staff and student offices, and conference room space. In addition, two departments have their own dedicated student computer labs. The Student Commons was recently renovated and is located on the second floor. Seating areas and a small group room are located in the atrium on the first through fourth floors. The small group rooms can be reserved by all faculty, staff and students. A café and eating area are also located on the first floor. For a complete description of College of Public Health Building units and classrooms see ERF 1.7.d.

The CPH occupies eight buildings on campus for its education and research needs. Space allocation by building is identified below in Table 1.7.d. In addition to the on-campus space identified below, the CPH utilizes space in five off-campus facilities for research needs; four are located in other Iowa communities.

**Table 1.7.d: On Campus Space Allocation Usage by Net Square Feet (NSF)**

Building	Office/ Conference Rooms (NSF)	Labs (NSF)	Classroom/ Computer Labs (NSF)	General/ Other (NSF)	TOTAL (NSF)
CPHB	54,571	NA	15,308	8,975	78,854
General Hospital	5,043	NA	NA	4,013	9,056
Institute for Rural and Environmental Health	11,928	13,673	541	221	26,363
Medical Research Center	197	727	NA	NA	924
Multi-Tenant Facility	599	3,239	NA	NA	3,838
State Hygienic Lab	2,107	596	NA	NA	2,703
University Capitol Centre	20,060	NA	NA	NA	20,060
Westlawn	20,681	757	NA	NA	21,438
<b>Total</b>	<b>115,186</b>	<b>18,992</b>	<b>15,849</b>	<b>13,209</b>	<b>163,236</b>

**1.7.e A concise description of the laboratory space and description of the kind, quantity and special features or special equipment.**

The CPH has laboratories supporting research in environmental health, occupational and recreational injuries, infectious disease, reproductive and cancer molecular epidemiology, genetic and metabolic studies. Laboratory space is located on the Health Sciences Campus and at UI Research Park. For a full description of laboratory space see ERF 1.7.e.

**1.7.f A concise statement concerning the amount, location and types of computer facilities and resources for students, faculty, administration and staff.**

The College of Public Health Building includes the following:

- Two computer-based classrooms with a combined 58 computer workstations.
- Two collegiate student computer workrooms – one designed for group work with 16 computer workstations and another designed for quiet, individual work with 24 computer workstations.
- Two departmental student computer workrooms
- Multiple classrooms, conference rooms, small group rooms, and auditoriums equipped with podium computer workstation(s) with projection technology for lecturing and group meetings.
- Student Commons space that was recently redesigned to promote student collaboration through the combination of technology and interior design, including mobile device digital display technology, wireless networking, and digital signage.

The computer classroom, group workspace, individual workspace and departmental computer workrooms are equipped with printing and scanning technology. The auditoriums and general classrooms also incorporate lecture capturing technology.

In addition, the CPH supports and manages 820 desktop computers, 315 laptops, a host of local and network printers and approximately 75 collegiate servers. The local area network is connected to the UI campus and global network through the campus fiber optic infrastructure. All faculty members and most research and administrative staff have desktop computers in their offices. Miscellaneous hardware includes access to laptops, tablets, scanners, network printers, smartphones, video projectors, webcams, microphones and video conferencing units. Collegiate IT staff provide direct consultation and assistance to faculty, staff and students, including direct support for instruction, research, outreach and public service. For a full description of the policies, plans and procedures for IT see ERF 1.7.f.

**1.7.g A concise description of library/information resources available for school use, including a description of library capacity to provide digital (electronic) content, access mechanisms, training opportunities and document-delivery services.**

The UI Libraries advances direct engagement in learning, research, creative work, and clinical care through staff expertise and exceptional collections on the UI campus and worldwide. In addition to the Main Library there are 8 campus libraries that serve faculty, staff and students. The Hardin Library for the Health Sciences is most relevant to our college and is in close proximity to the college. A complete list of services offered to faculty, students, staff, alumni, and retired faculty can be found at <http://www.lib.uiowa.edu/services/>

Information Commons, Hardin Library for the Health Sciences: Hardin Library's state-of-the-art health sciences educational technology facility, the Information Commons, is a central support and delivery venue for courseware development, classroom instruction, health-related research, and independent learning. It offers high-end multimedia development workstations, digital classrooms, a case-based learning conference room, and information research workstations for searching health-related databases. Resources include:

- InfoHawk+ Catalog
- E-Journals
- Health Sciences Databases and Tools (PubMed, CINAHL, Dynamed, MDConsult)
- Health Sciences E-Books

- Hardin Subject Guides
- Hardin MD
- John Martin Rare Book Room
- Hardin Simulator Collection
- UI Libraries Databases
- UI Libraries E-Books
- UI Libraries Subject Guides
- Health Sciences Libraries on the Web

**1.7.h A concise statement of any other resources not mentioned above, if applicable.**

Not applicable

**1.7.i Identification of measureable objectives through which the school assesses the adequacy of its resources, along with data regarding the school's performance against those measures for each of the last three years.**

**Table 1.7.i: Measurable Outcome Objectives for Resources FY2015 to FY2017**

Outcome Measures	Target	FY2015	FY2016	FY2017
Primary faculty as of June 30 (#)	Track	NA	81	79
Total research award funding (\$)	50,655,808	50,871,530	41,880,642	38,085,140
Research expenditures per full-time-equivalent faculty (\$)	500,000	578,076	535,847	572,782
Fundraising campaign total (\$M/cumulative)	25	27.9	37.26	40.05
Graduate and professional student credit hours taught (#)	6900	NA	6872	6906
Undergraduate student credit hours taught (#)	7150	NA	1677	2325

(NA=Measure not tracked due to change in outcome measure with implementation of new FY2016 strategic initiative plan; data not available for undergraduate program which began in FY2017)

**1.7.j Assessment of the extent to which this criterion is met.**

This criterion is met.

***Strengths***

- The CPH now has its own academic building with offices for all faculty members.
- At the request of CPH students, the student commons was renovated to provide a more inviting space for students to collaborate and study.
- UI library resources are available to meet the needs of faculty, staff, and students.
- The CPH currently has enough instructional space to meet its teaching mission.

***Weaknesses***

- The CPH's research space is spread out over eight buildings. Some collegiate faculty have to travel 20 minutes to reach their laboratory space. Additionally, some of the buildings that house collegiate research centers are old and in poor physical condition.

***Plans***

- Work with the UI on plans for research space for wet and dry lab research activities.
- Monitor the use of classroom space to ensure we are able to meet our instructional needs.

**1.8 Diversity.** The school shall demonstrate a commitment to diversity and shall evidence an ongoing practice of cultural competencies in learning, research and service practices.

**1.8.a A written plan and/or policies demonstrating systematic incorporation of diversity within the school. Required elements include the following:**

**i. Description of the school’s under-represented populations, including a rationale for the designation.**

The CPH has identified the following domestic racial and ethnic categories as underrepresented: African American or Black, Hispanic or Latino, American Indian or Alaska Native, and Native Hawaiian and other Pacific Islanders. In addition, we consider Asians as underrepresented. While not nationally underrepresented in higher education and science, technology, engineering and mathematics (STEM) fields, Asians are underrepresented in administration and leadership roles. At a predominantly white institution, where Asian Americans make up a small percentage of the population, a critical mass of the population has not been reached and the inclusion of Asians in our under-represented populations is warranted.

The CPH compares ethnic and racial composition to the proportion of racial and ethnic groups in Iowa. Table 1.8.a presents the proportion of these groups for the state of Iowa. Data are from the US Census Bureau 2016 population estimates for Iowa.

**Table 1.8.a: Demographics of Iowa Based on Race and Ethnicity**

	<b>Current % of Iowa Population</b>
African American or Black	3.7
American Indian/ Alaska Native/Native Hawaiian/ Pacific Islander	0.6
Asian	2.5
Hispanic/Latino	5.8
Two or more races	1.8

**ii. A list of goals for achieving diversity and cultural competence within the school, and a description of how diversity-related goals are consistent with the university’s mission, strategic plan and other initiatives on diversity, as applicable.**

The Diversity and Inclusion Committee reviewed and updated its mission and goals in Spring 2015 to align with the CPH and UI.

**Diversity as a Core Value:** Diversity is key to a vibrant intellectual environment. Respect for, and inclusion of, all persons and valuing their unique experiences and contributions is essential to achieving the CPH mission.

**Mission:** The CPH Diversity and Inclusion Committee provides leadership in efforts to increase the diversity of our faculty, staff and students, and foster a culture of inclusion and collaboration in which all members of our community can thrive. Diversity includes, but is not limited to: race, nationality, color, creed, religion, age, disability, veteran status, sexual orientation, gender identity, socio-economic status and associational preference. By engaging difference and developing cultural humility, our faculty, staff and students will be better equipped to successfully tackle the current and future population health challenges facing our global society.

### **CPH Diversity and Inclusion Goals:**

1. Recruit, develop, promote and retain a diverse faculty and staff.
2. Recruit, admit, retain and graduate a diverse student body.
3. Promote a climate of inclusion and collaboration that is free of harassment and discrimination.
4. Ensure all faculty, staff and students understand that cultural differences affect all aspects of health and health systems, and develop skills that will allow them to effectively function as public health researchers, educators, and professionals.

The CPH Diversity and Inclusion Committee's mission and goals are in alignment with the UI's mission and strategic plan. For example, critical tasks found in the UI Strategic Plan include: (1) Recruit and retain a more diverse faculty, staff and study body and (2) Increase opportunities that advance student, faculty, and staff understanding of diversity. The UI Strategic Plan can be found at: <https://provost.uiowa.edu/strategic-plan-2016-2021>.

### **iii. Policies that support a climate free of harassment and discrimination and that value the contributions of all forms of diversity; the school should also document its commitment to maintaining/using these policies.**

The CPH follows university policies to support a climate free of harassment and discrimination. The UI Operations Manual addresses conduct by faculty, staff and students. More information can be found in several specific sections of the Operations Manual (Operations Manual III. Human Resources Chapter 16 Ethics and Responsibilities of University Staff; Operations Manual IV. Students Chapter 1 - General Regulations Applying to Students). All members of the university community are expected to uphold the conduct policies set forth in the Operations Manual.

The CPH complies with all applicable federal and state laws regarding nondiscrimination. The CPH provides equal opportunities for qualified persons in all aspects of operations. The CPH also prohibits discrimination in employment, educational programs and activities on the basis of race, creed, color, religion, national origin, age, sex, pregnancy, disability, genetic information, status as a US veteran, service in the US military, sexual orientation, gender identity, associational preferences or any other classification that deprives the person of consideration as an individual. All members of the CPH are expected to comply with the nondiscrimination policy.

The UI has specific policies to support a climate free of sexual harassment and discrimination which the CPH follows. Per UI policy, all regular faculty and staff appointed at 50% time or more, as well as graduate teaching assistants are required to receive training on sexual harassment prevention within six months of hire and to complete a refresher course every three years thereafter. Additionally, all faculty and staff hired or promoted into positions defined by the UI Policy on Sexual Harassment as an academic or administrative officer are required to complete sexual harassment prevention education within the first two months of appointment. The CPH includes information on the need to complete sexual harassment training in its offer letters and has the expectation that employees will complete the training as soon as possible (although according to UI policy they do have six months to complete). The college's senior human resources staff runs reports on a regular basis to ensure compliance. Finally, all UI students complete an online sexual harassment module.

### **iv. Policies that support a climate for working and learning in a diverse setting.**

The CPH is committed to creating a working and learning environment that leverages the strengths of its diverse faculty, staff and student body. The college assesses its environment through work

environment surveys (conducted by the university biennially), climate surveys (previously conducted by the college and now to be conducted by the university biennially), and informal discussions addressing climate issues.

The UI (and therefore college) strives to provide an inclusive learning environment for all students. Policies stating the importance of civil exchange of ideas and civil conduct can be found in several segments of the UI Operations Manual (Operations Manual II. Community Policies Chapter 11 - Anti-Retaliation. Additional UI policies can be found at: Additional UI Policies Regarding Safety and Support. The college also requires that a statement regarding sexual harassment/misconduct and class accommodations for individuals with disabilities be included in course syllabi.

Additionally, several CPH student services staff have completed Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) safe zone training. The purpose of the Safe Zone Project is to identify members of the UI community who will model support, affirmation, and inclusion of LGBTQ people. Participants who complete this program are choosing to be visible allies and to be trained to be effective resource people for their workplace and classroom.

The CPH building is an Americans with Disabilities Act (ADA) compliant building. Parking has been secured directly outside the building for disabled faculty and staff. Additionally, parking meters are hooded for special events for those who request accommodations. Finally, the college also has a lactation room and a family restroom that can be utilized by faculty, students, staff, and visitors to the building.

The CPH complies with the guidelines utilized by the UI (Web Content Accessibility Guidelines 2.0 of the World Wide Web Consortium, Level AA). The CPH website is built using HTML and CSS code compliant with World Wide Web Consortium standards. The CPH website has an Accessibility Statement which includes the contact information for the CPH webmaster. Individuals with disabilities are encouraged to attend CPH sponsored events and contact information is provided on promotional materials should any individual wishing to attend require accommodations.

Collegiate activities supporting an inclusive environment include faculty and staff awards programs and annual celebrations of cultural and identify groups (e.g., multi-cultural potlucks, Hispanic Heritage Month, Native American Heritage Month, Black History Month). In response to faculty, staff, and student requests that dedicated time and space be available to bring together public health colleagues, the college implemented the CPH Spotlight Series in the fall of 2016. CPH Spotlight Series programs are held on Mondays and Wednesdays from 12:30 – 1:30. To facilitate attendance, no collegiate classes are held during these times and events are coordinated to eliminate overlap. A broad range of programming is included as part of the Spotlight Series including topics related to diversity and inclusion. The Spotlight Series have helped to promote an increased sense of community within the college.

**v. Policies and plans to develop, review and maintain curricula and other opportunities including service learning that address and build competency in diversity and cultural considerations.**

At the undergraduate level, all BA and BS students are required to take CPH:1400 Fundamentals of Public Health which includes content related to diversity and cultural considerations. Content related to understanding the cultural context in which professionals work is also included in the required Second Year Undergraduate Public Health Seminar (CPH:2050). Additionally, all BA and

BS students who enter the university beginning fall 2017 must complete three credit hours of general education related to diversity and inclusion. Undergraduate students also have the opportunity to build competency in diversity and cultural considerations through their experiential learning requirement; two of the four experiential learning opportunities are service learning and global learning.

At the graduate level, all MS, PhD, and MHA students are required to take CPH:6100 Essentials of Public Health. Modules in the course include the determinants of health, health disparities, environmental justice, cultural competence and cultural humility. Finally, all MPH students take CBH:4105 Introduction to Health Promotion and Disease Prevention which covers similar content areas.

At the collegiate level, in addition to the courses mentioned above, many faculty include examples and content related to diversity and multiculturalism in their courses. Finally, although the college has a longstanding history of educational and research programs that reach across the globe to address critical public health concerns, there has been an increased focus on global public health in the college during the past several years. The Global Public Health Committee and the college's Global Public Health Coordinator are working to identify additional opportunities for undergraduate and graduate students to have international learning experiences.

#### **vi. Policies and plans to recruit, develop, promote and retain a diverse faculty.**

The CPH, under the leadership of the dean, is committed to hiring a diverse faculty which includes increasing the racial/ethnic diversity of our faculty as well as gender representation in some departments. All recruitments follow the guidelines set forth in the UI Office of Equal Opportunity and Diversity Recruitment Manual. Specific plans to recruit a more diverse faculty include:

- Requiring all faculty members to complete unconscious bias training. This is tracked through the collegiate human resources system.
- Reviewing how job ads are written to make more explicit the importance of diversity and inclusion as a core value of the college.
- Advertising through websites and publications that are targeted to culturally diverse applicants (e.g., HigherEdJobs Affirmative Action e-mail).
- Participating in national and regional meetings at which doctoral students, post-docs, and faculty, especially entry-level faculty, may be presenting posters or presentations.
- Communicating with existing faculty at the CPH, UI health sciences, or outside of the UI who may be aware of candidates with diverse racial or ethnic backgrounds.
- Working with the university to identify potential "pipeline" universities where underrepresented minority doctoral, post-docs, or faculty more frequently enroll or work.

The UI belongs to the Higher Education Recruitment Consortium and as part of its membership has access to live webinars, which include topics related to diversity. Although the UI broadcasts the webinars on its main campus, in order to facilitate CPH faculty participation, the college has also broadcast several webinars in our building and provided lunch. Webinars shown during the past year include: Equipping Search Committees: Tools, Technology, and Training Essentials, Building a Diverse Applicant Pool, and Cultivating a Practice of Mindful Leadership.

The CPH is committed to the success of all new faculty and the Associate Dean for Faculty Affairs oversees mentoring, education, development, and support of junior faculty in relation to the promotion and tenure process in collaboration with the DEOs. All junior faculty have a faculty mentoring plan that includes a minimum of two mentors. One is a "hands-on" mentor who shares a

common scholarly interest with the mentee and who can provide advice (and collaborate) with a mentee on matters pertaining to scholarships, research, and teaching. The other mentor is a “meta-mentor” who can provide opinions on a range of issues including workload expectations, college service responsibilities, and more general advice about personal issues such as work-life balance. The meta-mentor does not have to be a CPH or UI faculty member. This can be especially important for underrepresented faculty. Additionally, junior faculty may apply for the Junior Faculty Opportunity Award. This is a mechanism for junior faculty to request special funds to enhance their faculty development. This fund is very flexible and can be used for activities such as visiting mentors at other institutions or bringing mentors to the UI campus for one or more visits to help provide guidance.

**vii. Policies and plans to recruit, develop, promote and retain a diverse staff.**

All recruitments follow the guidelines set forth in the Office of Equal Opportunity and Diversity Recruitment Manual. For positions designated as underrepresented, advertisements are placed in publications and search engines that more specifically focus on minorities/underrepresented groups. The college strives to promote and develop a culture of collaboration and inclusion. As previously mentioned, in response to faculty, staff, and student requests that dedicated time and space be available to bring together public health colleagues, the college implemented the CPH Spotlight Series in the fall of 2016. Staff have the opportunity to attend the Spotlight Series events and many of them do. The college has seen an increase in participation in the programs over the past year since the series was implemented. Staff also serve on the CPH Diversity and Inclusion Committee and have the opportunity to provide input into programming.

**viii. Policies and plans to recruit, admit, retain and graduate a diverse student body.**

The CPH believes that a well-rounded, culturally competent public health workforce is required to meet the health needs of the nation’s growing ethnic and racial populations and to address the pressing health disparities faced by many groups. As such, the college is committed to assuring a diverse student body.

The CPH is involved in many recruitment and pipeline development activities to recruit a diverse student body. These include:

- The Iowa Summer Institute in Biostatistics (ISIB), sponsored by the National Heart Lung and Blood Institute and the National Center for Advancing Translational Sciences, provides biostatistical training and applied research opportunities for undergraduates. Additionally, information on opportunities such as scholarships, training grant programs, and assistantships in BIO are presented to students and they are encouraged to continue their studies in a BIO graduate program. Underrepresented students are especially encouraged to apply and ISIB has been a useful development and recruitment mechanism.
- The Summer Health Professions Education Program (SHPEP), sponsored by the Robert Wood Johnson Foundation (RWJF), is a free, six-week summer program for undergraduate students interested in health professional careers. At the UI, the SHPEP is a collaboration of the College of Public Health, the Carver College of Medicine, College of Dentistry, and College of Pharmacy. SHPEP’s goal is to strengthen the academic proficiency and career development of students underrepresented in the health professions and prepares them for a successful application and matriculation to health professions schools. These students include, but are not limited to, individuals who identify as African American/Black, American Indian and Alaska Native and Hispanic/Latino, and who are from communities of socioeconomic and educational

disadvantage. The college's associate dean for academic affairs is a Co-PI on the SHPEP grant and SHPEP programming includes opportunities for all students to learn about public health and the range of educational programs the college offers.

- The National Science Foundation-funded National Alliance for Doctoral Studies in the Mathematical Sciences (Alliance) is housed in the CPH. A primary goal of the Alliance is to increase the number of doctoral degrees in the mathematical sciences among groups that have been traditionally underrepresented in those fields. One way the Alliance achieves this goal is by matching underrepresented scholars with mentors. Several BIO faculty are currently mentors in this program.
- The UI Summer Research Opportunities Program provides promising underrepresented undergraduate students with in-depth research experiences. Several CPH faculty have served as mentors in recent years, and several are available as mentors for this coming session.
- The Health Equity Advancement Lab is led by faculty members in CBH and seeks to improve health through community-engaged public health research with communities who experience health inequities. The Health Equity Advancement Lab involves undergraduate students and is a pipeline activity for CPH graduate degree programs.

The Diversity and Inclusion Committee also offers recruitment scholarships to incoming graduate students. Beginning in the fall of 2013, two graduate research assistantships along with one-time scholarships are offered to underrepresented students. Between fall 2013 and fall 2016, 41 scholarships were offered and 20 students accepted the scholarships and matriculated. Of those 20 students, 17 have either graduated or are still enrolled in degree programs. For AY2018, twelve (12) recruitment scholarships were offered to incoming graduate students (two of which are GRAs which are renewable for a second year). Eleven (11) of those offered scholarships (including the two individuals offered GRAs) accepted admission and matriculated. Funds are also available via the Diversity and Inclusion Committee to support recruitment visits to Iowa so prospective students can meet faculty and other students and see first-hand what the community and university are like.

The UI Graduate College also offers direct support to graduate students from underrepresented and minority backgrounds. These include Iowa Recruitment Fellowships, Minority Graduate Application Fee Waiver, Graduate Diversity Scholarships for current students and the Underrepresented Minority Pre-Comprehensive Exam Mentored Research Fellowship.

Scholarships are also available to undergraduate students. CPH Diversity scholarships are available for incoming first year students. To apply for this scholarship students must be US citizens or permanent residents and meet one or more criteria related to race/ethnic background, socioeconomic factors, and/or first-generation college student. CPH undergraduate students may also apply for the Advantage Iowa award which is based on merit and contributing criteria which include historically underrepresented populations at the UI or participation in a federally funded Upward Bound program.

The CPH also collaborates with other units on campus on recruitment activities. These activities are described below.

**Office of Graduate Ethnic Inclusion** was established in 2005 as an integral part of the Graduate College committed to creating an inclusive and supportive community for minority and

underrepresented graduate students. Its mission is to recruit and retain graduate students from all walks of life while encouraging academic curiosity and discovery.

**Center for Diversity and Enrichment (CDE)** brings to life the UI's commitment to create a diverse and welcoming climate with a critical mass of students, staff and faculty from communities underrepresented in higher education. This office provides the primary leadership and coordination for outreach and service to underserved and minority communities for pre-college student development and recruitment, and for developing and sustaining programs and activities that support the ability of minority and underserved students from diverse backgrounds to increase their skills to thrive and succeed at the UI and develop a lifelong commitment to independent learning. The CPH collaborates with the CDE to provide programming to expose students to public health degree programs and potential careers. CDE staff also participate in a session related to diversity and inclusion in CPH:2050—Second Year Undergraduate Public Health Seminar.

Additionally the CPH collaborates with the health sciences campus on recruitment and retention activities. The CPH has a representative on the Health Sciences Diversity Committee. The Health Sciences Diversity Committee collaborated to develop a diversity recruitment brochure and also co-hosts students-related activities. Collaborative activities for current students include the annual Health Sciences Multicultural Welcome Luncheon which celebrates the diversity students of color bring to the health sciences campus and to facilitate professional and personal networking. The health sciences programs also collaborate on the Annual Health Sciences Lesbian, Gay, Bisexual, Transgender, Queer/Questioning (LGBTQ) and Allies Welcome Reception each fall.

Retention of diverse students is a shared responsibility of faculty, staff and administrators. The graduate program coordinators and undergraduate advisor are often the first individuals students go to when they are facing challenges that may impact retention. These staff members are well aware of collegiate and campus resources and connect students with these resources, including academic or financial assistance or counseling services. Faculty and administrators also are available to support students. In some instances, they help students identify resources on campus via the UI Graduate College or UI CDE. There are also resources available via the college to support students including the CPH Advancing Graduate Student Success Award and the CPH Global Public Health Student Travel Grant program which is available to both graduate and undergraduate students.

Additionally, the CPH Diversity and Inclusion Committee includes graduate students from all departments/ programs as well as undergraduate students. Although other collegiate committees only have one graduate student representative per department/program, the CPH Diversity and Inclusion Committee has additional student representatives—if a student expresses an interest in joining the committee they are added. Students play an active role on the committee, suggesting programming and initiatives. More information on diversity related events and programming is provided in section 1.8.b.

#### **ix. Regular evaluation of the effectiveness of the above-listed measures.**

The CPH's strategic initiative, work plan and outcome measures include objectives and metrics related to diversity and inclusion. The work plan is reviewed by the CPH Executive Committee during the AY and progress and/or challenges are discussed. At the conclusion of each AY a report is compiled on progress towards the meeting work plan objectives as well as data on all metrics.

This report is made available on the college's website. Information is also provided during the dean's state of the college address and to the external board of advisors.

The UI produces annual reports that track metrics related to race/ethnicity and gender for faculty, staff and students. The UI Chief Diversity Office also meets with academic units to review their data and diversity related plans. More recently, the university president and interim chief diversity officer convened a diversity forum with leaders from across campus to review data and discuss best practices, opportunities, and challenges. The interim chief diversity officer, with input from the UI Collegiate Diversity group (each college has a representative on this group—ours is the associate dean for academic affairs), is also in the process of developing a UI Diversity College/Unit Digest and Road Map to help the UI Chief Diversity Office track diversity progress across the institution.

**1.8.b Evidence that shows the plan or policies are being implemented. Examples may include mission/goals/objectives that reference diversity or cultural competence, syllabi and other course materials, lists of student experiences demonstrating diverse settings, records and statistics on faculty, staff and student recruitment, admission and retention.**

Diversity is a core value of the CPH and UI. In a reflection of the importance of highlighting diversity and inclusion related initiatives, "Diversity" is a tab on the homepage of the CPH website. The website includes information on events and programming, resources, and news (<https://www.public-health.uiowa.edu/diversity/>). In order to foster a culture of diversity and inclusion, the college sponsors/co-sponsors a variety of programming. A summary of diversity programming for AY2017 is provided in ERF 1.8.b.2; several examples are discussed in the following paragraph. The college also publicizes diversity related events and programming across the UI campus through its listserv and monthly diversity programming e-mails to the college-wide listserv that are sent by the associate dean of academic affairs.

For the past two years one of the programming priorities of the Diversity and Inclusion Committee was sponsoring a two-day Racial Equity Workshop Phase I training by the Racial Equity Institute. The workshop helps to provide talking points, historical factors, and an organizational definition of racism. CPH faculty, staff, students, as well as others from the UI and community have the opportunity to attend the training. While students are encouraged to attend it is not a required activity. Diversity and inclusion programming is also sponsored as part of the CPH Spotlight Series. Examples of programming from fall 2017 include the screening of "FoodChains" for National Hispanic Heritage Month and a presentation by a CPH Native American staff member in honor of National Native American Heritage Month on the role the purification lodge plays in Native American health. The 2017 Hansen Award Lecture was given by Dr. Camara Jones whose talk was titled, "Achieving Health Equity: Tools for a National Campaign Against Racism."

Progress on the college's diversity and inclusion initiatives and metrics can also be found in the work plan updates and metrics (ERF 1.2.a). Additionally, the college conducted diversity climate surveys of faculty, staff and students in 2010, 2013, and 2015. Results from the 2015 survey are in the ERF 1.8.b.2. It should be noted that the UI Chief Diversity Office is developing a climate survey for faculty and staff to be administered in early 2018. Climate data will also be collected from graduate and undergraduate students using the Student Experience in the Research University instrument (for more information see Student Experience in the Research University). College level data will be shared with the CPH.

Finally, several faculty and students have been recognized for their diversity related work. Jason Daniel-Ulloa, faculty member in CBH, received a UI Diversity Catalyst Award in recognition of his work to build an inclusive, diverse campus community. Tanya Uden-Holman, Associate Dean for Academic Affairs, received the CDE Distinguished Educator Award which recognizes faculty or staff members who have exemplified achievement in cultural diversity. A new student group in the college, LGBT Advocates for Public Health Equity, received a UI Diversity Catalyst Seed Grant to support their symposium, “Future Directions of LGBT Public Health Symposium: Comprehensively Meeting the Needs of Diverse Communities”.

**1.8.c Description of how the diversity plan or policies were developed, including an explanation of the constituent groups involved.**

The CPH Diversity and Inclusion Committee includes faculty from all departments, students (graduate and undergraduate), and staff. The associate dean for academic affairs chairs the committee. As previously mentioned, the Diversity and Inclusion Committee reviewed and updated its mission and goals in the spring of 2015. At that time, they decided it was important to also highlight the University and College of Public Health’s core value of diversity. The CPH Diversity and Inclusion Committee’s mission and goals are in alignment with the university’s mission and strategic plan. For example, critical tasks found in the UI Strategic Plan include: Recruit and retain a more diverse faculty, staff, and study body; and Increase opportunities that advance student, faculty, and staff understanding of diversity. The UI Strategic Plan can be found at: <https://provost.uiowa.edu/strategic-plan-2016-2021>.

**1.8.d Description of how the plan or policies are monitored, how the plan is used by the school and how often the plan is reviewed.**

At the first meeting of the CPH Diversity and Inclusion Committee each year, committee members review the committee’s mission, goals, and description of the college’s under-represented populations. As an example of a change made during the review process, the committee name was changed from the Diversity Committee to the Diversity and Inclusion Committee to more accurately represent its mission and goals. The plan and its goals guide the work of the committee during the year and there are monthly meetings during the AY to discuss programming and initiatives. Additionally, the college’s strategic work plan includes diversity related initiatives. The work plan is updated annually with input from the college’s executive committee.

**1.8.e Identification of measurable objectives by which the school may evaluate its success in achieving a diverse complement of faculty, staff and students, along with data regarding the performance of the program against those measures for each of the last three years. At a minimum, the school must include four objectives, at least two of which relate to race/ethnicity. For non-US-based institutions of higher education, matters regarding the feasibility of race/ethnicity reporting will be handled on a case-by-case basis. Measurable objectives must align with the school’s definition of under-represented populations in Criterion 1.8.a.**

As previously noted, the college compares ethnic and racial composition to the proportion of racial and ethnic groups in Iowa. Table 1.8.e.1 presents the proportion of these groups for the state of Iowa. Data are from the US Census Bureau 2016 population estimates for Iowa along with data for undergraduate and graduate students, primary faculty, and staff for AY2015, AY2016 and AY2017.

**Table 1.8.e.1: Summary Data for Faculty, Students and Staff AY2015 to AY2017**

<b>Undergraduate Students</b>	<b>Current % of Iowa Population</b>	<b>AY2015 (%)</b>	<b>AY2016 (%)</b>	<b>AY2017 (%)</b>
African American or Black	3.7	NA	NA	9.4
American Indian/ Alaska Native/Native Hawaiian/ Pacific Islander	0.6	NA	NA	0.0
Asian	2.5	NA	NA	9.4
Hispanic/Latino	5.8	NA	NA	6.3
Two or more races	1.8	NA	NA	12.5

<b>Graduate Students</b>	<b>Current % of Iowa Population</b>	<b>AY2015</b>	<b>AY2016</b>	<b>AY2017</b>
African American or Black	3.7	2.9	3.6	4.3
American Indian/ Alaska Native/Native Hawaiian/ Pacific Islander	0.6	0.0	0.5	0.5
Asian	2.5	7.5	7.3	10.2
Hispanic/Latino	5.8	3.6	3.9	2.9
Two or more races	1.8	2.2	3.4	2.6

<b>Primary Faculty</b>	<b>Current % of Iowa Population</b>	<b>AY2015</b>	<b>AY2016</b>	<b>AY2017</b>
African American or Black	3.7	2.6	2.5	1.3
American Indian/ Alaska Native/Native Hawaiian/ Pacific Islander	0.6	1.3	0.0	0.0
Asian	2.5	9.2	11.1	10.1
Hispanic/Latino	5.8	2.6	3.7	2.5
Two or more races	1.8	NA	NA	NA

<b>Staff</b>	<b>Current % of Iowa Population</b>	<b>AY2015</b>	<b>AY2016</b>	<b>AY 017</b>
African American or Black	3.7	2.2	1.7	1.7
American Indian/ Alaska Native/Native Hawaiian/ Pacific Islander	0.6	0.4	0.4	0.4
Asian	2.5	3.5	3.5	3.5
Hispanic/Latino	5.8	3.9	3.5	3.5
Two or more races	1.8	1.3	0.4	0.4

The CPH's strategic plan and outcome measures include data for additional diversity indicators including minority student enrollment, minority tenured and tenure track faculty, female tenured and tenure track faculty, minority staff, females in executive, administrative, and managerial positions, and minorities in executive administrative and managerial positions.

**Table 1.8.e.2: Measurable Outcome Objectives for Diversity FY2015 to FY2017**

<b>Outcome Measure</b>	<b>Target</b>	<b>FY2015</b>	<b>FY2016</b>	<b>FY2017</b>
Minority undergraduate student enrollment (%)	Track	NA	NA	37.5
Minority graduate student enrollment (%)	16	16	19	20
Minority primary faculty (%)	16	NA	17	14
Minority staff (%)	10	10	9	9
Minorities in executive or high-level administrative positions (%)	5	2	2	4
International graduate student enrollment (%)	12	10	9	9
Female primary faculty (%)	45	Na	43	41
Females in executive or high-level administrative positions (%)	50	46	54	54

Outcome Measure	Target	FY2015	FY2016	FY2017
Conduct CPH diversity climate survey every 2 years (%)	Participation rate of 40%	NA	21	NA

(NA=Measure not tracked due to change in outcome measure with implementation of new FY2016 strategic initiative plan; data not available for undergraduate program which began in FY2017)

### 1.8.f Assessment of the extent to which this criterion is met.

This criterion is met.

#### ***Strengths***

- Racial/ethnic minority composition of the CPH's undergraduate population is more diverse than the campus overall.
- The CPH is involved in multiple pipeline programs to encourage the recruitment of racial/ethnic minority graduate students.
- Recruitment strategies include the provision of scholarships to minority students as well as travel funds to bring prospective students to campus.
- The CPH's Diversity and Inclusion Committee is active—sponsoring programs and initiatives throughout the AY.
- The CPH collaborates with the other health sciences colleges on recruitment and retention activities.

#### ***Weaknesses***

- Diversity of our graduate student population is relatively limited given demographic composition of state and surrounding recruitment area
- Racial and ethnic diversity of faculty needs improvement.
- There are challenges recruiting diverse staff.

#### ***Plans***

- Applicants with diverse experiences, backgrounds, and minority status will be a priority for faculty recruitment.
- The CPH will continue to collaborate with main campus on strategies for enhancing the diversity of its faculty complement.
- The CPH will continue to work to increase the diversity of its graduate student population through pipeline programs and collaborating with the other health sciences colleges and the Graduate College. Additionally, the university as a whole has a strategic initiative to develop pipelines for underrepresented minority students.
- The CPH will continue to review its curricula to identify opportunities to include additional material related to health disparities and health equity.

## 2.0. Instructional Programs

**2.0 Degree Offerings.** The school shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional master's 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.

**2.1.a An instructional matrix presenting all of the school's degree programs and areas of specialization. If multiple areas of specialization are available within departments or academic units shown on the matrix, these should be included. The matrix should distinguish between public health professional degrees, other professional degrees and academic degrees at the graduate level, and should distinguish baccalaureate public health degrees from other baccalaureate degrees. The matrix must identify any programs that are offered in distance learning or other formats. Non-degree programs, such as certificates or continuing education, should not be included in the matrix.**

The University of Iowa (UI) College of Public Health (CPH) offers a diverse array of degrees including baccalaureate degrees in public health (BA and BS in Public Health), the Master of Public Health (MPH), the Master of Health Administration (MHA), and multiple Master of Science (MS) and Doctor of Philosophy (PhD) degrees in core public health disciplines. Additionally, the CPH collaborates with other colleges on and off campus to offer joint degrees.

The MPH, MS and PhD in health communication degrees are in the process of being closed and the MS in community and behavioral health is not accepting applications. The PhD in Health Communication has one remaining student. The student has a faculty advisor and receives administrative and student services support from the Department of Community and Behavioral Health (CBH). There is also one MS in Community Behavioral Health student who has a faculty advisor and receives administrative and student services support from the department. There are no students enrolled in the MPH and MS in Health Communication. Per CEPH instructions, these degrees are not included in the instructional matrix below.

**Table 2.1.a: Instructional Matrix - Degrees and Specializations FY2018**

	Public Health Professional Degrees	Other Professional Degrees	Academic Degrees
<b>Bachelor's Degrees</b>			
BA Public Health			
BS Public Health			
<b>Master's Degrees</b>			
MPH Quantitative Methods	√		
MPH Community and Behavioral Health	√		
MPH Epidemiology	√		
MPH Policy	√		
MPH Occupational and Environmental Health	√		
MPH General Track	√		
MPH Practicing Veterinarians*	√		
MS Biostatistics			√
MS Epidemiology			√
MS Clinical Investigation			√
MS Health Policy			√

	Public Health Professional Degrees	Other Professional Degrees	Academic Degrees
MS Occupational and Environmental Health			√
MS Industrial Hygiene			√
MS Agricultural Safety and Health			√
MHA		√	
EMHA (Executive)		√	
<b>Doctoral Degrees</b>			
PhD Biostatistics			√
PhD Community and Behavioral Health			√
PhD Epidemiology			√
PhD Health Services and Policy			√
PhD Occupational and Environmental Health			√
PhD Industrial Hygiene			√
PhD Agricultural Safety and Health			√
<b>Joint Degrees (Combined, Joint, Dual)</b>			
<b>Combined Graduate and Professional Degrees</b>			
UI College of Law	MPH/JD		
UI College of Medicine	MPH/MD		
UI College of Pharmacy	MPH/PharmD		
ISU College of Veterinary Medicine	MPH/DVM		
UI College of Business		MHA/MBA	
UI College of Law		MHA/JD	
<b>Joint Graduate Degrees</b>			
UI Graduate College-Urban and Regional Planning			MA or MS/MS Occupational and Environmental Health
<b>Dual Bachelor and Master Degrees</b>			
UI College of Liberal Arts and Sciences	BA or BS/MPH (all subtracks)		
UI College of Liberal Arts and Sciences			BA or BS/MS Epidemiology
UI College of Engineering—Biomedical Engineering (Musculoskeletal Biomechanics Track)			BS/MS Industrial Hygiene
Coe College	BA/MPH (all subtracks)		
Cornell College	BA/MPH (all subtracks)		
Grinnell College	BA/MPH (all subtracks)		

\*Distance education program, discussed in section 2.14.

**2.1.b The school bulletin or other official publication, which describes all degree programs identified in the instructional matrix, including a list of required courses and their course descriptions. The school bulletin or other official publication may be online, with the appropriate links noted.**

The UI General Catalog is online and includes information on the degree requirements and academic offerings of each department and program of the CPH. The link to the CPH section of the UI General Catalog can be found at: <http://catalog.registrar.uiowa.edu/public-health/>

### **2.1.c Assessment of the extent to which this criterion is met.**

This criterion is met.

#### ***Strengths***

- The college offers professional and academic degrees in all five of the core areas of public health.
- The college offers coordinated (combined graduate professional, joint graduate, dual bachelor and master) degrees with a number of colleges within the university and with other institutions, including several liberal arts colleges.
- The college now offers an undergraduate BA and BS in Public Health.

#### ***Weaknesses***

None

#### ***Plans***

- The college will continue to assess opportunities to develop courses and programs that are responsive to the changing field of public health and educational needs of the students who constitute the developing workforce.

**2.2 Program Length.** An MPH degree program or equivalent professional public health master's degree must be at least 42 semester-credit units in length.

**2.2.a Definition of a credit with regard to classroom/contact hours.**

All coursework is in the form of standard semester credit hours. A three-semester-hour course has a minimum of 37.5 contact hours per semester. Courses that do not have the required face-to-face contact time (hybrid, online, or off-cycle courses) meet the credit hour standard by ensuring that the course covers the same material in the same depth as a face-to-face version of the same course.

**2.2.b Information about the minimum degree requirements for all professional public health master's degree curricula shown in the instructional matrix. If the school or university uses a unit of academic credit or an academic term different than the standard semester or quarter, this difference should be explained and an equivalency presented in a table or narrative.**

The minimum degree requirement for all MPH degree programs is 42 semester credit hours.

**2.2.c Information about the number of professional public health master's degrees awarded for fewer than 42 semester credit units, or equivalent, over each of the last three years. A summary of the reasons should be included.**

No MPH degrees were awarded with less than 42 semester credit hours.

**2.2.d Assessment of the extent to which this criterion is met.**

This criterion is met.

***Strengths***

- All MPH programs meet or exceed the 42-credit hour requirement.

***Weaknesses***

None

***Plans***

- As revisions are made to the MPH curriculum to comply with the 2016 Council on Education for Public Health (CEPH) criteria, the college will ensure the degree does not require fewer than 42-credit hours.

**2.3 Public Health Core Knowledge.** All graduate professional degree public health students must complete sufficient coursework to attain depth and breadth in the five core areas of public health knowledge.

**2.3.a. Identification of the means by which the school assures that all graduate professional degree students have fundamental competence in the areas of knowledge basic to public health. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.**

All MPH students take at least one course that covers fundamental principles and concepts in each of the five core areas of public health. These core courses are listed in Table 2.3.1 and syllabi are located in ERF 2.3.a.

**Table 2.3.a: Required Courses Addressing Public Health Core Knowledge Areas for MPH Degrees FY2018**

Core Knowledge Area	Course Number and Title	SH
Biostatistics	BIOS:4120 Introduction to Biostatistics <u>or</u> BIOS:5710 Biostatistical Methods I (for Quantitative Methods subtrack students)	3
Epidemiology	EPID:4400 Epidemiology I: Principles	3
Environmental Health Sciences	OEH:4240 Global Environmental Health	3
Social and Behavioral Sciences	CBH:4105 Introduction to Health Promotion and Disease Prevention	3
Health Services Administration	HMP:4000 Introduction to the US Healthcare System	3

**2.3.b Assessment of the extent to which this criterion is met.**

This criterion is met.

**Strengths**

- All MPH students complete a course in each of the five core areas in public health.
- Faculty members from the respective core disciplines teach all core courses.

**Weaknesses**

None

**Plans**

- All MPH core content is under review to align with the 2016 CEPH foundational public health knowledge and MPH foundational competencies.

**2.4 Practical Skills.** All graduate professional public health 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' area of specialization.

**2.4.a Description of the school's policies and procedures regarding practice experiences, including the following:**

All MPH students meet the practice requirement by completing the required course CPH:7000 MPH Practicum Experience. The class requires students to complete a 200-hour minimum project in an organization that addresses public health issues. Students have the opportunity to gain additional practice-based experiences through internships, service learning projects or other field experiences that are part of their required coursework and/or electives.

- i. Selection of sites:** Practicum sites must have or enable a public health practice focus and provide the opportunity for students to demonstrate selected public health competencies while carrying out a project that meets the practice organization's needs. To identify an appropriate site, students talk with their faculty advisor, the Practicum Course Director, and/or the MPH Director who are aware of practice organizations interested in having MPH students. A primary criterion for selection of the site is the availability of appropriate practitioners willing to serve as preceptors and guide students through their project. Additionally, students choose a site and project consistent with their area of concentration and which has the potential to provide a high-quality experience in public health practice. The practicum placement process for all MPH students is overseen by the Practicum Course Director.
- ii. Methods for approving preceptors:** Preceptors are selected based on their experience in public health practice and their ability to provide direction to and oversight of the student. All potential preceptors are required to submit a curriculum vitae that is reviewed and approved by the Practicum Course Director to ensure that each student has a qualified preceptor.
- iii. Opportunities for orientation and support for preceptors:** The Practicum Course Director sends a welcome email to all preceptors that includes a Preceptor Orientation Guide that provides information regarding student and preceptor roles/responsibilities in planning, implementing and evaluating the student's practicum experience (ERF 2.4.a.iii). The Practicum Course Director has telephone and/or email communication with preceptors while the practicum is being planned and carried out. Preceptors also read and approve the student's practicum proposal, ensuring that the preceptor is aware of the project's needs and his/her role with the student. The site, preceptor and practicum proposal must be approved by the Practicum Course Director before the student can register for CPH:7000 MPH Practicum Experience.
- iv. Approaches for faculty supervision of students:** Students receive supervision from the Practicum Course Director during all phases of the practicum. Students are expected to contact the Practicum Course Director or the Director of the MPH Program with any concerns, issues and/or changes that occur as the practicum progresses. Throughout the semester registered practicum students participate in an online discussion forum. Students are required to post in the online discussion forum three times during the semester. The first posting requires students to briefly describe their project and list the three competency domains most relevant to their project. The second posting asks students to discuss progress on their practicum project. The final posting requires students to post an additional update. The Practicum Course Director uses this opportunity to identify actual and potential problems and assist in resolving

them. Additionally, mid-way through the semester all registered students complete an electronic survey assessing their perceptions of the practicum progress (ERF 2.4.a.iv). The Practicum Course Director reviews the results and contacts any student who appears to be having difficulty. Additionally, students may consult with their faculty advisor or any other faculty member for advice or consultation about technical/methodological aspects of their project.

**v. Means of evaluating student performance:** Students are evaluated by the preceptor at two points. Mid-way through the semester preceptors are asked to complete an electronic survey to validate progress in the project and identify any issues that might hamper the completion of the project. The Practicum Course Director reviews the survey and follows up with any preceptor that indicates concerns. Preceptors are also asked to complete a survey at the end of the semester. This survey asks the preceptor to assess the student on the five core areas of public health and the seven cross-cutting areas from the MPH Core Competency Model. The midpoint and final preceptor survey can be found in ERF 2.4.a.v. The Practicum Course Director determines the final grade.

**vi. Means of evaluating practice placement sites and preceptor qualifications:** In order for an organization to qualify as a practice site, it must be engaged in applicable public health work and activities. The site must also have qualified preceptors willing to work with MPH students on their practicum experience. The Practicum Course Director, in consult with the MPH Director, reviews the preceptor's curriculum vitae to ensure they meet the qualifications listed below. In addition, there is substantial communication between the preceptor and Practicum Course Director to confirm that the preceptor is committed to fulfilling the expectations below. The qualifications and expectations of a preceptor include:

- Experience related to the student's practicum project
- Experience within the organization
- Time to supervise the student and facilitate learning
- Willingness to provide constructive feedback to the student
- Ability to provide support for the student's professional growth and development
- Ability to model appropriate behavior and attitudes

The Practicum Course Director encourages students to report any difficulties or concerns with regard to their preceptor/site throughout the practicum. At the end of the final presentation, the student is also encouraged to provide verbal feedback regarding their preceptor/site. Practice sites are reviewed to be sure they qualify every time a student submits a practicum project request for that site.

**vii. Criteria for waiving, altering or reducing the experience, if applicable:**

No waivers are permitted.

#### **2.4.b Identification of agencies and preceptors used for practice experiences for students, by program area, for the last two academic years.**

A list of agencies and preceptors utilized for practice experiences for academic year (AY) 2016-17 and AY2017-18 are in ERF 2.4.b. Student practicum sites involve multiple organizations and include sectors such as local and state health departments, state hygienic laboratory, health care organizations, community-based organizations, and international agencies.

**2.4.c Data on the number of students receiving a waiver of the practice experience for each of the last three years.**

No waivers are permitted.

**2.4.d Data on the number of preventive medicine, occupational medicine, aerospace medicine and general preventive medicine and public health residents completing the academic program for each of the last three years, along with information on their practicum rotations.**

**Table 2.4.d: Occupational Medicine Residents - AY2015-16, AY2016-17, AY2017-18**

Agency	Project
<b>AY2015-16</b>	
No students to report	
<b>AY2016-17</b>	
Iowa Institute of Public Health Research and Policy Iowa City, Iowa	Student worked with the Invest Health initiative, whose objective is to increase the availability of safe and affordable rental homes for low-income families while decreasing the inequalities related to poor outcomes in those with asthma, depression, and behavioral health concerns. Student conducted a needs assessment through focus groups and surveys of residents. A final report of findings was presented to area neighborhood advocates and stakeholders.
UnityPoint Allen Hospital, Occupational Health Clinic, Waterloo, Iowa	Student conducted a comparative analysis of two screening procedures for Obstructive Sleep Apnea utilized by area physicians contracted to conduct federally mandated commercial driver's medical examinations. Student surveyed physicians, reviewed epidemiologic data and made practice recommendations to the medical providers.
<b>AY2017-18</b>	
Data will be provided for final self-study	

**2.4.e Assessment of the extent to which this criterion is met.**

This criterion is met.

***Strengths***

- All MPH students complete a practicum project to demonstrate skills learned throughout the program after consultation and approval of the project by the Practicum Course Director.
- All preceptors are vetted through a standard process and receive orientation by the Practicum Course Director.
- Students can select a setting and practicum experience that fits their career goals.
- All students produce a project-based deliverable.
- Students are evaluated not only by self-assessments of their competence but also through preceptor evaluations of the student's competence and abilities.

***Weaknesses***

- There are a growing number of students who would like international practicum experiences for which we have limited infrastructure.
- Some practicum sites (especially out of state or out of country) require a memorandum of understanding (MOU) and it is difficult for the involved entities to come to agreement so the student is left to find another option.

- Currently it is required that students complete their practicum at the end of their program (after completing the majority of their coursework) which may limit student opportunities.

***Plans***

- The MPH program is working with the CPH Global Public Health Coordinator to develop a process for identifying and vetting potential global health practicum sites/partnerships.
- MOUs required by individual organizations will continue to be evaluated on a case-by-case basis but for those organizations with which we want longer term relationships (some of our global health sites in particular) we will work with UI legal counsel to develop more favorable language for all involved.
- We are making several changes to the practicum experience component to fully align with the 2016 CEPH criteria for the Applied Practice Experience.

**2.5 Culminating Experience.** All graduate professional degree programs, both professional public health and other professional degree programs, identified in the instructional matrix shall assure that each student demonstrates skills and integration of knowledge through a culminating experience.

**2.5.a Identification of the culminating experience required for each professional public health and other professional degree program. If this is common across the school's professional degree programs, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each.**

The culminating experience for all MPH students is completed after they finish their 200 hour public health practice experience by preparing a final written report and either a poster or oral presentation that shows how they synthesized and integrated their core public health knowledge and skills in a professional setting. For the written report the student is asked to provide a personal assessment of which competencies they selected for their project (two discipline specific and four cross cutting), how their project addressed those competencies and how their understanding of those competencies may have changed from theory to practice. In addition, students must discuss any anticipated or recommended actions for the practicum site based on the findings of their project. This allows them to express their understanding of how their project fits into the longer-term goals of the organization. The poster session/oral presentation allows the students to demonstrate their ability to synthesize the practicum experience and to prepare and give a professional oral presentation. Examples of student projects are in the ERF 2.5.a.

The Practicum Course Director evaluates the final written report on meeting each element of the paper: abstract, introduction, discussion, personal assessment, conclusions and recommendations, references and biography. Posters and oral presentations are evaluated by the Practicum Course Director and at least one other CPH faculty member. The evaluative information is combined and used to assign a final grade for the MPH Practicum Experience. Students are graded as satisfactory (S) or unsatisfactory (U). Students who do not earn a satisfactory grade are informed of the reasons and provided with an opportunity to remediate.

**2.5.b Assessment of the extent to which this criterion is met.**

This criterion is met.

### ***Strengths***

- Students are able to identify a setting and experience that fits with their specific career goals.
- All students are assessed on their skills and integration of course knowledge through a written report and a poster (or oral) presentation.
- Since the culminating experience is based on the student's practicum experience, the student is not only able to report on their skills and integration of knowledge but also how what they have learned in theory applies in a practice setting.

### ***Weaknesses***

None

### ***Plans***

- Several changes are being made to the culminating experience component to fully align with the 2016 CEPH criteria for the Integrated Learning Experience.

**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 degree programs. The school must identify competencies for graduate public health, other professional and academic degree programs and specializations at all levels (bachelor's, master's and doctoral).

**2.6.a Identification of a set of competencies that all graduate professional public health degree students and baccalaureate public health degree students, regardless of concentration, major or specialty area, must attain. There should be one set for each graduate professional public health degree and baccalaureate public health degree offered by the school (eg, one set each for BSPH, MPH and DrPH).**

### **Bachelor of Arts (BA)/Bachelor of Science (BS) in Public Health**

The undergraduate program utilizes the 2016 criteria competency set for both the BA and BS in Public Health. BA and BS students take the same core courses and must attain the same competencies. By the end of their degree program, students should be able to:

#### 1. Intellectual Development

- 1.1 Recognize, define, and describe the core values, concepts, and functions of public health and its five key disciplines
- 1.2 Describe public health's history, philosophy, and its current role in society and across the globe
- 1.3 Illustrate the structure and function of public health systems, including the political, legal, ethical, and socioeconomic contexts in which public health operates on a local, national, and global scale
- 1.4 Identify how the interconnections between the public health system and political systems, healthcare settings, economic structures and communities play a role in promoting human health
- 1.5 Explain how surveillance data, multidisciplinary evidence, and research supports the development of public health interventions and policies
- 1.6 Recognize and identify determinants of human health at and across the individual, community, environmental, and societal levels
- 1.7 Identify and illustrate public health challenges on a local, national, and global scale

#### 2. Social Responsibility

- 2.1 Distinguish the cultural contexts in which public health professionals work
- 2.2 Illustrate how social, economic, cultural, and other contextual factors affect population health outcomes and health disparities
- 2.3 Describe the relationship between health, human rights, health equity, and social justice
- 2.4 Illustrate and demonstrate the role of advocacy in community and civic engagement by public health professionals when promoting population health, health equity, and social justice
- 2.5 Recognize ethical considerations and potential consequences of research and program development and how they relate to equity and accountability in diverse communities

#### 3. Applied Skills

- 3.1 Demonstrate how the theoretical foundations of public health sciences meet the needs of specific populations
- 3.2 Prepare to implement public health programs in a variety of community health and public health settings

- 3.3 Communicate and translate public health information and science through a variety of media to a broad and diverse audience
  - 3.4 Thoughtfully consume, synthesize, and evaluate scientific information pertaining to public health
  - 3.5 Gain practical experience in public health practice and/or public health research
4. Foundational Liberal Arts and Sciences Education  
Understand the relationships between the natural world, human culture and human health which includes:
- 4.1 Knowledge of the biological and social components of health and disease
  - 4.2 Civic knowledge and engagement
  - 4.3 Knowledge of community and intercultural dynamics and cultural competence/humility
  - 4.4 Effective communication and synthesis of information
  - 4.5 Inquiry and analysis
  - 4.6 Qualitative and Quantitative research skills
  - 4.7 Information literacy
  - 4.8 Critical and creative thinking
  - 4.9 Teamwork, leadership, problem solving, and professional development

### **MPH Program**

The MPH program core competencies are based on the Association of Schools and Programs of Public Health (ASPPH) competencies for each of the core areas of public health. There are additional cross-cutting competencies in professionalism, program planning and systems thinking that all MPH students attain during their course of study. By the end of their degree programs, students should be able to:

#### Biostatistics

- Describe the roles biostatistics serves in the discipline of public health.
- Describe basic concepts of probability, random variation and commonly used statistical probability distributions.
- Describe preferred methodological alternatives to commonly used statistical methods when assumptions are not met.
- Distinguish among the different measurement scales and the implications for selection of statistical methods to be used based on these distinctions.
- Apply descriptive techniques commonly used to summarize public health data.
- Apply common statistical methods for inference.
- Apply descriptive and inferential methodologies according to the type of study design for answering a particular research question.
- Apply basic informatics techniques with vital statistics and public health records in the description of public health characteristics and in public health research and evaluation.
- Interpret results of statistical analyses found in public health studies.
- Develop written and oral presentations based on statistical analyses for both public health professionals and educated lay audiences.

#### Environmental Health Sciences

- Describe the direct and indirect human, ecological, and safety effects of major environmental and occupational agents.
- Describe the general mechanisms of toxicity associated with the absorption, distribution, metabolism and excretion of xenobiotics.

- Describe factors that affect susceptibility to adverse health outcomes following exposure to environmental hazards.
- Describe regulatory programs, guidelines, and authorities that seek to control environmental health issues.
- Describe environmental risk assessment methods and strategies for effectively communicating risks to the public.
- Describe interventions and control approaches for assessing, preventing and controlling environmental hazards that impact human health and safety.
- Identify cases where environmental justice and equity issues arose and what forms of injustice were operative.
- Describe an environmental health problem and how an environmental health practitioner can systematically and holistically address it.

### Epidemiology

- Identify key sources of data for epidemiologic purposes.
- Identify the principles and limitations of public health screening programs.
- Describe a public health problem in terms of magnitude, person, time, and place.
- Explain the importance of epidemiology for informing scientific, ethical, economic, and political discussion of health issues.
- Comprehend basic ethical and legal principles pertaining to the collection, maintenance, use, and dissemination of epidemiologic data.
- Apply the basic terminology and definitions of epidemiology.
- Calculate basic epidemiology measures.
- Communicate epidemiologic information to lay and professional audiences.
- Draw appropriate inferences from epidemiologic data.
- Evaluate the strengths and limitations of epidemiologic reports.

### Health Policy and Management

- Identify the main components and issues of the organization, financing, and delivery of health services and public health systems in the US.
- Describe the legal and ethical bases for public health and health services.
- Discuss the policy process for improving the health status of populations.
- Apply quality and performance improvement concepts to address organizational performance issues.
- Apply "systems thinking" for resolving organizational problems.
- Communicate health policy and management issues using appropriate channels and technologies.

### Social and Behavioral Sciences (Community and Behavioral Health)

- Identify basic theories, concepts, and models from a range of social and behavioral disciplines that are used in public health research and practice.
- Identify the causes of social and behavioral factors that affect health of individuals and populations.
- Describe steps and procedures for the planning, implementation, and evaluation of public health programs, policies, and interventions.
- Describe the role of social and community factors in both the onset and solution of public health problems.

- Describe the merits of social and behavioral science interventions and policies.
- Apply evidence-based approaches in the development and evaluation of social and behavioral science interventions.
- Apply ethical principles to public health program planning, implementation, and evaluation.
- Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies.

#### Professionalism

- Discuss sentinel events in the history and development of the public health profession and their relevance for practice in the field.
- Apply the core functions of assessment, policy development, and assurance in the analysis of public health problems and their solutions.

#### Program Planning

- Describe how social, behavioral, environmental, and biological factors contribute to specific and community health outcomes.

#### Systems Thinking

- Explain how systems (e.g., individuals, social networks, organizations, communities) may be viewed as systems within systems in the analysis of public health problems.
- Analyze the effectiveness of political, social and economic policies on public health systems at the local, state, national and international levels.
- Assess strengths and weaknesses of applying the systems approach to a public health problem.

**2.6.b Identification of a set of competencies for each concentration, major or specialization (depending on the terminology used by the school) identified in the instructional matrix. The school must identify competencies for all degrees, including graduate public health professional degrees, graduate academic degrees, graduate other professional degrees, as well as baccalaureate public health degrees and other bachelor's degrees.**

These competencies are provided in criteria 2.6.c.

**2.6.c A matrix that identifies the learning experiences (eg, specific course or activity within a course, practicum, culminating experience or other degree requirement) by which the competencies defined in Criteria 2.6.a and 2.6.b are met. If these are common across the school, a single matrix will suffice. If they vary, sufficient information must be provided to assess compliance by each degree and concentration.**

Table 2.6.c maps competencies to the courses and learning experiences for the BA/BS in Public Health and MPH. MPH General Track students and their advisors develop 3-5 unique competencies the individual student will attain during their program in addition to the MPH core competencies. The MPH General Track is being phased out and will no longer admit students in Fall 2018. Other Master's and Doctoral programs are included in ERF 2.6.c. In addition, per CEPH instructions the MHA and EMHA are not included.

**Table 2.6.c: Courses and Other Learning Experiences through which Competencies are Met (P=Primary, R=Reinforcing)**

BA/BS IN PUBLIC HEALTH DEGREE		Courses/Other Learning Experiences																
Core Competencies		CPH:1050 Direct Admit Sem	CPH:1400 Fund of Pub Hlth	CPH:1600 Pub Health Sci	CPH:1800 Behav and Psych Determinants of Hlth	CPH:2050 2nd Year Sem	CPH:2400 Hlth Systems	CPH:2600 Intro to Pub Hlth Meth	CPH:3050 3rd year Sem	CPH:3100 Hlth Econ	CPH:3400 Hlth, Work and the Environ	CPH:3500 Global Pub Hlth	CPH:3600 Appl Pub Hlth Meth (sections 1 and 2)	CPH:3700 Program Implem and Eval	CPH:3800 Pub Health Theories and Society	CPH:3900 Pub Hlth Prepare	CPH:4999 Pub Hlth Capstone	Experiential Learning
<b>Intellectual Development</b>																		
Recognize, define and describe the core values, concepts and functions of public health and its five key disciplines	P	P			P				R								R	P R
Describe public health's history, philosophy and its current role in society and across the globe		P									P R	P R					R	
Illustrate the structure and function of public health systems, including the political, legal, ethical and socioeconomic contexts in which public health operates on a local, national and global scale		P				P R				P R		P R				P R	R	P R
Identify how the interconnections between the public health system and political systems, healthcare settings, economic structures and communities play a role in promoting human health		P				P R				P R	P		P		P		R	P R
Explain how surveillance data, multidisciplinary evidence and research supports the development of public health interventions and policies		P	P								P R		P				R	
Recognize and identify determinants of human health at and across the individual community, environmental and societal levels		P	P	P						P		P	P R				R	
Identify and illustrate public health challenges on a local national and global scale		P									P R	P R	P R			P R	R	P R
<b>Social Responsibility</b>																		
Distinguish the cultural contexts in which public health professionals work					P											P	R	P

BA/BS IN PUBLIC HEALTH DEGREE	Courses/Other Learning Experiences																
Core Competencies	CPH:1050 Direct Admit Sem	CPH:1400 Fund of Pub Hlth	CPH:1600 Pub Health Sci	CPH:1800 Behav and Psych Determinants of Hlth	CPH:2050 2nd Year Sem	CPH:2400 Hlth Systems	CPH:2600 Intro to Pub Hlth Meth	CPH:3050 3rd year Sem	CPH:3100 Hlth Econ	CPH:3400 Hlth, Work and the Environ	CPH:3500 Global Pub Hlth	CPH:3600 Appl Pub Hlth Meth (sections 1 and 2)	CPH:3700 Program Implem and Eval	CPH:3800 Pub Health Theories and Society	CPH:3900 Pub Hlth Prepare	CPH:4999 Pub Hlth Capstone	Experiential Learning
Illustrate how social, economic, cultural, and other contextual factors affect population health outcomes and health disparities		P R	P						P		P			P		R	
Describe the relationship between health, human rights, health equity and social justice		P R												P		R	
Illustrate and demonstrate the role of advocacy in community and civic engagement by public health professionals when promoting population health, health equity and social justice					P									P		R	
Recognize ethical considerations and potential consequences of research and program development and how they relate to equity and accountability in diverse communities					P		R					P	P			R	P
<b>Applied Skill</b>																	
Demonstrate how the theoretical foundations of public health sciences meet the needs of specific populations		P														R	P
Prepare to implement public health programs in a variety of community health and public health settings													P R			R	P
Communicate and translate public health information and science through a variety of media to a broad and diverse audience								P				P			P	R	P
Thoughtfully consume, synthesize and evaluate scientific information pertaining to public health		P	P							P	P R	P				R	P
Gain practical experience in public health practice and/or public health research							P					P					P R
<b>Foundational liberal arts and sciences education: Understand the relationships between the natural world, human culture and human health which includes:</b>																	

BA/BS IN PUBLIC HEALTH DEGREE	Courses/Other Learning Experiences																
Core Competencies	CPH:1050 Direct Admit Sem	CPH:1400 Fund of Pub Hlth	CPH:1600 Pub Health Sci	CPH:1800 Behav and Psych Determinants of Hlth	CPH:2050 2nd Year Sem	CPH:2400 Hlth Systems	CPH:2600 Intro to Pub Hlth Meth	CPH:3050 3rd year Sem	CPH:3100 Hlth Econ	CPH:3400 Hlth, Work and the Environ	CPH:3500 Global Pub Hlth	CPH:3600 Appl Pub Hlth Meth (sections 1 and 2)	CPH:3700 Program Implem and Eval	CPH:3800 Pub Health Theories and Society	CPH:3900 Pub Hlth Prepare	CPH:4999 Pub Hlth Capstone Experiential Learning	
Knowledge of the biological and social components of health and disease		P		P					P		P R	P R				R	
Civic knowledge and engagement		P													P	R	
Knowledge of community and intercultural dynamics and cultural competence/humility											P R				P	R	
Effective communication and synthesis of information		P					P								P	R	P
Inquiry and analysis		P					P					P	P		P	R	P
Qualitative and quantitative research skills							P					P				R	P
Information literacy		P	P	P												R	P
Critical and creative thinking		P										P			P	R	P
Teamwork, leadership, problem solving and professional development	P	P			P			R				P			P	R	P

**Table 2.6.c: Courses and Other Learning Experiences through which Competencies are Met (P=Primary, R=Reinforcing)**

MPH CORE COMPETENCIES	Courses/Other Learning Experiences					
Core Competencies	BIOS:4120 Intro to Biostat	CBH:4105 Intro to Hlth Promo and Dis Prev	CPH:4101 Intro to Pub Hlth	EPID:4400 Epi I: Principles	HMP:4000 Intro to the US Hlthcare System OR HMP:5005 Intro to Hlth Care Org and Policy	OEH:4240 Global Environ Hlth
<b>Biostatistics</b>						
Describe the roles biostatistics serves in the discipline of public health	P					
Describe basic concepts of probability, random variation and commonly used statistical probability distributions	P					
Describe preferred methodological alternatives to commonly used statistical methods when assumptions are not met	P					
Distinguish among the different measurement scales and the implications for selection of statistical methods to be used based on these distinctions	P					
Apply descriptive techniques commonly used to summarize public health data	P					
Apply common statistical methods for inference	P					
Apply descriptive and inferential methodologies according to the type of study design for answering a particular research question	P					
Apply basic informatics techniques with vital statistics and public health records in the description of public health characteristics and in public health research and evaluation	P					
Interpret results of statistical analyses found in public health studies	P					
Develop written and oral presentations based on statistical analyses for both public health professionals and educated lay audiences	P					
<b>Environmental Health Sciences</b>						
Describe the direct and indirect human, ecological, and safety effects of major environmental and occupational agents						P
Describe the general mechanisms of toxicity associated with absorption, distribution, metabolism and excretion of xenobiotics.						P
Describe factors that affect susceptibility to adverse health outcomes following exposure to environmental hazards.						P
Describe regulatory programs, guidelines and authorities that seek to control environmental health issues.						P

MPH CORE COMPETENCIES	Courses/Other Learning Experiences					
Core Competencies	BIOS:4120 Intro to Biostat	CBH:4105 Intro to Hlth Promo and Dis Prev	CPH:4101 Intro to Pub Hlth	EPID:4400 Epi I: Principles	HMP:4000 Intro to the US Hlthcare System OR HMP:5005 Intro to Hlth Care Org and Policy	OEH:4240 Global Environ Hlth
Describe environmental risk assessment methods and strategies for effectively communicating risks to the public.						P
Describe interventions and control approaches for assessing, preventing and controlling environmental hazards that impact human health and safety.						P
Identify cases where environmental justice and equity issues arose and what forms of injustice were operative.						P
Describe an environmental health problem and how an environmental health practitioner can systematically and holistically address it.						P
<b>Epidemiology</b>						
Identify key sources of data for epidemiologic purposes				P		
Identify the principles and limitations of public health screening programs				P		
Describe a public health problem in terms of magnitude, person, time, and place				P		
Explain the importance of epidemiology for informing scientific, ethical, economic, and political discussion of health issues				P		
Comprehend basic ethical and legal principles pertaining to the collection, maintenance, use, and dissemination of epidemiologic data				P		
Apply the basic terminology and definitions of epidemiology				P		
Calculate basic epidemiology measures				P		
Communicate epidemiologic information to lay and professional audiences				P		
Draw appropriate inferences from epidemiologic data				P		
Evaluate the strengths and limitations of epidemiologic reports				P		
<b>Health Policy and Management</b>						
Identify the main components and issues of the organization, financing, and delivery of health services and public health systems in the US					P	
Describe the legal and ethical bases for public health and health services					P	
Discuss the policy process for improving the health status of populations					P	
Apply quality and performance improvement concepts to address organizational performance issues					P	

MPH CORE COMPETENCIES	Courses/Other Learning Experiences					
Core Competencies	BIOS:4120 Intro to Biostat	CBH:4105 Intro to Hlth Promo and Dis Prev	CPH:4101 Intro to Pub Hlth	EPID:4400 Epi I: Principles	HMP:4000 Intro to the US Hlthcare System OR HMP:5005 Intro to Hlth Care Org and Policy	OEH:4240 Global Environ Hlth
Apply "systems thinking" for resolving organizational problems					P	
Communicate health policy and management issues using appropriate channels and technologies					P	
<b>Social and Behavioral Health</b>						
Identify basic theories, concepts, and models from a range of social and behavioral disciplines that are used in public health research and practice		P				
Identify the causes of social and behavioral factors that affect health of individuals and populations		P				
Describe steps and procedures for the planning, implementation, and evaluation of public health programs, policies, and interventions		P				
Describe the role of social and community factors in both the onset and solution of public health problems		P				
Describe the merits of social and behavioral science interventions and policies		P				
Apply evidence-based approaches in the development and evaluation of social and behavioral science interventions		P				
Apply ethical principles to public health program planning, implementation, and evaluation		P				
Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies		P				
<b>Cross-cutting competencies</b>						
Discuss sentinel events in the history and development of the public health profession and their relevance for practice in the field			P			
Apply the core functions of assessment, policy development, and assurance in the analysis of public health problems and their solutions			P			
Describe how social, behavioral, environmental, and biological factors contribute to specific and community health outcomes		P				
Explain how systems (e.g., individuals, social networks, organizations, communities) may be viewed as systems within systems in the analysis of public health problems			P			
Analyze the effectiveness of political, social and economic policies on public health systems at the local, state, national and international levels			P			
Assess strengths and weaknesses of applying the systems approach to a public health problem			P			

**Table 2.6.c: Courses and Other Learning Experiences through which Competencies are Met (P=Primary, R=Reinforcing)**

MPH COMMUNITY AND BEHAVIORAL HEALTH SUBTRACK	Courses/Other Learning Experiences																					
Competencies	BIOS:4120 Intro to Biostat	CBH:4105 Intro to Hlth Promo and Dis Prev	CBH:5220 Hlth Behav Hlth Educ	CBH:5235 Pub Hlth Issues in Overweighth Mgmt	CBH:5310 Qualitative Res for Pub Hlth	CBH:5420 Commun with the Community	CBH:5435 Substance Abuse Prev Interven	CBH:5440 Prev Interven Mental Hlth Disorders	CBH:6115 Ethnograph Field Meth	CBH:6205 Des Impl Interven	CBH:6210 Hlth Commun	CBH:6215 Persuasion Hlth	CBH:6220 Hlth Comm Camp	CBH:6230 Hlth Equity Soc Just	CBH:6305 Eval I: Appr Appl	CBH:6405 Mat Child Fam Hlth	CPH:4101 Intro to Pub Hlth	CPH:7000 MPH Practi Exp	EPID:4400 Epi I	HMP:4000 Intro US Hlth Care Syst or HMP5005 Intro to Hlth	OEH:4240 Global Environ Hlth	PHAR:8715 Hlth Dispar Cult Comp
Identify the major socio-behavioral phenomena which impact the health of the public and understand the mechanisms by which they impact health		P												R			P		R	R	R	R
Work effectively with communities in defining and addressing important public health concerns		P				R							R			R			P			
Design, implement and evaluate community-based behavior interventions to prevent disease and/or promote health.	P	P	R		R				R	R					R			P				
Critically assess the scientific basis for preventive interventions		P		R			R	R								R			P			
Plan and conduct program evaluations to assess quality and effectiveness of public health interventions	R	P			R										R							
Communicate effectively with a broad range of audiences		P									R	R	R					R				

**Table 2.6.c: Courses and Other Learning Experiences through which Competencies are Met (P=Primary, R=Reinforcing)**

MPH EPIDEMIOLOGY SUBTRACK	Courses/Other Learning Experiences															
Competencies	BIOS:4120 Intro to Biostat	BIOS:6210 Appl Survival Analy	BIOS:6310 Intro Long Data Analy	CPH:7000 MPH Prac Exp	EPID:4314 Field Exp in Pub Hlth	EPID:4400 Epi I: Principles	EPID:4450 Pub Hlth Data	EPID:4990 Prac Evidence-Based Pub Hlth	EPID:5200 Principles Pub Hlth Informatics	EPID:5241 Stat Meth Epi	EPID:5540 Surveillance Mech Appl	EPID:5580 Pub Hlth Lab Tech	EPID:5600 Intro Epi Data Mgmt Analy	EPID:5925 Journal Club	EPID:6400 Epi II: Advanced Meth	Scientific Poster Presentation
Define the concepts and contents of epidemiology						P									R	
Use existing databases to provide background or supportive public health data to determine priorities and formulate public health investigations							P	P	R							
Use existing questionnaires and measurement instruments in collection of data to determine public health status and priorities and to evaluate interventions													P		P	
Create study aims and objectives needed to address a public health program or investigation						P									P	
Select the appropriate study design for interventions/investigations						P									P	
Describe health and disease measurement in a community population					R	P	P				P	P			P	
Identify risk or preventive factors that may contribute to outcome and to incorporate them into a preventive study						P									P	
Use computers to collect, manage and analyze data for analysis of basic associations	P												P			
Analyze results and compose an understandable and presentable report of the results	P	R	R	R						P						R
Interpret results to guide public health policy				R			P	P								R

**Table 2.6.c: Courses and Other Learning Experiences through which Competencies are Met (P=Primary, R=Reinforcing)**

MPH OCCUPATIONAL AND ENVIRONMENTAL HEALTH SUBTRACK	Courses/Other Learning Experiences											
Competencies	BIOS:4120 Intro to Biostat	CPH:7000 MPH Prac Exp	EPID:4400 Epi I: Principles	OEH:4240 Global Environ Hlth	OEH:4260 Global Water and Hlth	OEH:4310 Occupational Ergo	OEH:4920 Solid Hazardous Waste	OEH:5410 Occupational Safety	OEH:5620 Occupational Hlth	OEH:5710 Environ Tox	OEH:6420 Ind Hyg Fund	OEH:6510 Environ Occup Epi
Describe the principles of the practice of occupational medicine, industrial hygiene, occupational health nursing, ergonomics and occupational health management				P		R		R	P		R	
Comprehend the use of statistical analyses to associate environmental and occupational health hazards with health outcomes	P											
Comprehend the epidemiological principles needed to determine etiologic factors in human disease and the determinants of disease			P									R
Explain the current regulatory issues concerned with environmental and occupational health hazard.				P					P			
Explain the association between contemporary human health issues and the biological, chemical and physical factors of the natural environment and occupational settings that adversely affect health				P	R		R		P			
Identify the sources, routes of entry, and effects of environmental toxicants				P						R		
Analyze, critically review, and communicate the environmental and occupational factors that affect health		P		P					P			

**Table 2.6.c: Courses and Other Learning Experiences through which Competencies are Met (P=Primary, R=Reinforcing)**

MPH POLICY SUBTRACK	Courses/Other Learning Experiences									
Competencies	HMP:5750 Medicare Medicaid Policy	HMP:6610 Legal Aspects Hlthcare	HMP:6710 Federalism Hlth Policy	HMP:5610 Hlth Policy	HMP:6750 Sem Hlth Policy	HMP:5005 Intro Hlthcare Org Policy	HMP:5410 Hlth Econ I	HMP:6120 Eval Outcomesn Hlthcare	HMP:6315 Hlthcare Ethics	HMP:5450 Hlth Ins Managed Care
Demonstrate the ability to identify and analyze public health policies for specific health issues	P	P	P	P	P	R	R	R	R	
Demonstrate knowledge of public health policy formulation	P		P	P	R					R
Design effective implementation strategies for public health policies	P	P	P	P	R		R			
Evaluate the impact of public health policies	P	P	P	P	P		R			

MPH QUANTITATIVE METHODS SUBTRACK	Courses/Other Learning Experiences																
Competencies	BIOS:4120 Intro Biostat	BIOS:5120 Regressi Model ANOVA Hlth Sci	BIOS:5310 Res Data Mgmt	BIOS:5510 Biostat Comput	BIOS:5710 Biostat Meth I	BIOS:5720 Biostat Meth II	BIOS:5730 Biostat Meth Categor Data	BIOS:6110 Appl Categor Data Analy	BIOS:6210 Appl Survival Analy	BIOS:6310 Intro Long Data Analy	BIOS:6610 Stat Meth Clin Trials	BIOS:6650 Comp Effect Res Meth Observ Data	BIOS:7270 Schol Integrity Biostat	CPH:7000 MPH Practicum Exp	STAT:3100 Intro Math Stat I	STAT:3101 Intro Math Stat II	Graduate Res Assistantship
Demonstrate a broad knowledge and understanding of statistical techniques used in public health studies and investigations	P	P	R	R	P	P	P	P	R	R	R	R	R		R	R	
Serve as an advocate for good statistical design in public health investigations	P	P	R	R	P	P	P	P	R	R	R	R	R		R	R	
Apply appropriate statistical methods for inference about public health related questions, and describe the results to public health professionals and educated lay audiences	P	P	R	R	P	P	P	P	R	R	R	R	R		R	R	

MPH QUANTITATIVE METHODS SUBTRACK	Courses/Other Learning Experiences																
Competencies	BIOS:4120 Intro Biostat	BIOS:5120 Regressi Model ANOVA Hlth Sci	BIOS:5310 Res Data Mgmt	BIOS:5510 Biostat Comput	BIOS:5710 Biostat Meth I	BIOS:5720 Biostat Meth II	BIOS:5730 Biostat Meth Categor Data	BIOS:6110 Appl Categor Data Analy	BIOS:6210 Appl Survival Analy	BIOS:6310 Intro Long Data Analy	BIOS:6610 Stat Meth Clin Trials	BIOS:6650 Comp Effect Res Meth Observ Data	BIOS:7270 Schol Integrity Biostat	CPH:7000 MPH Practicum Exp	STAT:3100 Intro Math Stat I	STAT:3101 Intro Math Stat II	Graduate Res Assistantship
Interpret the results of statistical analyses in public health related publications for public health professionals and educated lay audiences	P	P	R	R	P	P	P	P	R	R	R	R	R		R	R	
Promote the use of sound statistical methods to answer open questions in public health practice	P	P	R	R	P	P	P	P	R	R	R	R	R		R	R	
Function as a collaborator on public health projects, taking a leadership role in the design and implementation of projects														P			R
Assume responsibility for the design and implementation of analyses in investigations of public health questions					P	P		P	R	R				P			
Manage the data for public health related projects such as large community surveys, laboratory investigations, and multi-center clinical trials			R	P							R						
Demonstrate effective written and oral communication skills when communicating quantitative information and statistical inferences to different audiences of public health professionals	P	P			P	P	P	P	R	R				P			R

**Table 2.6.c: Courses and Other Learning Experiences through which Competencies are Met (P=Primary, R=Reinforcing)**

MPH FOR PRACTICING VETERINARIANS	Courses/Other Learning Experiences						
Competencies	CPH:6700 Pub Hlth Emergency Preparedness	EPID:5200 Pub Hlth Informatics	EPID:5300 Food Safety	EPID:5320 Exotic Emerging Dis Animals	EPID:5470 Applied Vet Epi/Biostat	EPID:5550 Diagnostic Microbiol Epi	OEH:6110 Rural Hlth Agri Med
Describe the role that the veterinary profession plays in public health	P						P
Recognize the importance of veterinarians in preventing, detecting and responding to issues related to the health of the public, such as foodborne illnesses and infectious diseases of animals			P	P			P
Utilize public health data to inform veterinary practice		P			P		
Develop skills needed to apply epidemiological principles and methods in solving problems related to infectious diseases including identifying surveillance, diagnoses and control measures given a specific infectious disease outbreak		P			P	P	

DVM/MPH COMBINED DEGREES	Courses/Other Learning Experiences				
Competencies	BMS:443 Pharmacol Therapeut	VCS:436 Small Animal Int Med	VMPPM:378 Case Studies IV: Emerging Exotic Dis Animals	VMPPM:388 Pub Hlth Role Vet Profession	VMPPM:437 Inf Dis Prev Med
Describe the role that the veterinary profession plays in public health				P	P
Recognize the importance of veterinarians in preventing, detecting and responding to issues related to the health of the public, such as foodborne illnesses and infectious diseases of animals	P		P	P	P
Examine the intersection of animal and human disease, including the identification of common zoonoses, their reservoirs, routes of transmission, public health significance, and how to prevent and control them		P	P	P	P

**Table 2.6.c: Courses and Other Learning Experiences through which Competencies are Met (P=Primary, R=Reinforcing)**

JD/MPH COMBINED DEGREES	Courses/Other Learning Experiences			
Competencies	LAW:8467 Family Law	LAW:8562 Hlth Law	LAW:8751/ HMP:6360 Nonprofit Org Effect I	LAW:8752/ HMP:6365 Nonprofit Org Effect II
Discuss legal issues related to health and public health such as the “right to die”, organ transplantation and medical malpractice	P	P		
Describe the role nonprofit organizations play in building and enhancing local communities			P	
Examine the relationship of nonprofit organizations to community constituencies, governmental entities, and professional associations				P

MD/MPH COMBINED DEGREES	Courses/Other Learning Experiences			
Competencies	MED:8121 Clin Prof Skills I, II, III	MED:8122 Med Soc I	MED:8132 Med Soc II	MED:8222 Med Soc III
Discuss the relationship between medicine and ethics				P
Demonstrate an awareness of and responsiveness to the larger context and system of health care and health policy, as well as the ability to call effectively on other resources in the system to provide optimal health care	P	P	P	P
Describe the influence of cultural, environmental and socioeconomic factors on access to health care and competent provision of care		P		P

PHARMD/MPH COMBINED DEGREES	Courses/Other Learning Experiences			
Competencies	PHAR:8134 Found Hlth Serv	PHAR:8142 Found Hlth, Well, Dis	PHAR:8263 Integrated Pharmaco Inf Dis	PHAR:8375 Adv Topics Hlth Services
Understand economics principles related to how health care systems are financed and describe the basic structure of the US health care system	P			P
Demonstrate sensitivity to multicultural factors involved in pharmacy care	P	P		
Provide public health related educational interventions tailored to the needs of given audiences		P	P	

**2.6.d An analysis of the completed matrix included in Criterion 2.6.c. If changes have been made in the curricula as a result of the observations and analysis, such changes should be described.**

A review of the matrices and mapped competencies shows that all competencies are addressed by one or more courses. Course syllabi include the core and concentration competencies with which course topics and objectives align.

The process of analyzing competencies and related curricula is ongoing and revisions are made as needed. For example, faculty in the Department of Biostatistics (BIO) reviewed the competencies for the MPH in biostatistics. After review faculty made changes to the competencies to better reflect what an individual with an MPH in this area would be doing post-graduation and renamed the subtrack, Quantitative Methods. Corresponding changes were made to the required courses to align with the revised competencies. In another example, the MPH program collaborates with other colleges on combined degree programs to review the competencies and corresponding curricula. The Colleges of Pharmacy and Medicine recently made changes to their curricula. The MPH reviewed the new requirements to ensure they included public health-related content and contributed to the mastery of the competencies.

Departments and degree programs monitor their course work on an ongoing basis to ensure that the coverage of the competencies is sufficient. Based on the review changes are made to the curriculum. For example, as competencies for the PhD in Health Services and Policy were reviewed Department of Health Management and Policy (HMP) faculty determined there was not sufficient required coursework that covered the competency, “Know how to collect primary health and health care data obtained by survey, qualitative, or mixed methods...” In response, the department developed HMP:7940--Primary Data and Mixed Methods which is now a required course for doctoral students. In another example, faculty in the CBH reviewed and updated the competencies for the PhD in community and behavioral health to better reflect the knowledge and skills needed by those going into academic, research, and policy-making careers. After the competencies were updated faculty reviewed the required coursework, identified gaps and restructured the PhD curriculum in response.

Although a new program, the Undergraduate Program Director works with faculty to monitor competency coverage in the required courses. After required courses are taught for the first time, the Undergraduate Program Director meets with the instructor to discuss if changes need to be made to the list of competencies assigned to the course based on course content. For example, CPH:1600 Public Health Science: Inquiry and Investigation in Public Health was first offered in spring 2017. After a review of course content, competencies, and student feedback, the instructors determined there was insufficient course coverage of basic public health principles and functions to contextualize course concepts and that the competency, “Recognize, define, and describe the core values, concepts, and functions of public health and its five key disciplines” should be added to the list of course competencies for future offerings.

**2.6.e A description of the manner in which competencies are developed, used and made available to students.**

Currently, the MPH competencies are based on the ASPPH core and cross-cutting competencies. However, the program is in the process of updating its competencies to meet the 2016 CEPH criteria and to reflect additional skills needed by practitioners. Competencies for academic degrees (MS and PhD) are developed by faculty in each department utilizing discipline

specific guidelines that are identified by review of literature, national organization recommendations and from alumni and employer surveys. The undergraduate program competencies are based on the CEPH 2016 Public Health Bachelor's Degree Foundational Domains and Foundational Competencies.

All programs utilize competencies to ensure their students have the knowledge, skills, and abilities needed upon graduation. Both professional and academic programs make the competencies available to their students through the website, student handbooks, orientation activities, and in course syllabi. The undergraduate program competencies are available via the website and in course syllabi.

**2.6.f A description of the manner in which the school periodically assesses the changing practice or research needs and uses this information to establish the competencies for its educational programs.**

The CPH uses multiple methods for assessing changes in practice and research to inform the competencies for its educational programs. Competencies are reviewed by faculty and external reviewers as part of their departmental review process every seven years to ensure they are aligned with the knowledge and skills students will need upon graduation. Competencies are also reviewed on an ad hoc basis as new developments emerge in disciplines and as faculty actively engage in research and activities such as grant review panels for the National Institutes of Health and Centers for Disease Control and Prevention (CDC). Faculty review recommendations from national organizations and groups such as the ASPPH and the Council of State and Territorial Epidemiologists. Various activities are also identified in our strategic initiative annual work plan to ensure students are receiving the knowledge and skills needed to succeed. Some of these activities include gathering input from alumni, current graduate students, and advisory boards.

The MPH program also regularly assesses the changing needs of public health practice in a variety of ways, including alumni surveys, feedback from practicum preceptors and employers, scientific articles discussing the skills needed by public health professionals working in local public health, participation in national meetings and interactions with the local and state public health community. The MPH program is also utilizing information from ASPPH's Framing the Future Report, "A Master of Public Health Degree for the 21<sup>st</sup> Century" and the Competency Assessments for Public Health Professionals from the Public Health Foundation and the Council on Linkages between Academia and Public Health Practice.

Recently the Department of Epidemiology (EPI) used a report issued by the American College of Epidemiology that identified the need to expand and modernize the competencies for major public health and epidemiological curriculum directions. Topics planned to be addressed are: "Big Data" or informatics, the health communication environment, The Affordable Care Act or health care system reform, shifting demographics, globalization, emerging high-throughput technologies (omics), epidemiology impact, privacy changes, greater focus on "upstream" causes of disease, translational sciences, and team and transdisciplinary science. In response to this report, EPI has reviewed its PhD competencies and will be making subsequent revisions to its curricula to address these developments.

In an additional example, both the Agricultural Safety and Health and Industrial Hygiene programs have external advisory boards. These boards are routinely asked to describe practices in each discipline that are changing so that competencies and aligned curricula are addressed appropriately. As part of the external review component of departmental reviews, faculty at peer

institutions provide input on curriculum. The Department of Occupational and Environmental Health (OEH) also surveyed environmental/occupational health science employers to determine skills that would be beneficial to students as they prepare for future careers.

Finally, in response to a departmental review and subsequent conversations with College of Public Health Student Association (CPHSA) and collegiate leadership, a workgroup of faculty from across collegiate departments was formed to develop a comprehensive description of methodological training opportunities across the college curricula for use by programs within the college to meet the objectives and competencies needed in programs of study.

As the undergraduate program evolves, it will look to ASPPH and CEPH in regard to identified changes needed to competencies. Additionally, as students complete experiential learning opportunities input will be sought from their preceptors to determine if additional skill sets need to be added to the curriculum and/or reinforced by additional content and emphasis.

Changes to program competencies are reviewed by departmental and program faculty and the CPH Curriculum Committee.

### **2.6.g Assessment of the extent to which this criterion is met.**

This criterion is met.

#### ***Strengths***

- Each degree program/concentration in the college has clearly articulated competencies.
- Competencies are mapped to courses. Competencies are reviewed by faculty and external reviewers as part of the departmental review process every seven years. Additionally, faculty periodically review the mapping of competencies to courses and make curricular changes as needed.
- The competencies are made available via the website, student handbooks and individual course syllabi.
- Input is obtained from national reports and research, external advisory boards, alumni surveys, and employers to ensure students have needed knowledge, skills, and abilities upon graduation.

#### ***Weaknesses***

- The MPH program has not made significant updates to its competencies.

#### ***Plans***

- The MPH program is in the process of updating its foundational competencies to meet the CEPH 2016 criteria. Additionally, all MPH concentration competencies will be reviewed in light of the 2016 criteria and updated as needed.
- All academic degree program competencies will also be reviewed to ensure compliance with the 2016 criteria changes.
- A syllabi template is being developed that will require faculty to include not only faculty in their syllabi but also the method by which the competencies are being assessed.

**2.7 Assessment Procedures.** There shall be procedures for assessing and documenting the extent to which each professional public health, other professional and academic degree student has demonstrated achievement of the competencies defined for his or her degree program and area of concentration.

**2.7.a Description of the procedures used for monitoring and evaluating student progress in achieving the expected competencies, including procedures for identifying competency attainment in practice or research, as applicable, and in culminating experiences.**

All students take a set of required courses and a specified number of electives. The competencies covered in each course are assessed by student performance on exams, papers, projects and other class assignments. Course syllabi identify the competencies that are covered in a course and how student performance is evaluated, including the grading process. At each stage of students' progress, the final evaluation of their performance is the grade they receive for a course plus any additional feedback from their instructor, preceptor and/or committee members.

**Undergraduate program:** BA and BS in Public Health students are expected to meet standards set by the CPH and to demonstrate reasonable progress towards the degree. To be considered in academic good standing students must earn a minimum cumulative public health major Grade Point Average (GPA) of at least 2.0. Some courses require a grade C- or higher in order to meet the prerequisite for subsequent courses and this is another way of monitoring student progress. The CPH has laid out a four-year plan of study for both the BA and BS. Students are required to meet with the undergraduate academic advisor each semester before they register to review their progress towards the degree and to discuss any concerns. Additionally, the successful completion of CPH:4999 Public Health Capstone: Practice of Evidence-Based Public Health is one manner in which student achievement of competencies is evaluated.

**Graduate Programs:** All programs monitor the academic performance of their students on an ongoing basis. Each student is assigned a faculty advisor who, along with the graduate program coordinator, reviews progress and authorizes registration each semester. Grade reports are reviewed by academic program coordinators and shared with faculty advisors at the end of each semester. The UI Graduate College specifies that non-doctoral students must have a UI Cumulative GPA of 2.75 or greater and doctoral students a 3.0 or greater to be in good academic standing. If students are not meeting the expected level of performance, they are placed on academic probation by the department and/or the UI Graduate College. In a case where there are ongoing concerns regarding performance, departments may also require students to meet with their faculty advisor more frequently and provide updates on progress in courses. If academic performance does not improve, students can be dismissed from the program. Any student who receives a degree will have met the required level of performance in their courses and fulfilled any additional requirements for their degree program, including an overall grade point average acceptable to both the CPH and the UI Graduate College. Some CPH programs have more stringent requirements for continuation and graduation than the UI Graduate College. For example, MPH students must receive at least a B- on all MPH core courses to remain in good academic standing. If MPH students do not receive a B- on a core course they must retake the course. This standard does not apply to concentration-specific courses.

All students participate in a culminating experience at the end of their degree program that allows them to fully demonstrate and utilize the competencies they have acquired. Below is additional information on how departments ensure student progress through the doctoral program.

**Department of Biostatistics:** BIO conducts an annual review of all masters and doctoral students to determine whether each student is making satisfactory academic progress, according to specific criteria defined in the graduate student handbook. As part of this review, students meet with their academic advisors to review a report prepared by the advisor to assess the student's progress and to document any unfulfilled requirements for maintaining satisfactory progress. This report must be signed by both the advisor and the student and submitted to the director of graduate studies. To request exemptions from any of the criteria, a written statement must be submitted by the student to both the academic advisor and the director of graduate studies. This statement must include a written plan for completing the program.

**Department of Community and Behavioral Health:** CBH conducts an annual review of all doctoral students in which students submit an update of their progress which faculty then review and discuss during a closed faculty meeting. Each student receives a letter with feedback about their progress and suggestions, where applicable, about course work or opportunities for publications.

**Department of Epidemiology:** EPI has an annual review of doctoral students in which students submit an update of their progress which then faculty review and discuss in a closed meeting. They also have developed a detailed timeline for full and part-time students for course and dissertation completion.

**Department of Health Management and Policy:** HMP students are assigned a mentoring team that meets with the student at the beginning of the first semester and periodically thereafter. Before each of these meetings, students complete a self-assessment of the extent to which they meet the academic and professional competencies of the program based on a pre-specified list of competencies and a multi-category assessment scale. The mentoring team discusses the self-assessment with the student to ensure that students meet or exceed all competencies by the time they graduate from the program. This individualized mentoring process provides each student with extensive guidance and support to enhance success throughout the program milestones.

**Department of Occupational and Environmental Health:** OEH student handbook articulates expectations of doctoral students. Advisors review these expectations with new students. Additionally each student's academic progress is reviewed annually by their advisor. The advisor then summarizes the assessment of student progress in an e-mail to the department's director of graduate studies. If a student fails to meet the expectations for reasonable progress, the director of graduate studies informs the student and their advisor of this fact in writing. The student, with guidance from the advisor, then develops a written plan and timeframe for meeting required expectations which is signed by both advisor and student.

**Assessment of Culminating Experiences in MPH:** For MPH students the culminating experience is the course CPH:7000 The MPH Practicum Experience. During the practicum project students synthesize and integrate core public health knowledge and skills in a professional practice setting. They are also required to produce a formal written report which includes a description of how each of the public health competencies was applied during the project. In addition to assessing themselves in their final report on a set of two discipline-specific and four cross-cutting competencies that they specifically addressed in their practicum project, students also complete a self-assessment survey of their competence on a set of competencies based on the MPH Core Competency Model (including the five core areas of public health and the seven cross-cutting areas). The final component of the culminating experience is a public presentation which can take

the form of either an oral or poster presentation. In their presentation students must describe the competencies that they addressed and how their coursework prepared them for demonstrating their competence in practice. Students are evaluated using a common grading rubric. Students also engage in directed reflection activities during the practicum experience on several of the cross-cutting competencies as they relate to the student's specific practice setting. MPH students receive a final practicum grade of satisfactory/unsatisfactory.

**Assessment of Culminating Experiences in MS:** For MS students the culminating experience can take several forms, including a final comprehensive examination, thesis or some combination of an exam and written work. The subject matter of the final comprehensive examination is based on the expectations of what the student should be able to demonstrate at the end of their degree program. The master's thesis allows students to conduct research under the guidance of their faculty advisor and to demonstrate what they have learned during their degree program. Their work must be presented orally, defended to at least three faculty, and follow protocol dictated by the UI Graduate College. MS students receive a thesis final grade of pass/no pass.

**Assessment of Culminating Experiences in PhD:** For PhD students the dissertation is the ultimate culminating experience (although all PhD students must also pass a comprehensive examination). Students must complete an original research project and defend it orally in a public forum. The expectation is that the student will undertake a project with greater depth and complexity than that expected of a MS student. In some CPH degree programs, the dissertation takes the form of three publishable articles. A minimum of five faculty members is required for evaluation, and protocol dictated by the UI Graduate College is followed. PhD students receive a final dissertation grade of pass/no pass.

**2.7.b Identification of outcomes that serve as measures by which the school will evaluate student achievement in each program, and presentation of data assessing the school's performance against those measures for each of the last three years. Outcome measures must include degree completion and job placement rates for all degrees (including bachelor's, master's and doctoral degrees) for each of the last three years. If degree completion rates in the maximum time period allowed for degree completion are less than the thresholds defined in this criterion's interpretive language, an explanation must be provided. If job placement (including pursuit of additional education), within 12 months following award of the degree, includes fewer than 80% of the graduates at any level who can be located, an explanation must be provided.**

Our selected outcome measures include graduation rates within a specified time for all of our degree programs and the percentage of graduates with job placement at 12 months post-graduation (including being placed in an internship or fellowship or pursuing further education). The UI has set maximum limits for the allowable time to graduation (6 years for master's students and 10 years for doctoral students); however, the CPH has chosen to set a higher bar for time to degree. In the table below, only full-time students are included for the MHA.

**Table 2.7.b.1: Summary of Degree Completion Rates AY2014 to AY2016**

Program	CPH Max Time to Grad	% Graduated Based on MaxTime to Grad		
		AY2014-15	AY2015-16	AY2016-17
MPH	6 yrs	85	70	89.6
All Master's*	6 yrs	90	89	92.7
All Doctoral	10 yrs	70	86	80

\*Includes MHA per CEPH instructions

**Table 2.7.b.2: Students in MPH Degree, By Cohorts Entering Between AY2011-12 and AY2016-17**

Year	Cohort of Students	AY2011-12	AY2012-13	AY2013-14	AY2014-15	AY2015-16	AY2016-17
<b>AY2011-12</b>	# Students entered	67					
	# Students withdrew, dropped, etc.	2					
	# Students graduated	2					
	Cumulative graduation rate	3.0%					
<b>AY2012-13</b>	# Students continuing at beginning of this school year	63	68				
	# Students withdrew, dropped, etc.	4	2				
	# Students graduated	29	13				
	Cumulative graduation rate	46.3%	19.1%				
<b>AY2013-14</b>	# Students continuing at beginning of this school year	30	53	58			
	# Students withdrew, dropped, etc.	1	3	4			
	# Students graduated	15	18	0			
	Cumulative graduation rate	68.7%	45.6%	0.0%			
<b>AY2014-15</b>	# Students continuing at beginning of this school year	15	32	54	62		
	# Students withdrew, dropped, etc.	1	4	0	6		
	# Students graduated	7	13	21	1		
	Cumulative graduation rate	79.1%	64.7%	36.2%	1.6%		
<b>AY2015-16</b>	# Students continuing at beginning of this school year	7	15	33	55	59	
	# Students withdrew, dropped, etc.	0	1	1	1	3	
	# Students graduated	5	8	21	26	1	
	Cumulative graduation rate	86.6%	76.5%	72.4%	43.5%	1.7%	
<b>AY2016-17</b>	# Students continuing at beginning of this school year	2	6	12	28	55	68
	# Students withdrew, dropped, etc.	0	0	0	1	0	1
	# Students graduated	1	5	8	17	17	0
	Cumulative graduation rate	88.1%	83.8%	86.2%	71%	30.5%	0.0%

**Table 2.7.b.3: Students in MS Degree, By Cohorts Entering Between AY2011-12 and AY2016-17**

Year	Cohort of Students	AY2011-12	AY2012-13	AY2013-14	AY2014-15	AY2015-16	AY2016-17
<b>AY2011-12</b>	# Students entered	29					
	# Students withdrew, dropped, etc.	2					
	# Students graduated	0					

Year	Cohort of Students	AY2011-12	AY2012-13	AY2013-14	AY2014-15	AY2015-16	AY2016-17
	Cumulative graduation rate	0.0%					
<b>AY2012-13</b>	# Students continuing at beginning of this school year	27	30				
	# Students withdrew, dropped, etc.	1	3				
	# Students graduated	22	0				
	Cumulative graduation rate	75.9%	0.0%				
<b>AY2013-14</b>	# Students continuing at beginning of this school year	4	27	29			
	# Students withdrew, dropped, etc.	0	0	2			
	# Students graduated	2	14	0			
	Cumulative graduation rate	82.8%	46.7%	0.0%			
<b>AY2014-15</b>	# Students continuing at beginning of this school year	2	13	27	25		
	# Students withdrew, dropped, etc.	1	0	1	2		
	# Students graduated	1	10	19	1		
	Cumulative graduation rate	86.2%	80.0%	65.5%	4.0%		
<b>AY2015-16</b>	# Students continuing at beginning of this school year	0	3	7	22	35	
	# Students withdrew, dropped, etc.	0	0	1	1	0	
	# Students graduated	0	3	4	12	3	
	Cumulative graduation rate	86.2%	90.0%	79.3%	52.0%	8.6%	
<b>AY2016-17</b>	# Students continuing at beginning of this school year	0	0	2	9	32	30
	# Students withdrew, dropped, etc.	0	0	0	0	0	0
	# Students graduated	0	0	1	8	18	0
	Cumulative graduation rate	86.2%	90.0%	82.8%	84.0%	60.0%	0.0%

**Table 2.7.b.4: Students in PhD Degree, By Cohorts Entering Between AY2007-08 and AY2016-17**

Year	Cohort of Students	AY 2007-08	AY 2008-09	AY 2009-10	AY 2010-11	AY 2011-12	AY 2012-13	AY 2013-14	AY 2014-15	AY 2015-16	AY 2016-17
<b>AY2007-08</b>	# Students entered	25									
	# Students withdrew, dropped, etc.	1									
	# Students graduated	0									
	Cumulative graduation rate	0%									
<b>AY2008-09</b>	# Students continuing at beginning of this school year	24	29								
	# Students withdrew, dropped, etc.	0	1								
	# Students graduated	0	0								

Year	Cohort of Students	AY 2007-08	AY 2008-09	AY 2009-10	AY 2010-11	AY 2011-12	AY 2012-13	AY 2013-14	AY 2014-15	AY 2015-16	AY 2016-17
	Cumulative graduation rate	0%	0%								
<b>AY2009-10</b>	# Students continuing at beginning of this school year	24	28	20							
	# Students withdrew, dropped, etc.	1	0	4							
	# Students graduated	2	0	0							
	Cumulative graduation rate	8.0%	0%	0.0%							
<b>AY2010-11</b>	# Students continuing at beginning of this school year	21	28	16	14						
	# Students withdrew, dropped, etc.	2	0	1	4						
	# Students graduated	3	0	0	0						
	Cumulative graduation rate	20.0%	0%	0.0%	0.0%						
<b>AY2011-12</b>	# Students continuing at beginning of this school year	16	28	15	10	22					
	# Students withdrew, dropped, etc.	0	1	2	0	5					
	# Students graduated	8	9	2	0	0					
	Cumulative graduation rate	52.0%	31.0%	10.0%	0.0%	0.0%					
<b>AY2012-13</b>	# Students continuing at beginning of this school year	8	18	11	10	17	18				
	# Students withdrew, dropped, etc.	0	2	0	0	1	1				
	# Students graduated	3	5	5	0	0	0				
	Cumulative graduation rate	64.0%	48.3%	35.0%	0.0%	0.0%	0.0%				
<b>AY2013-14</b>	# Students continuing at beginning of this school year	5	11	6	10	16	17	26			
	# Students withdrew, dropped, etc.	1	0	0	1	1	0	3			
	# Students graduated	2	5	1	2	1	1	0			
	Cumulative graduation rate	72.0%	65.5%	40.0%	14.3%	4.5%	5.6%	0.0%			
<b>AY2014-15</b>	# Students continuing at beginning of this school year	2	6	5	7	14	16	23	18		
	# Students withdrew, dropped, etc.	0	1	0	0	1	0	0	0		
	# Students graduated	1	3	0	0	3	0	0	0		
	Cumulative graduation rate	76.0%	75.9%	40.0%	15.4%	18.2%	5.6%	0.0%	0.0%		

Year	Cohort of Students	AY 2007-08	AY 2008-09	AY 2009-10	AY 2010-11	AY 2011-12	AY 2012-13	AY 2013-14	AY 2014-15	AY 2015-16	AY 2016-17
<b>AY2015-16</b>	# Students continuing at beginning of this school year	1	2	5	7	10	16	23	18	20	
	# Students withdrew, dropped, etc.	0	0	1	0	0	0	2	0	2	
	# Students graduated	1	2	2	5	9	4	2	0	0	
	Cumulative graduation rate	80%	82.8%	50.0%	50.0%	59.1%	27.8%	7.7%	0.0%	0.0%	
<b>AY2016-17</b>	# Students continuing at beginning of this school year	0	0	2	2	1	12	19	18	19	25
	# Students withdrew, dropped, etc.	0	0	1	0	0	0	0	0	1	0
	# Students graduated	0	0	0	1	0	5	5	1	0	0
	<b>Cumulative graduation rate</b>	80.0%	82.8%	50.0%	57.1%	59.1%	55.7%	26.9%	5.6%	0.0%	0.0%

**2.7.c An explanation of the methods used to collect job placement data and of graduates’ response rates to these data collection efforts. The school must list the number of graduates from each degree program and the number of respondents to the graduate survey or other means of collecting employment data.**

The CPH uses several approaches to gather employment data from graduates between graduation and one year post-graduation. At the time of graduation, all students complete a form asking them to provide post-graduation contact information and details pertaining to employment. The CPH also attempts to obtain missing data through the student’s faculty advisor, the graduate program coordinators, and social media sites such as LinkedIn and Facebook. As seen in Table 2.7.c below, there are very few students for whom job placement/graduate destination is not known.

The CPH will not have graduates from its undergraduate degree program until spring 2020. The CPH will partner with the UI Pomerantz Career Center which conducts post-graduation surveys of all undergraduate colleges on campus and produces a “First Destination Survey Results” report each year. Per CEPH instructions, the MHA program is not included in job placement data.

**Table 2.7.c.1: Destination of Graduates by Employment Type for MPH (#) AY2013-14 to AY2015-16**

	AY2013-14	AY2014-15	AY2015-16
Employed	33	42	44
Continued education/training (not employed)	21	12	12
Actively seeking employment	0	2	2
Not seeking employment (not employed and not continuing education/training, by choice)	1	0	0
Unknown	1	0	0

**Table 2.7.c.2: Destination of Graduates by Employment Type for MS (#) AY2013-14 to AY2015-16**

	AY2013-14	AY2014-15	AY2015-16
Employed	15	15	13
Continued education/training (not employed)	12	6	8
Actively seeking employment	3	1	1
Not seeking employment (not employed and not continuing education/training, by choice)	0	0	0
Unknown	0	0	0

**Table 2.7.c.3: Destination of Graduates by Employment Type for PhD (#) AY2013-14 to AY2015-16**

	AY2013-14	AY2014-15	AY2015-16
Employed	8	21	18
Continued education/training (not employed)	1	1	4
Actively seeking employment	1	0	0
Not seeking employment (not employed and not continuing education/training, by choice)	0	0	0
Unknown	0	0	0

**2.7.d In fields for which there is certification of professional competence and data are available from the certifying agency, data on the performance of the school’s graduates on these national examinations for each of the last three years.**

Not applicable.

**2.7.e Data and analysis regarding the ability of the school’s graduates to perform competencies in an employment setting, including information from periodic assessments of alumni, employers and other relevant stakeholders. Methods for such assessments may include key informant interviews, surveys, focus groups and documented discussions.**

The following methods are utilized to gather input from alumni, employers, and other key stakeholders.

**Alumni:** In the Fall of 2015, an in-depth study of the MPH program was conducted by doctoral students in the course, HMP:7940 Primary Data and Mixed Methods. For the first part of the study, MPH alumni who had graduated in the past 10 years were surveyed. The survey was e-mailed to 378 MPH alumni, of whom 145 completed the survey for a 38.3 percent response rate. Participants were surveyed on their perceptions regarding how well the college prepared them to contribute to the public health workforce. The survey questions were adapted from the college’s list of core competencies, specifically focusing on cross-cutting, interdisciplinary issues. The table below shows the percentage of respondents who responded they either strongly agreed or agreed that the MPH program had prepared them to contribute to the public health workforce on the listed competencies. Results of this survey are being used by the MPH program as they look at professional development programming and changes to the curricula.

**Table 2.7.e: MPH Alumni Survey Summary**

Competency	% Favorable
Expanding worldview and role of public health	97.1
Valuing and engaging community partners	97.0
Written Skills	95.8
Conveying complex information to public health audiences	94.4
Evaluation of public health programs	93.4
Awareness of interconnectedness of public health systems	93.4
Oral Skills	93.3
Implementation of public health programs	92.7
Design of public health programs	92.6
Conveying complex information to community audiences	90.8
Ethics in decision making	90.8
Pursuing leadership roles	86.5
Promoting conflict resolution	49.4

During the Fall of 2017 a more in-depth study of the MS and PhD programs was conducted by doctoral students in the course, HMP:7940, “Primary Data and Mixed Methods”. As part of the study MS and PhD alumni from the past seven years were surveyed on how well their education at the college prepared them to perform cross-cutting competencies related to conducting research and oral and written communication. The results of the study will be included in the final self-study.

**Employers and Other Key Stakeholders:** During 2016-17, the MPH Director had individual meetings with eight key stakeholders, who also employ the college’s graduates, including state and local public health department administrators, leaders of community organizations, and the executive director of the Iowa Public Health Association to identify our graduates’ ability to perform necessary competencies in the workplace. Feedback from these meetings indicated that our MPH graduates have a high level of technical ability in the core public health areas but

employers would like to see additional skill in more managerial aspects of public health such as budgeting, managing teams, dealing with conflict in teams, and strategic planning. Additional information from employers/stakeholders was obtained as part of the project conducted in HMP:7940 Primary Data and Mixed Methods. During interviews, participants spoke highly of graduates' abilities regarding effective communication, conveying public health information to diverse audiences, valuing community partners, and understanding the interconnectedness of a complex public health system.

In 2016 OEH solicited input from employers on skills important to their organization when hiring environmental and occupational health and safety graduates. The goal of the survey was to incorporate employers' needs into the college's academic program and to inform students of future job expectations. The survey was completed by 197 persons worked in 17 industry types, although 85% of respondents were from education, health care, manufacturing, and government. Skills identified as absolutely essential were: "conducts work in a professional and ethical manner" and "communicate effectively with multiple stakeholders to advocate for improvements in worker health and safety". An additional skill identified as critical was "identify risk factors associate with production processes that pose health/safety risks to our workers." In looking at "soft skills" the following were identified as most important: work organization (prioritizing and organizing tasks), taking initiative, and written communication. The department is using this information as it reviews the curriculum of its academic programs.

Additional feedback is obtained through input from advisory boards and committees. For example, in spring of 2017 a focus group was conducted with CPH Board of Advisors members asking them to provide information and direction on what knowledge and skills our graduates need when entering the workforce. Skills identified included presentation skills, ability to collaborate as a member of a team, and leadership. An optional professional development seminar on presentation skills is being offered this fall as part of the college's "Spotlight Series." Additionally, students were encouraged to participate in a professional development "Spotlight Series" on leadership skills and being able to articulate one's strengths which utilized the Clifton StrengthsFinder assessment tool.

#### **2.7.f Assessment of the extent to which this criterion is met.**

This criterion is met.

##### ***Strengths***

- All degree programs have processes in place to assess student progress and competency attainment.
- Graduation rates for master's students exceed CEPH standards.
- Rates of graduates who are employed or continuing their education exceed CEPH standards, with almost no unknowns (one across three years of data).
- A survey of MPH alumni regarding their preparation on cross-cutting competencies was conducted in fall 2015. A survey of MS/PhD alumni is currently being conducted.
- Feedback from employers and other key stakeholders is obtained via surveys and interviews with individuals.

##### ***Weaknesses***

- Graduation rates for PhD students in some cohorts are below CEPH standards.
- There has not been a systematic process in place to obtain data from employers and other key stakeholders.

- The lack of a staff member dedicated to evaluation and assessment has made the assessment process more challenging.

### ***Plans***

- The college has recently hired a Program Assessment and Evaluation Coordinator who, in collaboration with the Dean's office, will be developing plans to ensure more systematic assessment of current students, alumni, and employers/stakeholders.
- Doctoral programs within the college have developed more robust processes to help ensure adequate student progress and that students have the resources needed to progress through their program of study. The college will continue to carefully monitor doctoral graduation rates.
- As the college's undergraduate program evolves, careful attention will be given to assessment and evaluation of current students. Additionally, the college will collaborate with the university on obtaining post-graduation information from its undergraduate alumni once the first cohort graduates in spring 2020.
- As the new MPH curriculum is implemented it will be critical to monitor student feedback on the changes. The Program Assessment and Evaluation Coordinator will work with the MPH Director and Associate Dean for Academic Affairs to develop a plan for monitoring the changes, student perceptions of the changes, and learning outcomes.

**2.8 Other Graduate Professional Degrees.** If the school offers curricula for graduate professional degrees other than the MPH or equivalent public health degrees, students pursuing them must be grounded in basic public health knowledge.

**2.8.a Identification of professional degree curricula offered by the school, other than those preparing primarily for public health careers, and a description of the requirements for each.**

Other professional degree programs offered are the Master of Health Administration (MHA) and an MHA subprogram, the Executive MHA (EMHA). The MHA prepares students for a wide variety of executive positions in health organizations. The design of the curriculum reflects the program's conviction that today's health care administrator needs a comprehensive understanding of the issues involved in patient-centered service organizations and strong business skills. The EMHA is for individuals with professional degrees and/or 5 years of healthcare related work experience. The MHA program is accredited by the Commission of Accreditation of Healthcare Management Education (CAHME).

**MHA:** The MHA requires a total of 60 semester hours of graduate credit (51 in required courses). The curriculum is largely "lock step," with courses offered once per year and intentional sequencing from the introductory courses through the MHA Integrative Capstone. Students select nine elective credit hours in consultation with their advising team and the Director of Student Services and Academic Program Support.

There are several culminating experiences for the MHA program. The MHA Internship (HMP:5810) is a culminating and applied experience that occurs between the first and second years of study and is required for all MHA traditional track students. At the end of the program, there are two courses intentionally designed to integrate the program's 31 competencies and ensure a robust culminating experience: HMP:6150:0001 MHA Integrative Capstone and HMP:6355 Leadership of Healthcare Organizations. The Capstone course integrates competencies from across the MHA program's four competency domains - Leading People, Managing Resources, Setting Strategic Direction, and Improving Population Health - through four case studies and a course project. The Leadership course complements the Capstone course as an integrating and culminating experience and places greater emphasis on emotional intelligence as reflected in the program's competencies in the subdomains of Leading People through Professionalism and Leading People through Team Development. Both courses utilize permanent teams for the entire semester.

**EMHA:** The EMHA requires a total of 45 semester hours of graduate credit (generally 23 months of full-time study). The EMHA does not include elective coursework. Courses are taught one at a time by primary and adjunct faculty on Iowa City and Des Moines campuses and supplemented by online resources. The two campuses are connected using Zoom video conferencing software so that students and faculty simultaneously interact with one another "live."

The culminating experience for EMHA students is the required course, HMP:6150:0002 MHA Integrative Capstone. The course has four elements: 1) *meetings* during the fall and spring semesters for a total of 4 meetings with the course instructor who is also the EMHA Program Director, 2) *classes* that focus on topics not covered in other courses such as professional development, 3) completion of the *Ifolio*, a web-based tool to help students document and reflect on progress throughout the program, and 4) a *project*—which addresses a complex healthcare administration and/or leadership challenge or opportunity. As part of their project students must

write a paper which incorporates all seven EMHA program key competencies and present their project to a departmental faculty panel and their preceptor.

**2.8.b Identification of the manner in which these curricula assure that students acquire a public health orientation. If this means is common across these other professional degree programs, it need be described only once. If it varies by program, sufficient information must be provided to assess compliance by each program.**

All MHA and EMHA students acquire public health orientation through the completion of two courses: CPH:6100 Essentials of Public Health and HMP:5230 Managerial Epidemiology. CPH:6100 Essentials of Public Health provides students with an introduction and overview of the scope of public health including public health history, philosophy, values, core functions and the 10 Essential Services determinants of health, the five core disciplines and future public health challenges. The course was updated for Fall 2017 to address the Foundational Public Health Knowledge Areas in the CEPH 2016 criteria. HMP:5230 Managerial Epidemiology provides students with an understanding of epidemiologic tools applied in healthcare management. These tools include principles of population-health, disease surveillance, infection control, and analytics for decision-making. Finally, HMP:5005 Introduction to Healthcare Organizations and Policy covers population health topics related to the determinants of health and the roles of healthcare and public health in contributing to the health of a defined population.

**2.8.c Assessment of the extent to which this criterion is met.**

This criterion is met.

***Strengths***

- The MHA program is CAHME accredited and well-regarded nationally, with high postgraduate placements within three months of graduation.

***Weaknesses***

*None*

***Plans***

- The MHA program is currently going through its CAHME self-study process with its site visit planned in spring 2019.
- The MHA plan of study will be reviewed to ensure it meets the 2016 CEPH criteria for Foundational Public Health Knowledge.

**2.9 Bachelor's Degrees in Public Health. NOTE: CEPH standalone baccalaureate program criteria (4.0 curriculum) are used for this section per instructions from CEPH and therefore a different numbering system is used.**

**Required Documentation**

1. A list of the coursework required for the program's degree(s), including the total number of credits required for degree completion.
2. Official documentation of the required components and total length of the degree, in the form of an institutional catalog or online resource. Provide hyperlinks to documents if they are available online, or include in the resource file electronic copies of any documents that are not available online.
3. A matrix, in the format of Template K, that indicates the experience(s) that ensure that students are introduced to each of the domains indicated in Criterion 4.1. Template K requires the program to identify the experiences that introduce each domain.
4. A matrix, in the format of Template L, that indicates the experience(s) that ensure that students are exposed to each of the domains indicated in Criterion 4.2. Template L requires the program to identify the experiences that introduce and reinforce each domain.
5. A matrix, in the format of Template M, that indicates the experience(s) that ensure that students demonstrate skills in each of the domains indicated in Criterion 4.3. Template M requires the program to identify the experiences that introduce and reinforce each domain.
6. A matrix, in the format of Template N, that identifies the cumulative and experiential activities through which students have the opportunity to integrate, synthesize and apply knowledge as indicated in Criterion 4.4.
7. A brief narrative description, in the format of Template O, of the manner in which the curriculum and co-curricular experiences expose students to the concepts in Criterion 4.5.
8. Syllabi for all required coursework for the major and/or courses that relate to the domains listed above. Syllabi should be provided as individual files in the electronic resource file and should reflect the current semester or most recent offering of the course.
9. Examples of student work.
10. A brief description of the means through which the program implements the cumulative experience and field exposure requirements.
11. Handbooks, websites, forms and other documentation relating to the cumulative experience and field exposure. Provide hyperlinks to documents if they are available online, or include in the resource file electronic copies of any documents that are not available online.

**4.0 Undergraduate public health curriculum**

The curricula of the BA and BS in public health each require a minimum of 120 semester hours (sh) for graduation. Table 4.0.1 provides a summary of degree requirements and Table 4.0.2 lists courses that students are required to complete to earn their degree. Students must maintain a minimum cumulative GPA of 2.0 for graduation. The Office of the Registrar publishes degree program requirements in the online General Catalog. BA requirements are located at: <http://catalog.registrar.uiowa.edu/public-health/public-health-ba/#requirementstext>. BS requirements are located at: <http://catalog.registrar.uiowa.edu/public-health/public-health-bs/>.

Degree requirements are also located on the CPH current undergraduate student website at: <https://www.public-health.uiowa.edu/degree-programs-undergraduate>.

**Table 4.0.1: Summary of BA/BS degree requirements**

Requirement	BA/BS	BA	BS
Public Health Core Courses	27 sh		
Degree-Specific Public Health Required Courses		21 sh	25-26 sh
Public Health Elective Courses		13-15 sh	10-12 sh
Public Health Experiential Learning Requirement	Varies		
College Success Course	0-2 sh		
General Education Courses	45 sh		

**Table 4.0.2: BA/BS degree requirement course list  
PUBLIC HEALTH CORE COURSES (27 sh)**

All of these:		SH
CPH:1050	College of Public Health Direct Admit Seminar	1
CPH:1400	Fundamentals of Public Health	3
CPH:1600	Public Health Science: Inquiry and Investigation in Public Health	3
CPH:2050	Second Year Undergraduate Public Health Seminar	1
CPH:2400	The U.S. Health System in a Global Context	3
CPH:2600	Introduction to Public Health Methods	3
CPH:3050	Third Year Undergraduate Public Health Seminar	1
CPH:3400	Health, Work, and the Environment	3
CPH:3500	Global Public Health	3
CPH:3700	Methods for Program Implementation and Evaluation	3
CPH:4999	Public Health Capstone: Practice of Evidence-Based Public Health	3

**BA REQUIRED COURSES (21 sh)**

All of these:		SH
CPH:1800	Social and Psychological Determinants of Health: Changing Behavior, Improving Health	3
CPH:3100	Health Economics	3
CPH:3600:0001	Applied Public Health Methods	3
CPH:3800	Public Health Theories and Society	3
CPH:3900	Foundations in Public Health Preparedness and Response	3
Two of these:		SH
ANTH:2100	Anthropology and Contemporary World Problems	3
ANTH:2164	Culture and Healing for Future Health Professionals	3
COMM:1809	Social Marketing Campaigns	3
GEOG:3110	Geography of Health	3
GEOG:4770	Environmental Justice	3
IS:2000	Introduction to International Studies	3
JMC:3116	Communication-Based Approaches to International Development	3
JMC:3150	Media and Health	3
PHIL:2402	Introduction to Ethics	3
POLI:3111	American Public Policy	3
SOC:1022	Social Justice and Social Welfare in the United States	3
SOC:2810	Social Inequality	3

**BS REQUIRED COURSES (25-26 sh)**

All of these:		SH
BIOL:1411	Foundations of Biology	4
BIOL:1412	Diversity of Form and Function	4

<b>All of these:</b>		<b>SH</b>
CHEM:1110	Principles of Chemistry I	4
CPH:3600:0002	Applied Public Health Methods	3
<b>One of these:</b>		
MATH:1460	Calculus for the Biological Sciences	4
MATH:1850	Calculus I	4
<b>One of these:</b>		
CS:1110	Introduction to Computer Science	3
CS:1210	Computer Science I: Fundamentals	4
<b>One of these:</b>		
CS:2110	Programming for Informatics	4
ENVS:1085	Fundamentals of Environmental Science	4
GEOG:3110	Geography of Health	3
GEOG:4150	Health and Environment: GIS Applications	3
GEOG:4770	Environmental Justice	3
IS:2000	Introduction to International Studies	3
MICR:2157	General Microbiology	3
PHIL:2402	Introduction to Ethics	3

#### **PUBLIC HEALTH ELECTIVE COURSES**

<b>BA students choose 5 of these (13-15 sh); BS students choose 4 of these (10-12 sh):</b>		<b>SH</b>
CPH:2200	Climageddon: A Crisis for Public Health	2
CPH:2220	Building a Healthier Tomorrow: Public Health Methods to Minimize Disease and Pollutant Exposures	3
CPH:2230	Finding Patient Zero: The Exploration of Infectious Disease Transmission and Pandemic Threats	3
CPH:2240	Health Disparities and Intersectionality with US Latinx Peoples	3
CPH:3200	Death at Work: Case Studies of Workplace Safety and Health	3
CPH:3210	Nutrition in Public Health	3
CPH:3220	Public Health as a Public Good: Economics and Decision Making in Public Health Systems	3
CPH:3230	Human Genetics and Public Health	3
CPH:4200	Agriculture and the Environment	3
CPH:4210	Making a Difference: Public Health Policy and Advocacy	3
CPH:4220	Global Road Safety	3
CPH:4230	Injury and Violence Prevention	3
CPH:4250	Field Experiences in Public Health	1

#### **PUBLIC HEALTH EXPERIENTIAL LEARNING REQUIREMENT (VAR sh)**

<b>At least one of these:</b>		<b>SH</b>
<b>Research</b>		
CPH:3999	Undergraduate Research Experience in Public Health	varies
CPH:4990	Mentored Independent Undergraduate Research in Public Health	varies
<b>Internship</b>		
CPH:4850	Undergraduate Public Health Internship	varies
<b>Global Learning</b>		
CPH:4750	Undergraduate Global Learning in Public Health	varies
<b>Service Learning</b>		
CPH:3750	Undergraduate Service Learning in Public Health	varies

**COLLEGE SUCCESS COURSE (0-2 sh)**

		SH
CSI:1600	Success at Iowa	0-2

**GENERAL EDUCATION COURSES (45 sh)**

All of these:	SH
RHET:1030 Rhetoric	4
ENGL:1200 The Interpretation of Literature	3
World Languages	0-10
Natural Sciences	7
Quantitative or Formal Reasoning	3
Social Sciences	3
Historical Perspectives	3
Diversity and Inclusion	3
International and Global Issues	3
Literary, Visual, and Performing Arts	3
Values and Culture	3

**4.1 The overall undergraduate curriculum (eg, general education, liberal learning, essential knowledge and skills, etc.) introduces students to the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the undergraduate curriculum, including general education courses defined by the institution as well as concentration and major requirements or electives.**

- i. The foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease**
- ii. The foundations of social and behavioral sciences**
- iii. Basic statistics**
- iv. The humanities/fine arts**

Table 4.1 reflects the domains the student is introduced to in the overall undergraduate curriculum (e.g., general education, liberal learning, essential knowledge and skills, etc.). This table reflects the public health requirements and general education requirements for BA and BS public health majors. The general education requirements were developed based on the general education requirements for undergraduates completing programs of study in the College of Liberal Arts and Sciences.

**Table 4.1: Domains the student is introduced to in the overall undergraduate curriculum**

DOMAINS	Courses and other learning experiences through which students are introduced to the domains specified		
	BA and BS	BA only	BS only
Science: Introduction to the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease	CPH:1400 Fund Pub Hlth CPH:1600 Pub Hlth Sci CPH:3400 Hlth, Work, Environ CPH:3500 Global Pub Hlth	CPH:1800 Soc Psych Detriments Hlth Nat Sci Gen Ed (7 sh)	BIOL:1411 Found Bio BIOL:1412 Div Form Func CHEM:1110 Princ Chem I
Social and Behavioral Sciences: Introduction to the foundations of social and behavioral sciences	CPH:1400 Fund Pub Hlth CPH:3500 Global Pub Hlth	CPH:1800 Soc Psych Detriments Hlth CPH:3800 Pub Hlth Theo Soc	
Math/Quantitative Reasoning: Introduction to basic statistics	CPH:1600 Pub Hlth Sci	CPH:3600:0001 App Pub Hlth Meth	CPH:3600:0002 App Pub Hlth Meth

DOMAINS	Courses and other learning experiences through which students are introduced to the domains specified		
	BA and BS	BA only	BS only
	CPH:2600 Intro Pub Hlth Meth	Quant Formal Reasoning Gen Ed (3 sh)	MATH:1460 Calc Bio Sci <u>OR</u> MATH:1850 Calc I CS:1110 Intro Comp Sci <u>OR</u> CS:1210 Comp Sci I: Fund
Humanities/Fine Arts: Introduction to the humanities/fine arts	Literary, Visual, Perform Arts Gen Ed (3 sh)		

**4.2 The requirements for the public health major or concentration provide instruction in the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the requirements for the major or concentration coursework (ie, the program may identify multiple learning experiences that address a domain – the domains listed below do not each require a single designated course).**

- i. The history and philosophy of public health as well as its core values, concepts and functions across the globe and in society
- ii. The basic concepts, methods and tools of public health data collection, use and analysis and why evidence-based approaches are an essential part of public health practice
- iii. The concepts of population health, and the basic processes, approaches and interventions that identify and address the major health-related needs and concerns of populations
- iv. The underlying science of human health and disease including opportunities for promoting and protecting health across the life course
- v. The socioeconomic, behavioral, biological, environmental and other factors that impact human health and contribute to health disparities
- vi. The fundamental concepts and features of project implementation, including planning, assessment and evaluation
- vii. The fundamental characteristics and organizational structures of the US health system as well as the differences in systems in other countries
- viii. Basic concepts of legal, ethical, economic and regulatory dimensions of health care and public health policy and the roles, influences and responsibilities of the different agencies and branches of government
- ix. Basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology

**If the program intends to prepare students for a specific credential, then the curriculum must also address the areas of instruction required for credential eligibility (eg, CHES).**

Tables 4.2.1, 4.2.2 and 4.2.3 reflect the requirements for the BA and BS majors in public health that provide instruction in the public health domains. These tables reflect requirements of the (1) public health core curriculum shared by BA and BS public health students, (2) BA required courses, and (3) BS required courses. Topics within a domain may be introduced and/or reinforced in more than one course. Course numbers/titles that have been italicized indicate courses that are still in development.

**4.2.1: Required courses: BA and BS (Public Health Core Courses)**

I=introduced; C=covered; X=level unknown at this time as the course has not yet been taught

PUBLIC HEALTH DOMAINS	Course Name and Number										
	CPH:1050 Dir Admit Seminar	CPH:1400 Fund of PH	CPH:1600 PH Science	CPH:2050 2 <sup>nd</sup> yr Seminar	CPH:2400 US Hlth System	CPH:2600 Intro PH Methods	CPH:3050 3 <sup>rd</sup> yr seminar	CPH:3400 Hlth, Wk, Environ	CPH:3500 Global PH	CPH:3700 Meth Prg Imp Eval	CPH:4999 PH Capstone
<b>Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society</b>											
Public Health History		I, C						I	I		
Public Health Philosophy		I, C							C		
Core PH Values	I	I, C	I	C					I		X
Core PH Concepts		I, C	I						I		X
Global Functions of Public Health		I			X			I	I, C		X
Societal Functions of Public Health		I			X				C		X
<b>Role and Importance of Data in Public Health: Address the basic concepts, methods, and tools of public health data collection, use, and analysis and why evidence-based approaches are an essential part of public health practice</b>											
Basic Concepts of Data Collection		I	I			I, C			I		X
Basic Methods of Data Collection		I	I			I, C			I		X
Basic Tools of Data Collection		I	I			I, C					X
Data Usage			I			I, C				X	X
Data Analysis			I			I				X	X
Evidence-based Approaches		I	I			I		C	C	X	X
<b>Identifying and Addressing Population Health Challenges: Address the concepts of population health, and the basic processes, approaches, and interventions that identify and address the major health-related needs and concerns of populations</b>											
Population Health Concepts		I	I					I	C		X
Introduction to Processes and Approaches to Identify Needs and Concerns of Populations		I	I						I	X	X
Introduction to Approaches and Interventions to Address Needs and Concerns of Populations		I							I	X	X
<b>Human Health: Address the underlying science of human health and disease including opportunities for promoting and protecting health across the life course</b>											

PUBLIC HEALTH DOMAINS	Course Name and Number										
	CPH:1050 Dir Admit Seminar	CPH:1400 Fund of PH	CPH:1600 PH Science	CPH:2050 2 <sup>nd</sup> yr Seminar	CPH:2400 US Hlth System	CPH:2600 Intro PH Methods	CPH:3050 3 <sup>rd</sup> yr seminar	CPH:3400 Hlth, Wk, Environ	CPH:3500 Global PH	CPH:3700 Meth Prg Imp Eval	CPH:4999 PH Capstone
Science of Human Health and Disease		I	I					C	C		X
Health Promotion		C	I						I		X
Health Protection		C	I						I		X
<b>Determinants of Health: Address the socio-economic, behavioral, biological, environmental, and other factors that impact human health and contribute to health disparities</b>											
Socio-economic Impacts on Human Health & Health Disparities		I, C	I						C		X
Behavioral Factors Impacts on Human Health & Health Disparities		I	I						C		X
Biological Factors Impacts on Human Health and Health Disparities		I	I						C		X
Environmental Factors Impacts on Human Health and Health Disparities		I	I					C	C		X
<b>Project Implementation: Address the fundamental concepts and features of project implementation, including planning, assessment, and evaluation</b>											
Introduction to Planning Concepts and Features										X	X
Introduction to Assessment Concepts and Features										X	X
Introduction to Evaluation Concepts and Features										X	X
<b>Overview of the Health System: Address the fundamental characteristics and organizational structures of the U.S. health system as well as to the differences in systems in other countries</b>											
Characteristics and Structures of the U.S. Health System		I			X						X
Comparative Health Systems					X				C		
<b>Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government</b>											
Legal dimensions of health care and public health policy		I			X						

PUBLIC HEALTH DOMAINS	Course Name and Number										
	CPH:1050 Dir Admit Seminar	CPH:1400 Fund of PH	CPH:1600 PH Science	CPH:2050 2 <sup>nd</sup> yr Seminar	CPH:2400 US Hlth System	CPH:2600 Intro PH Methods	CPH:3050 3 <sup>rd</sup> yr seminar	CPH:3400 Hlth, Wk, Environ	CPH:3500 Global PH	CPH:3700 Meth Prg Imp Eval	CPH:4999 PH Capstone
Ethical dimensions of health care and public health policy		I			X				C		X
Economical dimensions of health care and public health policy		I			X				C		X
Regulatory dimensions of health care and public health policy		I			X			C			
Governmental Agency Roles in health care and public health policy		I			X				I		
<b>Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology</b>											
Technical writing		I	I				X		I		X
Professional writing							X				X
Use of Mass Media			I				X				X
Use of Electronic Technology		I					X	C			X

#### 4.2.2: Required courses – BA

I=introduced; C=covered; X=level unknown at this time as the course has not yet been taught

PUBLIC HEALTH DOMAINS	Course Name and Number				
	CPH:1800 Soc/Psych Det Hlth	CPH:3100 Hlth Economics	CPH:3600:0001 Applied PH Methods	CPH:3800 PH Theories & Society	CPH:3900 Found PH Prep & Resp
<b>Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society</b>					
Public Health History					
Public Health Philosophy					
Core PH Values					
Core PH Concepts	I				
Global Functions of Public Health					X
Societal Functions of Public Health					X

PUBLIC HEALTH DOMAINS	Course Name and Number				
	CPH:1800 Soc/Psych Det Hlth	CPH:3100 Hlth Economics	CPH:3600:0001 Applied PH Methods	CPH:3800 PH Theories & Society	CPH:3900 Found PH Prep & Resp
<b>Role and Importance of Data in Public Health: Address the basic concepts, methods, and tools of public health data collection, use, and analysis and why evidence-based approaches are an essential part of public health practice</b>					
Basic Concepts of Data Collection			X		
Basic Methods of Data Collection			X		
Basic Tools of Data Collection			X		
Data Usage			X		
Data Analysis			X		
Evidence-based Approaches	I	X	X		X
<b>Identifying and Addressing Population Health Challenges: Address the concepts of population health, and the basic processes, approaches, and interventions that identify and address the major health-related needs and concerns of populations</b>					
Population Health Concepts					
Introduction to Processes and Approaches to Identify Needs and Concerns of Populations					X
Introduction to Approaches and Interventions to Address Needs and Concerns of Populations					X
<b>Human Health: Address the underlying science of human health and disease including opportunities for promoting and protecting health across the life course</b>					
Science of Human Health and Disease	I, C	X			
Health Promotion	I, C	X			
Health Protection	I, C	X			
<b>Determinants of Health: Address the socio-economic, behavioral, biological, environmental, and other factors that impact human health and contribute to health disparities</b>					
Socio-economic Impacts on Human Health and Health Disparities	I, C			X	
Behavioral Factors Impacts on Human Health and Health Disparities	I, C			X	
Biological Factors Impacts on Human Health and Health Disparities	I, C				
Environmental Factors Impacts on Human Health and Health Disparities	I, C			X	
<b>Project Implementation: Address the fundamental concepts and features of project implementation, including planning, assessment, and evaluation</b>					
Introduction to Planning Concepts and Features			X		X

PUBLIC HEALTH DOMAINS	Course Name and Number				
	CPH:1800 Soc/Psych Det Hlth	CPH:3100 Hlth Economics	CPH:3600:0001 Applied PH Methods	CPH:3800 PH Theories & Society	CPH:3900 Found PH Prep & Resp
Introduction to Assessment Concepts and Features			X		
Introduction to Evaluation Concepts and Features			X		
<b>Overview of the Health System: Address the fundamental characteristics and organizational structures of the U.S. health system as well as to the differences in systems in other countries</b>					
Characteristics and Structures of the U.S. Health System		X		X	X
Comparative Health Systems					
<b>Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government</b>					
Legal dimensions of health care and public health policy					X
Ethical dimensions of health care and public health policy					X
Economical dimensions of health care and public health policy		X			
Regulatory dimensions of health care and public health policy					
Governmental Agency Roles in health care and public health policy		X		X	X
<b>Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology</b>					
Technical writing			X		
Professional writing			X		
Use of Mass Media					X
Use of Electronic Technology					X

**Table 4.2.3: BS Required Courses**

**I=introduced; C=covered; X=level unknown at this time as the course has not yet been taught**

PUBLIC HEALTH DOMAINS	Course Name and Number
	CPH:3600:0002 Applied PH Methods
<b>Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society</b>	
Public Health History	

<b>PUBLIC HEALTH DOMAINS</b>	<b>Course Name and Number</b>
	<b>CPH:3600:0002 Applied PH Methods</b>
Public Health Philosophy	
Core PH Values	
Core PH Concepts	
Global Functions of Public Health	
Societal Functions of Public Health	
<b>Role and Importance of Data in Public Health: Address the basic concepts, methods, and tools of public health data collection, use, and analysis and why evidence-based approaches are an essential part of public health practice</b>	
Basic Concepts of Data Collection	X
Basic Methods of Data Collection	X
Basic Tools of Data Collection	X
Data Usage	X
Data Analysis	X
Evidence-based Approaches	X
<b>Identifying and Addressing Population Health Challenges: Address the concepts of population health, and the basic processes, approaches, and interventions that identify and address the major health-related needs and concerns of populations</b>	
Population Health Concepts	
Introduction to Processes and Approaches to Identify Needs and Concerns of Populations	
Introduction to Approaches and Interventions to Address Needs and Concerns of Populations	
<b>Human Health: Address the underlying science of human health and disease including opportunities for promoting and protecting health across the life course</b>	
Science of Human Health and Disease	
Health Promotion	
Health Protection	
<b>Determinants of Health: Address the socio-economic, behavioral, biological, environmental, and other factors that impact human health and contribute to health disparities</b>	
Socio-economic Impacts on Human Health and Health Disparities	
Behavioral Factors Impacts on Human Health and Health Disparities	
Biological Factors Impacts on Human Health and Health Disparities	

<b>PUBLIC HEALTH DOMAINS</b>	<b>Course Name and Number</b>
	<b>CPH:3600:0002 Applied PH Methods</b>
Environmental Factors Impacts on Human Health and Health Disparities	
<b>Project Implementation: Address the fundamental concepts and features of project implementation, including planning, assessment, and evaluation</b>	
Introduction to Planning Concepts and Features	X
Introduction to Assessment Concepts and Features	X
Introduction to Evaluation Concepts and Features	X
<b>Overview of the Health System: Address the fundamental characteristics and organizational structures of the U.S. health system as well as to the differences in systems in other countries</b>	
Characteristics and Structures of the U.S. Health System	
Comparative Health Systems	
<b>Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government</b>	
Legal dimensions of health care and public health policy	
Ethical dimensions of health care and public health policy	
Economical dimensions of health care and public health policy	
Regulatory dimensions of health care and public health policy	
Governmental Agency Roles in health care and public health policy	
<b>Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology</b>	
Technical writing	X
Professional writing	X
Use of Mass Media	
Use of Electronic Technology	

**4.3 Students must demonstrate the following skills:**

- i. The ability to communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences**
- ii. The ability to locate, use, evaluate and synthesize public health information**

Table 4.3. illustrates the skills the students must demonstrate and methods by which these skills are assessed. The following matrix indicates the experience(s) that ensure that students demonstrate skills in each of the domains indicated in Criterion 4.3. Experiences that introduce and reinforce each domain are described.

**Table 4.3: Skills Students Must Demonstrate and Methods by which these Skills are Assessed**

<b>Skills</b>	<b>Courses and other learning experiences through which students demonstrate the following skills.</b>	<b>Methods by which these skills are assessed.</b>
<b>Public Health Communication: Students should be able to communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences</b>		
Oral communication	CPH:1400 Fundamentals of Public Health	Recorded presentation re: review of public health issue and application of socioecological framework to identify possible interventions/solutions
	CPH:3500 Global Public Health	Case study presentation
Written communication	CPH:1050 Direct Admit Seminar	Reflections
	CPH:1400 Fundamentals of Public Health	Reflections, critical reflection re: controversial public health issue, final paper re: review of public health issue and application of socioecological framework to identify possible interventions/solutions
	CPH:1600 Public Health Science	Writing assignments, problem sets, reflections
	CPH:3400 Health, Work, and the Environment	Wiki project re: environmental health issue
	CPH:3500 Global Public Health	Case study writing assignments
Communicate with diverse audiences	CPH:3500 Global Public Health	Case study presentation and case study writing assignments
Communicate through variety of media	CPH:3400 Health, Work, and the Environment	Wiki project re: environmental health issue
	CPH:3500 Global Public Health	Case study presentation and case study writing assignments
<b>Information Literacy: Students should be able to locate, use, evaluate, and synthesize information</b>		
Locate information	CPH:1400 Fundamentals of Public Health	final paper/presentation (literature review) re: review of public health issue and application of socioecological framework to identify possible interventions/solutions
	CPH:1600 Public Health Science	Writing assignments, problem sets

Skills	Courses and other learning experiences through which students demonstrate the following skills.	Methods by which these skills are assessed.
	CPH:1800 Soc and Psych Det of Health	Reflections
	CPH:3400 Health, Work, and the Environment	Wiki project re: environmental health issue
	CPH:3500 Global Public Health	Case study presentation and case study writing assignments
Use information	CPH:1400 Fundamentals of Public Health	final paper/presentation (literature review) re: review of public health issue and application of socioecological framework to identify possible interventions/solutions
	CPH:1600 Public Health Science	Writing assignments, problem sets
	CPH:1800 Soc and Psych Det of Health	Reflections
	CPH:3400 Health, Work, and the Environment	Wiki project re: environmental health issue
	CPH:3500 Global Public Health	Case study presentation and case study writing assignments
Evaluate information	CPH:1400 Fundamentals of Public Health	final paper/presentation (literature review) re: review of public health issue and application of socioecological framework to identify possible interventions/solutions
	CPH:1600 Public Health Science	Writing assignments, problem sets
	CPH:3400 Health, Work, and the Environment	Wiki project re: environmental health issue
	CPH:3500 Global Public Health	Case study presentation and case study writing assignments
Synthesize information	CPH:1400 Fundamentals of Public Health	final paper/presentation (literature review) re: review of public health issue and application of socioecological framework to identify possible interventions/solutions
	CPH:1600 Public Health Science	Writing assignments, problem sets
	CPH:3400 Health, Work, and the Environment	Wiki project re: environmental health issue
	CPH:3500 Global Public Health	Case study presentation and case study writing assignments

**4.4 Students have opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities. All students complete a cumulative, integrative and scholarly or applied experience or inquiry project that serves as a capstone to the education experience. These experiences may include, but are not limited to, internships, service-learning projects, senior seminars, portfolio projects, research papers or honors theses. Programs encourage exposure to local-level public health professionals and/or agencies that engage in public health practice.**

Table 4.4 represents integration, synthesis, and application of knowledge through cumulative and experiential activities. Additionally, students are required to complete at least one of the following experiential learning activities: research, internship, global learning, and/or service learning. CPH:2050 Second Year Undergraduate Public Health Seminar prepares students for completion of the experiential learning requirement; thus, CPH:2050 is a pre-requisite course and must be completed prior to registration for any experiential learning activity (the pre-requisite for CPH:2050 may be waived on a case-by-case basis for first-year students). Students must be in good academic standing in order to pursue experiential learning opportunities. In addition to the experiential learning degree requirement, all students complete a cumulative, integrative project that serves as a capstone to the education experience (CPH:4999 Public Health Capstone: Practice of Evidence-Based Public Health).

**Table 4.4: Integration, Synthesis and Application of Knowledge through Cumulative and Experiential Activities**

Cumulative and Experiential Activity (internships, research papers, service-learning projects, etc.)	Narrative describing how activity provides students the opportunity to integrate, synthesize and apply knowledge.
<b>EXPERIENTIAL ACTIVITY (students must complete <u>at least one</u> of the following experiential activities):</b>	
Public Health Research	<p>Engaging in public health research allows students to enrich their educational experience by integrating coursework with real-life experiences, establishing personal mentored relationships with public health faculty, and applying their knowledge to make research contributions that positively impact populations. Students have two options to fulfil this experiential learning opportunity:</p> <ul style="list-style-type: none"> <li>• CPH:3999 Undergraduate Research Experience in Public Health: Hands-on undergraduate involvement in scholarly public health research activities under the supervision of faculty, research staff, postdocs or graduate students (with supervision by faculty mentor). Independent student research projects are not an expectation for this course.</li> <li>• CPH:4990 Mentored Independent Undergraduate Research in Public Health: Independent student research project under the supervision of a faculty mentor. Undergraduate public health majors who plan to graduate with honors in the major are required to register for this course in order satisfy the honors thesis requirement.</li> </ul> <p>Additionally, students will synthesize knowledge gained through the research experience and classroom experiences in mid-semester and end-of-term assessments, final written report, and final presentation.</p>
Public Health Internship	<p>Through public health internships, students will have the chance to apply classroom lessons to real-world public health issues as they work with professionals, organizations, and populations. We expect students to complete internships locally, nationally, and globally. As a requirement of CPH:4850 Undergraduate Public Health Internship, students are expected to develop an personal learning plan which identifies (1) what the student will learn during the course of the internship, (2) how these learning objectives integrate with their educational and career goals, and (3) what</p>

Cumulative and Experiential Activity (internships, research papers, service-learning projects, etc.)	Narrative describing how activity provides students the opportunity to integrate, synthesize and apply knowledge.
	specific actions, processes, and work assignments will allow the student to achieve each objective. Additionally, students will synthesize knowledge gained through the internship and classroom experiences in mid-semester and end-of-term assessments, final written report, and final presentation.
Global Learning	The University of Iowa and the College of Public Health encourage students to pursue opportunities to work with globally diverse populations in a global or local context. Global learning encourages students to explore cultures, life experiences, and perspectives that are different from their own. Students may pursue global research, global internships, pre-approved study abroad programs provided by third-party vendors that combine public health coursework with either internships, service learning, or independent study opportunities (i.e., Council on International Educational Exchange (CIEE) and School for International Training (SIT), or local/global opportunities with CPH faculty. Students register for these experiences as CPH:4750 Undergraduate Global Learning in Public Health. Additionally, students will synthesize knowledge gained through the global experience and classroom experiences in mid-semester and end-of-term assessments, final written report, and final presentation.
Service-Learning	Service-learning courses allow students to integrate, synthesize, and apply classroom learning by combining rigorous academic coursework with community engagement. The College of Public Health is seeking opportunities to incorporate service-learning in new and existing courses. Additionally, opportunities for service-learning in the context of public health exist elsewhere at the University of Iowa. Students register for these experiences as CPH:3750 Undergraduate Service Learning in Public Health. Additionally, students will synthesize knowledge gained through the service learning experience and classroom experiences in mid-semester and end-of-term assessments, final written report, and final presentation.
<b>CUMULATIVE ACTIVITY:</b> CPH:4999 Public Health Capstone: Practice of Evidence-Based Public Health	<p>The capstone course will be offered for the first time in Fall 2019. As such, the course is still under development by a team of faculty. These faculty are guided by the following principles:</p> <ul style="list-style-type: none"> <li>• The capstone course is a cumulative and integrative experience which draws on the full breadth of the undergraduate public health curriculum.</li> <li>• Students should be able to demonstrate applied skills/competencies.</li> <li>• Completion of the capstone course should demonstrate problem-solving skills and interdisciplinary teamwork.</li> <li>• The capstone course should emphasize public health communication.</li> </ul> <p>The capstone course will be designed to encourage (1) group learning through a semester-long project that incorporates the skills and competencies of our undergraduate program and (2) self-directed learning and reflection that culminates in a student portfolio.</p>

**4.5 The overall undergraduate curriculum and public health major curriculum expose students to concepts and experiences necessary for success in the workplace, further education and life-long learning. Students are exposed to these concepts through any combination of learning experiences and co-curricular experiences. These concepts include the following:**

- i. Advocacy for protection and promotion of the public’s health at all levels of society**
- ii. Community dynamics**
- iii. Critical thinking and creativity**
- iv. Cultural contexts in which public health professionals work**
- v. Ethical decision making as related to self and society**
- vi. Independent work and a personal work ethic**
- vii. Networking**
- viii. Organizational dynamics**
- ix. Professionalism**
- x. Research methods**
- xi. Systems thinking**
- xii. Teamwork and leadership**

A brief narrative description in the Table 4.5 below, demonstrates the manner in which the curriculum and co-curricular experiences expose students to the concepts in Criterion 4.5.

**Table 4.5: Curriculum and Co-curricular Experiences Expose Students to the Concepts**

<b>Concept</b>	<b>Manner in which the curriculum and co-curricular experiences expose students to the concepts</b>
Advocacy for protection and promotion of the public's health at all levels of society	Students are exposed to advocacy for protection and promotion of the public's health at all levels of society through class discussions and lectures (CPH:1400 Fundamentals of Public Health, CPH:3500 Global Public Health) and discussions with faculty and public health professionals in CPH:1050 Direct Admit Seminar and CPH:2050 Second Year Seminar.
Community dynamics	Students are exposed to community dynamics through discussions with faculty and public health professionals in CPH:2050 Second Year Seminar and also in some instances through the activities of their experiential learning requirement.
Critical thinking and creativity	Students examine issues on a deeper level through reflection of experiences in or out of the classroom (CPH:1400 Fundamentals of Public Health, CPH:2050 Second Year Seminar, CPH:3500 Global Public Health, experiential learning activities). Additionally, case studies are incorporated into some courses (CPH:3500 Global Public Health) and other courses use creative processes to foster synthesis of course materials (CPH:3400 Health, Work, and the Environmental wiki project).
Cultural contexts in which public health professionals work	Students are exposed to the cultural contexts in which public health professionals work through presentations by faculty and public health professionals in CPH:2050 Second Year Seminar and also in some instances through the activities of their experiential learning requirement.
Ethical decision making as related to self and society	Public health ethics are covered in classes throughout the curriculum including CPH:1400 Fundamentals of Public Health (historical examples), CPH:2050 Second Year Seminar (in the context of research and professional ethics, as evidenced by the Guatemala syphilis study and community-based participatory research approaches), and CPH:2600 Intro to Public Health Methods (research ethics).
Independent work and a personal work ethic	Students have numerous opportunities for independent work and developing/maintaining a personal work ethic by working on independent

Concept	Manner in which the curriculum and co-curricular experiences expose students to the concepts
	and group projects with deadlines and deliverables (CPH:1400 Fundamentals of Public Health, CPH:2600 Intro to Public Health Methods, CPH:3400 Health, Work, and the Environmental, and CPH:3500 Global Public Health). Additionally, students are expected to secure their own opportunities for experiential learning.
Networking	Courses commonly bring in guest lectures (faculty, public health professionals/practice partners, alumni, etc.) and provide opportunity for interaction (CPH:1050 Direct Admit Seminar, CPH:1400 Fundamentals of Public Health, CPH:2050 Second Year Seminar). Through experiential learning activities, students will also begin developing their own professional networks.
Organizational dynamics	Class discussions and presentations in CPH:2050 Second Year Seminar help students to navigate organizational culture and dynamics (in any setting). Through experiential learning activities, students will also begin to understand the specific dynamics and culture of the organization in which they are embedded.
Professionalism	Students are required to participate in a three-semester professional development seminar sequence. CPH:1050 Direct Admit Seminar introduces first-year students to student life and the public health profession, student success resources on-campus, coping with adversity, curriculum choices and career objectives, personal ethics, communication skills, and community building events. CPH:2050 Second Year Seminar prepares second-year students for experiential learning opportunities, including development of interpersonal and communication skills, ethical decision-making, understanding the cultural contexts in which professionals work, working with communities and the role of advocacy, and professionalism. Second-year students refine their resumes, write cover letters, and letters of inquiry. In CPH:3050 Third Year Seminar, students will develop and prepare for their post-graduate plans; the seminar will include how to conduct a job search, write a resume and cover letter, interview, and applying to graduate programs in public health and related fields. Through experiential learning activities, students will also develop and apply professional skills.
Research methods	Throughout the curriculum, students learn research skills and methods including but not limited to literature reviews and background research on topics (CPH:1400 Fundamentals of Public Health, CPH:3400 Health, Work, and the Environment, CPH:3500 Global Public Health), using secondary sources for assessment of public health issues (CPH:1400 Fundamentals of Public Health, CPH:1600 Public Health Science), and qualitative and quantitative methods (CPH:2600 Intro to Public Health Methods). Additionally, some students will develop and apply research skills through experiential learning (CPH:3999 Undergraduate Research Experience in Public Health and/or CPH:4990 Mentored Independent Undergraduate Research in Public Health).
Systems thinking	Class lectures and discussions examine different perspectives on topics/issues from a systems perspective (CPH:1400 Fundamentals of Public Health, CPH:3500 Global Public Health). Through experiential learning activities, students will also be immersed within systems.
Teamwork and leadership	In many courses, students work in groups and have the opportunity to develop their leadership skills (CPH:1400 Fundamentals of Public Health, CPH:3400 Health, Work, and the Environment, CPH:3500 Global Public Health). Additionally, students will develop teamwork and leadership skills through their experiential learning activities.

## Additional required documentation

**Syllabi:** Syllabi for all required coursework are in the ERF 2.9.a.

**Student work:** Examples of student work are provided in 2.9.b.

**Field experience narrative:** Public health majors attain experiences in public health research and/or practice by completing the experiential learning degree requirement. Students must complete at least one of the following experiential learning activities: public health research, public health internship, global learning (includes research, internships, and pre-approved study abroad programs), or service learning courses. Students are required to first complete CPH:2050 Second Year Undergraduate Public Health Seminar which provides an overview of experiential learning expectations and procedures as well as professional development opportunities that will help students to identify, apply, and complete experiential learning activities. Students are encouraged to complete more than one experiential learning activity while in the degree program. Students must notify and seek approval from the CPH Undergraduate Program Office prior to registering for experiential learning activities (including courses). Student applications for experiential learning are reviewed and approved by the undergraduate public health academic advisor and the undergraduate program director. Students must be in good academic standing during the semester in which they complete an experiential learning activity. All students are expected to make presentations and write final reports/reflections based on their experiences at the end of the semester in which they have completed the experience.

**Cumulative experience narrative:** The capstone course (CPH:4999 Public Health Capstone: Practice of Evidence-Based Public Health, 3 sh) will be offered for the first time in Fall 2019. Students are required to take this course and must complete all required public health coursework prior to registering. Our undergraduate program is in its second year thus no student will reach this point in the curriculum until Fall 2019. No student has been or will be in the future granted a waiver. The capstone course will be designed to encourage (1) group learning through a semester-long group project that incorporates the skills and competencies of our undergraduate program and (2) self-directed learning and reflection that culminates in a student portfolio. As experiential learning and professional development activities have been addressed elsewhere in the curriculum, the capstone course will focus on team-based project activities guided by faculty facilitators that allow students to integrate and synthesize prior knowledge and apply this to simulated/actual public health problems in need of evidence-based solutions.

### 4.6 Assessment of the extent to which this criterion is met.

This criterion is met.

#### *Strengths*

- Competencies and curriculum developed to meet 2016 Council on Education for Public Health (CEPH) criteria for baccalaureate public health programs.
- Overall curriculum (including major requirements and general education requirements) exposes students to the foundations of scientific knowledge, social and behavioral sciences, basic statistics, the humanities and fine arts and adequately covers public health concepts.
- Substantial involvement by CPH faculty in development of undergraduate curriculum.
- Lots of interest in the program by students.
- Substantial opportunities for evaluation by the Undergraduate Program Committee, program director, teaching faculty, and students.

- Commitment to professional development and experiential learning (curricular).

***Weaknesses***

- Co-curricular opportunities to complement curricular elements are in development.

***Plans***

- The CPH will continue to roll-out the undergraduate program curricula as indicated above. These courses will be evaluated with input from the Undergraduate Program Committee, students, and faculty.
- Co-curricular opportunities to be developed include – creation of an undergraduate student organization focused on professional development, advocacy, service, and social activities (development underway Fall 2018).

**Numbering system returns to SPH criteria with 2.10.**

**2.10 Other Bachelor's Degrees.** If the school offers baccalaureate degrees in fields other than public health, students pursuing them must be grounded in basic public health knowledge.

**2.10.a Identification of other baccalaureate degrees offered by the school and a description of the requirements for each. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.**

Not applicable

**2.10.b Identification of the manner in which these curricula assure that students acquire a public health orientation. If this means is common across these degree programs, it need be described only once. If it varies by program, sufficient information must be provided to assess compliance by each program.**

Not applicable

**2.10.c Assessment of the extent to which this criterion is met.**

Not applicable.

*Strengths*

*Weaknesses*

*Plans*

**2.11 Academic Degrees.** If the school also offers curricula for graduate 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.

**2.11.a Identification of all academic degree programs, by degree and area of specialization. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.**

**Table 2.11.a: Academic Degree Programs, by Degree and Area of Specialization**

<b>Master Degrees</b>
MS Biostatistics
MS Epidemiology
MS Clinical Investigation
MS Health Policy
MS Occupational and Environmental Health
MS Industrial Hygiene
MS Agricultural Safety and Health
<b>Doctoral Degrees</b>
PhD Biostatistics
PhD Community and Behavioral Health
PhD Epidemiology
PhD Health Services and Policy
PhD Occupational and Environmental Health
PhD Industrial Hygiene
PhD Agricultural Safety and Health

**2.11.b Identification of the means by which the school assures that students in academic curricula acquire a public health orientation. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each.**

Academic students acquire a public health orientation through the completion of CPH:6100 Essentials of Public Health and EPID:4400 Epidemiology I: Principles. Essentials of Public Health provides an introduction and overview of the scope of public health including public health history, philosophy, values and core functions and 10 Essential Services determinants of health, the five core disciplines and future public health challenges. The course was updated to address the Foundational Public Health Knowledge Areas in the CEPH 2016 criteria. Epidemiology I: Principles covers epidemiological concepts and methods, design of descriptive and analytic studies and application of epidemiology to public health practice. Course syllabi is in ERF 2.11.b.

**2.11.c Identification of the culminating experience required for each academic degree program. If this is common across the school’s academic degree programs, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each.**

For MS students the culminating experience can take several forms; a final comprehensive examination, thesis or some combination of an exam and written work. Examples of student work will be provided on-site. The subject matter of the final comprehensive examination is based on the expectations of what the student should be able to demonstrate at the end of their degree program.

The MS thesis allows students to conduct research under the guidance of their faculty advisor and to demonstrate what they have learned during their degree program. Their work is presented orally, defended to at least three faculty and follow protocol dictated by the UI Graduate College. MS students receive a final grade of pass/no pass.

For PhD students the dissertation is the ultimate culminating experience (although all PhD students must also pass a comprehensive examination). They must complete an original research project and defend it orally in a public forum. Students are expected to undertake a project with greater depth and complexity than that of a MS student. In some CPH degree programs the dissertation takes the form of three publishable articles. A minimum of five faculty members is required for evaluation and protocol is dictated by the UI Graduate College. PhD students receive a final grade of pass/no pass.

**Table 2.11.c: Culminating Experience by Degree/Specialization**

	Thesis or Dissertation	Comprehensive Examination
<b>Master Degrees</b>		
MS Biostatistics		√
MS Community and Behavioral Health	√	
MS Epidemiology with Thesis	√	
MS Epidemiology without Thesis		√
MS Clinical Investigation	√	
MS Health Policy	√	
MS Occupational & Environmental Health	√	
MS Industrial Hygiene	√	
MS Agricultural Safety and Health	√	
<b>Doctoral Degrees</b>		
PhD Biostatistics	√	√
PhD Community and Behavioral Health	√	√
PhD Epidemiology	√	√
PhD Health Services and Policy	√	√
PhD Occupational & Environmental Health	√	√
PhD Industrial Hygiene	√	√
PhD Agricultural Safety and Health	√	√

#### **2.11.d Assessment of the extent to which this criterion is met.**

This criterion is met.

##### ***Strengths***

- All students in academic degree programs acquire a public health orientation through specific coursework and through collaborative activity with other CPH students and faculty.
- All academic degrees have a culminating experience.

##### ***Weaknesses***

*None*

##### ***Plans***

- The plans of study for academic degrees will be reviewed to ensure they meet the 2016 CEPH criteria for Foundational Public Health Knowledge.

- All academic degree program competencies will be reviewed to ensure compliance with the 2016 criteria changes.

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

**2.12.a Identification of all doctoral programs offered by the school, by degree and area of specialization. The instructional matrix in Criterion 2.1.a may be referenced for this purpose. If the school is a new applicant and has graduates from only one doctoral program, a description of plans and a timetable for graduating students from the other two doctoral programs must be presented, with university documentation supporting the school’s projections.**

The CPH has seven PhD programs, including the five core areas of biostatistics, community and behavioral health, epidemiology, health management and policy, and occupational and environmental health.

**Table 2.12.a. Doctoral Programs**

<b>Doctoral Degrees</b>
PhD Biostatistics
PhD Community and Behavioral Health
PhD Epidemiology
PhD Health Services and Policy
PhD Occupational and Environmental Health
PhD Industrial Hygiene
PhD Agricultural Safety and Health

**2.12.b Description of specific support and resources available to doctoral students including traineeships, mentorship opportunities, etc.**

The Graduate College offers a variety of merit based fellowships to doctoral students for which CPH students are eligible. For example, the Graduate College Iowa Recruitment Fellowship enhances departmental recruitment packages by offering our most accomplished new doctoral students a stipend supplement (\$2,000 per year) for up to five years and fellowship support for up to four summer terms (\$4,000 per summer). Tuition scholarships are paid during the AYs (fall, spring) by the appointing unit, while the Graduate College provides two credit hours tuition and 25 percent of the mandatory fees for the summer terms. The Graduate College Post-Comprehensive Research Award program provides an opportunity for advanced doctoral students to benefit from protected and supported time to pursue their scholarly research activities. Recipients receive a stipend (\$9400) and a tuition scholarship for two credit hours, 25 percent of the mandatory fees, and a contribution towards their health and dental insurance. The Graduate College Summer Fellowships provide an opportunity for advanced doctoral students to benefit from protected and supported time to pursue their scholarly research activities. The fellowship includes a \$4,000 summer stipend plus a tuition scholarship for two credit hours and 25 percent of the mandatory fees. The Ballard and Seashore Dissertation Fellowships provide an opportunity for doctoral students to benefit from a final semester of protected and supported time to focus on completing their scholarly research activities and the writing of their dissertations. A one-time fellowship award will be given for \$10,000. The T. Anne Cleary International Dissertation Research Fellowships provide support for UI doctoral candidates to conduct dissertation research outside of North America, and is available to all disciplinary areas. Awards are made up to \$5,000 per proposal. In addition to the Graduate College, the Graduate Student Senate provides travel funding assistance to graduate students who present their research at conferences or meetings. They also provide Supplemental Travel Award funds for graduate students who must travel for the completion of a graduate project.

The CPH also has funding available for doctoral students. The Dean's Recruitment Fellowship Program is to aid in the recruitment of exceptional scholars who are seeking a degree in public health. Each department is able to award an incoming PhD student a one-time award of \$10,000. The Advancing Graduate Student Success Award is a relatively new CPH program to support graduate students by providing funds for academic and research related costs. Students may apply for multiple or repeated awards over time not to exceed a total of \$4,000. Doctoral students are also eligible for CPH Global Public Health Student Travel grants to help to encourage international research opportunities. Below is additional information on how departments support the success of their doctoral students:

**Department of Biostatistics:** In BIO all doctoral students are supported on assistantships or fellowships. Both research and teaching assistantships generally involve the direct supervision and mentoring by a BIO faculty member. Students are initially assigned an academic advisor to provide guidance on coursework and potential dissertation topic areas, and to help formulate a comprehensive program of study. Once a student chooses a dissertation supervisor, this faculty member becomes the academic advisor.

**Department of Community and Behavioral Health:** In CBH the majority of full-time students are supported on assistantships. To help ensure doctoral student success, CBH has created a timeline for full and part-time students for course and dissertation completion. In fall 2017 CBH implemented CBH:7100 Community and Behavioral Health Doctoral Seminar, which focuses on helping student develop essential academic skills such as structure of scientific manuscripts, strategies for successful interdisciplinary collaboration as well as doctoral program requirements.

**Department of Epidemiology:** In EPI the majority of full-time students are supported on assistantships and also have the opportunity to gain research experience through various research centers in the department and across the college. For those preparing for academic careers, a course on teaching methods in epidemiology is offered which includes guided practicum experience in teaching epidemiology. All doctoral students participate in the Epidemiology Journal Club where, after receiving instruction on coordinating and facilitating group discussion, doctoral students lead discussions with master level students. Doctoral students are required to attend and present their research in the weekly departmental research seminar.

**Department of Health Management and Policy:** In HMP the majority of doctoral students are supported on assistantships. To help ensure doctoral student success, each student is assigned a mentoring team. Doctoral students also regularly publish with faculty members. HMP has a seminar, HMP:7970 Seminar in Health Research and Instruction, to assist doctoral students to develop research and teaching skills.

**Department of Occupational and Environmental Health:** In OEH doctoral students are provided funding for their education through assistantships. Most students receive full funding for five years. A student is assigned a faculty advisor when they enter the program. In addition to the advisor, the associate head for student affairs and the graduate program coordinator provide advice and information when requested. To help support doctoral student success, OEH has made changes to its student handbook to more clearly articulate expectations of doctoral students. Advisors review these expectations with new students.

**2.12.c Data on student progression through each of the school's doctoral programs, to include the total number of students enrolled, number of students completing coursework and number of students in candidacy for each doctoral program.**

**Table 2.12.c: Doctoral Student Data (AgSH=Agricultural Safety and Health; BIO=Biostatistics; CBH=Community and Behavioral Health; EPI=Epidemiology; HSP=Health Services and Policy; IH=Industrial Hygiene; OEH=Occupational and Environmental Health)**

	AgSH	BIO	CBH	EPI	HSP	IH	OEH
# Newly admitted in Summer/Fall 2017	1	6	2	3	4	1	5
# Currently enrolled (Total) in Fall 2017	1	25	10	26	13	4	14
# Completed coursework during AY2017^	1	6	1	3	0	2	2
# Advanced to candidacy (cumulative) during AY2017*	0	6	1	4	0	2	2
# Graduated in AY2017	1	4	0	1	3	1	2

^In some programs students complete required coursework post-comprehensive examination.

\*Defined as passing comprehensive examination

**2.12.d Identification of specific coursework, for each degree, that is aimed at doctoral-level education.**

At the UI all courses above 5000 are considered graduate level. In the CPH, courses numbered 6000 or above are usually reserved for doctoral level students. The information below summarizes course requirements that are specific for doctoral candidates in each department (versus required courses for MS students in the same department).

**Agricultural Safety and Health**

OEH:6130                      Agricultural Health & Safety: Practice, Research Methods & Policy  
 BIOS:5120                    Regression Modeling and ANOVA in the Health Sciences  
 EPID:5570                    Zoonotic Diseases

**Biostatistics**

BIOS:7110 & 7120          Theory of Biostatistics I and II  
 STAT:7210                    Linear Models  
 BIOS:7210                    Survival Data Analysis  
 BIOS:7310                    Longitudinal Data Analysis  
 BIOS:7410                    Analysis of Categorical Data

**Community and Behavioral Health**

MS students in CBH are required to take one 3 sh methods course. Doctoral students are required to have 15 sh from the list below. Additionally, doctoral students are required to take CBH:7100 Community and Behavioral Health Doctoral Seminar.

BIOS:5120                    Design and Analysis of Experiments in the Biomedical Sciences  
 CBH:5305                    Evaluation I: Theory and Applications  
 CBH:5310                    Qualitative Research for Public Health  
 CBH:6305                    Evaluation II: Design and Methods  
 CBH:6335                    Research Methods in Community & Behavioral Health  
 PSQF:6249                    Factor Analysis and Structural Equation Models

PSQF:6252	Introduction to Multivariate Statistical Methods
SOC:5160	Sampling, Measurement, and Observation Techniques
SOC:6170	Introduction to Sociological Data Analysis
SOC:6180	Linear Models in Sociological Research
SOC:7170	Categorical Data Analysis in Sociological Research
SOC:7180	Seminar: Selected Topics in Research Methods & Data Analysis

### **Epidemiology**

EPID:6050	Research in Epidemiology
EPID:6100	Writing a Grant Proposal
EPID:7400	Epidemiology III: Theories
BIOS:6310 or 6210	Intro Longitudinal Data Analysis or Applied Survival Analysis

### **Health Services and Policy**

HMP:7140	Primary Data and Mixed Methods
HMP:7960	Analytical Issues in Health Services Research II
HMP:7910	Seminar in Contemporary Health Issues
HMP:7930	PhD Independent Research

### **Industrial Hygiene**

OEH:6460	Quantitative Exposure Assessment
BIOS:5120	Regression Modeling and ANOVA in the Health Sciences

### **Occupational and Environmental Health**

BIOS:5120	Regression Modeling and ANOVA in the Health Sciences
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## **2.12.e Assessment of the extent to which this criterion is met.**

This criterion is met.

### ***Strengths***

- PhD degrees are offered in more than the required minimum of three core disciplines.
- The UI Graduate College has increased the number of fellowships available to doctoral students to support their progression and timely completion of the degree.
- The CPH's implementation of the Advancing Graduate Student Success initiative also provides a funding mechanism for professional development and support of research.
- Departments have implemented processes to more carefully monitor the progress of PhD students through their plan of study.
- Specific PhD-level coursework is available in the CPH.

### ***Weaknesses***

- With the decrease in grant funding there are fewer research assistantships available for PhD students. This has impacted recruiting efforts and the number of PhD students departments can support.
- Some doctoral concentrations require few PhD level courses in their plans of study.
- A limited number of teaching assistantships is available for doctoral students who want to obtain teaching experience.

***Plans***

- Doctoral programs are in the process of reviewing their curriculum to ensure that plans of study include more doctoral-specific course requirements.
- The undergraduate program will provide additional teaching assistantships as it continues to grow. This will provide an additional funding mechanism for doctoral students as well as teaching experience.
- The college has formed a workgroup on methods training charged with developing a comprehensive description of methodological training opportunities across collegiate curricula for use by programs within the college to meet the objectives and competencies needed in programs of study.

**2.13 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.

**2.13.a Identification of joint degree programs offered by the school. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.**

The table below reflects the joint degrees the college has for the MPH. At the graduate level, joint degrees are offered in collaboration with the UI Colleges of Law, Medicine, and Pharmacy. The CPH also has a joint degree with Iowa State University (ISU), which is the Iowa regent institution offering the veterinary medicine degree. At the undergraduate level, all UI majors are eligible to apply to the MPH program. Additionally, joint degrees are offered in collaboration with three liberal arts colleges: Coe College, Cornell College, and Grinnell College

**Table 2.13.a: Identification of joint degree programs**

<b>Joint Degrees (Combined, Joint, Dual)</b>		
<b>Combined Graduate &amp; Professional Degrees</b>		
UI College of Law		MPH/JD
UI College of Medicine		MPH/MD
UI College of Pharmacy		MPH/PharmD
ISU College of Veterinary Medicine		MPH/DVM
<b>Dual Bachelor and Master Degrees</b>		
UI College of Liberal Arts & Sciences	BA/BS	MPH (all subtracks)
Coe College	BA	MPH (all subtracks)
Cornell College	BA	MPH (all subtracks)
Grinnell College	BA	MPH (all subtracks)

**2.13.b A list and description of how each joint degree program differs from the standard degree program. The school must explain the rationale for any credit sharing or substitution as well as the process for validating that the joint degree curriculum is equivalent.**

For the undergraduate joint degree programs, students interested in obtaining the MPH go through the same admission steps as all other MPH subtrack students. Additionally, their course requirements do not differ from the standard degree program. Students receive a bachelor’s degree from their undergraduate program and then continue in the MPH program to earn their master’s degree.

At the graduate level, students in joint degree programs are admitted to each program separately using the same criteria as that of any other applicant. Students must meet all of the requirements and competencies for both degrees, although they are allowed to cross-count 12 semester hours of credit as electives. The MPH Program selects the cross-counted hours in consultation with the professional program after reviewing the syllabi and identifying those classes with significant public health content. The cross-counted courses are reviewed annually and meet the requirements of our Graduate College. Students must apply to graduate from both programs and degree audits must be approved for both. The courses transferred from the professional program and counted toward the MPH degree are listed below along with a brief description of the cross-counted coursework.

**UI College of Law (MPH/JD)**

LAW:8562	Health Law (3 sh)
LAW:8467	Family Law (3 sh)
LAW:8751/HMP:6360	Nonprofit Organizational Effectiveness I (3 sh)
LAW:8752/HMP:6365	Nonprofit Organizational Effectiveness II (3 sh)

Courses that are cross-counted for College of Law students include topics relevant to public health including the role of social and behavioral sciences in family law issues, issues around quality, access, and cost of health care as well as bioethics relevant to health law, and leadership, operational and financial aspects of non-profit organization management.

**UI College of Medicine (MPH/MD)**

MED:8122	Medicine and Society I (3 sh)
MED:8132	Medicine and Society II (4 sh)
MED:8222	Medicine and Society III (4 sh)
MED:8121	Clinical and Professional Skills I, II, III (1 sh)

Medicine and Society I, II, III is a three semester sequence taken by all medical students in which students learn a variety of topics relevant to public health including principles of disease prevention, health promotion, public health, epidemiology, health services organization and delivery, and community dimensions of medical practice. Additionally, over this sequence, students are introduced to the social determinants of health, concepts of wellness, evaluation of health interventions, global epidemiology, and environmental threats to health. One semester hour is included from the three semester series Clinical and Professional Skills I, II, and III which includes content on the Interprofessional Education Collaborative competencies of teams/team work, communication, roles and responsibilities, and values and ethics. Students also develop an understanding of principles and importance of IPE and practice.

**UI College of Pharmacy (MPH/PharmD)**

Phar:8250	Applications I (1 sh)
Phar:8265	Applications II (1 sh)
Phar:8374	Applications III (1 sh)
Phar:8377	Integrated Pharmacotherapy Capstone (1 sh)
Phar:8375	Advanced Topics in Health Services (2 sh)
Phar:8363	IP:Infectious Disease (4 sh)
Phar:8378	Pharmacy Law and Ethics (2 sh)

Courses that are cross-credited for College of Pharmacy students are required of all pharmacy students and cover topics relevant to public health including social and cultural awareness for different populations; social, cultural, behavioral and economic components of pharmacy care; health services; infectious and chronic disease epidemiology; and Interprofessional education.

**ISU College of Veterinary Medicine (MPH/DVM)**

VMPPM 437	Infectious Diseases and Preventive Medicine (3 sh)
VMPPM:378	Case Studies IV: Emerging and Exotic Diseases of Animals (1 sh)
VMPPM:388	Public Health and the Role of the Veterinary Profession (3 sh)
VCS:445	Small Animal Internal Med (only content specific to public health is counted) (2 sh)
BMS:443	Pharmacology and Therapeutics (3 sh)

Courses that are cross-counted are required for all College of Veterinary Medicine students and include topics relevant to public health including epidemiology, occupational health, zoonotic diseases, food safety, regulatory control and preventive medicine issues of infectious diseases in large animals.

### **2.13.c Assessment of the extent to which this criterion is met.**

This criterion is met.

#### ***Strengths***

- The combined graduate and professional degrees between the MPH and the UI Colleges of Medicine, Pharmacy, and the ISU College of Veterinary Medicine are very popular—at least half of the MPH students enrolled in the college are in a combined degree program. The participation of students from other professional degree programs enriches the learning environment for all.
- Combined degrees all have concentration specific competencies and aligned coursework.
- The dual bachelor and MPH degrees have seen increased interest not only within the university but also from other liberal arts colleges in Iowa.

#### ***Weaknesses***

- The combined degree with the UI College of Law has seen low enrollment numbers.
- To-date enrollment in the dual bachelor and MPH program has been relatively low.
- There is a greater risk that students in combined degree programs will not complete the MPH since it is not their primary program of study. This has impacted graduation rates for some cohorts.

#### ***Plans***

- As the college moves to implement the 2016 CEPH criteria the impact on the combined degree program of study will be closely monitored given the complexity of their programs of study.
- The MPH Director and Assistant Director will continue to have meetings with the primary colleges of students to ensure that as they make curricular changes the courses that are cross-crediting are still appropriate.
- As the students in the college's undergraduate program progress, we anticipate interest in dual bachelor and master degrees within the college.

**2.14 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 learning methods and to systematically use this information to stimulate program improvements. The school must have processes in place through which it establishes that the student who registers in a distance education course or degree is the same student who participates in and completes the course or degree and receives the academic credit.

**2.14.a Identification of all degree programs that are offered in a format other than regular, on-site course sessions spread over a standard term, including those offered in full or in part through distance education in which the instructor and student are separated in time or place or both. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.**

The MPH for practicing veterinarians is offered, in part, through distance education.

**2.14.b Description of the distance education or executive degree programs, including an explanation of the model or methods used, the school's rationale for offering these programs, the manner in which it provides necessary administrative and student support services, the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the school, and the manner in which it evaluates the educational outcomes, as well as the format and methods.**

The MPH for Practicing Veterinarians has been offered in collaboration with the ISU College of Veterinary Medicine since the summer of 2007. Given the focus in public health on preparedness in the areas of zoonotic diseases, food security and foodborne diseases, this program continues to fill an identified need.

Practicing veterinarians applying to the program must have a degree in veterinary medicine from an accredited US college of veterinary medicine. Applicants must meet the UI Graduate College policies regarding admission (3.0 GPA). Because they have a professional degree the Graduate Records Examination (GRE) is waived. Students participate in two 2-week summer sessions, one on each campus in consecutive summers, with the remainder of courses available via distance learning. All students in the MPH for Practicing Veterinarians program have an orientation to the UI and CPH during their first two-week summer session and take on-campus and distance-based courses with other CPH students. The required coursework is the same as is required of other MPH students and the core competencies associated with the degree are also the same as for other MPH students. The students complete the practice and culminating experience for the MPH and receive the same assistance from the MPH Practicum Course Director as all MPH students.

Additionally, students receive similar support and administrative services from UI CPH and ISU faculty and academic support staff at CPH (e.g., graduate program coordinator, educational media coordinator, library liaison, information technology (IT) support). These services are accessible by phone and internet. Course materials for online courses are available through the UI's learning management system Iowa Courses Online (ICON). ISU faculty who participate in the program are adjunct faculty of the CPH. UI CPH faculty and ISU adjunct faculty serve as academic advisors for this group of students.

The monitoring and evaluation of the MPH for Practicing Veterinarians is similar to that as for other MPH students. The same academic standards apply to both programs; the same faculty teach in both programs and student evaluations of teaching are required. The evaluations from the online courses are reviewed by both the associate dean for academic affairs and the MPH director each semester. Additionally, the MPH director, assistant director and select faculty meet with students in person at the beginning of the program, at the end of the first two-week summer session, and at the beginning of the second-year summer session to assess students' needs and concerns. Students also complete end of program and alumni surveys.

**2.14.c Description of the processes that the school uses to verify that the student who registers in a distance education course or degree is the same student who participates in and completes the course or degree and receives the academic credit.**

Students admitted to the UI are issued a unique username and password that grants them access to various web-based resources. The university enforces a password policy where passwords must be a minimum of 9 characters, using a combination of alphabetic, numeric and special characters.

UI courses are offered through the campus's Learning Management System (ICON-Canvas). ICON is used for distributing course materials, communicating with students, managing grades, assignments, quizzes, and supporting course materials and activities. The UI Distance and Online Education division provides support for distance-based students taking exams. This includes arranging secure proctoring for students outside of the Iowa City area (either in-person or through the use of ProctorU).

Finally, as noted above, the MPH program meets with all MPH for practicing veterinarian students during the two in-person, on-campus sessions.

**2.14.d Assessment of the extent to which this criterion is met.**

This criterion is met.

***Strengths***

- The MPH for Practicing Veterinarians program addresses a critical public health workforce need.
- There are concentration specific competencies and aligned coursework for this program.
- The college has strong, long-standing collaborations with ISU College of Veterinary Medicine which contribute to the success of the program.

***Weaknesses***

- Enrollment in the program is quite low overall.
- Because the veterinarians participating in the program are usually employed full-time their progression through the program is sometimes impacted.

***Plans***

- Continue to collaborate with ISU College of Veterinary Medicine on recruitment activities and curricula.
- As the college moves to implement the 2016 CEPH criteria the impact on this program will be closely monitored.

### 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.

**3.1.a A description of the school's research activities, including policies, procedures and practices that support research and scholarly activities.**

Research is an integral component of the University of Iowa (UI) College of Public Health's (CPH) mission, and its rich research environment integrates well with its educational and outreach activities. The college has a strong track record of research productivity with a focus on interdisciplinary, rigorous and high impact research. CPH research impacts local, state, national, and international communities through advancing knowledge and influencing policies and practices. Between Fiscal Year (FY) 2016 and FY2017, the college averaged \$39,982,891 in external funding. CPH has the fourth highest funding among the UI's eleven colleges, and the highest per capita faculty funding of any college. Although CPH faculty account for only 4% of all faculty at the university, they constitute 15% of the faculty who obtain at least \$1 million per year in funding.

The CPH is very successful in conducting interdisciplinary research, and has active collaborations with the Colleges of Medicine, Engineering, Pharmacy, Nursing, Law, Dentistry and Liberal Arts and Sciences. CPH also collaborates with interdisciplinary units such as the UI Public Policy Center; the Aging Mind and Brain, Genetics, Informatics, Obesity and Water Sustainability Initiatives; Holden Comprehensive Cancer Center and the Institute for Clinical and Translational Science. In addition to serving as principal investigators, faculty are also highly collaborative with other units on campus. In FY2017, CPH faculty were collaborative on 45 grants and \$23,680,991 in funding.

#### **Infrastructure Support**

**University of Iowa:** The Office of the Vice President for Research and Economic Development (OVPR) is the main central administrative research unit on campus. The OVPR oversees centralized research compliance (described subsequently under policies and procedures) and provides resources to facilitate research activities and to communicate research impact. The OVPR holds quarterly meetings with collegiate associate deans for research, including the CPH Associate Dean for Research, and the CPH routinely invites OVPR staff to meetings to ensure awareness of each other's activities and resources. Examples of OVPR activities to facilitate research include:

- Internal Funding Initiative that supports conference/ideation and research projects that are innovative and include interdisciplinary work.
- Support for grant writing, organizing collaborative meetings and grant reviews. CPH has been successful in obtaining funding support for grant writers and grant-writing workshops.
- Institutional support for start-up packages for new faculty, cost sharing towards equipment, facility renovation, funding of pilot projects and bridge funding. This funding source has been widely used by the college to demonstrate institutional support for large project proposals and center grants. Currently, six of our federally funded centers receive some institutional support from the OVPR. Usually the OVPR requests that these fund allocations be shared with the college.

- Every other year, the OVPR organizes a grant writing assistance program, “Write Winning Grant Proposals.” This program begins with an initial all-day grant-writing seminar. From this seminar, faculty can apply for the second part, which is a semester-long workshop to prepare a grant proposal with mentorship from the seminar leader. Each year, approximately five faculty participate in the seminar. In 2016, CPH faculty member Dr. Kelly Baker was selected for the semester-long seminar.

The OVPR houses the UI Division of Sponsored Programs (DSP), which provides institutional oversight and approval of externally sponsored projects. DSP monitors compliance with university policies and procedures, government regulations and sponsor requirements. It also maintains the University of Iowa Research Information System (UIRIS), a database that tracks and stores information on all external applications and awards.

Additional infrastructure to support research is provided through the UI Grant Accounting Office, housed within UI Finance and Operations. The UI Grant Accounting Office provides post-award financial support for externally sponsored programs, including establishing accounts, distributing monthly financial statements, collecting funds from sponsors, processing invoices to pay sub-awardees and preparing financial reports as required by sponsors. DSP and the UI Grant Accounting Office facilitate periodic meetings with all university research administrators in which administrators are informed of changing regulations and ideas are sought on ways to improve business processes related to grant administration.

**College of Public Health:** The CPH Research Office works closely with the collegiate departmental administrators for pre- and post-award management and with the CPH Communications Office to identify opportunities to highlight and promote research activities. Some of the activities conducted by the CPH Research Office include:

### **Research Development**

- **Grant Writing Club:** The CPH Research Office organizes groups of faculty writing grants over the same time period to discuss proposal development and review each other’s proposal sections as they are drafted. Senior faculty serve as guest speakers to provide guidance on developing different sections of a proposal.
- **Support to find funding opportunities:** The CPH Research Office works with other units to identify large-scale funding initiatives and bring potential collaborators together. Examples include a collaborative meeting with CPH, the College of Engineering and the Informatics Initiative to explore funding options in health-related informatics. The CPH Research Office releases a weekly Funding Opportunity Announcement, which includes a wide variety of public health funding opportunities from federal and state agencies and industry and foundations. The CPH Research Office website includes a more comprehensive composite funding opportunity list that is gleaned from various funding announcement services (<https://www.public-health.uiowa.edu/research/>). The CPH Research Office also provides individual support in identifying potential funding sources.
- **External proposal reviews and mock reviews:** The CPH Research Office coordinates review of proposals to provide feedback prior to submission. The review consists of two stages: (1) is a review of the specific aims and general approach and (2) is a mock review of the entire proposal. Reviewers are usually external to the UI and receive an honorarium for their contributions.
- **Grant preparation support:** The CPH Research Office provides many resources to assist investigators in preparing proposals, including a Grant Preparation Checklist that includes all proposal development activities and their suggested timeframes. This checklist has been

developed specifically for UI grant submission and identifies all required forms and approval processes. The CPH Research Office also provides standard language on information such as resources and facilities to include in proposals.

- Pilot Project Fair: Every other year, the CPH Research Office hosts a Pilot Project Fair to highlight opportunities for internal funding. The Pilot Project Fair includes a panel discussion led by faculty who oversee or review pilot awards and a showcase of available pilot award opportunities. The 2016 Pilot Project Fair highlighted 13 internal award opportunities and attracted more than 45 attendees from throughout the college and university.
- The Biostatistics Consulting Center offers expert statistical consulting for health science researchers at the college and the University. Biostatisticians work with investigators during all phases of health sciences research: proposal development, study design, data forms or questionnaire development, data entry, data management, statistical analysis and report preparation.
- The CPH Office of Information Technology (IT) supports data infrastructure, data compliance and security, and hardware/software.

### **Track and Report on Research Productivity**

- The CPH Research Office tracks and reports on research productivity using the following measures: applications and funded proposals by funding agency and type of award, funding success rate by funding agency and type of award and collaborative and interdisciplinary research.
- The CPH Research Council (described in Criterion 1.5.a) assesses CPH centers and institutes (<https://www.public-health.uiowa.edu/research-centers/>) using a core set of criteria. The CPH uses information from the assessment to recognize accomplishments and strengths and to identify challenges the center may be facing. Upon completion of the assessment, the center director meets with the associate dean for research and dean to review and identify resources available to assist with any issues.

### **Build Relationships with Funding Agencies**

- Each year, the CPH invites 1-2 national funding agency representatives to visit. During these visits, funding agency representatives meet with small groups of faculty to learn about collegiate research activities and present a collegiate seminar about their funding agency and its funding priorities. Examples of grant agencies hosted include the Robert Wood Johnson Foundation (RWJF), National Cancer Institute, National Institutes of Health, National Heart, Lung and Blood Institute and Patient-Centered Outcomes Research Institute.
- The CPH Research Office, in collaboration with the OVPR, provides support for faculty to visit funding agencies. These visits begin with the faculty meeting with the CPH Research Office to identify goals for the visits and potential agencies to visit. The meeting is then coordinated through a consulting agency supported by the OVPR.

### **Highlight and Celebrate Research Accomplishments**

- Public Health Research Week: In 2014, CPH launched its inaugural CPH Research Week held in conjunction with National Public Health Week. CPH Research Week includes an abstract/poster competition, a keynote speaker, skill-building workshops, and a social media campaign. Below is a summary of CPH Research Week keynote speakers and skill-building workshop themes for the past three years.

**Table 3.1.a.1: CPH Research Week Activities 2015-2017**

Year	Speaker	Skill building workshop
2017	Matthew Desmond, Sociologist and Author	Building Great Research Teams
2016	Jonathan Fielding, Former Director LA County Public Health Department	Writing Op-Eds & Build Your Own Infographic
2015	Howard Koh, Former US Assistant Secretary for Health	Effectively Communicating Your Research

- Each year, the CPH Research Office collects success stories that feature high impact research. The CPH Research Office provides these success stories to the UI President's Office and the OVPR to encourage university leaders to highlight work from the CPH. These stories also serve as material for collegiate social media campaigns, to share with public health stakeholders and to provide during relevant public health functions. The CPH Research Office also works closely with the CPH Communications Office to highlight research on the CPH webpage, social media campaigns and publications.
- In 2001, the CPH established a Distinguished Faculty Lecture to recognize faculty with an outstanding record of achievement and expertise. This series kicks off the academic year (AY) and provides students with insight into collegiate faculty research activities.

**Table 3.1.a.2: Distinguished Faculty Lectures 2015-2017**

Year	Speaker	Title
2017	Marcia Ward, professor, health management and policy	Telehealth in the Emergency Department: Using Mixed Methods to Explore Benefits
2016	Edith Parker, professor, community and behavioral health	A Change for the Better: Engaging with Communities to Improve Health
2015	Keith Mueller, Gerhard Hartman Professor, health management and policy	Health Services Research Meets Policy and Practice to Benefit Rural People

**Support New Faculty**

- Each year the CPH supports New Faculty Research Awards (up to \$10,000 each) intended to assist new faculty in establishing their research programs. New faculty in any rank within three years of their appointment are eligible. Recipients of this award for the last three years are listed below.

**Table 3.1.a.3: List of New Faculty Research Award Recipients 2015-2017**

Year	Awardee	Department	Title
2017	Paul Gilbert	Community and Behavioral Health	Natural Recovery from Alcohol Use Disorders in Southeast Iowa
2016	Dan Sewell	Biostatistics	Simultaneous and Temporal Dependence Structures within Network Data
	Wei Bao	Epidemiology	Prospective investigation of maternal tributyltin exposure during early pregnancy and neonatal birth size
2015	Christine Petersen	Epidemiology	Prevalence and Risk Factors of Companion Animal Zoonoses in Caretakers

- The CPH Research Council is overseen by the CPH Research Office and serves as an advisory committee to the dean focused on collegiate research issues (see Criterion 1.5 for membership). The CPH Research Council serves as reviewers for the New Faculty Research Award applications and discusses topics such as F&A (Facilities and Administrative Costs) return,

grant application success rates, and resources needed for junior and mid-level faculty. The CPH Research Council also performs center assessments, which require CPH Centers to provide information regarding scholarly productivity, interdisciplinary and team science, educational program enrichment, community engagement, outreach and service, and financial stability. The CPH Research Council reviews the responses and offers guidance on various topics such as leadership transition planning, methods to highlight accomplishments, and opportunities for collaboration. In a recent assessment, the CPH Research Council advised a center that its services were also provided by other organizations on campus. As a result, the center met with the other organizations and created a flow chart for service requests so that clients are routed to the provider whose specialization most closely aligned with their request.

**Policies and Procedures:** The UI research policies comply with all federal and state requirements with regard to the protection of human subjects, vertebrate animal research, conflict of interest, environmental health and safety, research misconduct and fiscal accountability. The OVPR fosters responsible conduct of University research through their various compliance offices.

All proposals involving human subjects or the use of existing data on human subjects must have the approval of the Institutional Review Board (IRB) in the UI Human Subjects Office. All investigators conducting human subject research are required to complete the Certifications in Human Subjects Protections (CITI) training and certification. The Human Subjects Office holds regular office hours to work with faculty on their IRB applications and conducts routine auditing to ensure project compliance for approved protocols. Research involving vertebrate animals meets all the requirements of the Institutional Animal Care and Use Committee. The UI Office of Animal Resources provides policy and guidelines on animal research protocols, shipping and transportation of animals, housing of animals in vivarium and euthanasia of animals.

Federal regulations and UI policies and procedures require disclosure and management of actual or apparent conflicts of interests related to sponsored programs. All faculty, staff and students involved in UI-funded research are required to report conflicts of interest annually. Key personnel must have an updated Conflict of Interest statement prior to submission of grant proposals. If a conflict exists, the UI Conflict of Interest in Research Committee develops and implements a management plan.

At the collegiate level, each department has an administrator that oversees pre- and post-award management related to compliance and fiscal accountability and supports faculty with their grant submissions and administration. The UI provides guidelines for budgeting and allowable costs to federally-sponsored projects including purchasing of equipment, account deficit, salary cap, post-award administration, graduate student tuition scholarships and research subject compensation. Departmental administrators and departmental executive officers (DEO) ensure compliance with these guidelines. All grant applications follow a routing system that requires the review and signature of the principal investigator and key investigators and their DEO(s) and dean(s). These signatures indicate that the proposal is in accord with our mission statement and strategic plan and that appropriate resources (e.g., staffing, space, IT and budgetary resources) for proposed projects are available. The college provides a pre-award checklist that identifies each of the required components for proposal completion and submission, including guidance on the compliance form requirements, their location and contact information if investigators have questions. Departmental administrators assist investigators with post-award management.

**3.1.b A description of current research undertaken in collaboration with local, state, national or international health agencies and community-based organizations. Formal research agreements with such agencies should be identified.**

The CPH collaborates extensively with other researchers and organizations at the local, state, national, and international level. Formal and informal agreements support these efforts. The CPH has an average of 111 signed institutional agreements each year which include confidential disclosure agreements; data use agreements; master agreements; material transfer agreements; and memorandums of understanding.

Examples of collaborations with local communities include the “Active Ottumwa” a Centers for Disease Control and Prevention (CDC)-funded Prevention Research Center for Rural Health project. The project involves a formal agreement with the city of Ottumwa and aims to empower community members to improve access to fitness activities and to increase physical activity. In another example, the Iowa Institute for Public Health Research and Policy (IIPHRP) is leading a RWJF-funded project to examine the interplay between housing insecurity and health in Iowa City. Community stakeholders involved in the project include local business leaders, community organization, social services and legal aid and housing services.

At the state level, the CDC-funded Injury Prevention Research Center collaborates with the Iowa Department of Public Health (IDPH) on several projects including a grant to establish the Iowa Violent Deaths Reporting System. The center also partners with the Iowa Department of Transportation and Governor’s Highway Traffic Safety Bureau to conduct research related to road safety. The Center for Public Health Statistics partners with the IDPH on several projects including the Iowa Breast and Cervical Cancer Early Detection Program, Iowa Get Screened: Colorectal Cancer Program and the Well-Integrated Screening and Evaluation for Women Across the Nation project.

At the national level, faculty collaborate with a range of organizations and institutions. For example, the Rural Telehealth Research Center collaborates with health care organizations regionally as well as researchers from the University of North Carolina-Chapel Hill and the University of Southern Maine on a range of projects focused on building the evidence base for telehealth, especially in rural settings. The Clinical Trials Data Management Center provides statistical and data management support for multi-center projects across the nation. Recent projects include the Parkinson’s Progression Markers Initiative with the Michael J. Fox Foundation and Network for Excellence in Neuroscience Clinical Trials with Cedars-Sinai Medical Center. In another example, Dr. Kelli Ryckman collaborates with the University of California, San Francisco, the Cincinnati Children’s Hospital Medical Center and the University of South Carolina on various projects to study testing in preterm and newborn infants.

The CPH also has international research collaborations that involve faculty and students. In this paragraph, we highlight a few of the examples. Department of Epidemiology (EPI) faculty are collaborating with faculty from Banaras Hindu University (India) to conduct research on visceral leishmaniasis. Department of Community and Behavioral Health (CBH) faculty are collaborating with colleagues at the Catholic University of Eastern Africa on a study assessing how spirituality impacts health, specifically around the prevention and treatment of human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS). Faculty from Occupational and Environmental Health (OEH) are collaborating with Safe Water Network, a non-governmental organization that partners with communities in Ghana and India, to conduct a health-impact assessment of how their programs are working. Examples of international research involving graduate students include a study conducted in India on the occupational conditions of workers

who harvest tea leaves by hand, research in Kenya on children’s exposure to gastrointestinal pathogens in public areas, research in the Gambia on neurotoxicity from agricultural pesticide exposures, and smoking cessation practices of pharmacists at a community pharmacy in Cluj-Napoca, Romania.

**3.1.c A list of current research activity of all primary faculty identified in Criterion 4.1.a, including amount and source of funds, for each of the last three years. These data must be presented in table format and include at least the following information organized by department, specialty area or other organizational unit as appropriate to the school: a) principal investigator, b) project name, c) period of funding, d) source of funding, e) amount of total award, f) amount of current year’s award, g) whether research is community based, and h) whether research provides for student involvement. Only research funding should be reported here; extramural funding for service or training grants should be reported elsewhere.**

As previously noted, the college has a strong track record of research productivity with a focus on interdisciplinary, rigorous and high impact research. A considerable amount of research is conducted through CPH collaborative centers and institutes (<https://www.public-health.uiowa.edu/research-centers/>) that are funded through federal grants or other external sources.

Table 3.1.c below provides a summary of total research dollars by department for the past three fiscal years. Note these figures are different than what is reported in CPH outcome measures and other areas of this self-study as the CPH tracks total external funding which includes training, scholarships and fellowships and service funding. The summary table below and the complete table in ERF 3.1.c only contains research funding.

**Table 3.1.c: Summary of Total Research Dollars by Department for FY2015-FY2017**

Department	FY2016 (\$)	FY2017 (\$)	Fall 2017 (\$)
Biostatistics	6,313,657	2,345,822	2,794,891
Community & Behavioral Health	1,363,506	1,721,081	1,340,617
Epidemiology	6,463,951	6,622,928	2,722,413
Health Management & Policy	2,896,165	4,198,070	2,265,021
Occupational & Environmental Health	12,201,517	11,908,901	6,478,332
<b>TOTAL</b>	<b>29,238,796</b>	<b>26,796,802</b>	<b>15,601,274</b>

Table 3.1.c (ERF 3.1.c) provides data on research funding and identifies community engaged research and projects that have student participation. Of note, the CPH defines community-engaged research as research that actively involves community members in the development, implementation, interpretation, and/or dissemination of study findings. We use the National Academies of Science definition of community as “denoting the people who seek and provide health care in community academic and private settings, as well as individuals and organizations working in communities to improve the health and well-being of local populations.” Our community-engaged research includes the full spectrum of engaged research ranging from studies that engage community leaders to help guide the research to fully-implement Community Based Participatory Research. We define student-involved research as projects that involved a student(s) in such a way as to advance learning and experience in their field of study and where students are involved regardless of whether or not the student(s) was paid. Projects where students are hired to perform only administrative tasks, such as filing or scheduling, are not considered student involved.

**3.1.d Identification of measures by which the school may evaluate the success of its research activities, along with data regarding the school’s performance against those measures for each of the last three years. For example, schools may track dollar amounts of research funding, significance of findings (eg, citation references), extent of research translation (eg, adoption by policy or statute), dissemination (eg, publications in peer-reviewed publications, presentations at professional meetings), and other indicators.**

The CPH measures research productivity through the amount and source of external funding, collaboration, publications, presentations and citation references. In addition, student involvement in projects and publications and student funding is measured. For a complete list of outcome measures see Criterion 1.2.c.

**Table 3.1.d: Measurable Outcome Objectives for Research FY2015 to FY2017**

Outcome Measures	Target	FY2015	FY2016	FY2017
<b>Awards</b>				
Total (#)	176	155	182	235
Total funding (\$)	50,655,808	50,871,530	41,880,642	38,085,140
<b>Awards by source</b>				
NIH (#)	28	24	20	29
NIH total funding (\$)	22,720,244	19,221,378	18,387,353	12,834,888
Other federal (#)	41	38	43	50
Other federal total funding (\$)	14,951,239	14,215,644	13,732,538	12,316,428
Non-federal (#)	108	93	119	156
Non-federal total funding (\$)	12,984,325	17,434,508	9,760,751	12,933,824
<b>Collaborations</b>				
Cross-departmental grants (#)	44	42	37	33
Cross-departmental total dollars (\$)	27,069,315	36,229,959	18,367,904	16,452,311
Cross-collegiate grants (#)	44	28	28	26
Cross-collegiate total dollars (\$)	27,366,792	31,788,413	16,795,498	15,008,787
External grants (#)	35	21	25	20
External total dollars (\$)	22,929,147	16,554,633	24,282,166	13,506,743
Collaborative grants with CPH PI (#)	69	62	81	45
Collaborative grants with CPH PI (% of All Grants)	50	40	45	19
Collaborative grants with CPH Co-I (\$)	30,713,223	NA*	32,329,708	23,680,991
Publications in peer reviewed journals	500	449	453	427
Number of times CPH-based publications referenced (using ISI Web of Knowledge reference tracking database) (#)	1000	802	989	1006
Publications in peer reviewed journals that include student authors (#)	Track	NA*	159	112
Funding support for full-time PhD students (%)	90	96	96	96
Students participating on funded research projects (#)	Track	NA*	170	200

(NA=Measure not tracked due to change in outcome measure with implementation of new FY2016 strategic initiative plan; data not available for undergraduate program which began in FY2017)

### 3.1.e A description of student involvement in research.

The CPH offers students space, freedom and stability necessary to engage in research. In addition to students participating on faculty led projects, students are also principal investigators. Student-led research makes a valuable contribution to our research portfolio and they use a battery of skills to create successful grant applications, build their team and manage their projects. CPH students with the drive and tenacity to conduct independent research learn to be persistent, confident and flexible. An example of a current student-led research project is Department of Health Management and Policy (HMP) Doctor of Philosophy (PhD) student and Principal Investigator Erin Mobley who is working on an Iowa Cancer Consortium-funded project to improve quality of life for young cancer patients.

The CPH provides a number of services and programs to engage its graduate students in research. These include:

- Proper training on research ethics: Master of Science (MS) and PhD students are required to complete CPH:7270 Principles of Scholarly Integrity or if a Department of Biostatistics (BIO) MS or PhD student complete BIOS:7270 Scholarly Integrity in Biostatistics.
- Opportunities for students to showcase their research during CPH Research Week, with awards made in several categories.
- Pilot funding opportunities for student-led research offered by six CPH centers.

Departments also facilitate their graduate student's research experience. Examples include:

**Department of Biostatistics:** BIO graduate students serve as consultants in the department's Biostatistics Consulting Center. This unit provides biostatistical consulting to health science researchers at the University. Students work with investigators during all phases of health science research, including proposal development, study design, data forms or questionnaire development, data entry, data management, statistical analysis and report preparation.

**Department of Community and Behavioral Health:** CBH graduate students are involved in quantitative, qualitative and translational research in diverse communities. They develop skills such as interacting with community members and organizations, data entry and analysis, writing papers and technical reports, preparing manuscripts for publication and planning and delivering conference presentations. For example, in the Prevention Research Center for Rural Health, students learned participatory research principles by working on an intervention study in rural restaurants.

**Department of Epidemiology:** EPI students are active in internships, preceptorships and graduate research assistantships and several students have converted these activities into posters, presentations and published articles. Master of Public Health (MPH) students can complete an internship in surveillance with the Iowa Cancer Registry or the Iowa Center for Congenital and Inherited Disorders. Students also participate in research activities associated with injury and trauma data using the Iowa State Trauma Registry through the Iowa Injury Prevention Research Center and claims-based data through the Health Effectiveness Research Center.

**Department of Health Management and Policy:** Students in HMP have many opportunities to conduct research using large-scale health care databases. For example, The Health and Health Services Use in the Health and Retirement Study & Asset and Health Dynamics among the Oldest Old project looks at the health and health services of older adults. Graduate research assistants

have the opportunity to assist with data preparation, linking functions required to abstract and restructure the Medicare claims files and analytic tasks associated with interview data. PhD students complete independent research as part of dissertation training, often resulting in published manuscripts. The HMP Doctoral Student Data Analysis Project, funded by the Iowa Healthcare Collaborative, also supports a graduate research assistant to assist with data analysis for the Iowa Healthcare Collaborative Report.

**Department of Occupational and Environmental Health:** In OEH many centers have student research assistantships written into their training core. The Environmental Health Sciences Research Center and the Iowa Superfund Research Program provide full stipends and tuition for PhD students. The Heartland Education and Research Center supports MS and PhD students. The Minority Health and Health Disparities International Research and Training Program provides opportunities for students who are from populations with health disparities to pursue careers in basic sciences and biomedical, clinical and behavioral health research. These students broaden their training to encompass international health issues, participate in collaborative research initiatives with the US and international faculty and seek innovative approaches to address problems and/or hindrances associated with closing health disparities gaps. Research training opportunities are in Poland, Slovakia, Romania, China, and The Gambia.

The CPH is developing its research opportunities for undergraduate public health students. Current opportunities include:

- Two research-related courses for undergraduate students: (1) CPH:3999 Undergraduate Research Experience in Public Health provides the opportunity for hands-on undergraduate involvement in scholarly public health research activities under the supervision of faculty, research staff, postdocs, and/or graduate students, and (2) CPH:4990 Mentored Independent Undergraduate Research in Public Health provides the opportunity to conduct an independent research project under the supervision of a faculty mentor. Both of these courses fulfill Bachelor of Arts (BA) and Bachelor of Science (BS) in public health student requirements for experiential learning.
- The Health Equity Advancement Lab provides opportunities for students to be involved in community-engaged public health research with communities who experience health inequities. There are currently ten undergraduate students involved in this program.
- Undergraduate students can also apply to the Minority Health and Health Disparities International Research and Training Program described above.

### **3.1.f Assessment of the extent to which this criterion is met.**

This criterion is met.

#### ***Strengths***

- UI and CPH infrastructures support the development of successful research project proposals and compliance standards.
- Reinvestment of F&A funds supports innovative, collaborative research development.
- CPH has a large, diversified funding portfolio and is productive in grant awards.
- CPH faculty conduct rigorous, interdisciplinary and high impact research.
- A large percentage of CPH research engages relevant communities.
- Research centers provide additional infrastructure and opportunities to nurture rich cross-disciplinary intellectual communities.

- Research is tracked through informative benchmarks that help align support activities.
- CPH Research Council is an active participant in CPH governance.

***Weaknesses***

- Small number of faculty in some research areas.
- Research space is spread over a number of different locations, posing logistical and collaborative challenges.

***Plans***

- The CPH Research Office will continue to nurture junior faculty and provide needed infrastructure to support a diverse research portfolio.
- The undergraduate program director will collaborate with the research office to provide opportunities for undergraduate students.
- The CPH will work with UI Administration on identifying adequate space for research that is conducive to collaboration.

**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.

**3.2.a Description of the school's service activities, including policies, procedures and practices that support service. If the school has formal contracts or agreements with external agencies, these should be noted.**

The CPH seeks to strengthen the communities it serves through the development and expansion of innovative education, research, practice programs and service projects. The critical importance of service to the CPH is reflected in our mission, vision and values. CPH faculty, staff and students provide critical public health expertise to all of Iowa's 99 counties and beyond. Consistent with the principles of public health, the CPH is committed to collaboration and actively seeks to engage partners beyond our campus.

**CPH service activities include:** (1) Service related to internal governance (e.g., service on university, college and departmental committees); (2) Professional service (e.g., service on professional boards and committees, review panels, study sections) and (3) service that contributes to the advancement of public health practice (e.g., presentations to the lay public on public health or service on local, state and national public health practice and policy committees).

Examples of main categories of service activities are described below. CPH faculty members reported more than 600 service activities during the past three years.

**Consulting/Technical Support:** CPH faculty provide consulting services and technical support to a diverse group of partners at the local, state and national levels. Areas of expertise include biostatistics, ergonomics, work related diseases, environmental protection, evidence-based public health, workplace violence prevention, clinical trials, program evaluation and tobacco cessation and screening.

**Reviewer:** CPH faculty serve as reviewers for numerous professional journals, editorial boards, grants, study sections, external reviews for promotion and tenure, accreditation site visits and national student fellowship applications. The wide range of capacities in which CPH faculty serve as reviewers illustrates the depth and breadth of expertise across the college.

**Organizational Involvement:** CPH faculty engage in service activities across many different types of organizations at the local, state, national and international levels. For example, faculty serve on several IDPH committees including the Public Health Advisory Council, Trauma Advisory System Council, Injury Registry Committee, and Rural Health and Primary Care Advisory Committee. Faculty also serve in leadership and member roles for professional associations at the state and national levels such as the Environmental Protection Agency Science Advisory Board and non-profit organizations such as the American Heart Association. Faculty are also very involved in our local community serving as volunteers for the Crisis Center, Food Bank, Mobile Medical Clinic, Free Medical Clinic, and Animal Shelter, to name but a few.

In addition to individual faculty service, the college is committed to engaging in service and outreach activities. For example, in 2011 the college's Business Leadership Network (BLN) was formed and began reaching out to communities to hold discussions about local public health needs as seen through the eyes of business, industry, community, education and healthcare leaders within communities across Iowa. The BLN convenes a series of community forums across Iowa, taking

CPH faculty, staff and students on the road to engage communities in public health-related conversations around community-identified public health issues. In 2015, A BLN Community Grant Project Program was implemented to support community-led projects, programs and activities that build collaborations and support community well-being. Seven projects were supported in 2017; two examples include: “Athletics for Education and Success”, a project to provide low-income, at risk and under-served adults and families safe and affordable fitness and social activities and the “Carry-on Bags” project which seeks to determine the most nutritional and effective food items for school children in their program to provide security for children outside of school hours. For more information about this program see: <https://www.public-health.uiowa.edu/bln>

The CPH has formal contracts or agreements with the following agencies and organizations that include a service component:

- Iowa Department of Public Health
- State Hygienic Laboratory
- State Public Policy Group

Additionally, the CPH has ongoing and longstanding relationships with Iowa public health and health care organizations in which students complete internships and practica experiences. Because of the longstanding nature of these relationships and the culture of the state, formal Memorandums of Understanding (MOU) have not been utilized by our practice partners to-date.

### **3.2.b Description of the emphasis given to community and professional service activities in the promotion and tenure process.**

Service is part of tenure-track and clinical-track faculty members’ portfolios when being reviewed for tenure and/or promotion. CPH expectations are for faculty members to demonstrate increasing involvement and leadership in service as they progress in rank. The nature of the faculty member’s service activities will depend on their area of specialization. The UI Faculty Handbook (<https://provost.uiowa.edu/faculty-handbook-service-opportunities>) and CPH Faculty Handbook (<https://www.public-health.uiowa.edu/faculty-handbook/>) explicitly discuss service expectations. Each faculty member is expected to participate in the governance of their department and to contribute service to the department, to the college, to the university, and to the discipline or profession. As discussed in the CPH Faculty Handbook, typically 25% of a tenured or tenure-track faculty member’s effort is directed to service activities. Clinical-track faculty have individualized portfolios that include similar types of service that are expected of tenure-track faculty (averaging approximately 20% effort).

The CPH Faculty Service Award recognizes the critical role faculty service plays in the effective functioning of the College. The purpose of this annual award is to recognize faculty members who have provided extraordinary service to the college, department, university and/or professional service. Additionally, we have recently implemented a CPH Faculty Mentor Award, which recognizes the important service aspect of senior faculty mentoring of junior faculty.

### **3.2.c A list of the school’s current service activities, including identification of the community, organization, agency or body for which the service was provided and the nature of the activity, over the last three years. Projects presented in Criterion 3.1 should not be replicated here without distinction. Funded service activities may be reported in a separate table. Extramural funding for research or**

**training/continuing education grants should be reported in Table 3.1.1 (research) and 3.3.1 (funded workforce development), respectively.**

A listing of service activities by faculty member is located in ERF 3.2.c.1. A list of sponsored service activities by principal investigator with student participation indication is located in ERF 3.2.c.2. Several of our centers not included in Table 3.2.c.1 make significant contributions to our service activities. These centers include:

- Environmental Health Sciences Research Center (<https://www.public-health.uiowa.edu/ehsrc/>)
- Great Plains Center for Agricultural Health (<https://www.public-health.uiowa.edu/gpcah/>)
- Healthier Workforce Center for Excellence (<https://www.public-health.uiowa.edu/hwcmw/>)
- Injury Prevention Research Center (<https://www.public-health.uiowa.edu/iprc/>)
- Prevention Research Center for Rural Health (<https://www.public-health.uiowa.edu/prc/>)

**3.2.d Identification of the measures by which the school may evaluate the success of its service efforts, along with data regarding the school’s performance against those measures for each of the last three years.**

**Table 3.2.d Measurable Outcome Objectives for Service FY2015 to FY2017**

Outcome Measures	FY2015	FY2016	FY2017
Departmental, collegiate and university committees on which primary faculty serve (#)*	NA	415	540
Primary faculty state, national and international* leadership activities (#)	NA	191	195

NA=Measure not tracked due to change in outcome measure with implementation of FY2016 strategic initiative plan

**3.2.e Description of student involvement in service, outside of those activities associated with the required practice experience and previously described in Criterion 2.4.**

CPH students are encouraged to participate in a wide range of organized service activities some of which are arranged by CPH student organizations, by individuals, or as part of service learning classes or internships. Outside of organized student activities, many CPH students volunteer at non-profit organizations and agencies such as the University of Iowa Hospitals and Clinics, Planned Parenthood, Head Start, Mercy Hospital, Veterans Affairs Medical Center, Mobile Health Clinic, Free Medical Clinic, Ronald McDonald House, Iowa City Hospice, Friends of the Johnson County Humane Society, Shelter House, Habitat for Humanity, and Boys and Girls Clubs of America, to name but a few.

In order to highlight the importance of service to the college, beginning in the Fall 2016 the CPH New Graduate Student Orientation program includes a service project component. Incoming graduate students have the opportunity to work on projects at a variety of local community organizations including Neighborhood Center, Habitat for Humanity, Salvation Army, United Action for Youth, Local Foods Connection, ReStore, UI Food Pantry, Iowa City Free Medical Clinic, Crisis Center and Field to Family.

Students have the opportunity to engage in service learning projects for academic credit. Service learning project examples include:

- CBH:6220 Health Communication Campaigns had students partner with the City of Iowa City and community organizations to design, implement and evaluate a theory-driven health

campaign intervention. This included not only media, but also culminated in a city-wide demonstration project of a Bike Boulevard.

- CBH:6205 Designing and Implementing Interventions included students designing three intervention plans to be used in the Active Ottumwa intervention project to encourage all adults to be more active.
- OEH:5410 Occupational Safety students perform consulting services for local businesses. In 2016, 20 students provided this service to 16 businesses. Each business received a new or revised emergency action plan, complete with evacuation maps and recommendations for where to post the plans for employees and customers. In addition, students developed safety interventions for two sites.

Undergraduate public health students also have the opportunity to participate in service learning via several mechanisms including CPH:3750 Undergraduate Service Learning in Public Health and CPH:4755 International Perspectives: Xicotepec. Both of these courses serve as ways for BA/BS public health students to fulfill the undergraduate public health experiential learning requirement.

### **3.2.f Assessment of the extent to which this criterion is met.**

This criterion is met.

#### ***Strengths***

- The college has a strong culture of service.
- The college hosts activities that facilitate student, faculty and staff involvement in service.
- CPH promotes outreach and service through its BLN program.

#### ***Weaknesses***

- The demands of our faculty for research and teaching sometimes leave limited time for involvement in service activities.
- Although there is a system in place to capture service activities via the Academic and Professional Record (APR) system, not all faculty consistently record their service activities in the system.
- There is not a consistent mechanism for capturing student involvement in service.

#### ***Plans***

- As part of annual reviews, work with departments and faculty to ensure service data are collected and entered into the APR
- Work with student organizations to better capture information on service activities.
- Foster collaboration between undergraduate and graduate students on service activities.

**3.3 Workforce Development.** The school shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.

**3.3.a A description of the ways in which the school periodically assesses the continuing education needs of the community or communities it intends to serve. The assessment may include primary or secondary data collection or data sources.**

The UI CPH works closely with a range of partners including state and local health departments, associations, community-based organizations, health care organizations, businesses and alumni to obtain input on the continuing education needs of the workforce. Feedback is received through a variety of mechanisms including end of course/training evaluations, advisory committees and boards, surveys, focus groups and interviews with key stakeholders. The dual role of the associate dean for academic affairs who also serves as the director of the Institute for Public Health Practice (IPHP) and the Health Resources and Services Administration (HRSA) funded Midwestern Public Health Training Center (MPHTC), facilitates communication regarding results of workforce assessments. These assessments inform the college's instructional programs, and specifically the MPH curriculum. Workforce development is also included as part of the college's strategic work plan to ensure ongoing assessments are utilized to inform continuing education and academic programming. The examples below illustrate the kinds of assessments conducted by the CPH:

As part of its ongoing assessments, MPHTC collaborates with IDPH's Regional Health Consultants to identify ongoing training priorities from local health departments. One priority area identified was having an orientation for new local Board of Health members. MPHTC created a video, "Improving the Health of the Community: My Role as a Board of Health Member," as part of this orientation. In meetings with local public health department administrators, the need for information about Public Health Accreditation Board (PHAB) continues to be a priority. To increase general knowledge and understanding of PHAB, MPHTC in collaboration with its practice partners, created *12 Domains to PHABulous* as a video resource for those interested in pursuing PHAB accreditation. MPHTC also collaborates with its partners on various workshops including an overview of PHAB, strategic planning, and performance management. Finally, MPHTC works with local public health departments to create and implement workforce development assessments in support of PHAB accreditation. The results of the assessments guide workforce development training plans. They also are valuable in helping to identify training priorities across agencies.

The IIPHRP was contracted by the IDPH in October 2016 to conduct a public health data needs assessment to better understand the needs of stakeholders and the role of the Iowa Public Health Tracking Portal. A mixed methods assessment that engaged multiple stakeholders, from multiple sectors through a combination of on-line surveys, focus group sessions, individual interviews and portal analytics was conducted. The results of this assessment include short term and long-term recommendations to guide further development and resource assignment to the public health data needs of stakeholders. One outcome of the assessment was the development of a training on evidence-based public health that was delivered to individuals working at the state and local public health departments.

The Heartland Center for Occupational Health and Safety is a National Institute for Occupational Safety and Health (NIOSH)-funded Education and Research Center serving Iowa, Kansas, Missouri, and Nebraska. The Center provides continuing education for current occupational health and safety professionals, collaborating with partners throughout the region in order to reach

practitioners with high quality, highly relevant, carefully targeted conferences and events. At each event, the Heartland Center provides the audience with an evaluation form and a needs assessment form. The needs assessment form focuses specifically on what kind of instruction participants need in order to continue developing their professional skills. Faculty and staff use the data from the needs assessment in planning additional programming that directly responds to regional needs. The Center also periodically sends electronic surveys to participants from previous continuing education programs in order to help determine the content of the following year's program. For example, the content for Hawkeye on Safety 2017, an occupational safety and health conference focusing on the needs of professionals in the building trades and facilities management, was chosen partly on the basis of a survey of Hawkeye on Safety 2016 participants.

Finally, the Heartland Center assesses the continuing education needs of occupational health and safety professionals within its region by including active practitioners and relevant stakeholders in the planning committee for each event. The committees for the center's conferences and classes include occupational health nurses, occupational medicine physicians, researchers in every major fields of occupational health and safety, representatives from state government, owners and employees of private sector companies, and leaders from organized labor. The Heartland Center uses all of these inputs to choose and structure content appropriate to the unique needs of each audience for its annual spring Occupational Health Symposium, fall Hawkeye on Safety conference, and winter Case Management Seminar. The Heartland Center also provides the data gathered by these methods, as well as insights and advice based on these data, to the partners who provide events such as the Iowa Governor's Safety & Health Conference and the Central States Occupational and Environmental Medicine Association's two annual conferences.

**3.3.b A list of the continuing education programs, other than certificate programs, offered by the school, including number of participants served, for each of the last three years. Those programs offered in a distance-learning format should be identified. Funded training/continuing education activities may be reported in a separate table. Only funded training/continuing education should be reported in Table 3.3.1. Extramural funding for research or service education grants should be reported in Table 3.3.1 (research) or 3.3.2 (funded service), respectively.**

ERF 3.3.b.1 presents a list of training and continuing education activities for the past three years including title, delivery modality and number of participants. The CPH delivers training and education through a variety of delivery modalities including DVDs, in-person, live webcasts, archived webcasts, videoconferences, online programs (available anytime, anywhere), and blended learning (combination of above modalities). Sometimes the trainings are very interactive and hands-on with only a few individuals participating; at other times the conferences are very large with hundreds of people in attendance. Target audiences are also very diverse. Examples of groups who have participated in training and education activities are state and local public health department employees, health care providers, community health workers, first responders, child care providers, industrial hygienists, environmental safety managers, human resource professionals, ergonomists, organized labor leaders and trainers, risk management professionals, building trades workers, and facilities management workers. Between July 1, 2015 and June 30, 2017, more than 60,000 participants completed trainings offered by the college and its affiliated centers.

ERF 3.3.b.2 presents data on funded training/continuing education activities. In addition to those listed in Table 3.3.b.2, the following centers also contribute significantly to CPH's training mission and goals:

- Environmental Health Sciences Research Center (<https://www.public-health.uiowa.edu/ehsrc/>)
- Great Plains Center for Agricultural Health (GPCAH) (<https://www.public-health.uiowa.edu/gpcah/>)
- Healthier Workforce Center for Excellence (<https://www.public-health.uiowa.edu/hwcmw/>)
- Injury Prevention Research Center (<https://www.public-health.uiowa.edu/iprc/>)
- Iowa Superfund Research Program (<https://iowasuperfund.uiowa.edu/>)
- Prevention Research Center for Rural Health (<https://www.public-health.uiowa.edu/prc/>)

### 3.3.c Description of certificate programs or other non-degree offerings of the school, including enrollment data for each of the last three years.

The CPH currently offers five graduate certificate programs listed below. The college also offers an undergraduate certificate in public health.

The **Graduate Certificate in Public Health** seeks to improve public health practice and public health workforce capacity. The intended audience is individuals in public health practice, those in the workforce, and those interested in strengthening their knowledge and skills in basic public health competencies. The 18 semester hour (sh) program includes the six core courses of the MPH program. All 18 sh of certificate coursework is applied toward the MPH degree if the student has an undergraduate degree, is registered in graduate status for all of the certificate course work and is admitted to the MPH program. Additional details regarding the curriculum are available [http://www.public-health.uiowa.edu/academics/certificate\\_ph/](http://www.public-health.uiowa.edu/academics/certificate_ph/).

The **Graduate Certificate in Agricultural Safety and Health** is a 12 sh program that trains students to detect safety and health hazards to prevent farm-related illnesses and injuries. This certificate program is available for students in related health sciences, environmental science, or occupational health and safety programs who want to supplement other training with agricultural health information. Additional details regarding the curriculum are available at: <https://www.public-health.uiowa.edu/certificate-ash/>.

The **Certificate in Translational and Clinical Investigation** is a 12 sh program designed for clinicians who seek advanced training in clinical methodology and applied patient-oriented research skills. Certificate requirements include didactic course work, clinical research preceptorships, and clinical research seminar participation. Students in the certificate program must be practicing academic clinicians who have completed doctoral training. Additional details regarding the curriculum can be found at: <https://www.public-health.uiowa.edu/certificate-in-translational-and-clinical-investigation/>.

The **Certificate in Emerging Infectious Disease Epidemiology** is designed for a broad range of individuals, including graduate students, international public health professionals, laboratory professionals, physicians, nurses, veterinarians, and medical technologists who seek graduate-level training in emerging infectious diseases. The program requires 12 sh of graduate credit and provides basic information and training related to infectious diseases. Additional details regarding the curriculum can be found at: <https://www.public-health.uiowa.edu/certificate-in-emerging-infectious-disease-epidemiology/>

The **Certificate in Biostatistics** is a 15 sh program that provides all UI graduate students with a mechanism to recognize a substantial biostatistics emphasis in their coursework. Additional

information on the curriculum for the certificate can be found at: <https://www.public-health.uiowa.edu/certificate-in-biostatistics/>.

**Table 3.3.c Enrollment Data for Certificate Programs AY2016 to Summer/Fall 2017**

	AY2016	AY2017	Summer/ Fall 2017
Certificate in Public Health	20	16	8
Certificate in Agricultural Health & Safety	0	1	2
Certificate in Translational and Clinical Investigation	10	8	9
Certificate in Emerging Infectious Disease Epidemiology	0	1	6
Certificate in Biostatistics	13	8	6

### 3.3.d Description of the school’s practices, policies, procedures and evaluation that support continuing education and workforce development strategies.

CPH primarily offers training and continuing education programs through its IPHP. The IPHP is a central point of coordination for several related programs, projects, and centers, including the MPHTC. The main focus of the IPHP is strengthening the public health workforce in Iowa through training and education. IPHP collaborates with a range of partners within and outside the UI. To increase its reach, IPHP/MPHTC primarily focuses on distance based training and education. IPHP utilizes instructional design principles, based on adult learning theories, to develop interactive, competency-based trainings to maximize learning outcomes. Staff include instructional designers and developers; a creative media specialist with expertise in videography; evaluator; item/scenario writer; and instructional technology coordinator. Online trainings are housed on the Training-Source Learning Management System ([www.training-source.org](http://www.training-source.org)). Other sources that support training and continuing education are described below:

**National American Indian and Alaska Native Addiction Technology Transfer Center:** The primary mission of the Center is to provide educational opportunities for those interested in substance abuse treatment and counseling, including health professionals in primary prevention and treatment of substance abuse, focusing specifically on the American Indian and Alaska Native communities. Training topics include prevention and management of diabetes, basic counseling skills, essential substance abuse skills, and issues of cultural diversity in providing care to Lesbian, Gay, Bisexual, and Transgender (LGBT) individuals. The Center is funded by a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA).

**Great Plains Center for Agricultural Health:** The GPCAH is one of eleven agricultural education, research and prevention centers funded by NIOSH. The GPCAH conducts research, provides education and outreach to prevent work-related injuries and illnesses among agricultural communities, and disseminates practical tools to farmers, their advocates, and health care providers to improve awareness and adoption of best practices in safety and health. Recent projects include a safety outreach campaign regarding on-road crashes of agricultural equipment, an update of the Agricultural Medicine “Core Course” to add hands-on demonstrations and field experiences to support classroom learning, and contributing articles to the monthly “Safety Watch” column in *Iowa/Illinois/Missouri Farmer Today* (circulation to 147,000 households) in partnership with Iowa’s Center for Agricultural Safety and Health.

**Healthier Workforce Center of the Midwest:** The Healthier Workforce Center, a partnership of the UI CPH, Washington University in St. Louis and the Nebraska Safety Council, is one of six Total Worker Health Centers of Excellence funded by NIOSH. The vision of the Center is to create a safe,

healthy, and productive workforce. The Center's outreach program encourages the adoption of evidence-based practices that result in healthier employees (and families), fewer injuries, less absenteeism and underperformance, reduced employee turnover, and better return on investment.

**Heartland Center for Occupational Health and Safety:** The Heartland Center is a NIOSH-funded Education and Research Center serving the states of Iowa, Kansas, Missouri, and Nebraska by providing graduate training, continuing education, and outreach programs in the area of occupational health and safety. The Heartland Center offers graduate training programs in Industrial Hygiene, Occupational Medicine, Ergonomics, Occupational Epidemiology, Occupational Injury Prevention, and Agricultural Safety and Health. By training new occupational health and safety professionals, and by providing the training necessary to keep practicing occupational health and safety professionals current in their skills and knowledge, the Heartland Center helps to promote a safe and healthy workforce in Iowa and the surrounding region. In addition, the Center provides occupational health and safety information to lay workers through its Hawkeye on Safety events, quarterly newsletter, and other outreach efforts.

Evaluation activities play a critical role in measuring the impact of training and in the ongoing development of the College's continuing education efforts. Continuing education activities related to workforce development are evaluated at the program level, usually with satisfaction surveys, pre- and post-tests, and focus groups. For example, online courses developed by MPHTC include Kirkpatrick Level I and II evaluations. Level I measures participant satisfaction with the training and relevancy to one's job. Level II assesses knowledge gained from the training through pre- and post-tests. Additional data collected as part of the evaluation include information on learner demographics as well as how long it took to complete the course, course difficulty, satisfaction with course interactivity, time-to-completion of the course, if learners would recommend the course to others, and if they showed improvement regarding the course objectives after completing the course. Some trainings also utilize Kirkpatrick Level III evaluations that measure the change in behavior based on the individual's participation in the training program. In another example, the Heartland Center conducts evaluations of its continuing education programs to provide participants with an opportunity to rate and comment on the quality of each speaker, the quality of the event as a whole, their own learning at the event, and suitable topics for future events. Additionally, several months after an event, the Heartland Center follows up with participants, sending them an online post-event learning evaluation designed to measure the program's impact. This evaluation asks the students to describe their learning, as well as changes participants have actively made in their workplace or practice due to attending the continuing education event.

Centers providing professional development programs are reviewed by their respective funding agencies, and programs that offer continuing education credits must meet standards of the entity awarding continuing education credits.

**3.3.e A list of other educational institutions or public health practice organizations, if any, with which the school collaborates to offer continuing education.**

The CPH collaborates with a wide variety of academic and practice partners to offer training and continuing education to the practice community:

**Academic**

Center of Excellence in Pain Education, UI  
College of Nursing  
Des Moines University

Great Plains Public Health Leadership  
Institute, University of Nebraska Medical  
Center

Iowa Geriatric Education Center, UI College of Nursing  
Iowa State University College of Veterinary Medicine  
St. Louis University College of Public Health and Social Justice  
UI Center for Disabilities and Development  
UI Child Health Specialty Clinics  
UI Hardin Library for the Health Sciences

UI Health Sciences Colleges of Medicine and Nursing  
University of Arkansas Center for Pacific Islander  
University of Iowa Hospitals and Clinics  
University of Nebraska Medical Center College of Public Health  
Washington University, St. Louis  
Wichita State University, Department of Public Health Sciences

### **State Agencies**

American Public Health Association Region VII Affiliate-Missouri, Iowa, Nebraska, & Kansas  
Iowa Department of Human Services  
Iowa Department of Natural Resources  
Iowa Department of Public Health  
Iowa Department of Public Safety  
Iowa Homeland Security and Emergency Management Division

Kansas Department of Health and Environment  
Missouri Department of Health and Senior Services  
Nebraska Department of Health and Human Services  
New Mexico Department of Public Health  
UI State Hygienic Laboratory

### **Industry, Associations and Other Practice Partners**

American Association of Occupational Health Nurses  
American Diabetes Association  
Association of Public Health Nurses  
Bates County Memorial Hospital  
Butler County Memorial Hospital  
Centers for Disease Control and Prevention  
Cerro Gordo County Department of Public Health  
Diabetes Self-Management Education Task Force  
Gaining Ground Coalition  
Gateway Region YMCA  
Great Plains Quality Innovation Network  
Health Priorities, Inc.  
Health Priorities, Inc.  
Health Resources and Services Administration  
Iowa Action Coalition  
Iowa Alliance of YMCA  
Iowa Caregivers Association  
Iowa Chronic Care Consortium  
Iowa Counties Public Health Association  
Iowa Environmental Health Association  
Iowa Healthcare Collaborative

Iowa Medical Society  
Iowa Nurses Association  
Iowa Primary Care Association  
Iowa Public Health Association  
Iowa Society of Public Health Educators  
Johnson County, Kansas Department of Health and Environment  
Kansas Action Coalition  
Lincoln Diabetes Action Now Coalition  
Missouri Coordinating Body of American Association of Diabetes Educators  
Missouri Osteopathic and Arthritis Program  
National Association of Chronic Disease Directors  
National Association of School Nurses  
National Diabetes Prevention Program Leaders Workgroup  
National Network of Public Health Institutes  
Nebraska Safety Council  
Omada Health  
Omaha Diabetes Coalition  
Quality Improvement Organizations  
Regional Health Equity Council  
Robert Wood Johnson Foundation

### **3.3.f Assessment of the extent to which this criterion is met.**

This criterion is met.

#### ***Strengths***

- The college offers a large number of continuing education/professional development trainings.
- The workforce development programs offered through collegiate centers reflect needs expressed by practice partners.
- The majority of trainings are offered free of charge and many are available via distance learning methods to increase their accessibility by the workforce.

#### ***Weaknesses***

- Many collegiate continuing education activities are funded via federal grants. The uncertainty of continued funding for workforce development is of concern.

#### ***Plans***

- The collegiate centers that focus on workforce development will continue to look for opportunities to diversify funding portfolios.
- Opportunities for collaboration between centers will continue to be identified and encouraged.
- The college will continue to assess the needs of the workforce through a variety of mechanisms.

## 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, practice experience and research and instructional competence, is able to fully support the school's mission, goals and objectives.

**4.1.a A table showing primary faculty who support the degree programs offered by the school. It should present data effective at the beginning of the academic year in which the self-study is submitted to CEPH and should be updated at the beginning of the site visit. This information must be presented in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) FTE or % time, d) tenure status or classification\*, e) graduate degrees earned, f) discipline in which degrees were earned, g) institution from which degrees were earned, h) current instructional areas and i) current research interests.**

All primary faculty listed in Table 4.1. support the University of Iowa (UI) College of Public Health (CPH) graduate degree programs except for two faculty in Health Management and Policy (HMP) that hold extensive administrative appointments: Susan Curry (interim executive vice president and provost at the University of Iowa) and Charles Fluharty (founder, president and CEO of the national Rural Policy Research Institute). For easy reference throughout the self-study, primary faculty who also support our undergraduate program and/or Master of Health Administration (MHA) program are noted in *italics* in the Name column. CPH primary faculty curriculum vitae (CV) can be found in ERF 4.1.a.

**Table 4.1.: Current Primary Faculty Supporting Degree Offerings of School or Program by Department/Specialty Area – Fall 2017**

\*T=Tenured; TT=Tenure Track; NTT=Non-Tenure Track

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
<b>Biostatistics</b>								
Breheny, Patrick	Associate Professor	1.0	T	MS MS PhD	Biochemistry Biostatistics Biostatistics	Iowa State Univ Univ of Iowa Univ of Iowa	Biostatistics; Biostatistical methods	High-dimensional data; Computational statistics; Genomic and genetic data
Brown, Grant	Assistant Professor	1.0	TT	MS PhD	Biostatistics Biostatistics	Univ of Iowa Univ of Iowa	Biostatistics; Design and analysis of biomedical studies	Epidemic modeling; Bayesian inference; Statistical computing
Knute, Carter <i>(undergraduate program)</i>	Clinical Assistant Professor	1.0	NTT	MS PhD	Biostatistics Biostatistics	Univ of Iowa Univ of Iowa	Public health science; Biostatistics; Biostatistical methods	Predictive modeling; Model selection
Cavanaugh, Joseph	Professor and Head	1.0	T	MS PhD	Statistics Statistics	Montana State Univ Univ of California, Davis	Biostatistics; Biostatistical methods	Model selection; Time series analysis; Modeling diagnostics
Cho, Hyunkeun (Ryan)	Assistant Professor	1.0	TT	MS MS PhD	Applied Math/Statistics Statistics Statistics	State Univ of New York at Stony Brook Univ of Illinois, Urbana-Champaign Univ of Illinois, Urbana-Champaign	Longitudinal data analysis	Longitudinal and high-dimensional data; Non-parametric and mixed models
Coffey, Christopher	Professor	1.0	T	MS PhD	Biostatistics Biostatistics	Univ of North Carolina Univ of North Carolina	Clinical trials; Applied survival and cohort data analysis	Linear models; Power analyses; Adaptive designs; Comp effectiveness trials
Dawson, Jeffrey <i>(undergraduate program)</i>	Professor and Associate Dean for Faculty Affairs	1.0	T	ScD	Biostatistics	Harvard	Biostatistics; Biostatistical methods	Cardiovascular health; Clinical trials; Driving studies; Neuropsychology

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
Foster, Eric <i>(undergraduate program)</i>	Clinical Assistant Professor	1.0	NTT	MS PhD	Bioinformatics Biostatistics	Rochester Inst of Tech Univ of Iowa	Research data management; Biostatistics	Clinical trials; Time series analysis; Cluster analysis
Huang, Yuan	Assistant Professor	1.0	TT	MS PhD	Statistics Statistics	Renmin Univ of China Pennsylvania State Univ	Applied categorical data analysis	High-dimensional data analysis; Cancer genomics; Clinical trials
Jones, Michael	Professor	1.0	T	MA PhD	Mathematics Biomathematics	Univ of California, Los Angeles Univ of Washington	Survival data analysis; Theory of biostatistics; Biostatistics methods	Survival analysis; Semiparametric regression; Nonparametrics
Oleson, Jacob	Associate Professor	1.0	T	MA PhD	Statistics Statistics	Univ of Missouri, Columbia Univ of Missouri, Columbia	Biostatistics; Biostatistical Methods	Infectious disease modeling; Air quality mapping; Small area estimation
Sewell, Daniel	Assistant Professor	1.0	TT	MS PhD	Statistics Statistics	Univ of Arkansas Univ of Illinois, Urbana-Champaign	Biostatistical methods	Network analysis; Clustering; Bayesian methodology; Statistical computing
Smith, Brian	Professor	1.0	T	MS PhD	Mathematical Statistics Biostatistics	Univ of Texas, Austin Univ of Iowa	Biostatistical computing; Biostatistical methods	Biostatistics; Stats computing; Bayesian statistics; Biomedical informatics
Wang, Kai	Professor	1.0	T	MA MA PhD	Econometrics Economics Statistics	Nankai Univ Univ of Iowa Univ of Iowa	Biostatistical methods; Statistical genetics	Statistical genetics; Computational biology; Regularized regression
Zamba, Gideon	Associate Professor	1.0	T	MS PhD	Statistics Statistics	Univ of Minnesota Univ of Minnesota	Theory of biostatistics; Biostatistical methods; Biostatistical computing	Multivariate and computational statistics; Reliability and recurrence; Syndromic surveillance
Zimmerman, M. Bridget	Clinical Professor	1.0	NTT	MS MS	Statistics Statistics	Univ of the Philippines, Los Banos Iowa State Univ	Biostatistical consulting	Sample size and power; Longitudinal data analysis;

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
				PhD	Statistics and Industrial Engineering	Iowa State Univ		Logistic regression models
<b>Community and Behavioral Health</b>								
Afifi, Rema <i>(undergraduate program)</i>	Professor	1.0	TT	MPH PhD	Health Behavior & Health Educ Health Svcs Res	Univ of North Carolina, Chapel Hill St. Louis Univ	Health promotion; Social and behavioral foundation in public health	Community-based interventions; Tobacco control; Youth health; Mental health promotion
Ashida, Sato <i>(undergraduate program)</i>	Assistant Professor	1.0	TT	MM MM PhD	Music Music Therapy Public Health	Ohio State Univ Florida State Univ Ohio State Univ	Health promotion and disease prevention; Health promotion in an aging context	Roles of social networks and health-related behaviors; Aging
Askelson, Natoshia <i>(undergraduate program)</i>	Assistant Professor	1.0	TT	MPH PhD	International Hlth/Hlth Educ Comm & Beh Hlth/Hlth Comm	Emory Univ Univ of Iowa	Evaluation; Qualitative research for public health	Health policy and behavior change; Evaluation; Health communication
Baquero, Barbara <i>(undergraduate program)</i>	Assistant Professor	1.0	TT	MPH PhD	Health Promotion Health Promotion	San Diego State Univ Univ of California, San Diego	Community-based participatory research; Designing and implementing interventions	Community-based participatory health interventions; Social, cultural & behavior factors related to health outcomes
Campo, Michelle	Associate Professor	0.4	T	MA PhD	Sociology Communication	Ohio State Univ Michigan State Univ	Health communication	Health communication
Daniel-Ulloa, Jason <i>(undergraduate program)</i>	Clinical Assistant Professor	0.75	NTT	MPH PhD	Public Health Health Behavior Science	San Diego State Univ Univ of California, San Diego	Fundamentals of public health	Health equity and social justice in public health research and practice
Gilbert, Paul	Assistant Professor	1.0	TT	ScM PhD	Health and Social Behavior Health Behavior	Harvard Univ of North Carolina	Health equity, disparities and social justice; Advanced behavioral theories	Health equity/alcohol-related disparities; Participatory action research

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
Nothwehr, Faryle <i>(undergraduate program)</i>	Associate Professor	1.0	T	MA MPH PhD	Adult Education Epidemiology Health Behavior & Health Educ	Univ of St Thomas Univ of Minnesota Univ of Minnesota	Research methods; Health behavior and health education	Behavioral interventions; Behavioral epidemiology
Parker, Edith <i>(undergraduate program)</i>	Professor and Head	1.0	T	MPH DrPH	Health Behavior/ Health Education Health Behavior/ Health Education	Univ of North Carolina, Chapel Hill Univ of North Carolina, Chapel Hill	Health promotion and disease prevention	Community-based participatory interventions; Global public health
Skinstad, Anne-Helene	Clinical Professor	0.82	NTT	PsyD PhD	Clinical Psychology Psychology	Univ of Bergen, Norway Univ of Bergen, Norway	Prevention and early intervention--substance abuse and mental health;	Substance abuse disorders; Tech transfer issues in substance abuse education
Story, William <i>(undergraduate program)</i>	Assistant Professor	1.0	TT	MPH PhD	Health Beh/Health Educ Health Services Org and Policy	Univ of Michigan Univ of Michigan	Global maternal, newborn and child health; Global public health	Global health; Maternal child health; Community-based health interventions
<b>Epidemiology</b>								
Bao, Wei <i>(undergraduate program)</i>	Assistant Professor	1.0	TT	MD MS PhD	Prev Medicine Nutrition & Food Hygiene Nutritional & Molecular Epi	Huazhong Univ Huazhong Univ Huazhong Univ	Molecular epidemiology	Diabetes and obesity; Nutrition and physical activity; Molecular and genetic epidemiology
Burns, Trudy	Professor	0.6	T	MPH PhD	Biostatistics Biostatistics	Univ of Michigan Univ of Michigan	Genetics and epidemiology; Statistical methods in epidemiology	Risk factor screening and subclinical disease assessment; CVD risk factors
Carnahan, Ryan <i>(undergraduate program)</i>	Associate Professor	1.0	T	PharmD MS	Pharmacy Epidemiology	Univ of Iowa Univ of Iowa	Patient-oriented research data analysis; Epidemiology data analysis	Pharmacoepidemiology; Aging-related health issues

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
Charlton, Mary	Assistant Professor	1.0	TT	MS PhD	Epidemiology Epidemiology	Univ of Iowa Univ of Iowa	Public health data; Surveillance mechanisms and applications	Health services epidemiology; Cancer surveillance and epidemiology
Chorazy, Margaret <i>(undergraduate program)</i>	Clinical Assistant Professor	1.0	NTT	MPH PhD	Epidemiology of Microbial Diseases Epidemiology	Yale Univ Univ of Iowa	Epidemiology advanced methods; Infectious diseases; Public health science	Infectious diseases
Chrischilles, Elizabeth	Professor and Head; Pomerantz Chair in Public Health	1.0	T	MS PhD	Pharmacy Pharmacy	Univ of Iowa Univ of Iowa	Pharmacoepidemiology; Epidemiology advanced methods; Comparative effectiveness research methods	Pharmacoepidemiology; Comparative effectiveness; Health services epidemiology
Deshpande, Anjali	Clinical Associate Professor	1.0	NTT	MPH PhD	Epidemiology Epidemiology	Univ of Oklahoma Emory Univ	Epidemiology advanced methods; Introduction to public health	Workforce development in evidence-based public health; Epidemiology of aging
Hamann, Cara <i>(undergraduate program)</i>	Associate	1.0	NTT	MPH PhD	Epidemiology Injury Prevention	Univ of North Texas Univ of Iowa	Global road safety	Transportation safety; Injury epidemiology; Global injury prevention
Lynch, Charles	Professor	1.0	T	MS MD PhD	Gen Prev Med Medicine Epidemiology	Univ of Iowa Univ of Iowa Univ of Iowa	Epidemiology principles; Cancer epidemiology and control	Cancer surveillance and research; Agricultural health study
Pentella, Michael <i>(undergraduate program)</i>	Clinical Professor	0.5	NTT	MS PhD	Clinical Microbiology Infectious Disease	Thomas Jefferson University Univ of South Florida	Infectious diseases; Diagnostic microbiology; Public health laboratory	Antimicrobial resistance; Public health lab methods; Infectious disease prevention
Petersen, Christine	Associate Professor	1.0	T	DVM PhD	Veterinary Med Immune and Infectious Dis	Cornell Univ Harvard Univ	Zoonotic & infectious diseases; Public health lab techniques; Diagnostic micro	Zoonotic diseases

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
Robinson, Jennifer	Professor	1.0	T	MD MPH	Medicine Epidemiology	Univ of Minnesota Univ of Minnesota	Cardiovascular disease; Chronic diseases	Cardiovascular disease with focus on aging and women
Romitti, Paul	Professor	1.0	T	MS PhD	Community Counseling Preventive Med	Iowa State Univ Univ of Iowa	Advanced epidemiology methods; Data analysis with the computer	Congenital and inherited disorders
Ryckman, Kelli <i>(undergraduate program)</i>	Associate Professor	1.0	T	MS PhD	Applied Statistics Human Genetics	Vanderbilt Univ Vanderbilt Univ	Statistical methods; Genetics and epidemiology	Preterm birth; Prenatal and newborn screening; Biobanks
Snetselaar, Linda <i>(undergraduate program)</i>	Professor & Endowed Chair of Preventive Nutrition Education	0.50	T	MS PhD	Nutrition Health Science Education	Univ of Iowa Univ of Iowa	Nutrition epidemiology; Nutrition intervention;	Chronic diseases; Environmental nutrition education
Torner, James <i>(undergraduate program)</i>	Professor	1.0	T	MS PhD	Biostatistics Epidemiology	Univ of Iowa Univ of Iowa	Neuroepidemiology; Translational biomedicine; Evidence-based public health	Stroke and cerebrovascular disorders; Traumatic brain injury; Translational research
Wallace, Robert	Irene Ensminger Stecher Professor in Cancer Research	0.75	T	MD MSc	Medicine Epidemiology	Northwestern Univ State Univ of New York	Aging; Clinical epidemiology	Aging; Clinical trials; Preventive medicine
<b>Health Management and Policy</b>								
Arora, Kanika <i>(undergraduate program; MHA program)</i>	Assistant Professor	1.0	TT	MPA PhD	Public Administration Public Admin and Inter. Affairs	Cornell Univ Syracuse Univ	Health policy	Aging; Intergenerational relations; Program evaluation

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
Curry, Susan	Distinguished Prof & Interim Exec VP & Provost	0.0	T	MA PhD	Psychology Psychology	Univ of New Hampshire Univ of New Hampshire	No teaching	Health policy; Implementation of evidence-based practice guidelines
Fluharty, Charles	Clinical Professor	1.0	NTT	MA	Divinity	Yale Univ	No teaching	Rural health policy
Gentry, Dan (MHA program)	Clinical Professor	1.0	NTT	MA PhD	Health Services Administration Health Svcs and Policy Analysis	Medical Univ of South Carolina Univ of California, Berkley	Human resources; Leadership of healthcare organizations	Quality improvement; Accountable care; Transitions of care
Kaskie, Brian (undergraduate program; MHA program)	Associate Professor	1.0	T	MA PhD	Psychology Gerontology	Washington Univ Univ of Southern California, Los Angeles	Health policy; Federalism and health policy	Health policies related to aging populations; Health services use by older persons
MacKinney, A. Clinton (MHA program)	Clinical Associate Professor	0.65	NTT	MD MS	Medicine Administrative Medicine	Medical College of Ohio Univ of Wisconsin	Healthcare management	Rural health policy; Rural healthcare design; Physician payment
Montgomery, Ian (MHA program)	Clinical Associate Professor	1.0	NTT	MA	Health Administration	Univ of Iowa	Medical practice administration; Strategic planning, Marketing	Health system services reorganization
Mueller, Keith (MHA program)	Gerhard Hartman Professor and Interim Dean	1.0	T	MA PhD	Political Science Political Science	Univ of Wisconsin, Milwaukee Univ of Arizona	Health policy; US healthcare system	Delivery of healthcare in rural areas; Rural health policy
Shane, Dan (undergraduate program; MHA program)	Assistant Professor	1.0	TT	MA PhD	Economics Economics	Indiana Univ Indiana Univ	Analytics for health care management; Cost-effectiveness and decision analysis	Health economics; Health insurance; Health care reform

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
Uden-Holman, Tanya <i>(undergraduate program; MHA program)</i>	Clinical Professor and Associate Dean	1.0	NTT	MA PhD	Sociology Sociology	Univ of Iowa Univ of Iowa	Healthcare quality management; Essentials of public health	Workforce development; Quality improvement and patient safety
Vaughn, Thomas <i>(MHA program)</i>	Associate Professor	1.0	T	MHSA PhD	Health Svcs Administration Health Svcs Org and Policy	Univ of Michigan Univ of Michigan	Strategic planning and marketing; Health care ethics; Organizational behavior in health care	Leadership and quality; Org factors associated with effectiveness
Ward, Marcia	Professor and Interim Head	1.0	T	MA PhD	Clinical Psychology Clinical Psychology	Ohio State Univ Ohio State Univ	Primary data and mixed methods	Rural healthcare delivery; Telehealth
Wehby, George <i>(undergraduate program; MHA program)</i>	Professor	1.0	T	MPH PhD	Health Services Administration Health Mgmt and Policy	American Univ of Beirut Univ of Iowa	Health services research methods; Health economics	Health economics; Policy effects on health; Child health and development
Wright, Bradley <i>(MHA program)</i>	Assistant Professor	1.0	TT	MS PhD	Health Policy Health Policy and Management	George Washington Univ Univ of North Carolina, Chapel Hill	Healthcare organization and policy; Health policy analysis; US healthcare system	Access to health care for vulnerable populations; Health politics and policy
Zhu, Xi <i>(undergraduate program; MHA program)</i>	Associate Professor	1.0	T	MS PhD	Business Administration Sociology	East China Univ of Sci and Tech Univ of Minnesota	Health care management; Organizational behavior and theory in health care	Team design, process and effectiveness; Implementation and evaluation sciences
<b>Occupational and Environmental Health</b>								
Anthony, T. Renée <i>(undergraduate program)</i>	Associate Professor	1.0	T	MS PhD	Air Pollution, Rad/ Ind Hyg Occup Hyg, Exposure Assess	Univ of North Carolina, Chapel Hill Univ of North Carolina, Chapel Hill	Occupational health and safety; Quantitative exposure assessment	Controls to reduce occupational exposures; Noise exposure, assessment & control

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
Baker, Kelly <i>(undergraduate program)</i>	Assistant Professor	1.0	TT	PhD	Molecular Microbiology and Immunology	Univ of Maryland, Baltimore	Global water and health; Global public health	Global maternal and child health; Ecology and evolution of enteric disease transmission
Buikema, Brenda	Clinical Assistant Professor	0.2	NTT	MD MPH	Internal Medicine Occupational Medicine	Univ of Iowa Univ of Iowa	Occupational medicine	Occupational and environmental health; Pulmonary medicine
Casteel, Carri	Associate Professor	1.0	T	MPH PhD	Epidemiology Epidemiology	Univ of California, Los Angeles Univ of California, Los Angeles	Epidemiology of occupational injury	Workplace violence prevention; Worker safety; Older adult falls prevention;
Fethke, Nathan	Associate Professor	1.0	T	MS PhD	Biomedical Engineering Occupational and Environmental Health	Univ of Iowa Univ of Iowa	Occupational ergonomics	Evaluation of ergonomics interventions; Exposure assessment strategies
Field, R. William	Professor	1.0	T	MS PhD	Biology Preventive Medicine	Millersville Univ of Pennsylvania Univ of Iowa	Occupational and environmental health; Global water and health; Environmental toxicology	Insecticide exposure and health risks; Silica exposure; Radon measurement and health effects
Gerr, Fredric	Professor	0.6	T	MD	Medicine	State Univ of New York	Occupational health and medicine	Occupational medicine and epidemiology
Janssen, Brandi <i>(undergraduate program)</i>	Clinical Assistant Professor	1.0	NTT	MA PhD	Anthropology Anthropology	Univ of Iowa Univ of Iowa	Ag safety and health; Food justice;	Food systems; Environmental justice; Agricultural labor
Lehmler, Hans-Joachim <i>(undergraduate program)</i>	Professor	1.0	T	MS PhD	Organic Chem Organic Chem	Univ of Bonn Univ of Bonn	Global environmental health; Health, work and the environment	Environmental, chemical, and analytical toxicology; Environ food & water contaminants

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
Ludewig, Gabriele	Professor	1.0	T	MS PhD	Human Genetics Toxicology	Univ of Mainz, Germany Univ of Mainz, Germany	Global environ-mental health; Environ health and toxicology	Environmental health and toxicology
Nonnenmann, Matthew <i>(undergraduate program)</i>	Assistant Professor	1.0	TT	MS PhD	Ind Hygiene Ind Hygiene	Univ of Iowa Univ of Iowa	Industrial hygiene; Occupational hazards; Assessing physical agents hazards	Exposure assessment; Physical, chemical and biological exposures among workers and families
O'Shaughnessy, Patrick <i>(undergraduate program)</i>	Professor	0.75	T	MS PhD	Civil Engineering Environmental Engineering	Univ of Vermont Univ of Vermont	Statistics for experimenters; Air pollution control technology	Inhalation toxicology; Nanotechnology; Agricultural safety and health
Peek-Asa, Corinne <i>(undergraduate program)</i>	Professor & Associate Dean for Research	1.0	T	MPH PhD	Epidemiology Epidemiology	Univ of California, Los Angeles Univ of California, Los Angeles	Injury prevention and control; Research methods in disaster studies	Workplace violence; Domestic violence; Injuries in youth and elderly
Peters, Thomas	Professor	1.0	T	MS PhD	Environmental Engineering Industrial Hygiene	Univ of Florida Univ of North Carolina, Chapel Hill	Aerosol technology; Control of occupational contaminants	Mechanics of aerosols; Industrial ventilation
Robertson, Larry	Professor	1.0	T	MS MPH PhD	Microbiology Public Health Environmental Health Sciences	Univ of Florida Univ of Michigan Univ of Michigan	Toxicology; Chemical carcinogenesis	Cancer; Environmental health and toxicology
Rohlman, Diane	Associate Professor & Endowed Chair, in Rural Safety & Health	1.0	T	MA PhD	Experimental Psychology Experimental Psychology	Bowling Green State Univ Bowling Green State Univ	Rural health and agricultural medicine	Neurotoxic effects and neurological disorders from exposure to chemicals and other agents
Thorne, Peter	Professor and Head	1.0	T	MS	Biomedical Engineering	Univ of Wisconsin, Madison	Toxicology; Global environmental health	Air pollution; Environmental health and toxicology; Occupational

Name	Academic Rank/Title	FTE*	Tenure Status*	Graduate Degrees Earned	Discipline	Institution	Teaching Area	Research Interest
<i>(undergraduate program)</i>				PhD	Environmental Toxicology	Univ of Wisconsin, Madison		health and safety; Pulmonary diseases

\*Rounded to the nearest hundredth

**4.1.b If the school uses other faculty (adjunct, part-time, secondary appointments, etc), summary data on their qualifications should be provided in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) title and current employment, d) FTE or % time allocated to the school, e) highest degree earned (optional: schools may also list all graduate degrees earned to more accurately reflect faculty expertise), f) disciplines in which listed degrees were earned, and g) contributions to the school.**

All faculty listed below support our graduate degree programs except where it is noted that they provide undergraduate program support only. Per Council on Education for Public Health (CEPH) instructions MHA program support is not included in this table.

Name	Academic Rank/Title	FTE*	Title and Current Employer	Graduate Degrees Earned	Discipline	Teaching Area
<b>Biostatistics</b>						
Ten Eyck Patrick	Adjunct Assistant Professor	0.13	Assistant Director for Biostatistics and Research Design, UIHC Institute for Clinical and Translational Science	MS PhD	Statistics Biostatistics	Research Data Management
<b>Community and Behavioral Health</b>						
Kimbel, Jeanie	Adjunct Lecturer	0.75	MPH Practicum Course Director, UI College of Public Health	MA	Counseling & Human Develop	MPH Practicum Experience
Walkner, Laurie <i>(undergraduate program)</i>	Adjunct Lecturer	0.03	Deputy Director of Training and Education, Institute for Public Health Practice, UI College of Public Health	MA	Instructional design and Technology	Essentials of Public Health; Public Health Emergency Preparedness
<b>Epidemiology</b>						

Name	Academic Rank/Title	FTE*	Title and Current Employer	Graduate Degrees Earned	Discipline	Teaching Area
Dickson, James	Adjunct Professor	0.13	Professor, Department of Animal Science, Iowa State University	MS PhD	Dairy Science	Food Safety
Dvorak, Glenda	Adjunct Lecturer	0.03	Assistant Director, Center for Food Security and Public Health, Iowa State University, College of Veterinary Medicine	MS DVM MPH	Fisheries Biology Veterinary Med Public Health	Exotic and Emerging Diseases of Animals
Hostetter, Jesse	Adjunct Professor	0.04	Professor, Department of Veterinary Pathology, Iowa State University	DVM PhD	Veterinary Med Veterinary Path	Emerging Infectious Diseases of Animals
O'Connor, Annette	Adjunct Professor	0.13	Professor, Department of Veterinary Diagnostic and Production Animal Medicine, Iowa State University	MVSc DVSc	Veterinary Science Veterinary Science	Applied Veterinary Epidemiology/Biostatistics
Saftlas, Audrey	Professor Emeritus	0.13	Professor Emeritus, Department of Epidemiology, UI College of Public Health	PhD	Epidemiology	Writing a Grant Proposal
<b>Health Management and Policy</b>						
Natafqi, Nabil	Adjunct Assistant Professor	0.13	Postdoctoral Fellow, University of Maryland, Baltimore	PhD MPH	Hlth Svcs & Policy Public Health	Introduction to Public Health
Phillips, Kirk	Adjunct Associate Professor	0.25	Senior Health Informaticist, Iowa Healthcare Collaborative	MSW MS PhD	Social Work Development Epi/Hlth Informatics	Public Health Informatics
Weigel, Paula	Adjunct Assistant Professor	0.13	Assistant Research Scientist, UI College of Public Health	MS PhD	Management Hlth Svcs & Policy	Intro to US Healthcare System
<b>Occupational and Environmental Health</b>						
Bickett-Weddle Danelle	Adjunct Assistant Professor	0.03	Associate Director of the Center for Food Security and Public Health, Iowa State Univ	DVM MPH PhD	Veterinary Med Public Health Veterinary Microbio	Public Health Emergency Preparedness
Osterberg, David (undergraduate program only)	Clinical Professor Emeritus	0.04	Clinical Professor Emeritus, Occupational and Environmental Health, UI College of Public Health	MA MS MS	Economics Water Resources Mgmt Ag Econ	Climageddon: A Crisis for Public Health

Name	Academic Rank/Title	FTE*	Title and Current Employer	Graduate Degrees Earned	Discipline	Teaching Area
<b>Undergraduate Program</b>						
Williams, Kimberly** <i>(undergraduate program only)</i>	Adjunct Instructor	0.08	Undergraduate Program Advisor, UI College of Public Health	MA	Student Development in Post-Secondary Education	CPH Direct Admit Seminar

\*Rounded to the nearest hundredth

\*\*Appointment is in the UI University College

**4.1.c Description of the manner in which the faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if used by the school. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.**

One of the strengths of the CPH is the integration of practice perspectives into research, service and teaching. In addition to the tenure track, CPH appoints faculty who are practitioners through clinical-track and adjunct appointments. Besides having formal faculty appointments, practitioners serve as field placement preceptors for practicum and internship experiences, as guest lecturers to add the richness of educational experiences by sharing practice experiences, serve as preceptors and play critical mentoring roles to help students as they make the transition to practitioner.

**Tenure-Track Faculty:** Many of our tenure-track faculty have training and practical experience that is integrated into the research, service and teaching missions of the CPH. These areas include clinical pharmacy (Carnahan, Chrischilles), environmental engineering (O’Shaughnessy), occupational medicine (Buikema, Fuortes, Gerr), cardiovascular medicine (Robinson), internal medicine (Wallace), nutrition (Bao, Snetselaar), pathology (Lynch), health policy development (Mueller) and ergonomics (Fethke).

**Clinical-Track Faculty:** CPH clinical-track faculty have a wide range and depth of practice experiences. For example, Dr. Michael Pentella, retired director of the William A. Hinton State Laboratory Institute, has a clinical-track appointment in the Department of Epidemiology (EPI) and teaches Diagnostic Microbiology, Epidemiology of Infectious Diseases and Public Health Laboratory Techniques. Tanya Uden-Holman, Associate Dean for Academic Affairs and Director of the Institute for Public Health Practice, has a practice background in providing quality improvement training in healthcare organizations. She also directs the Midwestern Public Health Training Center. She is a clinical professor in HMP and teaches Essentials of Public Health and Healthcare Quality Management. Other clinical-track faculty members have expertise in areas such as addiction studies (Skinstad); agricultural safety and health (Janssen), biostatistical consulting (Carter, Zimmerman); evidence-based public health (Deshpande) and rural health (MacKinney).

**Adjunct Faculty:** CPH adjunct faculty have a wide range of practice experiences that enrich the CPH. For example, the Iowa Department of Public Health’s (IDPH) Medical Director and State Epidemiologist, Dr. Patricia Quinlisk, has an adjunct appointment in EPI and provides guest lectures and seminars. Faculty members from Iowa State University’s (ISU) College of Veterinary Medicine have adjunct appointments in the CPH and contribute to the Master of Public Health (MPH) program, specifically the MPH/Doctor of Veterinary Medicine (DVM) and MPH for Practicing Veterinarians.

**4.1.d Identification of outcome measures by which the school assesses the qualifications of its faculty complement, along with data regarding the performance of the school against those measures for each of the last three years.**

**Table 4.1.d: Measurable Outcome Objectives for Faculty Qualifications FY2015 to FY2017**

Outcome Measures	Target	FY2015	FY2016	FY2017
Publications where authors are from different departments/colleges	250	196	188	165

Outcome Measures	Target	FY2015	FY2016	FY2017
Publications in peer reviewed journals	500	449	453	427
Publications in peer reviewed journals that include student authors (#)	Track	NA	159	112
Number of times CPH-based publications referenced (using ISI Web of Knowledge reference tracking database) (#)	1000	802	989	1006
Percent of faculty presenting at CE/professional development activities (%)	Track	10	26	29
Departmental, collegiate and university committees on which primary faculty serve (#)	Track	NA	415	540
Primary faculty state, national and international leadership activities (#)	Track	NA	191	195
Nominations of faculty for national awards (#)	Track	1	3	3
Nominations of faculty for fellow status in professional or scientific societies (#)	Track	4	3	1
National Academy Members (NAM) (#)	7	3	3	3

NA=Measure not tracked due to change in outcome measure with implementation of new FY2016 strategic initiative plan

#### 4.1.e Assessment of the extent to which this criterion is met.

This criterion is met.

##### **Strengths**

- The breadth of disciplinary training within and among the departments continues to catalyze new knowledge.
- Strong collaborations with the practice community through clinical and adjunct appointments generate research and training with real-world relevance.
- Primary faculty are active in state, national and international leadership activities.
- There is a reasonably good balance of assistant, associate and full professors such that there is ample mentoring available for junior faculty.
- The number of times CPH-based publications are referenced has been increasing over the past three years and met the target in FY2017.

##### **Weaknesses**

- Publications in peer reviewed journals is lower than the target and has decreased slightly during the past three years.

##### **Plans**

- Continue mentoring junior faculty to ensure their research is disseminated via peer reviewed publications.
- Review and align current faculty expertise to meet 2016 CEPH criteria.
- Continue to identify adjunct faculty to bring their expertise into CPH's instructional programs.

**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.

**4.2.a A faculty handbook or other written document that outlines faculty rules and regulations.**

Rules and regulations are provided to faculty through the UI Operations Manual (<https://opsmanual.uiowa.edu/>), CPH Faculty Handbook (<https://www.public-health.uiowa.edu/faculty-handbook>) and CPH Manual of Procedure (ERF 1.5.c). These documents provide information on items such as faculty appointments, promotion and tenure requirements, teaching and research appointments, faculty rights and responsibilities, classroom procedures, grading and student records, student advising, general personnel policies and more general items such as UI and CPH governance, faculty development awards, getting around campus and other University resources. The UI Operations Manual, CPH Faculty Handbook, and CPH Manual of Procedure are comprehensively reviewed annually by the UI and CPH as appropriate and updated as needed.

**4.2.b Description of provisions for faculty development, including identification of support for faculty categories other than regular full-time appointments.**

The UI and CPH are committed to providing development opportunities for its faculty throughout their careers and offer them the following resources:

**Faculty Mentoring:** In 2012 the CPH implemented a formal mentoring policy to support junior faculty. Junior faculty identify mentors and develop a mentoring plan/memorandum of understanding (MOU) with their mentors to set expectations of all parties involved. These plans are completed by the end of the first semester of employment in the college and sent to the CPH Associate Dean for Faculty Affairs Office. This office also follows-up with junior faculty on an annual basis to ensure the mentoring plan is still effective and to be aware of any changes that need to be made. For more information on CPH faculty mentorship program is located in the CPH Faculty Handbook [<https://www.public-health.uiowa.edu/faculty-handbook/>] in 5. Under General Faculty Responsibilities/Policies/Resources).

**New Faculty Programs:** Each new faculty member is required to participate in a collegiate faculty orientation program. New faculty are scheduled to meet individually with the dean, associate deans, director of communications and external relations and department heads (outside their own department) shortly after they begin work. Topics reviewed during this orientation program include: an overview of the CPH and its strategic plan; policies regarding teaching, promotion, tenure, review and mentoring; an overview of collegiate committees, awards and the faculty handbook; an overview of the research mission of the CPH including its centers and institutes; overview of degree programs, syllabi requirements, course development and approval processes; competencies for academic and professional degree programs; teaching resources, student advising and mentoring; Family Educational Rights and Privacy Act (FERPA) requirements; course evaluations; facilities; finance/accounting; human resources; information technology; external fundraising; alumni relations; publications; and an overview of the other four departments in the CPH.

The CPH has extensive resources available to faculty to facilitate their success in research. These include: a grant writing club, support to identify funding opportunities, external proposal and mock reviews and grant preparation support. The CPH specifically supports new faculty in their research programs through the New Faculty Research Award, Junior Faculty Research Opportunity Award and the Faculty Development Grant for Global Public Health Research. These awards assist newly appointed faculty with primary appointments in the college to advance their research. For more information about these awards see <https://www.public-health.uiowa.edu/faculty-funding-opportunities/>.

In addition, new faculty are encouraged to attend the UI's annual new faculty orientation session that covers a wide range of UI resources. Topics covered include benefits, university policies and procedures, commitment to diversity, commitment to education, promotion and tenure, tenure and clinical track appointments, new mid- to late-career faculty, research and other university resources. The UI supports a New Faculty@UIOWA Program through the Provost's Office that offers faculty development workshops, faculty writing groups, new faculty newsletter and other resources. The Center for Teaching is a resource for faculty and offers expertise in teaching in relation to cultural differences, visual and vocal instruction, teaching evaluation and assessment.

**Department Executive Officer (DEO)/Academic Administrator Programs:** In addition to new faculty, the CPH and UI also support faculty who are new to DEO or administrator positions through a workshop series at the UI that covers topics such as time management, budgeting and communication and through a Big Ten Alliance Academic Leadership Program. The Big Ten Alliance Academic Leadership Program is an intensive professional development program that develops the leadership and managerial skills of faculty who have demonstrated exceptional ability and academic promise. This program consists of three seminars hosted by different Big Ten universities. Additionally, Big Ten Alliance Academic Leadership Program participants are required to participate in on-campus activities throughout the academic year (AY). UI participants are selected by the Provost Office through a competitive nomination process. Corinne Peek-Asa (Professor, Occupational and Environmental Health (OEH) and Associate Dean for Research) is currently in the program. The college also encourages administrators to participate in the national Executive Leadership in Academic Medicine program. Elizabeth Chrischilles (Professor and DEO, EPI) and Corinne Peek-Asa (Professor, OEH and Associate Dean for Research) have completed the program.

**Faculty Development:** The UI offers campus-wide faculty development workshops that cover topics related to technology and teaching, writing, social networking, resources to assist in securing research funding and time management in regards to tenure. Career development awards (a single semester of paid leave) are granted through a competitive program designed to encourage scientific inquiry, research, artistic creation, clinical/technical expertise and innovation in teaching. Faculty are also eligible for Instructional Improvement Awards that provide special funding to support instructional initiatives that will make exceptional and specific contributions to learning.

To facilitate participation, the CPH has also brought faculty development workshops to the college. Examples of faculty development workshops held during the past year include: Teaching the Novice: How Novices and Experts Approach Learning Differently; Microaggressions in the College Classroom; Facilitating and Evaluating Group Work in Your Courses; Using Rubrics to Grade Fairly and Efficiently; Creating an Effective Syllabus and Managing Learning Time In and Out of the Classroom.

Finally, the dean holds a monthly “Lunch with the Dean” where one faculty member from each department has the opportunity to highlight their activities and learn about activities in the other four departments. This interaction has proved fruitful in collaboration among departmental faculty in research and service projects and in advancing the education activities by emphasizing unique teaching tools.

#### **4.2.c Description of formal procedures for evaluating faculty competence and performance.**

The CPH and each department has a statement of procedures that describe the review of tenured, clinical track and probationary faculty members for a variety of purposes, including annual reviews and review for tenure or promotion. The department’s review procedures (located in the CPH Faculty Handbook [<https://www.public-health.uiowa.edu/faculty-handbook/>] in 3. Under Tenure Track and Tenured Faculty and in 3. Under Clinical Track Faculty) must conform to CPH procedures as described in the CPH Faculty Handbook (<https://www.public-health.uiowa.edu/faculty-handbook/>) and with University procedures outlined in the Operations Manual (<https://opsmanual.uiowa.edu/>) and the UI Faculty Handbook (<https://provost.uiowa.edu/faculty-handbook>).

**Tenured and Tenure-Track Faculty:** The CPH follows the UI’s policy for faculty promotion, tenure and review. The UI Operations Manual states the minimum qualifications faculty must meet for the ranks of assistant, associate and full professor and that teaching, research and other professional contributions must be considered when awarding tenure. Appointment to and progression through the academic ranks requires demonstrated competence and potential for continued growth as a scholar and teacher. The tenure decision has two basic elements: (1) an evaluation of the actual performance of the individual involved and (2) an evaluation of institutional needs (educational and fiscal).

The CPH and UI recognize the necessity for disciplines to customize guidelines for faculty promotion and tenure. For tenure-track faculty, these department-specific guidelines must state the criteria for promotion and performance expectations in the areas of teaching, research, and service. Tenure-track guidelines are approved by the respective department’s faculty, the CPH Executive Committee, and the UI Office of the Provost. The collegiate expectations for tenured and tenure track faculty are 25% teaching or two courses per AY, 25% service and 50% research. There are exceptions on a case-by-case basis that is determined by the DEO in consultation with the faculty member and dean.

Faculty undergoing the promotion and tenure process are evaluated by peers in their department (Departmental Consulting Group) and at the collegiate level by the Collegiate Consulting Group (CCG) which is a subgroup constructed by the Faculty Council Promotion and Tenure Committee. These consulting groups make promotion and tenure recommendations to the dean. The dean then forwards the final recommendation to the provost who forwards the UI’s recommendation to the State of Iowa, Board of Regents.

The DEO oversees the faculty review processes and ensures that the department meets the deadline for reporting on the review and making recommendations. The DEO informs the faculty member under review of the timeline and the materials the faculty member must submit. The DEO ensures that Departmental Consulting Groups are formed, where required by university, collegiate, or departmental procedures. As soon as the departmental review process is completed, the DEO communicates the results to the faculty member and to the dean. In all review processes, the DEO

or review committee shares the review report with the faculty member under review. The faculty member has the right to respond to the review, and that response becomes a part of the review file forwarded to the Office of the Dean.

There is also a collegiate policy on annual reviews. All non-tenured, tenure-track faculty are reviewed each year. As part of this review the DEO provides the faculty member with an assessment of his or her performance in teaching, scholarly or creative work and professional service. There is a third-year reappointment review that covers the entire period since the initial appointment. University policy states that this review will “take into account the faculty member’s proven teaching effectiveness and research productivity and potential. It also includes an evaluation of departmental, collegiate and university educational goals and a determination of the likely role of the faculty member in achieving such goals” (<https://opsmanual.uiowa.edu/human-resources/faculty/tenure-and-non-tenure-appointments>).

All tenure-track and tenured faculty are reviewed by their DEO on an annual basis. The review is intended to be evaluative (as part of the salary-setting process), as well as developmental. Faculty members are asked to provide an updated CV, copies of teaching evaluations from students and peer evaluations and a document summarizing accomplishments of the previous year and future goals. The DEO and faculty member meet to discuss these materials. For tenured faculty the DEO completes a form summarizing the review which is submitted in the UI’s electronic workflow system where the faculty member also has an opportunity to review. For tenure-track faculty the DEO submits a more detailed letter using the same process. Finally, there is a five-year peer review process for tenured faculty that includes a comprehensive review by a committee composed of a minimum of three tenured faculty peers in the same college as the faculty member undergoing review and at the same or higher academic rank appointed by the DEO or dean in consultation with the faculty member who is to be reviewed.

**Clinical-Track Faculty:** The CPH follows the UI’s policy for clinical-track faculty promotion, reappointment and review. Clinical faculty hold service positions through which they contribute to the service, teaching, and/or outreach missions of the University and CPH. The UI Operation’s Manual states the minimum qualifications faculty must meet for the ranks of assistant, associate and professor. Appointment to and progression through the academic ranks requires demonstrated competence and potential for continued growth as a practitioner and a teacher. The promotion and reappointment decision has two basic elements: 1) an evaluation of the actual performance of the individual involved; and 2) an evaluation of institutional needs (educational and fiscal).

The CPH and UI recognize the necessity for disciplines to customize guidelines for clinical-track faculty promotion and reappointment. Clinical track guidelines are approved by the respective department’s faculty, the CPH Executive Committee and the UI Office of the Provost. Departmental performance expectations for clinical-track faculty relating to promotion and reappointment are located in the CPH Faculty Handbook (<https://www.public-health.uiowa.edu/faculty-handbook> in 3. under Clinical Track Faculty). The collegiate expectations for clinical-track faculty are 60% of clinical or other supervision, program oversight and related teaching which includes teaching at least two courses per AY; 20% service and 20% for professional development. There are exceptions on a case-by-case basis that are determined by the DEO in consultation with the faculty member and dean.

Faculty undergoing the promotion process are evaluated by peers in their department (Departmental Consulting Group) and at the collegiate level by the CCG which is constructed by the

Faculty Council Promotion and Tenure Committee. These peers hold a higher rank than the candidate's current rank. These consulting groups make promotion recommendations to the dean. The dean then forwards the final recommendation to the provost who forwards the UI's recommendation to the State of Iowa, Board of Regents.

The DEO oversees faculty review processes and ensures that the department meets the deadline for reporting on the review and making recommendations. The DEO informs the faculty member under review of the timeline of the review and the materials the faculty member must submit. The DEO ensures that departmental consulting groups are formed, where required by university, collegiate or departmental procedures. As soon as the departmental review process is completed, the DEO communicates the results to the faculty member and to the dean. In all review processes, the DEO or review committee shares the review report with the faculty member under review. The faculty member has the right to respond to the review, and that response becomes a part of the review file forwarded to the CPH Office of the Dean.

The process described above is also used for clinical track faculty review.

#### **4.2.d Description of the processes used for student course evaluation and evaluation of instructional effectiveness.**

The CPH requires that evaluations of teaching be solicited from students in every course. The UI uses an online product from CollegeNET (known on campus as Assessing the Classroom Environment [ACE] Evaluations) for student course evaluations. ACE collects student opinions about an instructor and provides a standard set of summary results. The CPH has a standard set of questions it uses for lecture, seminar, online and team taught courses (ERF 4.2.d.1). Departments have the option of adding questions. In addition to being available to faculty and DEOs the associate dean for academic affairs has access to all ACE results. If the quality of teaching is determined to be low in a particular course, the associate dean for academic affairs will meet with the DEO to discuss the course in question. The DEO and/or associate dean for academic affairs then meet with the faculty member to discuss potential resources. Subsequent ACE evaluations are reviewed by the DEO and associate dean for academic affairs to ensure improvements have been made or if further training needs to be provided. UI resources available to assist faculty members with courses include the Center on Teaching.

Peer evaluation of teaching, including classroom observation and review of syllabi and other materials, is also a mechanism the College uses to evaluate teaching. In the past, peer evaluation of teaching was sporadic, especially for faculty at the associate or professor level. During AY2015 the CPH Executive Committee revised its peer evaluation policy to ensure more regular review of teaching. Assistant professors require one peer review per year for each course that they teach while those at the associate professor and professor level require one peer review be conducted annually. This form can be found at ERF 4.2.d.2.

The CPH Teaching Awards recognize faculty members who have directly enhanced and inspired student learning and professional development through their exceptional teaching and mentoring. Nominations for teaching awards can be made by any faculty, staff or student in the CPH. The CPH Awards Committee selects award winners each year in two categories. The first recognizes "up and coming" faculty members who have received their terminal degree during the past 10 years. The other recognizes faculty members who received their terminal degree more than 10 years ago.

In addition, the UI also recognizes a high level of teaching excellence with the President and Provost Teaching Excellence Award that is presented by the Council on Teaching each year to faculty at the University (Aquilino 2014). The CPH routinely nominates faculty for this extremely competitive award. The Hancher-Finkbine Medallion Award recognizes faculty who are exemplary in learning, leadership, and loyalty and is presented to one faculty member from one college each year on a rotating basis (Cavanaugh 2017). The Board of Regents Faculty Excellence Award is selected by the Board of Regents, State of Iowa and presented annually to faculty of the Regents institutions to honor faculty members for work representing a significant contribution to excellence in public education (Mueller 2016; Parker 2017).

#### **4.2.e Assessment of the extent to which this criterion is met.**

This criterion is met.

##### ***Strengths***

- CPH has well-defined policies and procedures for recruiting and supporting professional development and advancement of faculty.
- The CPH has supports in place for new faculty including mentoring plans.
- There are clear procedures to evaluate competence and performance of faculty, including teaching evaluation tools and processes and promotion and tenure processes.
- Attention has been devoted to more reliable peer review of teaching evaluations.
- Leadership development is taken seriously and resources are provided, especially to those with departmental and collegiate administrative responsibilities

##### ***Weaknesses***

- While there are strong career development resources for new faculty and leadership development resources for administrative leaders, there is room for improvement on leadership development resources for faculty at all ranks, especially for new associate professors whose service responsibilities usually increase soon after becoming tenured.

##### ***Plans***

- Continue to identify and host faculty development workshops as part of the Spotlight Series.
- Continue to monitor faculty satisfaction with the effectiveness of mentoring.
- Continue to promote faculty participation in leadership programs.

**4.3 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.

**4.3.a Description of the school's recruitment policies and procedures. If these differ by degree (eg, bachelor's vs graduate degrees), a description should be provided for each.**

The CPH recruits and admits a diverse and qualified student body without regard to race, creed, color, religion, national origin, age, sex, pregnancy, disability, genetic information, status as a United States (US) veteran, service in the US military, sexual orientation, gender identity or associational preferences. University policy can be found at: <https://opsmanual.uiowa.edu/community-policies/nondiscrimination-statement>.

**Undergraduate:** The CPH undergraduate program in public health maintains a collaborative partnership with the UI Office of Admissions. The undergraduate program director, with assistance from the undergraduate recruitment/admissions assistant, is responsible for coordinating recruitment procedures with the UI Office of Admissions.

Events sponsored by the UI Office of Admissions, such as recruitment fairs, regional recruitment events held off-campus and student visit days, play an important role in recruiting first-year students. Recruitment materials, such as post-mail, e-mail, brochures, UI Admissions websites and the CPH prospective undergraduate student website, are also vital to the recruitment mission. Students granted direct admission to the CPH are eligible to apply for CPH first-year scholarships. The scholarship application process is competitive and based on high school record and short essay responses.

To recruit returning/continuing UI students a standard admissions process is used. Standard admission is supported by the public health interest designation in the College of Liberal Arts and Sciences, the undergraduate certificate in public health, foundational public health courses (especially CPH:1400 Fundamentals of Public Health) and events co-sponsored by campus partners such as the Pomerantz Career Center and the Health Sciences Living Learning Community.

In AY2017-18, the college launched a current undergraduate student ambassador program with a mission of helping to support recruitment activities. Ambassadors contact prospective students via mail and email, participate in recruitment events, and run a social media campaign. They also assist with community outreach activities focused on K-12 students to introduce them to the field of public health.

**Graduate:** The CPH participates in Schools of Public Health Application Services (SOPHAS) where applicants can find information about CPH programs and apply for admission electronically. The CPH recruits a broad spectrum of students, from those who are just completing their baccalaureate degrees to individuals seeking a career change, to the public health workforce and health professionals. A variety of health professionals apply including nurses, pharmacists, physicians and veterinarians. Those involved in recruiting include faculty, graduate program coordinators and other staff, current students, alumni and the practice community. Some examples of methods used to recruit students can be found below.

**CPH Information Fairs:** The CPH offers several information fairs on campus. Two fairs are held specifically for students interested in pursuing the Undergrad to Grad (4/1 program), while the other events are for anyone interested in pursuing CPH Graduate Programs. Events are publicized through a mass email to all prospects, a mass email to UI students, targeted e-mails to selected UI majors, social media announcements and communications to health science advisors.

**Campus Visits:** All CPH departments invite students who have expressed interest through requesting information to visit campus. During campus visits prospective students have an opportunity to meet with the student affairs staff, faculty and current students to learn more about the academic opportunities, career prospects, admission process and funding. The CPH has some funding available to help support campus visits by prospective students.

**Small Group Sessions:** These sessions focus on specific undergraduate majors and are initiated by both CPH departments and undergraduate majors. Additionally, representatives from the MPH program meet at least once a year with graduate students in other colleges who might be interested in pursuing a combined degree.

**Graduate Fairs and other campus visits:** CPH representatives attend graduate fairs on the UI campus (e.g., health sciences career fair) and throughout the Midwest. Examples of graduate fairs attended include those at small liberal arts colleges in Iowa and across the Midwest, other Iowa Regents institutions and other nearby public universities.

**This is Public Health (TIPH) Fairs:** CPH staff attend three to four TIPH fairs per year. Regional TIPH fairs are a priority and other fairs are attended when appropriate.

**Admitted Student Day:** CPH offers admitted students a chance to visit the UI as a way to solidify their decision. Admitted students interact with staff, faculty and current students and discuss housing, financial aid, employment and scholarships. Students are offered a tour of both the CPH building and the UI campus.

**Graduate Student Ambassadors:** Formed in the summer of 2017, the graduate student ambassadors communicate and connect with prospective and admitted graduate students through social media channels such as Facebook, Snapchat and Twitter, and also participate in college recruitment events such student panels, visit days and student tours.

**Communications with prospective students:** The CPH continually strives to identify new effective ways to communicate with prospective students. One example is the UI communications tool called Dispatch. This system, along with the UI system MAUI (Made at University of Iowa, our student records system) Prospects, allows the CPH to standardize and track communications more thoroughly. The CPH website includes a "Request Information" link. Such requests are triaged to the appropriate CPH department/program to respond. Emails are routed to an admissions professional who, depending on the nature of the question, either answers the email or forwards it directly to the department/program.

**Funding:** Graduate assistantships, scholarships and fellowships are used to recruit prospective students. Funding is provided through CPH departments as well as the CPH Diversity and Inclusion Committee, MPH Program, and UI Graduate College. Funding opportunities are highlighted on the CPH, departmental and program websites.

**4.3.b Statement of admissions policies and procedures. If these differ by degree (eg, bachelor's vs graduate degrees), a description should be provided for each.**

**Undergraduate:** Admission to Bachelor of Arts (BA) and Bachelor of Science (BS) in public health degree programs is selective. Students may be admitted to the CPH either through direct admission or standard admission. At this time, admission is limited to fall semesters only. Admissions procedures are coordinated by the UI Office of Admissions for all undergraduate programs.

Direct admission is intended for graduating high school students coming directly to the UI as first-year students. If students meet the high school course requirements and present an ACT (American College Testing) composite score of 26 or higher and a high school GPA of at least 3.60, they will be admitted for direct admission to the college. Applicants who do not meet these criteria but present strong academic records will also be carefully considered. Applicants who meet course requirements and either the test score or grade-point average requirement are also considered for admission by a committee which includes the Director of Undergraduate Programs, Associate Dean for Academic Affairs, Undergraduate Advisor, and Undergraduate Recruitment Specialist. Students who are not directly admitted to the major may file a petition for reconsideration of direct admission. First-year students not admitted directly to the College of Public Health may be admitted to the College of Liberal Arts and Sciences as a public health interest student and can gain admission to the major through the standard admissions process during their first year. Applications by transfer students for direct admission to the public health major are not being accepted at this time.

Standard admission is for current students at the UI who are eligible to apply to the public health major if they have satisfied the prerequisites below. Students must meet the following requirements by the end of the semester in which they intend to apply completion of at least 12 sh at the University of Iowa; completion of CPH:1400 Fundamentals of Public Health or CPH:2099 Fundamentals of Public Health with a grade of B or higher; completion of CPH:1600 Public Health Science: Inquiry and Investigation in Public Health with a grade of B- or higher; and a cumulative GPA of at least 2.75 in all courses taken at the University of Iowa and in all college-level course work attempted. Students who are denied standard admission may for appeal the admission. Appeals are considered for admission by a committee which includes the Director of Undergraduate Programs, Associate Dean for Academic Affairs, Undergraduate Advisor and Undergraduate Recruitment Specialist.

**Graduate:** The UI Graduate College establishes policies regarding admissions into graduate degree programs at the UI. The standards maintained by the UI Graduate College and the CPH are applied to ensure that admitted applicants are well qualified and have a reasonable expectation of successfully completing their degree. Admission standards for doctoral programs are usually higher than those for admission to master's programs. In some degree programs, the number of qualified applications received exceeds the number of applicants who can be accommodated. In such cases only the most highly qualified applicants are offered admission. The number of spaces available in various departments is limited according to the availability of faculty and resources.

Our main objective is to select a highly qualified, diverse group of students who have training interests consistent with the degree programs we offer. Each department/program within the CPH establishes its own procedures for reviewing applications and selecting students. Applications are not evaluated on the basis of a single criterion, but on the basis of the entire application package. A student with deficiencies in one area may be admitted if all other components of his or her application are very strong. General admission criteria are listed below.

- A US bachelor's degree from a regionally accredited college or university, or an equivalent degree from another country as determined by the UI Office of Admissions;
- A minimum grade-point average of 3.00, or foreign equivalent as determined by the Office of Admissions;
- Scores on a nationally standardized examination. All academic and professional degree programs require the Graduate Record Exam (GRE). Scores from the Law School Admission Test (LSAT), Veterinary College Admission Test (VCAT), Medical College Admission Test (MCAT), Dental Admissions Test (DAT), Graduate Management Admission Test (GMAT) or Pharmacy College Admission Test (PCAT) can be substituted for the GRE for those applying for the MPH or MHA program;
- Applicants whose first language is not English and who do not hold a baccalaureate degree from an accredited college or university in the United States, the United Kingdom, Canada (except Quebec), Australia, or New Zealand must score at least 600 (paper-based), 250 (computer-based), or 100 (Internet-based) on the Test of English as a Foreign Language (TOEFL). Applicants who score 550-599 (paper-based), 213-249 (computer-based), or 81-99 (Internet-based) are required to take English fluency courses. Applicants who score below those ranges are not considered for admission;
- Letters of recommendation; and
- Statement of purpose that indicates intent and motivation for graduate study, and in the case of academic programs, research interests

Once an application is completed through SOPHAS, it is exported into UI's student record system. Official transcripts showing undergraduate degree conferral must be sent directly to the UI Graduate Admissions Office. Students pay a supplemental application fee to the UI.

Admission to the MPH subtracks, MS and PhD programs is controlled by the individual department to assure that the applicant makes contact with key faculty and staff and advising and mentoring relationships are set early on. For the MS and PhD degrees, departments review and recommend candidates for admission. Admission for MPH subtrack students is based on a common set of criteria but each department reviews and recommends candidates for admission. Departmental admission committees recommend students for admission to the MPH combined degree programs and professional MPH program. Recommendations for all MPH students are forwarded to the MPH Program Director for a final decision regarding recommendation for admission.

Some academic programs review applications as they arrive; others have scheduled review dates and evaluate applications only at that time. Once the department or program makes a recommendation regarding admission, the candidate receives an official letter of admission (or a request for additional information) from the UI Office of Admissions.

**4.3.c Examples of recruitment materials and other publications and advertising that describe, at a minimum, academic calendars, grading and the academic offerings of the school. If a school does not have a printed bulletin/catalog, it must provide a printed web page that indicates the degree requirements as the official representation of the school. In addition, references to website addresses may be included.**

The College has a variety of recruitment materials that include an overview brochure, as well as department and program-level overview brochures. The CPH also ensures that information for

students is readily available. The website provides detailed information for all prospective and current students. The links are provided below.

**Undergraduate:** Prospective Students: <https://www.public-health.uiowa.edu/prospective-students-undergraduate/>  
 Current Students: <https://www.public-health.uiowa.edu/current-students-undergraduate/>

**Graduate:** Prospective Students: <https://www.public-health.uiowa.edu/prospective-students-graduate/>  
 Current Students: <https://www.public-health.uiowa.edu/current-students-graduate/>

The UI General Catalog is online and includes information on the degree requirements and academic offerings of each department and program of the CPH. Links to the academic calendar and grading policies are also listed below.

**General Catalog:** <http://catalog.registrar.uiowa.edu/public-health/>  
**Academic calendar:** <https://registrar.uiowa.edu/academic-calendar>  
**Grading policies:** <https://www.public-health.uiowa.edu/student-handbook-undergraduate/>  
<https://www.grad.uiowa.edu/manual-part-1-section-vi-marking-system>

**4.3.d Quantitative information on the number of applicants, acceptances and enrollment, by concentration, for each degree, for each of the last three years. Data must be presented in table format.**

**Table 4.3.d: Applicants, Acceptances and Enrollment for AY2015-16, AY2016-17 and AY2017-to date\***

Degree	AY2015-16			AY2016-17			AY2017-to date		
	Total Apps	Total Admit	Total Matric	Total Apps	Total Admit	Total Matric	Total Apps	Total Admit	Total Matric
BA in Public Health	77	71	17	122	110	24	97	86	12
BS in Public Health	49	48	15	111	92	31	88	83	5
MPH Community and Behavioral Health	53	35	16	52	28	14			
MPH Epidemiology	58	34	10	46	24	15	1		
MPH Health Policy	13	8	3	18	9	6	3	1	
MPH Occupational and Environmental Health	11	8	2	9	5	2			
MPH Qualitative Methods	16	7	5	5	2	0			
MPH Nondepartmental	40	38	31	40	31	30	4	2	
MS Ag Safety and Health	2	2	2	3	3	2			
MS Biostatistics	50	18	7	29	12	4	1		
MS Community and Behavioral Health	1	1	0	0	0	0			
MS Clinical Investigation	5	4	3	5	3	3	2		
MS Epidemiology	18	13	6	16	9	5	1		
MS Industrial Hygiene	11	8	6	10	8	5			
MS Occupational and Environmental Health	6	5	3	2	2	1			
MS Health Policy	2	1	1	2	1	1			
PhD Ag Safety and Health	1	0	0	0	0	0			
PhD Biostatistics	34	9	7	36	12	5	2	1	
PhD Community and Behavioral Health	10	3	3	11	5	2	1		
PhD Epidemiology	26	10	7	30	7	4	4	2	

Degree	AY2015-16			AY2016-17			AY2017-to date		
	Total Apps	Total Admit	Total Matric	Total Apps	Total Admit	Total Matric	Total Apps	Total Admit	Total Matric
PhD Health Policy	8	4	4	27	9	4			
PhD Industrial Hygiene	7	4	1	4	1	1			
PhD Occupational and Environmental Health	9	4	3	10	6	6			

\* The data reported reflect the SOPHAS application cycle.

**4.3.e Quantitative information on the number of students enrolled in each specialty area identified in the instructional matrix, including headcounts of full- and part-time students and a full-time-equivalent conversion, by concentration, for each degree, for each of the last three years. Non-degree students, such as those enrolled in continuing education or certificate programs, should not be included. Explain any important trends or patterns, including a persistent absence of students in any degree or specialization. Data must be presented in table format.**

Data on student enrollment are presented in Table 4.3.e. Data for spring 2018 will be populated for the final self-study.

**Table 4.3.e: Student Enrollment Data - AY2015-16, AY2016-17, AY2017-18**

Degree & Specialization	AY2015-16		AY2016-17		AY2018 (summer, fall 2017)	
	HC	FTE	HC	FTE	HC	FTE
<b>BA/BS</b>	-	-	<b>32</b>	<b>31.33</b>	<b>74</b>	<b>72.9</b>
MPH Quantitative Methods	4	3.1	7	6.7	6	5.7
MPH Community and Behavioral Health	26	23.7	28	22.3	30	29.5
MPH Epidemiology	25	22.5	22	20.3	30	24.4
MPH Policy	6	5.3	6	6	10	8.2
MPH Occupational and Environmental Health	10	7.2	6	4.6	3	3
MPH General track, practicing vets, joint degree students	102	82.2	104	83.4	87	68.4
MS Biostatistics	11	10.1	16	15.2	13	12.7
MS Epidemiology	17	14.6	12	9.5	14	11.3
MS Clinical Investigation	10	6.3	11	7.2	11	6.2
MS Health Policy	2	2	3	3	3	3
MS Occupational and Environmental Health	3	3	5	4.3	4	3.3
MS Industrial Hygiene	12	10.9	15	14.1	15	12.3
MS Ag Safety and Health	5	3.2	5	4.1	4	3.1
MHA and EMHA	75	73.6	85	79.8	80	75.9
PhD Biostatistics	32	20.1	26	15.8	27	16.3
PhD Community and Behavioral Health	10	6.8	11	8.5	9	6.5
PhD Epidemiology	30	22.2	26	20.1	27	17.1
PhD Health Services and Policy	12	9.7	14	9.5	14	10.9
PhD Occupational and Environmental Health	9	3.6	10	6.2	14	9
PhD Industrial Hygiene	4	3.1	4	4	4	3.1
PhD Ag Safety and Health	3	3	2	1.3	2	1.3

NOTE: HC = Head Count

FTE = Graduate full-time students (9 credit units or more per semester); Undergraduates (12 credit units or more per semester)

PT = Part-time students

FTE = Full-time equivalent students

**4.3.f Identification of measurable objectives by which the school may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the school against those measures for each of the last three years.**

**Table 4.3.f: Measurable Outcome Objectives for Enrolling a Qualified Student Body FY2015 to FY2017**

Outcome Measures	Target	FY2015	FY2016	FY2017
Number of graduate student applications received (#)	Track	433	467	445
Graduate student yield rate (number of enrollees to the number of acceptances) (%)	60	54	59	63
BA/BS ACT	26	NA	NA	27.54
BA/BS GPA	3.60	NA	NA	3.46
MHA GRE	305	307	305	308
MHA GPA	3.25	3.42	3.45	3.43
MPH GRE	305	305	307	306
MPH GPA	3.25	3.52	3.44	3.46
MS GRE	305	310	311	308
MS GPA	3.25	3.51	3.51	3.52
PhD GRE	305	315	311	311
PhD GPA	3.33	3.63	3.55	3.67

NA=Measure not tracked due to change in outcome measure with implementation of new FY2016 strategic initiative plan; data not available for undergraduate program which began in FY2017

**4.3.g Assessment of the extent to which this criterion is met.**

This criterion is met.

***Strengths***

- Undergraduate student recruitment and admissions policies and procedures take advantage of substantial university investments in recruitment and admission.
- Tools are regularly customized to locate and select qualified individuals from an array of settings, ranging from excellent high school students to health professionals and public health work force.
- The college and its academic units have rigorous and defined admissions criteria in place at the graduate and undergraduate levels. The decentralized nature of graduate admissions allows each program to select the most quality applicants each year based on 1) performance against minimum quantitative admissions criteria, 2) how well an applicant’s educational and career goals match the available faculty resources and expertise in the programs, and 3) contributing to a diverse student body.
- The college’s graduate student yield rate has increased over the past three years.
- By all metrics, students who enroll meet or exceed collegiate targets for excellence and are capable of taking advantage of the school’s various learning activities as evidenced by routinely high matriculation rates.
- Current graduate and undergraduate students are more actively engaged in the recruitment process through their respective student ambassador programs.

### ***Weaknesses***

- Enrollment in the MPH program is down overall, as are the enrollment rates at many other schools of public health, potentially due to the increase in the number of MPH programs available to prospective students.
- The number of graduate student applications decreased from FY2016 to FY2017.
- The limited availability of scholarships and assistantships is a constraining factor in recruiting the most highly qualified students, especially for the students at the MS and MPH levels.
- There is some variability in enrollment volume across departmental programs suggesting opportunities for growth.

### ***Plans***

- Continue to make enhancements to the website to provide information to prospective students and highlight the strength of our professional and academic programs as well as faculty, staff, and students that are involved in innovative and impactful research.
- Continue to engage the undergraduate and graduate student ambassadors in recruitment activities.
- Continue to promote the Undergrad to Grad degree options, including with our own BA/BS students.
- Continue to work with the CPH's development director to identify scholarship funds to recruit and retain undergraduate and graduate students.

**4.4 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.

**4.4.a Description of the school's advising services for students in all degree programs, including sample materials such as student handbooks. Include an explanation of how faculty are selected for and oriented to their advising responsibilities.**

**Undergraduate:** First-year students directly admitted to the major are advised by CPH undergraduate program beginning at the time of summer orientation and through the awarding of their degree. The CPH currently has one full-time professional staff member in the position of academic advisor who is dedicated to advising undergraduate majors in the BA and BS in public health degree programs. There are plans to hire a second undergraduate advisor as enrollment in the undergraduate degree program increases. The undergraduate academic advisor regularly attends university-wide meetings related to academic advising, undergraduate programs and policies and academic integrity. All public health majors are required to have a conference with their advisor before registering for classes each semester in order to assess progress toward degree completion and to review plans of study. Students who declare intent to graduate with honors in the major are also assigned a faculty honors advisor and the undergraduate program director, who advises the student-faculty research mentor pair on honors related policies and procedures. The link to the student handbook can be found at: <https://www.public-health.uiowa.edu/student-handbook-undergraduate/>.

**Graduate:** Applicants to the CPH are asked to identify an area of interest and faculty advisors are assigned on the basis of shared interests (although a student may change advisors). Students meet with their advisors to discuss career aspirations and select course work to advance the student toward those goals. During the first semester of enrollment, students and advisors document a plan of study to assure that students account for all required courses, courses are taken in a systematic fashion and the student graduates in a desirable time frame with the appropriate number of credit hours. Information regarding principles and guidelines for student advising is communicated to faculty through faculty orientation, the Faculty Handbook (<https://www.public-health.uiowa.edu/faculty-handbook> in 6. under Teaching/Education/Student Affairs) and departmental faculty meetings.

Each department and program in the CPH employs an academic graduate program coordinator who is responsible for supporting the academic advising provided by faculty members. These individuals play a critical role within the CPH and are usually the first point of contact for graduate students. In each department and program, these individuals assemble and distribute student handbooks and maintain curriculum information and program expectations for all degree programs offered by the department. They maintain student files, have available copies of forms related to student academic affairs and have access to the UI's student data system for purposes of tracking course enrollment and student performance. In addition, they assist with registration and play a key role in recruiting and application counseling for prospective students.

And finally, as part of the CPH's new student orientation activities, departments and programs provide detailed information on expectations and plans of study. Each department and program has a student handbook with information on degree requirements, expectations regarding academic conduct and many other topics. Student handbooks are available on the collegiate website <https://www.public-health.uiowa.edu/student-handbooks/>.

**4.4.b Description of the school’s career counseling services for students in all degree programs. Include an explanation of efforts to tailor services to specific needs in the school’s student population.**

**Undergraduate:** The Pomerantz Career Center serves all undergraduate students at the UI, providing services focused on the areas of career advising, leadership and career-related academic courses, experiential education and campus recruiting.

In addition to the services provided by the Pomerantz Career Center, career development specific to public health students is provided by the CPH through a three-semester professional development seminar series (CPH:1050 College of Public Health Direct Admit Seminar; CPH:2050 Second Year Undergraduate Public Health Seminar and CPH:3050 Third Year Undergraduate Public Health Seminar) and career counseling is provided informally by our undergraduate academic advisor (i.e., advising meetings, advising website, and regular newsletter), faculty mentors, graduate students and alumni.

**Graduate:** While certain elements of career counseling and placement are the same across degree programs, some are dependent on the specific degree program and specialty areas. Common elements are the role of faculty members and networking opportunities. Through their experiences with faculty, students gain knowledge about professional associations and conferences they can attend to help them create a network to assist them in their search for employment. Faculty can place students in contact with their colleagues at other research and academic settings where there may be positions available. In addition, students are strongly encouraged to attend professional conferences and collegiate/departmental/program funding is offered to encourage their attendance.

The CPH also sponsors career workshops that are open to all students as part of the Spotlight Series. For example, during the past year career workshops were held on topics including:

- Career Readiness-Expectations of Topnotch Employers
- Conference Survival Tips
- Making an Effective Poster—Bring a poster with you if you need help!
- Conference Presenting: Lessons Learned
- Resume – Need a job? Then you need to perfect your resume!
- Applying for an Academic Position
- The Power of 10 – Shaping Perceptions of You with Business Communication

In Fall 2017, CPH received a grant from the John Deere foundation to help support the implementation of a professional development session using the Clifton StrengthsFinder assessment. All graduate students were given the opportunity to complete the StrengthsFinder assessment and more than 80 students took part in the assessment. The CPH then sponsored a session where staff from the UI Graduate College provided information to the students on how to interpret the results of the assessment and utilize the results when looking for employment and working in teams.

The MPH program has specific programming to support students as they prepare for their careers. The MPH program supports students to attend the American Public Health Association and the Iowa Governor’s Conference on Public Health. As part of the Iowa Governor’s Conference a

networking session is held for student attendees to meet individuals from state and local public health departments.

Students in academic degree programs have the opportunity to participate in research projects through graduate research assistantships in addition to their thesis or dissertation. Students participate in UI and regional and national scientific meetings in their field; often presenting at poster or oral sessions and networking with other academics. On campus, there is a student poster session during CPH Research Week (an annual event in the spring) where students present their research and compete for awards. In addition students may present their research at the James F. Jakobsen Graduate Conference. This annual event is co-sponsored by the UI Graduate Student Senate and UI Graduate College and provides a forum for oral and poster presentations. MPH students have the opportunity to present their practicum work during the Practicum Poster Sessions held each semester. Finally, graduate students have the opportunity to be teaching assistants or to provide guest lectures in classes.

Students in professional degree programs gain job-relevant experience through a number of mechanisms. Internships and practica provide students with the opportunity to work with practitioners in the field. Professional students attend regional and national meetings where they have an opportunity to present their work and network with others. Examples include the Iowa's Governor's Conference on Public Health (the College of Public Health is a planning partner and co-sponsor with Iowa Public Health Association and others), American Public Health Association and the American College of Healthcare Executives. Through professional development seminars students also gain exposure to practitioners who share their insights and experiences with students.

Besides collegiate career advising resources, students have access to UI-level resources. These include the UI Graduate College which has enhanced its professional development opportunities and graduate and postdoctoral career services in the past several years. More information can be found at: <https://www.grad.uiowa.edu/professional-development?portal=current-students> and <https://www.grad.uiowa.edu/career-success?portal=current-students>.

#### **4.4.c Information about student satisfaction with advising and career counseling services.**

New graduates are asked to complete an online survey that includes six questions regarding aspects of advising and career counseling services. Prior to AY2016 separate surveys were sent to MPH graduates and then graduates of MS, MHA and PhD programs. Because the survey response rate was significantly below 50%, in AY2016 the decision was made to send the same survey to all graduates regardless of degree program. In AY2017 the CPH also added an incentive that individuals completing the survey could be entered into a drawing to win a e-gift card (responses are still anonymous, at the end of the survey individuals interested in entering the drawing were taken to a separate survey link where they entered their contact information). These steps helped to increase the survey response rate to 60% in AY2017. The college will continue to work to increase its response rate.

The mean and standard deviations for each of the items is tabulated below. The responses indicate that although overall students, on average, indicate satisfaction with advising and mentoring provided by faculty and student services staff, work remains to be done to enhance career counseling and professional development for students. The CPH will continue to feature career readiness and professional development topics as part of its "Spotlight Series." Additionally, the

recently launched “Advancing Graduate Student Success” funding initiative will increase the number of graduate students able to present at national meetings, an activity that is highly valuable for professional development and career readiness.

**Table 4.4.c.1 CPH New Graduate Survey (AY2016) n = 67 (52% response rate); Average and Std. Dev.**

	1 = Very Dissatisfied 5 = Very satisfied
Mentoring provided by faculty	4.05 1.16
Assistance & guidance provided by your academic advisor.	3.90 1.18
Assistance & guidance provided by student services staff.	4.07 0.90
Overall satisfaction with career counseling.	3.38 1.26
Opportunities for professional development	3.95 0.96
Opportunities for “real life” projects and “hands on” experiences	4.02 1.02

**Table 4.4.c.2 CPH New Graduate Survey (AY2017) n = 76 (60% response rate); Average and Std. Dev.**

	1 = Very Dissatisfied 5 = Very satisfied
Mentoring provided by faculty	4.13 1.16
Assistance & guidance provided by your academic advisor.	4.31 1.03
Assistance & guidance provided by student services staff.	4.15 0.91
Overall satisfaction with career counseling.	3.53 1.14
Opportunities for professional development	3.80 1.03
Opportunities for “real life” projects and “hands on” experiences	4.09 0.97

**4.4.d Description of the procedures by which students may communicate their concerns to school officials, including information about how these procedures are publicized and about the aggregate number of complaints and/or student grievances submitted for each of the last three years.**

At the beginning of each course, students are informed of departmental and collegiate complaint procedures and services of the UI Office of the Ombudsperson. The policy reads, “Students who have a concern about a faculty action should first address the issue with the instructor, then the course supervisor (if there is one), and then the departmental DEO. Students may also contact the CPH Associate Dean for Education and Student Affairs. Another resource for students is the UI Office of the Ombudsperson. If a complaint cannot be resolved at the departmental and/or collegiate level, students may file a formal complaint utilizing the procedure specified in the Operations Manual (II-29.7; <https://opsmanual.uiowa.edu/community-policies/hearing-regulations-alleged-violations-regents-rules/initial-steps>). The UI Office of the Ombudsperson generates an annual report for the UI and meets with the CPH dean and CPH Executive Committee annually.

No formal grievances or complaints were filed by students during the past three years. However, several students brought grade appeals to department heads and/or the associate dean for

academic affairs which were addressed utilizing procedures outlined above from the UI Graduate College.

#### **4.4.e Assessment of the extent to which this criterion is met.**

This criterion is met.

##### ***Strengths***

- The academic advising system is well supported and highly accessible to students through dedicated professional undergraduate advisors and academic discipline-specific graduate program coordinators.
- Graduate program coordinators in each department support and ensure consistency of faculty advising.
- The College has significantly increased attention to career and placement counseling services and is providing workshops through the Spotlight Series.
- Post-graduate surveys show consistently positive opinions and reflect continuing improvement efforts in this area.

##### ***Weaknesses***

- Although it has increased during the past three years, the response rate to the graduate student satisfaction exit survey is still lower than the college would like.
- Satisfaction scores for career counseling and professional development indicate there is opportunity for improvement.
- While many opportunities exist for students to attain hands-on, career-relevant experiences, these valuable opportunities would benefit from more financial and systematic placement support.

##### ***Plans***

- Continue to provide professional development workshops for graduate students as part of the Spotlight Series. The college will partner with the CPH Student Association to identify topics of greatest interest to students.
- Continue to work with Alumni Advisory Council to support professional development opportunities for students.
- Refine student satisfaction surveys in accordance with the 2016 CEPH criteria.
- The college's Program Assessment and Evaluation Coordinator, will work with the associate dean for academic affairs and the undergraduate program director to develop ongoing evaluations of undergraduate student satisfaction and experiences.